Senior Healthcare

Change is the only constant



The 3 Cornerstones of Healthcare









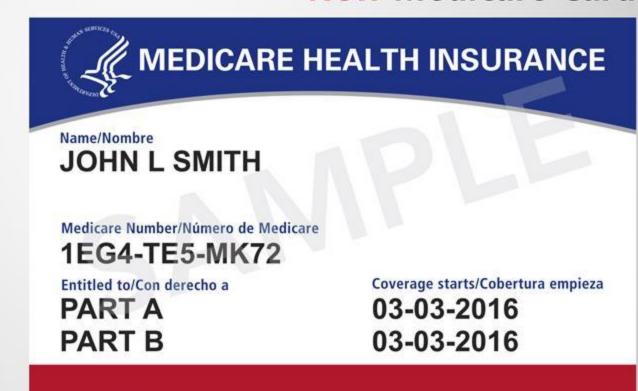




Current Medicare Card

HEALTH INSURANCE MEDICARE 1-800-MEDICARE (1-800-633-4227) NAME OF BENEFICIARY JANE DOE MEDICARE CLAIM NUMBER SEX 000-00-0000-A FEMALE IS ENTITLED TO EFFECTIVE DATE HOSPITAL (PART A) 07-01-1986 07-01-1986 (PART B) MEDICAL SIGN

New Medicare Card

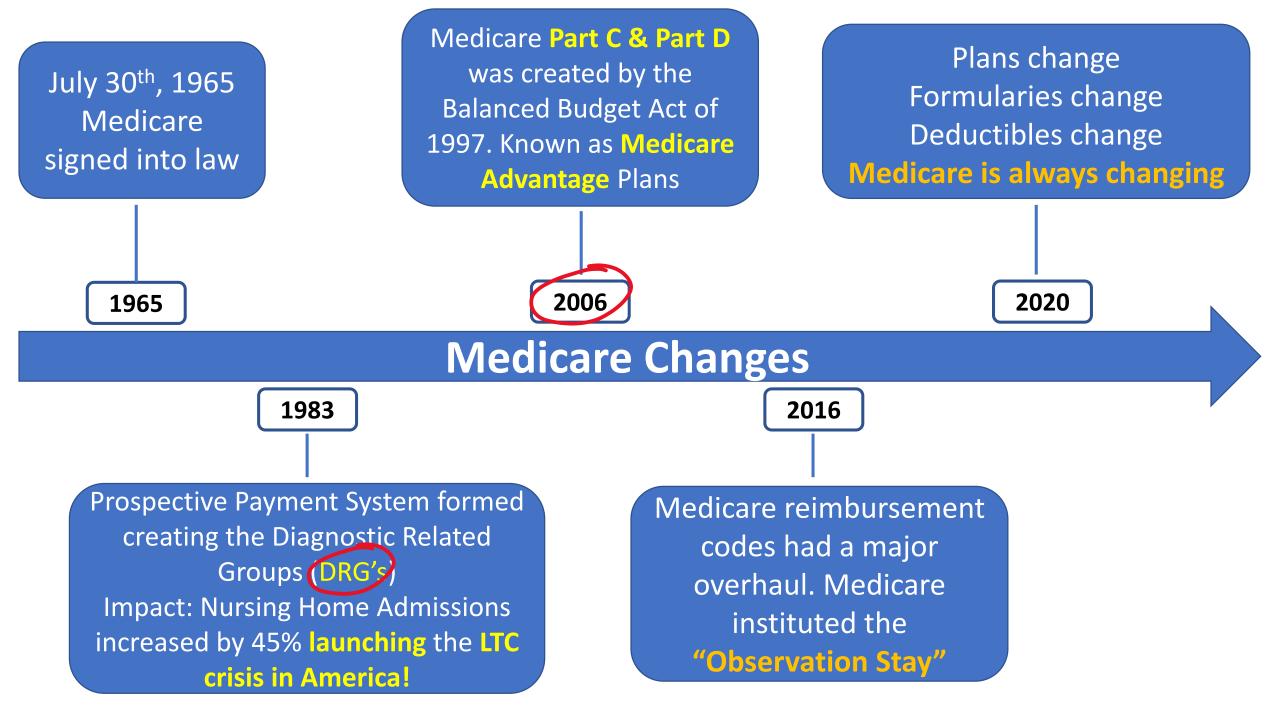


If you received on these cards, you enjoy the benefits of the Medicare Healthcare System!



