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Updated January 2022

Medicare Enrollment Costs in Medicare Help with Costs Choices in Medicare



HIICAP

Health Insurance Information,
Counseling and Assistance
Program

Medicare questions? Call Aging Connect at 212-244-6469



**Department for
the Aging**

Medicare Enrollment

Part B

Medicare Enrollment

- **Initial Enrollment Period**
 - 7 months surrounding month of eligibility
 - Enroll in last 3 months
 - Part B will be delayed
- **Special Enrollment Period**
 - Covered under active/current employment
 - Starting first month eligible for Medicare
 - Can delay enrollment in Part B without penalty
- **General Enrollment Period**
 - January – March (Part B effective July 1)
 - Subject to late enrollment penalty
 - 10% for every full 12 months delayed



MEDICARE HEALTH INSURANCE

Name/Nombre

JOHN L SMITH

Medicare Number/Número de Medicare

1EG4-TE5-MK72

Entitled to/Con derecho a

HOSPITAL (PART A)

MEDICAL (PART B)

Coverage starts/Cobertura empieza

03-01-2016

03-01-2016

Costs in Medicare Part B, Part A, and Part D

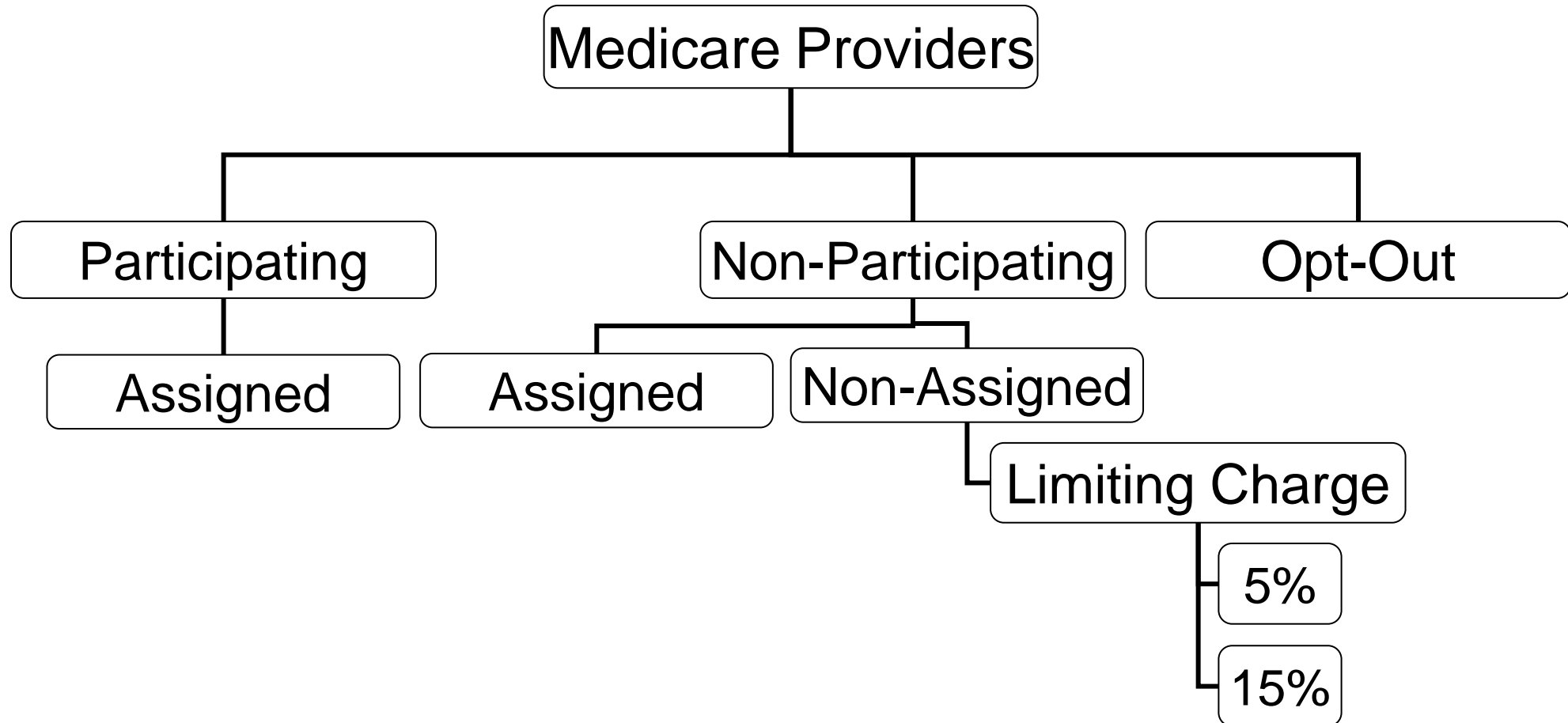
Income-Related Monthly Adjustment Amount (IRMAA) for Higher Income Medicare Beneficiaries in 2022

