2023-24 Medicare Spotlight



Help Your Fellow Seniors Understand Medicare

Medicare can be...complicated. Most of this *Medicare Spotlight* is devoted to directing Dutchess County's older adults to help clear up any confusion as they choose the plans that'll work best for them in 2024. Still, the uncertainty that comes with the process of evaluating insurance plans every fall leaves many seniors paying more than they need to for coverage that might not be the best for them, because the status quo is at least somewhat familiar.

What if you can simplify complex concepts? Can you share your skills with other Dutchess County older adults?

The Office for the Aging's Health Insurance Information, Counseling and Assistance Program (HIICAP) could use your skills as a New York State certified volunteer counselor.

HIICAP counselors empower, educate, and assist Medicare-eligible individuals through objective outreach, counseling, and training. HIICAP provides free annual training and certification to all counselors, coordinators, and volunteers.

To begin the process of becoming a volunteer HIICAP counselor, and for more information about OFA's many other volunteering opportunities, visit

dutchessny.gov/OFAvolunteer

Looking for help with your own Medicare and insurance plans for 2024? That's what this *Medicare Spotlight* is all about. Give this newsletter read, and get in touch with us for answers to your followup questions:

OFA HIICAP Hotline: 845-486-2566

OFA Email: ofa@dutchessny.gov

A Message From OFA Director Todd N. Tancredi

Friends,

Chances are that this newsletter is part of a lot of material you're receiving this fall, related to Medicare and related programs like Medicare Advantage.

The Office for the Aging is ready to help you find the information that's relevant to your individual needs, to help you make the best choices possible for 2024 without bias or sales pitches.

Medicare coverage is not always easy to understand, and our trained HIICAP counselors can help clear up any misunderstandings. Reach out to the OFA HIICAP hotline today at **845-486-2566** to make an appointment with a counselor, as available space fills up quickly.

Best wishes, and be well!

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Todd N. Tancredi

Director, Dutchess County Office for the Aging

What's inside

Advertising Rules ChangesPg. 2
Fraud Prevention ResourcesPg. 3
2023-24 Medicare Timetable (clip-and-save)Pg. 3
When You See "This Is Not A Bill"Pg. 4
More Medicare BasicsPg. 5
Testing A New Medicare ModelPg. 5
Some Premiums Go Up; Others Go DownPg. 5
OFA Medicare 101 ClassesPg. 6
Low-Income Medicare Savings (Extra Help)Pg. 6
The Biggest Medicare Changes for 2024Pg. 7

Medicare Advertising Rules Changes

Your Medicare Part D (prescription drugs) or Medicare Advantage plan (which may include prescription drugs) can change from year to year. That means it's a good idea to review your plan to be sure it continues to serve your needs in 2024.

If there are changes coming for your coverage in 2024, by now you should have already received an Annual Notice of Change, which you can use as an introductory guide to reviewing your plan. If you're fuzzy on any details, get in touch with OFA and our HIICAP counselors will help make the picture clearer for you.

Here are some of the key changes on the way in the year to come, most notably related to advertising:

New Medicare Advantage Marketing Rules

Stricter advertising rules from the Centers for Medicare and Medicaid Services (CMS) went into effect this fall. Advantage plans will no longer be able to misuse the Medicare logo or Medicare card, or suggest that they are federal government representatives.

CMS will be pre-approving Medicare Advantage marketing ads this year. Does that mean we won't see as much of William Shatner and Joe Namath selling Advantage plans? Could be.

While 85 percent of the ads that ran during the 2022 open enrollment season were for Medicare Advantage products, the remaining ads for Medicare Part D (prescription) plans and Medigap (supplemental) plans got significant play as well. Businesses in that part of the Medicare market will have to play by the new rules as well.

CMS itself doesn't air many ads for Medicare, and does not cold call people. That means if your phone rings and you didn't already reach out to Medicare or HIICAP with a question, chances are the caller is at best representing a Medicare plan that won't be right for you. At worst, they'll be a straight-up scammer. More on those on Page 3.

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.