Or

- When you qualify for Medicare Part B
- 2. Permanent Disability for at least 2 years
- 3. You have end-stage renal disease
- 4. You have ALS or Lou Gehrig's disease



What are your Medicare choices? You have two directions you can take...

Original Medicare

80%

Part A
Hospital
Insurance

Part BMedical

Insurance

*Additional Coverage Recommended

20%

Medicare
Supplement
Insurance
(Medigap) Plans

Part D
Prescription
Drug
Coverage

Medicare Advantage Plan Part C

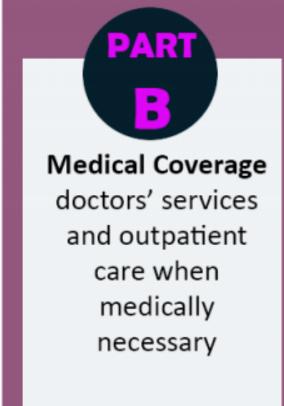
Most plans combine Part A and Part B



Part D
Prescription Drug Coverage
Plans vary by county

A Closer Look at Medicare's Parts





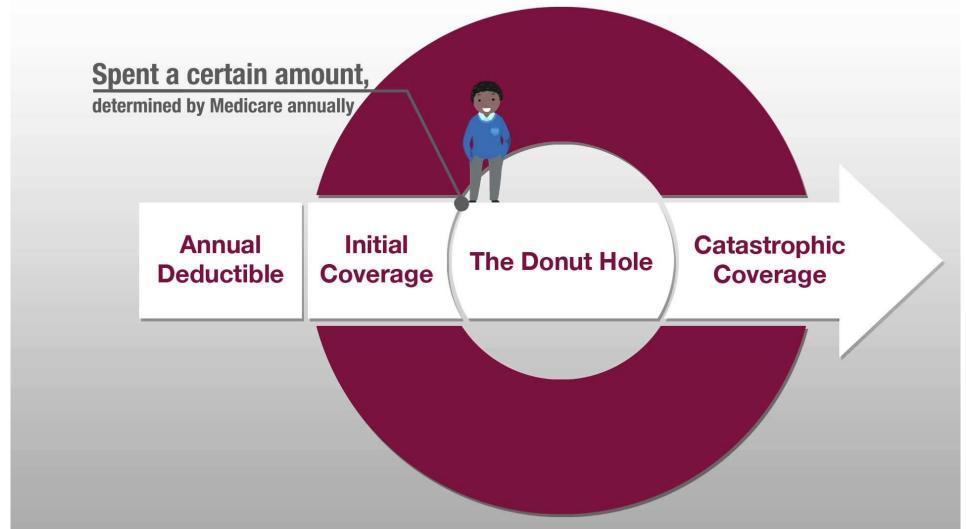




Medicare Supplement Plans

Medigap Plans A-N Medicare Supplement A В **Insurance Plans** Basic Benefits* 50% 75% Part B Coinsurance Copay³ 50% 75% Skilled Nursing 50% 75% Part A Deductible 50% 75% 50% Part B Deductible Part B Excess 100% 100% Foreign Travel Emergency Preventive Care Part B Coinsurance





Choosing not to enroll in a Part D plan can cost you? Example of estimated penalty cost:

