



(845) 808-1700

New In 2023

Social Security Enrolls You In Original Medicare (Part A and Part B)

Medicare is health insurance for people age 65 or older. Certain people younger than age 65 can qualify for Medicare, including those with disabilities and those who have permanent kidney failure.

If you're eligible at age 65, your "Initial Enrollment Period" begins three months before your 65th birthday, includes the month you turn age 65, and ends three months after that birthday.

If you enroll in this month of your IEP	Your Part B Medicare coverage starts
1 to 3 months before you reach age 65	The month you turn age 65
The month you reach age 65, or 1 to 3 months after you reach age 65	The 1st day of the month after you sign up

If you don't enroll in Medicare Part B during your Initial Enrollment Period, you have another chance each year to sign up during a "General Enrollment Period" from January 1 through March 31.

Your coverage will begin the first of the following month you enroll.

If you choose not to enroll in Medicare Part B and then decide to do so later, you may have to pay a higher monthly premium for as long as you have Part B.

Most people become eligible for Medicare when they turn 65. ... If you are receiving Social Security retirement benefits or Railroad Retirement benefits, you should be automatically enrolled in both Medicare Part A and Part B.

If you are within three months of turning age 65 or older and <u>not ready to start</u> <u>your monthly Social Security benefits</u>, visit <u>www.ssa.gov</u> to apply online.

For more information contact Social Security @ 1-(800) - 772 - 1213

MSPs and Medicaid in 2023

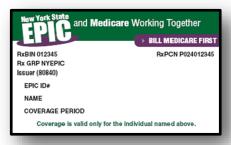
MSP and Medicaid income limits are higher and instead of three MSPs there are two:

QI and QMB.

Program	Individuals Income	Couples Income	Individuals Asset Limit	Couples Asset Limit
QI	\$2,280	\$3,077	No limit	No limit
QMB	\$1,697	\$2,288	No limit	No limit
Medicaid	\$1,697	\$2,288	\$28,133	\$37,902

If you are enrolled in an MSP or in the Medicaid spend-down program, you may receive additional benefits or your benefits may change in 2023. You do not need to do anything except respond to any requests for more information you receive from Medicaid, including the request to recertify your MSP or Medicaid.

- Individuals currently enrolled in SLMB or QI should be eligible to receive QMB in 2023.
- Individuals enrolled in QMB may be eligible to receive Medicaid if they also meet the asset requirements.
- Individuals enrolled in the Medicaid spend-down may be eligible to receive Medicaid without a spend-down if their monthly income falls within the new limits.





If you are a NYS resident, 65 or older with an annual income of less than \$75,000 for single and \$100,000 for married, consider joining EPIC!

EPIC saves you money by supplementing your Medicare Part D plan.

- **Fee Plan** members pay an annual fee to EPIC based on their income. The EPIC co-payments range from \$3-\$20 based on the cost of the drug. Those with Full Extra Help from Medicare have their EPIC fee waived.
 - <u>Deductible Plan</u> members must meet an annual out-of-pocket deductible based on their income before paying EPIC co-payments for drugs.

EPIC also pays the Medicare Part D plan premiums, up to the amount of a basic plan, for members with annual income below \$23,000 if single or \$29,000 if married. Those with higher incomes must pay their Part D plan premiums however, their EPIC deductible is lowered by the annual cost of a Medicare Part D drug plan.

For more information contact NYS EPIC @ 1-800-332-3742



Making New York a better place to age



ARE YOU CONCERNED ABOUT AN ERROR OR POTENTIAL FRAUD? CALL 1-877-678-4697

MEDICARE'S "OPEN ENROLLMENT" October 15th - December 7, 2023

This is the time of year all people with Medicare can make changes to their health and prescription drug plans, with new coverage to begin January 2024

"MEDICARE ADVANTAGE OPEN ENROLLMENT PERIOD" January 1 - March 31, 2024

If you're in a Medicare Advantage plan you can change to a different Medicare Advantage plan once or to Original Medicare with or without a Medicare Part D plan.

EPIC ANNUAL "SPECIAL ENROLLMENT PERIOD" EPIC allows all their members to change their Medicare Part D plan one time a year.

"SPECIAL ENROLLMENT PERIODS"

You can make changes to your Medicare Advantage and Medicare prescription drug coverage when certain events happen in your life. These changes are called; Special Enrollment Periods (**SEP's**)

For more information call 1-800-MEDICARE

MEDICARE COUNSELING IS AVAILABLE

- Visit www.medicare.gov where you can get a personalized comparison of costs and coverage
- Call 1-800-MEDICARE (1-800-633-4227) TTY users should call 1-877-486-2048
- **Call the Medicare Rights Center** 1-800-333-4114
- Call Lynn Hill, HIICAP Coordinator, Putnam **County Office for Senior Resources** (845) 808-1700 ext. 47115

For current information on Medicare, Medicare Prescription Drug Coverage, Medicare Advantage or to get publications call

1-800-MEDICARE (1-800-633-4227)

or log on to: www.medicare.gov



DISCLAIMER

HIICAP

The information provided by the Health Insurance Information, Counseling and Assistance Program is intended for the sole purpose of educating consumers in regard to the choices available for their health insurance needs. Particular emphasis is placed on understanding original Medicare.

Nothing herein is intended nor should it be construed as an endorsement by the State of New York of any specific insurance product or insurer.

