



Your WHA Medicare Handbook

Western Health
Advantage 

A better health plan.



Whether you're approaching retirement or nearing age 65...

Welcome to Medicare.

Find out how you can make the most of it.

You've paid into Medicare for years, and now it's almost time to start enjoying the rewards! Before you know it, you'll be eligible for all kinds of money-saving benefits at no cost. These include:

- Annual wellness visit
- Cardiovascular screening every five years
- Annual mammogram and flu shot
- Screenings for cervical, prostate and colorectal cancers, diabetes and more

Choosing the right Medicare plan can have a huge impact on your financial and medical future, so it's important to choose the right plan. This guide was prepared for you by Western Health Advantage Medicare experts to help you be ready when it's time to enroll.

Even if you're not retiring at age 65, there are still things you'll need to do.

This guide will walk you through your options and help you find out if a Medicare plan gives you more benefits and value than your employer coverage. **See page 6 for details.**

What is Medicare?

Medicare is a general term to describe the federal government's health insurance program designed for people 65 and older, or select individuals who have been on Social Security disability for at least two years.

But Medicare has grown, and there are now several types of Medicare plans that offer different types of coverage.



Original Medicare (Parts A and B)

Provided by the federal government, Original Medicare is made up of two parts:

- **Medicare Part A** covers hospital stays. There's no monthly premium, but you might have to pay a deductible.
- **Medicare Part B** covers doctor visits and urgent care visits. There is a monthly premium, based on income, that is usually deducted directly from your Social Security check. You may still have to pay for some services, as well as a deductible.

- *Original Medicare does not include prescription drug coverage*
- *Many people find that Original Medicare doesn't offer enough coverage*
- *Even with Original Medicare, a major illness or injury could wind up costing you thousands of dollars*

Medicare Advantage Plans (Part C)

Offered by private health insurance companies (like Western Health Advantage).

- Includes all the benefits of Original Medicare, plus more
- Many Medicare Advantage plans include prescription drug coverage
- May also include money-saving extras, like vision and hearing benefits, and over-the-counter drug allowance
- Monthly premiums vary by plan and coverage, but there are some plans available for \$0/month (plus your monthly Part B premium)

- *You must be enrolled in Original Medicare before you can sign up for a Medicare Advantage plan*
- *It's important to consider the total out-of-pocket costs (premium, deductibles, copays, etc.) when comparing plans.*

Prescription Drug Plans (Part D)

Offered by private health insurance companies and focus exclusively on prescription drug coverage.

- Covers many commonly used brand-name and generic drugs
- Copays can vary by plan and prescriptions
- You pay a monthly premium

- *Available as a stand-alone plan*
- *Prescription drug coverage may be included in some Medicare Advantage plans*

Medicare Supplement Plans

Offered by private health insurance companies, Supplement plans are also called Medigap plans because they help cover the costs or "gaps" that Original Medicare does not.

- Covers the same benefits as Original Medicare (Parts A and B)
- Original Medicare covers 80 percent of covered doctor and hospital visits, and Medicare Supplement plans cover the extra 20 percent, plus the deductible covers the extra 20 percent (not including the Part B deductible)
- You pay a monthly premium – in addition to your monthly Part B premium

- *Does not include prescription drug coverage*
- *Typically does not cover same level of extra benefits as Medicare Advantage plans (such as hearing and vision coverage)*

Questions about which plan is right for you?

Our experts are here to help.

Call 888-841-2494 (TTY: 711)

Mon. – Fri., 8 a.m. – 6 p.m.

Find the type of Medicare plan that is right for you

There are lots of things to consider, but here are five factors – that will help you make the right decision.

