

COMMONWEALTH OF MASSACHUSETTS Office of Consumer Affairs and Business Regulation DIVISION OF INSURANCE

1000 Washington Street, Suite 810 • Boston, MA 02118-6200 (617) 521-7794 • Toll-free (877) 563-4467 http://www.mass.gov/doi

MAURA HEALEY GOVERNOR

KIM DRISCOLL LIEUTENANT GOVERNOR GARY D. ANDERSON COMMISSIONER OF INSURANCE

BULLETIN 2024-05

To:

Commercial Health Insurers, Health Maintenance Organizations, and Blue Cross and

Blue Shield of Massachusetts, Inc.

From:

Gary D. Anderson, Commissioner of Insurance

Date:

February 23, 2024

Re:

Attachment to "Guide to Health Insurance for People with Medicare"

Attached please find a copy of "A Massachusetts Consumer's Guide to Medicare." Pursuant to Massachusetts regulations 211 CMR 42.09(4) and 211 CMR 71.13(2)(d)4, the Massachusetts Consumer's Guide to Medicare is provided as an attachment along with the annual federal publication "Choosing a Medigap Policy: A Guide to Health Insurance for People with Medicare" to persons eligible for Medicare. This federal publication is available to read, print or order at www.medicare.gov/publications, keyword search Medigap.

Please also be aware that due to concerns about Medicare-eligible persons being exposed to marketing scams, the Division of Insurance has posted an advisory on its website at <u>Protect Against Medicare-related scams</u>. It is suggested that consumers be made aware of this advisory so that they are aware of steps to take to protect them from such scams.

If you have any questions about this bulletin, please contact Niels Puetthoff, Director of the Division's Bureau of Managed Care, at 617-521-7326 or Niels.Puetthoff@mass.gov.

A Massachusetts Consumer Guide to Medicare



SHINE Program





This project is supported in part by Grant #90SAPG, from the US Administration for Community Living, Department of Health and Human Services.

Washington DC, 20201.

Grantees undertaking projects with government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official ACL policy.

Table of Contents

Enrolling in Medicare	Page 3
What is Medicare?	Page 5
Introduction to Medicare Advantage, Medicare Supplement (Medigap) and Part D Plans	Page 6
Online Tool to Compare Options	Page 8
How to Create an Account	Page 9
Your Medicare Options	Page 10
List of Available Medicare Advantage Plans	Page 11
List of Available Medicare Advantage Special Needs Plans	Page 14
List of Available Medicare Supplement Plans	Page 16
List of Available Medicare Part D (Prescription Drug) Plans	Page 20

Medicare Guide

<u>Disclaimer:</u> This guide covers the basics – and just the basics – about applying for Medicare. It does not include every detail of this complicated subject. You can contact SHINE (Serving Health Insurance Needs of Everyone) for more information. SHINE is an educational resource that is designed to inform you about the complexities of Medicare. Information was obtained via the Social Security, Medicare, and Division of Insurance websites, IRS, as well as the Medicare & You Handbook.



Are you ready to enroll in Medicare? If so, your <u>first step</u> should be to contact the Social Security Administration!

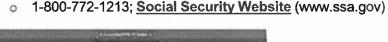


If you're turning 65 in the next 3 months and <u>not</u> yet receiving benefits from the Social Security Administration, you will <u>not</u> get Medicare automatically! It is your responsibility to contact Social Security if you wish to enroll in Medicare. You will not receive <u>any</u> reminders or notifications from either Social Security or Medicare.

Social Security Disability Insurance (SSDI) and Medicare- If you're under 65 and have a disability, you'll automatically get Part A and Part B once you have received 24 months of SSDI payments.

Social Security manages enrollment in Parts A and B, and will review your records to see if you qualify for Medicare. They will determine if you qualify for premium-free Part A, and what your monthly premium for Part B will be, based on your income. If you have a higher income, your Part B and Part D premiums may be higher. This is known as the Income-Related Monthly Adjustment Amount (IRMAA). Your Part B Medicare Costs.

You can enroll by physically going to a local Social Security Office, or by making an appointment to enroll over the phone or online at www.ssa.gov.



TIP: Social Security highly recommends that you create a personalized My Social Security account to enroll in Medicare

Click Here for Information on Medicare Enrollment

What is Medicare?