2020 Modified Adjusted Gross Income (MAGI)	Part B Monthly Premium	Part D (Prescription Drug) Monthly Premium
Individuals with a MAGI of \$91,000 or less / Married couples with a MAGI of \$182,000 or less	2022 Standard Premium = \$170.10	Your Plan Premium
Individuals with a MAGI \$91,000 - \$114,000/ Married couples with a MAGI \$182,000 - \$228,000	\$238.10	Your Plan Premium + \$12.40
Individuals with a MAGI \$114,000 - \$142,000/ Married couples with a MAGI \$228,000 - \$284,000	\$340.20	Your Plan Premium + \$32.10
Individuals with a MAGI \$142,000 - \$170,000/ Married couples with a MAGI \$284,000 - \$340,000	\$442.30	Your Plan Premium + \$51.70
Individuals with a MAGI \$170,000 - \$500,000/ Married couples with a MAGI \$340,000 - \$750,00	\$544.30	Your Plan Premium + \$71.30
Individuals with a MAGI greater than \$500,000 / Married couples with a MAGI greater than \$750,000	\$578.30	Your Plan Premium + \$77.90
Married filing separately with a MAGI less than \$91,000	\$170.10	Your plan premium
Married filing separately with a MAGI \$91,000 - \$409,000	\$544.30	Your Plan Premium +\$71.30
Married filing separately with a MAGI \$409,000 and greater	\$578.30	Your Plan Premium +\$77.90

Deductible/Coinsurance

- **Part B Deductible**
 - \$233
- **Part B Coinsurance**
 - 20% coinsurance for most services
- **Laboratory Tests**
 - Not subject to deductible or coinsurance
 - **(Most) Preventive Services**
- Not subject to deductible or coinsurance

Medicare Assignment/Participation/Opt-Out Summary



Part A Cost-Sharing

- **Inpatient deductible**

(Days 1-60) \$1,556 per benefit period

- **Coinsurance days**

(Days 61-90) \$389 per day

- **Lifetime reserve days**

(60 Days) \$778 per day

- **Skilled nursing facility**

(Days 21-100) \$194.50 per day

- **Benefit periods**

Non-covered Services

- Dental care
- Routine Vision/Eyeglasses *
- Hearing Aids
- Long Term Care
- Routine Annual Physical Exam *
- Services outside of USA

Medicare Prescription Drug Coverage (Part D)

- **Optional/Voluntary/Penalty**
 - 1% per month of average national premium
- **19 Available Stand-Alone Part D Plans**
 - **Formulary and Pharmacy Network**
 - **Enrollment Periods**
 - October 15 – December 7 (AEP)
 - Special Enrollment Periods
 - **Part D Plan Cost-Sharing**
 - Premium
 - \$480/\$4,430/\$7,050

Help with Costs

Extra Help/LIS, EPIC, and Medicare Savings Program

(Part D) Extra Help/LIS

Full Extra Help/LIS

- Automatic with Medicaid and/or Medicare Savings Program
 - Otherwise, need to apply to Social Security for LIS
 - Income Limit
 - \$1,469 (\$1,980 for couples)
 - Asset/Resource Limit
 - Up to \$9,900 (\$15,600 for couples)

