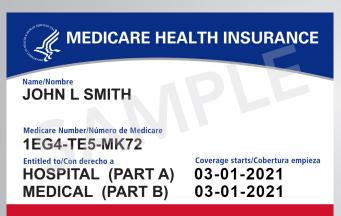
Questions about Medicare?





Get in contact with us at (800) 288-9250
Or visit us at www.teamalvarez.net

Original Medicare

- Original Medicare Includes Medicare Part A (Hospital Insurance) and Part B (Medical Insurance) at 80%
- Part A: \$0 premium, Hospital deductible \$1,556
- Medicare Part A covers inpatient hospital, skilled nursing facility, hospice, inpatient rehabilitation, and some home health care services.
- Part B: \$170.10 Avg. Prem., \$233 deductible
- Medicare Part B covers physician services, outpatient hospital services, certain home health services, durable medical equipment, and certain other medical and health services not covered by Medicare Part A.
- If you want drug coverage, you can join a separate Medicare drug plan (Part D).
- You can use any doctor or hospital that takes Medicare, anywhere in the U.S.





Part B - Doctors



Does not cover:

- Long -Term Care, Most Dental care, Dentures, Eye exams relating to prescription glasses, Cosmetic Surgery, Acupuncture, Hearing aids, Routine foot care, and Prescription Drugs.
- You need to add:
 Part D Prescription Drugs



Medicare Advantage

- Medicare Advantage is an "all in one" alternative to Original Medicare. These "bundled" plans include Part A, Part B, and usually Part D.
- Plans have an annual maximum out of pocket cost
- Plans are available for those who have been diagnosed with a chronic condition such as diabetes, COPD or a heart condition
- Plans are also offered for Medicare beneficiaries who also qualify for Medi-cal

Combines:

Part A - Hospital



Part B - Doctors



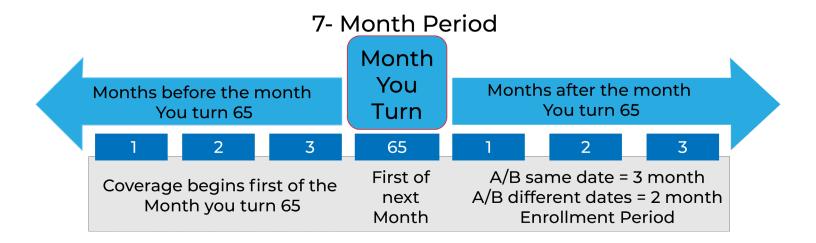
Extra Benefits can be included at no additional cost

Fitness Programs, Vision, Hearing, Dental Services, transportation, Over-the-counter products, monthly grocery benefits, pest control and PERs (Personal Emergency Response systems)

All Plans offer a maximum out of pocket cost

Most Plans Include
Part D - Prescription Drugs





Initial Enrollment Period. When you first become eligible for Medicare, you can join a plan. 3 months before you turn 65, month of your 65 birth day and 3 months after you turn 65 (Normal).

Annual Enrollment Period. From October 15 – December 7 each year, you can join, switch, or drop a plan. Your coverage will begin on January 1 (as long as the plan gets your request by December 7).

Open Enrollment Period. From January 1 – March 31 each year, you can switch one time and coverage with new plan will commence the 1st of the month following the signature date.

Lock-In Enrollment Period. From April 1 – Oct. 14 each year, you must be have Chronic condition, be DUAL or turning 65 to enroll.

Special Enrollment Period. Can be due to local emergency (check state Governor's web site) or move or other "Special" circumstance.

Additional Enrollment Period

I'm newly eligible for Medicare because I have a disability (under 65).

I'm already eligible for Medicare because of a disability, and I turned 65.

You moved and the plan you have in place is not available in the new address. Develop a chronic condition.

Enrolled / disenrolled from Medical.

Left company Group Coverage.

What are Special Enrollment Periods (SEP)? SEP is the time when a Medicare beneficiary can enroll in a Medicare Advantage plan outside of the standard enrollment periods. To take advantage of this opportunity you must have a qualifying event, such as:

You change where you live:

- · You moved out of the service area of your current plan
- · You moved and are still in the plan's service area, but there are new plan options
- · You moved back to the United States after living out of the country
- · You moved into or out of an institution like a long-term care nursing facility
- · You were recently released from incarceration
- · You obtained lawful presence status in the United States You lose coverage:
- · Your plan no longer offers coverage
- · You lost creditable coverage through no fault of your own
- · You chose to change employer/union coverage
- · You dropped coverage in Program of All-inclusive Care for the Elderly (PACE)

Your plan changes its contract with Medicare:

- Medicare takes official action (called a sanction)
- Medicare ended your plan's contract

Four more determining factors when selecting a plan:

Dr. - Is my doctor on the plan?

Rx. - Are my medications covered?

\$ - Premiums, Copays, Deductibles

DDS - Do they offer dental plans?