

HiCAP

HEALTH INSURANCE COUNSELING
AND ADVOCACY PROGRAM

MEDICARE 2024 Open Enrollment Choices & Changes

*San Luis Obispo Commission on Aging
Presenter: Buff Lawson, Registered Counselor*

Serving San Luis Obispo & Santa Barbara Counties

Funded by the Area Agency on Aging

www.CentralCoastSeniors.org

Area
Agency on
Aging | San Luis
Obispo and
Santa Barbara
Counties



Navigating Medicare



HICAP

Health Insurance Counseling & Advocacy Program

- part of the national **State Health Insurance Program** “**SHIP**” offering assistance to people with Medicare
- publicly funded through the Older Californians Act and the Centers for Medicare and Medicaid Services
- only agency authorized by the California Department of Aging to provide Medicare counseling
- offers individual counseling and community education about Medicare, financial assistance programs, and long-term care insurance



HICAP Provides **FREE and UNBIASED SERVICES**

- HICAP does not sell anything
- No affiliation with agents, brokers, insurance companies or HMOs
- Counseling is confidential and available by appointment
- Network of local volunteers
 - Trained by local Central Coast HICAP and the California Health Advocates organization
 - Registered by California Department of Aging



Topics for Today

- 2024 Medicare Costs
- Medicare Open Enrollment Choices
- 2024 Part D - Prescription Drug Plans
- 2024 - Medicare Advantage Plans



2024 Medicare Part A & B Costs

Part A - Hospital	
Monthly Premium	\$0 for most people – \$278 to \$505 if you buy it
In-hospital per Benefit Period	Deductible: \$1,632 Co-insurance days: 1 – 60: \$0 Days 61 – 90: \$408 Days 91 and up: \$816
Skilled Nursing Facility (post-hospital) per Benefit Period	Co-insurance days 1 – 20: \$0 Days 21 – 100: \$204
Part B - Medical	
Monthly Premium	\$174.70 standard may be higher depending on your income
Annual Deductible	\$240
Co-insurance for most services	20% of approved Medicare rate
Parts C and D	costs vary by Plan



MEDICARE OPEN ENROLLMENT

October 15 – December 7

- Can join, switch, or drop Prescription Drug Plans (Part D) or Medicare Advantage (MA) plans for 2024
- Enrolling in new plan automatically disenrolls you from old plan at the end of 2023 and new plan starts Jan 1, 2024

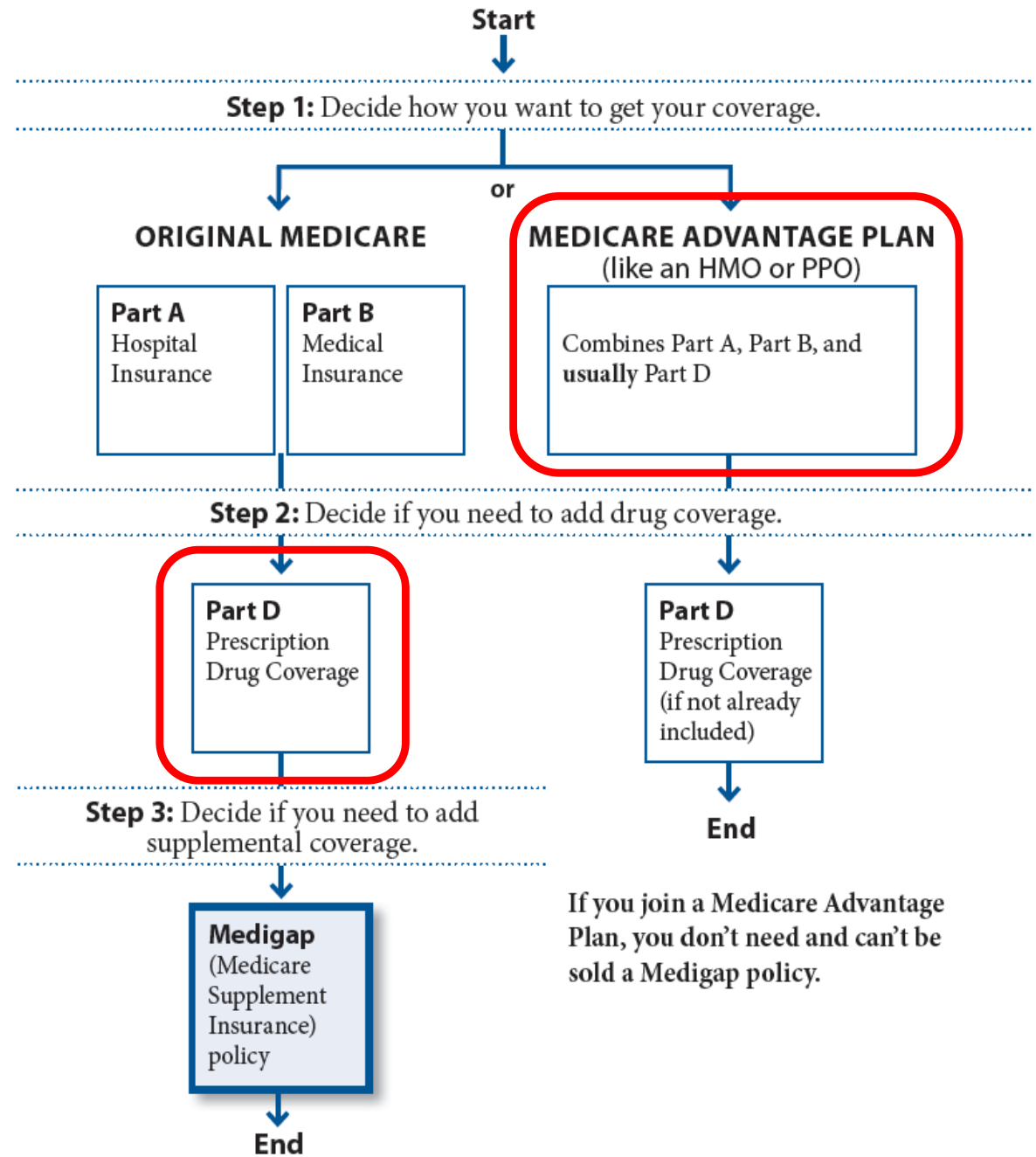
Plans can change ~ and so can you!