Partial Extra Help/LIS

- Income Limit
 - \$1,630 (\$2,198 for couples)
- Asset/Resource Limit
- \$15,510 (\$30,950 for couples)

EPIC

1. \$75,000/\$100,000
2. Fee or Deductible Plan
3. Supplements Part D But Does Not Cover Deductible
4. Maximum Co-Pay \$20
5. SEP to Switch Part D Plans

1-800-332-3742

Fillable Application:

<https://www.health.ny.gov/forms/doh-5080-fillin.pdf>



and Medicare Working Together

What Is EPIC?

The Elderly Pharmaceutical Insurance Coverage (EPIC) program is a New York State program administered by the Department of Health. It provides seniors with co-payment assistance for Medicare Part D covered prescription drugs **after any Part D deductible is met**. EPIC also covers many Medicare Part D excluded drugs.

- **Fee Plan** members pay an annual fee to EPIC based on their income. The EPIC co-payments range from \$3 - \$20 based on the cost of the drug. Those with Full Extra Help from Medicare have their EPIC fee waived.
- **Deductible Plan** members must meet an annual out-of-pocket deductible based on their income before paying EPIC co-payments for drugs.

EPIC also pays Medicare Part D plan premiums, up to the amount of a basic plan, for members with annual income below \$23,000 if single or \$29,000 if married.

Those with higher incomes must pay their Part D plan premiums.

- To help them pay, their EPIC deductible is lowered by the annual cost of a Medicare Part D basic plan.
- EPIC deductibles for income in shaded areas on the Deductible Plan schedule will be less than the amounts shown.

Who can join?

- A resident of New York State 65 or older with annual income up to \$75,000 if single or \$100,000 if married.
- An eligible senior with a Medicaid spend down not receiving full Medicaid benefits.

Medicare Part D Enrollment

All EPIC members must have Part D in order to receive EPIC benefits. Because EPIC is a qualified State Pharmaceutical Assistance Program, members are able to join a Part D plan during the year once enrolled in EPIC. They also can change their Medicare Part D plan one time during the year.

"Extra Help" can save money!

If EPIC determines a senior may be eligible for Extra Help, EPIC will mail a Request for Additional Information (RAI) form. The senior is then required, by law, to provide the additional information to obtain EPIC coverage.

- Seniors who already receive Extra Help can send a copy of their determination letter from Social Security Administration with their form.
- If approved for full Extra Help, the senior will have lower co-payments and will not have a Medicare Part D coverage gap. Medicare and EPIC will pay all or most of the monthly Part D plan premium.
- EPIC will use the information on the RAI form to apply for Extra Help on the senior's behalf and it will not be used for EPIC determination.

How to Apply

- Complete the application, sign it and mail it to the address below.
- Apply separately or spouses living together can both use the same form.
- Report the total income for you and your spouse if living together (even if only one is applying) and both must sign the form.

For more information call the toll-free EPIC Helpline at **1-800-332-3742 (TTY 1-800-290-9138)**
Download an application at: http://health.ny.gov/health_care/epic/application_contact.htm
choose which language version or write:

EPIC
P.O. Box 15018
Albany, New York 12212-5018

Medicare Savings Programs

- **NO resource limit for NYS residents**
- **Qualified Medicare Beneficiary (QMB)**
 - \$1,094/month individual - \$1,472/month couple
 - Covers premiums, deductibles and coinsurance
- **Specified Low Income Beneficiary (SLMB)**
 - \$1,308/month individual - \$1,762/month couple
 - Covers Part B premium ONLY
 - **Qualified Individual 1 (QI-1)**
 - \$1,469/month individual - \$1,980/month couple
 - Covers Part B premium ONLY
- **Automatically qualify for Part D Full Extra Help**

