

WHAT'S NEW TO MEDICARE 2022

MICHIGAN
MEDICARE
MEDICAID
ASSISTANCE
PROGRAM
(MMAAP)

AREA AGENCY
ON AGING I-B

WHAT WE WILL COVER

Medicare

- What it is
- What's new to Medicare for 2022
- Why you should review your plan each year
- What to look for when choosing a plan

MMAP

- Who we are
- How MMAP can help you understand plan choices and potentially save money

WHAT IS MEDICARE?

Part A: Hospital Insurance

- Inpatient Care in Hospital
- Skilled Nursing Facility Care
- Hospice Care
- Home Health Care

Part B: Medical Insurance

- Services from Doctors
- Outpatient Care
- Home Health Care
- DME
- Preventative Services

Part D: Prescription Drug

- Prescription Drug Coverage
 - Prescription Medications
 - Some Vaccinations

Part C: Medicare Advantage

- Includes Parts A, B and D in one plan
- HMO and PPO Plan Options
- May Offer Extra Benefits

YOUR MEDICARE COVERAGE CHOICES

1 ORIGINAL MEDICARE

THIS INCLUDES PART A & PART B



PART A

Hospital Insurance

+



PART B

Medical Insurance

YOU CAN ADD



PART D

Medicare Prescription Drug Coverage

YOU CAN ALSO ADD



MEDIGAP

Medicare Supplement Insurance

(Medigap policies help pay your out-of-pocket costs in original Medicare)

2 Medicare Advantage (Part C)

THESE PLANS ARE LIKE HMO'S OR PPO'S AND TYPICALLY INCLUDE PART A, B & D



PART A

Hospital Insurance

+



PART B

Medical Insurance

+

PART D

Medicare Prescription Drug Coverage

(Most plans cover prescription drug plans)



ORIGINAL MEDICARE UPDATES

PARTS A & B

ORIGINAL MEDICARE – 2021 INFO

Part A

Benefit Period Deductible: \$1,484

Hospital copay:
\$371 (Days 61-90)
\$742 (Days 91-150)

SNF copay: \$185.50 /day

Monthly Premium: Up to \$471

Part B

Monthly Premium: \$148.50

Annual Deductible: \$203

Coverage	Unlimited Medical Auto PiP	Medicare
Emergency Room	Yes - 100%	Yes- You pay 20%
Hospitalization	Yes- 100%	First 60 days-You pay \$1408 (Part A Deductible) Days 61-90- You pay \$352/day Days 91-150- You pay \$704/day
SNF/ Rehab Facility	Yes- 100% as long as needed	Limited to 100 days Days 1-20 –No Deductible Days 21-100- You pay \$176/day
LTC/Custodial Care	Yes-24/7 if needed	Not Covered
Attendant Care (Home Health Services)	Yes	Limited- Home health aide 2-3 x a week for 4 hours during recovery when receiving skilled services

UNLIMITED MEDICAL AUTO COVERAGE VS. MEDICARE COVERAGE ONLY



Coverage	Unlimited Medical Auto PiP	Medicare
Guardianship/Conservator	Yes	Not Covered
Transportation Services (medical non-emergency)	Yes	Not Covered
PT/ Speech OT	Yes	Limited-You pay 20%
Occupational Therapy	Yes	Limited-You pay 20%
Durable Medical Equipment (DME)	Yes	Limited Coverage-You Pay 20%
Massage Therapy	Yes	Not Covered
Home Modifications for Accessibility	Yes	Limited
Vehicle Modification	Yes	Not Covered
Alternative Pain Management	Yes	Not Covered
Specialty Assistive Devices	Yes	Limited
Wage Losses (if still working)	Yes-Up to 3 Years	Not Covered

UNLIMITED MEDICAL AUTO COVERAGE VS. MEDICARE COVERAGE ONLY CONT'D



HSA TO MEDICARE

- If you delay enrollment into Medicare Part A
 - Coverage is retroactive 6 months to your Medicare eligibility
- Must stop contributions to HSA 6 months prior to Medicare enrollment
- Tax Implications

MEDICARE AND EMPLOYEE COVERAGE

- Speak with your HR benefits coordinator for answers on:
 - Delaying enrollment into Medicare Part B
 - Is the employer plan considered creditable coverage?
 - Is the employer plan primary or secondary to Medicare?