this is the time to do a new PDP comparison

- To enroll in a new plan for 2024:
 - Call the plan you want to join, or
 - Enroll online at Medicare.gov or the new plan website

Medicare Open Enrollment Oct 15 – Dec 7

- Enroll, change or disenroll for 2024:
- Stand alone Part D Plans
- Medicare Advantage Plans
- Does **NOT** apply to Medicare Supplemental (Medigap) Plans





Medicare Part D

Prescription Drug Plans

- Prescription drug insurance sold by private insurance companies
- Plans approved and monitored by Medicare to ensure strict guidelines are followed
- Voluntary (but subject to late enrollment penalty)
- Must have Medicare Part A **or** B to enroll in a stand-alone plan
- Two ways to enroll in a Part D plan:
 - **Prescription Drug Plans** – PDP – stand-alone plans offered by private health companies
 - **Medicare Advantage** – MA-PD – plans such as HMOs and PPOs that include prescription drug coverage

Note: the same coverage levels apply to both enrollment types



Inflation Reduction Act of 2022

2024 & 2025 Medicare Part D Changes

■ 2024

- Eliminates 5% co-insurance during Part D catastrophic coverage level
- Expands eligibility for full Low Income Subsidy to those with income up to 150% of FPL

■ 2025

- Caps Medicare Part D out-of-pocket costs for all beneficiaries at \$2,000
- Gives option to break that amount into monthly payments
- Increases % of higher priced drugs paid by insurance companies and drug manufacturers

Part D - 2024 Levels of Coverage

- **Deductible** – 0 to **\$545** – you pay full plan cost for drugs subject to the deductible
- **Initial Coverage** – after deductible plan pays on average 75% of drug cost – continues until member and plan have paid **\$5,030** for drugs under the plan
- **Coverage Gap** – from **\$5,030** to **\$11,477.39**
 - During the gap, beneficiary pays **25%** for Generics and **25%** (plus pharm dispensing fee) for Brand Name
 - Brand drug manufacturers provide a 70% discount on their drugs, which is applied toward your out-of-pocket costs
- **Catastrophic Coverage** – begins after beneficiary out-of-pocket spending reaches **\$8,000** – no co-pays

No cost-sharing for Part D formulary drugs after you reach the out-of-pocket threshold of \$8,000



2024 Part D - California Prescription Drug Plans

- **23** stand alone plans in California (26 in 2023)
- monthly premiums
 - lowest = **\$ 0.40** *Wellcare Value Script* (\$8.30 in 2023)
 - highest = **\$188.40** *Blue Shield Rx Enhanced* (\$172.50 in 2023)
- deductibles on some or all drugs
 - range from **\$145 to \$545**
 - **5** plans have 0 deductible
 - lowest premium plan with 0 deductible:
 - *Wellcare Value Plus* - **\$82.60** (\$71.30 in 2023)

2024 Part D

California Plan Changes (2023)