1% of the National Avg. Monthly Premium X # of months not enrolled = \$ penalty



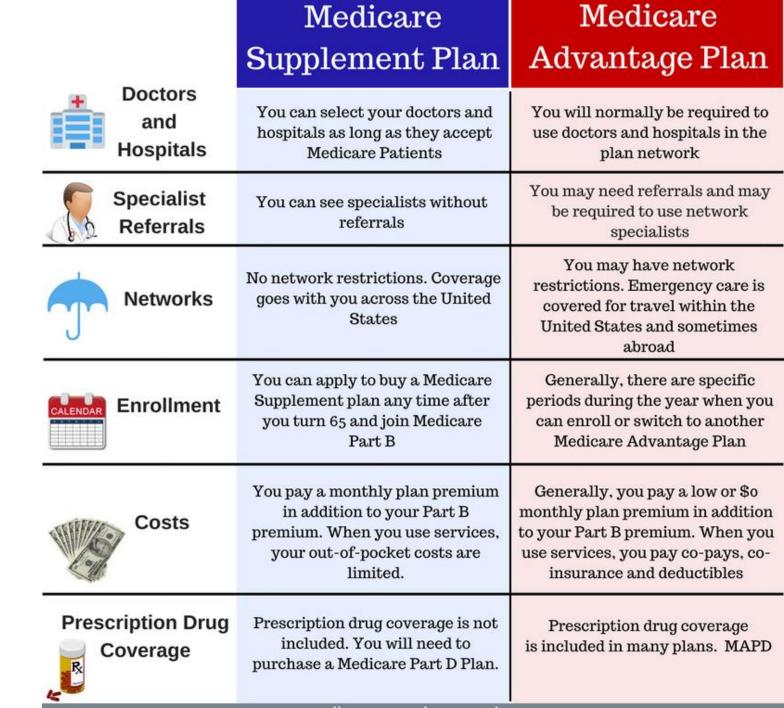
 $33.19 \times 31\% = 10.29$

\$10.29 is then rounded to the nearest \$0.10 = \$10.30



Mrs. Smith will pay a Part D penalty of \$10.30 in addition to her Part D premium.

How are they different?



How are they different?





Medicare Supplement

- Can choose doctor and hospital
- No Referrals Needed
- No Networks
- Coverage is not guaranteed
- Premium cost \$
- No copays or deductibles
- RX drugs not included

Medicare Advantage

- Must use plan doctors and hospitals
- May need referrals
- May have network restrictions
- Have specific enrollment periods
- Generally low or \$0 plan premium
- Co-pays & Deductibles apply
- RX drugs included with most plans

Which option is best for you? Things to consider...













Plan availability where you live? Which doctors you use?

Your health status?

What RX drugs do you take?

Do you travel often or live in multiple states?

Premiums
vs
Co-pays?

Which way are you leaning?

Original Medicare

80%

Part A
Hospital
Insurance

Part B

Medical Insurance

Additional Coverage Recommendations

20%

Medicare
Supplement
Insurance
(Medigap)
Plans

Part D

RX

Drug

Coverage

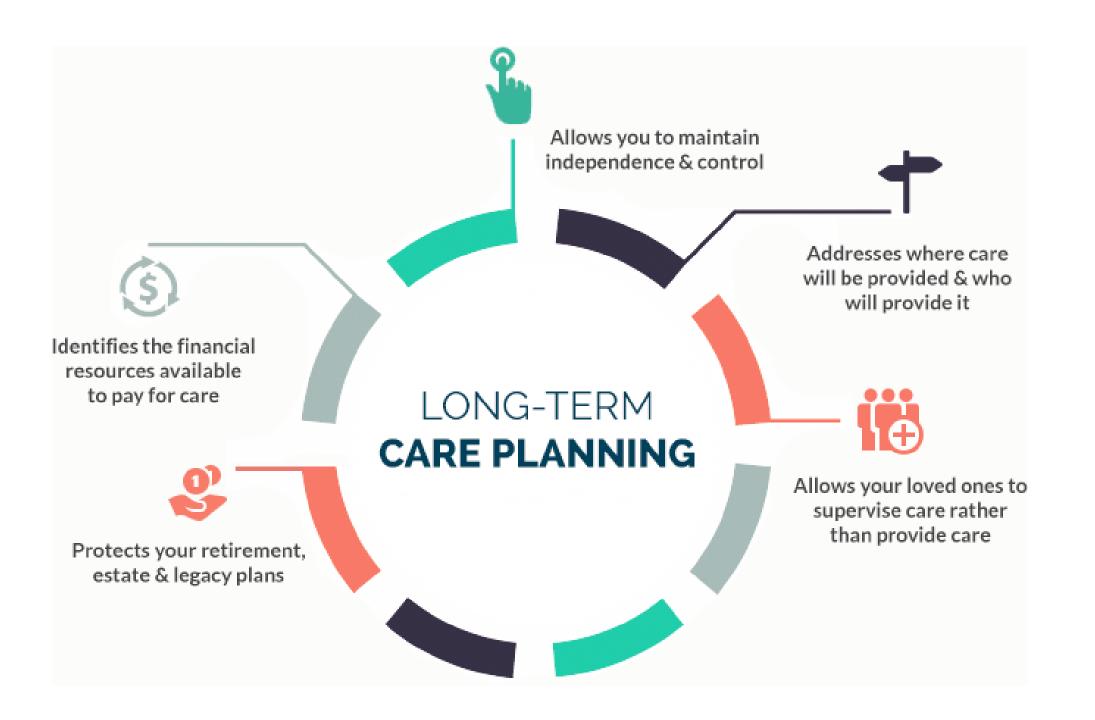
Medicare Advantage Plan
Part C

Most plans combine Part A and Part B



Part D
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Medicare doesn't pay everything, what is not covered?

