

# MEDICARE SIMPLIFIED

How to Choose Worry-Free Health Care in The Villages®



The Villages Health

# Medicare Simplified: How to Choose Worry-Free Health Care in The Villages®

When most seniors turn 65, they are immediately inundated with mail, phone calls and ads about enrolling in Medicare. It can be confusing and overwhelming.

We have created this guide to help you cut through the clutter and simplify this complicated system so you can make the decision that is best for you. In the next few pages, we will address some basic questions about Medicare, like the Who, What, When, Where, Why and How.

We will also explain your Medicare options in two parts, so you clearly understand your choices.

Finally, we will tell you about our unique health care model specifically designed for your lifestyle here in The Villages – and explain how your Medicare choice impacts your access to this level of care.

*Let's get started.*

## Who is Entitled to Receive Medicare?

In order to qualify for Medicare, you must be:

	Over the age of 65	 <b>AND</b> you must be a US citizen or legal resident and have lived in the US for 5 consecutive years
	<b>OR</b> have end-stage renal disease	
	<b>OR</b> have a disability	

If you are unsure whether you qualify for Medicare, talk to an insurance agent in one of the eight Medicare Resource Centers located throughout The Villages. They can assess your individual situation and tell you whether you qualify. You can find a map of these locations at the end of this booklet.

## What is Medicare?

Medicare is a Federal Health Insurance Program that provides medical coverage. It consists of 4 different parts: A, B, C and D.



### OPTION 1 - ORIGINAL MEDICARE

Original Medicare includes Part A and B.

**Part A** – Covers your hospital stay and inpatient services. For example, if you go to the ER and get admitted to the hospital, Part A covers a portion of your hospital stay.

**Part B** – Covers your doctor visits and outpatient services. For example, when you need a routine physical exam, catch the flu or require knee surgery, Part B covers a portion of your doctor bills.

But Part A and Part B combined does not provide enough coverage to give you worry-free health care. You will also need prescription drug coverage, which is not included in Original Medicare.

That's why you are given the option to elect Medicare Part D for an additional fee.

**Part D** – Covers prescription drugs. For example, if you need medication to help manage your cholesterol, Part D covers a portion of that cost.

Medicare Part D is offered by a private insurance company, not the Federal Government, so it is considered an add-on insurance. That is why it has an additional monthly cost.

It's important to note that Medicare doesn't cover all of your medical expenses - only a portion. There will also be medical costs that you will have to pay out of your own pocket. These are called out-of-pocket expenses, which include:

- › Rolling Quarterly Deductibles
- › 20% Co-Insurance
- › Co-Pays

To mitigate those costs, you have the option to purchase another add-on called a Supplement Plan.

### *What is a Supplement Plan?*

A **supplement plan** is an additional insurance plan that you purchase from a private insurance company to cover the additional costs that are not covered by Original Medicare, like deductibles and co-pays.

The good news about a supplement plan is that you don't have to worry about high out-of-pocket expenses. If something happens that requires medical care, you are well covered.

The bad news, however, is that like Part D, this is an add-on plan not provided by the Federal government, so it too has an additional monthly cost. It can sometimes be expensive and it doesn't mean you will receive better care.

#### Did you know?

Research shows that even though patients on supplement plans pay more money – they don't get better care. In fact, they are more likely to get sick and be admitted to the hospital.<sup>1</sup>

If you have access to a supplemental plan through your former employer, it is possible that your employer covers all or a portion of your monthly premium. This can help lower the financial burden of a supplemental plan, but make sure you truly understand how your employer is paying for your supplement plan. Some employers pay for plans using the funds in your pension or retirement account.



At the end of the day, most Medicare beneficiaries will pay an additional monthly fee to enroll in a supplement plan, whether through an employer or not.

To review, your first Medicare option is Original Medicare, which includes Part A & B. Plus, you can also add-on Part D and a Supplement Plan for an additional monthly cost.

## OPTION 2 – MEDICARE ADVANTAGE

Now, let's look at your second choice: Medicare Advantage or Medicare Part C.

**Medicare Advantage**, also known as **Medicare Part C**, covers your hospital and inpatient care, your doctor visits and outpatient care, and it usually includes your prescription drug coverage. It's like Parts A, B and D combined – but with even more benefits.

### *Get More Benefits with Medicare Advantage*

Medicare Advantage plans often come with additional benefits like vision, dental and a gym membership.

And like a supplement plan, Medicare Advantage plans are designed to mitigate your financial risk, so there is no need to pay for a supplement plan.

Basically, Medicare Advantage includes all of the same coverage you get in Option 1 – but bundled into one simple plan with lower costs and more benefits than Original Medicare with a supplement.