- National average premium **\$55.50** (\$56.49)
- CA average premium **\$81.38** (\$59.64)

- 2023 Plans Discontinued
- Elixir Rx Secure & Elixir Rx Plus
 - *if you do not enroll in a 2024 plan you will not have coverage*
 - *you have an extended Special Enrollment Period until Feb 29 2024*

- Clear Spring Premier Rx
 - *members reassigned to 2024 Clear Spring Value Rx*

- Premium changes returning plans
- premium **decrease** 3 (change range \$0.90 to \$7.90)
- premium **increase** 20 (change range \$3.10 to \$72.40)

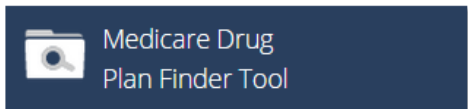
Part D

Choosing a Prescription Drug Plan

- Prescription Drug Plan Finder tool at www.Medicare.gov gives drug plan cost information for stand alone Part D plans and MA-PD plans

- Complete your own online search at Medicare.gov:
 - find and compare all plans in your area
 - enroll in a plan
 - view your current plan

- Have HICAP complete the search for you:
 - www.CentralCoastSeniors.org/hicap
 - complete the simple form online, or
 - mail a paper worksheet to HICAP
 - receive search results of the top 3 plans specific to your medications





Ways to Lower Drug Costs

- Consider Switching to Generic Drugs
- Use of Mail Order pharmacies
- Prescription Discount cards
- Pharmaceutical Assistance Programs
 - **Alliance for Pharmaceutical Access**
www.apameds.org
 - Office in Santa Maria - (805) 614-2040
 - Email - Advocates@apameds.org
- Apply for ***Extra Help with Part D*** Costs