	Original Medicare	Medicare Advantage	Medicare Supplement	Prescription Drug Plan
Medical expenses				
<ul style="list-style-type: none"> Do you have a medical condition that requires extensive care and/or lab work? Do you wear eyeglasses or hearing aids? Are you expecting a hospital stay? 	May have to pay hundreds or even thousands of out-of-pocket costs.	Offers the most comprehensive coverage. Could include vision and hearing.	Pays out-of-pocket expenses that Original Medicare doesn't cover.	Only covers prescription drug costs.
Prescription drugs				
<ul style="list-style-type: none"> Do you currently take prescription drugs? Do you expect to need prescription drugs in the near future? 	Not covered.	Plans often include prescription drug coverage.	Not covered.	N/A
Travel plans				
<ul style="list-style-type: none"> Do you regularly travel away from home? Do you plan on traveling in the U.S.? Do you plan on traveling outside of the U.S.? 	Does NOT cover expenses incurred OUTSIDE the U.S.	Covers hospital and urgent care coverage outside the U.S. Check plan network for coverage within the U.S.	May offer hospital and urgent care coverage outside the U.S. Check plan network for coverage within the U.S.	N/A
Dental and vision coverage				
<ul style="list-style-type: none"> Do you wear glasses or have vision concerns? Do you anticipate dental care beyond preventive cleaning? 	Does NOT cover routine dental, vision and other extra benefits.	Most plans cover routine dental and vision care, and may include extra coverage.	Does NOT cover routine dental, vision and other extra benefits.	N/A
Budget priority				
<p>What is more important to you?</p> <ul style="list-style-type: none"> Lower monthly premiums Lower total out-of-pocket costs 	Low premiums but could have high out-of-pocket costs.	Monthly premiums vary, but total out-of-pocket costs could be lower.	Higher premiums than Medicare Advantage plans but lower out-of-pocket costs.	Low monthly premium and the possibility for financial aid based on income.

Countdown to Medicare

Use this timeline to make sure you don't miss important Medicare deadlines.



- Learn about the different types of Medicare plans and what you need to do.
- If you plan on working past 65, talk to your employer about your options.

- Explore different types of Medicare plans.
- See **Medicare shopping tips** on page 7.
- Attend a WHA Online Seminar or call one of our Medicare experts.



and 9 months

- Enroll early to ensure you start enjoying your new benefits in the month you turn 65.
- You can start enrolling in Medicare as early as three months before your 65th birthday.

- See **How to enroll in Medicare** on page 8.



- Start enjoying your Medicare benefits if you've already enrolled.
- If you haven't enrolled yet, you should do so as soon as possible.



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- It's deadline time!** The Initial Medicare Enrollment Period ends at the end of this month.
- You should at least enroll in Part B to avoid penalties.



and 3 months

- Keep track of your health care expenses and changes in your health care needs.
- If you're not happy with your Medicare plan choice, you can change it during the Medicare Annual Enrollment Period at the end of every year.

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Working past 65?

No matter what road you're taking, here's what you need to know.

Once you turn 65, you have access to more health care options, whether you continue working or not. Best of all, these options could wind up saving you money! To make sure you don't miss out, here are some things you'll need to do, depending on your situation.

Option 1: I want to keep my employer coverage

- Enroll in Part A as soon as you're eligible (starting 3 months before your 65th birthday)
- If your employer has more than 20 employees, you may need to enroll in Part B to avoid penalties
- Ask your employer if their plan's prescription drug coverage is as good as a Medicare plan. If not, enroll in a Part D plan to avoid penalties.
- Compare the total of your new monthly premiums and coverage (employer plan plus Part D plan, if applicable) to a Medicare Advantage plan to see which offers the better value

TIP: The experts at Western Health Advantage will walk you through your options at no obligation.

Option 2: I DO NOT want to keep my employer coverage

- Talk to your employer about options or plans available to employees aged 65 and older
- Enroll in Parts A and B when you are eligible (starting 3 months before your 65th birthday)
- Decide if you want to enroll in a Medicare Advantage plan or Medicare Supplement plan
- If you have prescriptions, sign up for a Part D plan (if you enroll in a Medicare Advantage plan, prescription drug coverage may be included)

TIP: Visit [medicare.westernhealth.com](https://www.medicare.westernhealth.com) to see a list of covered drugs, in-network providers and pharmacies.

