What's New with Medicare in 2024





Information as of October 30, 2023

SHIP is administered by the NJ Department of Human Services under a federal grant from the U.S. Administration for Community Living.

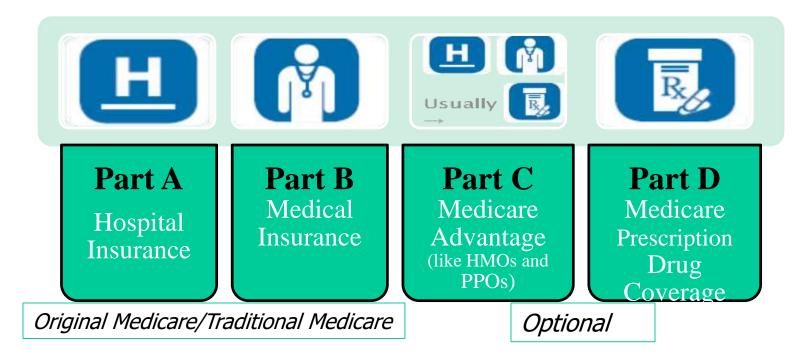
Social Security Cost of Living Adjustment

COLA for 2024 will be 3.2% increase in benefits
Average Retirement benefit amount will increase \$50 per month





Review of Basics: Medicare has Four Parts



Each part of Medicare has different:

- Rules for enrollment
- Monthly premiums
- Deductibles
- Cost sharing for services (coinsurance and copays)

2024 Original Medicare : Your Part B Costs

- Premium: \$174.70 /month for most beneficiaries (\$164.90 in 2023)
- Annual Deductible \$240 (was \$226 in 2023)
- Coinsurance:
 - **20%** for most Part B services
- Excess Charge additional 15% coinsurance for providers who do not accept Medicare allowed amount as payment in full (assignment)

NOTE:

If you have **Medicare Supplement Policy (Medigap**) or have retiree health benefits from former employer, usually covers some or all of Medicare Part A and Part B cost sharing.

2024 Medicare Part B Premiums

If Your Yearly Modified Adjusted Gross Income in 2022 was		Premium you paid for Part B	Premium you pay	
File Individual Tax Return	File Joint Tax Return	in 2023	per month for Part B in 2024	
\$103,000 or less	\$206,000 or less	\$206,000 or less \$164.90		
\$103,001 - \$129,000	\$206,001 - \$258,000	\$230.80	\$244.60	
\$129,001 - \$161,000	\$258,001 - \$322,000	\$329.70	\$349.40	
\$161,001 - \$193,000	\$322,001 - \$386,000	\$428.60	\$454.20	
\$193,001 - \$500,000	\$386,001 – \$750,000	\$527.50	\$559	
Above \$500,000	Above \$750,000	\$560.50	\$594	

IRMAA- Income-related Monthly Adjustment Amount

COVID-19 Vaccines for People with Medicare And COVID Boosters



What does it cost? You pay nothing for the vaccine!



Where do I get it? COVID-19 vaccines are available at pharmacies, clinics, doctors' offices, hospitals, or even in the home. Find a vaccine near you at <u>www.vaccines.gov</u>.



What do I bring? Bring your red, white, and blue Medicare card to your appointment, even if you have a Medicare Advantage Plan. Otherwise, you may be asked for your Social Security number to verify you're on Medicare.



I'm already vaccinated. Do I need a booster? If you

are age 65 and older or have certain health risks, a booster may be recommended. Speak with your doctor to learn more.

COVID-19 Testing

- Covered under Part B as clinical laboratory test
 - No cost-sharing
 - Applies to Original Medicare and MA Plans
 - First test is covered without a prescription
 - **×** Subsequent testing requires a prescription
 - Medicare covers COVID antibody tests, and antibody treatments.
 - Medicare no longer covers at-home rapid Covid tests purchased over-the-counter at local participating pharmacies. Get free tests at <u>www.Covid.gov</u>





• Covered by Medicare A and B or your Medicare Advantage Plan

 $\,\circ\,$ Regular cost-sharing applies for Part A and B services

 Medicare Advantage plans may waive cost-sharing for COVID-19 treatments per CMS guidance