If the employer plan is secondary to Medicare

And you delay enrollment into Medicare Part B

You will end up with a Medicare Part B Late Enrollment Penalty (LEP)

MEDIGAP UPDATE

MEDICARE SUPPLEMENTAL INSURANCE

MEDIGAP PLANS- EXTRA BENEFITS

- Extra Benefits:

- Dental
- Vision
- Hearing
- Gym Membership

- Companies Offering Extra Benefits

- AARP/UHC
- BCBS
- HAP
- Humana
- Perkin Life Insurance Company
- Priority Health
- Wisconsin Physicians Service Insurance Corporation

MEDICARE PRESCRIPTION DRUG BENEFIT UPDATES

MEDICARE PART D &
MEDICARE ADVANTAGE

LATE ENROLLMENT PENALTY

If you :

Do not have creditable coverage AND

Do not enroll in Part D THEN

You must pay a Late Enrollment Penalty



Penalty is added onto the monthly premium



Will continue for the entire time you have Part D coverage

LATE ENROLLMENT PENALTY CALCULATION

- Part D late enrollment penalty is calculated as
 - 1% of the **Part D base beneficiary premium** (\$33.37 in 2022)
 - For each month, a beneficiary does not have creditable coverage and is not enrolled in Part D
- The penalty amount changes each year as the Part D base beneficiary premium changes

- Part D Premiums are subject to income adjustments
- Beneficiaries with significant income will pay a sliding scale higher Part D premiums (**based on IRS tax returns from 2 years prior**)
 - There are 6 income categories
 - Each category has a set dollar amount associated with it

For more information on Part D IRMAA call MMAP

**PART D
INCOME
RELATED
MEDICARE
ADJUSTMENT
AMOUNT
(IRMAA)**

2022 STANDARD MEDICARE PART D BASIC BENEFIT STRUCTURE

Deductible Phase

- You pay full negotiated costs for your drugs up to \$480.

Entering Initial Coverage Phase

- Once the deductible is met, you will pay your set copays or coinsurance for your drugs.

Initial Coverage Phase

- You pay your negotiated copays or coinsurance for your drugs until you have paid \$4,430 in total drug costs.

Coverage Gap

- Once you've paid \$4,430 in total drug cost you enter the Coverage Gap where you pay 25% of the cost of your drugs until you've paid \$7,050 TrOOP or billed the insurance \$10,690 in retail cost.

Catastrophic Phase

- Once you have paid \$7,050 in out-of-pocket cost or billed the insurance \$10,690 in full retail cost you will enter the Catastrophic Phase. In the Catastrophic Phase you are responsible for 5% of the cost of your drugs.

COVERAGE GAP

- 2022: Beneficiaries who reach the coverage gap will pay a maximum of:
 - 25% for their generic medications
 - 25% for brand name medications

EXTRA HELP BENEFIT

- Subsidy provided by Social Security Administration
- Helps with the cost of Part D Prescription Drug Coverage:
 - Premiums, Deductibles, Co-pays
- Guidelines will change again early 2022.

Contact MMAP for assistance

ENROLLMENT PERIODS

Initial
Enrollment
Period (IEP)

Open
Enrollment
Period (OEP)

Special
Enrollment
Periods
(SEPs)

SPECIAL ENROLLMENT PERIODS (SEP)

SEPs enable beneficiaries to make Part D plan changes in special situations, including:

- Involuntary loss of creditable coverage
- Moving
- Other exceptional circumstances

Medicaid or LIS beneficiaries have an SEP.

