

Medicare Supplement Solutions

Hammond Health Service LLC

Overview of Medicare



Brief history of Medicare

July 30, 1965, President Lyndon B. Johnson signed Medicare into law at the Harry S. Truman Library, he told the nation that it had “all started with the man from Independence Missouri.” Harry S. Truman. Medicare is the federal health insurance program created for people ages 65 and over, regardless of income, medical history, or health status. The program was expanded in 1972 to cover people under age 65 with permanent disabilities and again in 2006 to include Part D. The program helps to pay for many medical care services, including hospitalizations, physician visits, and prescription drugs, along with post-acute care, skilled nursing facility care, home health care, hospice care, and preventive services.



https://www.google.com/search?tbm=isch&sa=1&ei=6qNbWgPnBLOJmwXL8liIDA&q=Brief+history+of+Medicare&oq=Brief+history+of+Medicare&gs_l=img.3...741566.745295.0.746145.5.5.0.0.0.56.56.1.1.0...0...1.1.64.img..4.0.0.0...0.Gn58rUNT7Js#imgsrc=QkMHfzBwEu02oM:&spf=1532733145553

Original Medicare A & B

Part A – In-Patient Hospital

\$ 0 Premium

No Networks

\$1,736 Deductible
(per benefit period)

Hospital co-pays:

Days 1- 60 = \$1,736 deductible

Days 61-90 = \$434 per day

Days 91-150 = \$868 per day

Skilled Nursing Facility Co-pays

Days 1-20 = \$0

Days 21 – 100 = \$217 per day

Home Health Hospice:

Days 1 – 60 covered 100%

Assignment : Doctors Accepts Medicare Approved Amounts (MAA)

Excess Charges: Doctors are allowed to charge you up to 15% more than the MMA

Part B – Out-Patient

\$202.90 Premium

No Networks

Outpatient services

Doctors & specialists

Durable medical equipment


\$283 Annual Deductible

Medicare pays 80%

You Pay 20%

Your 20% is uncapped

You are responsible for all Doctors Excess Charges



Original Medicare Parts A & B are the foundation of your Healthcare. You select one of the following two options after you start Medicare.

Medicare Advantage

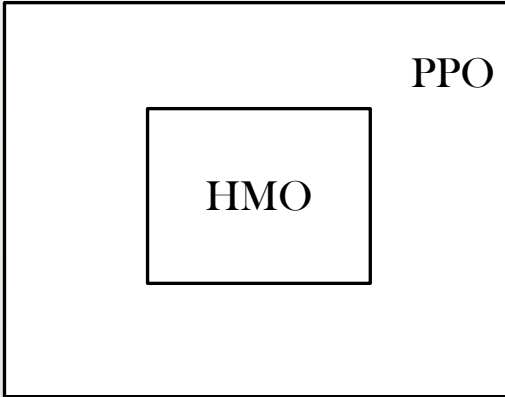
- Replaces Original Medicare Parts A & B
- Network of hospitals & doctors
- Co-pays
- Deductibles
- No medical Underwriting
- \$0 - \$80 monthly cost

Medicare Supplement

- Works with Original Medicare
- Federally standardized plans
- All Plans identified by the same letter have the same benefit
- No networks; accepted nationwide
- You're in charge NOT the insurance company
- Medical underwriting is required after your (IEP)

Part C – Medicare Advantage

Networks:



No Medical Underwriting

Maximum Annual out-of-Pocket: \$3,400 - \$10,000

Co-Pay Examples:

Doctors Visit: \$0 - \$40

Specialist Visit: \$40 - \$50

ER Visit: \$75

Ambulance: \$250 - \$300

Test/Labs: \$0 - \$50

X-Rays: \$0 - \$50

Scans: \$200 - \$400

Outpatient Surgery: \$275 - \$400

Hospital Stay: \$300 per day 1- 6. \$0 after day 6

Medicare Supplement (Medi-Gap)

Medicare Supplements Insurance helps cover the expenses that comes with the gaps in Original Medicare. Each State's **Insurance Department** is responsible for regulating Medicare Supplement Insurance sold in their state. Medicare Supplements are broken down into plans identified by letters- A, B, C, D, F, G, K, L, M & N. These plans are **Federally Standardized** and must follow federal and state laws which have been created to protect you the consumer. ***You must go through Medical Underwriting after your**

initial enrollment.

These plans are sold by private insurance companies, but **ALL PLANS IDENTIFIED BY THE SAME LETTER HAVE THE SAME BENEFITS.**

For Example, plans identified as a Plan G in all 50 states are **Identical**, regardless of the company that is selling it. However, the cost will vary depending on the company that provides the plan.

- **On average last year I saved my clients \$670 moving from one company to another!**

Medicare Supplement Options

Plan F: No longer for sale after 1/1/20

Plan G: Pays all A&B Gaps* Except the Annual \$283 Part B deductible

Plan N: Pays all A&B Gaps* Except the Annual \$283 Part B deductible & Excess Charges. Plus \$20 Doctor Co-pay & \$50 ER Co-pay

Important Note:

Plan F is being phased out. If you are new to Medicare after 1/1/2020 you will not be able to buy a Plan F.