Option 3: I am on my spouse's employer coverage

- Follow the instructions under Option 1

Option 4: My current health insurance was purchased through the marketplace

- You can choose to keep your coverage, but you'll lose any tax credits or savings you're currently receiving. Fortunately, enrolling in a Medicare Advantage plan could save you a lot of money.

Not sure what to do?

Talk to your company's human resources department or call the experts at WHA.

Call 888-841-2494 (TTY: 711)
Mon. – Fri., 8 a.m. – 6 p.m.

Medicare shopping tips



Make a list of your current doctors and medications

Write down all of your current doctors, hospitals and other services you regularly use. Then write down the names of all of your prescription drugs and dosage amounts. You can use this list as you compare plans to make sure your doctors are covered and to find out what your copays would be.



Think beyond the premium

While your monthly premium is important, you should also look at deductibles and copays and other possible expenses to determine your possible out-of-pocket expenses.



Check for extra coverage

This includes things like hearing, vision and dental coverage.



Look for other money-saving extras

Some plans include allowances for over-the-counter medications, free fitness services and more.



Don't take service for granted

Is the coverage from a large, faceless nationwide insurer or a local provider that knows the needs of the area (and will take the time to get to know you personally)?

Find out if you're eligible for financial assistance!

If you meet specific income and resource requirements, there are programs available to help you pay for health coverage and prescription drug costs.

To see if you qualify, contact the Medicare officials at 1-800-633-4227 (TTY/TDD: 1-877-486-2048).

How to enroll in Medicare

Beginning three months before you turn 65, you can enroll in Medicare.

Here's what you need to do:

To enroll in Original Medicare:

If you're going to collect Social Security retirement benefits when you turn 65, you'll probably be automatically enrolled in Part A, possibly in Part B.

- To find out if you're automatically enrolled (or to enroll), call **1-800-772-1213 (TTY/TDD: 1-800-325-0778)** Mon. – Fri., 7 a.m. – 7 p.m.
- To sign up online, visit **SocialSecurity.gov**

To enroll in a plan beyond Original Medicare:

Contact a private health insurance company, such as **Western Health Advantage**.



Not sure which plan to choose?

Schedule a virtual match-up with one of our local Medicare experts.

Call 888-841-2494 (TTY: 711)

Mon. – Fri., 8 a.m. – 6 p.m.



Medicare terms to know

Here are some common words used to describe Medicare benefits:

Premium

The monthly amount you pay for your Medicare plan

Out-of-pocket costs

What you pay for health care services, in addition to your monthly premium

Copay

The fixed amount you pay for certain services

Coinsurance

The fixed percentage that you pay for health care services

Deductible

The amount you pay before your insurance coverage kicks in

Formulary

The list of prescription drugs covered by your Medicare plan

Provider network

The doctors, hospitals and other service providers that are contracted with a particular Medicare health plan. Some insurance plans will pay for out-of-network services, but at a higher share of cost. Other plans will not pay for any costs incurred outside of the provider network.

Prescription drug tiers

The different levels of prescription drug coverage. Different prescription drugs are placed at different tiers, which represent varying levels of cost or copays.

Get answers to your Medicare questions from a Medicare expert.

Western Health Advantage is committed to providing access to quality, localized care. We have been providing Medicare solutions to your community for over two decades. Our Medicare experts would be happy to answer your questions in a no-pressure, no-obligation environment.



SCHEDULE A FREE CONSULTATION.

To meet with one of our experts for a no-obligation online or in-person meeting, call **888-841-2494 (TTY: 711)**, Mon. – Fri., 8 a.m. – 6 p.m.



ATTEND A FREE ONLINE SEMINAR.

Find dates and locations at **choosewha.com/Register**





2349 Gateway Oaks Drive, Ste. 100
Sacramento, CA 95833

888-841-2494 (TTY: 711) | [choosewha.com/Advantage](https://www.choosewha.com/Advantage)

You must continue to pay your Medicare Part B premium.

Western Health Advantage is an HMO plan with a Medicare contract. Western Health Advantage complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

For accommodations of persons with special needs at meetings, please call 888-992-7494 (TTY 711).