

*From The Health Insurance Store*



# *New to Medicare*

## Your Essential Guide

*Medicare Plans, Costs & Coverage – **Simplified.***

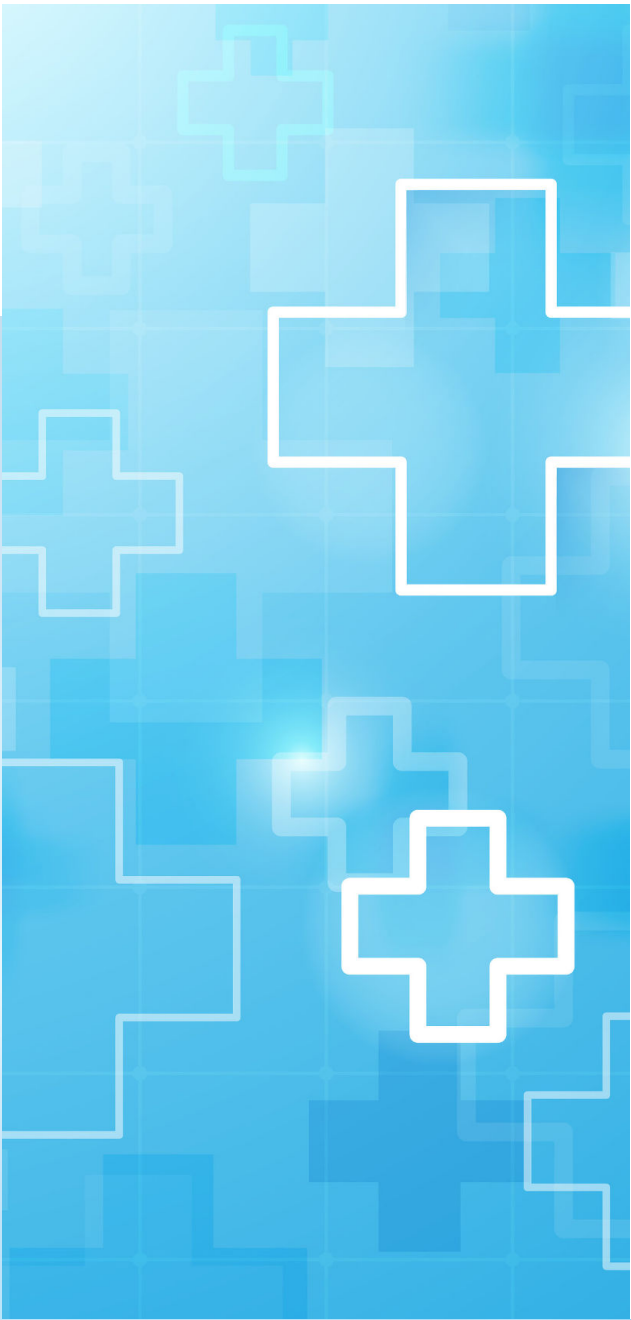
**Chapter 5**



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121 North Pittsburgh Street Connellsville, PA. 15425

# *One Size Doesn't Fit All*



Welcome to **Chapter 5** of the series, “New to Medicare,” designed to help those who will be going on Medicare Part A and/or B for the first time soon. I want to remind readers that this series and all columns aren’t meant as a substitution for a one-on-one consultation with one of our licensed agents, nor are they written to sway your decision in enrolling in an Advantage Plan versus a Supplement or as an endorsement of any particular Advantage Plan or company.

**Question:** Who is best to choose a Supplement and who an Advantage Plan?

**Answer:** *Remember, what works best for someone else may not be best for you. Never make a decision based on what plan or company a friend or family member has or advice they give! There’s absolutely no one size fits all approach with so many variables and individual factors that need to be considered when making a choice between Supplements and Advantage Plans.*

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# *Total Coverage Confidence*

Those who are more conservative tend to prefer Supplements and are willing to pay higher premiums for their predictability. We only recommend Plans G and N. G limits medical bills to just a small deductible and N the same deductible and just two small copays. Federal regulations also assure benefits can never change as long as the policy is kept in force. For example, those who have Plan N today have the peace of mind that in 10 or 20 years they will never pay any bill other than the annual Part B deductible, currently \$257, and a \$20 copay for a physician's office visit or \$50 at the emergency room. Those co-pays can never be increased, and no others can ever be added. In my experience, besides the safety of never receiving large bills, the number one reason people choose Supplements and are willing to pay more premiums than Advantage Plans is how care's approved and administered. Supplement companies have no say in what's covered so they can't deny claims or require prior authorizations. Virtually any test, procedure, or service can be delivered the same day because Medicare allows the treating physician to decide what's medically necessary without any insurance

company interference. This is not the case with Advantage Plans, which I'll discuss below.

People on Supplements also have access to virtually all doctors, and every full hospital in the country at no additional cost. There are no networks to worry about or what providers can and can't be used. This is important for those who travel a lot or have second homes outside of Western PA. This freedom not only allows the choice to use all

***-Access to virtually  
any doctor,  
any hospital,  
anywhere—without  
networks or red  
tape. Supplements.***

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our great local health care systems such as WVU, UPMC, AHN, and Independence (formerly Excelsa), but other world class facilities such as the Mayo and Cleveland Clinics, Johns Hopkins, MD Anderson Cancer Center, and others. I've had several clients whose lives were saved because they had access to those facilities.



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# *Maximize Benefits, Manage Risks*

People who don't mind taking a couple calculated risks often choose Advantage Plans for the potential financial rewards. Those who stay what I would consider just relatively healthy and avoid serious or chronic health conditions can save a lot of money. Advantage Plan members who avoid expensive medical services may save \$5,000, \$10,000, maybe even more, in premiums over a ten-year period versus a Supplement.

Ancillary benefits or "extras" as they're referred to, are probably the number one reason that HMOs and PPOs have become so popular since 2020. I can no longer name them all due to Medicare regulations, but what I can say is they're goods and services we all use and can be extremely generous. The potential annual dollar value of these benefits can literally add up to over \$2,000 per year.

Advantage Plans may not be a good choice for those who are risk

adverse, however. I went over those risks in Part 4 of the series. If you haven't read that edition yet, please do. Before choosing an Advantage Plan, it's so important to understand them all! It's why you really need to make an appointment to sit down with one of our licensed and experienced agents to have both the pros and cons of Advantage Plans explained in detail. Not many agents or agencies do that unfortunately.

***-Healthier  
individuals can  
save \$5,000 to  
\$10,000 over time.***





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## *Questions & Contact*

In the coming weeks, I'll go deeper into the **pros and cons of Supplements vs. Advantage Plans.**

For questions or to book a **no-cost consultation**, call the office.

And if you're enjoying the *New to Medicare* series, join our **Facebook Group: Ask the Medicare Specialist.**

A new column is posted every Monday, along with **four additional weekly educational and fun posts.**

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