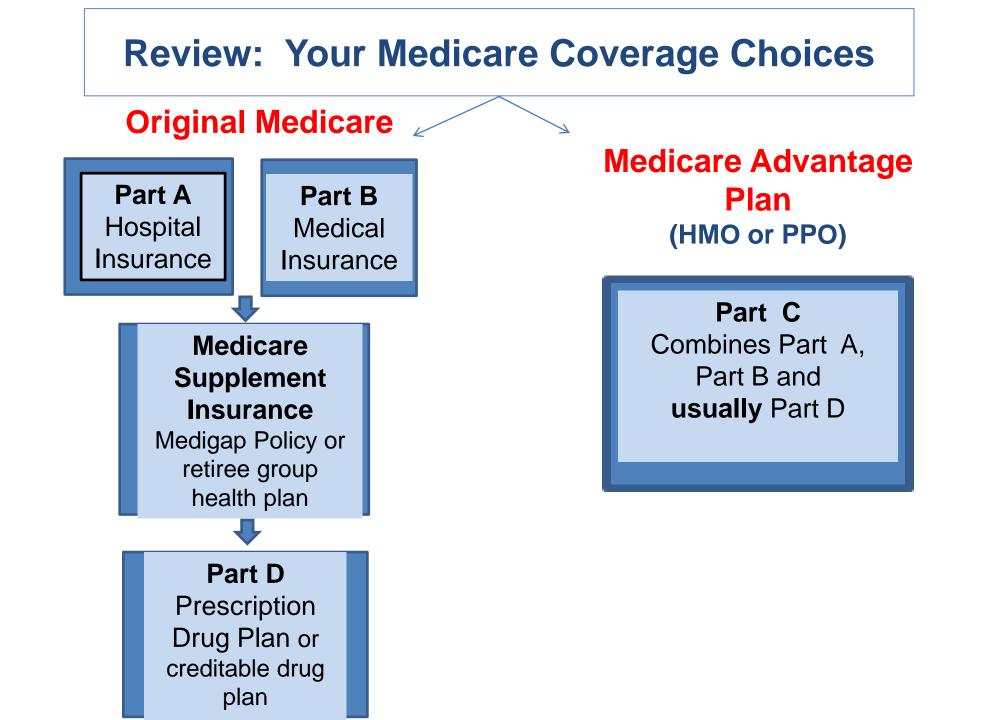


Annual Enrollment for People with Medicare

- From October 15 to December 7 you can
 - ✓ Join or switch a Medicare Prescription Drug Plan
 - ✓ Join or switch a Medicare Advantage Plan
- Time to shop & compare health and drug plan choices
 ✓ Is your current plan still best one for you (best costs and coverage)
 - ✓ Choose the plan that fits your needs
- Coverage begins on January 1, 2024
 - ✓ You'll have membership card/materials in hand

<u>NOTE</u>: You are locked into your Part D plan for all of 2024 once Open Enrollment Period ends. (*some exceptions*)





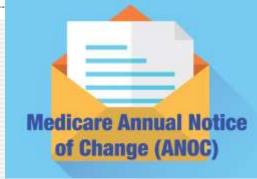
What if I am happy with my current drug plan?

Read how your plan will change for 2024

- Plan still offered next year?
- Premium amount changing?
- Deductible amount changing?
- Coverage for your medications- still on the plan formulary?
- Copays for your medications?
- Compare your plan with other plans available.
 - May be able to find a cheaper plan to save money.

 If decide to stay with current plan, no action needed. Will be automatically re-enrolled for 2024







