Where can I find out more?

Medicare Advantage
Medicare Advantage plans usually include extra benefits and services beyond Original Medicare, such as fitness programs and more. See “Medicare & You” handbook at www.medicare.gov and search for Medicare Part C.

Medicare Supplement insurance plans

Special Needs Plan
Visit www.medicare.gov and search the subject.

State health insurance assistance programs
www.shiptacenter.org

Financial assistance for those with limited incomes
See if you qualify by contacting your state Medicaid office or call the Social Security Administration at 1-800-772-1213. If you use a TTY, call 1-800-325-0778, Monday – Friday, 8 a.m. – 8 p.m., Eastern time.

To learn how you can enhance your Original Medicare coverage, go to www.medicare.gov

Plan choice considerations

<table>
<thead>
<tr>
<th>COST</th>
<th>How much will you pay for premiums, deductibles, coinsurance and copayments?</th>
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</thead>
<tbody>
<tr>
<td>BENEFITS</td>
<td>Does the plan include prescription drug coverage or other additional benefits?</td>
</tr>
<tr>
<td>COVERAGE</td>
<td>Do your doctors, hospitals, pharmacies and other providers accept the plan?</td>
</tr>
<tr>
<td>CONVENIENCE</td>
<td>Must you complete claim forms? Are your providers nearby? Can you get pharmacy purchases by mail?</td>
</tr>
<tr>
<td>HEALTH HISTORY</td>
<td>How often have you needed care in recent years? Do you have a chronic condition requiring ongoing care?</td>
</tr>
<tr>
<td>HEALTH FUTURE</td>
<td>You may not spend much on medical care prescriptions now but may in the future. Consider what your needs might be in the future when comparing healthcare coverage.</td>
</tr>
</tbody>
</table>

Make sure you’re Medicare eligible

Visit www.medicare.gov or call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. If you use a TTY, call 1-877-486-2048.

Humana developed this guide to help you decide which Medicare coverage is right for you. We’ll clarify Medicare’s basics, its parts and what it covers. We’ve included references leading to additional information. It’s all here to help you make your best choices.
Medicare Parts A and B

**ORIGINAL MEDICARE**

Medicare Parts A and B, offered by the federal government

- Medicare Part A helps cover hospital, skilled nursing, home health and hospice care.
- Medicare Part B helps cover doctor visits, outpatient and preventive care. It also helps pay for services Part A doesn't cover, like occupational and physical therapies.

**Good coverage, but not complete**

Medicare Parts A and B cover much of your medical care but not all of it, and you typically pay a deductible and coinsurance when you use it. That's why many people buy coverage with benefits beyond those included in Original Medicare.

Seasons change and reasons evolve

You have your reasons for working toward becoming your healthiest. Traveling. Spending time with family. Maybe you're dedicated to a new fitness goal. Whatever you enjoy, you're looking forward to enjoying more of it.

Costs depend on coverage choices

Original Medicare and Medicare Advantage plans both cover preventive services. Medicare Advantage plans are required to cover everything Original Medicare covers, including services Medicare considers medically necessary.

Medicare Advantage is still Medicare

If you choose a Medicare Advantage plan, you still have Medicare coverage; you just choose to receive your Medicare benefits through a private insurance company. You may pay an additional monthly premium for Medicare Advantage, but often get extra services and benefits.

How my plan choices affect costs

Whether you choose Original Medicare or Medicare Advantage, you must pay your Original Medicare premium if you have one. Medicare Advantage, Medicare Part D prescription drug coverage and Medicare Supplement insurance plans may have additional premiums.

How does the Part D coverage gap affect costs of my medicines?

Most Medicare prescription drug plans have a coverage gap, also known as the donut hole. Not everyone will reach it. You enter the donut hole after you and your plan have spent a certain amount for covered drugs. During the coverage gap, you may have to pay a higher percentage.

**Stage 1: Deductible—you pay 100%**

What you pay for medication before your plan pays its share. Some plans have no deductible.

**Stage 2: Initial coverage—shared cost with insurance company—$4,020**

You and your plan share medication expenses up to a total of $4,020. You usually pay copays and coinsurance in this stage.

**Stage 3: Coverage gap (donut hole)**

The coverage gap begins when your covered drug costs reach $4,020 and end when your total out-of-pocket costs reach $6,350. You'll pay maximums of 25% of the plan's brand-name drug cost or 25% of the plan's generic drug costs. Medication-related deductibles, coinsurance, copayments, discounts on covered brand-name drugs and amounts you pay in the gap count toward the $6,350 limit.

**Stage 4: Catastrophic coverage stage—follows the coverage gap**

Catastrophic coverage begins at the $6,350 coverage gap limit. You'll pay $8.95 for brand-name, $3.60 for generic drugs or 5% of your medication's cost, whichever is greater.

Medicare Part D

**PRESCRIPTION DRUG PLAN**

Medicare Part D, offered by a private company

Part D is a prescription drug plan for people with Medicare. It must offer at least the basic benefits required by Medicare.

Learn more about Medicare Advantage plan types

**Health maintenance organization (HMO)**

Generally, a primary care physician arranges your healthcare in the plan's network.

**Preferred provider organization (PPO)**

Choose any provider, although you may pay less for services from in-network providers.

**Private-fee-for-service (PFFS)**

Generally, more freedom to choose providers may be available; however, a network arrangement may still apply. Providers must accept Medicare and agree to bill the PFFS plan per the plan's terms and conditions.

Two ways people choose Medicare Part D prescription coverage

**Stand-alone prescription drug plan**

Covers medicines when you have Original Medicare or when you pair a Medicare Supplement insurance plan with your Original Medicare.

**Medicare Advantage plan that includes prescription coverage**

If you enroll in a Medicare Advantage plan with prescription drug coverage, you don't need to sign up for a stand-alone prescription drug plan.

Each prescription drug plan has its own Drug List, also called a formulary. Choose a plan that covers medicines you take regularly.

Signing up late can affect premium costs

You may have to pay a penalty if you sign up late for Part B or Part D. Find out more by going to www.medicare.gov and searching for:

- Part B late enrollment penalty
- Part D late enrollment penalty

To learn how you can enhance your Original Medicare coverage, go to www.medicare.gov