



Answers

Your Aetna® Medicare Guidebook

**Have questions about Medicare?
We have answers.**

New to Medicare? Let's start with the basics.

There's a lot to know about Medicare. In this brochure, we answer the questions we hear most from people like you, who are approaching Medicare eligibility. More questions may come up as you read this. If they do, our licensed agents are available to help answer them. Taking advantage of their expertise in Medicare can be one of the quickest ways to help you get the quality care and coverage you deserve.



Ready to learn your ABCDs of Medicare?

We'll help make it easy.

The ABCDs of Medicare

Q: What is Medicare?

Medicare is a health insurance program that has four basic parts: **Parts A, B, C** and **D**. Here's an overview of each part's coverage benefits — and more.



Part A

(Hospital insurance):

- Covers inpatient care in hospitals and rehabilitation facilities
- Covers skilled nursing facility, hospice and home health care
- Most people won't pay a premium for Part A



Part B

(Medical insurance)*:

- Covers provider visits, hospital outpatient care, ambulance services and home health care
- Covers preventive services
- You pay a monthly premium (usually deducted from your Social Security check)
- Covers mental health services
- Covers durable medical equipment (DME)

*You'll have to confirm your provider takes Medicare

Together, Parts A and B make up Original Medicare (provided by the federal government).



Part C

(Medicare Advantage plan):

- Covers Medicare Parts A and B, and often Part D
- May also offer additional benefits
- You may pay a monthly premium to a private plan
- You continue to pay a monthly premium to the federal government for Part B
- Caps your out-of-pocket spending to protect your finances
- May require you to see network providers or specialists



Part D

(Prescription drug plan):

- Only covers prescription drugs
- You may pay a monthly premium to a private plan
- A Part D plan can be purchased separately to go with Original Medicare
- Often included in a Medicare Advantage plan

Additional coverage (offered by private insurers).

Q: What is Original Medicare (Parts A and B)?

Original Medicare makes up the first two parts of Medicare: Part A (hospital insurance) and Part B (medical insurance). Unlike Parts C and D, the federal government directly provides Original Medicare benefits. What you pay for services depends on factors such as whether or not your provider accepts Medicare, the type of care you need and how often you need it.

Q: Am I eligible for Original Medicare?

You're eligible for Original Medicare (Parts A and B) if you:

- Are age 65 or older
- Are under age 65 and have certain disabilities
- Have end-stage renal (kidney) disease (called ESRD)



Original Medicare doesn't cover prescription drugs or cap your annual out-of-pocket spending for medical care.

This means there's no limit to the expenses you may have to pay each year for medical services.





Q: I didn't know that Original Medicare doesn't pay for everything. What can I do to help keep costs down?

There are options that can help:

You can purchase a Medicare Supplement plan. For a monthly premium, this additional insurance covers a portion of health care costs not covered by Original Medicare. Even deductibles and coinsurance payments.

OR

You can also choose a Medicare Advantage plan (Part C). Learn about Medicare Advantage plans on the next page.

How your health costs break down with Original Medicare

- Original Medicare covers a portion of your health care costs.
- You pay the rest (no out-of-pocket cost maximum).

Q: What is a Medicare Advantage plan (Part C)? How can it help me?

Medicare Advantage plans (Part C) combine Part A and Part B benefits, and usually Part D, in one plan. That's coverage for hospital and medical care, as well as prescription drug coverage. Private insurance companies offer all Medicare Advantage plans. They have a contract with the federal government. You may find that a Medicare Advantage plan suits your budget and lifestyle better than Original Medicare alone.

When you choose Medicare Advantage, the plan will cover:

- Your Medicare Parts A and B
- All the same benefits as Original Medicare and often additional benefits, like vision or dental coverage
- Prescription drug coverage (Part D), with most plans

And you may pay less:

- An out-of-pocket cost maximum limits the expenses you may pay each year for medical services
- Medicare Advantage plans can have a \$0 or low monthly premium (but remember, you must continue to pay your Part B premium)

Important to note:

You must have Parts A and B before you can enroll in a Medicare Advantage plan. You can sign up for Parts A and B through Social Security at [SSA.gov](https://www.ssa.gov), by phone at **1-800-772-1213 (TTY: 711)** or in person at your local Social Security office. To learn more, visit [Medicare.gov](https://www.Medicare.gov).



Choosing the coverage that matters most to you

Q: Is a Medicare Advantage plan right for me?

