

Important facts about
MEDICARE



THE FOUR PARTS OF MEDICARE

Medicare is health insurance for:

- People 65 or older
- People under age 65 who are disabled as determined by the Social Security Administration
- People of any age with End-Stage Renal Disease (ESRD); permanent kidney failure requiring dialysis or a kidney transplant

Medicare Part A (Hospital Insurance)

Medicare Part A helps pay inpatient care. This includes hospitals, rehabilitation hospitals, critical access hospitals and skilled nursing facilities (not custodial care or long term care). It also helps cover hospice and home health care when you meet conditions for coverage of these benefits.

Medicare Part B (Medical Insurance)

Medicare Part B helps cover medically necessary care like doctors' services and outpatient care. The program provides for 18 preventive services. These services include:

- Diabetes Screening Tests,
- Glaucoma Screening,
- Counseling to Prevent Tobacco use,
- Cancer Screenings,
- A one-time Welcome to Medicare Visit,
- An Annual Wellness Visit, and
- Flu shots.

Medicare Part B is optional.

NOTE: *You can still use your Indian Health Care Provider or can seek a non-Indian health care provider for medical care. Either way, your health care provider will bill Medicare for you.*

Medicare Part C (Medicare Advantage Plan)

Medicare Part C can be chosen through Medicare Advantage Plans, these plans are approved by Medicare and are run by private health insurance companies. The plans are part of the Medicare program and are sometimes referred to as MA Plan, Medicare Part C or HMO. You must have both Part A and Part B of Medicare to enroll in a MA Plan. You generally must receive all of your care from a MA Plan. Check with your Indian Health Care Provider to find out if a MA Plan is right for you.

Medicare Part D (Prescription Drug Coverage)

Medicare Prescription Drug Part D plans help cover the cost of prescription drugs. You will have to be enrolled in a Part D Prescription Drug Plan to get this coverage. These plans are approved by Medicare and are run by private health insurance companies. AI/ANs can continue to visit their Indian health care pharmacy and enroll in a Part D plan that works with their Indian health care provider. Your Indian Health Care Provider receives payment for your prescription drugs that your Part D plan covers.



MEDICARE PART A (HOSPITAL INSURANCE)



Covers:

- Inpatient care in a hospital
- Inpatient skilled nursing facility care
- Hospice care
- Home health care

Signing up for Part A

Some people automatically get Part A

- If you're already getting benefits from Social Security or the Railroad Retirement Board (RRB), you'll automatically get Part A starting the first day of the month you turn 65.
- If you're under 65 and disabled, you'll automatically get Part A after you get disability benefits from Social Security for 24 months or certain disability benefits from the RRB for 24 months.
- If you have Amyotrophic Lateral Sclerosis (ALS), also called Lou Gehrig's Disease, you'll get Part A automatically the month your disability benefits begin.

Some people need to sign up for Part A

If you're 65 or older and you aren't getting Social Security or RRB benefits (for instance, because you're still working), you won't get Part A automatically; you will need to sign up. People of any age diagnosed with End-Stage Renal Disease (ESRD) are eligible for Part A but must sign up.

Three ways to sign up

- Contact your Indian Health Care Provider for assistance on which documents you need to bring to enroll in Part B.
- Visit the Social Security office at www.socialsecurity.gov or call 1-800-772-1213. If you are deaf or hard of hearing, you may use the TTY number: 1-800-325-0778. *TTY stands for Text Telephone, a communication device for the deaf and hard of hearing.
- If you are a retired Railroad worker contact the Railroad Retirement Board (RRB) www.rrb.gov or by calling RRB at 1-877-772-5772 (toll free).

Will you have to pay any costs?

If you receive assistance through the Medicare Savings Program with your premiums, coinsurance, copayments and deductibles you may not pay any additional costs. If you do not qualify for the Medicare Savings Program and you go to a Medicare provider outside of the Indian health care system, you may be charged a deductible, coinsurance and copayments. Check with your Indian Health Care Provider.

What is the Medicare Savings Program?

The Medicare Savings Program is a program to help low income people with their Medicare premiums and, in some cases, their deductibles, coinsurance and copayments.

