



Medicare Essentials Packet



2024 Medicare Costs & Premiums



Part - A is inpatient hospital insurance per benefit period that includes skilled nursing facility

A benefit period starts on the first day of service as an inpatient and ends when you have not received skilled care or hospital care for 60 days in a row.

Inpatient Hospital Stay	Medicare Covers	You Pay
Deductible	NOTHING	\$1,632 per benefit period
1-60 Days	Medicare-approved confinement costs <u>after</u> patient pays deductible not co-insurance met	\$0 per day of each benefit period
61-90 Days	Medicare-approved expenses <u>after</u> patient pays per day co-insurance met.	\$408 per day of each benefit period
60 lifetime reserve days	Medicare-approved expenses <u>after</u> patient pays per day co-insurance met.	\$816 per day after day 90 of each benefit period
91-150 Days	Medicare-approved expenses <u>after</u> patient pays per day co-insurance met.	\$800 A Day Coinsurance as much as \$48,960
151 DAYS OR MORE	NOTHING	YOU PAY ALL COSTS
Skilled Nursing Facility Stay Eligibility requires three days as an inpatient hospital stay and within 30 days of discharge to be entered into a Medicare approved skilled nursing facility to receive skilled nursing care.	Medicare-approved expenses for first 20 days, then only expenses after patient pays per-day co-insurance for days 21-100.	\$0 per day of each benefit period Days 21-100 \$204 per day of each benefit period
Hospice Care	Medicare-approved expenses,	Medicare
Meet Medicare's requirements, including proof of terminal illness.	exceptions limited to co-payments for outpatient drugs and inpatient respite care.	Co-Payment
Blood	100% of Medicare-approved amount after patient pays first 3 pints of blood.	First 3 Pints



2024 MEDICARE

PART B

(Medical)

Part - B is Outpatient Medical Insurance that covers physician, test and supplies - per calendar year.

Outpatient Expenses	Medicare Covers	You Pay
Calendar Year Deductible	Incurred Expenses after the required Medicare deductible.	\$240 per calendar year
Medical Expenses Inpatient & Outpatient medical/surgical services for physicians; physical & speech therapy & outpatient diagnostic tests.	80% of approved amount.	Generally 20% after \$240 deductible is met
Excess Charges Up to 15% above for physicians that don't accept Medicare Assignment.	0% Above approved amount.	ALL COSTS
Clinical Lab Services	Generally 100% of approved amount	Nothing for services
Blood	80% of approved amount <u>after</u> first 3 pints of blood.	First 3 pints plus 20% of approved amount for additional pints.
Home Healthcare	100% of approved amount; 80% of approved amount for durable medical equipment.	Nothing for services; 20% of approved amount for durable medical equipment
Outpatient Hospital Treatment	Medicare payment to hospital, based on outpatient procedure payment rates.	Coinsurance based on outpatient payment rates





MEDICARE SUPPLEMENT INSURANCE (MEDIGAP) PLANS 2024

BENEFITS	A	В	C	D	F	HDF	G	HDG	K	L	M	N
Medicare Part A Coinsurance & hospital cost (up to an additional 365 days after Medicare benefits are used)	/	~	✓	•	•	•	•	~	/	•	~	/
Medicare Part B coinsurance or copayment	~	~	~	~	~	~	~	~	50%	75 %	~	~
Blood (first 3 pints)	/	~	~	~	~	1	1	/	50%	75 %	~	~
Part A hospice care coinsurance or copayment	~	~	~	V	~	~	~	~	50%	75 %	~	~
Skilled nursing facility care coinsurance			~	~	~	~	~	~	50 %	75 %	~	/
Part A Deductible: \$1,632		~	~	~	~	~	~	1	50 %	75 %	50 %	~
Part B Deductible: \$240			1		~	~						
Part B excess charges					~	~	~	~				
Foreign travel emergency (up to plan limits)			80%	80%	80%	80%	80%	80%			80%	80%

Out-of-pocket limit \$7,060 \$3,530

FOOTNOTES:

¹ HDF and HDG are deductible versions of the F and G, respectively. If you choose one of these options, this means that you must pay for Medicare-covered costs up to the deductible amount of \$2,800 (2024) before your Medigap plan pays anything.

² Plan N pays 100% of the Part B coinsurance, exept for a copayment of up to 20\$ for some office visits and up to \$50 copayment for emergency room visits that don't result in an inpatient admission.

³ Plan F, High Deductible Plan F (HDF) & Plan C are ONLY available to those who were considered Medicare-eligible prior to 2020.