NJ Medicare Drug Plans 2024

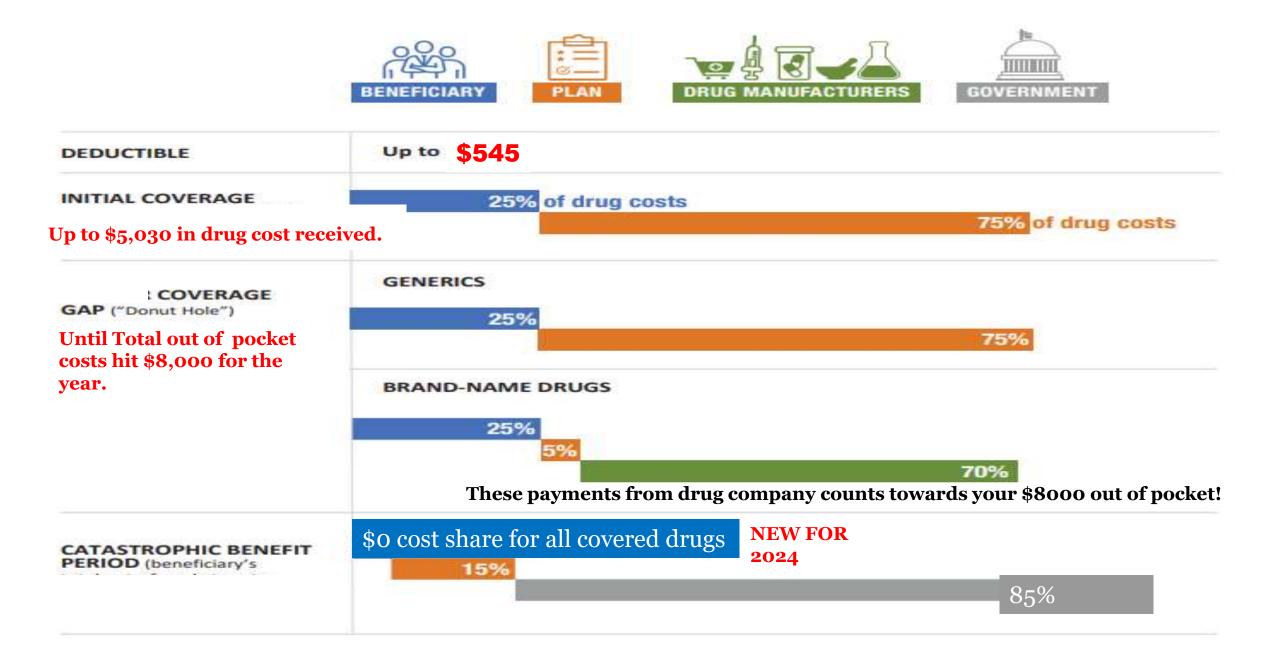
- **21** drug plans available
- Elixir Rx Secure Plan ending: Members will need to enroll in another Part D plan.
- Many plans with significant premium increase:
 - AARP Walgreens Plan from UHC from \$28.20 to **\$54.20**
 - AARP Saver Plus Plan from UHC from \$36.10 to \$68.40
 - Cigna Secure from \$34.20 to **\$60.60**
 - Humana Basic from \$37 to **\$58.50**
- Lowest Premiums:
 - Wellcare Value Script -\$0
 - SilverScript Smart Saver Rx \$12.40
 - Cigna Saver Rx -\$16.80

<u>Clear Spring Health Value Rx</u>- Low Performance Rating





WHO PAYS WHAT UNDER PART D IN 2024



Implementation Timeline of the Prescription Drug Provisions in the Inflation Reduction Act

2023	2024	2025	2026	2027	2028	2029	
Limits insulin copays to	Eliminates 5% coinsurance for Part D	Adds \$2,000 out-of-pocket cap in Part D	Implements negotiated prices for certain high-cost drugs:				
\$35/month in Part D coverage	and other drug benefit changes	•10 Medicare Part D drugs		•15 Medicare Part B and Part D drugs	•20 Medicare Part B and Part D drugs		

Reduces costs and improves coverage for adult vaccines in Medicare Part D, Medicaid & CHIP

2024-2030: Limits Medicare Part D premium growth to no more than 6% per year



Source: Kaiser Family Foundation

Human Services \$35 cap on Insulin copay

- Started 1/1/2023, insulin covered by Medicare plans cannot have copay higher than \$35 per month for EACH insulin
 - No deductible, No Coverage Gap
- All Medicare drug and health plans can choose <u>which</u> insulins to cover on their drug list (formulary)
 - Need to enroll in plan that has your insulin covered.
 - Need to use your plan's in-network local pharmacy or mail order.
 - Cap does NOT apply to disposable insulin pump (ex Omnipod) or to non-insulin diabetic drugs such as Ozempic, or Januvia





\$0 Cost for Medicare Covered Vaccines



- Part D-covered adult vaccines recommended by the Advisory Committee on Immunizations Practices (ACIP) will be covered by Medicare Part D at 100%.
 - Includes vaccines for shingles (**Shingrix**)
 - o and Tetanus-Diphtheria-Whooping Cough
 - New vaccine for RSV also covered
- ALL Medicare drug and health plans MUST cover these vaccines on their plan formulary.





