

SELECTING THE BEST MEDICARE OPTION FOR YOU

When selecting the best Medicare option for you, take time to make an informed decision. Consider factors such as the plan's costs, your medical needs, your prescribed drugs, and coverage for your providers. For Medicare Advantage Plans, be aware of the out-of-pocket costs, network restrictions, and prescription drug coverage. Utilize resources like the [Medicare.gov Plan Compare tool](#) to compare different plans and their coverage in your area.

Here are some tips to consider when looking at a plan and deciding what is right for you:

- Make sure you understand the costs of the plan, including premiums, deductibles, and other out-of-pocket costs.
- Ensure that the plan covers the specific services you need. While all Medicare plans cover services provided by Original Medicare, some plans such as a Medicare Advantage Plan may offer additional benefits that you may need.
- Verify that your chosen plan is accepted by your current providers and/or facilities. If you choose Original Medicare, you can go to any provider or facility that accepts Medicare. However, if you choose an Advantage plan, you will have a network of providers to choose from. Networks consist of providers who have contracted with your plan to provide services. Sometimes, you may also have out-of-network benefits that allow you to receive services from a provider or facility not contracted with your plan, but it will likely cost you more than staying in-network.
- Check the plan's drug formulary to see if it covers your current prescriptions. Drug formularies can vary by plan, but all plans must offer a standard level of coverage set by Medicare.
- Take the necessary time to choose your Medicare plan and understand the available options. Understanding which plan fits your health needs and the associated costs is important when making your decision.

Considerations for Medicare Advantage Plans

Medicare Advantage out-of-pocket costs—including your monthly premium—vary. Advantage Plans place a limit on the amount you must pay each year. Once you reach this limit, in-network services will be covered completely (100%). Your out-of-pocket costs may be lower with an Advantage Plan compared to Original Medicare. The type of Advantage plan you choose can also affect how you get healthcare. You may need referrals to see specialists, or you may need to use specific providers or facilities that are part of the plan's network.

Most, but not all Medicare Advantage Plans include prescription drug coverage. If you are enrolled in an Advantage Plan without prescription drug coverage, you can enroll in a separate Part D Plan. **Be aware, if you enroll in a separate Part D Plan while you have prescription drug coverage through your Advantage plan, you will be disenrolled and placed back into Original Medicare.**

If you frequently travel or live in different locations throughout the year, you should carefully consider the potential coverage limitations of a Medicare Advantage plan before enrolling. These plans have a more limited network of providers than Original Medicare, so you may not be able to get the care you need if you are outside of your plan's service area. If you do need to see a doctor

Check the Boxes for Features That Matter Most to You

ORIGINAL MEDICARE	FEATURES	MEDICARE ADVANTAGE
No <input type="checkbox"/>	Require Pre-approval for Services?	<input type="checkbox"/> Yes
Most providers accept Medicare across the US <input type="checkbox"/>	Participating Providers	<input type="checkbox"/> Have a smaller network of providers
No out-of-pocket cap <input type="checkbox"/>	Limits on Costs	<input type="checkbox"/> Has a maximum out-of-pocket cap which may vary depending on the plan, county, and year
No coverage for benefits like eye exams, most dental care, and hearing aids <input type="checkbox"/>	Extra Benefits	<input type="checkbox"/> May offer extra benefits like vision, hearing, and dental services

Expected Premiums and OOP Costs

Total premiums for Original Medicare and Medicare Advantage plans can be very similar. If a plan's monthly premiums are low, its deductible or copayments may be higher. Out-of-pocket costs can vary considerably across plans.

while traveling, you may have to pay more out of pocket.

Comparing Plans

To find what plan may be best for you, you can compare different Medicare plans and

the coverage they offer in your area. You can do this using the [Medicare.gov Plan Compare tool](#). This is a great tool that lets you search for plans, check the providers they include, and see the list of drugs they cover. You can also use the chart below to compare options.

MEDICARE PARTS AND COVERAGE

	MEDICARE PART A	MEDICARE PART B	MEDICARE PART C Advantage Plan	MEDICARE PART D Must Have Part A OR B to Enroll	MEDIGAP Must Have Part A AND B to Enroll
Hospital Stays	✓	✗	✓	✗	✗
Home Healthcare	✓	✗	✓	✗	✗
Hospice Care	✓	✗	✓	✗	✗
Outpatient Care	✗	✓	✓	✗	✗
Doctor's Visits & Tests	✗	✓	✓	✗	✗
Mental Healthcare	✗	✓	✓	✗	✗
Medical Equipment & Supplies	✗	✓	✓	✗	✗
Vision, Hearing & Dental	✗	✗	✓	✗	✗
Transportation	✗	✗	✓	✗	✗
Over-the-Counter Drugs	✗	✗	✓	✗	✗
Health & Wellness Services	✗	✗	✓	✗	✗
Prescription Drug	✗	✗	varies	✓	✗
Copayment & Deductible	✗	✗	✗	✗	✓