Medicare Supplement vs Medicare Advantage

Medigap vs Medicare Advantage - Chart gives a quick side-by-side breakdown of the differences:

	Medigap Plan	Medicare Advantage
Doctors & Hospitals	You choose your doctor and hospital	Required to use approved doctors and hospitals
Specialists	No referrals needed	Must first see your PCP
Approvals for procedures	None	Yes
Networks	No network resrictions. Nationwide coverage	HMO - Cannot leave network. PPO - Can go out of network at a much higher cost
When you can change plans	Any time in the year	Specific times in the year
Out-of-Pocket Costs	Little to none	Plan dependent. Up to \$10,000 assuming the procedures are approved
Prescription Drugs	Not included, but much wider selection of options which saves you money	Included, but the carrier decides your plan which usually costs more in copay
Cancer coverage	Usually 100% coverage depending on the medigap plan	You pay 20%

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MEDICARE & SOCIAL SECURITY CHEAT SHEET

Medicare Cost 2024						
	Part A	Part B				
Monthly Premium	\$0	\$174.70				
Deductible	\$1,632 per benefit period	\$240 per year				
	\$0 for the first 60 days of benefit period	Medicare pays 80%, you pay 20%				
Cost	\$408/day for days 61-90					
Sharing	\$816 per "lifetime reserve day" after 90 days (max of 60 days over your lifetime)	No limit on total outof- pocket costs!				





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Medicare IRMAA Chart 2024						
Individual Tax Return 2022	Joint Tax Return 2022	Part B Premium 2024	Part D IRMAA 2024			
\$103,000 or less	\$206,000 or less	\$174.70				
\$103,001 to \$129,000	\$206,001 to \$258,000	\$244.60 (174.70 + 69.90)	+ \$12.90			
\$129,001 to \$161,000	\$258,001 to \$322,000	\$349.40 (174.70 + 174.70)	+ \$33.30			
\$161,001 to \$193,000	\$322,001 to \$386,000	\$454.20 (174.70 + 279.50)	+ \$53.80			
\$193,001 to \$499,999	\$386,001 to \$749,999	\$559.00 (174.70 + 384.30)	+ \$74.20			
\$500,000 +	\$750,000 +	\$594.00 (174.70 + 419.30)	+ \$81.00			

Medicare Enrollment Periods

Open Enrollment Period

All Year

Annual Election Period

January 1 - March 31

During OEP, you can make one change to your Medicare Advantage plan

You can enroll in a Medicare Supplement (Medigap) plan at any point in the year *Must pass medical underwriting

October 15 - December 7

During AEP, you can enroll in Advantage & Part D Drug plans for 2025

Initial Enrollment Period

Your Medicare will typically start on the 1st day of the month you turn 65th (unless you delay it due to having other coverage). This is your time to get a Supplement without health questions!

Special Election Periods

Certain events allow you to make changes to your coverage outside of the enrollment periods listed. Common SEPs include: moving, losing coverage, and getting / losing Medicaid benefits.

Social Security Full Retirement Age by Birth Year					
SURVIVO	R BENEFITS	ALL OTHER BENEFITS			
1945 - 1956	66	1943 - 1954	66		
1957	66 and 2 months	1955	66 and 2 months		
1958	66 and 4 months	1956	66 and 4 months		
1959	66 and 6 months	1957	66 and 6 months		
1960	66 and 8 months	1958	66 and 8 months		
1961	66 and 10 months	1959	66 and 10 months		
1962 and Later	67	1960 and Later	67		

Spousal Benefit Formula

(1/2 of higher earner FRA benefit)
 — (lower earner FRA benefit)
 = spousal payment (then adjusted for filing age)

Age-Based Reductions & Increases							
Filing Age	Individual Benefit % of Benefit	Spousal Benefit % of Benefit**	Survivor Benefit % of Benefit**				
60	N/A	N/A	71.50%				
61	N/A	N/A	75.58%				
62	70%	65%	79.65%				
63	75%	70%	83.72%				
64	80%	75%	87.79%				
65	86.66%	83.33%	91.86%				
66	93.33%	91.66%	95.93%				
67	100%	100%	100%				
68	108%	100%	100%				
69	116%	100%	100%				
70	124%	100%	100%				

Note: Assuming a Full Retirement Age of 67

Social Security Earnings Limit					
Age Earnings Limit Benefit Witheld					
62 - January 1 of the year reaching Full Retirement Age	\$22,320	\$1 for every \$2 over limit			
Year reaching Full Retirement Age	\$59,520	\$1 for every \$3 over limit			
Full Retirement Age	No Limit	N/A			

What Counts as "Earnings" for the Limit?

What Does Count

✓ Wages

✓ Net Earnings from Self-Employment

What Does Not Count

- ✓ Pension Payments
 ✓ Dividends
- ✓ Annuity Payments ✓ Interest Income
- IRA Distributions Capital Gains

Monthly Reductions / Increases						
Individual Benefits						
(-) 5/9 of 1%	36 month period before full retirement age					
(-) 5/12 of 1%	More than 36 months before full retirement age					
(+) 2/3 of 1%	Full Retirement Age to Age 70					
Spousal Benefits						
-) 25/36 of 1%	36 month period before full retirement age					
(-) 5/12 of 1%	More than 36 months before full retirement age					
No increase beyond full retirement age						
Survivor Benefits						

