Your Medicare Advocate in Washington, D.C.

Changing Landscape – Your Success as a Medicare Agent

- Today's Medicare Agent must take on the role of consultant to be successful.
  - 31% of beneficiaries are on Medicare Advantage but many still select Original Medicare and need a Medicare supplement. They also need to know what to do about prescription drug coverage.
  - Seniors are changing – many are working longer and will be actively working after they become Medicare eligible. Today's Medicare Agent needs to be a master of timing to ensure that their clients maximize both employer opportunities and coverage options through Medicare.
  - Seniors want to know not only about Medicare but what is going on with health care in other areas. They want and need their agent to be up to date on the Medicare products industry but they also need to know what is going on in Washington and how it could affect them.

NAHU is your key to being on the cutting edge.

NAHU Successes

Before ACA, NAHU's main focus for many years was Medicare.

Our involvement was so significant in the Medicare Modernization Act that we were invited by President Bush to be on the **front row at the**

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Our involvement was so significant in the Medicare Modernization Act that we were invited by President Bush to be on the **front row at the bill signing ceremony**

We were recognized for our

work in educating and enrolling seniors in Medicare Part D during a **West Wing ceremony**

ACA has taken a lot of time in recent years, but we are still **heavily involved in Medicare related issues** – Medicare, Medigap, and Medicare Advantage

NAHU Successes

Have been named by the NAIC to several federally mandated working groups on Medigap which ensures both state and federal involvement

Why are there regulatory differences between Medicare Advantage and Med Supp?

Medicare Advantage is a public-private partnership. CMS promulgates the regulations on behalf of beneficiaries for this government program.

Med Supps are private plans that fill gaps in coverage and not regulated by CMS, but through NAIC.

Congressional Outlook on Medicare

Favors Medicare Advantage (Republican)

Favors more cost-sharing for Medigap

Some democrats favor expansion of Medicare and most Democrats favor preservation of Original Medicare over Medicare Advantage

NAHU Successes

Restoration of January Open Enrollment Period for Medicare Advantage

This period was removed in ACA and we have worked to restore it since 2010

NAHU Successes

Medicare Advantage

Have worked at regulatory level with CMS to make Medicare marketing rules less restrictive

NAHU Successes

Medicare Advantage

CMS 110.00 also reduces restrictions on agent advertising for MA and Part D that require filing. Also reduces restrictions on social media.

NAHU Successes

Success in avoiding Part D compensation decreases.

NAHU Initiatives

Treating COBRA as creditable coverage

Introduction of Observation rule legislation

Working on a broker bill to address the onerous marketing rules that restrict agent/brokers in enrollment and servicing; would also eliminate marketing rules, including scope of appointment and adjusting rules on compensation.

marketing rules, including scope of appointment and adjusting rules on compensation.

Allow HSA contributions beyond age 65 for those still in the workforce.

NAHU

Medicare-for-All Opposition

NAHU is fully opposed to any form of single-payer, be it through incremental approaches such as a public option or Medicare or Medicaid buy-in, or a more sweeping federal takeover of the entire healthcare system to implement a single standardized government-run plan.

NAHU and the **Partnership for America's Health Care Future** are actively working to oppose single-payer, promote employer-sponsored health coverage and preserve Medicare, Medicaid, and other existing health programs.