To sign up for this program:

- Contact your Indian Health Care provider for more information
- Contact your local state Medicaid office, or
- Visit www.medicare.gov/contacts to find your State's Medicaid program



MEDICARE PART B (MEDICAL INSURANCE)



Covers:

- Many preventive services, including screenings for diabetes, cancer, and cardiovascular disease
- Medically necessary doctors' services
- Outpatient care
- Some Home health services
- Some Diabetes supplies
- Clinical Lab & Diagnostic Tests
- Durable medical equipment
- Ambulance Services

Signing up for Part B

- If you're already getting benefits from Social Security or the Railroad Retirement Board (RRB), you'll automatically get Part B starting the first day of the month you turn 65.
- If you're under 65 and disabled, you'll automatically get Part B after you get disability benefits from Social Security for 24 months or certain disability benefits from the RRB for 24 months.
- If you have Amyotrophic Lateral Sclerosis, also called Lou Gehrig's Disease, you'll get Part B automatically the month your disability benefits begin.

Some people need to sign up for Part B

- If you're 65 or older and you aren't getting Social Security or RRB benefits yet (for instance, because you're still working), you won't get Part B automatically.
- People of any age diagnosed with End-Stage Renal Disease (ESRD) and who meet certain requirements are also eligible for Part B, but must sign up.

Three ways to sign up:

- Contact your Indian health care provider for assistance on which documents you need to bring to enroll in Part B.
- Visit the Social Security office at www.socialsecurity.gov or call 1-800-772-1213. If you are deaf or hard of hearing, you may use TTY number: 1-800-325-0778, or
- If you are a retired railroad worker contact the Railroad Retirement Board (RRB) www.rrb.gov or by calling RRB at 1-877-772-5772 (toll free).

Will you pay any other costs?

If you receive assistance through the Medicare Savings Program with your premiums, coinsurance, copayments and deductibles you also may not pay any additional costs. If you do not qualify for the Medicare Savings Program and you go to a Medicare provider outside of the Indian health care system, you may be charged a deductible, coinsurance and copayments. Check with your Indian health care provider.

What is the Medicare Savings Program?

The Medicare Savings Program is a program to help low income people with their Medicare premiums and, in some cases, their deductibles, coinsurance and copayments.

To sign up for this program:

- Contact your Indian Health Care provider for more information
- Contact your local state Medicaid office, or
- Visit www.medicare.gov/contacts to find your State's Medicaid program



WHAT IS MEDICARE PART C (ADVANTAGE PLAN)?



A Medicare Advantage Plan (like an HMO or PPO) is another way to get Medicare. Medicare Advantage Plans are health plan options that are approved by Medicare and run by private health insurance companies. They are part of the Medicare program and are sometimes referred to as Medicare Part C, MA Plan or HMO. You must have both Part A and Part B of Medicare to enroll.

NOTE: Contact your Indian health care provider before you enroll to make sure the Medicare Advantage Plan is right for you and works with your Indian health care provider.

What coverage does Medicare Advantage Plan provide?

The Medicare Advantage Plan coordinates your medical care and provides coverage for:

- Medicare Part A services (except hospice coverage)
- Medicare Part B services
- Usually includes Medicare Prescription Drug Coverage (Part D)
- It may offer extra coverage to you for extra cost for services not covered under Medicare Part A and Part B like vision, hearing, dental or health and wellness programs.

You can first sign up for a Medicare Advantage Plan:

- During the 7 month period that begins 3 months before the month you turn 65, includes the month you turn 65, and ends 3 months after the month you turn 65.
- If you have certain disabilities, you can sign up during the 7 month period that begins 3 months before your 25th month of disability benefits and ends 3 months after your 25th month of disability.
- Each year there is an Open Enrollment Period that runs from October 15 through December 7 for people with Medicare when you can make a change to your health and prescription drug coverage. Your new plan will be effective on January 1.
- You can also switch from an MA Plan to Original Medicare and select a Part D plan from January 1 through February 14

NOTE: Contact your Indian Health Care Provider before you enroll to make sure the Medicare Advantage Plan is right for you and works with your Indian health care provider.

Are you required to enroll in a Medicare Advantage Plan?

No, enrolling in the Medicare Advantage Plan is your choice.

Who can join?

To join a Medicare Advantage Plan you must:

- Be enrolled in both Part A (Hospital Insurance) and Part B (Medical Insurance) of the Medicare Program and,
- Live in the Medicare Advantage Plan service area.

