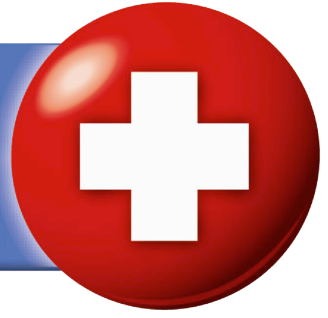


MedicareMall
.com



Medicare Made Simple

877-413-1556

Who are we?

MedicareMall is the nation's premier enrollment center for Medicare Supplement Plans, Medicare Part D (prescription drug plans,) and Vision & Hearing Insurance Plans. We understand that Medicare is confusing so we promise to navigate you through the maze of Medicare.

There are so many options available to you, it can be difficult to find the one best suited to your needs. We will do the searching for you because we know your time is better spent focusing on the more important things in life.

Understanding Medicare

Original Medicare

There are four parts to Medicare. After you turn 65, you qualify for Medicare Part A and have the option of enrolling in Medicare Part B. Medicare Part A deals with in-patient hospital costs. Medicare Part B handles medical costs, such as, doctor visits, clinics, and out-patient surgery. There is a monthly premium associated with Medicare Part B of \$115.40.*

*The monthly premium for people with high annual income could be more.

Medicare Advantage

Medicare Part C or Medicare Advantage, is not part of Original Medicare nor is it a separate benefit. Part C is made up private insurance companies that offer the same benefits Medicare Parts A and B. Some plans include coverage for prescription drugs while some require a stand alone prescription drug plan known as Medicare Part D. While premiums may appear to be less, the price you pay is network limitations. Most Medicare Advantage plans require you to use their physicians, clinics, and hospitals.

Medicare Part D

Benefits associated with prescription drug plans usually fall under the category of Medicare Part D. The prescription needs of Medicare beneficiaries differ with each person's individual



health condition. For this reason, there are many types of plans available. Plans will have different pharmacies, premiums, deductibles, copays, covered drugs, and other limitations.

Medigap / Medicare Supplement Insurance

Medigap is a type of insurance plan that fills the gaps left by Original Medicare. This type of insurance is designed to supplement your basic benefits to give you the best health care coverage available. Medigap plans are also referred to as Medicare Supplement Insurance plans. You are still required to enroll in both Medicare Part A and Medicare Part B and purchase a Medicare Part D prescription drug plan. Medigap provides the most flexibility. You have no network limitations, which means as long as your provider accepts Medicare you can use the doctor, clinic, or hospital of your choice.



| Medicare Part A | Medicare Part B | Medicare Part C | Medicare Part D | Medigap* |
|---|--|---|---|---|
| <ul style="list-style-type: none"> • Inpatient care (hospitalization) • Skilled nursing facility care • Home health care • Hospice care | <ul style="list-style-type: none"> • Doctors' services • Outpatient care • Home health care • Preventive services • Labs and x-rays | <ul style="list-style-type: none"> • Part A included (except hospice care) • Part B included • Also known as Medicare Advantage. • Added value benefits may be included • Must use provider & hospital network | <ul style="list-style-type: none"> • Prescription drugs • Plans offered by private companies • Covered drugs vary • Four plan stages <ol style="list-style-type: none"> 1. Deductible 2. Initial Coverage 3. Coverage Gap 4. Catastrophic (donut hole) | <ul style="list-style-type: none"> • Covers Part A and Part B deductibles • Foreign travel emergency • Skilled nursing coinsurance • Part B coinsurance • Coverage available for excess Part B charges <p>*Coverage will vary from plan to plan.</p> |

Top 10 Things to Know Before Purchasing:

1. **What is Medicare Supplement (Medigap) Insurance?**

It is a private health insurance policy designed to pay for gaps in physician and hospital coverage left by Medicare Part A and Medicare Part B.

2. **What does a Medicare Supplement Policy Cover?**

Medicare Supplement Policies cover medical procedures approved by Medicare at a Medicare Provider.

3. **Who is eligible for a Medicare Supplement Insurance?**

Anyone who is covered under both Medicare Part A and Medicare Part B. Medicare Supplement Insurance Companies reserve the right to set further qualification criteria beyond Medicare Eligibility at their own discretion but can not exclude any person who is in an Open Enrollment or Guaranteed Issue situation.

4. **What types of Medicare Supplement plans are available?**

Most states only allow standardized Medicare Supplement Insurance Plans A-N. Any company offering coverage is required to offer the base plan (Medigap Plan A) and any other combination of Medigap plans B-N at their discretion.