Medicare is the federal health insurance program that was created in 1965 for people 65 & older and some under 65 with disabilities to help with their hospital and medical coverage. The program helps with the cost of health care but it is not comprehensive; it does not cover all medical expenses or the cost of long-term care.

Different parts of Medicare help cover specific services

Part A - Hospital Insurance

Part B - Medical Insurance

Part D - Prescription Drug Coverage

Part C (Medicare Advantage) combines Part A, B and usually Part D in one plan.

Preventive Services

Medicare does provide numerous preventive services at no cost to beneficiaries (ex. Vaccines, screenings, etc.) A complete list of these services is available at this link:

Medicare Part B Preventive Services

Who is Eligible?

You are eligible for Medicare if you are:

65 years old or older and a U.S. citizen or lawfully permitted resident of the United States.

Medicare is available for certain people with disabilities who are under age 65. These individuals must have received 24 months of **Social Security Disability Insurance (SSDI) benefit payments** *or* have End Stage Renal Disease (ESRD) *or* Amyotrophic Lateral Sclerosis (ALS).

Most people are eligible for premium-free Part A if they have paid Medicare taxes long enough through their own or a spouse's or ex-spouse's work record.

If you are working and covered by your employer's group health plan (or by a spouse's plan), you may want to delay enrollment in Part B and enroll only in Part A. You should check with your employer benefits manager on whether or not you need to enroll in Part B. The number of employees in your employer group health plan may determine if you need to enroll in Medicare as your primary insurance. You can also delay enrollment in Part A unless you are already collecting Social Security benefits.

If you have a Health Savings Account (HSA) as part of a high deductible employer insurance plan, you may want to delay Part A because you cannot contribute to the HSA once your Part A coverage begins. You may use money that is already present in the account after you enroll in Medicare to help pay for deductibles, premiums, copayments, or coinsurance. If you contribute to your HSA after your Medicare Part A coverage starts, you may have to pay a tax penalty. You should stop HSA contributions six months prior to retiring. For further HSA questions, refer to the IRS publication 969, their Human Resources Department or professional tax accountant. IRS Publication 969 (2022) Health Savings Accounts

Medicare has specific enrollment periods:

- 1. Initial Enrollment Period (Parts A. B. C & D)
- 2. General Enrollment Period (Parts A & B)
- 3. Open Enrollment Period (Parts C & D)
- 4. Medicare Advantage Open Enrollment Period (MA OEP) (Part C & D- must be enrolled in an MA planbetween Jan 1St and March 31St)
- 5. Special Enrollment Period (Parts B, C & D)

To enroll in Part B outside of the first 4 periods, you must qualify for a Special Enrollment Period (eg. Losing Employer based coverage)

For more information please visit:

Medicare.gov-When does Medicare Coverage Start?

If you do not enroll during your Initial Enrollment Period, you may be subject to late enrollment PENALTIES (with some exceptions), and a possible delay in your coverage.

Initial Enrollment Period

3 months before the month you turn 65	2 months before the month you turn 65	1 month before the month you turn 65	The month you turn 65*	1 month after the month you turn 65	2 months after the month you turn 65	3 months after the month you turn 65
get Part A and you must er	Enroll early to avoid a delay in coverage. To get Part A and Part B the month you turn 65, you must enroll during the first 3 months before the month you turn 65.		Period to er	ntil the last 4 moi nroll, your Part B nonth following t	coverage will be	egin the first

^{*}if your birthday falls on the first day of the month, your coverage would be effective a month earlier

Penalties

- Part A Late Enrollment Penalty
 - If you enroll late, and aren't eligible for premium-free Part A, your monthly premium may go up 10% for twice the number of years you signed up late.
- Part B Late Enrollment Penalty
 - If enrolling <u>late</u>, Part B penalty is a <u>surcharge added to your monthly Part B premium for life</u>. The Part B late enrollment penalty is calculated as 10% of the current Part B premium for every 12 month period you were not enrolled and did not have active employer coverage.
- Part D Enrollment Penalty
 - If you do not have Part D coverage, even if you take no prescription drugs you can incur a <u>lifetime penalty</u>. The Part D penalty is calculated as 1% of the national base beneficiary premium for each month you were not enrolled in a Part D plan and did not have creditable coverage.