### *Get Better Care with Medicare Advantage*

Plus, you are more likely to receive better care on a Medicare Advantage plan. A recent study shows that Medicare Advantage patients receive more preventative physician tests and services, fewer avoidable hospital admissions, and fewer emergency room visits.<sup>2</sup>



Watch our helpful video that explains the advantages of Medicare Advantage.

**WATCH VIDEO AT**  
[TheVillagesHealth.com/Enrollment](https://TheVillagesHealth.com/Enrollment)



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*I found that all of my fears about Medicare Advantage were completely unfounded. I got the best doctors. I got the best treatment. I found that my co-pays were all very reasonable.*

– Bob Shrader, Patient at Pinellas Care Center & Specialty Care Center

## TWO MEDICARE CHOICES

To summarize, you have two Medicare choices:

1. You can choose Original Medicare, add Part D for prescription drug coverage and a Supplemental Plan to cover your out-of-pocket expenses.
2. Or you can do what our patients do and choose Part C, also known as Medicare Advantage, and receive extra benefits, pay less and receive better care.



## Receive Better Care with The Villages Health and Medicare Advantage

I know it's hard to believe that you can choose a plan that offers more benefits, costs less and provides better care – but it's true, especially when you become a patient of The Villages Health.

You can get the most out of your Medicare Advantage plan when you choose one of our board-certified doctors as your primary care physician. That's because we have a health care model specifically designed for your lifestyle here in The Villages community – and we consistently rank within the top 1% of the nation for quality.

The Villages Health provides comprehensive health care services, including primary care, specialty care, hospital care and an alternative to urgent care and the ER – to meet all of your health care needs.



## Stay Healthy with The Villages Health and Medicare Advantage

### Primary Care Services

Within these services, you have a primary care doctor who takes time to a build a relationship with you and together with a team manages all points of care. Your first visit with your doctor may last up to an hour, and some visits after that may be up to 30 minutes. This means that your doctor really has the time to get to know you and address your concerns.

At the end of the day, our patients experience better care, report less stress and spend less on health care. This allows you to enjoy your lifestyle in The Villages community for years to come.

Other benefits of our primary care include:

 60 & 30-Minute Appointments	 Little to No Wait Times
 Free Learning Classes	 On-site Labs, X-Rays & Testing
 8 Convenient Locations	 Coordinated Care
 60+ Board-Certified Physicians	 ADA Accredited Diabetes Program

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*When I first met Dr. Reilly, I told him that I was a widow and that I was a little intrepid about changing healthcare and he took my hand and said, “You’re home now. You don’t have to worry anymore about your healthcare.” And true to form, that has been my personal experience ever since.*

– Diane Kupchak, Patient at Creekside Care Center



## Specialty Care Services

If you do have a major concern, your doctor will coordinate care with one of our specialists. We currently offer 15 different specialties in two locations – and we will be growing into the state-of-the-art Center for Advanced Healthcare in Brownwood in 2020.

 Audiology	 Cardiology	 Dermatology
 Diabetes Education	 Dietetics	 Endocrinology
 Gastroenterology	 General Surgery	 Gynecology
 Neurology	 Orthopaedics	 Podiatry
 Psychiatry	 Rheumatology	 Urology

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*I loved that when I went to see a specialist, he had every medication I was on, my full health history and my family history because of the coordination at The Villages Health.*

– Linda Meng, Patient at Pinellas Care Center & Specialty Care Center



## Hospital Care Services

With health care like this, our patients are less likely to be admitted to the hospital. In the event you are, however, we also provide hospital care during and after your stay to make sure you recover quickly.

 Hospitalists	 Doctor Visits
 Nurse Navigators	 Follow Up Visits



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*While I was at the hospital, my regular doctor came to visit, and then the hospitalist and my cardiologist. The hospitalist came to visit me every day. In fact, there were two, and when one was off the other one came.*

- John Munger, Patient at Creekside Care Center

## Alternative to Urgent Care

Your doctor and team are available 24/7, and because we offer on-site services like labs, x-rays, IVs, skin biopsies and more, you should rarely need an Urgent Care facility.

 Saturday Clinic	 24/7 On Call Services
 Same Day Sick Appointments	 Patient Portal

### *Stress Less with The Villages Health and Medicare Advantage*

The Villages Health provides such a high level of care and coordination, as a result, our patients report less stress. That's because we help you navigate your health care, so it doesn't feel like a complex or overwhelming experience.

Our patients don't have to wait long to see their doctor, they don't have to juggle too many appointments or unnecessary tests, they don't have to travel far to receive quality care, they don't have to track down their own medical records and much more.

