

The Facts About Medicare Advantage

MEDICARE MODERNIZATION ACT

What is Medicare Advantage?

Medicare Advantage is the new name for Medicare + Choice Plans—but it's more than just a new name. Medicare Advantage gives you more health care coverage choices and better health care benefits. This fact sheet has basic information about how Medicare Advantage affects your health care choices, and has contact information for where to get your questions answered.

Medicare Advantage Plans are offered in many areas of the country by private companies that sign a contract with Medicare. Medicare pays a set amount of money to these private health plans for your health care.

You must have Medicare Part A and Part B to join a Medicare Advantage Plan. Medicare Advantage Plans provide Medicare-covered benefits to Medicare members through the plan, and may offer extra benefits that Medicare doesn't cover, such as vision or dental services. You may have to pay an additional monthly premium for the extra benefits. The plan may have special rules that you need to follow.

What are Medicare Advantage Plan Choices?

Medicare Advantage Plans are a way that you can get your Medicare health care. You can choose to get your health care from the Original Medicare Plan, or from a Medicare Advantage Plan in your area. Most Medicare Advantage Plans charge an extra monthly premium and may charge copayments. But, they usually provide you with more benefits than the Original Medicare Plan. Medicare Advantage Plans include:

- **Medicare Managed Care Plans (like HMOs)**—You see doctors in the plan's network. A primary doctor coordinates your health care. Referrals are usually required to see specialists. These plans have been part of Medicare longer than any other Medicare Advantage Plan.
- **Medicare Preferred Provider Organization Plans (PPOs)** — can see any doctor, but it costs less to see doctors in the plan's network. Some plans don't require a referral to see a specialist. PPOs are among the most common and popular plans right now for Americans with private insurance.
- **Private Fee-for-Service Plans**—You can see any doctor that accepts the plan's payment terms. The private company, not Medicare, negotiates with providers to decide how much it will pay and what you pay for the services you get. No referrals are necessary.
- **Medicare Specialty Plans** will be available in some areas. They provide all Medicare health care for certain people with Medicare with special needs, such as people in institutions.

What if I have a Medigap policy?

If you get your Medicare health care from the Original Medicare Plan, you may have a Medigap (Medicare supplement insurance) policy to pay the gaps in Original Medicare Plan coverage. Medigap policies only work with the Original Medicare Plan. You don't need to buy a Medigap policy if you are in a Medicare Advantage Plan.

Will a Medicare Advantage Plan pay for my prescription drugs?

Some Medicare Advantage Plans include coverage for prescription drugs. Some plans may also offer new Medicare-approved drug discount cards to help you save on your outpatient prescription drugs.

Extra help paying for prescription drugs may be available if you have a low income and limited assets.

Are there more changes coming?

In 2006, the law will provide for a new option—regional PPOs. Regional PPOs can give more people with Medicare multiple choices for Medicare health care coverage. Regional PPO members will have an added protection—a limit for their out-of-pocket copayment costs.

Also, Medicare prescription drug plans will be available to people with Medicare in 2006. It will be important for you to compare the drug plans in your area to pick the one that is best for you.

Do I have to change how I get my health care?

No. If you are happy with your health care coverage now, you don't have to change. If you are in a Medicare + Choice Plan now, you don't have to do anything. Your plan will automatically become a Medicare Advantage Plan. The traditional fee-for-service Medicare (Original Medicare Plan) that you know and trust is still here for you. If you want to stay in traditional Medicare, you don't have to do anything. No matter what you decide, you are still in the Medicare program.

Who can answer my Medicare questions?

For the latest information about Medicare, visit www.medicare.gov on the web, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

To find out which Medicare health plans are available in your area, look at www.medicare.gov on the web. Select "Medicare Personal Plan Finder." This tool helps you narrow down your Medicare health plan choices and choose the plan that's best for you. Or, call 1-800-MEDICARE (1-800-633-4227) and ask about health plans in your area. TTY users should call 1-877-486-2048. To get a copy of this information in Spanish, call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

Para una copia en español, llame gratis al 1-800-MEDICARE (1-800-633-4227). Los usuarios de TTY deben llamar al 1-877-486-2048.