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<https://oneop.org/learn/160062/>

1

# Medicare 101: Simplifying Enrollment and Benefits

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2

## Medicare 101: Simplifying Enrollment and Benefits



### Event Materials

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3

3



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4

4

# Today's Presenter



## Andrew Crocker

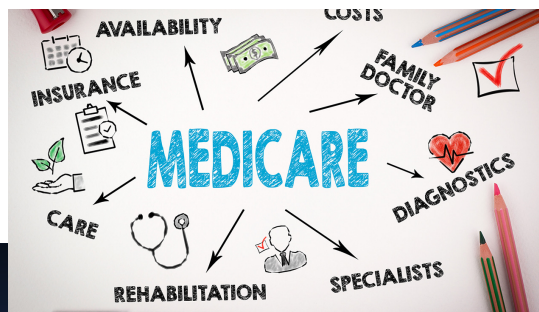
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5


5

# Medicare Changes in 2025: What Providers Need to Know



6

6



**Today we'll talk about...**

- Changes to Medicare in 2025
- Medicare Basics
- Coordination of Benefits

7

**New in 2025**

- **Caregiver support**
  - Respite
  - Training
- **Expanded access to mental health**
  - Licensed Marriage and Family Therapists and other providers
- **Changes to telehealth**
  - Most telehealth services will only be covered in an approved telehealth facility
- **Prescription drug costs**
  - Part "D" out-of-pocket maximum capped at \$2,000 (inclusive of deductibles and co-payments but not monthly premiums)
  - Option to spread payments for covered prescriptions over 12 months

8

# Medicare

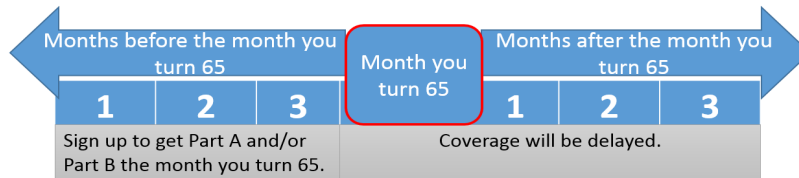
- What is it?
  - Health insurance for people 65 and older
  - Under 65 in certain circumstances
    - Amyotrophic Lateral Sclerosis
    - End-Stage Renal Disease
    - Meet Social Security Disability Insurance requirements
- How is it administered?
  - Centers for Medicare & Medicaid Services (CMS) administers program
  - Social Security Administration (SSA) enrolls most individuals
    - Railroad Retirement Board enrolls railroad retirees

9

9

## When to Enroll

- You can first enroll during your Initial Enrollment Period (IEP), which lasts 7 months



- Can enroll in premium-free Part A anytime after IEP begins
- Can only enroll in Part B (and premium Part A) during IEP and other limited times
- May have a lifetime penalty if you don't enroll during IEP

10

10

## Qualifying Based on a Disability

- Medicare usually begins after getting Social Security Disability Insurance (SSDI) for 24 months
  - Unless you have Amyotrophic Lateral Sclerosis
    - Medicare begins first month entitled to SSDI
- Generally, this means you get Medicare in the 30th month after you become disabled
  - 5-month waiting period for SSDI benefits
  - Followed by 24-month waiting period for Medicare

11

11

## Medicare & Medicaid are Different

### Medicare

- National program that is consistent across the country
- Administered by the federal government
- Health insurance for people 65 and over and with certain disabilities or with End-Stage Renal Disease
- Nation's primary payer of inpatient hospital services to the disabled, elderly and people with ESRD

### Medicaid

- Statewide programs that vary among states
- Administered by state governments within federal rules
- Health insurance for people based on need
- Nation's primary public payer of acute health care, mental health and long-term care services

12

12

# 4 Parts of Medicare

<b>Part A</b> Hospital Insurance	<b>Part B</b> Medical Insurance	<b>Part C</b> Medicare Advantage Plans (like HMOs/PPOs) Includes Part A, Part B and sometimes Part D coverage	<b>Part D</b> Medicare Prescription Drug Coverage

