A simple guide to Medicare



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Medicare Advantage

Original Medicare + Add-ons



Original Medicare

Hospital
Part A



Original Medicare

Medical Part B



Add-on

Prescriptions



Add-on

Supplement Medigap



"All-in-one"
Part C = A + B + D

What it is

Access to emergency and hospital services.

What it is

Access to primary care physicians and outpatient specialists.

What it is

Helps cover the cost of prescription drugs. Plans are run by private insurance companies that follow rules set by Medicare.

What it is

Medicare
Supplement
Insurance covers
your share of costs
in Parts A & B. Plans
are run by
companies that
follow rules set by
Medicare. All plans
with the same
letter have the
same coverage.

What it is

One plan that combines hospital (Part A), medical (Part B), and often prescription insurance (part D). Plans are run by companies that follow rules set by Medicare. You cannot also have a Supplement plan.

Helps cover

Inpatient hospital stays

Care in a skilled nursing facility

Hospice care

Some home health care following a hospital or skilled nursing facility stay

Helps cover

Outpatient care

Many preventive services

Some home health care

Durable medical equipment

Helps cover

Prescription drugs, including recommended shots and vaccines. Covered drugs and payments vary by plan.

Helps cover

Your out-of-pocket expenses for Original Medicare.

Helps cover

Everything you get in Original Medicare (Parts A, B and usually D, but not Supplement). May include benefits not covered by Original Medicare, like dental, vision, and hearing coverage.

This worksheet explains some aspects of how the Medicare program works, but it isn't a legal document. The official Medicare program provisions are found in the relevant laws, regulations, and rulings and on Medicare.gov.

Plan details for 2023



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Part C = A + B + D

Premium

\$0 for most people.*

Premium

See Table 2.

Premium

See Table 2.

Premium

May vary based on your age and/or health profile.

Premium Varies by

Varies by plan.

Deductible

\$1,600 per benefit period.

Deductible

\$226 per year.

Deductible

Varies by plan.

Deductible

Varies by plan.

Deductible

Varies by plan.

Out-of-pocket

See Table 1.

Out-of-pocket

You're responsible for paying for the first \$226 in Medicare-covered medical care, and 20% coinsurance thereafter.

Out-of-pocket

Varies by plan and the specific drugs you want covered.

Out-of-pocket

Varies by plan.
Plans cover
different amounts
of the Part A and B
deductibles and all
of the Medicareapproved out-ofpocket expenses.

Out-of-pocket

Varies by plan.

Network

Any hospital that accepts Medicare.

Network

Any doctor or service provider that accepts Medicare.

Formulary

Varies by plan.

Network

Any doctor or service provider that accepts Medicare.

Network

In most cases, you'll have to use doctors who are in the plan's network.

^{*} Most people don't pay a premium for Part A because they paid Medicare taxes while working. If you are not eligible for premium-free Part A, you will pay up to \$506 per month.

Medicare costs for 2023



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Table 1: Part A Out-of-Pocket

For each Benefit Period 1

Inpatient hospital		Skilled nursing facility (SNF)		
\$1,600 deductible		3 day hospital stay required first		
Days 1-60	\$0/day	Days 1-20	\$0/day	
Days 61-90	\$400/day	Days 21-100	\$200/day	
Days 91+	\$800/day²	Days 101+	You pay all costs	

¹ Benefit Periods begin the day you're admitted as an inpatient in a hospital or Skilled Nurse Facility (SNF). The period ends when you haven't received care in a hospital or SNF for 60 days in a row. If you go to a hospital or SNF after one period ends, you have to pay your deductible again.

² Medicare will pay for up to 60 cumulative days of hospital stays longer than 90 days in your lifetime.

Table 2: Part B and Part D Premiums					
Your yearly income in 2021 was			Your 2023 Part B & D Premiums are		
Individual tax return	Joint tax return	Married & separate tax return	Part B per month per person	Part D* per month per person	
\$97,000 or less	\$194,000 or less	\$97,000 or less	\$164.90	Premium	
\$97,001 to \$123,000	\$194,001 to \$246,000	N/A	\$230.80	Premium + \$12.20	
\$123,001 to \$153,000	\$246,001 to \$306,000	N/A	\$329.70	Premium + \$31.50	
\$153,001 to \$183,000	\$306,001 to \$366,000	N/A	\$428.60	Premium + \$50.70	
\$183,001 to \$499,999	\$366,001 to \$749,999	\$97,001 to \$404,999	\$527.50	Premium + \$70.00	
\$500,000+	\$750,000+	\$403,000+	\$560.50	Premium + \$76.40	

^{*}Your Part D premium varies by plan and may include an amount that varies based on your income, called your IRMAA (Income Related Monthly Adjustment Amounts).

When you need to take action



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Enrolling at 65



Part A (Hospital) If you are already approved for Social Security, you will be automatically enrolled in Part A at 65. If you are not receiving Social Security benefits, you should apply for Part A on the Social Security website during your 7 month initial enrollment period, which begins 3 months before your 65th birthday month and ends 3 months after your birthday month.



Part B (Medical): If you are already approved for Social Security, you will be automatically enrolled in Part B at 65. If you are not receiving Social Security benefits, enroll in Part B on the Social Security website during your initial enrollment period.



Part D (Prescription Drug): Once you are enrolled in Parts A and B, you may enroll in a Part D plan during your initial enrollment period.



Retiring after 65

When your employer coverage ends, you have 8 months to enroll in Part B and 63 days to enroll in a Prescription Drug or Medicare Advantage plan.

If you work for an employer with fewer than 20 employees past age 65, you may be able to save you and your employer money by enrolling in Medicare while continuing to work.



Changing your coverage

Annual Election Period: Between October 15 and December 7 you can join, switch, or drop Prescription Drug or Medicare Advantage plans. Changes become effective Jan 1.

Birthday Rule: If you live in CA, OR, ID, IL, or NV and you're enrolled in a Medicare Supplement Insurance plan, you may change to another plan of equal or lesser value each year in a period following your birthday. Special rules apply if you live in IL.

Open Enrollment Period: Between January 1 and March 31, Medicare Advantage enrollees can either switch Medicare Advantage plans or switch to Original Medicare with a Prescription Plan. Each year, you can only change plans once during this period.