Protection from Penalties

- Once you are eligible for Medicare, as long as you are working and covered by your employer's
 group health plan (or by a spouse's plan), you will not be assessed a Part B Late Enrollment penalty.
 You will need to provide an Employment Letter to Social Security. COBRA does not provide coverage
 from the Part B penalty.
- After you enroll in Medicare, if you have **creditable drug coverage** from any source, including employer, VA coverage, or COBRA coverage, you will not be assessed a Part D late enrollment penalty. If you lose this creditable coverage, you will have up to two months to enroll in a Medicare drug plan to avoid any penalties.

Two Options for Medicare

Once you have enrolled in Medicare A and B via Social Security, you will have two options: (See page 9 for a comparison chart)

- 1) Original Medicare (Parts A & B) with an optional Medigap and/or standalone drug plan (Part D)
- 2) Medicare Advantage plan (also known as Medicare Part C or MA plan). *You must have Part A and Part B in order to have a MA plan.

Medicare Advantage Plans

Medicare Advantage (also known as Medicare Part C or MA plan) is an "all in one" alternative to Original Medicare (Parts A and B). These bundled plans are offered by private insurance companies that contract with Medicare to provide beneficiaries with all of their Medicare benefits that include Part A, Part B, and usually Part D.

Key Components of an MA Plan:

- Out-of-pocket costs can vary. Some plans may have lower out-of-pocket costs than others for certain services.
- With Medicare Advantage, you can choose between an HMO, PPO or an HMO-POS plan. You <u>must</u> use doctors and/or other types of providers who are in the plan's network if your Medicare Advantage Plan is an HMO (Healthcare Maintenance Organization). You may also need to get a referral to see a specialist. For PPO and HMO-POS plans, you may have the option of choosing out of network doctors but you will usually pay higher co-pays. Ask your primary doctor or other providers you use if they participate in any Medicare Advantage plans.
- Emergency services will be covered anywhere within the United States. If you are traveling outside your region (zip code/county), check with your plan for coverage information.
- Most plans offer extra benefits that Original Medicare doesn't cover, like routine/limited vision, hearing, and dental. Check with your plan for coverage information.
- You may pay a premium for the plan in addition to the monthly premium for Part B. Some plans have no monthly premium. Make sure to check your maximum out-of-pocket cost before committing to any plan.

To be eligible for a plan, you must:

- Have both Medicare Part A & Part B
- Reside in the plan's geographic service area

When can I enroll or disenroll in a Medicare Advantage Plan?

- o Initial Enrollment Period
- o Special Enrollment Period
- o Open Enrollment (October 15 December 7)
- Medicare Advantage Open Enrollment Period (January 1 March 31)
 - ✓ Note: You must be enrolled in a Medicare Advantage Plan between January 1st and March 31st in order to make any changes.

Things to consider before choosing Medicare Advantage:

- Do your medical providers accept the plan or are you willing to change providers?
 - PLEASE call all of your providers to confirm plan acceptance!
- o How much are the premium, copays, and coinsurance?
- What is the plan's maximum out of pocket cost for the year?
- Do you need to get referrals to see a specialist?
- Are your prescription drugs on the plan's formulary and what is the cost and are there any restrictions?

Medicare Medical Savings Accounts *Not Currently available in Massachusetts*

Medicare Medical Savings Accounts (MSA) are consumer-directed plans that pair high deductible coverage with a Medical Savings Account. Although these plans are considered Medicare Advantage plans, there are some important distinctions:

- MSA plans do not include Part D drug coverage. Individuals who sign up for an MSA would need to join a separate Part D plan to have drug coverage.
- o There are no networks, but individuals must use providers that accept their MSA plan

(See pages 10-12 for a List of Medicare Advantage Plans Currently Offered in Massachusetts)

Medigap Plans

Medigap plans, also known as supplements, provide extra coverage beyond Medicare by filling some of the gaps in Medicare coverage. Medigap plans do not provide prescription drug coverage. In Massachusetts, there are 7 private insurance companies that offer supplement plans across the state. Massachusetts offers **continuous open enrollment**, which allows you to enroll, change or drop your plan any month for an effective date the 1st of the following month of enrollment. Medigap plans in Massachusetts are also community rated, this means the same monthly premium is charged to everyone who has the Medigap policy regardless of age or medical history.

(See pages 13-15 for a List of Medigap Plans Currently Offered in Massachusetts)

Part D Prescription Drug Plans:

Even if you do not take any prescription medications, you <u>MUST</u> have a Part D plan to avoid a <u>lifetime</u> <u>penalty</u> unless you have other creditable coverage.