13

13

# Medicare Coverages Choices

```
graph TD; A[Original Medicare] --- B[Part A Hospital Insurance]; A --- C[Part B Medical Insurance]; A --- D[or]; D --- E[Medicare Advantage Plan]; B --- F[You can add]; C --- F; F --- G[Medicare Supplement Insurance (Medigap) Policy]; F --- H[Part D Prescription Drug Coverage]; E --- I[Part C Combines Part A and Part B]; I --- J[May include, or you may be able to add]; J --- K[Part D Prescription Drug Coverage (Most Part C plans cover prescription drugs. You may be able to add drug coverage to some plan types if not already included.)];
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14

14

# Comparison Summary

## Original Medicare

- Covers Part A and Part B benefits
- Medicare provides this coverage directly
- You have your choice of doctors and hospitals that are enrolled in Medicare and accepting new Medicare patients
- Generally, you or your supplemental coverage pay deductibles and coinsurance
- You usually pay a monthly premium for Part B

## Medicare Advantage Plan

- Sometimes called Part C
- Covers Part A and B benefits and may cover additional benefits (like vision or dental)
- Coverage provided by private insurance companies approved by Medicare
- In most plans, you need to use plan doctors, hospitals, or other providers or you pay more/all costs
- You may pay a monthly premium (in addition to your Part B premium) and a copayment or coinsurance for covered services

15

15



## Original Medicare Part A: Inpatient Coverage

- Under Original Medicare, Part A helps cover
  - Inpatient hospital care
  - Inpatient skilled nursing facility care
    - Not long-term care
  - Blood (inpatient)
  - Home health care
  - Hospice care

16

16



## Paying for Medicare Part A

- **Most people don't pay a premium for Part A**
  - If you paid Federal Insurance Contributions Act (FICA) taxes at least 40 quarters
- **If you paid FICA less than 40 quarters**
  - Can pay a premium to get Part A (up to \$505/month in 2025)
- **May have a penalty if you don't enroll when first eligible**
  - 10% higher for 2x the number of years eligible but not enrolled

17

<p><b>Hospital &amp;/or Mental Health Inpatient Stay</b></p>	<ul style="list-style-type: none"> <li>• <b>\$1,632</b> deductible and no coinsurance for days 1–60 of each benefit period</li> <li>• <b>\$408</b> per day for days 61–90 each benefit period</li> <li>• <b>\$816</b> per “lifetime reserve day” after day 90 of each benefit period (up to 60 days over your lifetime)</li> <li>• All costs for each day after the lifetime reserve days</li> <li>• Inpatient mental health care limited to 190 days in a lifetime</li> </ul>
<p><b>Skilled Nursing Facility Care</b></p>	<ul style="list-style-type: none"> <li>• <b>\$0</b> per day for days 1–20 each benefit period</li> <li>• <b>\$204</b> per day for days 21–100 of each benefit period</li> <li>• All costs for each day after day 101 in a benefit period</li> </ul>
<p><b>Home Health Care Services</b></p>	<ul style="list-style-type: none"> <li>▪ <b>\$0</b> for home health care services</li> <li>▪ 20% of the Medicare-approved amount for durable medical equipment</li> </ul>

## Part A Costs (2024)

18

## Original Medicare Part B: Outpatient Coverage

- Under Original Medicare, Part B helps cover
  - Doctors' services
  - Outpatient medical and surgical services/supplies
  - Clinical lab tests
  - Durable medical equipment
  - Diabetic testing supplies
  - Preventive services

19

19

## Paying for Medicare Part B

- **Standard Premium for 2024 is \$174.70/month**

- May be higher based on income
- May be higher due to late enrollment penalty
  - 10% higher for each year eligible but not enrolled
  - Exceptions apply
- Generally deducted from Social Security or Railroad Retirement benefits
  - Other payment options available

20


20

<b>Annual Deductible</b>	\$240.00
<b>Coinsurance for Part B Services</b>	<ul style="list-style-type: none"><li>• 20% coinsurance for most covered services, like doctor’s services and some preventive services, if provider accepts assignment</li><li>• \$0 for some preventive services</li><li>• 20% coinsurance for outpatient mental health services, and copayments for hospital outpatient services</li></ul>

