

YOUR **AMAC** 2024 MEDICARE **GUIDE**



Amac  [®]
MEDICARE ADVISORY SERVICE



1.844.652.4663
AMAC.US

AMAC
IS YOUR
RESOURCE
FOR ALL THINGS
MEDICARE



**Searching for a Medicare plan
that meets your needs?**

**AMAC's Medicare Advisory Service
is just a phone call away!**

**Get personalized Medicare guidance
from licensed, certified professionals
with access to multiple "A" rated
insurance companies -
another reason why
AMAC is better.**

**Better for you.
Better for America!**



AMAC
WILL MAKE
CHOOSING THE RIGHT
INSURANCE PLAN
EASY FOR YOU



**CONFUSED ABOUT YOUR CHOICES? WORRIED ABOUT
PAYING TOO MUCH? OUR TRUSTED, LICENSED INSURANCE
AGENTS ARE AVAILABLE TO HELP YOU.**

Whether it's keeping your doctors or making sure your prescriptions are covered - we know what's important to you. Providing personal care and professional service is our top priority.

With AMAC, you'll work with your own experienced, friendly agent each time you call. No more having to repeat your information over and over to different people.

MAKING SENSE OF MEDICARE



LET **AMAC**
BE YOUR GUIDE!

MEDICARE, THE UNITED STATES HEALTH INSURANCE PROGRAM CREATED IN 1965, IS FOR PEOPLE AGED 65 AND OLDER, OR PEOPLE UNDER AGE 65 WITH CERTAIN DISABILITIES OR ILLNESSES. MEDICARE IS RUN BY CMS, THE CENTERS FOR MEDICARE AND MEDICAID SERVICES.

FUN FACT: President Harry S. Truman was the very first Medicare beneficiary, and President Johnson presented him with the first Medicare card.

Original Medicare consists of two parts: Part A – Hospital Insurance (Inpatient Care) and Part B – Medical Insurance (Outpatient Care). Original Medicare was never intended to cover everything, so most people purchase additional coverage.

This is where AMAC can help you choose which plan is right for your unique situation.

MEDICARE ADVANTAGE PLANS

are sometimes referred to as Part C and replace Original Medicare to combine Hospital and Medical coverage under one plan. Advantage plans can be purchased with or without Prescription Drug Coverage (Part D).

There are different types of Medicare Advantage plans such as HMOs, PPOs, Special Needs Plans, Private Fee for Service Plans, and Medicare Savings Accounts

MEDICARE SUPPLEMENT PLANS (aka Medigap Plans),

work with Original Medicare to help pay your out-of-pocket costs like co-payments, co-insurance, and deductibles. Supplement Plans do not have a network, so they can be used at any provider or facility that accepts Original Medicare in the U.S. or its territories.

There are several Medicare Supplemental Plans to choose from, all of which have varying levels of coverage at different prices. Supplement Plans do not include Prescription Drug Coverage, but you can purchase a separate Part D plan to cover your prescriptions.





MEDICARE COVERAGE OPTIONS

PART A (HOSPITAL)

PART B (MEDICAL)