You may want to consider a Medicare Advantage plan if:

- You want a cap on your annual out-of-pocket spending for medical care
- You like the idea of including your medical, hospital and prescription drug coverage under one plan
- You want an alternative to supplementing your Original Medicare coverage with more insurance
- You want additional benefits that Original Medicare doesn't cover, like vision or dental coverage

Remember, we're here to help



To discuss how a Medicare Advantage plan may be the answer for you, call an Aetna® licensed agent today.

Q: Does Aetna offer Medicare Advantage plans (Part C) that meet my needs?

Aetna Medicare Advantage plans may offer the following benefits:

- \$0 or low monthly premiums
- Medical (Parts A and B) and prescription drug coverage (Part D) in one plan
- Additional benefits and services, such as vision and dental coverage, gym memberships — and more

As you explore Medicare Advantage options in your area, you'll see that benefit details offered are unique to each plan. You choose the coverage that matters to you most and works for your budget.

Ready to learn about our range of Aetna Medicare Advantage plans?

To find one that's right for you, call us today:

1-833-270-4614 (TTY: 711)

A licensed agent will answer your call.

8 AM to 8 PM, seven days a week, from October 1 to March 31.

8 AM to 8 PM, Monday to Friday, from April 1 to September 30.



Or visit [AetnaMedicare.com/MyGuide](https://www.aetna.com/MyGuide)

Understanding your options and when to apply

Q: Do I need to apply for Medicare?

You don't need to apply for Medicare if you are already getting Social Security benefits or railroad retirement checks.

The Social Security Administration will automatically enroll you in Medicare Parts A and B. However, because you must pay a premium for Part B coverage, you can choose to turn it down. If you decide to enroll in Part B later on, you may have to pay a late enrollment penalty.

You do need to apply if you are not receiving Social Security benefits or railroad retirement checks.

You should contact Social Security about three months before your 65th birthday to sign up for Medicare. You can sign up for Medicare even if you don't plan to retire at 65.

Your Initial Enrollment Period for Medicare begins three months before your 65th birthday, includes the month you turn age 65, and ends three months after that birthday.



Q: Should I enroll in Part B?

If you don't enroll in Medicare Part B during your Initial Enrollment Period, you may have to pay a late enrollment penalty for as long as you have Part B coverage. You'll have to pay an extra 10 percent for each year you could have signed up for Part B, but didn't. But, if you have medical coverage through an employer based on current employment, you may not need to sign up for Medicare Part B at age 65. You may qualify for a Special Enrollment Period (SEP) that will let you sign up for Part B later.

Q: Should I enroll in Part D?

If you don't enroll in Medicare Part D during your Initial Enrollment Period, you may have to pay a late enrollment penalty for as long as you have Medicare drug coverage. Currently, the late enrollment penalty is calculated by multiplying 1% of the "national base beneficiary premium" by the number of full, uncovered months that you were eligible but did not enroll in Medicare drug coverage and went without other creditable prescription drug coverage.

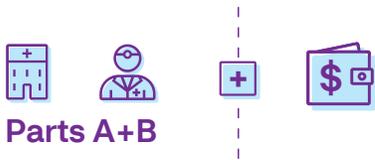
Understanding your options and when to apply

Q: Can you sum up the Medicare options I have?

For the most part, you have four different options to get your Medicare coverage:

Option 1

Get Original Medicare (Parts A and B) from the federal government
and
Pay out of pocket for the costs not covered by Original Medicare



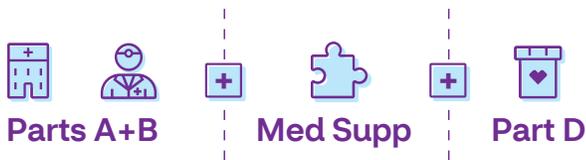
Option 2

Get Original Medicare (Parts A and B) from the federal government
and
Purchase a Medicare Supplement plan from a private insurer
or
Purchase prescription drug coverage (Part D) from a private insurer



Option 3

Get Original Medicare (Parts A and B) from the federal government
and
Purchase a Medicare Supplement plan from a private insurer
and
Purchase prescription drug coverage (Part D) from a private insurer



Option 4

Get a Medicare Advantage plan (Part C) from a private insurer for Parts A, B, and usually D, all in one plan — plus, other benefits



Of course, there are other factors that should play into your final decision. But thinking of your choices in these broad terms may help. Please refer to page 3 for details about these Medicare options.



**We hope this FAQ
has been helpful**

Learning about Medicare takes time. We encourage you to reach out to us with any questions or concerns. Like you, we want you to get the best coverage you can. To help make sure you do, our Aetna® licensed agents are on hand to be certain you understand your options — and know the specifics of any Aetna plan you may be considering.

Whether you choose Original Medicare or a Medicare Advantage plan, we're here to support you through your decision process. Give us a call today.

