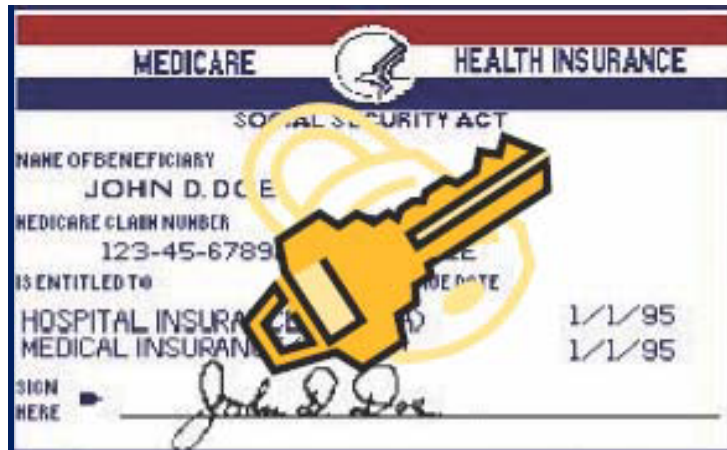


Your Medicare Matters. Protect It!

Steps to Safeguard Your Medicare



brought to you in partnership by

**Health Insurance Counseling and
Advocacy Program (HICAP)**

California Department of Aging

California Senior Medicare Patrol



CALIFORNIA HEALTH ADVOCATES
Medicare: Policy, Advocacy and Education



LOCAL HELP FOR PEOPLE WITH MEDICARE

Dear Medicare Beneficiary:

We know how important Medicare is to you and we want to help you protect it. We understand that making decisions about your Medicare coverage can be difficult because many options are now available to you.

Medicare Advantage Plans and Medicare Part D Prescription Drug Plans allow you more choices than ever about your Medicare health care coverage. You can either keep your Original Medicare Plan* benefits or you can switch to a Medicare Advantage Plan that will provide your coverage instead of the Original Medicare Plan. Some Medicare Advantage Plans also include prescription drug coverage. If not, you can join a Medicare Part D Plan to help pay for your prescription drug costs.

These choices can provide good coverage depending on your current situation. However, so many choices can be confusing, and could increase the potential for misleading, fraudulent or abusive sales practices. This Medicare Benefits Protection Toolkit contains information you need to protect your Medicare benefits. It gives you important tools to help you make an informed decision. Make sure you have it when you sit down with anyone to discuss your Medicare coverage!

Also included is information on your local Health Insurance Counseling and Advocacy Program (HICAP) and the California Senior Medicare Patrol (SMP) Program. Your local HICAP Program is here to provide you free, unbiased, and confidential counseling on your healthcare benefits.

Your toolkit contains:

- **Questions to ask your sales representative and yourself.**
- **Facts on Medicare Advantage Plans and how they work.**
- **"Red Flags" to look for when considering a plan.**
- **Four steps to safeguard your Medicare coverage.**

*Comprehensive information on the Original Medicare Plan is available in the Centers for Medicare and Medicaid Services publication, **Medicare & You 2012**, or on the Internet at www.medicare.gov.



Ask the Right Questions

Safeguard Your Medicare Coverage

Making any change to your Medicare coverage is a very serious matter! BEFORE you make any change, make sure it is right for YOU. If you have questions or need help, complete both sides of this form and contact your local HICAP office at 1-800-434-0222.

ASK QUESTIONS!

Ask yourself these questions.

What is the name of the Medicare Advantage Plan or the Medicare Prescription Drug Plan I am interested in?

Does the plan include Prescription Drug (Part D) coverage? YES NO

Is this a Private Fee-for-Service Plan? YES NO

How did the Medicare Advantage Plan company contact me?

Friend/Family Mail Phone Seminar Door-to-Door

I contacted them Other _____

What are the major differences between this plan and my current Medicare Plan?

How much will my new premium payment be? \$ _____

What will I have to pay when I see my doctor? \$ _____

What will I have to pay when I go into the hospital? \$ _____

Have I asked all my medical providers (doctors, hospitals, etc.) if they accept the plan?

YES NO

Will I have to travel to receive my health care? YES NO

Can I return to the Original Medicare Plan at any time? YES NO

Was a detailed written plan description left with me? YES NO

Have I contacted my local HICAP office at 1-800-434-0222? YES NO

MAKE SURE THE OTHER SIDE OF THIS FORM IS COMPLETED ALSO.

Ask the Right Questions

Making any change to your Medicare coverage is a very serious matter!
BEFORE you make any change, make sure it is right for YOU. Have the sales agent complete this form and YOU keep it for your records. If you have questions or need help, contact your local HICAP office at 1-800-434-0222.

GET INFORMATION!

Have the agent complete this page.

Agent/Broker/Company Information

Agent/Broker Name _____

Company Name _____

Company Address _____

Phone Number _____ E-mail _____

Agent's California Insurance License number _____

The plan I am offering is: Medicare Advantage (MA) Plan Prescription Drug Plan only

Complete the rest of this form only if the plan is a Medicare Advantage Plan.

This plan does does not include prescription drug coverage.

This Medicare Advantage (MA) Plan is:

HMO (Health Maintenance Organization)

PPO (Preferred Provider Organization)

PFFS (Private Fee-for-Service)

MSA (Medicare Medical Savings Account)

SNP (Special Needs Plan)

This plan will will not affect the Original Medicare Plan.

This plan will will not include additional out-of-pocket expenses.

The premium will be \$ _____. You will still be required to pay your Part B premium.