Medigap/ Medicare Supplement

Medigap

- Ten plans (A-N)
- All plans cover Part A coinsurance (Days 61-90), (60) lifetime reserve days plus 365 additional days
 - All cover Part A deductible except Plan A
 - Most plans cover entire Part B (20%) coinsurance
- Standard Benefit/Continuous open enrollment
- Up to 6 month waiting period (WP) for pre-existing conditions BUT credit prior coverage toward WP
- https://www.dfs.ny.gov/consumers/health_insurance/supplement_plans_rates
- People newly eligible for Medicare in 2020 (or later) CANNOT purchase Plan C or Plan F

BENEFITS INCLUDED IN THE TEN STANDARD MEDICARE SUPPLEMENT PLANS

Basic Benefit: Included in all plans

•**Hospitalization:** Part A copayment, coverage for 365 additional days after Medicare benefits end, and coverage for 60 lifetime reserve days copayment.

•**Medical Expenses:** Part B coinsurance (generally 20% of Medicare-approved expenses).

•**Blood:** First 3 pints of blood each year.

•**Hospice:** Part A cost sharing.

High Deductible Plan F and Plan G – \$2,490

A	B	C	D	F*	G*	K	L	M	N
Basic Benefit	Basic Benefit	Basic Benefit	Basic Benefit	Basic Benefit	Basic Benefit	Basic Benefit**	Basic Benefit**	Basic Benefit	Basic Benefit**
		Skilled Nursing Coinsurance	Skilled Nursing Coinsurance	Skilled Nursing Coinsurance	Skilled Nursing Coinsurance	Skilled Nursing Coinsurance (50%)	Skilled Nursing Coinsurance (75%)	Skilled Nursing Coinsurance	Skilled Nursing Coinsurance
	Part A Deductible	Part A Deductible	Part A Deductible	Part A Deductible	Part A Deductible	Part A Deductible (50%)	Part A Deductible (75%)	Part A Deductible (50%)	Part A Deductible
		Part B Deductible		Part B Deductible					
				Part B Excess	Part B Excess				
		Foreign Travel Emergency	Foreign Travel Emergency	Foreign Travel Emergency	Foreign Travel Emergency			Foreign Travel Emergency	Foreign Travel Emergency
						Out of Pocket limit \$6,620	Out of Pocket limit \$3,310		

MEDICARE SUPPLEMENT INSURANCE POLICIES

Please call the individual companies directly for their most current monthly rates as they are subject to change. Updated rate charts are available at the NYS Department of Financial Services website:
https://www.dfs.ny.gov/consumers/health_insurance/supplement_plans_rates

*Globe Life Insurance (formerly First United American) premiums differ by zip code. Use above link to find rates where you live.

** Only individuals who were Medicare eligible prior to January 1, 2020 are able to purchase Medigap Plans C, F and F+.

<u>PLAN</u>	<u>Aetna</u> 800-345-6022	<u>Bankers</u> <u>Conseco</u> 800-845-5512	<u>Empire</u> <u>Blue Cross</u> <u>Blue Shield</u> 855-306-9355	<u>Globe Life</u> <u>Insurance*</u> 800-331-2512	<u>Emblem/</u> <u>GHI</u> 800-444-2333	<u>Humana</u> 800-486-2620	<u>Mutual of</u> <u>Omaha</u> 800-228-9999	<u>Transamerica</u> <u>Financial</u> 800-752-9797	<u>United</u> <u>Health</u> <u>(AARP)</u> Must be an AARP member to enroll (age 50+) 800-523-5800
A	\$318.21	\$413.54	\$179	\$240/268	\$194.87	\$321.19	\$351.72	\$195	\$188.50
B	\$362.44	\$540.65	\$241.11	\$328/368	\$253.28	\$362.61	\$512.25	\$257	\$270.50
C**				\$397/444	\$300.87	\$439.46	\$512.82	\$304	\$332.25
D				\$391/438			\$503.90	\$280	
F**	\$422.90	\$729.96	\$337.83	\$374/419	\$530.29	\$448.38	\$516.15	\$306	\$320.00
F+**		\$75.69		\$69/77	\$74	\$93.09			
G	\$406.26	\$671.84	\$291.75	\$348/390	\$302	\$400.38	\$478.04	\$281	\$280.25
G+		\$75.69		\$69/77	\$67.69	\$92.97			
K		\$112.08		\$137/154		\$209.34		\$140	\$88.00
L		\$322.45		\$206/231		\$298.98		\$208	\$182.75
M		\$446.65					\$526.10	\$256	
N		\$439.55	\$207.60	\$259/290	\$220	\$284.05		\$241	\$211.25