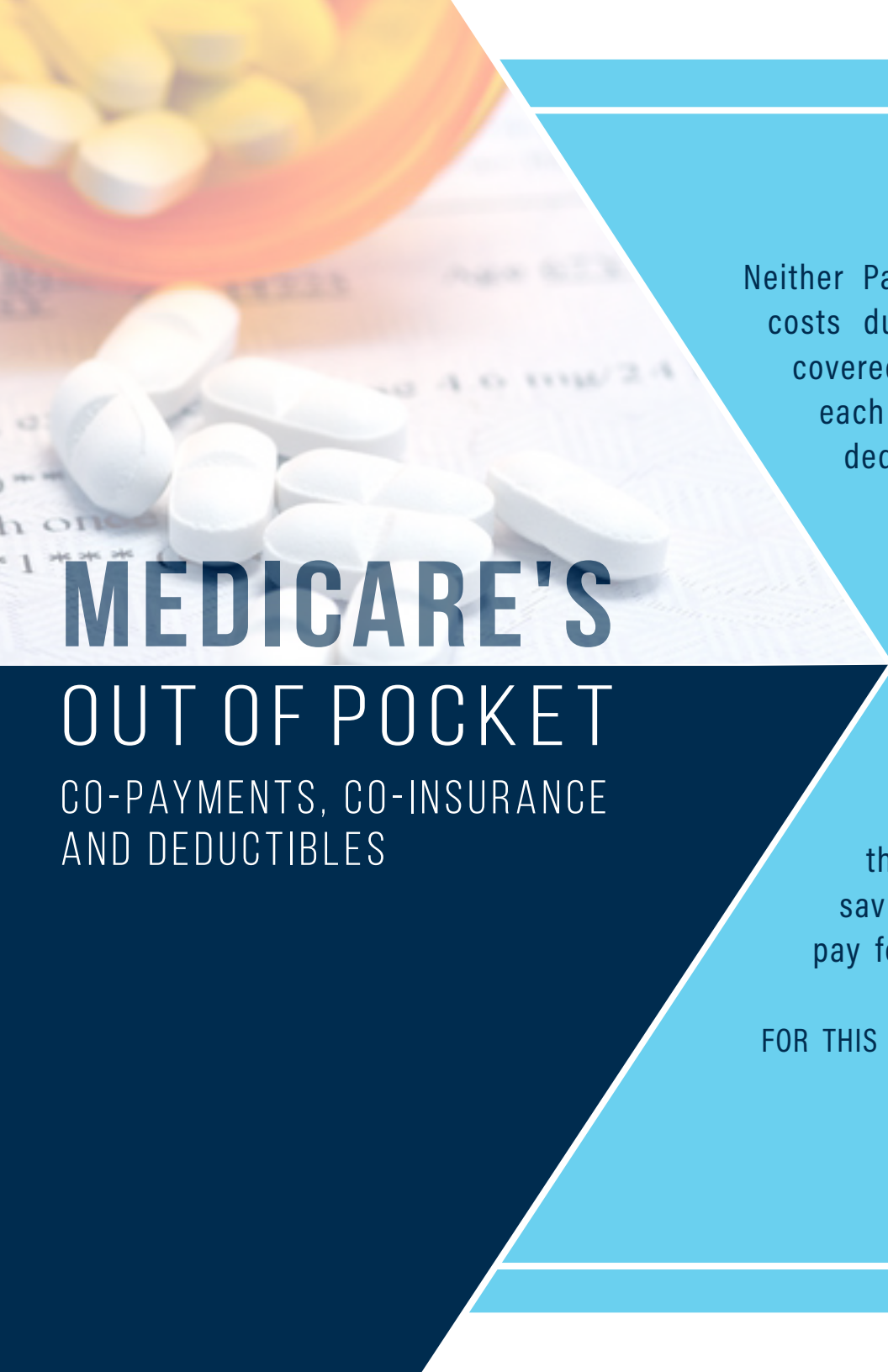
PART C (MEDICARE ADVANTAGE PLANS)

PART D (MEDICARE PRESCRIPTION
DRUG COVERAGE)

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long as you or a spouse have worked for 10 or more years and have paid into Medicare via payroll deduction, there is no charge for Part A. The cost for Part B in 2024 is \$174.70 per month, or more for higher income earners. All single beneficiaries with earnings more than \$103,000 year and couples with incomes over \$206,000 pay higher premiums.



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Part A nor B pays for all of a covered person's medical care due to deductibles and co-insurance, which means the individual must pay out of pocket. For example, for an inpatient benefit period, a beneficiary will pay a Part A deductible of \$1,632 in 2024 for a hospital stay of 1-60 days.

Under Part B, a beneficiary must meet this year's deductible of \$240 and is required to pay 20% of the Medicare-approved amount for most services covered by Part B.

Beneficiaries may also be required to pay excess charges up to 15% for services rendered by non-participating Medicare providers. All of these costs can amount to thousands of dollars, draining a beneficiary of his/her life savings, or worse yet, leaving a beneficiary with no means to cover rising medical costs and expensive prescription drugs.

FOR THIS REASON, IT IS IMPORTANT TO CONSIDER ADDITIONAL COVERAGE.



HOW TO ENROLL IN MEDICARE **PARTS A+B**

**I'M
READY TO
SIGN UP FOR MEDICARE.
WHAT ARE MY NEXT STEPS?**

1. Contact Medicare (or the Railroad Retirement Board) to sign up for Original Medicare as soon as three months before your 65th birthday. If you qualify for Medicare due to disability or chronic illness, you may be able to sign up sooner.

(Already getting benefits from Social Security or the Railroad Retirement Board? In most cases, you'll be signed up for Part A and B automatically.)

2. Call your AMAC Medicare Advisor to look at additional plan options! Be sure to have the names of your doctors as well as a list of your current medications handy.

3. Once we have pinpointed a plan that you love, AMAC makes the application process smooth and simple. It's as easy as having a conversation over the phone - we ask some routine questions and tell you all the important things you need to know about your plan.

DID YOU KNOW?

