

SIGNING UP FOR MEDICARE PRESCRIPTION COVERAGE: 3 THINGS TO CONSIDER

1. COST
2. COVERAGE
3. NETWORK

Choosing a health plan is an important and complex decision that should be made based upon each person's unique situation. When signing up for Medicare, most people automatically get Part A and Part B. If you are on a brand name or specialty product, you may want to consider adding prescription coverage by either enrolling in a Medicare Advantage plan or selecting a stand-alone Part D plan. Below are questions that may help you evaluate your prescription options with your spouse, family member, caregiver, or trusted advisor. This checklist may help you compare plans and coverage options using the federal government's Medicare Plan Finder at www.Medicare.gov/find-a-plan or by calling **1-800-MEDICARE**.

1. Cost

Do you take one or more non-generic prescription(s) [brand name or specialty product]?

- Yes**, I take branded or specialty prescriptions on a regular basis
- No**, generics are the only routine medications I take
- No**, I do not take any routine medications.

What to look for

- **If YES**, consider a plan with a higher monthly premium, which may give you lower out-of-pocket costs for your prescriptions. Be sure your required prescription drugs are covered in the plan you select.
- **If NO**, make sure your other generic medications are covered in the plan you select. While lower premium options may exist, remember to consider both your monthly premium and monthly prescription cost when selecting a plan.

NOTE: For Part D, you typically pay a percentage of a prescription's cost, whereas in Medicare Advantage Plans you typically pay a fixed co-pay for prescription drugs.

This resource is intended for informational purposes only and does not recommend any specific plan or path. All healthcare coverage decisions should consider present and future medical needs and are made at the sole discretion of each individual.

GO TO NEXT PAGE FOR
COVERAGE

2. Coverage ▶

Do you have additional insurance coverage through an employer, spouse, or partner's plan? Do you have coverage through a union, military, or veteran benefit plan?

- Yes**, I have additional coverage
- No**, Medicare will be my only source of coverage

What to look for

- **If YES**, contact the benefits representative to understand how coverage will coordinate with Medicare. You may not need additional prescription coverage.
- **If NO**, consider selecting a Part D or Medicare Advantage plan that may help you avoid paying full price for your medications

NOTE: Each plan will cover your medications differently. Be sure to list all of your medications on the Plan Finder tool to ensure your medications are covered.

3. Network ▶

Do you have specific physicians or pharmacies you need to use?

- Yes**, I have a specific pharmacy, physician, or team of physicians I need to use
- No**, I am willing to go to different pharmacies or doctors as needed

What to look for

- **If YES**, consider looking for plans that offer services with the doctor and pharmacies of your choice. Original Medicare with a Part D plan will allow you to have access to a larger network. This could be beneficial if you travel often.
- **If NO**, Medicare Advantage plans may offer narrower health networks, which can allow for lower costs. You might still be able to keep your doctor or pharmacy if they are a part of these smaller networks; otherwise, you may have to switch to a new doctor or pharmacy.

NOTE: If you are looking into a Medicare Advantage plan, sometimes there are Special Needs Plans (SNPs) that cater specifically to people with chronic health conditions.

Remember: Your overall health and coverage options will change over time. You should review your Medicare plan choices annually to ensure your plan works best for you.

Transitioning to Medicare can seem overwhelming. Regardless of how you choose to obtain prescription drug coverage, whether through a Medicare Advantage plan or a stand-alone Part D plan, make sure your providers and treatments are covered before selecting a plan. Here is a short summary of what each part of Medicare covers.

The Parts of Medicare

PART A	PART B	Medicare Advantage (PART C)	PART D
 <p>This is your hospital insurance plan. It is important to have Part A for inpatient care, hospital stays, surgeries, skilled nursing facility care, nursing home care, hospice, and other home health services.</p>	 <p>This is your doctor or outpatient insurance plan. It will pay a portion of doctors visits, some medical supplies, and some preventative services.</p>	 <p>This plan consolidates Part A, Part B, and prescription drug coverage into one managed benefit, often with additional benefits such as vision and dental. For people taking specialty products or brand medications, it is important to have coverage so that you are not paying full price. Coverage will vary, so make sure your medications are on the plan you select. Because Medicare Advantage networks may be narrower, it could lower out-of-pocket costs, but be aware that there are greater restrictions to access certain providers and treatments.</p>	 <p>This is your stand-alone prescription drug plan that can supplement Original Medicare (Parts A and B). This will help you pay for outpatient prescription drugs. For people taking specialty products or brand medications, it is important to have coverage so that you are not paying full price. Coverage will vary, so make sure your medications are on the plan you select.</p>

NOTE: In Original Medicare most do not pay a premium for Part A, but will pay a monthly premium for Part B and for Part D separately. The same is true in a Medicare Advantage plan, but the costs will come as one plan premium instead of separate charges.

For Part A and Part B enrollment, if you are automatically enrolled you will get your red, white, and blue Medicare card in the mail three months before your 65th birthday. Otherwise, you will want to check with your local Social Security office to enroll by visiting www.ssa.gov or by calling 1-800-772-1213.

If you have limited income, you could be eligible for a number of different Medicare programs that help lower costs, including Medicaid, Extra Help, PACE, and more. Call **1-800-MEDICARE** or go to **Medicare.gov** to learn more about affordability options and programs available for Medicare.