If you <u>have</u> a Medicare Advantage plan, most include Part D coverage. If you <u>do not</u> have a Medicare Advantage plan, you can enroll in a Medicare Part D Stand-alone Prescription Drug Plan (PDP). You cannot enroll in a stand-alone Part D plan and an Medicare Advantage Prescription Drug plan (MA-PD). Beneficiaries with higher incomes will pay more than the standard premium for either type of plan due to IRMAA. <u>Your Part D Premium Costs</u>

There are 4 phases of Part D drug coverage; 1) Deductible 2) Initial 3) Coverage Gap and 4) Catastrophic. Depending on your drug plan, as well as your annual prescription drug costs, you may not reach all of these phases.

Medicare Part D stand-alone prescription drug plan carriers:

- Aetna (Silverscript)
- o Blue Medicare Rx
- Cigna
- o Humana
- Mutual of Omaha
- United Healthcare (AARP)
- o WellCare

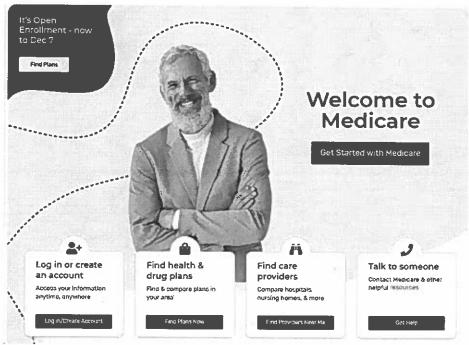
Choosing a Part D Plan:

These are the things to consider when choosing a Part D plan

- What is the Total Cost (premiums and co-pays)?
- Are your prescription drugs covered?
- o Does the plan have a deductible?
- Are there any restrictions? (Quantity Limits, Prior Authorization, Step Therapy, or in/out of network)
- What pharmacies are in-network and are any preferred?

On-Line Tool to Compare Options:

You can view available Part D drug plans and Medicare Advantage plans using Medicare Plan Finder. Go to www.medicare.gov and click on "Find Plans Now" – or talk with a SHINE counselor.



TIP: Medicare also highly recommends that you create a secure Medicare account on Medicare gov (see page 8 for detailed instructions).

To assist with Medicare, SHINE has highly trained, dedicated volunteers who are re-certified annually. They will be glad to make an appointment with you to further explain and clarify your Medicare options.

SHINE Counselors can also screen you for eligibility for programs that may reduce your Medicare costs. These programs, which are offered through Social Security, MassHealth and Prescription Advantage, can provide assistance with premiums, copays, deductibles and prescription drug costs in the coverage gap.

Helpful Resources:

SHINE Program: 1-800-243-4636

Social Security Administration: 1-800-772-1213

www.ssa.gov

Prescription Advantage: 1-800-243-4636 https://www.prescriptionadvantagema.org/

Medicare: 1-800-633-4227

www.medicare.gov/

MassHealth: 1-800-841-2900 (Medicaid) https://www.mass.gov/masshealth

For additional information and a directory of SHINE Regional Offices you can also go to:

SHINEMA.org

Create an Account for a Personalized Medicare Plan Finder Experience

When you create an account, you can:

- Build a better drug list. We'll make suggestions based on prescriptions you filled within the last 12 months.
- · Modify your drug list and save changes.
- · Compare benefits and costs in your current plan to other plans available in your area.
- · See prices based on any help you get with drug costs.

Create your new account

If you want access to personalized information and features, you'll need to create an account. Visit **Medicare.gov/plan-compare** and click "Log in or create account."

Have the following information ready (for yourself or the person you're helping):

- Medicare Number You can find this on your red, white, and blue Medicare card. If you're new to Medicare and don't have your Medicare card yet, you can get your Medicare number on the letter you get from Social Security after you enroll.
- 2. Last name
- 3. Date of birth
- 4. Current address with ZIP code or city
- 5. Part A or Part B coverage start date (find this on your Medicare card)



Once you add this information and select "Next," you can create a username and password and use your new Medicare account. You can write your username and a password hint below. Just remember to keep this sheet in a safe place to protect your privacy.

My Username:

My Password Hint:

Forgot your username or password?