The information provided by the Health Insurance Information, Counseling and Assistance Program is intended for the sole purpose of educating consumers in regard to the choices available for their health insurance needs. Particular emphasis is placed on understanding Original Medicare. Nothing herein is intended nor should it be construed as an endorsement of any specific insurance product or insurer.

2023-24 Medicare Spotlight

William F.X. O'Neil - County Executive Todd N. Tancredi - Director, Office for the Aging Jamie Carey - Aging Information Services Specialist Brian Jones - Editor

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

dutchessny.gov/aging

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

Medicare Fraud Prevention Resources

Your phone rings. "Hi, I'm Dave from Medicare and-"

Stop. Right. There.

Medicare does not "cold call" people, so "Dave from Medicare" is almost certainly a scammer trying to trick you into giving up your personal and financial information.

"Dave" may have called you in August claiming to be your grandson under arrest in Florida. He called in July promising you money for repairs from the flooding many of us experienced over the summer. He called in April claiming to be from the IRS.

Actually catching and prosecuting scammers is easier said than done, but the information you provide can help investigators piece together a strong case against a scammer.

When it comes to reporting fraud attempts targeting your health insurance, here are four key contacts:

Insurance fraud (in NYS): 888-372-8369

Medicare/Medicaid fraud: 800-447-8477

Medicare Advantage fraud: 877-772-3379

Senior Medicare Patrol (in NYS): 800-333-4374

or smpresource.org

In the meantime, if you receive an unsolicited call purporting to be from a Medicare representative, hang up without pressing a key. If you do answer the call, do not give out personal information when asked. This includes your name (even if they seem to know it), date of birth, Social Security or Medicare numbers, and credit card or other financial information.

A printable Scam Prevention Resources flyer with even more scam safety information is available at **dutchessny.gov/aging**

Clip and save!

2023-24 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 2024. Contact the Office for the Aging for a HIICAP counseling appointment - availability is in high demand.

October 15th - December 7th **Medicare Open Enrollment**

Any changes you make take effect on January 1st, 2024.

January 1st - March 31st, 2024

Medicare General Enrollment Period

If you do not enroll in Part B during your 7-month Initial Enrollment Period, which consists of the month of your birthday and the three months before and after that month, you will have to wait until the Medicare General Enrollment Period (from January 1 to March 31 each year). When you enroll during the 2024 General Enrollment Period, your coverage begins on the first day of the month following the month you enrolled.

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

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

When You See "This Is Not A Bill"

You bring the day's mail inside, open it and...what's this? It a statement that looks like a bill. It has lists of claims and totaled-up dollar figures, like a bill.

You open it and see the magic words:

This is not a bill.

Don't celebrate yet, and don't throw the statement into your shredder box yet, and don't move it to your Trash folder yet if your statement came via email.

What you're likely looking at is an Explanation of Benefits (EOB) from either Medicare or a health insurer. Medicare's version of an EOB is called a Medicare Summary Notice, or MSN.

These statements let you know that Medicare or insurance payments to your doctor or other service provider are being processed. The part that reads "This is not a bill" is true, at least for a while. You may get a bill later, though.

Which is why every statement needs to be reviewed for accuracy, to be sure the claims being processed match up with the services you received.

Tips For Reviewing Your MSN

MSNs are usually mailed four times a year (quarterly) and contain information about charges billed to Medicare, how much Medicare paid, and the amount you are responsible for. You may receive additional MSNs if you receive reimbursement for a bill you paid.

If you have not received healthcare services during a particular quarter, you will not receive an MSN. If you have received services but have not received an MSN, call 1-800-MEDICARE or access your MSN online by creating or logging into your secure Medicare account at **medicare.gov/account**. Even if you're comfortable with paperless statements, you should still request a paper copy for your records.

Your MSN also lists:

- The amount providers billed Medicare for those services (Note: The "Amount Charged" field does not show your costs.)
- The amount Medicare paid providers for each service
- The amount you may need to pay directly to providers (indicated in the "You May Be Billed" field). Note that you will receive a bill from providers and do not need to pay anything until you have received a bill.
- Any non-covered charges. This field shows
 the portion of charges for services that
 are denied or excluded (never covered)
 by Medicare. A \$0.00 in this field means
 that there were no denied or excluded
 services. A charge in this field means you
 are responsible for paying it. If you disagree
 with a non-covered charge, you should file an
 appeal.

