NORTH CAROLINA SENIOR CITIZENS ASSOCIATION

YOUR GUIDE TO MEDICARE

What You Don’t Know Could Hurt You.

Medicare Helpline 1-800-290-7535 • www.Turning65NC.com
By Federal Law, Medicare Supplement Insurance coverage for Plan F and Plan G is exactly the SAME for all companies! However, the PREMIUM rates vary widely from company to company.

Plan F and Plan G Are the Two Most Popular Medicare Supplement Plans

The ONLY difference between Plan F and Plan G is that Plan F pays the $147 Medicare Part B calendar-year deductible while Plan G does not. Compare rates and save.

The Freedom You Want

With Original Medicare and Plan F or Plan G, you have the right to choose:
- Any doctor or specialist that accepts Medicare patients
- Any hospital in the USA
- No networks to worry about
- No doctor referral needed to see a specialist
- No prior approval required

Why Is Plan G a Better Choice Than Plan F?

Again, the only difference in coverage between Plan F and Plan G is that Plan F pays the $147 Medicare Part B calendar-year deductible while Plan G does not. Understanding this difference is the first step to comparing these two plans. Second, consider the difference in the premium price. With most companies, Plan G is less expensive than Plan F. Since there is only one difference in coverage, you can easily do the math to see how much you can save in premiums by choosing Plan G over Plan F. Third, Plan G has fewer guaranteed issue situations compared to Plan F; therefore, Plan G premium rates should be more stable. Compare and see which plan makes the most sense for you. Remember: by federal law, Medicare Supplement Insurance coverage for Plans F and G is exactly the same from all insurance providers.

The Savings You Need

With Original Medicare and Plan F or Plan G, 100% of all Medicare-eligible charges are covered.*
- You pay $0 when you go to a primary care physician or to a specialist
- You pay $0 when you go to the hospital and need inpatient services
- You pay $0 when you go to the hospital and need outpatient services
- You pay $0 for preventive care services
- You pay $0 when you go to a skilled nursing facility
- You pay $0 for Medicare deductibles and copayments
- You pay $0 for any Medicare-eligible excess charges
- You pay $0 for any additional Medicare-eligible medical services

Plan G Is a Better Value!

Depending on your age and gender, you could save $300, $600, or even $1,000 a year by choosing Plan G over Plan F.

Compare Medicare Supplement Plan F and Plan G Premium Rates
(see charts on reverse side)

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North Carolina Senior Citizens Association

Building A Better Quality of Life for Senior Adults in North Carolina since 1977.

The North Carolina Senior Citizens Association (NCSCA) is a nonprofit association chartered by the state of North Carolina in 1977. The information contained herein is to be used for general information purposes only. Nothing contained herein constitutes an application for insurance with any specific insurance company. Any rates shown are provided as a public service and not intended as an endorsement for any particular company. Final rates quoted can only be confirmed by a licensed agent and approved by the appropriate insurance company. Insurance company names and logos are presented to represent a broad overview of some Medicare Supplement companies and are not an endorsement of any specific company. Royalty fees are paid to NCSCA for the use of its intellectual property from various companies. These fees are used for the general purposes of NCSCA. NCSCA Medicare Advisors are licensed agents and can provide complete information on Medicare. Not connected with or endorsed by the United States government or the federal Medicare program.

*With Original Medicare and Plan F or Plan G, 100% of all Medicare-eligible expenses are covered. Plan G pays the exact same amount as Plan F except that Plan G does not cover the $147 Medicare Part B calendar-year deductible (see your 2014 "Medicare and You" booklet for details). The rates above for companies #1 and #5 include a household premium discount for North Carolina senior citizens.
Do you know the difference between Original Medicare, a Medicare Advantage Plan and a Medicare Supplement Plan?

What is Original Medicare?
For more than 40 years, Original Medicare has been a stable program for millions of Americans. Original Medicare is coverage managed by the federal government that helps with many of your healthcare services. If you haven’t signed up for Original Medicare yet, do it NOW. If you wait too long, Medicare could impose a penalty. Original Medicare covers many medical expenses, but it won’t cover everything. Consequently, Medicare Supplement insurance plans have played a significant role alongside Original Medicare. Medicare Supplement Plans pay for all Medicare-eligible expenses not covered by Original Medicare. That’s why many Medicare beneficiaries purchase a Medicare Supplement to pay for the eligible medical expenses not covered by Original Medicare.

What is a Medicare Advantage Plan?
A Medicare Advantage Plan is completely different from a Medicare Supplement. If you enroll in a Medicare Advantage Plan, you WILL NOT be enrolled in Original Medicare. Medicare Advantage Plans are NOT managed by the federal government. They are a type of Medicare health plan managed by private insurance companies that contract with Medicare to provide you with Part A and Part B benefits. Medicare Advantage Plans include health maintenance organizations, preferred provider organizations, and private fee-for-services plans. Medicare Advantage Plans can charge different out-of-pocket costs and have different rules for providing services. You may need a referral to see a specialist, or be referred to a doctor or hospital only in their network. These rules can change each year.

