

Money Follows the Person: The Illinois MFP Rebalancing Demonstration

Persons who are Elderly

Persons with
Developmental
Disabilities



Persons with
Physical
Disabilities

Persons with Mental Illness

Medicare Benefit Review



What is Medicare?

■ Medicare is Health Insurance

- For people 65 or older
- For people under 65 with certain disabilities
- For people at any age with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant)



Medicare Has Different Parts

- *Medicare Part A* – Hospital Insurance
- *Medicare Part B* – Medical Insurance
- *Medicare Part C* – Medicare Advantage Plans
- *Medicare Part D* – Prescription Drug Coverage



Medicare Part A (Hospital Insurance)

- Medicare Part A covers partially or totally:
 - Inpatient care in hospitals (partially)
 - Skilled nursing facility (partially)
 - Hospice (totally)
 - Home Health Care (totally)



Medicare Part B (Medical Insurance)

- Helps cover medically-necessary services
 - Doctor's services
 - Outpatient care
 - Some preventive services to help maintain health and to keep certain illnesses from getting worse



Medicare Part C – Advantage Plans

- Another way to have Medicare benefits
- Combines Medicare Part A & B & sometimes Part D coverage
- Medicare Advantage Plans are managed by private insurance companies approved by Medicare
- The plans must cover medically-necessary services but may charge different co-payments, coinsurance or deductibles for these services

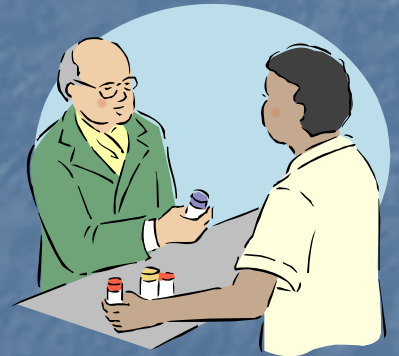
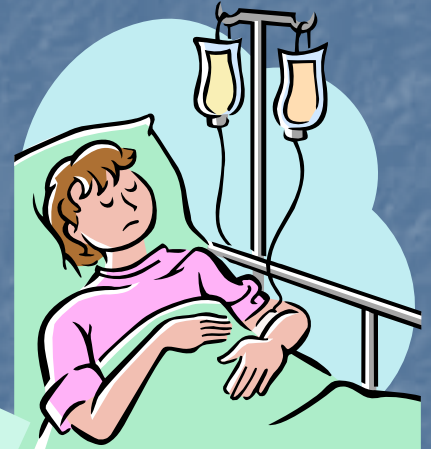
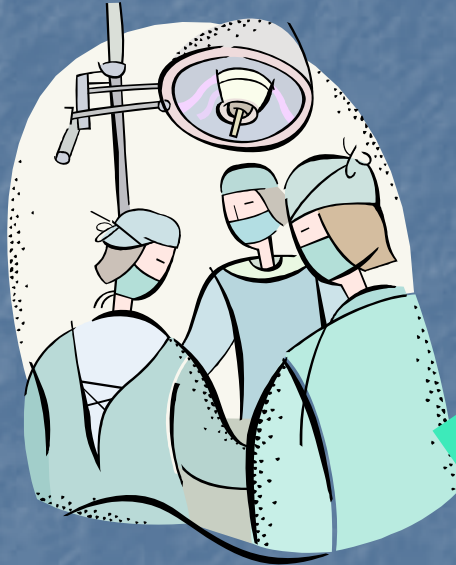


Medicare Part D – Prescription Drugs

- Helps cover prescription drugs.
- May help lower prescription costs and help protect against higher costs in the future



Medicare's Covered Services



Medicare's Part A Covered Services

Hospital Stays

- Covers a semi-private room, meals, general nursing, drugs as a part of inpatient treatment, procedures, surgery, other hospital services and supplies.
- Inpatient mental health care in a psychiatric hospital is limited to 190 days in a lifetime.

Blood - starting with the 4th pint (the first 3 pints aren't covered)



Medicare's Part A Covered Services, cont.

Skilled Nursing Facility (SNF)

- After a 3-day minimum inpatient hospital stay for a related illness or injury
- Covers a semi-private room, meals, skilled nursing and rehabilitative services, and other services and supplies
- Care in a SNF requires skilled care like intravenous injections or physical therapy.
- Medicare does not cover long-term care or custodial care in a SNF



Medicare's Part A Covered Services, cont.

Home Health Services (Reasonable and necessary part-time or intermittent skilled care)

- Nursing (Skilled service)
- Physical Therapy (Skilled service)
- Speech Therapy (Skilled service)
- Occupational Therapy (If a skilled service is required)
- Medical Social Work (If a skilled service is required)
- Home Health Aide (If a skilled service is required)
- Durable Medical equipment (Wheelchairs, hospital beds, oxygen, walkers)
- Medical Supplies



Medicare's Part A Covered Services, cont.

