

8 Tips for *Making the Most* of Your Medicare Advantage Plan



The Villages Health

8 Tips for Making the Most of Your Medicare Advantage Plan

As more and more seniors elect a Medicare Advantage plan versus original Medicare with separate supplement plans, it's important to understand the key differences in care delivery, in order to receive the best care and value from this type of Medicare plan.

The Advantages of Medicare Advantage

Medicare Advantage, also known as **Medicare Part C**, covers your hospital and inpatient care, your doctor visits and outpatient care, and usually includes your prescription drug coverage. It often comes with additional benefits too, like a gym membership. These plans are designed to mitigate your financial risk, so there is no need for an additional supplement plan.

Medicare Advantage is a **Managed Care** plan, as opposed to a **Fee-for-Service** plan, and the differences are important.

On a managed care plan, doctors typically:

- › Spend more time with patients.
- › Provide care between visits.
- › Provide care in one place.
- › Do better when patients are healthy.

In short, the managed care model incentivizes your doctor to take better care of you, so you stay healthy, and in the event you do get sick, you heal quickly.

When you compare patients on a Medicare Advantage plan to a traditional Medicare plan, there are:



31% fewer hospitalizations ¹



19% shorter average length of stay at a hospital ²



25% less money spent on health care ³

No wonder more and more seniors choose this type of Medicare plan.

It's great that you've chosen a managed care plan – now let's make sure you get the value you deserve.

To help you capitalize on the value of Medicare Advantage – The Villages Health has prepared 8 helpful tips to ensure you have the best chance to achieve optimal health outcomes.

¹ Stephen Patterson, Andrew Bazemore, Yalda Jabbarpour and Peter Wingrove, "Understanding The Impact of Medicare Advantage on Hospitalization Rates," http://www.graham-center.org/content/dam/rgc/documents/publications-reports/reports/BMA_Report_2016.pdf Robert Graham Center, 3/15/16

² Jon Kaplan, Jan Willem Kuenen, Mike Pykosz and Stefan Larsson, "Alternative Payer Models Show Improved Health-Care Value," https://www.bcgperspectives.com/content/articles/health_care_payers_providers_alternative_payer_models_show_improved_health_care_value/?chapter=3 Boston Consulting Group, 5/14/13

³ Vilsa Curto, Liran Einav, Amy Finkelstein, Jonathan D Levin, and Jay Bhattacharya, "Healthcare Spending and Utilization in Public and Private Medicare," <https://www.nber.org/papers/w23090.pdf> National Bureau of Economic Research, 1/2017

Tip #1 – Choose a Patient-Centered Primary Care Physician

Quite simply, a patient-centered **Primary Care Physician (PCP)** puts your needs above their own. You want to choose a doctor who:

- › Accommodates Your Schedule
- › Offers Convenient Appointment Time Slots
- › Arrives on Time to Appointments
- › Arrives Prepared - Reviews Paperwork in Advance
- › Spends Extra Time with You When Needed
- › Looks You in the Eyes
- › Ensures You Understand What's Going On
- › Brainstorms Treatment Plans with You
- › Coordinates Your Care with Specialists
- › Values a Relationship with You
- › Provides Care Between Visits
 - Emails or Messaging
 - Phone Calls
 - On-Call 24/7
- › Shares Responsibility for Your Health Outcomes
- › Works with a Team

Since you are on a Medicare Advantage Plan, you must choose a PCP that is:

- › In Your Plan's Network
- › Accepting New Patients

Check your plan's network for a list of doctors you can select from and do your homework before making an election.



Did you know?

Doctors at The Villages Health see half the number of patients when compared to the average doctor. That means your doctor and his/her team has more time to give you the personalized care you deserve.

Questions to Consider Before You Choose Your PCP

- › How much time do I get to spend with my doctor on the first visit?
- › How much time do I get to spend with my doctor during a follow-up appointment?
- › What is the average wait time for an appointment?
- › Are there on-site labs and other services at the doctor's office, or do I have to travel somewhere else for those?
- › If I get sick, how long will it be before I can get in to see my care provider?
- › What happens if I get sick or injured on the weekend?
- › How does my doctor care for me if I am admitted to the hospital?
- › How do I contact my doctor in between visits if I have a question or concern?

These are important questions to ask of your doctor. It will impact how you are cared for during the year. Remember, you want to find a PCP who is patient-centered.

Tip #2 – Schedule Your First Visit Before You Get Sick

Once you have chosen a PCP, the next tip is to schedule your wellness appointment as soon as possible, before you get sick. Most doctors, including those at The Villages Health, have more appointments on their schedule to care for existing patients than they do for new patients. That's great if you are already an established patient and get sick or need something quick.

But that also means you want to establish care with your provider as soon as you can, so when an unexpected illness or injury occurs, you don't have to wait too long for an appointment. Plus, you want your first visit with your doctor to happen when you are feeling your best. The first visit should really allow your doctor to get to know you so he or she can care for you during the year.



Did you know?

When you are a patient at The Villages Health, your first visit lasts up to 60 minutes.



My doctor gets to know me. He knows what's going on in my life. I always feel like there's a genuine connection and it's just such a feeling of security for me personally.

– Diane Kupchak, Patient at Creekside Care Center



Tip #3 – Take Advantage of Preventative or Routine Visits

In addition to scheduling your first new patient appointment and wellness exam, check to see if your Medicare Advantage plan covers additional preventative or routine visits – and take advantage of them.