What is a Medicare Supplement Plan?
A Medicare Supplement Plan works hand-in-hand with Original Medicare to cover the Medicare-eligible charges not covered by Medicare. They are simple to understand, affordable, offer nationwide coverage and allow policyholders to keep their healthcare providers. In most cases, you can go to any doctor, specialist or hospital that’s enrolled in Medicare in the USA. There are no doctor networks to worry about, no prior approvals required, and no doctor referrals needed to see a specialist. Plan F and Plan G are the two most popular Medicare Supplement Plans. Insurance companies are required by law to offer the exact same coverage for Medicare Supplement Plan F and Plan G.

Things to know About Medicare Advantage Plans
- If you enroll in a Medicare Advantage Plan, you will NOT be enrolled in Original Medicare and you must use providers who accept the carrier’s Medicare Advantage Plan.
- If you go to a doctor, hospital or supplier that doesn’t belong to the Medicare Advantage Plan’s network, your services may not be covered or your costs may be higher.
- There are numerous doctors and hospitals that will NOT accept Medicare Advantage Plans.
- Doctors and hospitals can join or leave a plan’s network anytime during the year.
- You will not be able to use your red, white and blue Medicare card when you go to the doctor, specialist, or hospital.
Some health insurance companies are misleading seniors into buying Medicare Advantage plans that are not accepted by many North Carolina doctors and hospitals, state insurance officials warned.

Aggressive agents are giving bad financial advice to many Medicare beneficiaries, according to Judy Gray, outreach coordinator for the Seniors’ Health Insurance Information Program (SHIIP). Gray’s in-laws were among recent victims.

Tom and Carolyn Gray of Hurdle Mills, near Roxboro, signed up for a Medicare Advantage plan in mid-January, only days after Tom Gray had been diagnosed with advanced pancreatic cancer, Judy Gray said. They said an agent promised that their Medicare coverage would not change, but that they would get additional benefits for free.

Tom Gray died about a week after he and his wife signed the papers. But before that, they had called their daughter-in-law, who realized they had enrolled in a plan their doctor didn’t accept. She contacted the company and canceled the plan. “Even when I talked with the agent, he was very argumentative,” Judy Gray said. “He said, ‘They can go anywhere they want to,’ And I said, ‘No sir, they cannot.’

There are numerous doctors and hospitals in our state that will not touch these plans,” she said.

Medicare Advantage is a variation on traditional Medicare coverage that allows private companies to cover doctor, hospital and often prescription drug bills.

HOW TO PROTECT YOURSELF

Insurance agents cannot come to your home without permission. If they call you to schedule an appointment, make sure you get the agent’s name, the company name and a phone number. Call back to verify the person is who he says he is. If you have any doubts, the Seniors’ Health Insurance Information Program can tell you if that person is a licensed agent. Do not be pressured into making quick decisions. SHIIP counselors are trained to help with health insurance questions. They can be reached at: 1-800-443-9354.

SHIIP EXPLAINS MEDICARE ADVANTAGE PLANS

The SHIIP Division of the Department of Insurance has received an increased number of calls from seniors across the state who have enrolled in a Medicare Advantage plan without fully understanding the impact of their decision. These plans are available in all 100 counties in the state; however, Medicare Advantage plans are not the best fit for some beneficiaries because not every plan is accepted everywhere,
Medicare Advantage plans are federally approved plans that are offered to seniors and other Medicare beneficiaries by private companies. Often they offer additional coverage options that are not typically included in Original Medicare (i.e., vision, hearing, prescription drug coverage). These plans offer health care coverage and allow seniors to seek care from any Medicare-approved doctor and/or hospital that is willing to give them care, and that accepts the terms of the plan.

While they are a good choice for some Medicare beneficiaries, they may not be the right choice for you. It is important that you call all of your health care providers (doctors, hospitals, therapists, etc.) to see if they accept the Medicare Advantage plan you are thinking about joining.

To enroll in a Medicare Advantage plan you must live in the county where it is offered, and while Medicare plans do allow you to receive services outside your service area, these services may come at a higher cost to you. Medicare Advantage plans can charge a monthly premium amount above the Medicare Part B premium, and they can charge deductible and coinsurance amounts that differ from those under the Original Medicare plan. These amounts are paid out of your pocket.

SHIIP has received numerous complaints from seniors saying they were misled about joining a Medicare Advantage plan. If you find that you have mistakenly enrolled in a Medicare Advantage plan, you may be able to disenroll from the plan. However, there may be limitations on when you can disenroll. You can contact SHIIP directly to help you navigate the disenrollment process, write the company and request to be disenrolled or call the Centers for Medicare and Medicaid Service at 1-800-633-4227 and disenroll by phone. Regardless of which option you choose, keep a record of the case number, when you called or wrote, whom you spoke to and what you found out.