**Part B Costs (2024)**

21

21



## Help for People with Limited Resources

- Medicare Savings Programs
  - Help from Medicaid paying Medicare costs
- Extra Help
  - Help paying Part D prescription drug costs
- Medicaid
  - Federal-state health insurance program for people with limited income/resources

22

22

Medicare Savings Program	Individual Monthly Income/Resource Limit*	Married Couple Monthly Income/Resource Limit*	Helps Pay
<b>Qualified Medicare Beneficiary (QMB)</b>	\$1,275/\$9,430	\$1,724/\$14,130	Parts A/B premiums, deductibles, coinsurance, and copayments
<b>Specified Low-Income Medicare Beneficiary (SLMB)</b>	\$1,526/\$9,430	\$2,064/\$14,130	Part B premiums only
<b>Qualifying Individual (QI)</b>	\$1,715/\$9,430	\$2,320/\$14,130	Part B premiums only
<b>Qualified Disabled &amp; Working Individuals (QDWI)</b>	\$5,105/\$4,000	\$6,899/\$6,000	Part A premiums only


\*Variability in income limits by state.

Medicare Savings Programs (2024)
23

23

## Part D, In Brief

- An optional benefit available to all people with Medicare
- Run by private companies that contract with Medicare
  - Choose a plan that fits needs and join
  - May pay a lifetime penalty if you join late
  - Plans have formularies
    - Must include range of drugs in each category
  - Subject to change



24

24

- Costs vary by plan (and income in some cases) but most people will pay
  - Monthly premium
    - Average projected premium = \$46.50/month
  - Annual deductible
    - No more than \$590
  - Copayments
    - Out-of-pocket spending capped at \$2,000
- Extra help available for beneficiaries with limited income and resources

## Part D Costs (2025)

25

25

## Medicare Supplement Insurance – “Medigap”

- Medigap policies help pay some of the health care costs that Original Medicare does not cover
  - Standardized for all states except MA, MN & WI
  - Must be enrolled in Parts A & B
  - Offered by private insurance companies to which you pay a separate premium
    - Guarantee Issue Period: six-month period starting the first day of the month you turn 65
  - Medigap policies do not cover everything
  - More Information:
    - <https://www.medicare.gov/supplement-other-insurance/compare-medigap/compare-medigap.html>

26

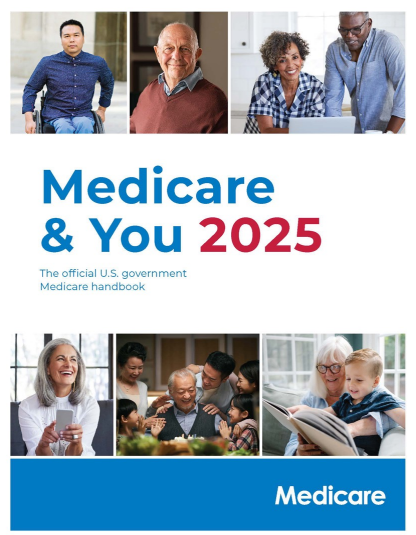
26

Medigap Plans										
BENEFITS	A	B	C	D	F	G	K	L	M	N
Medicare Part A coinsurance and hospital costs (up to an additional 365 days after Medicare benefits are used)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Medicare Part B coinsurance or copayment	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%***
Blood (first 3 pints)	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%
Part A hospice care coinsurance or copayment	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%
Skilled nursing facility care coinsurance			100%	100%	100%	100%	50%	75%	50%	100%
Part A deductible		100%	100%	100%	100%	100%	50%	75%	100%	100%
Part B deductible			100%		100%					
Part B excess charges					100%	100%				
Foreign travel emergency (up to plan limits)			80%	80%	80%	80%			80%	80%
Out-of-Pocket Limit in 2024							\$7,060	\$3,530		

# Medicare Supplement Insurance (2024)

27

27




**Medicare & You 2025**  
The official U.S. government Medicare handbook

**Medicare**

#10050

**Your Medicare Benefits**

This official government booklet has important information about the items and services Original Medicare covers.



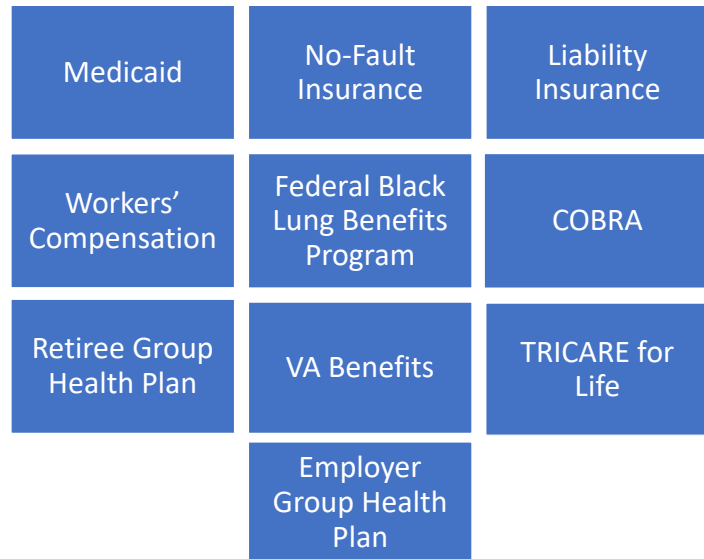
#10116

Helpful Medicare Publications

28

28

## Coordination of Benefits



29

29

## Coordinating Medicare Benefit Payments

- Medicare may be primary payer
  - In the absence of other primary insurance
- Medicare may be secondary payer, if appropriate
  - Other insurance that must pay first
- Medicare may not pay at all
  - For services and items other health insurance is responsible for paying

30

30

## When Does Medicare Pay?

- **Primary**
  - Medicare is your only coverage
  - Your other source of coverage is
    - Medigap policy
    - Medicaid
    - Retiree benefits
    - The Indian Health Service
    - Veterans Benefits
    - TRICARE for Life
- **Secondary**
  - When Medicare is not responsible for paying a claim first