Medicare Plan Finder at medicare.gov





Create a Medicare Account

- Go to www.Medicare.gov
- After creating an account, will be able to see all your Medicare Claims for Parts A and B (hospital and medical)
- List of your medications already uploaded if you have a Medicare Part D plan.
- How to video found on You Tube https://www.youtube.com/watch?v=i6imlBKikS g&feature=youtu.be





How To Compare Plans:

- <u>**Coverage:</u>** Are my drugs covered by the Plan? Are there any restrictions (*prior authorization, step therapy*)?</u>
- <u>Costs</u>: Look at premium, copays, deductibles. Compare "*total yearly drug* + *premium cost*".
 - Remember to NOT include costs for insulin or vaccines based on prices shown on the Plan Finder.
- <u>Convenience</u>: Is my pharmacy in plan's network? Offer mail order? Have preferred pharmacy with lower copays?
- <u>Coordination</u>: Will it work with my other health or drug benefits?



Sample Page on Medicare Plan Finder

Plan Details Page:

ESTIMATED TOTAL DRUG + PREMIUM COST



Services

What if your prescription is not covered by the plan you choose?



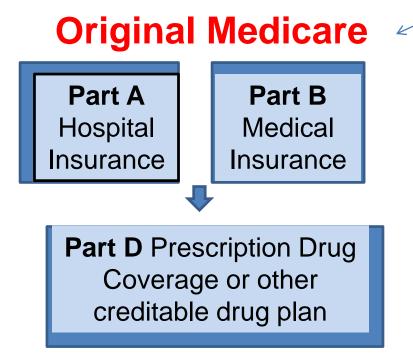
Once open enrollment is over, you are locked into your plan for the year.

1. You and your doctor should work with the plan

– **Switch** to similar drug that is on the formulary

- 2. If you cannot switch drugs:
 - Your doctor can request an Exception to have it covered
 - If plan denies your exception request can Appeal
- 3. Change to Plan that covers your drug during next Annual Enrollment or special enrollment

Your Medicare Choices



Medicare Advantage Plan (HMO or PPO)

> Medicare Part C Combines Part A, Part B and usually Part D

TV Ads offering "extra benefits" in Medicare



Ads will link you to insurance agents selling Medicare Advantage Plans

What is Medicare Advantage?

- Structured as HMOs or PPOs
- Insurance companies contract with Medicare to provide your benefits
- You must get <u>all</u> medical services and drugs through the plan
 - **x** May have to use specific doctors, hospitals and labs
 - **×** May need referrals for services and specialists
- May get extra benefits not covered by Original Medicare
 - o eyeglasses, hearing aids, dental services, gym discounts
- NOT supplements to Medicare
 - × No claims go to Medicare, all claims processed by plan





Medicare Advantage Overview

- Plans offered differ by county-
- Premiums range from \$0 to \$120 per month
 - Many plans have \$0 premium
 - some plans also offer reduction in member's <u>Part B</u> premium
 - If plan has premium of close to \$100, better to look at different Medicare plan or consider a Medigap Policy
- Some plans have **deductible** before plan will pay
- Plans charge you copay every time you use a service
 - until you reach your **maximum out of pocket** (usually \$8,000
 - \$11,000), then plan covers 100%





Sample of "Supplemental" or "Extra" benefits offered by <u>some</u> Medicare Advantage plans:

- **Dental benefits-** some only "routine/preventive" some cover comprehensive up to dollar cap
- Home-delivered meals after hospital stay
- \$100 to \$400 **spending card** to be used to purchase over-thecounter health related items *such as adult diapers, shower chairs, cold medicine*
- **Transportation** to medical appointments
- World-wide coverage for medical emergencies
- "Travel benefit"- use providers in other states
- Cash rewards for getting "wellness" services like flu shots and mammograms

Aging Ser Check each Plan's Summary of Benefits for details.



Some Plans Not Renewing. Plan ends 12/31/2023

All members need to take action by 12/31 to enroll in another plan!

Amerivantage Choice and some other Amerivantage plans

o Braven Medicare Plus





If take no action, you will Traditional Medicare Part A and B, but have <u>no drug coverage</u> on January 1st.

> Have extended open enrollment until 2/28/2024 to enroll in another Part D or Medicare Advantage Plan

If MA plan is ending, you can return to Original Medicare and have Guaranteed Issue until March 2, 2024 to purchase a medigap policy and not be turned down.