These three Plans make up 92% of the market.

Medigap Benefit	Plan A	Plan B	Plan C	Plan D	Plan F*	Plan G*	Plan K	Plan L	Plan M	Plan N
Part A coinsurance and hospital costs up to an additional 365 days after Medicare benefits are used	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part B coinsurance or copayment	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓****
Blood benefit (first 3 pints)	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Part A hospice care coinsurance or copayment	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Skilled nursing facility care coinsurance	✗	✗	✓	✓	✓	✓	50%	75%	✓	✓
Part A deductible	✗	✓	✓	✓	✓	✓	50%	75%	50%	✓
Part B deductible	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗
Part B <u>excess charge</u>	✗	✗	✗	✗	✓	✓	✗	✗	✗	✗
Foreign travel emergency (up to plan limits)	✗	✗	80%	80%	80%	80%	✗	✗	80%	80%
Out-of-pocket limit**	N/A	N/A	N/A	N/A	N/A	N/A	\$7,060 in 2024 (\$7,220 in 2025)	\$3,530 in 2024 (\$3,610 in 2025)	N/A	N/A

Part B deductible is \$283

✓= the plan covers 100% of this benefit

✗= the plan doesn't cover this benefit

% = the plan covers that percentage of this benefit and you're responsible for the rest

N/A = not applicable

The Medigap policy will only pay your coinsurance after you've paid the deductible (unless the Medigap policy also covers your deductible).

What about my prescriptions?

Part D - Drug Plans

Annual Deductible: \$0 - \$500

Coverage / Co-pays

Tier 1: \$0 - \$60

Tier 2: \$0 - \$12

Tier 3: \$20 - \$45

Tier 4: \$35 - \$95

Tier 5 Specialty: 25% - 33%

Tier 6 Not on formulary: Full retail cost

New for 2026: \$2,100 Cap on covered Part D drugs

Starting 1/1/2025, all Medicare Rx plans will include a \$2,100 CAP on what you pay out-of-pocket for prescription drugs covered by your plan. If your out-of-pocket spending on covered drugs reaches \$2,100 (including certain payments made on your behalf, like through the Extra Help program), **you'll automatically get "catastrophic coverage."** That means you won't have to pay out-of-pocket **for covered Part D drugs** for the rest of the calendar year.

(IEP) Initial Enrollment Period

Three months before, the month of & three months after your 65th birth month. Coverage automatically approved for the plan you choose

(AEP) Annual Open Enrollment Period

October 15th – December 7th Change from one Medicare Advantage plan to another

(OEP) Open Enrollment Period

January 1st – March 31st

• What you can Do:

Make a one-time change from:

- Medicare Advantage → Medicare Advantage
- Medicare Advantage → Medicare Supplement (must pass underwriting)



Getting your Medicare Card

Who needs to enroll in Medicare?

For some people it is automatic

People Turning 65 who are receiving Social Security or Railroad Retirement Board checks

Medicare coverage begins the first day of the month you turn 65

Your Card will arrive approximately 100 day before your birth month.

Some people will need to self-enroll

People turning 65 who are not receiving Social Security or Railroad Retirement Board checks

Enroll online at www.socialsecurity.gov/medicare *Easiest

If still working sign up for Medicare at least two months before you intend on retiring.

Call S.S. # 1-800-772-1213

Visit your local S.S. office

Once enrolled, your card will arrive in approximately four weeks

NEXT STEPS

1. Fill out follow up form after in person workshop.
2. Schedule appointment at www.hammondhealthservice.com on our (contact us) tab after webinar.
3. Review all options sign up for best fitting plan.
4. Relax knowing you are all taken care of by and industry expert who has been serving seniors since 2010!



Why Use Hammond Health Service LLC?

I have worked in the Medicare industry since 2010. During my career, I have attended countless continuing education classes and seminars within the industry that have facilitated me getting to where I am at now. As a 100% Independent Medicare Insurance Advisor, who is licensed with the TOP 20 most competitive Medicare Insurance Company's in Kansas, Missouri and 15 other states, I am not restrained by any particular insurance company. I do not direct people toward one company or plan vs. another. My complete and comprehensive understanding of Medicare Advantage and Medicare Supplement laws secures my client's rights while providing them the most up-to-date understanding of their benefits and Medicare as a whole. As a nonpartisan, neutral, and independent educator, I also teach Medicare recipients how to get the Best Part D Rx Drug plan for seniors at the lowest prices every year. I also re-shop everyone of my clients rates every two years to make sure they are always getting the best possible price available to them. I have educated thousands of seniors and their family members, making them confident and knowledgeable about their Medicare.

Medicare Tips

1. Do not ask friends or family for their advice rather, ask them what they like and don't like about their Plan. No two people have the same medical needs.
2. Do not ask for information online
3. Speak with a Medicare Expert
4. **Financial peace of mind → Shop with an Independent Advisor It cost you nothing!!!!**

May God Bless you, your family and America!!

THANK YOU!

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