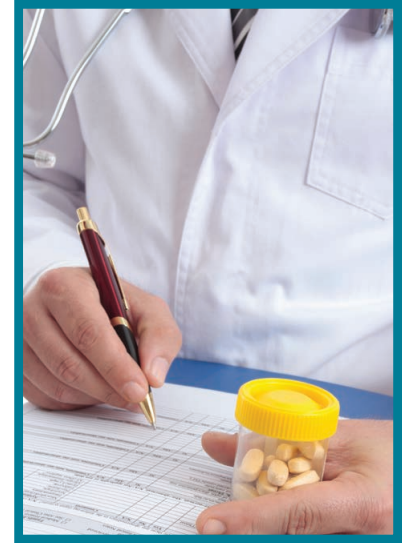
NOTE: Your health care is coordinated by your Medicare Advantage Plan. You may be required to use the Medicare Advantage Plan for all of your health care needs unless you are out of your plan's service area and you need urgent or emergency care.

How much will a Medicare Advantage Plan (Part C) cost me?

Medicare Advantage Plans vary in cost. You usually pay a monthly MA Plan premium, deductible, copayments and coinsurance for covered services.



MEDICARE PRESCRIPTION DRUG (PART D)



What is Medicare Prescription Drug Coverage? (Part D)

Part D coverage allows Medicare beneficiaries to get their prescription drugs through various Prescription drug plans to help cover the cost of prescription drugs.

There are 2 ways to get Medicare Prescription Drug Coverage (Part D):

1. Medicare Prescription Drug Plans:
 - Many Indian Health Care Providers participate in the Medicare Prescription Drug Program (Part D). Contact your Indian health care provider about how Part D works with the Indian health care system. You will receive important information to help you decide which Part D plan to choose.
2. Medicare Advantage Plans (like an HMO or PPO) or other Medicare health plans that offer Medicare prescription drug coverage. Contact your Indian Health Care Provider for additional information.

You can sign up for Medicare Prescription Drug Coverage:

- During the 7 month period that begins 3 months before the month you turn 65, includes the month you turn 65, and ends 3 months after the month you turn 65.
- If you have certain disabilities, you can sign up during the 7 month period that begins 3 months before your 25th month of disability benefits and ends 3 months after your 25th month of disability.
- There are other special enrollments. Check with your Indian Health Provider.

Why it is important to enroll in an IHS Medicare Prescription Drug Coverage Plan (Part D) when you already get your drugs free at IHS?

By enrolling in a Part D Plan that works with your Indian Health Care Provider, the Part D plan helps cover prescriptions drugs you get from your Indian provider. Your Indian provider may be the Indian Health Service, a Tribal Health Program or Urban Indian Health Program (I/T/U). Payments made to the I/T/U may help your Indian Health Care Provider cover costs for others in your community.

How much does Medicare Prescription Drug Coverage (Part D) cost?

- Premiums, deductibles, coinsurance, and copayments vary depending upon the drug plan you pick.

You may automatically qualify for extra help with your prescription drug costs, if you have Medicare and meet ONE of the following:

- You have full Medicaid coverage.
- You get help from your state Medicaid program paying your Part B premiums (in a Medicare Savings Program).
- You get Supplemental Security Income (SSI) benefits.





To learn about the Extra Help program or to find out if you're eligible:

- Contact your I/T/U provider for further information.
- Visit www.socialsecurity.gov/i1020.
- Call Social Security at 1-800-772-1213. TTY users call 1-800-325-0778.
- Visit your local State Medicaid office.

What is the Medicare Prescription Drug (Part D) coverage gap?

Most Medicare drug plans have a coverage gap (also called the donut hole). This means that after you and your drug plan have spent a certain amount of money for your covered drugs, you have to pay the full costs of your prescription drugs up to a certain limit.

You DON'T need to worry about a coverage gap if:

- You have an Indian Health program as your Medicare Prescription Drug Coverage (Part D).
- You get "Extra Help" paying for your prescription drug costs.



Not sure what to do next?

To learn more about help available, contact your Indian Health Care Provider:

Talk to someone who can help you find the answers, like your local:

- Indian Health Care Provider,
- Community Health Representative (CHR),
- Doctor or field Nurse,
- Social services office, or
- 1-800-Medicare (1-800-633-4227) contact, or
- Social Security Office.

Visit:

- www.cms.gov/Outreach-and-Education/American-Indian-Alaska-Native/AIAN/index.html
- www.medicare.gov/find-a-plan
- Additional program details can be found in the *Medicare and You Handbook* www.medicare.gov

