



2021-22 Medicare Spotlight

Medicare: The Basics for Seniors

Medicare’s combined 2022 budget is almost \$1 trillion. With any program of that size, complexities are bound to happen. The Office for the Aging hopes this newsletter can be a good start for you, to use Medicare in a way that best meets your health insurance needs.

First of all, what’s Medicare?

Medicare is the Federal government program that provides health insurance coverage when you are 65 years of age or older - or under age 65 if you receive Social Security Disability. To be eligible for Medicare, you must be a legal resident of the United States.

I’m almost 65. What’s coming up?

There’s a seven-month window, which includes the month of your 65th birthday, where you must sign up for Medicare. The seven months consist of the month of your birthday, and the three months both before and after it. It’s called the Initial Enrollment Period. For example, if your 65th birthday is March 8, 2022, your Initial Enrollment Period covers any month from December 2021 through June 2022. Medicare coverage begins from one to three months after you’ve completed signup.

Do I have to sign up for it when I turn 65?

Yes - with one exception: If you or your spouse are still actively employed when you turn 65, you can stay with your employer-provided group coverage. That’s the only exception.

What do I pay for Medicare?

Chances are you paid into the system through much of your adult life, which will cover some costs. Medicare Part A is free for those who have worked 40 Social Security quarters, or 10 years. There’s a monthly Part A premium for those who

A Message From County Executive Marc Molinaro

Friends,

When it comes to Medicare, it can be challenging to figure out what plans are right for you. There’s lots of marketing mail, and plenty of advice from friends and neighbors that may or may not be accurate. Our goal with this annual Medicare Spotlight is to provide Dutchess County seniors with the basics of what Medicare will mean to them, and unbiased information to use as a starting point.

From there, it’s up to you. Take a look at your family members’ health histories, and your current health issues. It’ll help you get a general idea of what could be in store for you. Once you have an idea of your future medical needs, you may want to talk with an OFA health insurance counselor, to get information on Medicare’s finer points from an unbiased source.

Best wishes, and be well!

Marc Molinaro
Dutchess County Executive

What’s inside

- Medicare: The Basics.....Pg. 1-2
- Health Insurance Counseling (HIICAP).....Pg. 2
- Medicare and Coronavirus.....Pg. 3
- 2021-22 Medicare Timetable (clip-and-save)....Pg. 3
- Medicare Scam Call Prevention.....Pg. 4
- I’m Moving To Another State - What To Do?.....Pg. 5
- OFA Medicare Class Listing.....Pg. 6
- Avoid Unexpected Bills.....Pg. 7

Introduction to Medicare (continued)

have worked up to 39 quarters. Medicare Part B has a monthly premium, the cost of which is determined each year.

Where can I use Medicare?

If the service you receive is a Medicare-covered service and your health care provider has not “opted out” of Medicare, you are covered to go to almost any doctor or hospital in the country under Original Medicare.

Medicare Open Enrollment (October 15th-December 7th)

Your 2021 coverage is working out well for you, but will it continue to do so in 2022 and beyond? The Office for the Aging can help you examine your options. The opportunity to enroll in Medicare coverage to begin on January 1, 2022 ends on December 7, 2021.

I've heard about Medicare Part A, Part B...

Medicare has four different parts:

- **Part A** covers inpatient hospital services;
- **Part B** covers outpatient services;
- **Part C** includes Medicare Advantage Plans; and
- **Part D** is Prescription Drug Plans.

Unless you make another choice about how to get your benefits when you become eligible for Medicare, you will have Original Medicare, the traditional fee-for-service program.

I want to find out more - a lot more

The federal government sends its annual *Medicare and You* publication to Medicare beneficiaries every September. To be sure your unique coverage needs are met, we recommend getting in touch with a volunteer OFA counselor from our HIICAP - the Health Insurance Information, Counseling and Assistance Program.

Contact OFA to find out more.

HIICAP

(Health Insurance Information, Counseling and Assistance Program)

Dutchess County OFA's volunteer HIICAP counselors provide free, unbiased information and help you learn about...

- Medicare and Medicaid •
- Medigap Policies •
- Medicare Advantage Plans •
- Long-Term Care Insurance •
- Low-Income Subsidy Programs •

...and other health insurance programs available in Dutchess County.