For any questions about Medicare Advantage plans, call SHIIP at 1-800-443-9354 or go online at www.ncshiip.com

IMPORTANT: If you decide to join a Medicare Advantage plan instead of Original Medicare, you will continue to pay the Medicare Part B premium. It is important to realize that once you have enrolled in a Medicare Advantage option, the coverage of services provided under Medicare Parts A and B are filed through the selected Medicare Advantage plan instead of Original Medicare. This means you no longer are under the Original Medicare plan and that you must follow the rules of the Medicare Advantage plan you have joined.

though that is how they are often presented by agents.
The North Carolina Senior Citizens Association will help you find the lowest cost Medicare Prescription Drug Plan that will meet your needs. The following questionnaire will provide the NCSCA staff with the necessary information to prepare a report for your consideration.

Complete this form along with your Official Medicare Supplement Application and return in the enclosed postage-paid envelope to the North Carolina Senior Citizens Association.

Please provide us with your contact information:

Name: ________________________________________________________ Date of Birth: ______________________

Address: ______________________________________________________________________________________

City: _____________________________________________ State: ______________ Zip: _____________________

County: ____________________ Home Phone: (_____) _________________ Cell Phone: (_____) __________________

Email: ________________________________________________________________________________________

Do you live in North Carolina year round?  ❑ Yes  ❑ No

What is YOUR Medicare claim number?

_____________________________________________________

What is YOUR effective date for Medicare Part A?

_____________________________________________________

What is YOUR effective date for Medicare Part B?

_____________________________________________________

Do you currently have insurance coverage for prescriptions?  ❑ Yes  ❑ No

❑ Federal Employee Health Benefit Plan
❑ NC State Employee Health Plan
❑ TriCare Coverage
❑ VA Coverage

Prescription Drug Helpline: 1-800-323-6525 ext. 23
### Name of Drug | Strength | Daily Dosage
--- | --- | ---
Example: Lipitor | Example: 10 mg. | Example: Twice Daily

I prefer to have my prescriptions filled at the following pharmacies:

**First Choice**
- Pharmacy Name: ______________________________
- Address: ____________________________________
- City: _______________________________________
- State:_____________ Zip: ______________________

**Second Choice**
- Pharmacy Name: ______________________________
- Address: ____________________________________
- City: _______________________________________
- State:_____________ Zip: ______________________

Do you prefer a mail order pharmacy?  ❑ Yes  ❑ No

For Office Use ONLY
- Drug List ID #:_______________________________
- Password:___________________________________

Prescription Drug Helpline: 1-800-323-6525 ext. 23
## 2015 NORTH CAROLINA PRESCRIPTION DRUG PLANS

The North Carolina Senior Citizens Association (NCSCA) will help you find the lowest Prescription Drug Plan that will meet your particular needs.

The chart below has the basic information about Medicare Prescription Drug Plans available in North Carolina. Each company that has a contract with Medicare can offer one or more plans.

### PLAN NAME

<table>
<thead>
<tr>
<th>PLAN NAME</th>
<th>Plan Premium</th>
<th>Annual Deductible</th>
<th>Coverage During Gap/Donut Hole</th>
<th>Plan ID</th>
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<td>Aetna • 1-855-338-7030 • <a href="http://www.aetnamedicare.com">www.aetnamedicare.com</a> (S5810)</td>
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<td>$22.40</td>
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<td>Cigna-HealthSpring Rx • 1-800-735-1459 • <a href="http://www.cignahealthspring.com">www.cignahealthspring.com</a> (S5617)</td>
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<td>Express Scripts Medicare • 1-866-477-5704 • <a href="http://www.Express-ScriptsMedicare.com">www.Express-ScriptsMedicare.com</a> (S5660)</td>
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<td>First Health Part D • 1-855-893-4696 • <a href="http://www.FirstHealthPartD.com">www.FirstHealthPartD.com</a> (S5768)</td>
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See Reverse Side

Prescription Drug Helpline: 1-800-323-6525 ext. 23
<table>
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<tr>
<th>PLAN NAME</th>
<th>Plan Premium</th>
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<th>Coverage During Gap/Donut Hole</th>
<th>Plan ID</th>
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<td>Humana Insurance Company • 1-800-706-0872 • <a href="http://www.humana-medicare.com">www.humana-medicare.com</a> (S5884)</td>
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<td>SilverScript • 1-866-362-6212 • <a href="http://www.silverscript.com">www.silverscript.com</a> (S5601)</td>
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<td>Stonebridge Life Insurance Company • 1-877-527-1958 • <a href="http://www.transamerica.medicarerx.com">www.transamerica.medicarerx.com</a> (S9579)</td>
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<td>Symphonix Health • 1-855-355-2280 • <a href="http://www.symphonixhealth.com">www.symphonixhealth.com</a> (S0522)</td>
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<td>United American Insurance Company • 1-877-723-1662 • <a href="http://www.uamedicarepartd.com">www.uamedicarepartd.com</a> (S5755)</td>
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