- **Hospice Care** – for people with a terminal illness who are expected to live 6 months or less if the disease runs its normal course
 - Drugs
 - Medical services
 - Support services
 - Some short-term inpatient stays (for pain & symptom management)
 - Inpatient respite (to provide the caregiver with rest)
 - Bereavement services



Medicare's Part B Covered Services

- Covers medically-necessary services like doctor's services, outpatient care and other medical services that Part A doesn't cover.
- Part B has a premium each month. In 2008 the standard premium amount is \$96.40
- There is also a yearly deductible before Medicare starts to pay it's share. In 2008 the deductible amount is \$135



Medicare's Part B Covered Services, cont.

- Medicare B covers a great many services. Some examples follow:
 - Ambulance services
 - Ambulatory surgery
 - Clinical laboratory services
 - Disease screenings, colorectal cancer, diabetes, cardiovascular disease, glaucoma, mammogram
 - Emergency room services
 - Diabetes supplies
 - Doctor services



Medicare's Part B Covered Services, cont.

- Ongoing durable medical equipment
- Immunizations – flu, hepatitis B, pneumonia
- Foot exams and treatment
- Physical, Occupational, & Speech-Language therapy
- Prosthetic/Orthotic Items
- Second surgical opinions
- Surgical dressing services
- Tests – X-Ray, MRIs, CT scans, EKGs
- Transplants



What is **NOT** covered by Medicare Parts A & B

- Acupuncture
- Cosmetic surgery
- Custodial care & long term care
- Dental care
- Routine eye care
- Routine foot care
- Tests that haven't been ordered by the doctor
- Physical exams
- Additional items & services as identified in the Medicare handbook



Medicare Part C

- Medicare Advantage Plans are health plan options (like HMOs and PPOs) approved by Medicare and run by private companies.
- Medicare pays an amount for your care every month those private health plans.
- Medicare Advantage Plans must follow rules set by Medicare.
- Medicare Advantage Plans are not supplemental insurance.



Medicare Part C, cont.

- Medicare Advantage Plans provide all of the Medicare Part A & B benefits and must cover at least all of the medically-necessary services that the original Medicare plan provides.
- Medicare Advantage plans can charge different co-payments, coinsurance and deductibles.
- Medicare Advantage Plans may offer extra benefits such as vision, hearing, dental, and/or health and welfare programs. Most include prescription drug coverage (usually for an extra cost)



Medicare Part C, cont.

- Medicare Advantage Plans usually have provider networks.
- This means that the individual will probably have to see a doctor who belongs to the plan or go to a certain hospital to receive covered services.
- The individual may need a referral to see specialists.
- If the individual uses providers who are not in the network he may have to pay the full amount of the charges.



Medicare Part C, cont.

- Individuals considering a Medicare Advantage Plan should understand the plan and its limitations and should discuss options with a knowledgeable person (not just the person who represents the plan in question)
- An individual enrolled in a Medicare Advantage Plan is still in the Medicare program with Medicare rights and protections including the right to appeal
- An individual may opt out of the plan and go back to traditional Medicare coverage. Contact Medicare for the timeframe for changing plans.



Medicare Part D

(Prescription Drugs Coverage)



- Medicare offers prescription drug coverage for everyone with Medicare.
- To get prescription drug coverage the individual must join a Medicare drug plan.
- Medicare drug plans are run by insurance companies and other private companies approved by Medicare.
- Each plan can vary in cost and drugs covered.



Medicare Part D

- There are two ways to get Medicare prescription drug coverage
 - Join a Medicare Prescription Drug Plan
 - Join a Medicare Advantage Plan
- Things to consider when comparing plans
 - **Coverage** – check to see if the plan covers the drugs taken by the individual
 - **Cost** – Check to see how much the prescription drugs cost in each plan
 - **Convenience** – Make sure the plan's pharmacies include the ones the individual wants to use



Medicare Part D

- Costs vary depending on the drugs the individual uses, the plan chosen, and qualification for extra help to pay for Part D costs
- Payments made to a Medicare drug plan include:
 - Monthly premium – paid in addition to the Part B premium
 - Yearly deductible – Amount paid for prescriptions before the plan begins to pay
 - Co-payment or coinsurance – Amounts paid for prescriptions after the deductible.



Medicare Part D Plans vary so the individual must compare plans prior to making a choice.

Getting Help to Compare Plans

- Visit www.medicare.gov on the web. Under “Search Tools” select “Compare Medicare Prescription Drug Plans”.
- Call 1-800-MEDICARE (1-800-633-4227)
- TTY users should call 1-877-486-2048
- Call the State Health Insurance Assistance Program (SHIP) 1-800-548-9034 (toll free in Illinois)



Medicare's Quality Monitoring at

www.medicare.gov

- To compare certified facilities visit:
 - “Compare Dialysis Facilities in Your Area”
 - “Compare Home Health Facilities in Your Area”
 - “Compare hospitals in Your Area”
 - “Compare Nursing Homes in Your Area”
- To compare Medicare Health Plans and Medigap (Medicare supplemental insurance) visit: “Medicare Options Compare”
- To compare Medicare drug coverage visit: “Medicare Prescription Drug Plan Finder”



Questions?