If you have an existing account, but forgot the username or password, click "Trouble signing in?" under the Username box on the log in page. You'll need this information:

- 1. Medicare number
- 2. Last name
- 3. Date of birth



Your Medicare Options



REQUIRED WITH BOTH OPTIONS

MEDICARE

Enrolled in Medicare Part A & Part B and continue to pay monthly premiums

OPTION #1

Original Medicare



- · Optional Medigap plan
- 3 different types of Medigap plans
 - 1. Core
 - 2. Supplement 1A
 - 3. Supplement 1*

(*Only if Medicare eligible prior to 2020)

- Free to choose any doctor or hospital that accepts Medicare
- No referrals needed to see specialists
- Does NOT include drug coverage
- When changing Medigap plans, need to call plan to disensoll



OPTIONAL PART D

Stand Alone Prescription Drug Plan

- Multiple plans to choose from
- Automatic disenrollment from Prescription Drug Plan when changing Part D plans

OPTION #2

Medicare Advantage Plan (Part C)

- · Optional "Replacement"
- Must maintain Part A & Part B and must pay Part B premium
- 5 types of MA plans
 - HMO (Health Maintenance Organization) - May use network providers only
 - HMO-POS (HMO with Point Of Service)-HMO with limited out of network coverage
 - 3. **PPO** (Preferred Provider Organization)-Can go out of network for extra \$\$
 - 4. SNP (Special Needs Plans)
 HMOs for institutionalized individuals or dual eligible
- Usually includes prescription drug coverage.
- Cannot have separate Part D plan
- Cannot live outside service area for more than 6 consecutive months
- Covers some extra benefits
- Usually need referrals to see specialists
- May have co-pays and deductibles
- Plans can include prescription drug coverage
- Automatic disenrollment when changing Medicare Advantage Plans





Medicare Advantage Plans in Massachusetts 2024

Health Plan	Plan Types	Premiums	Plans Available in the Following Counties
Aetna Medicare 833-859-6031 https://www.aetnamedicare.com/	HMO- POS PPO	\$0-\$27	Bristol, Essex, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
Blue Cross Blue Shield of MA 800-678-2265 https://medicare.bluecrossma.com/	HMO- HMO- POS PPO	\$0-\$238	Barnstable, Bristol, Essex, Franklin, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
Commonwealth Care Alliance 855-210-1772 https://www.commonwealthcarealliance.org/ ma/become-a-member/	PPO	\$0-\$20	Bristol, Essex, Franklin, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
eternalHealth 800-840-5031 https://eternalhealth.com/	HMO PPO	\$0-\$25	Bristol, Middlesex, Plymouth, Norfolk, Suffolk, Worcester
Fallon Health 888-377-1980 https://fallonhealth.org/medicare	нмо	\$0-\$207	Barnstable, Berkshire, Bristol, Essex, Franklin, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
Health New England 877-443-3314 https://healthnewengland.org/medicare	HMO PPO	\$0-\$168	Berkshire, Bristol, Franklin, Hampden, Hampshire
Humana 800-833-2364 https://www.humana.com/medicare	PPO	\$0-\$27	Bristol, Hampden, Suffolk,Worcester
			ω





Medicare Advantage Plans in Massachusetts 2024

		1021	
Health Plan	Plan Types	Premiums	Plans Available in the Following Counties
Mass Advantage 844-941-3768 https://massadvantage.com/	HMO PPO	\$0-\$100	Worcester
Mass General Brigham Health Plan 888-828-5500 https://massgeneralbrighamadvantage.org	HMO- POS PPO	\$0-\$140	Bristol, Essex, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
Molina Healthcare (Senior Whole Health) 844-247-4310 https://www.molinahealthcare.com/	нмо	\$0	Bristol, Essex, Plymouth, Suffolk
Tufts Health Plan 877-218-4835 https://www.tuftsmedicarepreferred.org/	HMO PPO	\$0-\$248	Barnstable, Bristol, Essex, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, Worcester PPO plans in all counties except: Berkshire, Barnstable, Dukes, Franklin & Nantucket
UnitedHealthcare 800-555-5757 https://www.aarpmedicareplans.com/	HMO- HMO- POS PPO RPPO	\$0-\$58	All counties
Wellcare 844-917-0175 https://www.wellcare.com/medicare	HMO PPO	\$0-\$75	Berkshire, Bristol, Essex, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, Worcester

Note that not all companies offer plan options in your area; premiums may vary by county. Call plan directly for details.