Questions to ask before enrolling in MA Plan

- Are my doctors and hospitals in the network?
- What are copays/coinsurance for each service?
 - Doctor visits , outpatient procedures
 - Specialists, physical therapy, medical tests
 - Hospital stays, medical equipment
- Out of network coverage and costs?
- Referrals required?
- Are my drugs covered?
 - <u>CANNOT ENROLL IN SEPARATE MEDICARE PART D</u> PLAN WHEN ENROLLED IN MA PLAN
- Will it affect my employer or union coverage?
- Details on eyeglass and dental coverage?
- What if I travel out of state?





How to Join a New Plan

Enroll in a Medicare Health or Prescription Drug Plan by

- Enrolling on the Medicare website <u>www.medicare.gov</u>
- Calling 1-800-MEDICARE (1-800-633-4227)
- Calling the Plan
- Enrolling in a new plan will disenroll you from your previous drug or health plan
- If you have other coverage, like from an employer or union



Check with your plan's benefits administrator before making any changes to your coverage

Medicare Advantage Open Enrollment Period

What if you don't like your Medicare Advantage Plan?

From January 1 to March 31 you can

- ✓ Switch Medicare Advantage Plans or
- Leave Medicare Advantage and return to Original Medicare with a Part D Drug Plan





Can I switch from a Medicare Advantage Plan to Medigap?

Only if the following applies:

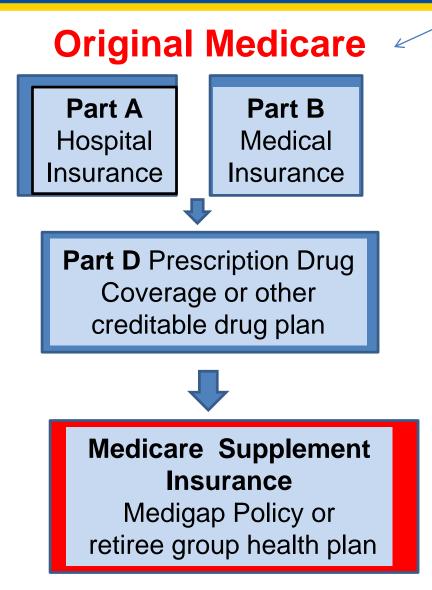
1. You are in a Medicare Open Enrollment Period; AND

- October 15 December 7
- January 1 March 31
- 2. You are in good health OR
- 3. You are in "Special Enrollment Period"
 - Lost other coverage
 - Moved outside service area of your Medicare Advantage Plan

Medicare Advantage "No Risk" Trial Situations

- ✓ If you cancel a Medicare Supplement policy 12/31/23 to enroll into a 2024 Medicare Advantage plan <u>for the first time</u>.
 - You have one year "trial" and <u>any time</u> during 2024 you can:
 - Disenroll from MA plan and return to Original Medicare; and
 - Enroll in a Part D Drug plan; and
 - Can purchase a Medicare supplement policy and not be turned down.
 - Get back the medigap policy you had in 2023
 - If that plan no longer sold, can purchase certain medigaps from any company

Your Medicare Choices



Medicare Advantage Plan (HMO or PPO)

> Medicare Part C Combines Part A, Part B and usually Part D

If stay with Original Medicare, and want a Medigap Policy

- Policies sold by insurance companies
- Cover "cost sharing" in Original Medicare Plan: Part A & B Deductibles, Co-pays, Coinsurance
- Also called "Medicare Supplement Insurance"
- 10 <u>Standardized</u> Policies Available
 - Labeled Plan A thru N
 - Plans of same letter have same coverage
 - Only premium costs are different
- Can go to any doctor, hospital, or provider that accepts Medicare in any state

How Medigap Policies Work

- You pay monthly premium for Medigap in addition to Medicare Part B premium
 - \$100 -\$300 per month based on plan and age
- Medigap pays claim after Medicare pays
- Only covers Medicare services
- Company can turn you down for coverage after your first six months with Part B
- Does NOT cover prescription drugs, need <u>separate</u> Medicare Part D Prescription Drug Plan
- Premiums increase with age, and increase any time of year with state approval
- Can keep the policy if you move anywhere in the U.S.