HIICAP appointments fill up quickly every open enrollment season. Call **845-486-2555** today, to make your appointment for counseling (in-person or remote).

Can't make an appointment? Call the **New York State HIICAP hotline 800-701-0501**

2021-22 Medicare Spotlight

Marcus J. Molinaro — County Executive
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845-486-2555 / toll free **866-486-2555**
Email: ofa@dutchessny.gov

Available for free at libraries, senior centers and municipal buildings throughout Dutchess County, as well as at the OFA website:

www.dutchessny.gov/aging

To be added to or removed from our mailing list, call **845-486-2544** or email bjones@dutchessny.gov.

Medicare and COVID-19: What's Covered in 2022?

Seniors are at higher risk for serious complications from COVID-19, and Medicare can help you keep yourself and others safe. Medicare covers many items and services related to COVID-19:

Vaccines - FDA-authorized vaccines help reduce the risk of illness, and you pay nothing for the vaccine. Over 90% of Dutchess County seniors have gotten their vaccines, but if you're planning to get your shot or shots soon, remember to bring your red, white and blue Medicare card with you to the vaccination site.

Testing - You pay nothing for FDA-authorized diagnostic tests and/or antibody testing during the COVID-19 public health emergency, when you get the test from a laboratory, pharmacy, doctor, or hospital, and when Medicare covers the test in your local area.

Note that coverage could change whenever the public health emergency ends.

For more information on Medicare and COVID-19, visit medicare.gov/medicare-coronavirus.

Medicare's free "What's Covered?" App



Medicare

Available on both the App Store and
Google Play

Clip and save!

2021-2022 Medicare Timetable

Before October 15th
Prepare for open enrollment

Explore what might change with your current coverage. During these two weeks, private insurers will announce all benefit and premium information for their Part C Medicare Advantage and Part D Prescription Drug plans for 2021. Contact the Office for the Aging for a HIICAP counseling appointment - availability is in high demand.

October 15th - December 7th
Open enrollment

Any changes you make take effect on January 1st, 2021.

January 1st - February 14th, 2022
Annual Disenrollment Period

This is the period when you can disenroll from a Part C Medicare Advantage plan and return to Original Medicare. If that's your choice, you are allowed to choose a separate Medicare prescription drug plan at the same time. Any such plan becomes effective the first of the following month.

Contact us with your questions:
845-486-2555 or ofa@dutchessny.gov

New York State HIICAP Hotline:
1-800-701-0501

Scam Alert: That's Not Medicare Calling You

Have you gotten any calls like this?

"Hi, we're from Medicare, and a new card is being sent out, so we need the last four digits of your Social Security number to keep your coverage active."

"This is Susie, your Medicare patient advocate. Just give us your Medicare number and we'll send you a free home COVID test kit."

"Act now, or you might be ineligible for coverage."

These are scams - and while you, yourself, may be savvy to them, scammers are counting on many of your senior friends and neighbors to remain unaware. Help us spread the word:

Medicare doesn't call people out of the blue.

Period.

AARP estimates that 60 million Americans will be called by Medicare scammers this year.

Scam artists can use your Medicare number and other sensitive information to file fraudulent claims, and they'll sell that information to other criminals too.

A Little Good News On Phone Scams

The Federal Communications Commission (FCC) this year required major phone carriers to help block one of phone scammers' favorite tricks: a practice known as "spoofing" where they disguise the origin of their call to make it look like it's coming from a legitimate source. Experts say the FCC's new rules will be of some help, but determined scammers will simply adapt and find other ways to probe for likely victims. The FCC needs cooperation from other countries to stop scam calls, and that cooperation isn't always forthcoming. It's not difficult for determined scammers to move overseas, where they're harder to catch.

How Scammers Adapt

If their scam calls no longer work, scammers don't give up. They'll try spam email, internet advertisements, links in internet forums or social media, and fraudulent websites. Scammers also target the private health insurance industry with as much determination as they target both Medicare and Medicaid. All forms of health insurance are a tempting target, with total health spending in the U.S. at over \$4 trillion as of last year. How much of it was stolen? That's hard to say, because successful fraud goes undetected - and therefore uncounted. The best available estimates peg the money lost, and spent fighting fraud, comes to about 10% across entire the health care system. \$400 billion, in other words.

