



YOUR Medicare OPTIONS

*What you need to know as
a NEW Medicare Beneficiary*

allwell.TM

Important choices can be simple choices.

Let us help.

This guide will give you a solid foundation for understanding the basics of Medicare and some of the options available to you as a new Medicare beneficiary.

If you have any questions or need assistance, let us help. It's why we're here.

What are your coverage choices as a new Medicare beneficiary?

Once you enroll in Medicare, you'll have three basic choices for receiving your health coverage:

- **Original Medicare (Part A and Part B)**
- **Medicare Advantage (Part C)**
- **Medicare Supplement**

You'll learn more about each in this brochure. You'll also learn about Medicare Part D prescription drug coverage—which is **NOT** available with Original Medicare or Medicare Supplement plans, but is included with most Medicare Advantage plans.

The Parts of Original Medicare

Original Medicare is made up of Part A and Part B.

Most Medicare beneficiaries pay a monthly premium for Part B coverage.



Part A
is hospital coverage



Part B
is medical coverage



*Original Medicare
DOES NOT COVER
all of your medical
and hospital
expenses.*

It's important for you to know that Original Medicare covers only about 80% of your eligible expenses.

YOU ARE RESPONSIBLE FOR THE REST.

*Also remember that
**ORIGINAL MEDICARE
DOES NOT INCLUDE
PRESCRIPTION DRUG
COVERAGE.***

The Optional Parts of Medicare

Medicare Part C (Medicare Advantage) and Part D (Prescription Drug) are important Medicare options that are provided by plans contracted with the federal government to provide these benefits.



Part C *is also known as Medicare Advantage*



Part D *is prescription drug coverage*

Is a Medicare Advantage plan right for you?

A Medicare Advantage plan (Part C) is an important Medicare option that combines all of your Medicare benefits in one convenient plan.

Medicare Advantage plans

- help fill some of the gaps left by Original Medicare.
- may be available for a monthly premium **as low as \$0**.
- usually include your Part D prescription drug coverage.
- often provide extra benefits such as vision and dental coverage.
- provide all of your Part A (hospital) and Part B (medical) coverage.

What is a Medicare Supplement plan?

Another alternative to Original Medicare alone, or a Medicare Advantage plan, is a Medicare Supplement plan.

Medicare Supplement plans

- are designed to fill gaps left by Original Medicare.
- generally cost more per month than Medicare Advantage plans.
- do **NOT** include prescription drug coverage. If you want that important option, you must purchase it separately.
- allow you to see any provider who accepts Medicare.

When can you enroll in Medicare?

Most people are automatically enrolled in Medicare Part A when they turn 65. You can enroll in Medicare Part B as early as the first day of the month, three months before your birth month. As soon as you enroll in Part B, you can choose what type of additional coverage you want—a Medicare Advantage plan or a Medicare Supplement Plan. Don't forget to also enroll in a prescription drug plan (part D) if you want to protect yourself from the high cost of prescription drugs.



Keep in mind that if you do not choose prescription drug coverage during this Initial Election Period, you may be subject to a penalty if you decide you want this important option later.

You can make new choices each year

All Medicare beneficiaries have an opportunity to choose or change Medicare Advantage (Part C) and Part D prescription coverage each year during the Medicare Annual Election Period. Each year, the Medicare Annual Election Period begins on October 15 and ends on December 7.

The choices you make during the Annual Election Period will take effect on January 1 of the upcoming year.

Special election periods

There are special circumstances in which you may join a Part C or Part D plan at other times of the year, including:

- ***When you first become eligible for Medicare.***
- If you are on both Medicare and Medicaid.
- If your current plan is terminated.
- If you move to a community not served by your current plan.



Which type of coverage should you choose?

That's going to depend on your own needs—and your budget. But there's a good chance you'll want additional coverage to help pay some of the out-of-pocket costs not covered by Original Medicare. By understanding the options available to you as a Medicare beneficiary, you'll be better prepared to make the right choice for your situation.



Let's review your options

Original Medicare covers only about 80% of your eligible health care expenses.

Part C: Medicare Advantage plans

- are provided by companies with a Medicare contract.
- include **ALL** of your Original Medicare benefits.
- usually **INCLUDE** prescription drug coverage and other extra benefits.
- may be available with monthly premiums as low as \$0.

Medicare Supplement plans

- do **NOT** include all of your Original Medicare benefits.
- offer the freedom to choose any doctor.
- do **NOT** include prescription drug coverage.

Part D: Medicare prescription drug coverage

- is provided by companies with a Medicare contract.
- may be purchased in a standalone plan or may be included as part of a Medicare Advantage plan

We hope you found
this information helpful.

As you prepare for Medicare eligibility, remember that we are standing by to answer your important questions and help you make smart, confident choices



Allwell has a contract with Medicare to provide Medicare Part C and Part D benefits to our Medicare-eligible neighbors.



***Questions about your Medicare options?
Let us help.***

Visit our [Phone Directory Page](#) to see contact information for your state.



Allwell is contracted with Medicare for HMO and HMO SNP plans, and with the Ohio Medicaid program. Enrollment in Allwell depends on contract renewal. This plan is available to anyone who has both Medical Assistance from the State and Medicare. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums, and/or copayments/coinsurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium. However, for full-dual beneficiaries, the State will cover your Part B premium as long as you retain your Medicaid eligibility.

The Formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.