In many instances, Medicare forwards your MSN to your secondary insurer, which may help with some or all of the remaining costs.

Try to save your MSNs and EOBs. You might need them in the future to prove that payment was made if a provider's billing department makes a mistake or if you claimed a medical deduction on your taxes.

There's also the possibility your insurance information was used to commit fraud. Check your statements and notify Medicare and/or your insurer if you notice any of these:

- Billing for goods and services not provided.
- · Billing for old items as new items.
- Billing for patient visits that did not take place.
- Billing for more hours than there are in a day.
- Billing from places you've never been, especially out-of-state.
- Receiving items you never requested, like COVID test kits or medical equipment.

See Page 3 for a list of Medicare fraud prevention resources.

A Few More Medicare Basics

What's Open Enrollment?

It is the one time of year that you can make changes to your Medicare Part D Plan. During Open Enrollment, you can also switch from Original Medicare to a Medicare Advantage Plan (Part C), switch from one Medicare Advantage Plan to another, or switch from a Medicare Advantage plan to Original Medicare. Changes will take effect January 1, 2024.

So far, so good. What's Medicare Advantage?

Medicare Advantage plans combine Original Medicare – Parts A and B – and generally, Part D. They are sold as HMOs and PPOs by private companies. With these plans, you often have to go to a healthcare provider in your network. If you have an HMO, you are required to get a referral to see a specialist. One benefit of Advantage is that you might get vision, hearing and dental benefits with your plan...emphasis on the word "might."

The Medicare Advantage ad said what?

Anybody old enough to be eligible for Medicare is getting swamped with ads for Medicare Advantage plans, especially during Open Enrollment. Still, you have to ask yourself this question before you sign on any dotted lines: *The plans may be popular, but do they really work for me?* That's why you should contact OFA for a meeting with one of our HIICAP counselors. We're not in the sales business, so you'll receive unbiased help in balancing risks and costs, as you make informed choices for 2024.

For some older adults, Medicare Advantage may offer more preventive care than traditional Medicare. On the other hand, if you have significant health concerns, traditional Medicare may be the way to go. It can get complicated quickly. Get unbiased help from HIICAP at OFA:

Testing A New Medicare Primary Care Model in NY

Starting in July 2024 and continuing until December 2034, New York and seven other states will be part of a test of a new model for primary care called "Making Care Primary" (MCP). Participating New York counties include Dutchess and every other county in the state outside of New York City, Long Island and Westchester.

The model aims to strengthen coordination between patients' primary care clinicians, specialists, social service providers (including your Office for the Aging), and behavioral health clinicians. The goal is to prevent chronic disease, reduce emergency room visits and improve health outcomes. Participating organizations must have at least 125 Medicare patients and over half of their primary care sites in a participating state.

CMS officials say the pilot project will focus on rural areas and underserved populations.

Some Medicare Premiums Go Up; Others Go Down

Medicare Part B beneficiaries are expected to pick up the cost of the new Alzheimer's drug Leqembi that's coming to the market soon. Part B costs are projected to go up from the current \$164.90 to \$174.80, a nearly \$10 increase per month. Leqembi is a treatment for those in the early stages of Alzheimer's disease.

Medicare Part D premiums, on the other hand, are expected to decrease slightly for 2024 as a Part D redesign takes effect. CMS announced over the summer that the average total monthly premium for Medicare Part D coverage is projected to be approximately \$55.50 in 2024. This expected amount is a decrease of 1.8% from \$56.49 in 2023.

