

1 How do I know what Medicare coverage is right for me?

The answer to this is easy to say and maybe not as easy to do. You need to understand your personal needs and choose Medicare coverage to help meet them.

2 How much does Medicare cost?

You will likely not have to pay for Part A Medicare as long as you have worked and paid taxes for at least 10 years. Part B Medicare has a monthly premium, and that amount depends on your income. Beyond that, you may pay other premiums, deductibles, co-pays and co-insurance. The total amount will depend on the Medicare coverage you choose and the health care services you require.

3 What do I do about Medicare if I work past age 65?

Many people enroll in just Part A when they turn 65 and continue with health care coverage through their employer. You may be able to delay enrolling in Part B without penalty if your employer provides creditable coverage. We can help you decide if it is beneficial to take Part B when you turn 65 or not.

4 How can I get dental and vision coverage with Medicare?

Original Medicare (Parts A and B) does not cover routine dental or vision care, however some private Medicare Advantage plans do. Plans include all the coverage provided by Parts A and B, and often additional benefits, all in one plan. The Medicare Resource Center has access to many private insurance plans and we can help you choose which plan is right for you.

5 What's the difference between Medicare Supplement insurance and Medicare Advantage?

Medicare Supplement insurance is also known as Medigap. It's private insurance you can buy to help pay for some or all costs not paid by Original Medicare (Parts A and B). Medicare Advantage is an alternative to Original Medicare. It's a different way to get your Medicare benefits which is managed by private companies who provide additional benefits and services. Many Advantage plans have premiums as low as \$0 per month.

6 What's the difference between a Medicare Advantage HMO and a PPO?

A Medicare Advantage HMO plan usually helps pay only for care you receive from providers in the plan network. A PPO plan will generally help pay for care received outside the plan network, but it may pay less than for the same care received from providers within the network. We have access to health plan networks so we can check to see if your doctor is in or out of an insurance company's network.

7 Where can I get help paying for Medicare?

Financial assistance programs for people with limited income and assets include Extra Help for prescription drugs, the Medicare Savings Program and Medicaid, to name a few. Qualifications for each program and the level of help offered vary. Applying for Extra Help is simple and we will do all of the work for you.

8 How does Medicare automatic renewal work?

Your Medicare coverage choices will stay in place year after year unless you make a change. This ensures that your coverage continues. Since plan benefits and costs may change, it's a good idea to review your Medicare choices every year during Medicare Open Enrollment, Oct. 15–Dec. 7. This will ensure you have Medicare coverage that fits your needs. We provide free annual reviews to ensure you are in the most cost effective plan.

9 What's the difference between Medicare and Medicaid?

Medicare and Medicaid are both government health care programs but they are very different. Medicare is generally for people who are older or disabled. Medicaid is for people with limited income and resources. We can tell you if you qualify for Medicaid and you don't need an appointment.

10 I'm disabled. When can I get Medicare?

In general, you are eligible for Medicare after receiving Social Security disability benefits for 24 months. There are exceptions for people with certain medical conditions. If you are unsure about your enrollment dates we are available five days a week to answer your questions.

Answers to 10 Common Medicare Questions

Medicare Resource Center



www.resourcemedicare.com

Dayton

Medical Center at Elizabeth Place
1 Elizabeth Place, Dayton, OH 45417
(937) 949-3771



Your "One-Stop" Medicare Shop

Medicare decisions are highly personal. And there may be as many different questions about Medicare as there are beneficiaries—maybe more. Here are the answers to questions that seem to come up more often than others.