The FBI, Medicare, and the Office for the Aging suggest these tips to help protect yourself from health care related scams:

- Protect your Medicare number, Social Security number, and all other health insurance information. Don't share your personal or health information with anyone other than your doctor, or people you know for certain should have it - including Office for the Aging HIICAP staff and volunteers.
- Beware of "free" services. If you're asked to provide your health insurance information for a "free" service, it's most likely not free and could be fraudulently charged to Medicare and/or your insurance company.
- Check your explanation of benefits (EOB) regularly. Make sure the dates, locations, and services billed match what you actually received. If there's a concern, contact your health insurance provider.
- Know what a Medicare plan can and can't do before joining.

A detailed, printable Scam Prevention Resources sheet with contact information to report many types of scam attempts is available at dutchessny.gov/aging

I'm Moving To A New Home - What Do I Do About Medicare?

Moving to a new home can be a trying task, especially for seniors who are less likely than younger people to have relocated several times throughout their lives.

As you go through your moving to-do list, remember to notify Medicare about your move.

Will coverage change?

Whether or not your coverage changes as you move to a different state, making sure your coverage stays with you is essential.

Moving anywhere within the United States? Original Medicare Parts A and B are unaffected, since it's the same throughout all U.S. states and territories.

If you are a Medicare Part D prescription drug plan enrollee, the plans available in your new home town may be different from what's available here, and you'll need to re-enroll in a new plan. When you notify Medicare that you've relocated, you'll be eligible for a three-month Special Enrollment Period during which you can enroll in one of the plans available in your new location. Get this taken care of as soon as possible, so that there won't be any gaps in your prescription coverage. Wait too long to re-enroll, and you'll be assessed a penalty.

Sometimes the same plan you have now is also available in your new location. If that's the case, you will not need to re-enroll.

Moving and Medicare Advantage (a/k/a Part C)

If you're a Medicare Advantage (Part C) enrollee and like your current plan, you may want to take this factor into consideration before you pick a new place to live. These plans are offered by private companies, with different price points and available services depending on what plan you choose. Some plans are specific only to certain states, regions, cities...even a single ZIP code.

I'm not moving, but I'm doing lots of traveling outside the country

Coverage depends on where you're traveling. Medicare usually does not cover health care or prescription costs while you're traveling outside the U.S. and its territories like Puerto Rico, the U.S. Virgin Islands, etc.

It's a good idea to examine what travel insurance policies will cover medical emergencies encountered abroad.

Outside the U.S., there are only a few situations where Medicare may pay for certain types of health care:

1. You have a medical emergency in the U.S., but a foreign hospital is closer than the nearest U.S. hospital that can treat you.
2. You're traveling between Alaska and another U.S. state without unreasonable delay, and a medical emergency occurs during travel, while you're in Canada. Medicare evaluates what constitutes "unreasonable delay."
3. You live in the U.S. and the foreign hospital is closer to your home than the nearest U.S. hospital that can treat your condition, regardless of whether it's an emergency.
4. You're on a cruise ship less than six hours from a U.S. port when you get the services, regardless of whether it's an emergency.

Under the above circumstances, you would still pay the related coinsurance or copayments, and deductibles.

A Medigap policy may offer additional coverage for healthcare services or supplies you get outside the U.S. Medigap plans C, D, E, F, G, H, I, J, M and N provide foreign travel emergency health care coverage, if the care begins during the first 60 days of your trip, paying 80% of the billed charges after a \$250 annual deductible is met, with a lifetime limit of \$50,000. Talk with your Medigap company to find out more.

OFA Medicare Classes

Space is limited • Advance registration is required
Call the Office for the Aging at 845-486-2555 to register, unless noted otherwise

Schedule subject to change • Additional dates may be added
See the calendar page at www.dutchessny.gov

Medicare 101

*Free, unbiased assistance with Medicare and related issues
from trained OFA volunteer counselors*

On the fourth Monday of every month at 4 p.m.
at the Pavilion at Brookmeade (34 Brookmeade Dr., Rhinebeck)

On the third Wednesday of every month at 10 a.m.
at the Poughkeepsie Galleria Community Room (2001 South Rd.)