NAHU

Medicare-for-All Opposition

Medicare for All is Choice for None

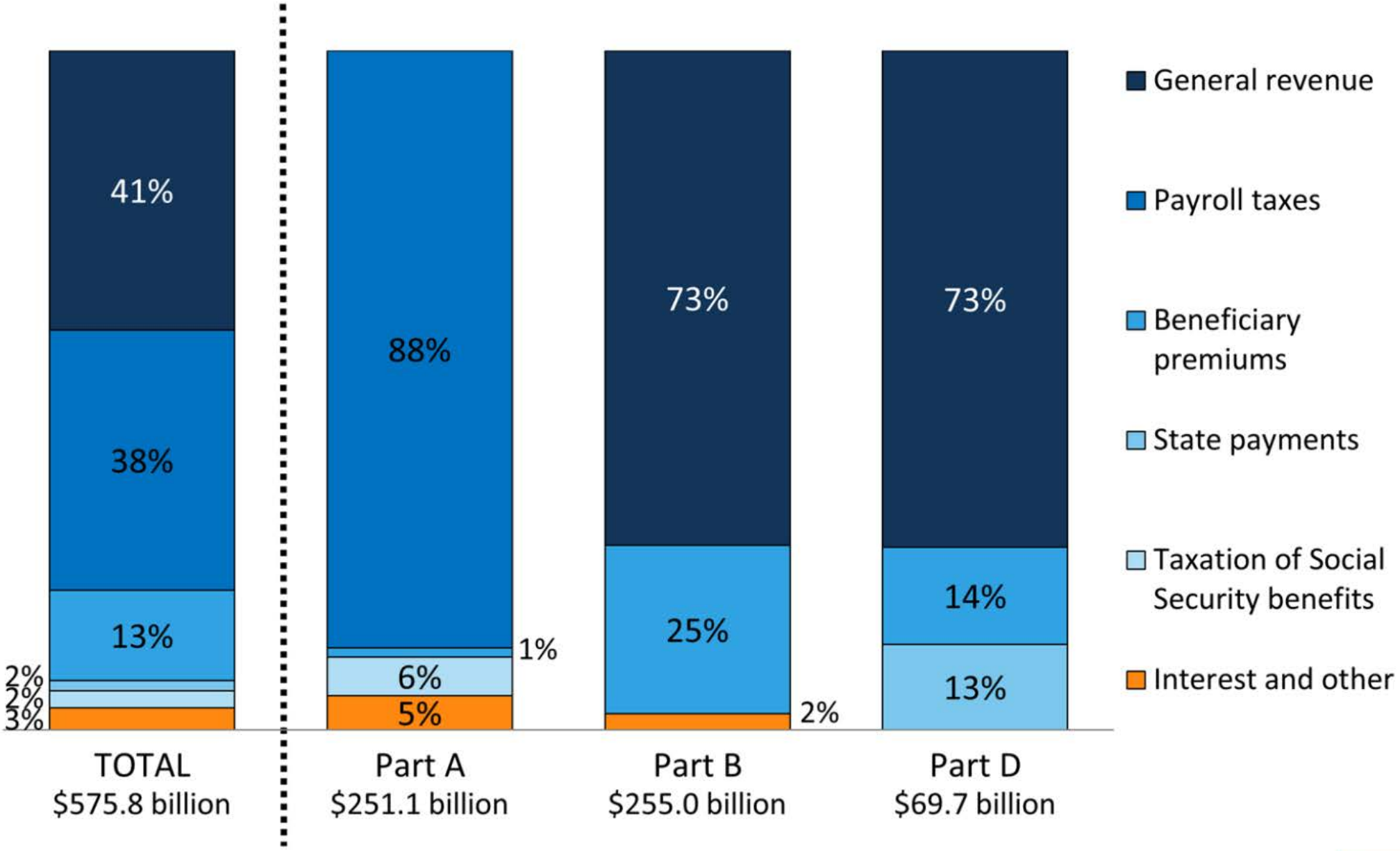
Medicare for all would not allow consumers to maintain their current coverage.

Medicare for all would be ***prohibitively expensive***. Estimates are around $32 trillion, an average annual tax increase of $24,000 per household.

Medicare for all would reduce the standards of quality and access Americans currently enjoy in their healthcare.

Figure 29

Sources of Medicare Revenue, 2013



SOURCE: Kaiser Family Foundation based on data from 2014 Annual Report of the Boards of Trustees of the Federal Hospital Insurance and Federal Supplementary Medical Insurance Trust Funds.

THE HENRY J. KAISER FAMILY FOUNDATION

NAHU

Medicare-for-All Opposition

Pending Legislation:

Medicare for All

H.R. 1384 - Rep. Pramilla Jayapal (D-WA) + 106 co-sponsors

There are 26 people who were on H.R. 676 last Congress but are NOT on H.R. 1384

Medicare buy-in for ages 50-64

H.R. 1346 - Reps. Brian Higgins (D-NY) + 29 co-sponsors

S. 470 - Sens. Debbie Stabenow (D-MI) + 19 co-sponsors

NAHU

Medicare-for-All Opposition

Other Concerns:

Medicaid buy-in
Public Option
Medicare *Extra* For All (CBPP)
Healthy America (Urban Institute)
Cost Caps & Coverage for All (Third Way)

In the States:

CA: Dems control gov, senate 28-12, house 57-43
CO: Dems control gov, senate 19-16, house 41-24
NY: Dems control gov, senate 40-23, house 107-43

Getting Things Done in D.C.

