

NAHU

Your Medicare Advocate
in Washington, D.C.

NAHU
And You

On the
Horizon

Medicare
for None?

Health
Advocate

2015
Reauthorization

NAHU
Resources

What NAHU is doing for the Medicare Agent

- **H.R. 2564** - Treating COBRA as creditable coverage
- **H.R. 2477/S. 1280** - BENES Bill; provides better communication to newly eligible beneficiaries and for agents to be consulted on the notice development
- **H.R. 1682/S. 753** - Allows observation stays to be counted toward the three-day mandatory inpatient stay for Medicare coverage of a skilled nursing facility
- CMS to consult on agent questions
- Provide feedback to CMS on marketing guidelines; current focus on certification process
- CMS 110.00 reduced restrictions on agent advertising for MA and Part D that requires filing. Also reduced restrictions on social media

What NAHU is doing for the Medicare Agent

- Successfully worked with CMS on AEP during Hurricane Sandy and incorporated cooperation with NAHU members as SOP during national disasters rather than 1-800-MEDICARE
- Restored OEP annual option
- Successful in preventing reductions of agent compensation for Part D
- Created a Medicare Advisory Group and Principal's Council
- Medicare Portal on NAHU website
- Medicare newsletter with timely articles on issues of the day such as changes to Plan F
- Medicare certification course, brochures and infographics
- List of Medicare Summits around the country
- NAHU Medicare agents are the canary in the coal mine

On the Horizon

Broker Bill to provide SOA relief, agent input on regulations affecting agents

OEP for Part D? Medicare OOP calculator

Legislation to allow HSA contributions will still working beyond age 65

Further delay of HIT - Reinstatement will result in extra benefits removed from MAPD plans and higher costs on Part D

Medicare-for-All

- Urban Institute estimates cost of \$32 trillion over 10-years, or an annual tax increase of \$24,000 per household
- Eliminates 1.5 million American jobs: 500,000 who work directly for insurers, 900,000 in closely related industries
- Hospitals would see \$774 billion in cuts and possible closures (especially rural areas)
- Delayed treatment, disrupted care, discouraged innovation
- Elimination of Medicare Advantage, Medicare supplemental plans
- Will beneficiaries be held harmless for taxes to support MFA scheme?

Medicare Buy-Ins

- Lower rates to providers may curtail care or force doctors out of business
- Lower reimbursements would undercut private insurance, with more people opting for the public plan on cost alone
- Unless only offered to a limited group, could cause massive disruption to private plans and enrollees satisfied with their coverage
- Plans would be the government's responsibility for solvency and could lead to ever-increasing taxes to cover the cost
- Improving the current system could have better outcomes for access to coverage

Don't Go It Alone



Strength in Numbers

Strength in Numbers

You Can't Go It Alone

- In many ways Medicare is stuck in 1965, but in other ways there is rapid change.
- Are you going to know what changes are and how they affect Medicare beneficiaries?
- Vertical integration is creating new opportunities; will you know how to leverage them?
- Younger beneficiaries have different expectations, can you meet them?

Strength in Numbers

You Can't Go It Alone

- Navigating the Political Pressures & Nuances
 - Some Democrats are pushing Medicare buy-in and/or Medicare-for-All
 - Some Republicans want to eliminate first dollar coverage in Medigap and redesign Medicare by combining deductibles into single deductible
 - NAIC Medigap regulations split the difference

Medicare Access and CHIP Reauthorization Act of 2015

- NAIC determined Med Supp changes:
 - 1/1/2020 plans C, F and HDF cannot be sold to new Medicare eligibles
 - Plans D and G become the GI/Open Enrollment plans
 - Plans C, F and HDF can be sold to those already on Medicare

A graphic with a blue background featuring diagonal white lines. A large white circle in the center contains the text "NAHU Resources". To the right of this circle are three smaller dark blue circles, each containing a resource name: "Medicare Portal" at the top, "Brochure" in the middle, and "Infographic" at the bottom.

NAHU Resources

Medicare
Portal

Brochure

Infographic

Medicare Portal

NAHU is the only trade organization representing professional agents and brokers who work with Medicare beneficiaries and Medicare products. A long history of working on Medicare issues on Capitol Hill has resulted in strong relationships with legislators. In addition, growing influence with the Center for Medicare and Medicaid Services (CMS) makes NAHU your valued choice for advocacy and professional development.