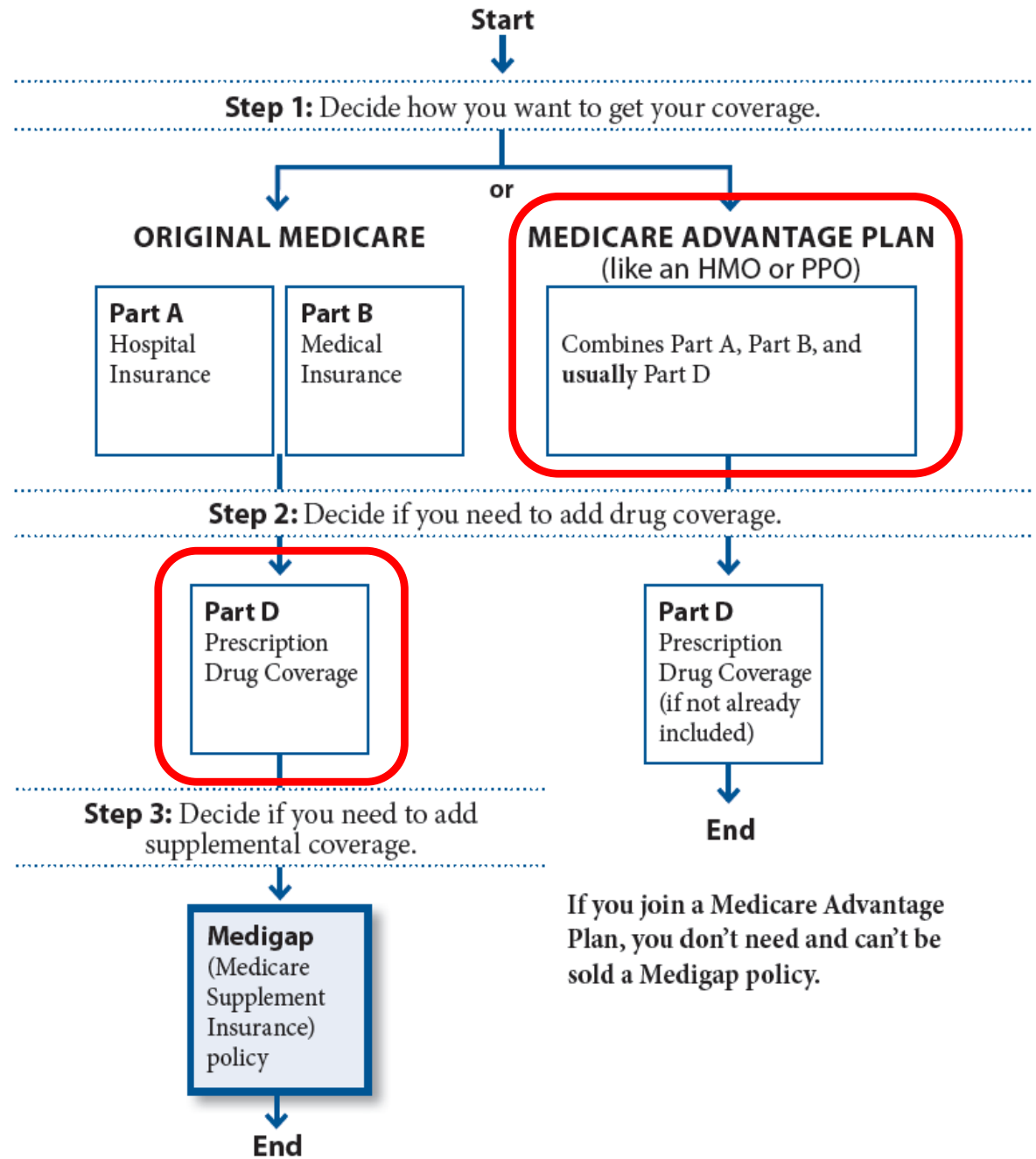
Low Income Assistance Program

Extra Help with Part D Costs

- Social Security program that provides assistance to Medicare beneficiaries
- Can help pay costs charged by Part D plan, including premium, deductible and co-pays for covered drugs
- To be eligible must:
 - have countable monthly income below 150% of the Federal Poverty Level: **\$1,843** Individuals - **\$2,485** couples
 - have resources (excluding house & car) that are less than: **\$16,660** for single people and **\$33,240** for couples
 - Apply on-line at **www.ssa.gov**
 - Call Social Security at 1-800-772-1213
 - Call HICAP for assistance at 1-800-434-0222

Medicare Open Enrollment Oct 15 – Dec 7

- Enroll, change or disenroll for 2024
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- Does **NOT** apply to Medicare Supplemental (Medigap) Plans





Medicare Advantage Plans

- Alternative to fee-for-service delivery of Medicare Part A and Part B benefits - may have monthly premium and co-pays for services
- Must have Medicare Parts A & B to enroll - still pay Part B Premium
- Medicare sponsors MA plans and pays private insurance companies to provide health services to beneficiaries who have enrolled in plans
- Plans are geographic-specific and can change each year
- MA plans with Part D follow the same rules and coverage periods as stand-alone Part D
- MA plans are required to have **Maximum Out of Pocket** limit
 - after reach this amount, co-pays are waived for the rest of the year
- Can include benefits in addition to Medicare covered services

ORIGINAL MEDICARE Fee for Service	MEDICARE ADVANTAGE Plans
Can go to any doctor or provider who sees you as a Medicare patient	In most plans must only use doctors or providers in the plan's network
In most cases do not need a referral to see specialist	May need to get a referral to see a specialist or tests get special tests
<ul style="list-style-type: none"> • Must pay Part B premium • Enroll in a separate Part D plan and pay its premium 	<ul style="list-style-type: none"> • Must pay Part B premium • Plan may have a premium • Plan usually includes Part D
Cost for Part A & B services usually the same in all areas	Out-of-Pocket costs vary with plans and areas
No annual limit on what you pay out of pocket for Parts A & B services (may buy supplemental insurance)	Plans must have yearly limit on what you pay for services Medicare Parts A & B covers



2024 Medicare Advantage Plans San Luis Obispo County

- **12 - Health Maintenance Organizations (HMO)** - generally must get your care and services from doctors, other health care providers, and hospitals in the plan's network
- **4 - Preferred Provider Organization (PPO)** – include network health care providers with generally lower co-pays, but can also use out-of-network providers for covered services if the provider agrees to treat you and hasn't opted out of Medicare
- **8 - Special Needs Plans (SNP)** - are a type of Medicare Advantage Plan which limits membership to people with specific diseases or characteristics, and may tailor their benefits, provider choices, and drug formularies to best meet the specific needs of those groups



San Luis Obispo County Non-Renewing 2023 Medicare Advantage Plans *

- **2023 SLO HMO**
 - Alignment Health AVA - HMO

- **2023 SLO County SNP**
 - Align Connect - HMO C-SNP \$0/mo
 - Align Thrive - HMO I-SNP \$0/mo
 - Align Premier - HMO I-SNP \$38.90

* *Beneficiaries enrolled in a non-renewing plan without reassignment have SEP to enroll in another 2024 plan: through Feb 29, 2024*



2024 Medicare Advantage Plans San Luis Obispo County

- Blue Shield 65 Plus - HMO - \$52.50/mo (was \$39)
 - Maximum Out of Pocket Costs \$3,200
- AARP Medicare Advantage from UHC- HMO - \$29/mo
 - Maximum Out of Pocket Costs \$3,400
 - *was 2023 AARP MA Secure Horizons Plan 2 HMO - \$25/mo*
- AARP MA Patriot - HMO - \$0/mo - **No Part D**
 - Maximum Out of Pocket Costs \$4,900