Why Medicare Matters

YOU add value

- **YOU** make a difference to your clients
- **YOU** understand their individual needs and can help them narrow their decisions
- **YOU** can help them understand the crosswalk between Social Security and Medicare
- **YOU** can help them understand how working past the Medicare eligibility can affect their Medicare options
- **YOU** can explain the difference between Medicare Advantage, Original Medicare and Medicare supplements, and Medicare Part D
- NAHU can help **YOU** bring more value to your clients

Challenges

- AHIP and Certifications every year
- Staying up to date with compliant selling
- Understanding all the client's options.
- Analyzing PDP plans and networks
- Finding trusted resources
- Government regulation changes

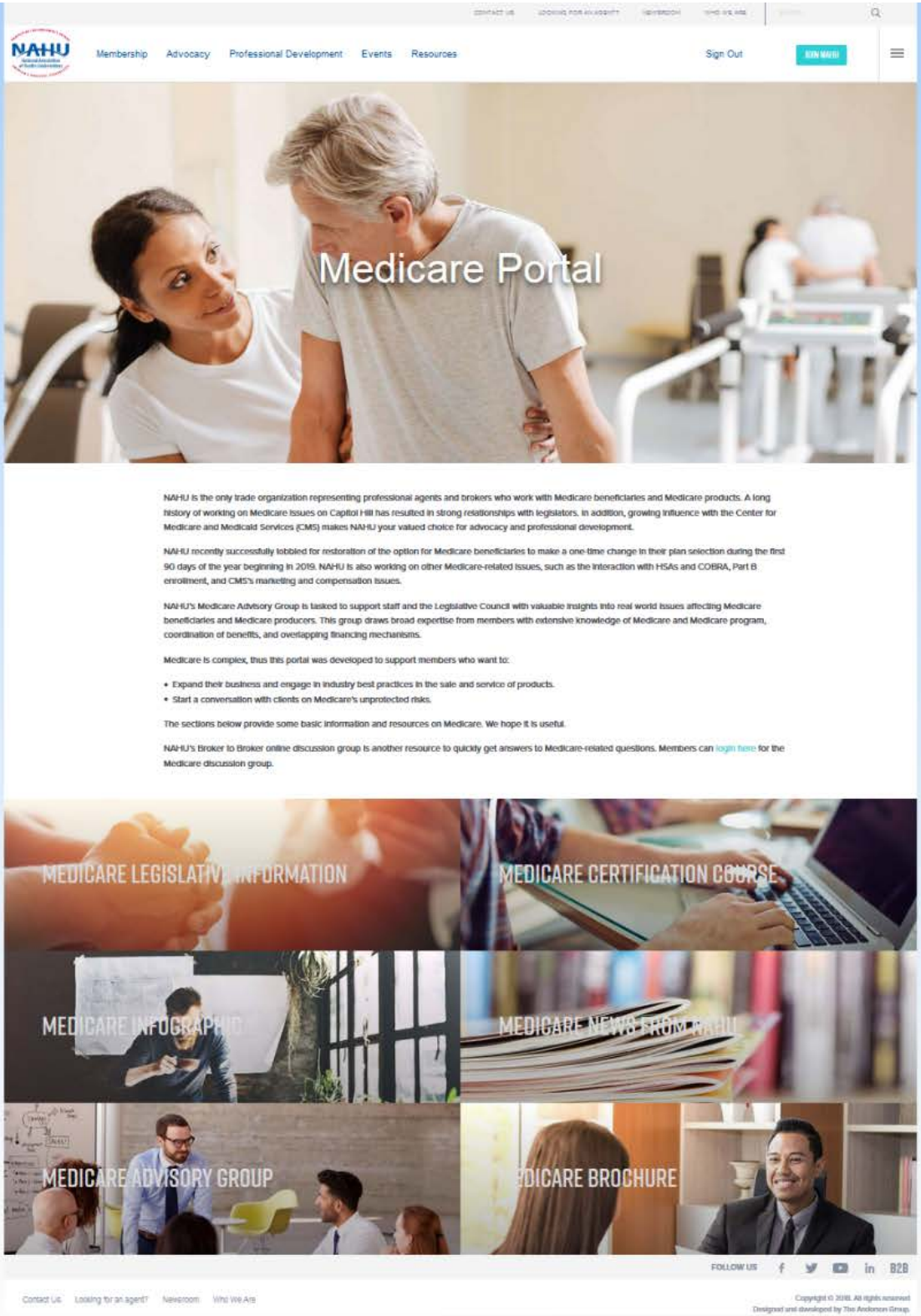
NAHU Resources

- Presence in Washington, DC and a seat at the table on issues that matter to you
- Lobby CMS and Congress on Medicare and Medicare Agent issues
- Dedicated Advisory Group to monitor regulatory and congressional actions and to ensure we are providing resources the Medicare Agent needs
- Medicare Infographic and Brochure
- Medicare Certification course with information not found in other courses

NAHU Resources

Medicare Portal

http://nahu.org/resources/medicare-portal



What Questions Should I Ask When Considering Which Plan to Enroll In?