OFA Open Enrollment Season Classes

Class registration is required; call 845-486-2555 for information

INTRO TO MEDICARE.GOV

We offer a basic overview of the **Medicare.gov** website for people approaching age 65, caregivers, and anyone who would like a better understanding of how Medicare works. All classes will take place at the Adriance Memorial Library in the City of Poughkeepsie (93 Market St.), on the following days:

October 25 - 9:30 am, November 13 - 5 pm, November 29 - 9:30 am

MEDICARE 101

Our year-round **Medicare 101** classes are held on the third Wednesday of each month from 10 a.m.-noon, at the Community Room at the Poughkeepsie Galleria:

October 18, November 15

Medicare 101 is also held on the fourth Monday of every month at the Pavilion at Brookmeade (34 Brookmeade Dr., Rhinebeck) at 4 p.m. on the following dates:

October 23, November 27

All class listings subject to change Complete up-to-date listings at dutchessny.gov/calendar

Medicare Low-Income Subsidy Program (Extra Help)

The Low-Income Subsidy Program, also called Extra Help, is a Medicare program that helps qualifying individuals pay Part D premiums, deductibles, coinsurance, and other costs. In 2024, this program is expanding and allowing all eligible enrollees to benefit from no deductible, no premium, and fixed lower copayments for certain medications.

Enrollees in Extra Help can save nearly \$300 per year, on average, according to estimates; up to 3 million seniors and people with disabilities could benefit from the Extra Help program now but aren't currently enrolled.

Individuals who enroll in the Medicare Savings Program automatically qualify for help affording their prescription drugs through the Extra Help program. To learn more about the Low-Income Subsidy Program, contact the Office for the Aging at **845-486-2555**, or email **ofa@dutchessny.gov**

The Biggest Medicare Changes for 2024

The federal government's annual "Medicare and You" handbook, sent to beneficiaries every fall, can be tricky to follow. To clarify matters, CMS has listed some of the biggest changes coming in 2024 on the handbook's second page. We've excerpted them here. Contact OFA with your questions.

Saving money on your prescription drugs

Starting January 1, 2024, if you have Medicare drug coverage (Part D) and your drug costs are high enough to reach the catastrophic coverage phase, you don't have to pay a copayment or coinsurance. Extra Help, a program that helps cover your Part D drug costs, will expand to cover more drug costs for certain people with limited resources and income. Coinsurance amounts for some Part B-covered drugs may be less if a prescription drug's price increased higher than the rate of inflation.

Lower costs for insulin and vaccines

Your Medicare drug plan can't charge you more than \$35 for a one-month supply of each insulin product Part D covers, and you don't have to pay a deductible for it. If you take insulin through a traditional pump that's covered under Medicare's durable medical equipment benefit, that insulin is covered under Medicare Part B. You won't pay more than \$35 for a month's supply and the Medicare deductible no longer applies. Recommended adult vaccines are also now available at no cost to you.

Changes to telehealth coverage

You can still get telehealth services at any location in the U.S., including your home, until the end of 2024. After that, you must be in an office or medical facility located in a rural area to get most telehealth services. There are some exceptions, like for mental health services.

Managing and treating chronic pain

Medicare now covers monthly services to treat chronic pain if you've been living with it for more than 3 months.

Better mental healthcare

Starting January 1, 2024, Medicare will cover intensive outpatient program services provided by hospitals, community mental health centers, and other locations if you need mental healthcare.

More times to sign up for Medicare

If you recently lost (or will soon lose) Medicaid, you may be able to sign up for Medicare or change your current Medicare coverage. There are other special situations that allow you to sign up for Medicare.

COVID-19 care

Medicare continues to cover the COVID-19 vaccine, and several tests and treatments to keep you and others safe.

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CURRENT RESIDENT OR

Friends,

When it comes to choosing your best health insurance options for 2024, there's a lot to think about, even if you've been with Medicare for many years and are happy with your coverage. Features of Medicare, Medicare Advantage, and private insurance can all change from year to year, and it's best to keep an eye on what's happening. For those who are new to Medicare this year, you might still be getting accustomed to what is and isn't covered.

You don't have to figure things out by yourself. The Office for the Aging has a Health Insurance, Counseling and Assistance Program (HIICAP) with trained counselors to get you on the path to making the choices that are best for you.

Reach out to OFA using the contact information below, and get to know us before you need us for all your needs related to aging successfully in Dutchess County.

Best wishes.

Todd N. Tancredi, Director, Office for the Aging

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