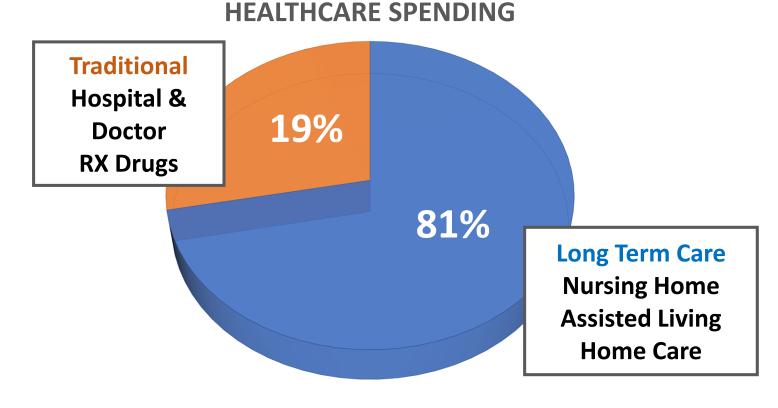
What are the healthcare risks that you face?

 Studies on the financial impact on retirees spending regarding healthcare services show that the majority of out of pocket expenses will come from something <u>other than</u> traditional medical expenses...

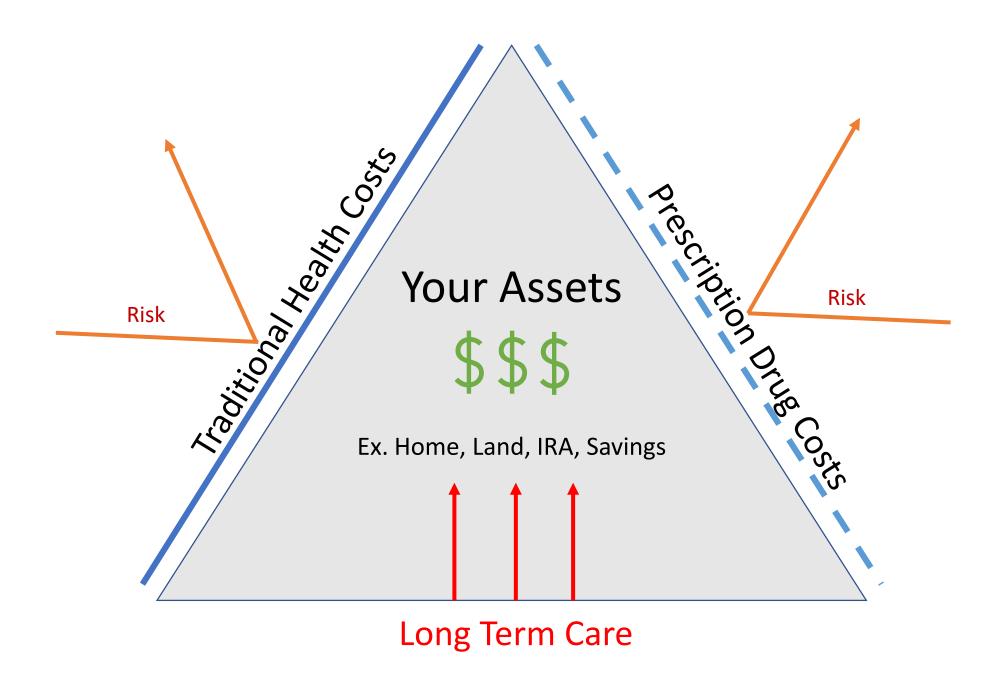
Research from Harvard school and Kaiser Permanente