  - Legislation protects the Medicare Trust Funds

31

31

## Medicare & the Health Insurance Marketplace

- Medicare is not part of the Marketplace
  - If you have Medicare, you're covered and don't need to do anything related to the Marketplace
  - The Marketplace does not offer Medigap or Part D plans
- It is against the law for someone who knows you have Medicare to sell you a Marketplace plan

32

32



## Employer Group Health Plan

- Coverage offered by many employers and unions
  - To current employees, spouse, and family members
  - To retirees, spouse, and family members
  - Includes Federal Employee Health Benefits Program
- In many instances, employees can choose to keep or reject
  - Retirees may not have that option



33

33

## Veterans Affairs

- **If you have Medicare and VA benefits:**
  - Can get treatment under either program
- **Medicare pays when you choose to get your benefits from Medicare.**
- **To receive services under VA benefits:**
  - You must get your health care at a VA facility, or
  - Have the VA authorize, or agree to pay for, services in a non-VA facility




34

34

34

## TRICARE for Life


- **Military retiree coverage for services covered by Medicare and TRICARE for Life:**
  - Medicare pays first
  - TFL pays remaining
- **For services covered by TFL but not Medicare:**
  - TFL pays first
  - Medicare pays nothing
- **For services received in a military hospital or other federal provider:**
  - TFL pays first
  - Medicare generally pays nothing



35

## Coordination of Prescription Benefits

- Ensures proper payment by Medicare Part D plans
- Medicare Part D plan usually pays primary
  - Part D plan may make conditional payment
    - To ease burden on enrollee
    - Medicare is reimbursed
- If you lose your creditable prescription drug coverage
  - You will get a Special Enrollment Period (SEP); the SEP starts with notification of the loss of creditable coverage
  - Ends either two months after the notification, or two months after the end of the coverage – whichever is later



36

## Additional Info & Resources

- Medicare – <http://www.medicare.gov>
- Medicaid – <http://www.medicaid.gov>
- Social Security Administration – <http://ssa.gov>
- State Health Insurance Assistance Program – <http://www.medicare.gov/talk-to-someone>
- CMS National Training Program – <http://cmsnationaltrainingprogram.cms.gov>



37

37



## Key Takeaways

- Medicare is a health insurance program but may not cover all health care costs
- There are many choices in how you get coverage and certain decisions are time-sensitive
- There are programs for people with limited income and resources
- Medicare has structures in place to coordinate benefits with other health payers

38

38

# Continuing Education



This webinar has been approved for **1.0 continuing education (CE) credits:**

- **University of Texas at Austin, Steve Hicks School of Social Work** (Social Work, LPC, LMFT)
- **Commission for Case Manager Certification**
- **Patient Advocate Certification Board** to Board Certified Patient Advocates (BCPA)
- **Association for Financial Counseling and Planning Educators** (AFCPE)
- **Center for Financial Certifications** for CPFCs
- American Association for Family and Consumer Sciences (AAFCS) for **Certified in Family and Consumer Sciences** (CFCS)
- American Association for Family and Consumer Sciences (AAFCS) for **Certified Personal and Family Finance Educator** (CPFFE)
- Certified Family Life Educators (CFLEs)
- OneOp **certificate of attendance** available.

## Evaluation Link

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[Continuing Education](#)

## Questions?

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39

39

# Upcoming Webinar



## Supporting Military Youth with Disabilities in Transition to Adult Life

December 10, 2024, 11:00 AM – 12:30 PM ET

This session will provide valuable resources to support youth with disabilities and their families as they navigate the transition from Individuals with Disabilities Education Act (IDEA) services to post-secondary life.



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40

40

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41