The following questions may help you decide which plan is best for you.

Can I Keep My Doctor If I Enroll in Medicare?
If you enroll in Medicare Part B and your doctor does not accept Medicare, you would be responsible for the bill. Doctors may take an employer plan but may not take Medicare.

Am I Taking Prescription Drugs?
Part D plans and Medicare Advantage plans have formularies (lists of covered drugs). The drugs on these lists vary and change year to year. A review of the formularies would be needed to determine the best plan for you. A NAHU professional can assist you with this.

Do I Plan to Travel Inside or Outside the United States?
Medicare does not cover a person outside the country. Some supplements and Medicare Advantage plans cover a person for worldwide emergencies.

What If I Am Still Working?
If you are 65 and not receiving Social Security, you do need to enroll in Medicare but do not have to take Social Security. If your employer still offers health insurance to you, you likely need to enroll only in Medicare Part A. You can keep your employer group insurance plan and delay enrolling in Part B and Part D until you retire and lose your group coverage. A NAHU professional can assist you with this decision.

What Does Medicare Cost?

Costs for Medicare vary from year to year. Generally, you will need to pay a Part A deductible, Part B premium and Part B deductible. Most people don't pay a premium for Part A since they have paid into the system during their working years.

Part D also has a monthly premium, as do Medicare Supplement plans. Medicare Advantage plans often have low or zero premiums, which vary by plan type and geography, and often include prescription drug coverage at no extra cost.

Can I Qualify for Extra Help?

People with limited income and resources may qualify for Extra Help programs that pay the Part B Original Medicare premium and/or lower the costs of Medicare prescription drug coverage. You can get more information about assistance by going to a Social Security office, calling 1-800-772-1213, visiting www.ssa.gov or talking to your licensed insurance agent.

What If I Have More Questions?

Medicare.gov offers many helpful resources for you to learn more about Medicare. Another good resource is health insurance agents.

Agents are highly trained insurance professionals who will guide you through the complex task of choosing appropriate coverage at an affordable cost and are dedicated to serving your long-term interests. Agents are licensed and regulated by state insurance departments.

The National Association of Health Underwriters has trained and certified Medicare insurance professionals ready to help you review your choices and make an informed decision. There is no fee for their service. To find an agent in your area, visit www.nahu.org.

This material is for informational purposes only and is neither an offer of coverage nor medical advice.

This important message sponsored by:

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QUESTIONS ABOUT MEDICARE?

What You Need to Know

What Is Medicare?

Medicare is the federal health insurance program for people who are 65 or older, certain people with disabilities under age 65 and people with End-Stage Renal Disease or Lou Gehrig's Disease. The program helps with the cost of health care but does not cover all medical expenses or the cost of long-term care. Medicare has four Parts: Part A, Part B, Part C and Part D.

Who Is Eligible?

In general, individuals who are United States citizens, who are 65 years old and who have worked at least 10 years in this country or individuals deemed disabled for 24 months may be eligible for Original Medicare Part A at no cost and Part B by paying a premium based on income.

How Do I Enroll in Medicare?

An individual can enroll in Medicare at a Social Security office, by calling Social Security (800-772-1213) or online at www.medicare.gov.

There are specific timeframes involved when enrolling. Consult with a NAHU professional about these enrollment periods.

Why Is It Important to Enroll?

There are regulations surrounding enrolling in Medicare that can result in a financial penalty. If you are working, you may or may not need to enroll in Part A and/or Part B. Other regulations involve COBRA, HSA health plans, creditable and non-creditable plans and other types of plans. A NAHU professional can help you understand whether you need to enroll in Medicare. If you are working, a NAHU professional can compare your current plan to Medicare to determine which plan best meets your needs.

What Are the Four Parts of Medicare?

There are four parts that make up Medicare: Part A, Part B, Part C and Part D.

Part A

Part A covers inpatient hospital room and board, skilled nursing care, hospice and some home healthcare costs.

Part B

Part B covers medically necessary doctor visits, outpatient surgery, physical therapy, home care and medical equipment.

Part C

Part C, also known as Medicare Advantage, provides the same coverage as Part A, Part B and often Part D, but coverage is provided by private health insurance carriers that have a contract with Medicare.

