

# A quick guide to Medicare and Medicare Advantage

{ with **Select Health** }



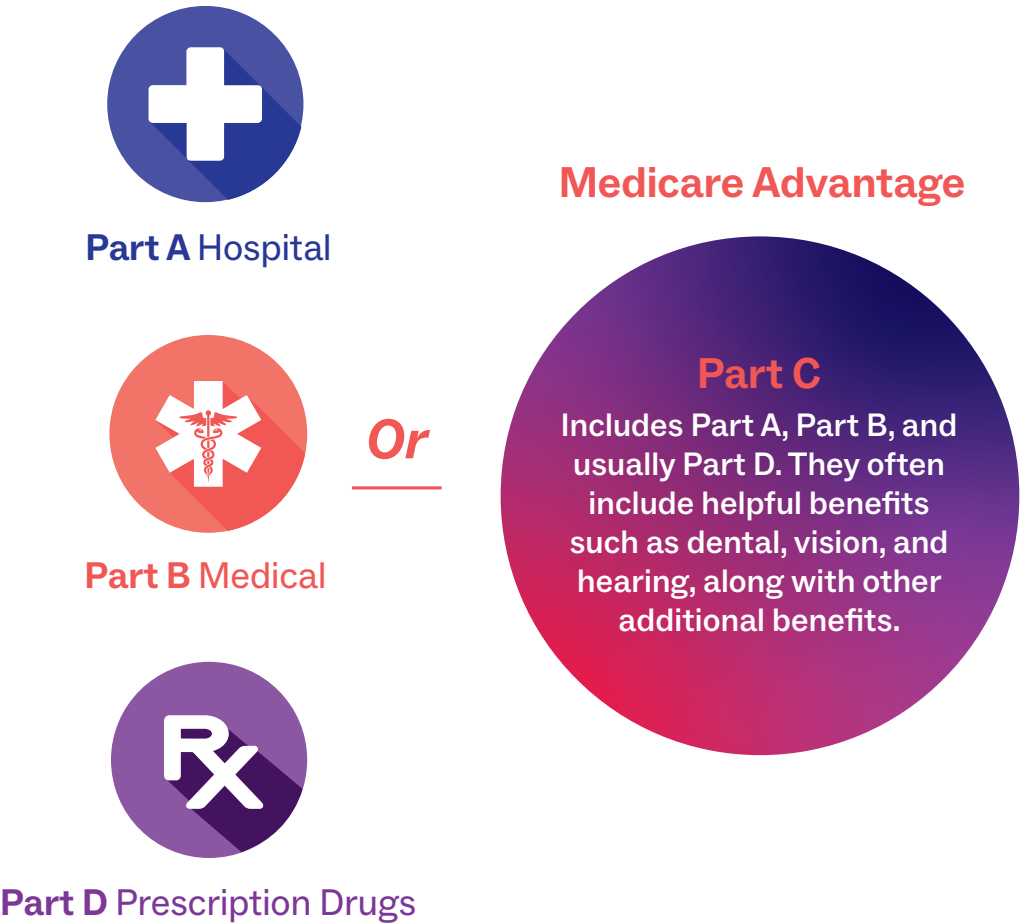
**Select  
Health**



# Make Medicare work for you.

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# Understanding the different parts of Medicare.



## Parts of Medicare

There are four different Parts of Medicare. Each one covers specific services and provides different options for receiving benefits.

### Part A (Hospital Insurance)

Part A helps to cover inpatient care in hospitals, skilled nursing facilities, hospice, and home health care. The government provides Part A through Original Medicare.

### Part B (Medical Insurance)

Part B helps to cover provider visits, outpatient care, preventive services, and outpatient hospital care. The government provides Part B through Original Medicare.

### Part C (Medicare Advantage)

Part C is commonly called Medicare Advantage.

Medicare Advantage is a Medicare-approved plan offered by a private company that offers an alternative to Original Medicare for your health and drug coverage.

These “bundled” plans include Part A, Part B, and usually Part D. They often include helpful benefits such as dental, vision, hearing, and other additional benefits.

### Part D (Prescription Drug Coverage)

Helps cover the cost of prescription drugs. Unlike A and B, Part D must be purchased separately from private insurance companies that follow rules set by Medicare.

## Important Facts to Consider:

Parts C & D are run by private insurance companies that follow rules set by Medicare.



# Are you eligible for Medicare?

You may be eligible for original Medicare if:

- 1 You are 65 years old and over
- 2 You are under 65 with a Medicare eligible disability for 24 consecutive months
- 3 You have ALS, known as Lou Gehrig’s disease, regardless of age, you’ll get Part A and Part B automatically

You will automatically be enrolled in Medicare if:

- If you are receiving Social Security benefits before age 65, Medicare enrollment is automatic.
- Your Medicare card will arrive in the mail approximately 90 days before your 65th birthday.

You will have to enroll yourself in Medicare if:

- You haven’t signed up for Social Security benefits, you must sign up for Medicare Part A or Parts A and B:
  - Over the phone
  - Online
  - In-person through the Social Security office or visit [ssa.gov/medicare](https://ssa.gov/medicare) to apply for Part A and Part B.

