How to Pick a Medicare Advantage Plan

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I'm approaching 65 and am interested in a Medicare Advantage plan to cover my healthcare and medications. What tips can you provide to help me pick a plan?

Medicare Advantage plans have become increasingly popular among retirees over the past 10 years, as more than 30% of Medicare participants are now enrolled in an Advantage plan. Here are some tips and tools to help you pick a plan that fits your needs.

First, let's start with a quick review. Medicare Advantage plans (also known as Medicare Part C) are government approved health plans sold by private insurance companies that you can choose in place of original Medicare. The vast majority of Advantage plans are managed-care policies such as HMOs or PPOs that require you to get your care within a network of doctors.

If you join an Advantage plan, the plan will provide all of your Part A (hospital insurance) and Part B (medical insurance) coverage. Some plans even offer extra benefits like vision, dental and hearing, and most plans include Part D prescription drug coverage too.

You also need to know that the monthly premiums for many Advantage plans are cheaper than if you got original Medicare, plus a separate Part D drug plan and a Medigap policy, but their deductibles and co-pays are usually higher. That makes these plans better suited for healthier retirees.

How to Pick

To help you pick a plan, a good first step is to call the office managers of the doctors you use and find out which Advantage plans they accept, and which ones they recommend. Then go to the Medicare Plan Finder tool at *Medicare.gov/find-a-plan* and type in your ZIP code or your personal information to compare health plans

with drug coverage in your area.

This tool also provides a five-star rating system that evaluates each plan based on past customer satisfaction and quality of care the plan delivers. When comparing, here are some key points to consider:

Total costs: Look at the plan's entire pricing package, not just the premiums and deductibles. Compare the maximum out-of-pocket costs plus the copays and coinsurance charged for doctor office visits, hospital stays, visits to specialists, prescription drugs and other medical services. This is important because if you choose an Advantage plan, you're not allowed to purchase a Medigap policy, which means you'll be responsible for paying these expenses out of your own pocket.

Drug coverage: Check the plan's formulary - the list of prescription drugs covered - to be sure all the medications you take are covered without excessive co-pays or requirements that you try less expensive drugs first.

Dental, vision and hearing: Some Advantage plans come with dental, vision and hearing benefits, but are often limited. Get the details on what exactly is covered.

Coverage while traveling: Most Advantage plans limit you to using in-network doctors only within a service area or geographic region, so find out what's covered if you need medical care when you're away from home.

Out-of-network coverage: Check to see what's covered if you want to see a specialist in a hospital that is not in a plan's network. You can get a list of doctors and hospitals that take part in a plan on the plan's website.

Retiree benefits: If you have employer-based retiree health coverage, be sure you speak with the benefits manager, because signing up for Medicare Advantage may void your coverage.

How to Enroll

Once you've selected a plan you can enroll either on the *Medicare.gov* website, over the phone at 1-800-MEDICARE, directly with your chosen plan or through an insurance broker.

If you need some help choosing a plan contact your State Health Insurance Assistance Program (SHIP) at *Shiptacenter.org*. Also see the HealthMetrix Research Cost Share Report at *MedicareNewsWatch.com* that lists the best Advantage plans based on health status.

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