2024 Medicare Advantage Plans San Luis Obispo County

cont'd

- Humana Gold Plus - HMO (119) \$0
 - Maximum Out of Pocket Costs \$1,000 (was \$799)

- Humana Gold Plus - HMO (148) - \$25/mo (was \$24)
 - Maximum Out of Pocket Costs \$3,200

- Humana Gold Plus - HMO (150) \$0
 - Maximum Out of Pocket Costs \$5,000 - Part D deductible \$200

- Alignment Health My Choice - HMO - \$0
 - Maximum Out of Pocket Costs \$698 (was \$1,000)

- Alignment Health CalPlus + Veterans - HMO - \$0/mo
 - Maximum Out of Pocket Costs \$5,900 - Part D Deductible \$545



2024 Medicare Advantage Plans San Luis Obispo County

cont'd

- Imperial Traditional- HMO - \$0
 - Maximum Out of Pocket Costs \$1,349 (was \$2,999)

- Imperial Dynamic Plan - HMO - \$0
 - Maximum Out of Pocket Costs \$298 (was \$899)

- Imperial Strong - HMO \$0
 - Maximum Out of Pocket Costs \$8,850 (was \$8,300)

- Imperial Courage - HMO - \$0/mo - **No Part D**
 - Maximum Out of Pocket Costs \$2,900



2024 Medicare Advantage Plans San Luis Obispo County - PPO

- **NEW** AARP Medicare Advantage from UHC - PPO - \$48/mo
 - Maximum Out of Pocket Costs - In network \$4,900 - In + Out \$9,550
- Aetna Medicare Elite Plan - PPO - \$27/mo - \$250 deductible
 - Maximum Out of Pocket Costs - In network \$5,500 - In + Out \$8,950
- **NEW** Aetna Medicare Core Plan - PPO - \$0/mo
 - Maximum Out of Pocket Costs - In network \$5,900 - In + Out \$8,950
- Aetna Medicare Eagle Plus Plan - PPO - \$0/mo - **No Part D**
 - Maximum Out of Pocket Costs - In network \$6,700 - In + Out \$9,500



San Luis Obispo County

2024 MA Special Needs Plans (SNP)

- Alignment Health Heart & Diabetes - HMO C-SNP - \$0
- Alignment Health CalPlus Duals - HMO D-SNP - \$1.60 (was \$14.80)
- **NEW** Alignment Health Heart & Diabetes – HMO C-SNP - \$8.50
- Anthem Kidney Care – PPO C-SNP - \$37.10
 - was 2023 Anthem MediBlue ESRD Care - PPO C-SNP - \$29.30
- Humana Gold Plus - HMO D-SNP - \$25.20/mo (was \$14.40)
- Imperial Senior Value - HMO C-SNP - \$0
- **NEW** UHC Complete Care (CA -036P) - HMO-POS C-SNP - \$19.00
- **NEW** UHC Completed Care (CA-07AP) - HMO C-SNP - \$23.90



Medicare Advantage Open Enrollment Period

January 1 to March 31, 2024

If you *are enrolled in an MA plan on January 1*

- ❑ You can switch to another MA plan
- ❑ You can disenroll from your MA plan and return to Original Medicare and if you choose enroll in a Part D plan
- ❑ You can only make **one change** during this period, and any change will be effective the first of the month after making the change

- ❑ During this period you **cannot**
 - ❑ Switch from Original Medicare to an MA Plan
 - ❑ Join a Part D Plan if you're in Original Medicare
 - ❑ Switch from one PDP to another of you're in Original Medicare

Senior Medicare Patrol

How the Senior Medicare Patrol (SMP) Can Help

The local SMP is ready to provide beneficiaries and others with the information they need to **PROTECT** themselves from Medicare fraud, errors, and abuse; **DETECT** potential fraud, errors, and abuse; and **REPORT** concerns.

**To locate the state Senior Medicare Patrol (SMP):
Visit www.smpresource.org or call 1-877-808-2468**

Or call your local HICAP for assistance



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Questions?

- HICAP 1-800-434-0222 or 805-928-5663
- Senior Connection 1-800-510-2020
- Medicare 1-800-633-4227
- Social Security 1-800-772-1213
 - San Luis Obispo 855-207-4865
 - Santa Maria 866-331-2316
 - Santa Barbara 866-695-6285

for further information and upcoming HICAP seminars go to

www.CentralCoastSeniors.org

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