Instead, they relax and trust us to take care of things for them. That is why The Villages Health patients consistently give us 98% satisfaction rates.

### *Save Money with The Villages Health and Medicare Advantage*

Likewise, our patients also report spending less money. Not only is Medicare Advantage usually less expensive than a Medicare Supplement plan, but as a patient of The Villages Health we help you manage your health care costs. We are dedicated to being good stewards with our resources, so our patients spend less money.

In fact, less than 1% of our patients ever hit their out-of-pocket maximum. That's amazing news!



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*My supplemental insurance was costing me more than \$175 a month. I saved \$2,400-2,500 a year when I made the switch to Medicare Advantage.*

– Randy Pelz, Patient at Colony & Specialty Care Center

But remember, choosing a Medicare Advantage plan is not just a financial decision. And it's not a decision about choosing a doctor or hospital to visit when you are sick. Instead, this decision is about choosing to build a relationship with a team of people who are dedicated to keep you healthy and heal you quickly, so you can enjoy your lifestyle for years to come!

## When Do You Have to Decide between These Two Options?

You may be eligible to enroll in Medicare during the following times:

- › Initial enrollment in Medicare starts when you turn 65. At that time, you have 3 months before, during, and after your birthday month (for a total of 7 months) to make a decision.
- › When you move to a new address, you may be eligible to change your Medicare options within 62 days from the day you update your address with Social Security Administration.
- › During Open Enrollment, which is every year from October 15th through December 7th, you can modify your Medicare coverage.



**65th Birthday**  
*3 months before  
and after your 65th  
birthday month*



**Change of Address**  
*62 days from the day  
you change your address  
with social security*



**Open Enrollment**  
*October 15th  
through December  
7th each year*

## Where Do You Go When it's Time to Enroll?

### Meet with a New Patient Specialist

When it's time to enroll, we hope your first stop is one of The Villages Health care centers located throughout The Villages community. We invite you to meet with a new patient specialist who can give you a tour and explain more about our unique health care model, and answer any questions you may have about how The Villages Health supports your lifestyle in The Villages community. You will also receive a free welcome gift when you complete a tour.

To schedule, visit [TheVillagesHealth.com/PSR](https://TheVillagesHealth.com/PSR).

### Take a Medicare Simplified Class

If you want more information regarding the information presented in this paper, we invite you to attend one of our Medicare Simplified classes. These classes are free and open to the public, so please invite a friend.

To register online, visit [TheVillagesHealth.com/Medicare-Simplified](https://TheVillagesHealth.com/Medicare-Simplified).

### Visit a Health Insurance Resource Center

There are 9 Health Insurance Resource Centers located throughout The Villages. These Centers have detailed pamphlets and videos, information on Medicare plan benefits and a local resource who can help.

You are welcome to walk in to any one of these locations during office hours, Monday through Friday, 9 AM – 5 PM, to meet with an insurance agent.

### Meet with a Medicare Insurance Agent

Once you are in a Health Insurance Resource Center, you will be able to meet with an insurance agent who is available to answer very detailed questions about your Medicare options. Everyone is in a different situation, that's why it helps to get personalized advice from a trained and knowledgeable source.

The agents who staff the Health Insurance Resource Center work for third-party companies and are not affiliated with or incentivized by The Villages Health. They are licensed professionals who will give you unbiased advice. They can assess your individual health care needs and budget, as well as help you weigh the pros and cons of each choice. At the end of the day you can feel confident about making the best decision for your situation.

1. Robert Graham Center, 2016. Understanding the Impact of Medicare Advantage on Hospitalization Rates. A 12-State Study.
2. Better Medicare Alliance, 2018. Medicare Advantage Achieves Better Health Outcomes and Lower Costs for Beneficiaries with Chronic Conditions Compared to Fee-for-Service Medicare.

# Health Insurance Resources *in The Villages® Community*

Do you have questions or concerns about your health insurance options? Get answers in one of the 9 conveniently located Health Insurance Resource Centers located within The Villages and surrounding community. There you can meet with an insurance agent who can answer all of your questions and review various plan options and benefits.



*The Health Insurance Resource Centers are operated by 3rd party insurance agencies not affiliated with The Villages Health. The Villages Health does not promote or endorse one insurance carrier or plan over another, but leaves that decision to our patients.*



## Are You Ready to Take the Next Step?

To learn more about how to choose worry-free health care, meet with one of our friendly patient service representatives. You will also receive a welcome gift.\*

352-269-3585 | [TheVillagesHealth.com/PSR](https://TheVillagesHealth.com/PSR)

The Villages Health

\*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.