Medicare Advantage Plans in Massachusetts 2024

Medicare Advantage Plans

Pros:

- •Convenience of having only one plan (drug plan can be included)
- More choices available (HMOs, PPOs, MSAs...)
- Some plans have lower premiums than Medigap plans
- Potential for better coordination of care (HMOs provide this)
- Some additional benefits such as hearing, vision, dental, transportation, OTC spending cards and wellness benefits
- Annual physical exams covered
- No hospital stay required for Skilled Nursing Facility (rehab) coverage
- •There is a yearly limit on your out-of-pocket costs

Cons:

- Cannot live outside service area for more than 6 consecutive months
- Usually need referrals to see specialists
- •Frequently has co-pays and deductibles
- Limited network of providers

Medicare Health Maintenance Organization

(HMO) Plan

Can I go anywhere to receive care?

• No, you may use network providers only, unless you have an emergency or urgent situation.

What is HMO-POS?

 POS benefit may allow you to use doctors, hospitals, and other providers who are not in the HMO network.

Do I need a referral to see a specialist?

•With an HMO plan, you need a referral to see a specialist.

Medicare Preferred Provider Organization

(PPO) Plan

Can I go anywhere to receive care?

• PPO plans have a network of providers. You may have the option of choosing out of network doctors but you will usually pay higher out-of-pocket costs.

Do I need a referral to see a specialist?

 In most cases, you do not need a referral to see a specialist.

Medical Savings Account Plans

(MSA) Plan

NOT CURRENTLY OFFERED IN MASS

Can I go anywhere to receive care?

- Any provider or specialist you choose to see must accept Medicare AND agree to see you.
 - No referrals are required.

Program	Age Eligibility	Program Requirements	Plan Providers (and link to website)	Counties offered in
		Must have:	Commonwealth Care Alliance	Barnstable, Berkshire, Bristol, Essex, Franklin, Hampden, Hampshire, Middlesex Norfolk, Plymouth, Suffolk and Worcester
OneCare	Ages 21-64	MassHealth Standard or •Medicare and	Tufts Health One Care	Barnstable, Bristol, Essex, Middlesex, Norfolk, Plymouth, Suffolk and Worcester
9	CommonHealth	<u>UnitedHealthcare</u> <u>Connected</u>	Bristol, Essex (Partial), Franklin, Hampden Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, Worcester	
		Must have: •Medicare and MassHealth Age 65+ Standard or	Commonwealth Care Alliance	Bristol, Essex, Franklin, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
			NaviCare (HMO) (Fallon Health)	Barnstable, Berkshire, Bristol, Essex, Franklin, Hampden, Hampshire, Middlesex Norfolk, Plymouth, Suffolk and Worcester
Senior Care Options	•Medicare and nior Care MassHealth Options Age 65+ Standard or		Senior Whole Health	Bristol, Essex, Hampden, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
(SCO)		Standard or	Tufts Health Plan Senior Care Options	Barnstable, Bristol, Essex, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
		<u>UnitedHealthCare</u>	Bristol, Essex, Franklin, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, Worcester	
			WellSense Health Plan	Barnstable, Bristol, Hampden, Plymouth, Suffolk

Care for the deemed nursing			CHA PACE	Middlesex & Suffolk
	ΣX	Elder Service Plan of Harbor Health Services, Inc.	Bristol, Middlesex, Norfolk, Plymouth, Suffolk	
		Element Care Essex, Middles	Essex, Middlesex, Norfolk, Suffolk	
	MassHealth and Medicare are not	Fallon Health- Summit ElderCare	Berkshire, Bristol, Essex, Franklin, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Worcester	
	required	Mercy LIFE Hampden & Ha	Hampden & Hampshire	
			Neighborhood PACE	Middlesex & Suffolk
ļ		Serenity Care	Franklin (Partial), Hampden, Hampshire	
			Upham's Elder Service Plan	Norfolk & Suffolk
- 10	<u> </u>			Updated: 11.17.202

Note: In order to be eligible for one of the Special Needs plans, an individual must be institutionalized; OR an individual eligible for both Medicare and Medicaid; OR be suffering from certain disabling chronic conditions.

