

Prepare: Become Familiar With Medicare

Medicare benefits are divided into several component parts. To decide how to best meet your medical needs and budget, it helps to understand how these parts work together. The outline shown here will familiarize you with the parts of Medicare and the decisions you must make.

What you already have:

Part A and Part B

Original Medicare consists of Part A and Part B. You automatically receive Part A and become eligible for Part B when you qualify for Medicare either due to age or disability. You must be enrolled in Medicare Parts A and B before you can select a commercial Medicare plan.

Part A

Part A provides you with inpatient care, and covers inpatient hospital stays, home health care, stays in skilled nursing facilities, and hospice care.

Part B

Part B provides you with out-patient care, and covers physician fees, and other medical services not requiring hospitalization. You must choose to enroll in Part B.



What you choose as a supplement:

Medicare Advantage, Medigap, and Part D

You choose among these three different types of supplemental plans that add coverage where original Medicare may have less than you require.

Medicare Advantage

Medicare Advantage is a plan offered by a private company to provide you with all your Medicare Part A and Part B benefits, plus additional benefits. Medicare Advantage is also referred to as Part C.

There are two versions of Medicare Advantage plans:

- MAPD, which includes prescription drug coverage
- MA, which does not include prescription drug coverage

Within these two Medicare Advantage types, there are three doctor networks:

- HMO
- PPO
- Private Fee-for-Service Plans (PFFS)

Medigap

Medigap, or Medicare Supplement insurance, is sold by private insurance companies to fill “gaps” in Original Medicare plan coverage. Medigap plans do not have networks.

Part D

Part D refers to optional prescription drug coverage, which is available to all people who are eligible for Medicare. Plans are offered through private insurance companies.

You may combine the supplemental plans above to get a package of plans that covers all of your needs. Choosing the best combination requires some education and some comparison of plan features and costs.

2013 Retiree Health Care Coverage Overview

There are four changes to the way retirees receive and pay for Medicare supplemental medical coverage with the new retiree health care program:

What Is Changing	Current	Effective July 1, 2013
Choice of Medical Plans	Battelle Memorial Institute Complement Plan for PNNL retirees	Choice of a wide range of individual health care and prescription drug plans offered by a variety of insurance companies.
Help Selecting a Medical Plan	No choice; only one plan available	PNNL has partnered with Extend Health, a company dedicated to helping Medicare-eligible retirees choose the right plan from the individual market.
How You Pay for Your Medical Plan	Pension payroll deduction or direct payment	You pay the insurance company directly.
Health Reimbursement Account (HRA)	Not available	You will be eligible for an HRA contribution. The contribution will be credited to your account at the beginning of each year to help you pay for your chosen plan in which you enroll.

The information above pertains to retirees, spouses of retirees, and surviving spouses who are Medicare-eligible due to age or disability as of July 1, 2013.



Find more details through Extend Health

www.extendhealth.com/pnnl

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