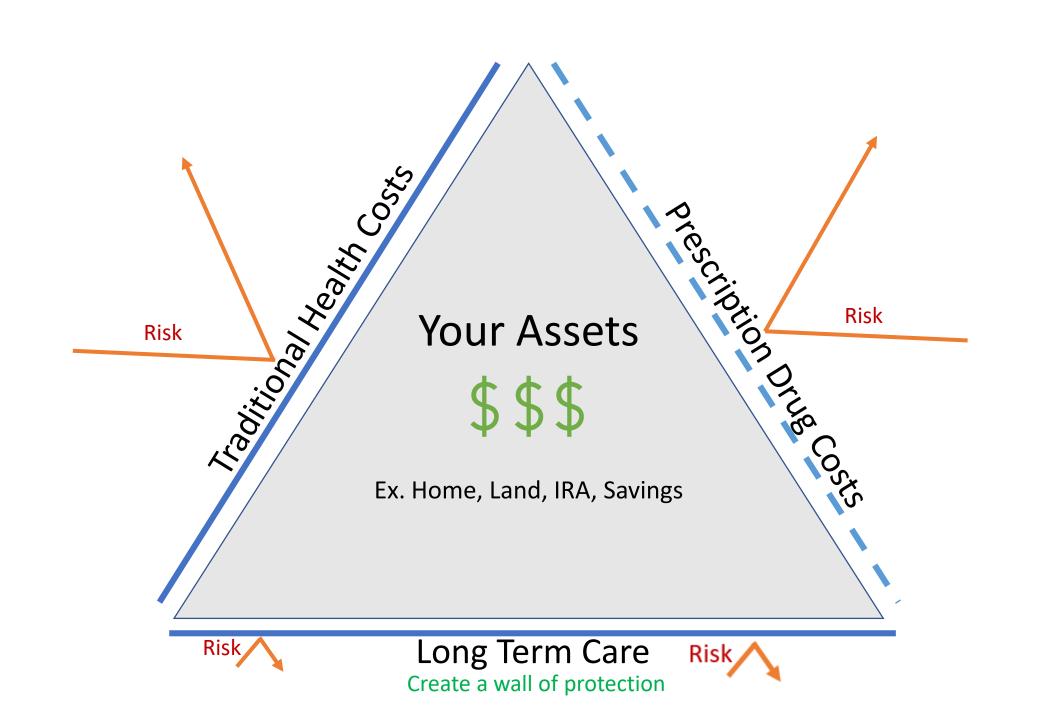
Where will your dollars go for health care in retirement?

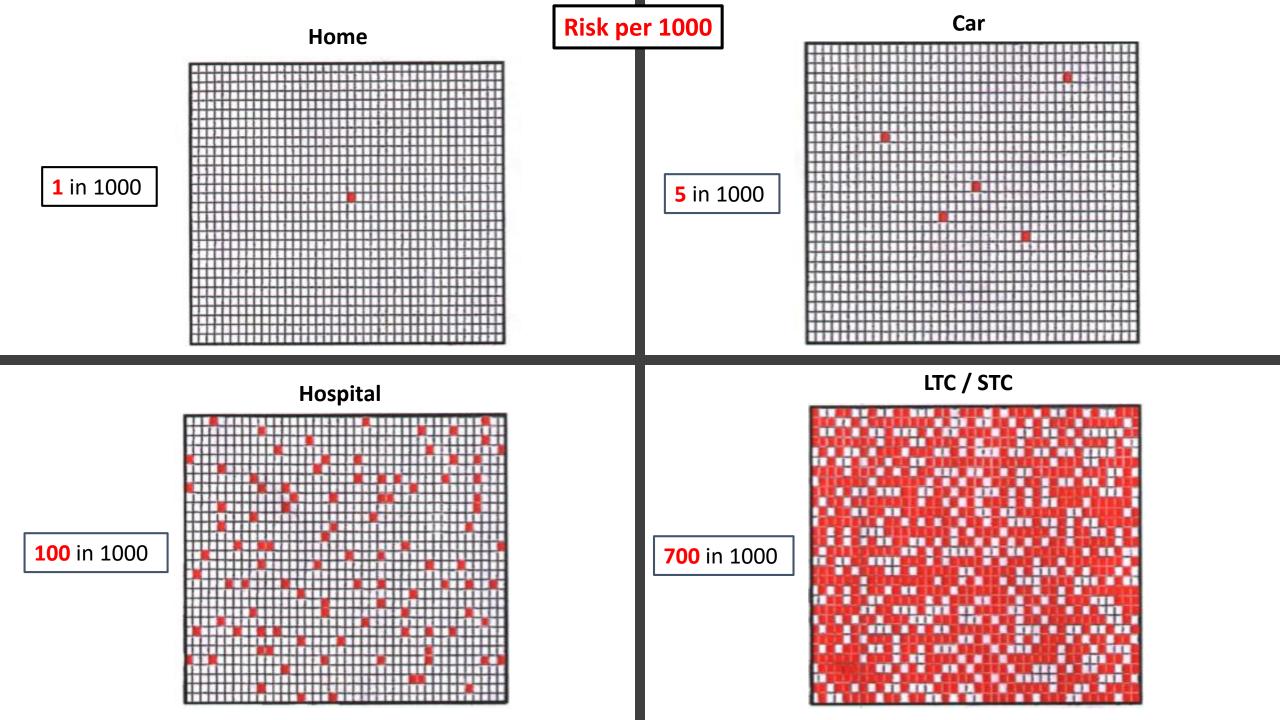
 Here is a closer look at where you are most likely to experience a financial impact for healthcare related spending in retirement.