Comparison of Plans	Core	Supplement 1*	Supplement 1A
Basic Benefits Included In All Plans:			
Hospitalization Part A Co-payments Days 61 - 90: \$408 per day Days 91-150: \$816 per day	X X	X X	X X
365 Additional Lifetime Hospital days - Paid in full	X	X	X
Part B Coinsurance Coverage of coinsurance, in most cases, 20% of approved amount	x	X	X
Parts A and B Blood First 3 pints	X	X	X
Additional Benefits			
Part A Deductible for Hospital Days 1 - 60 \$1,632 per benefit period		X	X
Skilled Nursing Facility Coinsurance Days 21-100 - \$204 per day		Х	Х
Part B Annual Deductible - \$240		X	
Foreign Travel - For Medicare-covered services needed while traveling abroad.		X	Х
Inpatient Days in Mental Health Hospitals In addition to Medicare's coverage of 190 lifetime days and less any days previously covered by plan in same benefit period	60 days per calendar year	120 days per benefit period	120 days per benefit period

IMPORTANT NOTICE:

Medicare Supplement premium rates are required to be in effect for not less than 12 months. Effective dates shown for each Carrier are based on the most recent filing on record with the Division of Insurance. *Only available if eligible for Medicare prior to 1/1/2020. Moving from Supplement 1 to Supplement 1A may be subject to restrictions.

Updated 1/1/2024

2024				
Medigap Carriers Please note that some rates may change during 2024	Medicare	Medicare	Medicare	
	Supplement Core	Supplement 1*	Supplement 1A	
Blue Cross & Blue Shield of MA (Medex™) ^{1,2} 1-800-678-2265 sales/apps 1-800-258-2226 member services 711 (TDD) www.bluecrossma.com (continuous open enrollment)	\$118.91	\$239.73	\$195.96	
	Effective 01/01/2024	Effective 01/01/2024	Effective 01/01/2024	
Blue Cross Optional Preventive	\$ 2.47	\$ 2.47	\$ 2.47	
Care Benefits Rider	Effective 01/01/2024	Effective 01/01/2024	Effective 01/01/2024	
Fallon Health & Life Assurance Company 1-866-330-6380 sales/apps 1-800-868-5200 member services TRS 711 www.fallonhealth.org/medsupp (continuous open enrollment)	\$165.00	\$275.00	\$199.00	
	Effective 01/01/2024	Effective 01/01/2024	Effective 01/01/2024	
HNE Insurance Company 1-877-443-3314 711 (TTY) www.healthnewengland.org (continuous open enrollment)	\$151.00	\$273.00	\$216.00	
	Effective 01/01/2024	Effective 01/01/2024	Effective 01/01/2024	
HNE Insurance Company If you received communication that your former employer has a contracted relationship with below marketplaces please call: • AON Hewitt: 800-350-1470 or visit retiree.aon.com • Towers Watson: 866-322-2824 or visit my.viabenefits.com (continuous open enrollment)	\$144.00	\$249.00	\$216.00	
	Effective 01/01/2024	Effective 01/01/2024	Effective 01/01/2024	

Medigap Carriers Please note that some rates may change during 2023	Medicare	Medicare	Medicare
	Supplement Core	Supplement 1*	Supplement 1A
HPHC Insurance Company, Inc. ³ 1-877-909-4742 sales/apps 1-877-907-4742 member services 711 (TTY) www.hpforlife.org (continuous open enrollment)	\$150.00	\$266.50	\$215.00
	Effective 01/01/2024	Effective 01/01/2024	Effective 01/01/2024
Humana Benefit of Illinois, Inc. 1-800-872-7294 sales/apps 1-800-866-0581 member services 1-800-833-3301 (TDD) www.humana.com (continuous open enrollment)	\$150.26	\$257.53	\$214.66
	Effective 04/01//2024	Effective 04/01/2024	Effective 04/01/2024
Transamerica Life Insurance Company 1-800-458-5736 (Group Medicare Supplement insurance sponsored exclusively for eligible members of the American Medical Association.) www.amainsure.com (continuous open enrollment) 1-800-247-1771 (Group Medicare Supplement insurance sponsored exclusively for eligible members of the American Institute of Certified Public Accountants (AICPA)) https://forms.cpai.com/personal-insurance/medicare-supp/ (continuous open enrollment)	\$130.52	\$225.76	\$202.28
	Effective 04/01/2023	Effective 04/01/2023	Effective 04/01/2023

