MY BLUE PATH TO MEDICARE

Your clear way forward to Medicare.

A clear, concise guide that simply and directly explains some of the “big picture” issues you face moving forward with your Medicare decisions.
WHAT’S YOUR PATH FORWARD?

Whether you’re ready to enroll in Medicare at age 65…or looking to put off enrollment until a later age, we can help you better understand the tough choices and make informed decisions on YOUR path to Medicare.

• **Age 63-64**
  is the time you should be gathering information and starting to plan.

• **Age 65**
  is when most Americans are eligible for Medicare. If you plan to start using your benefits at 65, follow the dark blue “Ready for Medicare” tab at left.

• **Age 66-70**
  Some people (for example, those continuing to work) MAY opt to put off using their Medicare benefits until after age 65. However, they still may need to sign up, plus, there’s still lots to consider. To find out more, follow the green/blue “Not Ready for Medicare” tab at left.

Questions? Call 1-866-794-4620 (TTY: 711), April 1 - Sept. 30, 8:00 a.m. to 8:00 p.m., Monday through Friday. Oct. 1 through March 31, 8:00 a.m. to 8:00 p.m., 7 days a week.
If you’ve decided to enroll in Medicare at 65, you need to understand the plan options available to you, as well as know whether or not you need to contact Social Security to register for Medicare.

Most people turning 65 get Part A and Part B automatically. Basically, if you’re already getting Social Security, you’ll get the Medicare “Initial Enrollment Package” this will consist of Medicare Identification card as well as the Medicare Part B application, if you choose to enroll. Read this package carefully to help you make your decisions about Medicare.

Call Social Security to sign up.
If you’re not already getting Social Security benefits, you won’t get any Medicare enrollment information. You’ll need to call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778. Hours are 7 a.m. – 7 p.m., Monday – Friday. If you worked for the railroad, contact the Railroad Retirement Board to sign up.

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YOU HAVE A 7-MONTH WINDOW.

If you enroll in Medicare at the wrong time, it could create gaps in your medical coverage, as well as cost you extra money! You should enroll in your “Initial Enrollment Period,” a 7-month window consisting of the 3 months before you turn 65, the month in which you turn 65, and the 3 months that follow.

Also, even if you don’t apply for Medicare Part B when you’re first eligible for it, you may consider signing up for it anyway. Now that you’re eligible for Medicare you need to maintain creditable prescription drug coverage with no gaps greater than 63 days to avoid penalties.

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Getting ready for Medicare means understanding the ins and outs of the different plan options available to you, then finding the one that best fits your needs. At a very basic level, take a look at the two possibilities below.

**Original Medicare**
Let's you build a plan from scratch.
- **Medicare Part A** is your hospital insurance.
- **Medicare Part B** is your outpatient medical insurance.
- **Medicare Part D** is prescription drug coverage.

**Medicare Advantage** *(Replaces original Medicare)*
A single plan to cover your medical, hospital and, in some cases, prescription drug costs.
- **Medicare Part C plans** *(also known as Medicare Advantage)* sometimes offer additional coverage like hearing, vision and dental care along with your Medicare Part A and Part B benefits.

**Supplements**
- **Medicare Supplement** covers “gaps” in Original Medicare.

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Before you get on the path to Medicare, there are a few things to consider.

Find out if you need to sign up for Medicare Parts A or B.
- If you’re already collecting Social Security retirement benefits when you turn 65, you may be entitled to Medicare Part A (inpatient hospital insurance) and/or Medicare Part B (outpatient medical insurance).
- Otherwise, you can sign up online at SocialSecurity.gov or by calling Social Security at 1-800-772-1213 (TTY/TDD users: 1-800-325-0778). Hours are 7 a.m. – 7 p.m., Monday – Friday.

Choose the Medicare health plan that best meets your overall needs.
- Are you interested in a Medicare Supplement plan and/or a Medicare prescription drug plan?
- Do you want all-in-one coverage through a Medicare Advantage plan?
- When ready to start considering specific plans, visit bluecrossma.com/medicare.