- Join, or switch plans once per calendar quarter

COBRA

- Not considered creditable coverage for Medicare Part B
- Drug coverage may qualify as an SEP into Part D enrollment

OPEN ENROLLMENT PERIOD (OEP)



- October 15th through December 7th
- Coverage effective January 1st

MEDICARE PLAN FINDER

Create a Log-In

- Provides Personalized Search
- Saves your med list

Able to compare Part D and Medicare Advantage plans

- Cost of medications
- Deductible pricing
- Monthly premium pricing

Anonymous Searches Available

- Will not save your med list

10/21/2021



MEDICARE PLAN FINDER STAR RATING SYSTEM

Part D plan rating categories:

- Drug plan customer service
- Member complaints, problems getting services, and choosing to leave the plan
- Member experience with the drug plan
- Drug pricing and patient safety

Medicare Advantage Plans rating categories:

- Staying healthy: screenings, tests, and vaccines
- Managing chronic (long-term) conditions
- Plan responsiveness and care
- Member complaints, problems getting services, and choosing to leave the plan
- Health plan customer service

FALL TIMELINE

■ October 1

- 2022 Part D and Medicare Advantage Plan Information available on [medicare.gov](https://www.medicare.gov)
- Plans can begin marketing- check your mailbox!
- Annual Notice of Change will be sent by your current plan
- Medicare & You 2022 books will begin to be sent

■ October 10

- Star Quality Ratings released on [medicare.gov](https://www.medicare.gov) Plan Finder

■ October 15- December 7

- Enrollment Period

■ January 1

- Plan Period Begins

ANNUAL PLAN CHANGES

- Plan Annual Notice of Change (ANOC)
- Part D and Medicare Advantage Plans can change their benefits and costs annually
- Be sure to check
 - Premium, deductible, co-payment changes
 - Are your drugs still covered?
 - Are your drugs still covered at the same tier?
 - Are there restrictions to your drugs?
 - Is there another Plan that offers better coverage?

2022 MEDICARE & YOU BOOK: WHAT'S NEW

COVID-19 Related Items & Services

- Medicare covers several items and services related to coronavirus disease 2019 (COVID-19), like vaccines, diagnostic tests, antibody tests, and monoclonal antibody treatments. See page 37.

Cognitive Assessment & Care Plan Services

- Medicare covers a cognitive assessment to help detect the earliest signs of cognitive impairment. The assessment make take place during a routine visit. If signs are present of cognitive impairment, Medicare will cover a separate visit with their regular doctor or specialist to do a full review of their cognitive function, establish or confirm a diagnosis like dementia, including Alzheimer's disease, and develop a care plan. See page 34.

Blood-Based Biomarker

- Medicare covers this screening test for colorectal cancer, in certain cases, once every 3 years. See page 36.

PART D PLAN ENROLLMENT THINGS TO CONSIDER

Cost

- Premium, Deductible, Co-pays
- Senior Savings Model

Coverage

- Are my drugs covered?
- Tiers
- Prior Authorization, Quantity Limits, Step Therapy?
- Nationwide coverage for travelers

Pharmacy

- Network, Preferred
- Mail order

	2022
Total PDP's	23
# of \$0 Deductible Plans	4
Lowest Premium \$0 Deduct. SilverScript Plus	\$64.10
# Plans Premium < \$25	5
Lowest PDP Premium SilverScript SmartRx	\$7.50
Highest PDP Premium Prescription Blue Premium	\$113.70
# PDPs w/ Gap Coverage	2
Lowest Cost Plan w/ Gap Coverage Cigna Extra Rx	\$61.50

2022 MEDICARE PART D PLAN STATISTICS



LOW PERFORMING PLANS & MEDICARE WEBSITE

Plans who received less than 3-star quality rating for 3 consecutive years

Beneficiaries will not be able to enroll on Medicare's website

Can enroll directly through the plan or by calling 1-800-MEDICARE

Warning will appear on Medicare's website

2022 PDP with 2 Star Rating:

- Clear Spring Health:
 - Value Rx S6946-010-0
 - Premier Rx S6946-039-0

MEDICARE ADVANTAGE PLAN ENROLLMENT THINGS TO CONSIDER

Cost

- Premium, Deductible, Co-pays
- Senior Savings Model

Coverage

- Are my drugs covered?
- What tier are they?
- Prior Authorization, Quantity Limits, Step Therapy?

