

MEDICARE IN 2019

A Medicare Interactive Resource
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What's New?

Medicare in 2019

Medicare Advantage Open Enrollment Period

During the Medicare Advantage Open Enrollment Period (MA OEP), you can switch from your Medicare Advantage Plan (excluding Medical Savings Accounts, cost plans, and PACE) to another Medicare Advantage Plan or to Original Medicare with or without a stand-alone prescription drug plan.



The MA OEP occurs each year from **January 1 through March 31.**

You can only use this enrollment period if you have a Medicare Advantage Plan. Changes made during this period are effective the first of the following month.

Extra Help Special Enrollment Period

Extra Help is a federal program that helps pay for out-of-pocket costs of Medicare prescription drug coverage. If you have Extra Help in 2019, you have a Special Enrollment Period (SEP) to enroll in a Part D plan or switch between plans. This SEP is available once per calendar quarter for the first three quarters of the year (January-March, April-June, and July-September). If you use the Extra Help SEP to change your coverage, the change will become effective the first of the month following the month that you make the change.

What's New?

Medicare in 2019 (Cont.)

Increased Medicare Advantage Plan Flexibility

Beginning in 2019, Medicare Advantage Plans have increased flexibility in their plan offerings. This means that plans may be able to reduce cost-sharing for certain covered benefits, offer specific extra benefits, or charge different deductibles for some enrollees who meet specific medical criteria. Plans now also have the ability to offer new supplemental benefits that are not directly considered medical treatment. Some services that plans can begin offering include nutrition services, non-skilled in-home supports, and home modifications.



Did You Know?

Medicare Advantage Plans, sometime referred to as **Part C**, contract with the federal government and are paid a fixed amount per person to provide Medicare benefits. Plans must provide all Part A and Part B services offered by Original Medicare, but can do so with different rules, costs, and restrictions that can affect how and when you receive care.

[Visit Medicare Interactive to learn more about Medicare Advantage.](#)

Part A Costs

Hospital Insurance

Premium

If you've worked 10 years or more	Free
If you've worked 7.5 to 10 years	\$240/month
If you've worked less than 7.5 years	\$437/month

Deductible

For each benefit period*	\$1,364
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Hospital Coinsurance

First 60 days of inpatient care each benefit period*	\$0
For days 61-90 each benefit period*	\$341/day
After day 90 in a benefit period	\$682/ lifetime reserve day**

Skilled Nursing Facility Coinsurance

First 20 days of inpatient care each benefit period*	\$0
For days 21-100 each benefit period	\$170.50/day

*A benefit period begins the day you start getting inpatient care. It ends when you haven't received inpatient hospital or skilled nursing facility care for 60 days in a row.

**You have 60 lifetime reserve days that can only be used once. They are not renewable.

Part B Costs

Medical Insurance

Premium

Standard premium if your annual income is below \$85,000 (\$170,000 for couples)*

\$135.50/month

People with high incomes have a higher Part B premium. [Visit Medicare Interactive to learn more.](#)

People with limited incomes may be eligible for the **Medicare Savings Program** for help paying their Part B premium. [Visit Medicare Interactive to learn more.](#)

Deductible

Annual amount

\$185/year

Coinsurance

For most Part B-covered services

20%

***You pay the standard Part B premium if you:**

- are new to Medicare in 2019,
- don't collect Social Security benefits, or
- are billed directly for your Part B premium.

A small number of people pay a premium that is lower than the standard premium because their Social Security benefits did not increase enough to cover the increase in their Part B premium from 2018 to 2019.

Part D Costs

Prescription Drug Coverage

Premium

The premium varies by Part D plan.

\$33.19/month
National average in 2019

People with high incomes have a higher Part D premium. [Visit Medicare Interactive to learn more.](#)

Deductible

The deductible varies by Part D plan.

Up to \$415/year

If you have Extra Help, you will have a low or no deductible.

What is Extra Help?

If your monthly income is up to **\$1,581 for singles (\$2,134 for couples)** and your assets are below specified limits, you may be eligible for Extra Help, a federal program that helps you pay for some or most of the costs of Medicare prescription drug coverage

Visit Medicare Interactive to learn about Part D costs if you have Extra Help.

Part D Coverage Phases

How much you and your Part D plan pays will change during the year. There are four different coverage phases for Medicare prescription drug coverage.

1. Deductible Period

If your plan has a deductible, you will have to pay the full cost of your drugs (100%) until you meet that amount.

2. Initial Coverage Period

Begins after you meet the deductible.