Research from Harvard school and Kaiser Permanente







What does Part A cover?

Part A (Hospital Insurance) helps cover:

- Inpatient care in a hospital
- Inpatient care in a skilled nursing facility (not custodial or long-term care)

To qualify for skilled nursing facility care coverage, your doctor must certify that you need daily skilled care (like intravenous fluids/medications or physical therapy) which, as a practical matter, can only be provided to you as an inpatient of a skilled nursing facility. Medicare doesn't cover long-term care (see page 50) or custodial care.

MEDICARE WAR A COLUMN THE OFFICIAL U.S. GOVERNMENT MEDICARE HANDBOOK MEDICARE WAS A COLUMN THE OFFICIAL U.S. GOVERNMENT MEDICARE HANDBOOK MEDI













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Medicare's position is very Clear, it is your responsibility!

• Skilled Care – Covered V

Medicare Supplement: Up to 100 days only

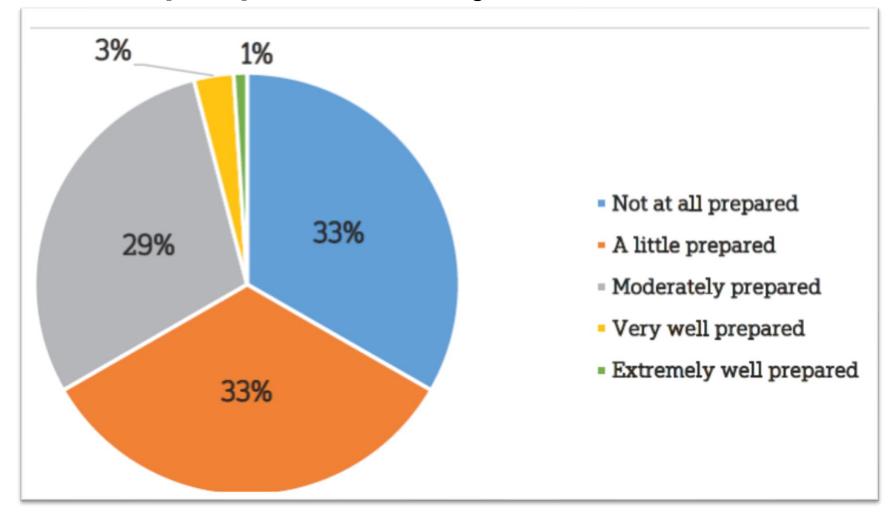
Medicare Advantage: will vary by plan (Limited days, copays apply)

Key Fact: Medicare's average approved stay for Skilled Care is only 22 Days

• Intermediate Care – Not Covered X

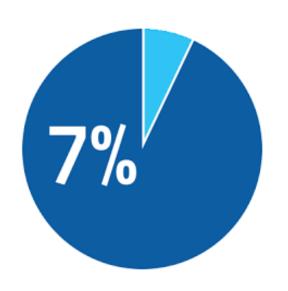
• Custodial Care – Not Covered X 90% of all care performed at Home or Assisted Living are Custodial care!

How prepared are you?



FACT!

Percentage who have a LTC Plan?