Pharmacy

- In-Network, Preferred, Mail Order

Primary Care Physician/ Specialists

- Are they in or out of network?
- Do I need a new one that is in-network

Extra Benefits

- Dental, Vision, Hearing Benefits
 - Generally separate insurance rider
- Fitness Benefits
- Transportation
- Telehealth and more

MEDICARE ADVANTAGE PLANS 2022

Lowest Premium

- \$0.00

Highest Premium

- \$300.00
- Medicare Plus Blue
PPO Assure

Number of MA plans

- Livingston 58
- Macomb 57
- Monroe 47
- Oakland 67
- St Clair 45
- Washtenaw 57

MA PLANS WITH FIVE STAR RATINGS

Medicare Advantage Plan	Contract ID
AARP Medicare Advantage Patriot (PPO)	H0294-022-0
AARP Medicare Advantage Open Plan 1 (PPO)	H0294-017-0
AARP Medicare Advantage Open Plan 2 (PPO)	H0294-018-0
BCN Advantage HMO-POS Prime Value (HMO-POS)	H5883-014-4
BCN Advantage HMO-POS Elements (HMO-POS)	H5883-001-4
BCN Advantage HMO-POS CommunityValue (HMO-POS)	H5883-012-1
BCN Advantage HMO ConnectedCare (HMO)	H5883-007-0
BCN Advantage HMO-POS Classic (HMO-POS)	H5883-002-4
BCN Advantage HMO-POS Prestige (HMO-POS)	H5883-003-4

10/21/2021

MEDICARE ADVANTAGE OPEN ENROLLMENT PERIOD

- If you have a Medicare Advantage Plan January 1st , 2022 you have another enrollment period January 1- March 31st .
- During this time if you are unhappy with your current Medicare Advantage plan coverage, you can:
 - Change to a different MA plan
 - Change to Original Medicare with a Part D plan
- However, you **MUST** already have a Medicare Advantage plan in order to utilize the MA OEP.

MARKETING GUIDELINES

- Medicare plans cannot:
 - Market themselves as “Medicare endorsed”
 - Solicit from door-to-door
 - Call people on national and state “do not call” lists
 - Enroll people over the phone during a solicitation call
 - Offer incentives or gifts that exceed \$15 in value
 - Market outside the plan’s service area
 - Cold call
 - Conduct sales presentations or collect enrollment applications at health fairs

SCAM ALERT!

- Medicare fraud and abuse is always present, whether through phone, mail, billing, etc.
- Current scams to be aware of include:
 - COVID-19 Contact Tracing
 - COVID-19 Testing
 - COVID-19 Marketing of vaccines

Do not give your info out over the phone!

Always report incidents like this to MMAP (800) 803-7174

A MMAP COUNSELOR CAN HELP

01

Understand
Medicare health
plans

02

Compare and
enroll in Medicare
Advantage
Coverage

03

Compare or enroll
in Medicare
Prescription Drug
Coverage

04

Identify and report
Medicare and
Medicaid fraud and
scams

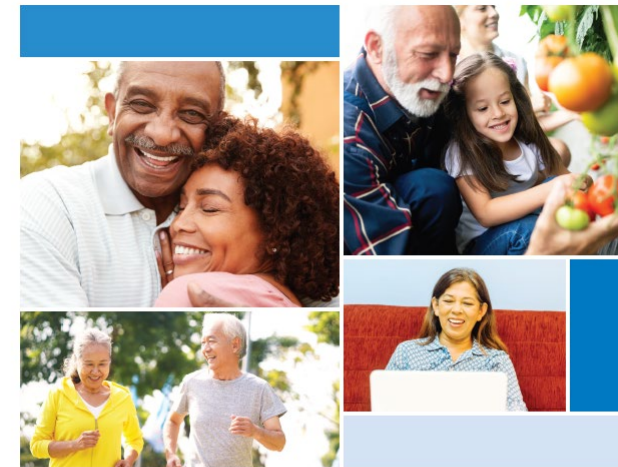
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Assist with
enrollment into
low-income
programs

MORE INFORMATION

- www.medicare.gov
- Medicare & You Handbook
- I-800-MEDICARE

- **MMAP** 800-803-7174



**Medicare
& You**
2022

The official U.S. government
Medicare handbook



For a personalized MMAP
Appointment call

1-800-803-7174

Open Enrollment is Oct
15th-Dec 7th

QUESTIONS?