Determine if you need Medicare Part D prescription drug coverage or other extra coverage.
- Do you need a prescription drug plan or do you have one from your employer or your spouse?
- Do you want a plan that helps cover the costs Original Medicare leaves you to pay?

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STEPS TO ENROLLING IN MEDICARE.

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THINGS YOU NEED TO KNOW ABOUT COST.

When reading about Medicare, you will continually run into these four words. Understanding what each means is an important first step to truly understand who pays what and when.

**Premium** is a fixed amount you have to pay for your plan each month. (You are still be responsible Medicare Part B costs which is paid to Social Security, and has not impact on this premium.)

**Deductible** is a preset amount that you pay first before Medicare benefits help with your costs.

**Copayment** (or “a copay”) is a fixed amount that you pay for a service or product.

**Coinsurance** is a fixed percentage that you pay for your health care services.

Want to learn more? Visit MyBluePathMA.com.
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**BUILDING A MEDICARE PLAN THAT’S RIGHT FOR YOU.**

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**READY FOR MEDICARE**

1. **You Now Get More Free Preventive Services.**
   - Health care reform also increased the number of free preventive services available to Medicare beneficiaries. You get an annual free “wellness” visit—a review of your medical history plus education and counseling on preventive services, including certain screenings, shots and referrals for other care, if needed.
   - You’re also entitled to:
     - A free cardiovascular screening every 5 years.
     - Annual mammograms and flu shots.
     - Screenings for diabetes, cervical, prostate and colorectal cancers and more.

2. **Costs in the “Donut Hole” Are Shrinking.**
   - Most Medicare prescription drug plans have a gap in coverage called the “donut hole.” This is a temporary limit on the amount a plan will pay for covered drugs.
   - Because of the Affordable Care Act, the amount a beneficiary pays while in the “donut hole” is gradually shrinking, so that by 2020 beneficiaries will pay just 25% of the costs of their generic and brand name drugs while in the coverage gap.

3. **High Income? You’ll Pay More.**
   - If you choose traditional Medicare and your income is above a certain threshold, you’ll pay more for Parts B and D.
   - Premiums for both parts can come with a surcharge when your adjusted gross income (plus tax-exempt interest) is more than $85,000 if you are single or $170,000 if married filing jointly.

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**NOT READY FOR MEDICARE**

**Supplements**
- Medicare Supplement covers “gaps” in Original Medicare.
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Even if you’re not ready to start using your Medicare benefits at age 65, there are important decisions to make now.

Here’s what you need to know if you are:

**Keeping your employer group benefits**
- You may accept your employer’s (or your spouse’s) coverage.
- The plan will pay first for any of your hospital and medical bills.
- Medicare may pay some of the remaining expenses, helping you avoid gaps in coverage.

**Delaying Medicare Part B (Outpatient Medical Insurance)**
- If you wait to sign up for Part B because you already have employer coverage that covers prescription drug coverage through your employer or spouse.

Get more info and sign up for Medicare advice via email at MyBluePathMA.com.
Even if you’re still working, you will be enrolled into Medicare Part A (Inpatient Hospital Insurance) and Medicare Part D (Prescription Drug Insurance) on their 65th birthday.

- Now that you are eligible for Medicare you need to maintain prescription drug coverage with no gaps in coverage greater than 63 days.
- You may need to provide proof of prior prescription drug coverage upon enrolling into a Medicare Advantage plan.

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KEEPING YOUR CURRENT HEALTH COVERAGE.

As you make decisions about Medicare, consider your current health coverage, whether it’s coverage from a current job, your spouse, insurance you purchased or retiree coverage from your former employer.

Ask if you can keep any coverage you currently have.

Determine what your costs might be.

Go to someone who’s familiar with the details of the coverage you have now.

• An HR manager or benefits specialist.
• Customer service at the insurance company.

If you’re working and plan to keep your employer’s group health coverage, your benefits specialist can help you decide when to enroll in Medicare Part B. You may be able to enroll later during a Special Enrollment Period and avoid paying a penalty.

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MASSACHUSETTS

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