28.5% is maximum reduction regardless of full retirement age. To determine the monthly amount of reduction based on various full retirement ages, divide the number of months between age 60 and full retirement age by 28.5

Tax on Social Security							
Step 1	Calculate Combined Income	Step 2	Step 2 Apply Combined Income to Thresholds				
	Adjusted gross income		Single Return	Joint Return	% of Social Security subject to Tax		
	+ Tax Exempt Income						
	+ Exclude Foreign Income		\$0 - \$24,999	\$0 - \$31,999	\$0		
	+ 50% of SS Benefit		\$25,000 - \$34,000 Over \$34.000	\$32,000 - \$44,000 Over \$44,000	Up to 50% Up to 85%		
	= Combined Income		Over 40 1,000	Over \$11,000	Op to 0370		

Maximum % of Your full retirenment age benefit an eligible family member can receive if you:

	DIE	Retire (Or) Become Disabled	Age-based Considerations
Spousal Benefit	100% (Adjusted for survivor's filling age)	50% (Adjusted for survivor's filling age)	If you retire or become disabled, your spouse can collect at age 62+ or any age if caring for your child who is under 16 or disabled before the age of 22 If you die, your spouse of any age who is caring for your child who is under 16 or child of any age if child was disabled before 22
Child In Care Benefit	75%	50%	Payable to spouse of any age who is caring for your child who is under 16 or child of any age if child was disabled before 22
Benefit To Children	75%	50%	Payable to child who is under 18, or 19 if still in high school of any age if disabled before 22

Length Of Marriage Rules

9 Months - Survivor Benefits

1 Year - Spousal Benefits

10 Years - Divorced Spouse

Social Security Disability Threshholds

Substantial Gainful Activity

Substantial Gainful Activity				
Non-Blind	\$1,550 per month			
Blind	\$2,590 per month			
Trial Work Period	\$1,110 per month			

Average **Social Security Benefit**

\$1,907	All Retirees
\$3,033	Couple, both receiving benefits
\$1,537	Disability

2024 Family Maximum **Benefit Formula**

- (a) 150 percent of the first \$1,500 of the worker's PIA, plus
- (b) 272 percent of the worker's PIA over \$1,500 through \$2,166, plus
- c) 134 percent of the worker's PIA over \$2,166 through \$2,825, plus
- (d) 175 percent of the worker's PIA over \$2,825

For a family of a workerwhoattains age 62 or dies in 2024

Quarter of Coverage (1 Credit)

\$1,730

Maximum Taxable Wages \$168,600

Social Security Administration

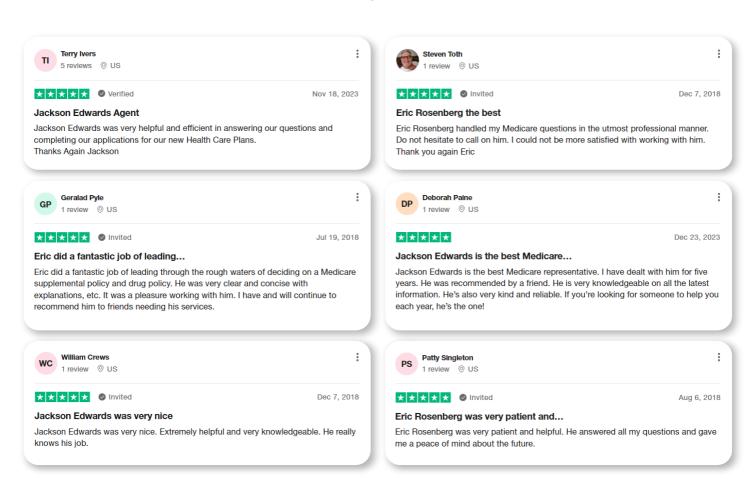
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"We want you to work with us. Here's Why..."

The biggest Medicare obstacle is finding the right agent to work with, and it can be argued that it's the most important decision you will make when understanding your choices. Most seniors are primarily concerned with premium and carrier. We agree they are essential, but choosing an agent you can turn to over the years and receive objective feedback is vitally important as well. We feel it's even more important as switching carriers due to high rate increases and other factors is all too common. As you will come to learn if you haven't already.

Why should you choose us?

- We are independent and that means we can provide you unbiased advice on all Medicare carriers.
- We are contracted with 20+ carriers which allows us to find the most comprehensive plans at the lowest cost.
- We have 100's of Five-Star reviews from our clients on Google, Facebook, and Trust Pilot (Go ahead and search for yourself!)
- It is completely free to work with us.
- We are licensed to serve your State (that's right we are in 49 states)



Most importantly, we provide ongoing customer service, including a review call every year which ensures you're always with the right Medicare supplement and Drug Plan carrier. We want the opportunity to earn your trust and alleviate any confusion you might have in the process. Trust is not assumed, it is earned. Please call us to discuss your options, and we can provide you with a no-obligation quote on rates in your area today, or schedule a time to discuss your needs in the future.



Phone: 1-888-559-0103