*New York State does not endorse nor recommend any specific insurance product or insurer; this program is solely intended to educate consumers about their choices.

This project was supported, in part by grant number 90SAPG0105, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201

Social Security (Extra Help) With Medicare Prescription Drug Costs

Anyone with Medicare can get Medicare Prescription Drug coverage, (Medicare Part "D").

"Extra Help" is available for some people with limited income and resources. It will pay for all or most of the monthly premiums, annual deductibles and prescription co-payments related to a Medicare prescription drug plan. To find out if your eligible Social Security will need to know your income, the value of your savings, investments and real estate (other than your home). If you are married and living with your spouse, SSA will need this information for the both of you.

To Qualify for "Extra Help"

- Annual income must be limited to \$22,116 for an individual or \$29,820 for a married couple living together. Even if your annual income is higher, you still may be able to get help.
- -Resources are limited to \$16,660 for an individual or \$33,240 for a married couple living together.

 Resources include bank accounts, stocks and bonds.

Social Security does not count your house, car, and any life insurance policy as resources.



After you apply, Social Security will review your application and send you a letter to let you know if you qualify for "Extra Help". Once you qualify, you can choose a Medicare prescription drug plan. If you do not select a plan, the Centers for Medicare & Medicaid Services (CMS) will do it for you.

To apply online visit:

www.socialsecurity.gov/extrahelp
or call SSA @ 1-800-772-1213
(TTY 1-800-325-0778)

Medicare Savings Programs (MSPs)

Are you an individual with a monthly income of less than \$2,280 or a couple with a monthly income of less than \$3,077?

If approved for this benefit, the Medicare Savings Program will pay your Medicare Part B premium, which means that you will have extra money added to your Social Security check each month. You will receive extra help from Medicare which will reduce your co-pays to as low as \$4.15 for generic & \$10.35 for brand drugs that are covered by your Medicare Part D plan. In addition you will not be subject to a Medicare Part D plan deductible or the "Gap / Donut Hole".

MSPs

1. Qualifying Individual (QI)

- Pays for your Part B premium
- May receive up to three months retroactive reimbursement for Part B premiums (Note: only for premiums paid up to three months before your MSP effective date, and within the same year of that effective date)
- You cannot have both QI and Medicaid

2. Qualified Medicare Beneficiary (QMB)

- Pays for Medicare premiums
- Providers are prohibited from charging you for Medicare cost-sharing (deductibles, coinsurance, and copayments). This means you should not be billed for any Medicare-covered services you receive from Original Medicare providers or providers in your Medicare Advantage Plan's network
- You can have both QMB and Medicaid

MEDICARE AT A GLANCE:

Medicare Part A

Medicare Part A helps cover inpatient care in hospitals. This includes critical access hospitals and skilled nursing facilities (not custodial or long-term care). It also helps cover hospice care and home health care. You must meet certain conditions to get these benefits.

Most people automatically get Medicare Part A coverage without having to pay a monthly payment, called a premium. This is because they or a spouse paid Medicare taxes while working. If you don't automatically get premium-free Part A, you may be able to buy it.

Medicare Part B

Medicare Part B helps cover medical services like doctors' services, outpatient care, items medically necessary, and preventative services that Part A does not cover. Medicare part B is optional however, if you don't sign up for part B when eligible, you may have to pay a late enrollment penalty, generally for as long as you have Part B.

The standard Medicare Part B premium for 2023 is \$164.90. Some people may pay a higher premium, based on their income. If you must pay higher premiums, SSA will send you a letter with your premium amount(s) and the reason for their determination. If you have both Medicare Part B and a Medicare Part D plan, you'll pay higher premiums for each.

Medicare Prescription Drug Coverage (Part D)

Medicare offers prescription drug coverage to everyone with Medicare. If you decide not to join a Medicare drug plan when you're first eligible, and you don't have other "creditable" prescription drug coverage you'll likely pay a late enrollment penalty, which will be added to your monthly premium generally for as long as you have Medicare prescription drug coverage.



Medicare Advantage Plans (Part C)

Medicare Advantage Plans are health plan options, like HMO's and PPO's, also known as Medicare "Part C" They are approved by Medicare but are run by private companies. They provide all your Part A and Part B coverage and must cover medically-necessary services. They generally offer extra benefits, and many include Part D drug coverage. You may have to see doctors who belong to the plan or go to certain hospitals to get covered services.

Some Medicare Advantage Plans charge a monthly premium in addition to your Part B premium. Costs vary by plan and the services you use.

Medicare Part B covers up to
8 over-the-counter COVID
tests each calendar month, at
no cost to you.

* New in 2023 *

As of January 2023, Part D covered insulin copays are capped at \$35 per month, with no deductible. You should contact your Part D plan for information about its exact costs and coverage rules for insulin.

Part D plans must include most commercially available vaccines on their formularies, including the vaccine for shingles (herpes zoster). The only exceptions are flu, pneumonia, hepatitis B, and COVID-19 vaccinations, which are covered by Part B.

As of January 2023,
all Medicare-covered vaccines
should be free to you. This
means you should not owe
any cost-sharing, such as
a copayment, coinsurance,
or deductible for your covered

vaccines.

To avoid billing issues, it is usually best to make sure that your health care provider or pharmacy administering the vaccine will bill your Part D plan. When you get a vaccine at your doctor's office, ask the provider to call your Part D plan first to find out if your provider can bill your Part D plan directly.

1-800-MEDICARE (1-800-633-4227)