5. **What are the plan differences between companies?**

The coverage benefits between Medigap companies for doctor and hospital visits is exactly the same for the same standardized Medicare Supplemental policy. For instance, a Medigap Plan F with one insurance company will pay exactly the same as a Medigap Plan F with any other company. The only difference will be which Medigap plans are offered and rates for each plan.

6. **Pre-Existing Conditions:**

Some Medicare Supplement companies may have a pre-existing conditions provision that limits their liability on previous medical problems for up to 6 months after the issue date of the policy; however, some companies will not exercise this option.

If you had “credible coverage” and were covered under an employer sponsored health plan or another Medigap policy the pre-existing condition limitation will not apply.

7. **Pricing Differences:**

Plan rates vary from company to company, plan to plan, and from area to area. There is



no standardization of pricing for Medigap Insurance Plans. You could pay substantially more for the exact same coverage if you do not shop around for the best Medigap rate for your particular situation.

8. Choice of Doctors and Hospitals:

Medicare Supplement Insurance Plans have no limitations on what doctors or hospitals that you go to. There are no restrictive networks. You simply choose any provider that accepts Medicare, and your Medicare Supplement Insurance Plan will pay that provider as stated in your Medigap policy.

9. Claims:

Medicare Supplement Insurance Plans have a very easy claims process that are automatically electronically filed. For Medicare Part B claims, each Medicare Supplement Insurance company is linked directly to Medicare. Medicare will send a copy of the claim and how they paid (known as an Explanation of Benefits or EOB) to your Medicare Supplement provider each time they pay a claim. This is the information that the Medigap Insurance Companies use to determine how to pay your Medicare claim. Because the claims come directly from Medicare, there is no need for you or your doctor to file a claim for outpatient services.

10. Rate Increases: There are three types of Medigap rates.

Attained age Medigap rates are based on your current age at time of enrollment into the plan, and these rates will be incremented by the year. So the sixty five year old will have a different premium than the sixty six year old and on up the age scale.

Banded or Issue age Medigap rates is where the Medicare Supplement Insurance company may chose to offer the same rate for those between certain ages. For example, the rate will be the same for those between sixty five and sixty nine, seventy and seventy four, and so forth.

Community Medigap rates are when the Medicare Supplement Insurance company offers everyone in the community or state the same Medigap rate for the same Medicare Supplement plan. In this case the sixty five year old would have the same Medigap premium as the eighty five year old.

Why do I need Medicare Supplemental Insurance?

Medicare was never designed to cover 100 percent of all your medical care. The fact is Medicare's cost to beneficiaries has risen most every year since its inception in 1965, and benefits have declined in many areas. There are real "gaps" in Medicare benefits and these gaps create the need for Medicare Supplement Insurance. That's why this type of insurance is referred to as "Medigap" insurance.

Original Medicare provides coverage for most medically necessary hospital bills and doctor's fees for participating providers. However, the gaps appear early and often. You will realize gaps the first day in the hospital. The Medicare Part A deductible will be one of your first responsibilities when you are admitted to the hospital. This Medicare Part A deductible can be paid up to five times per year due to Medicare's benefits periods and you can expect similar treatment with Medicare Part B. For example, whether you are in the hospital, at the clinic, or in your physician's office you will be responsible for the medical (Part B) deductible.

Your gaps have just begun. Medicare does not approve every procedure, and you will be responsible for the remaining 20 percent coinsurance for your medical (Part B) charges. Statistically Medicare beneficiaries spend most of their time with their physician in the office, clinic, or other outpatient facility. The services and supplies that Medicare doesn't cover can add up pretty quickly if illness strikes. This has increased the need for Medicare Supplement Insurance Plans. This isn't to say that Medicare coverage can't be a financial lifesaver because it can.

Remember, all Medicare Supplemental Insurance plans are standardized in all states. However their cost, eligibility, and service can vary significantly from insurance company to insurance company. It's important to take advantage of the MedicareMall.com free quoting service. This is available to make the process much easier and less frustrating. Plus you can take advantage of our expert advice if you would like tips on selecting Medicare Plans.

Medicare Supplemental Insurance and Disability

If you are *under* 65 and on Medicare disability, you can qualify for Medicare Supplemental Insurance, depending on your state of residence. After you get disability benefits from Social Security or certain disability benefits from the RRB for 24 months, you automatically qualify for Medicare Part A and Medicare Part B. In some states, this allows you to enroll in a Medicare Supplement Plan. Again, states will vary in eligibility requirements so contact your State Manager listed below for inquiries about disability.

What is the next step? How do I enroll?

Step 1: Make a list of any questions you may have.

Step 2: Call your State Manager,
877-413-1556

Step 3: We will guide you through the enrollment process.