Also on these dates:

Monday, October 4th, 4 p.m., Red Hook Public Library, 7444 S. Broadway - register at 845-758-3241

Wednesday, October 13th, 2 p.m., Millbrook Library, 3 Friendly Lane - register at 845-677-3611

Tuesday, October 19th, 4 p.m., Starr Library

Saturday, October 23rd, 9:30 a.m., Dutchess County OFA, 114 Delafield St., Poughkeepsie

Tuesday, October 26th, 6 p.m., Dutchess County OFA, 114 Delafield St., Poughkeepsie

Navigating the Medicare Website

Hands-on training using the Medicare website to find information about Medicare Prescription Drug Plans and Medicare Advantage Plans. Led by OFA staff.

On the fourth Wednesday of every month at 9:30 a.m.
at Adriance Memorial Library, 93 Market St., Poughkeepsie
To register, visit www.poklib.org or contact Debbie Minnerly
at 845-3445 x3380 or dminnerly@poklib.org

Avoid Unexpected Bills

Know the Difference Between a Medicare Wellness Exam and a Physical

Annual Wellness Visit

(Your Medicare deductible is waived)

Cost: FREE

Coverage: Annually, when it occurs at least 12 months after your Initial Preventative Physical Exam, and when you have been covered by Part B for more than 12 months

Purpose: To develop and update a personalized prevention plan, based on your current health and risk factors

Other: Medications are not refilled or prescribed

Annual Physical Exam

(The Part B deductible applies)

Cost: Co-pay

Coverage: Annually; you will be billed and responsible for 20% of the Medicare approved amount

Purpose: For medically necessary services, including evaluation and management of an illness or injury

Other: Medications may be refilled or prescribed

The terms “wellness exam” and “physical” sound similar, but when it comes to Medicare the two procedures are *not* interchangeable. It’s something you’ll need to watch for when you make appointments with your doctor. The wellness exam is different from a full body physical that you may have undergone in past years.

If you’ve had Medicare Part B (Medical Insurance) for longer than 12 months, you can get a yearly “Wellness” visit once every 12 months to develop or update a personalized prevention plan to help prevent disease and disability, based on your current health and risk factors. Your provider may also perform a cognitive impairment assessment. You pay nothing for this visit if your doctor or other qualified health care provider accepts assignment - that is, they have agreed to accept the Medicare-approved amount as full payment for any covered service provided to a Medicare patient.

The Part B deductible doesn’t apply. However, you may have to pay coinsurance, and the Part B deductible may apply if:

- Your doctor or other healthcare provider performs additional tests or services during the same visit. These additional tests or services aren’t covered under the preventive benefits.
- A cognitive impairment assessment is performed to look for signs of Alzheimer’s disease or dementia.

The personalized prevention plan is designed to help prevent disease and disability based on your current health and risk factors. Your provider will ask you to fill out a questionnaire, called a “Health Risk Assessment,” as part of this visit. Answering these questions can help you and your provider develop a personalized prevention plan to help you stay healthy.

Before your Medicare wellness visit, compile a complete list of medications that you take, as well as any vitamins, minerals, supplements, and over-the-counter medications.



Dutchess County Office for the Aging
114 Delafield Street, Poughkeepsie, NY 12601

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Friends,

You're reading the fifth annual Medicare-focused version of our "Spotlight on Seniors" newsletter. Medicare's open enrollment period for coverage starting in January 2022 runs from October 15 to December 7, 2021.

Medicare aims to adapt to your individual needs - and the Office for the Aging is here to help. The Office for the Aging provides free, unbiased counseling on the health issues that affect you specifically. Reach out to OFA today!

Our best wishes,

Handwritten signature of Marcus J. Molinaro in black ink.

Marcus J. Molinaro
Dutchess County Executive

Handwritten signature of Todd N. Tancredi in black ink.

Todd N. Tancredi
Director, Office for the Aging

Dutchess County Office for the Aging • 114 Delafield St., Poughkeepsie NY 12601

845-486-2555 or 866-486-2555 • email: ofa@dutchessny.gov • www.dutchessny.gov/aging