# The different premiums you may pay.

## Part A Premium

Most people don’t pay a premium for Part A coverage. This is referred to as “premium-free Part A.”

You won’t pay a Part A premium if you:

- Qualify to get (or are already getting) retirement or disability benefits from Social Security or the Railroad Retirement Board.
- Get Medicare earlier than 65.
- Are 65 or older and you (or another qualifying person, like your current or former spouse) paid Medicare taxes while working for 10 years.

## Part B Premium

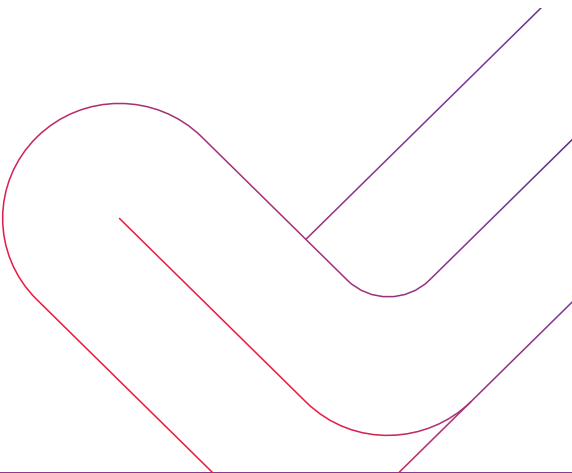
You will pay a monthly premium for Part B, even if you don’t use its services or enroll in a Part C Medicare Advantage plan. The amount can change yearly and may be higher based on your income. If you get Social Security, Railroad Retirement Board, or Civil Service Retirement check, the premium is deducted automatically; otherwise, you get a bill from Medicare.

## Part C Premium

Monthly premiums for Part C coverage vary based on which Medicare Advantage plan you join. The premium amount can change each year. Many Medicare Advantage plans may not have a monthly premium. In some cases, you will pay your Part C premium in addition to your Part B premium.

## Part D Premium

Monthly premiums for Part D coverage vary based on which plan you join. The premium amount can change each year. You may also have to pay an extra amount each month based on your income.



# The different types of Medicare Advantage plans.

## Health Maintenance Organization (HMO)

HMO plans require members to use a specific network of healthcare providers, except for emergency or urgent care. Their Primary Care Physician (PCP) can coordinate all of their care. A major benefit can be out-of-pocket costs may be significantly lower than Original Medicare.

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## Preferred Provider Organization (PPO)

PPO plans offer a network of healthcare providers, but you have the flexibility to use out-of-network providers, although costs may increase significantly, except for emergency or urgent care.

In some cases, the costs are the same in- and out-of-network. Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations.

## Special Needs Plans (SNP)

SNP plans provide benefits targeted to those with special needs such as persons with Medicare and Medicaid, those who are diagnosed with a chronic condition, or those living in a nursing home. Their PCP will coordinate all of their care.

Select Health Medicare Dual (D-SNP) plan is a great choice if you are Medicaid and Medicare eligible.

## Medicare Advantage plans with no Part D.

These plans are designed for individuals who get their prescription drugs from another source. This could be from a spouse who is still employed, Veteran’s Affairs, etc.

{ If you choose to waive Part D when you are eligible, please confirm you have comparable coverage or you may face a late enrollment penalty. }

## Medicare Advantage plan alternative

**Medigap (Medicare Supplement Health Insurance)**

A Medigap policy is health insurance sold by private insurance companies to fill the “gaps” in Original Medicare Plan coverage. Medigap policies help pay some of the health care costs that the Original Medicare Plan doesn’t cover.





## What to consider when shopping for a Medicare Advantage plan.

### Not-for-profit vs. For-profit

For-profits must return profits to investors, while not-for-profits must reinvest their profits back into the plan to benefit members.

### Regional vs. National

Regional companies often employ local talent who are knowledgeable about the area they serve. National companies may not be as familiar with care or services available in your area.

### Local Customer service

Good customer service is important. Look for an insurance company with local representatives.

### Plan network

Check if your providers and facilities are covered by the plan's network before choosing a healthcare plan. If not, there may be other good local providers available to meet your healthcare needs.

### Medication Coverage

Not all plans are the same when it comes to medication coverage. Check if a plan covers your prescriptions and what they cost.





## Why Select Health Medicare?

Medical, dental, and pharmacy all in one plan.

### 1 Comprehensive Coverage

Select Health Medicare plans offer medical, dental, and pharmacy coverage. Plus, additional benefits like vision hardware, hearing aid coverage, and wellness benefits.

### 2 Fixed Copays

Fixed copays mean predictable costs.

### 3 Max Out-of-Pocket

Out-of-pocket maximums are a financial safety net.

### 4 \$0 or low premiums on most plans

No premium or lower premiums than most Medicare Supplement Plans.

