

Understanding Your Medicare Plan Options

When you first sign up for Medicare, it's also time to enroll in plans that help take care of the medical bills Medicare leaves behind. The most common coverage options are: Medicare Supplement plans, Medicare Advantage plans and Part D Prescription Drug plans.

MEDICARE SUPPLEMENT PLAN OVERVIEW



Standardized

Benefits Are

The Same For

All Companies



See Doctor

of Your

Choice



Referrals



Not Necessarv

Higher Monthly Premiums

Medicare Suppement Plans

Medicare Supplement plans (sometimes called Medigap plans) are designed to pair with Original Medicare (Parts A and B) to help pay the out-of-pocket costs such as deductibles, copays and coinsurance which are not covered by Medicare.

There are currently 8 standardized Medicare Supplement plan options available to people turning 65. The federal government requires companies to offer the same benefits in each Medicare Supplement plan option.

While the benefits offered by each company will be the same, rates can vary widely based on age, sex and location. As a result, it makes sense to comparison shop to make sure you're enrolling in a Medicare Supplement that fits your budget.

Medicare Supplement plans do not use provider networks or require referrals. As long as a doctor or hospital accepts Medicare, they'll also accept your Medicare Supplement plan. This can be important – especially if you're planning to travel during retirement or spend the winter months enjoying warmer climates as a snowbird.

Caregiver choice may also be an important consideration if you live in a more rural area with less access to a wide range of doctors and hospitals. In that case, enrolling in a Medicare Supplement plan may make sense to help ensure your ability to continue seeing your current physician or medical specialist.

MEDICARE ADVANTAGE PLAN OVERVIEW





Monthly Premiums As Low As \$0

Affordable Preventive Care



Limits On Out-of-Pocket Costs



Additional Benefits



Doctors And Hospitals Within A Network



Medicare Advantage Plans

More than half of all Americans eligible for Medicare now enroll in Medicare Advantage plans.*

Medicare Advantage plans (Medicare Part C) give you the same level of doctor and hospital benefits as Original Medicare – with monthly premiums that are often significantly lower.

At the same time, Medicare Advantage plans often deliver a wide range of additional benefits at no extra cost. These can include benefits for:

- Prescription drugs
- Dental care
- Eye doctor visits and glasses
- Hearing exams and hearing aids
- Wellness expenses such as gym memberships

Medicare Advantage plans also help protect your budget by limiting the amount of money you'll pay out of your own pocket each year for covered care.

Especially if you'll be living on a fixed income during retirement, the money-saving aspect of a Medicare Advantage plan may be attractive. Research shows that people with Medicare Advantage coverage spend an average of \$2,541 LESS each year on their health care and premiums than people who rely on Original Medicare with a Medicare Supplement plan.**

The network aspect of Medicare Advantage plans, however, is an important consideration. It's critical to make sure your current doctors and hospitals participate in a plan's network before enrolling. Also, if you'll be choosing a new physician from a plan's network, verify that they're accepting new Medicare patients before making the switch.

PART D PRESCRIPTION DRUG PLAN OVERVIEW





Protect Your Savings Against High Drug Costs

Benefits Organized In Tiers Based

On Type Of Drug



Low Monthly Premiums



Part D Prescription Drug Plans

Prescription drug benefits are not included in Original Medicare or Medicare Supplement Plans. As a result, many people who choose Medicare Supplement coverage when they enroll in Medicare also sign up for a Part D Prescription Drug Plan at the same time.

Many Medicare Advantage plans, on the other hand, include prescription drug benefits. In that case, you would not need to enroll in a separate Part D Prescription Drug plan.

Prescription drug plans help protect your wallet against the cost of expensive medications. Medicare requires insurance companies to include a certain level of prescription benefits but above that point plans differ from company to company.

Benefits are usually organized in "tiers" with generic medicines being the least expensive and specific brand-name drugs costing more. It's important to pay attention to which tier a medication may be classified in within different plans. As a result, it makes sense to try to plan ahead for any prescription drugs you might take in the coming year to better select a plan which could deliver more savings for you.



Blue Cross and Blue Shield of Nebraska offers a wide range of Medicare Supplement plans, Medicare Advantage coverage and Part D Prescription Drug plans.

Call 844-448-3499 (TTY 711) today for more details on plan options.

Hours: 8 a.m. to 9 p.m. CST, seven days a week from Oct. 1 through March 31; 8 a.m. to 9 p.m. CST, Monday through Friday from April 1 through Sept. 30

*"10 reasons why Medicare Advantage enrollment is growing and why it matters," KFF.org, 1/30/24

**"Better Medicare Alliance Releases Annual State of Medicare Advantage Report for 2024," bettermedicarealliance.org, 9/16/24

Blue Cross and Blue Shield of Nebraska is an independent licensee of the Blue Cross Blue Shield Association. Blue Cross and Blue Shield of Nebraska is an HMO and PPO plan with a Medicare contract. Enrollment in Blue Cross and Blue Shield of Nebraska Medicare Advantage depends on contract renewal. This is a solicitation of insurance and an agent may contact you. Blue Cross and Blue Shield of Nebraska is not connected with or endorsed by the United States Government or the federal Medicare program.