NAHU recently successfully lobbied for restoration of the option for Medicare beneficiaries to make a one-time change in their plan selection during the first 90 days of the year beginning in 2016. NAHU is also working on other Medicare-related issues, such as the interaction with IRAs and COLAs, Part D enrollment, and CMS's marketing and compensation issues.

NAHU's Medicare Advisory Group is tasked to support staff and the Legislative Council with valuable insights into real-world issues affecting Medicare beneficiaries and Medicare producers. The group draws direct input from producers with extensive knowledge of Medicare and Medicare programs, contribution of benefits, and emerging financing mechanisms.

Medicare is complex, but this portal was developed to support members who want to:

- Expand their business and engage in healthy best practices in the sale and service of products.
- Stay a conversation with clients on Medicare's legislative risks.

The sections below provide some basic information and resources on Medicare. We hope it is useful.

NAHU's Open to Work online discussion group is another resource to qualify get answers to Medicare-related questions. Members can [sign up](#) for the Medicare discussion group.

MEDICARE LEGISLATIVE INFORMATION MEDICARE CERTIFICATION COURSE

MEDICARE INFOGRAPH MEDICARE NEWS FROM PHOENIX

MEDICARE ADVISORY GROUP MEDICARE BROCHURE

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Page 1 of 2 10/16/2016 10:45 AM 10/16/2016 10:45 AM

Brochure

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 NABD 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 supplement and Medicare Advantage plans cover a person for worldwide coverage.

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 NABD 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 D 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 two or more premiums which vary by plan, time 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 financial programs that pay the Part B Out-of-Pocket maximum and/or have the cost of Medicare prescription drug coverage. You can get more information about assistance by going to a Social Security office, calling 1-800-772-1233, www.ssa.gov or talking to your Supplemental insurance agent.



What If I Have More Questions?

Medicare goes often 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 services. To find an agent in your area, visit www.nahu.org.

The materials are intended for general informational purposes only and do not constitute an offer of insurance or financial advice. No insurance coverage provided.



1000 Executive Foundation
170 New York Avenue, Suite 1700
Washington, DC 20005
202-512-0200
www.nahu.org

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 needs of 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, also 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 (800-772-1233) or online at www.medicare.gov.

There are specific deadlines involved when enrolling. Consult with a NABD 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 NABD professional can help you understand whether you need to enroll in Medicare. If you are working, a NABD 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 care and 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, copay 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, hearing test and gym membership.

Part D

Part D provides outpatient prescription drug coverage. Plans can be purchased as a stand-alone fact 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

Part A

(Hospital coverage)

Part B

(Doctor and outpatient coverage)

Part D

(prescription drug coverage)

Medicare Supplement Insurance

(prescription drug coverage)

OR

MEDICARE ADVANTAGE

Part C or Medicare Advantage

(combines Part A, Part B and usually Part D)

Part D

(prescription drug coverage may be necessary if not included in the Medicare Advantage plan)



What is Medicare Supplement (Medigap)?

Medicare Supplement, or Medigap, plans cover the "gaps" in Original Medicare (Part A and Part B). These plans include things 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 flexibility comes from how it sets 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 copay and usually other costs.

Infographic



GLOSSARY OF TERMS

- Medicare**: The federal health insurance program for people over the age of 65. Those with certain illnesses or who have been disabled for more than 23 months and are on Social Security disability may also qualify.
- Deductible**: The amount beneficiaries pay for health care before their insurance plan begins to cover costs.
- Copay**: A flat fee that beneficiaries pay for medical appointments, prescription drugs and other procedures.
- Premium**: A monthly fee beneficiaries pay for health coverage. Premiums do not count toward deductibles or out-of-pocket maximums.
- Co-insurance**: The percentage of the cost of healthcare services for which beneficiaries are responsible.
- 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.
- 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.
- 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.
- 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.
- Medicare Part D**: Part D provides prescription drug coverage.
- 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.

NAHU
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**NAHU is your
valued partner**

**If you're not a
member, join today!**