WE ALSO HAVE CONVENIENT ONLINE APPLICATIONS FOR THOSE WHO WOULD RATHER COMPLETE THEIR APPLICATION AT THEIR OWN PACE!

4. You'll receive your policy documents and insurance cards in the mail once your application has been approved by the carrier. This typically takes about 10-14 business days.

5. Enjoy your new benefits!





ENROLLMENT DETAILS + EXAMPLES

An individual who is receiving monthly Social Security or Railroad Retiree Benefits (RRB) at least 4 months prior to turning age 65 does not need to file a separate application to become entitled to premium-free Part A. In this case, the individual will get Part A automatically at age 65.

An individual who is not receiving monthly Social Security or RRB benefits must file an application for Medicare by contacting the Social Security Administration.

To get in contact with Social Security you can call
1-800-772-1213,

TTY users should call **1-800-325-0778,**
or you can also go to the Social Security website at

www.ssa.gov/medicare/apply,

or visit your local Social Security office to apply for both
Medicare Parts A and B.

If you worked for a railroad, contact the RRB to sign up. After you enroll, you'll receive your Medicare card. If you are already getting benefits from Social Security or the Railroad Retirement Board (RRB), in most cases, you'll automatically get Part A and Part B starting the first day of the month you turn 65. If your birthday is on the first day of the month, Part A and Part B will start on the 1st of the prior month.

To get Part A and/or Part B the month you turn 65, you will be applying during your "initial enrollment period." This is a 7-month period that begins 3 months before the month you turn 65, includes the month you turn 65, and ends 3 months after the month you turn 65.

If you would like your benefits to start on the 1st of the month that you turn 65, you must sign up during the first 3 months before the month you turn 65. If you wait until the last 4 months of your Initial Enrollment Period to sign up for Part A and/or Part B, your coverage will be delayed. You will not be subject to late penalties enrolling in the last 4 months of your Initial Enrollment Period.

If you sign up for Part A and/or Part B during the first 3 months of your Initial Enrollment Period, your coverage start date will depend on your birthday. If your birthday isn't on the first day of the month, your Part B coverage starts the first day of your birthday month. For example, Mr. Green's 65th birthday is July 20, 2024. If he enrolls in April, May, or June, his coverage will start on July 1, 2024. If your birthday is on the first day of the month, your coverage will start the first day of the prior month. For example, Mr. Kim's 65th birthday is July 1, 2024. If he enrolls in March, April, or May, his coverage will start on June 1, 2024. If you do not enroll into Medicare during the Initial Enrollment Period because you have existing health insurance coverage that is deemed "creditable coverage," which includes both medical and prescription coverage, you may apply for Medicare up to three months prior to the end of your current coverage. Your coverage will start the day after your current policy ends, or on the 1st of the following month.

For medical coverage to be creditable you cannot have had a break in coverage that lasted more than 63 days in a row immediately before you buy your policy. Prescription drug coverage must be as good as Medicare's drug coverage in order to be deemed creditable.

BE SURE TO ASK YOUR BENEFITS ADMINISTRATOR ABOUT BOTH TO AVOID PENALTIES.





Medicare

AMAC

MEDICARE FAQ'S

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Can I enroll in a Medicare Supplement Plan or Medicare Advantage Plan if I am not enrolled in Original Medicare?

A

No. In order to enroll into a Medicare Supplement Plan or a Medicare Advantage Plan, you must first be enrolled in both Medicare Part A and Medicare Part B.

Q

Do all Medicare Part D plans cover the same medications?

A

No. Each plan may have a unique list of covered drugs. The list of covered drugs is known as a formulary. Medicare requires all Medicare Part D plans to cover at least two medications in each therapeutic category/class approved by Medicare.

Q

If I enroll in a Medicare Advantage plan or a Medicare Supplement Plan, do I still have to pay my Medicare Part B premium?

A

Yes. You will have to pay your monthly Medicare Part B premium to Medicare alongside the monthly premium you pay for your Medicare Advantage Plan or Medicare Supplement Plan. However, if you qualify for extra help, you may get assistance with your Part D premium.

Q

If I enroll in a Medicare Supplement Plan, will it also cover my spouse?

A

No. You and your spouse must each enroll in separate policies in order to obtain Medicare Supplemental coverage. This applies to Medicare Advantage Plans and Medicare Prescription Drug Plans as well.

Q

Are Medicare and Medicaid the same thing?

A

No. Medicare is federal health coverage program designed for the elderly as well as individuals with certain qualifying health conditions. Medicaid is a state-run health coverage program primarily designed for low-income individuals within the state.





— 1-844-652-4663 —

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