Medigap Policies									
Covered by the Policy:	Plan A	Plan B	Plan D	High Deduct G*	Plan G	Plan K**	Plan L**	Plan M	Plan N
MEDICARE PART A COSTS					•				
Hospital Deductible					*	50%	75%	50%	
Hospital Copayment	*	*		*	*	*	*	*	*
Skilled Nursing Facility Copay			*	*	*	50%	75%	*	*
Hospice Care				*		50%	75%		*
MEDICARE PART B COSTS									
Part B Annual Deductible									
Part B Coinsurance	*	*	*	*	*	50%	75%	*	\$20 copay for doctor visits and \$50 copay for ER visits
Part B Excess/Limiting Charges				*					
OTHER						5004	7501		
First three pints of blood.						50%	75%		
Foreign Travel Emergency			*	*	*			*	*
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* Plan G High Deductible: In 2024, policy holder pays \$2,800 before the policy pays <u>any</u> claims.

**Plans K and L pay percentage of Part A and Part B cost sharing until you spend a certain amount out-of-pocket. 37 The 2023 out-of-pocket maximum is \$7,060 for Plan K and \$3,530 for Plan L.

Where to get Medigap Information

- Call 1-800-Medicare and ask for free publication *"Choosing a Medigap Policy"*
- Call companies selling Medigaps for premium quote
- Charts available from NJ SHIP
 01-800-792-8820 or www.aging.nj.gov
- If age 65+ can apply at **anytime**,
- Not limited to Medicare Annual Enrollment Period





Stay with Original Medicare if...

- You have health coverage from former employer or union and want to keep it
- You are "snow bird" or travel long periods outside NJ
- You want freedom to go to any Medicare doctor anywhere in the U.S.

Example #1:

Mrs. Healthy's costs with Medigap vs. Medicare Advantage Plan

Expense	Medicare Advantage Plan	Medigap Plan G
Part B Premium	\$175 x 12=\$2,100	\$175 x12= \$2,100
Plan Premium	\$0	\$135 x 12 = \$1,620
Part B Deductible	\$0	\$240
Primary Doctor Visit	2 @ \$20 = \$40	\$0
Specialist Visit	2 @ \$50 = \$100	\$0
Outpatient surgery	\$125	\$0
Monthly diabetic	20% of \$100 x 12 =	\$0
supplies	\$240	
Routine dental	\$0	\$150 x 2 = \$300
Eyeglasses	\$100	\$500
Blood work	\$13	\$0

 TOTAL FOR YEAR
 \$2,718
 \$4,760

Example #2:

Mr. Sick's costs with Medigap vs. Medicare Advantage Plan

Expense	Medicare Advantage Plan	<mark>Medigap Plan G</mark>
Part B Premium	\$175 x 12=\$2,100	\$175 x 12=\$2,100
Plan Premium	\$0	\$160 x 12 = \$1,920
Part B Deductible	\$0	\$240
Primary Doctor Visit	6 @ \$20 = \$120	\$0
Specialist Visit	12 @ \$50 = \$600	\$0
MRI outpatient	\$125	\$0
Monthly DME	20% of \$100 x $12 = 240	\$0
2 Hospital Stays 5 days	\$295 x 10 = \$2,950	\$0
Nursing home rehab	\$125 x 10= \$1,250	\$0
Blood work	\$13 x 4 = \$52	\$0
Ambulance	\$250	\$0
ER visit	\$90	\$0
Outpatient surgery	20% of $2000 = 400$	\$0
Physical Therapy	\$50 x 11=\$550	\$0
Eyeglasses	\$100	\$500
Routine dental	\$0	\$150 x 2 = \$300
TOTAL FOR YEAR	<mark>\$8,827</mark>	<mark>\$5,060</mark>

Programs to help with Medicare Costs

- 1. Medicaid
- 2. Medicare Savings Programs
- 3. NJ PAAD
- 4. NJ Senior Gold Drug Discount



NJ Family Care Medicaid Program



• Who is eligible? (2023 rates)

- o Monthly income less that \$1,215 (single), \$1,644 (married)
- Assets less than \$4,000 (single), \$6,000 (married)
 - **×** Does not include value of your home or car
- Medicaid pays all your Medicare costs:
 - o all Part A and B items
 - × premiums, deductibles
 - $\star\,$ coinsurance for hospital, doctors, tests
 - Lowers Prescription copay to \$1.55 or \$4.60 in 2024
- Medicare pays first, Medicaid HMO pays second
- Apply at County Board of Social Services