Medigap Carriers Please note that some rates may change during 2024	Medicare	Medicare	Medicare
	Supplement Core	Supplement 1*	Supplement 1A
Tufts Insurance Company Sales: 1-888-508-1401 Customer Relations: 1-800-701-9000 711 (TTY) www.thpmp.org/medsupp (continuous open enrollment)	\$139.00	\$245.50	\$210.00
	Effective 01/01/2024	Effective 01/01/2024	Effective 01/01/2024
Tufts Optional Dental Rider	\$33.00	\$33.00	\$33.00
	Effective 01/01/2024	Effective 01/01/2024	Effective 01/01/2024
UnitedHealthcare Insurance Company Only for members of AARP www.aarpmedicaresupplement.com 1-800-523-5800 (continuous open enrollment)	\$153.00	\$274.75	\$214.00
	Effective 06/01/2023	Effective 06/01/2023	Effective 06/01/2023

Updated 11/27/2023

NOTE: If new to Medicare, check with each plan to see what discounts they may offer.

In addition to the above-noted Medicare Supplemental plans, Massachusetts residents may enroll in Medicare Advantage Plans as well as Part D Prescription Drug Plans with the Centers for Medicare and Medicaid Services ("CMS"). For further information regarding these plans please visit the following website: https://www.medicare.gov/find-a-plan/questions/home.aspx

^{*}Only available if eligible for Medicare prior to 1/1/2020. Moving from Supplement 1 to Supplement 1A may be subject to restrictions.

¹Medex Choice is no longer available to new customers, but existing members may remain enrolled. The premium is \$177.20/month in 2024.

²Medigap 2 cannot be sold to new customers after December 31, 2005, but existing members may remain enrolled. Medex Gold premium is \$958.03/month in 2024.

³HPHC Insurance Company Medigap plans will continue to be offered in 2024, <u>but enrollment</u> must be done by calling the plan directly.

2024 Massachusetts Medicare Part D Stand Alone Prescription Drug Plans



10/25/2023

This chart is not approved by CMS

Company	Plan Name/ Plan ID	Monthly Premium	Monthly Premium with full LIS
	SilverScript Smart Saver (S5601-177)	\$15.70	\$2.40
Aetna Medicare (1-833-526-2445) aetnamedicare.com	SilverScript Choice (S5601-004)	\$50.90	\$7.40
	SilverScript Plus (S5601-005)	\$110.50	\$67.00
Blue MedicareRx (1-877-479-2227)	Blue MedicareRx Value Plus (S2893-001)	\$53.40	\$9.90
rxmedicareplans.com	Blue MedicareRx Premier (S2893-003)	\$155.80	\$112.30
	Cigna Saver Rx (S5617-352)	\$21.90	\$18.10
Cigna (1-800-735-1459)	Cigna Secure Rx (S5617-008)	\$54.30	\$10.80
cigna.com/medicare	Cigna Extra Rx (S5617-247)	\$90.60	\$47.10
			įn.

2024 Massachusetts Medicare Part D Stand Alone Prescription Drug Plans

This chart is not approved by CMS

SHINE

Company	Plan Name/ Plan ID #	Premium	Monthly Premium with full LIS*
Humana	Humana Walmart Value Rx (S5884-182)	\$54.60	\$11.10
(1-800-706-0872) humana.com/medicare	Humana Basic Rx (S5884-102)	\$67.50	\$24.00
	Humana Premier Rx (S5884-149)	\$108.40	\$64.90
Mutual of	Mutual of Omaha Rx Essential (S7126-105)	\$27.90	\$25.50
Omaha (1-800-961-9006) mutualofomaharx.com	Mutual of Omaha Rx Premier (S7126-072)	\$102.40	\$58.90
	Mutual of Omaha Rx Plus (S7126-002)	\$110.80	\$67.30
UnitedHealthcare	AARP MedicareRx Walgreens (S5921-385)	\$72.50	\$29.00
(1-888-867-5564) aarpmedicareplans.com	AARP MedicareRx Basic (S5921-348)	\$34.50	\$0.00*
	AARP MedicareRx Preferred (S5820-002)	\$110.20	\$66.70
5	WellCare Value Script (S4802-137)	\$0.50	\$0.50
WellCare (1-866-859-9084) wellcare.com/pdp	WellCare Classic (S4802-076)	\$36.80	\$0.00*
	WellCare Medicare Rx Value Plus (S4802-205)	\$78.80	\$43.00

^{*}Some Medicare beneficiaries may qualify for financial assistance through Low Income Subsidies (LIS), also known as "Extra Help". Plans highlighted in blue have a \$0 premium for beneficiaries who qualify for full Low Income Subsidies.

There are no 5 STAR PDP plans in 2024