For example, you may qualify for a \$0 co-pay hearing exam or a \$0 co-pay eye exam every year, a credit toward contact lenses, a \$0 co-pay dental exam, cleaning and x-rays, or other special services.

Did you know?

The Villages Health always offers free hearing screenings with our board-certified audiologists, regardless of your insurance plan.

“ ”

I met with Dr. Monterro and I was extremely impressed. The quality of the hearing test she gave me was so complete compared to what I have had in the past.

– Art Minier, Patient at Creekside Care Center



Tip #4 – Use Your Extra Benefits

Most Medicare Advantage plans also come with extra benefits that you will want to use, such as a gym membership or an over-the-counter drug benefit.

For example, some plans allow you to become a member at the local MVP gym without any additional cost. As long as you swipe your card once per month, your insurance plan will cover the cost of your membership.

You may also have an over-the-counter drug benefit with your plan. For example, some of our patients receive up to \$160 or more per year in covered expenses through their insurance plan.

Tip #5 – Save for Your Co-Pays & Co-Insurance

Unfortunately, not everything is covered by your Medicare Advantage plan, so you will want to be prepared for out-of-pocket expenses. That is why we recommend saving for co-pays and co-insurance.

If you've made the switch from traditional Medicare with a supplement plan to a Medicare Advantage plan, chances are you have saved a significant amount on your monthly premium. Some of our patients report a savings up to \$2,500. We suggest taking that extra savings and putting it aside in a savings account to cover your out-of-pocket-expenses. Why?

Well, unlike a Medicare Supplement plan, when you are on a Medicare Advantage plan you may have to pay a flat fee, called a **Co-pay**, when you visit your care provider when you are sick, see a specialist, go to the ER, etc. In some cases, you may also have to pay a portion of the bill, depending on the service. That portion is called **Co-insurance**.

Now, the good news is that there is a maximum amount allowed on these fees, called your **Maximum Out-of-Pocket Expenses**. The bad news is, when you get sick or injured, it is often a surprise. So you want to be ready for it. That's why we suggest taking that savings from your prior supplement plan and socking it away for a rainy day.



Did you know?

Less than 1% of the patients at The Villages Health reach their out-of-pocket maximum. That's right! We coordinate our patients' care so they don't experience unnecessary costs.

Tip #6 – Save Money on Prescription Drug Costs

Another cost you may have to prepare for is your prescription drug expenses, but there are ways to save on those.

- › Some plans may give you a discount for using a preferred mail order delivery service to fill your prescriptions, as opposed to going to a local pharmacy.
- › Social Security offers help to low-income individuals, and many drug manufacturers offer grants or discount cards for their drugs.
- › Talk to your doctor about trying a generic or a lower-tier drug, which are typically much less expensive than brand name drugs.

Tip #7 – Sign into Your Online Account

When it comes to tracking these expenses, most insurance companies give you access to an online account, which you should take advantage of. Don't wait until you get sick. Go online, create your account and get familiar with it now so you are prepared to manage your care all year long.

Your plan carrier should also provide other features online, like a search feature to find both primary care physicians and specialists in your network. Make sure your plan has access to board-certified physicians and specialists in your area.

No one wants to travel far to see their doctor when they are in pain, so make sure you have access to the care you need right here close to home.

Did you know?

The Villages Health has 15 different specialties, ranging from Audiology to Urology and everything in between, in two convenient locations throughout The Villages®. That's right! Everything you need is just a golf car ride away.

“ ”

In the past, I was traveling all over three different cities to go to all of my doctors. Having all of the disciplines in one place is just a real, real good thing.

– John Munger, Patient at Creekside & Specialty Care Center



Tip #8 – Prepare a Travel Plan

It's great to know you have coverage close to home, but what about when you're traveling far from home? It's important to understand your coverage options outside of your home area and make a plan for when you travel. The good news is that no matter where you go, Medicare Advantage plans cover emergency services.

But what happens if it's not an emergency and you still need to see a health care provider? The coverage options when you travel will vary from plan to plan, depending on whether you have a PPO or an HMO, or a special travel feature. For example, many of our patients have an insurance plan with a “passport” feature they can use to avoid out-of-network costs when they travel.

Familiarize yourself with your specific plan benefits and be prepared when the time comes to take a trip.

Experience the *Difference* at The Villages Health

Finally, at The Villages Health we believe you can get the most from your Medicare Advantage plan if you choose one of our board-certified doctors as your primary care physician. We have a comprehensive health care model specifically designed to manage your care so you can enjoy your lifestyle here in The Villages community and beyond.



60 & 30-Minute
Appointments



Little to No
Wait Times



24/7 On
Call Services



On-site Labs,
X-Rays & Testing



Saturday Clinic



Hospitalists &
Nurse Navigators



98% Patient
Satisfaction



8 Convenient
Locations



Same Day Sick
Appointments



Meet with a Patient Service Representative Today

To learn more about how you can get the most from your Medicare Advantage plan, meet with one of our friendly patient service representatives. You will also receive a welcome gift.*

*First time visitors are eligible to receive a welcome gift at the end of a completed tour with a Patient Service Representative. Gifts are available on a first come, first serve basis. One gift per household.

Call **352-269-3585**
or visit **TheVillagesHealth.com/PSR**

The Villages Health