Help Paying Part B Premium-Medicare Savings Programs

• Specified Low Income Medicare Beneficiary SLMB and Qualified Individual

- Who is eligible in 2023?
 - Monthly income less than
 - \$1,641 (single), \$2,219 if married
 - Resources less than \$9,090 (single), \$13,630 (married)
- If you qualify for SLMB or QI, you will <u>net</u> additional \$165/month in your Social Security check
- Apply at 1-800-792-9745 or www.aging.nj.gov





NJ's Pharmaceutical Assistance to the Aged and Disabled Program (PAAD)

• Must meet 2024 income limits

single: less than **\$52,142 /yr** (about \$4,345/mth)

married: less than **\$59,209/yr** (about \$4,934/mth) PAAD

members pay no more than

\$5 for generic drugs

\$7 for brand name drugs



- PAAD pays premium for Part D plan
- No Part D deductible, copay, or donut hole
- Apply at 1-800-792-9745 or www.aging.nj.gov





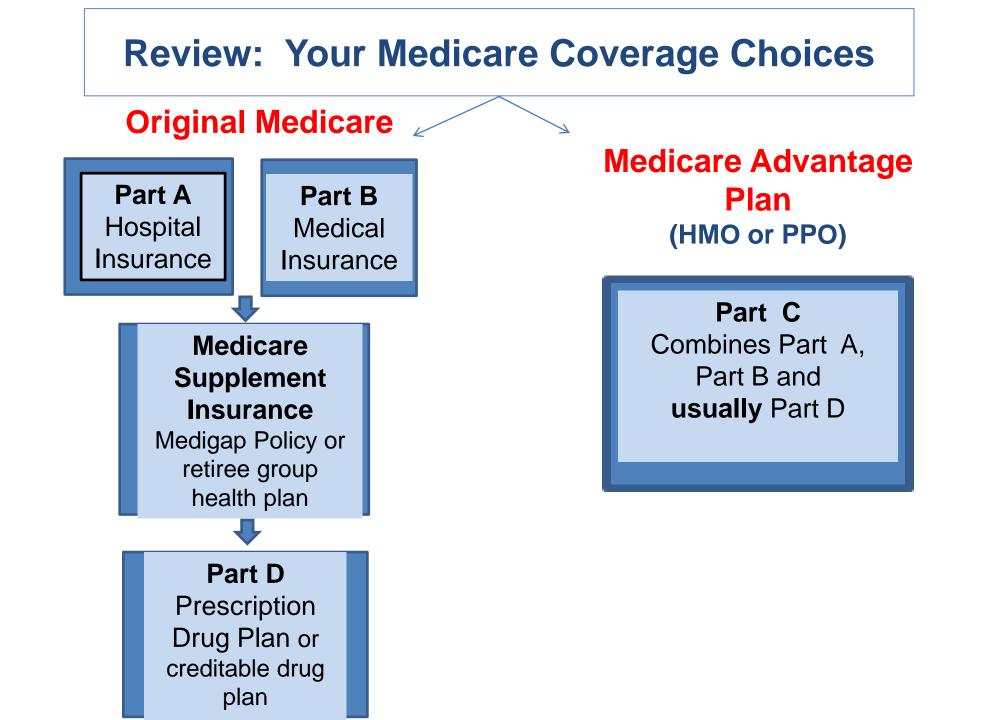
NJ Senior Gold Prescription Discount

- Sr. Gold income eligibility higher than for PAAD
- Income Limits 2024:
 - single: less than **\$62,142/yr** (about \$5,178/mth)
 - married: less than **\$69,209/yr** (about \$5,767/mth)
- You pay \$15 plus 50% of remaining cost for each drug
- You must be enrolled in Part D drug plan
- Senior Gold does NOT pay Part D premium
- Apply at 1-800-792-9745 or www.aging.nj.gov











- Medicare will NOT call you and ask for your bank information or Social Security number
- Protect your Medicare number same as you would your credit card
- Medicare will NOT send representatives to your home--these are insurance agents trying to sell you health care policies.





Where to Get Help

- Medicare.gov
- Contact the Plan
- Call 1-800-Medicare
- www.aging.nj.gov



Click "Medicare Options" link in blue box
 Call Medicare Information Line

 NJ SHIP 1-800-792-8820





Thank you for joining us today.