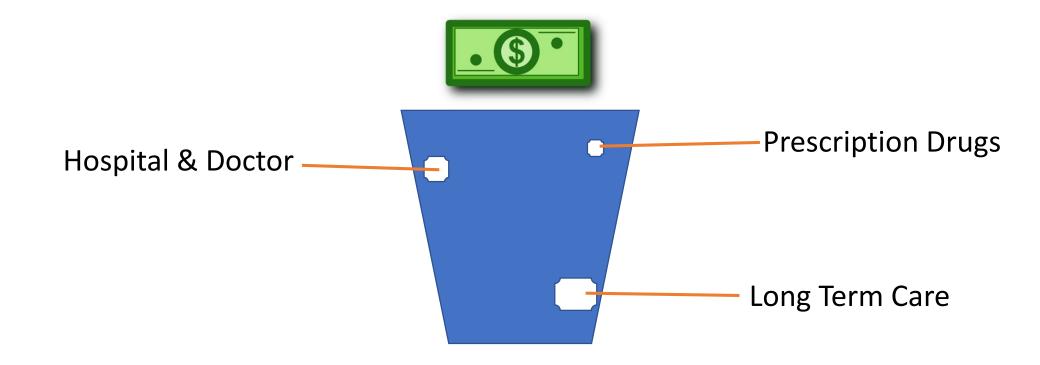


Poll on preparedness for LTC and spending 2017 by national committee on aging



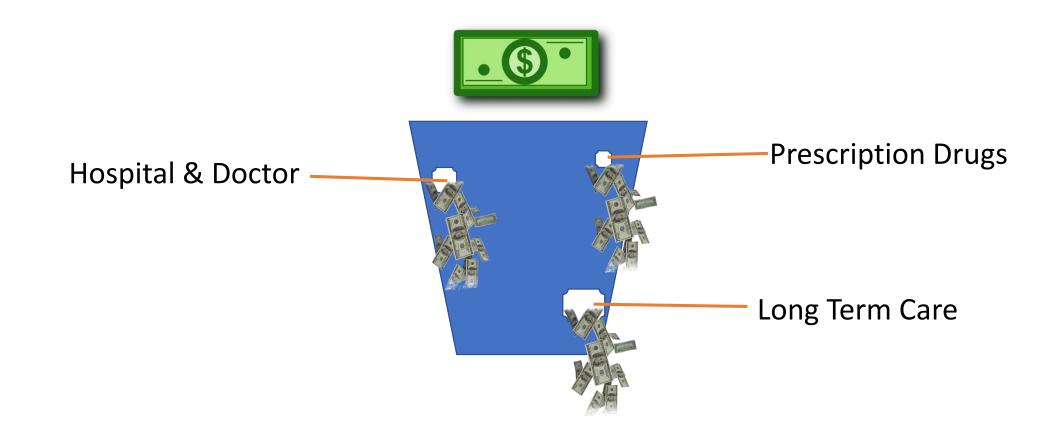
When you retire, your financial resources are sensitive to loss.

Where are the losses most likely to occur relating to healthcare?