3. Coverage Gap (also known as the donut hole)

Begins when you and your plan together have paid \$3,820 for your covered drugs (does not include the premium).

Brand-name drugs



Generic drugs



4. Catastrophic Coverage

Begins when you have paid \$5,100 for your covered drugs (does not include the premium).



You pay 5%

Medicare Advantage

Private Health Plan

In a Medicare Advantage Plan (private health plan) you generally must pay the Medicare Part B premium. Some Medicare Advantage Plans may also charge you an additional premium. In some cases, the plan may pay part of your Part B premium.

Medicare Advantage Plans may have a deductible for hospital visits, doctor visits, or prescription drugs, but some do not. Plans usually charge you a fixed copayment when you visit a doctor, instead of the 20% coinsurance you pay under Original Medicare.

All plans must include a limit on the amount of money you spend out-of-pocket during the year.



In 2019, the maximum out-of-pocket limit for most plans is **\$6,700**.

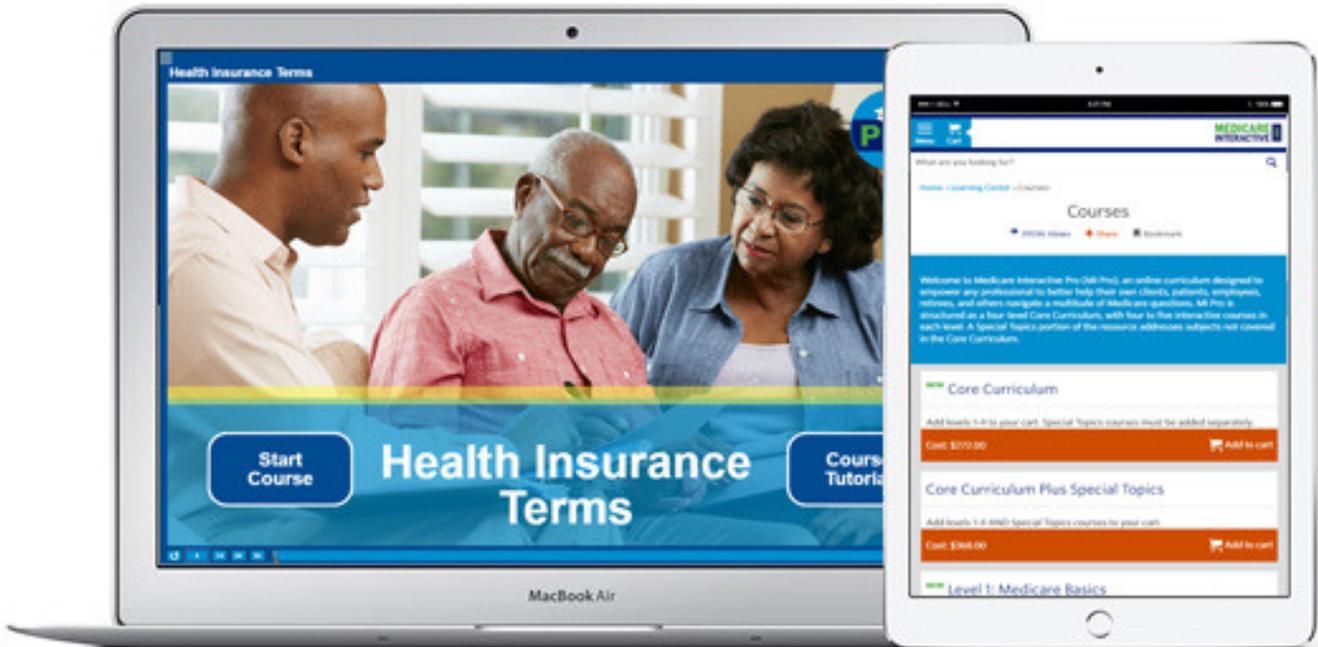
They also cannot charge higher copayments than Original Medicare for certain care. This includes chemotherapy, dialysis, and skilled nursing facility (SNF) care. They can charge you more than Original Medicare for others services, including home health, durable medical equipment, and inpatient hospital services.

Important!

Many Medicare Advantage Plans have a network of doctors, hospitals, and pharmacies, and provide services only in a certain part of the country. **Be sure to always review the plan's cost and coverage before enrolling.**

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MI Pro is an online curriculum designed to empower any professional to better help their own clients, patients, employees, retirees, and others navigate a multitude of Medicare questions. MI Pro is structured as a four-level Core Curriculum, with four to five courses in each level.

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