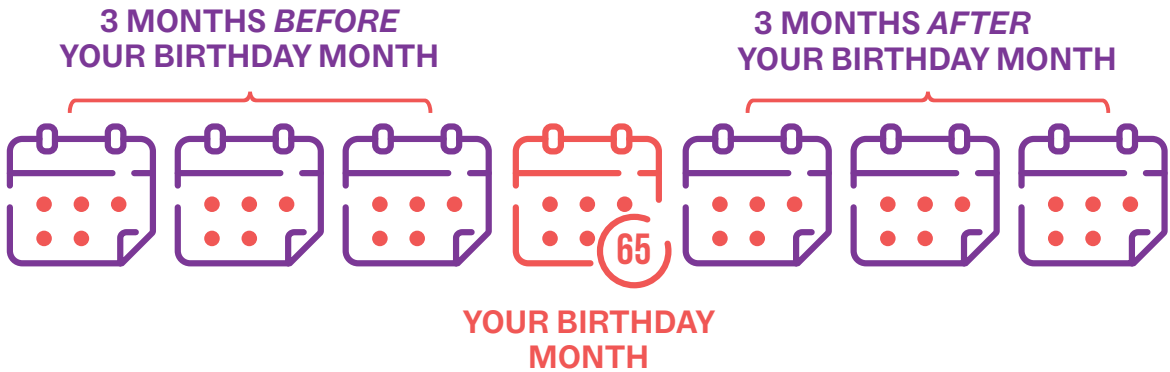
### 5 Local Customer Service

Our local representatives offer personalized support when you have questions.

# Important dates to remember.

## Initial Enrollment Period

You can first sign up for Medicare or a Medicare Advantage plan during the 7-month period that begins 3 months before the month you turn 65 and ends 3 months after the month you turn 65. If your birthday is on the first of the month, your 7-month period starts 4 months before the month you turn 65 and ends 2 months after the month you turn 65.



## Annual Enrollment Period (AEP)

Every year, from October 15 to December 7, you are allowed to join, make changes, and switch plans. This is a great opportunity to review your coverage to make sure it still works for you.



## Open Enrollment Period (OEP)

Medicare Advantage members have a specific enrollment period from January 1 to March 31 where you can make one change to your plan.

You can:

- Move to another Medicare Advantage plan
- Return to Original Medicare by canceling your existing plan. You may add Part D for prescription drug coverage.



## Special Enrollment Periods (SEP)

These periods are reserved for specific situations and can usually occur at anytime during the year. Here is a sample list of those Special Enrollment Periods:

- Lost other creditable employer or retiree insurance coverage benefits
- Have both Medicare and Medicaid
- Moved into a new service area

{ SEP Can occur at anytime during the year. }





# Other things to know.

## Medicare Advantage Trial Period

You have a full year to decide if a Medicare Advantage plan you join suits your needs. If you're unhappy with the Medicare Advantage plan, you can switch back to Original Medicare or join a Medicare Supplement Insurance (Medigap) plan without any negative effects.

## Delaying Medicare and the Late Enrollment Penalty

You can delay Medicare by staying on your employer's health plan. However, not all employer plans are the same, and some may lead to a lifelong Late Enrollment Penalty if your coverage isn't considered creditable.

Even if you plan to work past 65, it's a good idea to call us or work with a licensed insurance agent, union, or employer insurance specialist to verify your coverage and avoid the Late Enrollment Penalty.

## What happens to your HSA once you're on Medicare?

Once you're on Medicare, you can't contribute to a Health Savings Account (HSA), but you can still use existing funds for medical expenses, including Medicare premiums. HSA funds cannot be used for Medicare Supplement insurance premiums.

{ You can still use HSA funds for medical expenses, and Medicare premiums once you are on Medicare. }



# Helpful Resources

## YOU'VE GOT QUESTIONS. WE'VE GOT ANSWERS.

Call one of our licensed Answer Team members at **855-442-9940 (TTY: 711)** or visit **[selecthealth.org/medicare](https://selecthealth.org/medicare)**.

Hours of operation:

October 1 to March 31 – Monday through Sunday, 8:00 a.m. to 8:00 p.m.

April 1 to September 30 – Weekdays, 8:00 a.m. to 8:00 p.m., closed weekends.

## FIND A DOCTOR AT

**[selecthealth.org/find-a-doctor](https://selecthealth.org/find-a-doctor)**

## FIND A PHARMACY AND SEARCH FOR YOUR PRESCRIPTION DRUGS AT

**[selecthealth.org/pharmacy](https://selecthealth.org/pharmacy)**

## MEDICARE AND YOU HANDBOOK

**[medicare.gov/medicare-and-you](https://medicare.gov/medicare-and-you)**

Select Health is an HMO, PPO, SNP plan sponsor with a Medicare contract. Enrollment in Select Health Medicare depends on contract renewal. Out-of-network/non-contracted providers are not obligated to treat Plan members except in emergencies. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. Select Health obeys federal civil rights laws. We do not treat you differently because of your race, color, ethnic background or where you come from, age, disability, sex, religion, creed, language, social class, sexual orientation, gender identity or expression, and/or veteran status. This information is available for free in other languages and alternate formats. Select Health Medicare **1-855-442-9900 (TTY: 711)** / Select Health: **1-800-538-8038**. ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電。





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