Medicare Advantage (Medicare Part C)

Medicare Part C, or Medicare Advantage, offers an alternative way to receive your Original Medicare benefits (Part A and Part B). Medicare Advantage plans are available from private insurance companies that contract with Medicare. These plans must cover everything that Original Medicare (Part A and Part B) covers, except for hospice care, which Medicare Part A covers even if you have a Medicare Advantage plan. Under Medicare Part C, you receive your Original Medicare coverage through the Medicare Advantage plan rather than directly through Medicare. Most Medicare Advantage plans provide additional benefits beyond Original Medicare, such as prescription drug coverage, routine dental care, vision care, and fitness benefits. If you sign up for Medicare Advantage, you remain enrolled in Medicare Part A and Part B.

Medicare Advantage plans often include networks of clinics, doctors, and hospitals. If you belong to one of these plans, you may need to use providers within the network or face higher out-of-pocket costs.

What Medicare Advantage Plans Are Available?

Here are brief descriptions of common types of Medicare Advantage plans, which are offered by private insurance companies that contract with Medicare. Availability and cost may vary by plan and service area.

- Medicare Preferred Provider Organization (PPO): PPO plans have a network of doctors, clinics, hospitals, and other healthcare providers. You don't need to choose a primary care physician and can see any doctor or specialist who accepts Medicare assignment. Out-of-network care may be covered but typically costs more.
- Medicare Health Maintenance Organization (HMO): HMO plans require you to choose a primary care physician who coordinates your care and refers you to specialists. Going outside the network usually means you pay the full cost of services.
- Medicare Private Fee-for-Service (PFFS): PFFS plans set payment terms rather than Medicare. Some plans allow visits to any doctor or specialist who accepts the plan's terms, while others may have provider networks.
- **Medicare Special Needs Plans (SNPs):** SNPs are tailored for individuals with specific chronic diseases or other special health needs. All SNPs include prescription drug coverage.
- Medicare Medical Savings Account (MSA): MSA plans consist of two parts:
 - o A high-deductible health plan where coverage starts after the annual deductible is met.
 - o A savings account where Medicare deposits funds to help pay toward the deductible.

Do You Need Prescription Drug Coverage?

Not all Medicare Advantage plans include prescription drug coverage, but most do. When comparing plans, ensure that prescription drug coverage is included if you need it. Costs for medications can vary between plans, so comparing costs is important.

Who Can Enroll in a Medicare Advantage Plan?



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To be eligible for Medicare Part C, you must be enrolled in Original Medicare (Part A and Part B). You continue paying your Part B premium plus any premium your Medicare Advantage plan may charge. You must also live within the plan's service area. Generally, individuals with end-stage renal disease (ESRD) are not eligible, though some Special Needs Plans may accept them.

When Can You Enroll?

- **Initial Coverage Election Period (ICEP):** When you first become eligible for Medicare Advantage, your ICEP coincides with your Initial Enrollment Period for Medicare. This period is seven months long, starting three months before you turn 65, includes your birth month, and extends three months after.
 - o If you delay enrolling in Medicare Part B (e.g., due to employer coverage), your ICEP is the three months before your Part B coverage begins. For example, if you enroll in Part B during the General Enrollment Period (January 1 to March 31), with a Part B start date of July 1, your ICEP is from April 1 to June 30.
- Annual Election Period (AEP): The AEP runs from October 15 to December 7 each year. During this period, you can enroll in, switch, or drop Medicare Advantage plans, with new coverage starting January 1 of the following year. You can also add a stand-alone Medicare Part D Prescription Drug Plan or switch from Medicare Advantage back to Original Medicare with a stand-alone Part D plan during this time.
- **Special Election Period (SEP):** You can enroll in or make changes to a Medicare Advantage plan during an SEP under specific circumstances, such as moving to a new address, losing current health coverage, qualifying for different types of coverage, or experiencing significant changes in your current plan.
- Medicare Advantage Open Enrollment Period (OEP): From January 1 to March 31 each year, you can switch Medicare Advantage plans or disenroll from a Medicare Advantage plan and return to Original Medicare, with new coverage starting the first day of the month after the change.

How Do You Enroll?

Understanding the coverage and costs of different Medicare Advantage plans is crucial. Consider premiums, coinsurance, copayments, and deductibles. It's a good idea to review and compare plans carefully and contact Medicare or insurance providers with any questions.



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