Medicare Advantage

Medicare Advantage (MA)

- **Eligibility**

- Must Have Parts A and B
- Must Live in Service Area of Plan

- **Enrollment**

- October 15 – December 7 (Annual Election Period)
- January 1 – March 31 (MA Open Enrollment Period)

- **Benefits/Costs**

- Covers at least what Medicare does
 - Plus Additional benefits (Hearing Aids/Dental/Vision)
- Fixed co-payments (or coinsurance) for most services
 - Up to Maximum Out of Pocket (MOOP)
 - \$7,550/\$11,300 (2022)

Types of Medicare Advantage Plans

Health Maintenance Organization (HMO)

- In-Network Benefits ONLY

HMO-Point of Service (HMO-POS)

- Limited Out-of-Network Coverage

Preferred Provider Organization (PPO)

- Access to out-of-network (OON) Medicare Providers

Choices in Medicare

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graph TD; A[Choices in Medicare] --> B[Original Medicare + Medigap]; A --> C[Medicare Advantage];
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Original Medicare + Medigap

- More provider choice
- More complete coverage
 - Higher premium

Medicare Advantage

- Provider Network
- Higher cost-sharing
- Lower Premium
- Extra Benefits

NYC Medicare Advantage Plus Plan

NYC Medicare Advantage (MA) Plus Plan for NYC Retirees

- NYC retirees automatically switch to new NYC MA Plus Plan
 - Effective April 1, 2022
 - Can opt-out to retain their current plan
 - Must do so by March 31
- Currently, most NYC retirees have Senior Care plan
 - Works as supplement to Original Medicare
 - Does not cover Part B deductible plus has additional \$50 deductible
 - Senior Care is \$0 premium
- NYC Medicare Advantage Plus will be \$0 premium option
 - Starting April 1, 2022, Senior Care will be \$191.57 per month
 - Plus \$2.83 for 365 Hospital Rider
 - New additional cost-sharing to match NYC MA Plus plan (effective Jan. 2022)
- Some retirees in HIP VIP plan
 - Continues to be \$0 premium in 2022 BUT must opt-out to remain in plan

NYC Medicare Advantage (MA) Plus Plan for NYC Retirees

- Highlights of NYC Medicare Advantage Plus Plan
 - Preferred Provider Organization (PPO) Plan
 - Can use any Medicare provider throughout the United States
 - Plan pays Medicare rates for out-of-network providers
- Same cost-sharing in and out of network
 - \$253 Deductible; \$15 Co-Pays for Specialist and Other Service
 - \$300 Inpatient Hospital Stay
 - Same as Senior Care (in 2022)
 - Note: Deductible will remain \$253 for first 5 years
- \$1,470 Maximum out of Pocket (MOOP)
 - Combined In and Out-of-Network Part A and Part B Services
- Additional Benefits
 - Including Transportation; Silver Sneakers

NYC Medicare Advantage (MA) Plus Plan for NYC Retirees

- Drug Coverage
 - Union/Welfare Fund
 - Can continue without change
 - Prescription Drug Rider
 - \$125/Month with NYC Medicare Advantage Plus plan
 - Same as Senior Care prescription drug rider
 - Stand-Alone Part D Plan
 - CANNOT have with NYC Medicare Advantage Plus plan
- NEW: Period to switch one time between April and June 2022
 - Between new NYC MA Plus plan and current retiree plan
 - Plus can switch again during annual transfer period in Fall of each year
- Still entitled to Part B premium (including IRMAA) reimbursement
 - With any NYC retiree plan choice