Medicare Advantage plans may have no or low monthly premiums, copays and annual out-of-pocket maximums to protect a person from catastrophic illness. These plans can include more benefits than Original Medicare (Part A and Part B). Additional benefits may include coverage for prescriptions, a comprehensive physical, dental, vision, routine foot care and gym memberships.

Part D

Part D provides outpatient prescription drug coverage. Plans can be purchased on a standalone basis or be included in a Medicare Advantage plan. Plans vary in price, copays and the drugs included on their formulary (prescription drug list).

ORIGINAL MEDICARE	OR	MEDICARE ADVANTAGE
Part A (hospital coverage) + Part B (doctor and outpatient coverage)		Part C or Medicare Advantage (combines Part A, Part B and usually Part D)
+ Part D (optional) (prescription drug coverage)		+ Part D (optional) (prescription drug coverage may be necessary if not included in the Medicare Advantage plan)
+ Medicare Supplement Insurance (optional) (Medigap)		

What is Medicare Supplement (Medigap)?

Medicare Supplement, or Medigap, plans cover the "gaps" in Original Medicare (Part A and Part B). These gaps include items like copayments, coinsurance and deductibles. Medicare Supplement plans are provided by private insurance companies.

What is Medicare Advantage?

Medicare Advantage is offered through private insurance plans. Its popularity comes from low or no premiums and a cap on total out-of-pocket expenses. Medicare Advantage plans may include drug coverage and additional benefits not covered by Original Medicare. These plans have copays and possibly other costs.

WHAT YOU NEED TO KNOW ABOUT MEDICARE

Generally, **Medicare is available for people 65 or older**. It has four parts: Part A, Part B, Part C and Part D.

ORIGINAL MEDICARE
Includes **Part A** and **Part B**.

MEDICARE ADVANTAGE
Also known as **Part C**.

Part A is hospital insurance. It has a deductible and copay. It may have a premium.

Part B covers medically necessary services and supplies. It has a deductible, premium and coinsurance.

+

Medigap
Medicare Supplement insurance can cover copayments, coinsurance and deductibles that are not covered by Part A or Part B.

Part D is prescription drug coverage.

Part C plans cover all of the services included in Original Medicare, have a cap on the annual out-of-pocket costs and include Part D at no additional cost.

Medicare Advantage plans are administered by **private insurers**. They feature co-pays, low or no monthly premiums plus additional benefits.

Ready to Enroll?
Talk with a certified health insurance agent who is a member of NAHU. NAHU members can help you make an informed decision. Visit www.nahu.org to find a certified agent in your area.

NAHU
National Association of Health Underwriters

GLOSSARY OF TERMS

1. **Medicare**: The federal health insurance program for people over the age of 65. Those with certain diseases or who have been disabled for more than 23 months and are on Social Security disability may also qualify.

2. **Deductible**: The amount beneficiaries pay for health care before their insurance plan begins to cover costs.

3. **Copay**: A flat fee that beneficiaries pay for medical appointments, prescription drugs and other procedures.

4. **Premium**: A monthly fee beneficiaries pay for health coverage. Premiums do not count toward deductibles or out-of-pocket maximums.

5. **Co-insurance**: The percentage of the cost of healthcare services for which beneficiaries are responsible.

6. **Out-of-Pocket Maximum**: A cap on the amount of money that a beneficiary can spend out of pocket on health care in a given year. After this cap is reached, insurance covers all other charges for the rest of the year.

7. **Medicare Part A**: Part A covers inpatient hospital care, skilled nursing facility stay and hospice/home care. Part A coverage is free for beneficiaries who have worked and paid Social Security taxes for at least 40 calendar quarters. Those who have not may need to pay a premium.

8. **Medicare Part B**: Part B includes preventive care, doctor visits, outpatient surgeries, physical therapy, home care and medical tests, x-rays and equipment, emergency and ambulance services and more.

9. **Medicare Part C (Medicare Advantage)**: Federally subsidized private insurance plans that cover Part A, Part B and often Part D services, as well as some supplementary benefits.

10. **Medicare Part D**: Part D provides prescription drug coverage.

11. **Medicare Supplement Insurance**: Also known as **Medigap**, these private insurance policies supplement original Medicare. They can cover things like copayments, coinsurance and deductibles that are not covered by Part A or Part B.

Consult a certified NAHU professional to see what plan is best for you.

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IF YOU'RE NOT A MEMBER, JOIN TODAY!