I have told the customer that by enrolling in the plan (please initial):

____ The plan will provide your primary health coverage instead of the Original Medicare Plan.

____ The Original Medicare Plan will no longer pay for your health care once enrolled in the plan.

____ You will be given a new plan card and it will replace the Original Medicare Plan Card.

____ Once enrolled, you may be "locked" in the plan for the remainder of the year.

____ The plan is not a Medicare Supplement Plan, and does not supplement the Original Medicare Plan.

Agent/Broker Signature _____ Date _____

MAKE SURE THE OTHER SIDE OF THIS FORM IS COMPLETED ALSO.

Get All the Facts

MEDICARE ADVANTAGE PLANS

Medicare Advantage Plans are healthcare plans approved by Medicare and provided by private insurance companies. There are several different types of plans:

Health Maintenance Organization (HMO)

Plans must cover all Part A and Part B health care. Most require you to go to doctors, specialists or hospitals on the plan's list, except in an emergency.

Preferred Provider Organization (PPO)

Plans are available in a local or regional area. You may pay less if you use doctors, hospitals, and providers in the plan's network, but pay additional costs for outside network visits.

Medical Savings Account (MSA)

Plans combine a high deductible health plan with a Medical Savings Account that you can use to manage your healthcare costs.

Private Fee-for-Service (PFFS)

Plans allow you to go to any doctor or hospital that accepts the plan's payment. The plan decides how much it pays and what you will pay for the services you receive.

Medicare Special Needs (SNP)

Plans are specially designed to meet the needs of people who live in certain institutions, are eligible for both Medicare and Medicaid, and/or have one or more chronic conditions.

Medicare Advantage Plans provide all of your Part A (Hospital Insurance) and all of your Part B (Medical Insurance) coverage and other medically necessary services just like you have under the Original Medicare Plan. Some Medicare Advantage Plans may also provide prescription drug coverage.

Medicare Advantage Plans may provide good coverage for some Medicare beneficiaries. You must make sure you can afford to pay any co-payments as well as the monthly premium. You also need to check to see if your healthcare providers are part of the plan's network or if they will accept payment.

It is important for people who now have the Original Medicare Plan and are considering enrolling in any Medicare Advantage Plan to understand:

- The plan will provide your primary health coverage instead of the Original Medicare Plan.
- The Original Medicare Plan will no longer pay for your health care once you enroll in a Medicare Advantage Plan.
- You will be given a new plan card, and it will replace your Medicare card.
- You will continue to pay your Part B premium even if you enroll in a Medicare Advantage Plan.
- The plan is not a Medicare Supplement Plan, and it does not replace Medicare Supplement Insurance (Medigap).
- You may be charged extra co-payments or cost-sharing expenses for Medicare services.

Recognize the Red Flags

THE MARKETING AND SELLING OF MEDICARE ADVANTAGE PLANS

You have a lot of choices when it comes to your Medicare. Medicare Advantage Plans are health plan options approved by Medicare and run by private companies. These plans can be an alternative to traditional Medicare. Recognize the “Red Flags” before you enroll in a new plan.

 A sales representative appears at your door uninvited.

Strict marketing guidelines do not allow home visits unless you have given the company permission before the visit.

 A sales representative contacts you in person or by phone and says they are with Medicare. They may even hand you a red, white, and blue business card.

Medicare does not make home visits or unsolicited phone calls. The sales person is not with Medicare!

 A sales representative tells you the plan is a Medicare Supplement Plan, and it will not affect your Original Medicare Plan.

A Medicare Advantage Plan IS NOT a Medicare Supplement Plan. The plan will provide your primary health care coverage instead of Medicare.

 A sales representative tells you that your doctor accepts the new plan.

Your doctor may or may not accept the plan. It is important to contact your doctor directly and check to see if he or she will accept the new plan.

 A sales representative wants to see your Medicare card and have you sign something.

Do not show the sales person your Medicare card! Do not sign anything you have not read. Do not sign anything you do not understand.

 A sales person wants you to make a decision today – without taking the time to make sure you understand the new plan.

Take your time!

Complete the 4 steps **BEFORE** you make changes to your Medicare.

1 – Ask Questions. 2 – Take your Time. 3 – Understand. 4 – Call HICAP.

Report suspected health care fraud and abuse to your local SMP Program at
1-855-613-7080

Follow the Steps

Making any change to your Medicare coverage is a very serious matter! Safeguard your Medicare by completing these 4 steps. Remember, it's your Medicare benefit – Protect it!

1.

ASK QUESTIONS!

Have the sales person complete the “Get Information” form. You complete the “Ask Questions” form. Keep both forms for your records.

2.

TAKE YOUR TIME!

Take time to make your decision. Know what is being offered to you, and how it will affect you.

3.

UNDERSTAND!

Make sure you understand before you make any changes. Get paperwork first, and consult with someone you know and trust.

4.

CALL HICAP!

Your HICAP Program is here to help you. HICAP services are free and confidential. Call 1-800-434-0222 for a local program in your community.

California Department of Aging

1300 National Drive, Suite 200

Sacramento, CA 95834

www.aging.ca.gov

(916) 419-7500



Report suspected Medicare fraud, waste and abuse

California SMP

1-855-613-7080



Get free Medicare counseling and assistance

**Health Insurance Counseling and
Advocacy Program (HICAP)**

1-800-434-0222



Contact the Centers for Medicare and Medicaid Services

1-800-MEDICARE (1-800-633-4227)



Report suspected Medi-Cal fraud, waste and abuse

Bureau of Medi-Cal Fraud and Abuse

1-800-722-0432

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Points of view or opinions do not, therefore, necessarily represent official Administration on Aging policy.

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