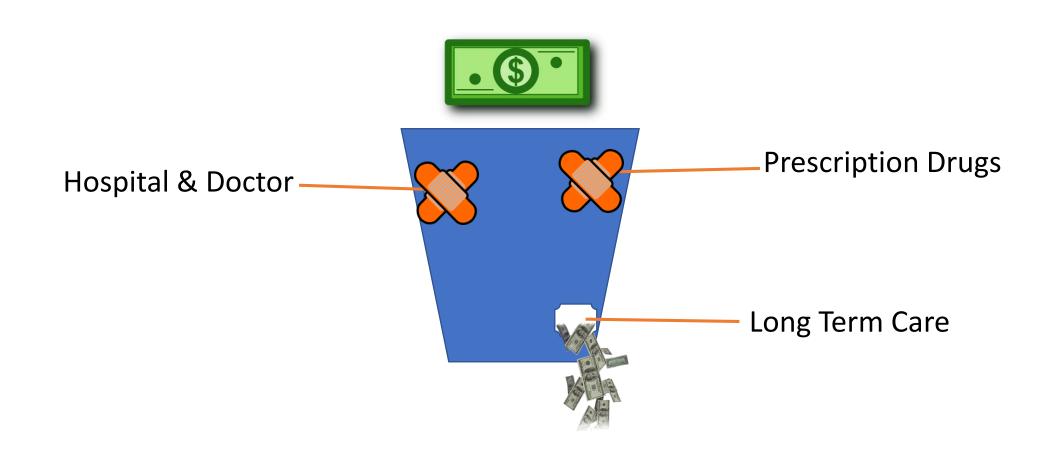


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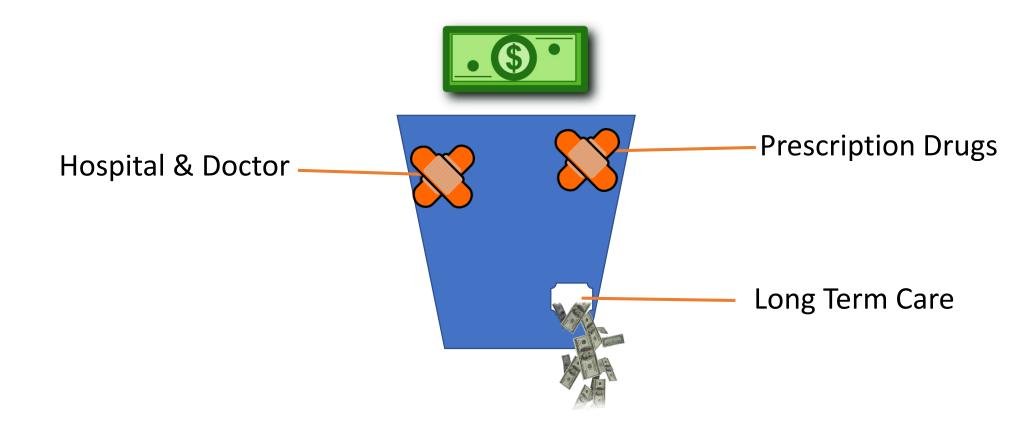


Most retirees solve Traditional Healthcare Risks with Medicare Supplement or Medicare Advantage Plans...



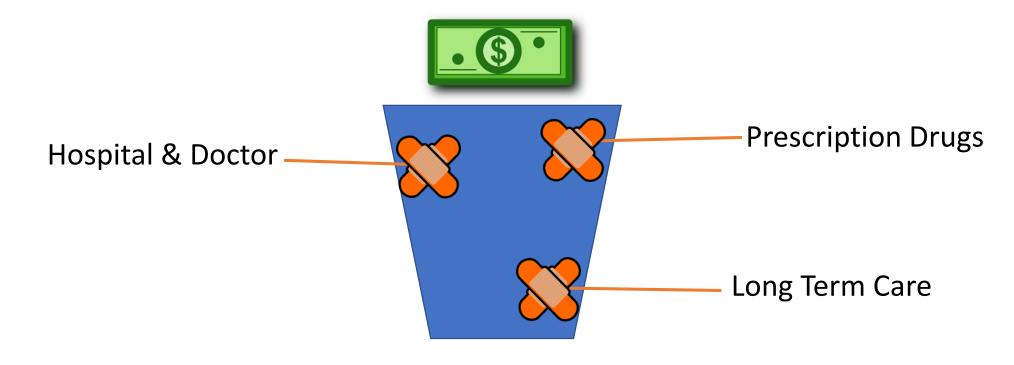
Why Stop There?

Why not enjoy **complete** protection from healthcare related risks?



What do you want your healthcare to do for you?

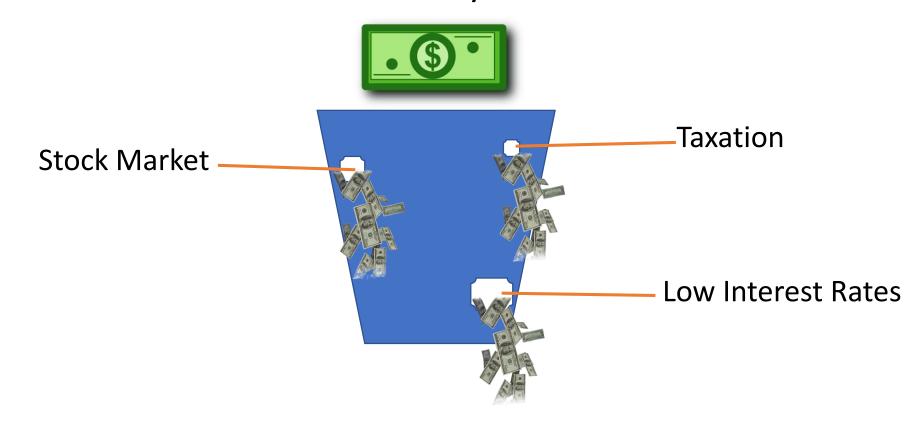
We have ideas





When you retire, your financial resources available to you are sensitive to loss.

Retirement savings are sensitive to loss due to market volatility. Maintaining financial stability is important as you move into your retirement years.



There are ways to eliminate market risk, reduce taxes and enjoy higher returns...SAFELY!

We have ideas