Want to talk? Need more answers?



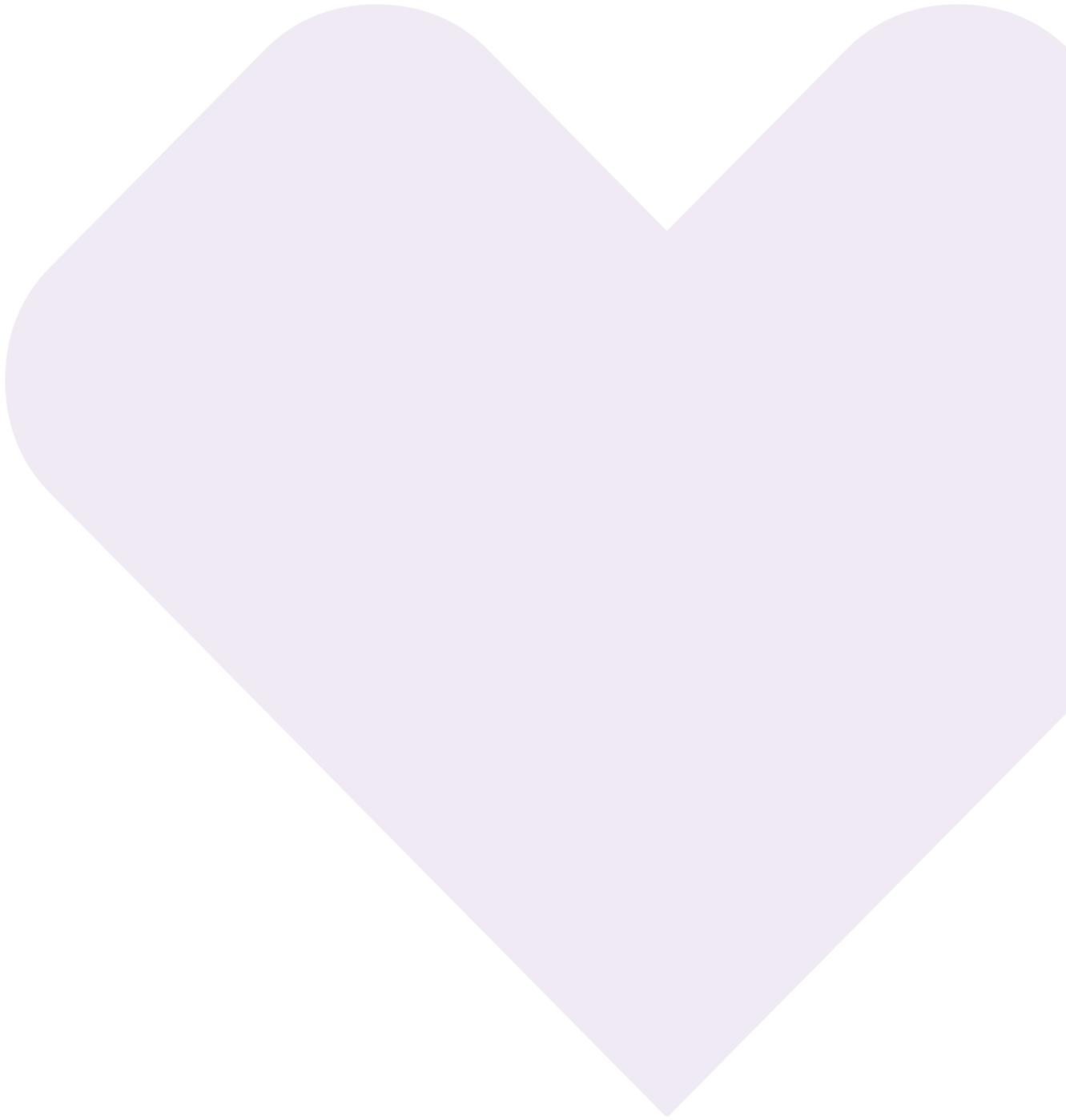
Call today to speak with an
Aetna Medicare representative:

1-833-270-4614 (TTY: 711)

This number will take you to a licensed sales agent.
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8 AM to 8 PM, Monday to Friday, from April 1 to September 30



Or visit [AetnaMedicare.com/MyGuide](https://www.aetnamedicare.com/MyGuide) to learn more



Aetna Medicare is a HMO, PPO plan with a Medicare contract. Our DSNPs also have contracts with State Medicaid programs. Enrollment in our plans depends on contract renewal. Plan features and availability may vary by service area. Participating health care providers are independent contractors and are neither agents nor employees of Aetna. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change.

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