

# Understand your Medicare Options

Your most important decision may be whether you want to choose Original Medicare (Parts A and B) **OR** a Medicare Advantage Health Plan (Part C).

## Original Medicare

Medicare pays set fees for your care directly to the doctors and hospitals you visit. Often called "fee-for-service" Medicare.

### Part A Hospital

\$1,632 deductible per *benefit period* 2024

### Part B

#### Doctor and Outpatient care

\$240 annual deductible +  
monthly premium (\$174.70 for most)  
+ 20% after receiving care

+

### Part D Drug benefit

Monthly premium + co-pays or co-insurance at the pharmacy

+

### Secondary Coverage

Covers most Medicare-approved benefits not paid by Parts A & B: Can be:

- 1) Medigap/ Medicare Supplements,
- 2) Medicaid, or 3) former employer coverage

#### Notes

- Most providers accept Original Medicare anywhere in the Country
- You pay deductibles and/or coinsurance (%) for services
- No annual cap or out-of-pocket maximum if you *only* have A & B
- Secondary coverage limits the financial risks
- Supplements can cost \$100-\$200/ month but then you have little or no additional costs for covered services; thus, costs are predictable.

## Medicare Advantage

Medicare pays a fixed fee to private companies for your care; these plans then pay your providers. These plans *replace* your A & B coverage. Called Part C or Medicare Health Plans.

### Part C

Combines hospital, doctor & outpatient care into one privately-administered health plan. Co-pays are often due *before* you receive care and/or co-insurance is due *after* you receive care.

(You still pay Part B monthly premiums & may have additional monthly premium costs)

***This is a "PAY AS YOU GO" MODEL***

Standard

### Part D Drug benefit

May be included in Part C plans

Additional

### Additional Benefits

Can be included, such as limited routine dental, vision, hearing services, gym membership, transportation, funds for OTC purchases, etc.

Possible

#### Notes

- Providers, hospitals, and healthcare agencies may not contract with these plans and may deny services or charge higher "out of network" rates
- Monthly premiums can be much lower than Supplements; **however, there are co-pays (set amount) or co-insurance (%) when you receive most care; thus, costs can be unpredictable.**
- There are Annual out-of-pocket maximums (caps) for medical expenses, which vary by plan