Your Medicare Options

When you first enroll in Medicare and during certain times of the year, you can choose how you get your Medicare coverage. There are 2 main ways to get Medicare:

Original Medicare

- Original Medicare includes Medicare Part A (Hospital Insurance) and Part B (Medical Insurance).
- If you want drug coverage, you can join a separate Part D plan.
- To help pay your out-of-pocket costs in Original Medicare (like your 20% coinsurance), you can also shop for and buy supplemental coverage.
- Can use any doctor or hospital that takes Medicare, anywhere in the U.S.

☑ Part A



✓ Part B



You can add:



□ Part D



□ Supplemental coverage

(Some examples include coverage from a Medicare Supplement Insurance (Medigap) policy, or coverage from a former employer or union.)

Medicare Advantage (also known as Part C)

- Medicare Advantage is an "all in one" alternative to Original Medicare. These "bundled" plans include Part A, Part B, and usually Part D.
- Plans may have lower out-of-pocket costs than Original Medicare.
- In most cases, you'll need to use doctors who are in the plan's network.
- Most plans offer extra benefits that Original Medicare doesn't cover- like vision, hearing, dental, and more.

☑ Part A



☑ Part B



Most plans include:

☑ Part D



Extra benefits

Some plans also include:

Lower out-of pocket costs

AT A GLANCE

Original Medicare vs. New Hanover Health Advantage in partnership with FirstMedicare Direct

Coverage

Original Medicare

- Original Medicare covers most medically necessary services and supplies in hospitals, doctors' offices, and other health care settings.
- You can join a separate Medicare Prescription
 Drug Plan (Part D) to get drug coverage, usually
 requiring an additional premium and a separate
 deductible.
- In most cases, you don't have to get a service or supply approved ahead of time for it to be covered.

New Hanover Health Advantage in partnership with FirstMedicare Direct



- Prescription drug coverage is included in both our plans, with the HMO-POS Platinum product without an additional deductible.
- In some cases, you may need a service or supply approved ahead of time for it to be covered.

Cost

Original Medicare

- For Part B-covered services, you usually pay 20% of the Medicare-approved amount after you meet your deductible.
- You pay a premium (monthly payment) for Part B.
 If you choose to buy prescription drug coverage (Part D), you'll pay that premium separately.
- There's no yearly limit on what you pay out-of-pocket, unless you have supplemental coverage (like a Medigap policy).
- You can get supplemental coverage (like a Medigap policy) to help pay your remaining outof-pocket costs (like your 20% coinsurance). Or, you can use coverage from a former employer or union, or Medicaid.

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- Both our HMO-POS plans have **no deductible for medical services covered by Part A and Part B.**
- In addition to a monthly premium for Original Medicare Part B services, you can choose between \$0 or \$45 premium plans that cover Parts A, B, D, and preventive dental services.
- By joining our plan, you will not pay more than \$4,500 each year in out-of-pocket costs for Medicare Part A- and B-covered services in network (or \$11,000 out of network). Out-of-pocket expenses will only be incurred when services are provided.
- You can't buy or use separate supplemental coverage (like a Medigap policy). Supplemental benefits are available (i.e. dental coverage, etc.).

Doctor and Hospital Choice

Original Medicare

- You can go to any doctor or hospital that takes Medicare, anywhere in the U.S.
- In most cases, you don't need a referral to see a specialist.

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- An HMO-POS is a Medicare Advantage Plan with a more flexible network, allowing Plan Members to seek care outside of the traditional HMO network.
- You generally get your care and services from doctors, other health care providers, or hospitals in the plan's network. However, you can go out-of-network for certain services, **usually for a higher cost.**

Travel

Original Medicare

 Original Medicare generally doesn't cover care outside the U.S. You may be able to buy a Medigap policy that covers care outside the U.S.

New Hanover Health Advantage in partnership with FirstMedicare Direct



- When using providers outside of our network, nonemergency services are not routinely covered. Coverage of emergency services are provided outside of the U.S.
- These plans include Worldwide Emergency coverage as a supplemental benefit.

Call 1 (855) 880-2521 or visit www.nhrmc.org/advantage

for more information about New Hanover Health Advantage