

7 TIPS

for Choosing a Medicare Health Plan





How to find coverage that's right for you

In recent years, the Medicare marketplace has exploded with choices. Most people now have a wide selection of private Medicare Advantage and Part D drug plans to choose from—in addition to Original Medicare and Medicare supplement (Medigap) plans.

How do you decide which plan best meets your health care needs, preferences, and budget? Here are 7 things to consider: what's covered, ease of access, prescription drugs, cost, care when you travel, quality rating, and technology.

1

Decide how much health care coverage you want

If you're only looking for basic, no-frills coverage, Original Medicare takes care of that. It's the combination of Medicare Part A (hospital insurance) and Part B (medical insurance). To get help paying for prescription medications, you'll also need to enroll in a stand-alone Part D (prescription drug) plan.

Medicare Advantage plans, also known as Medicare Part C, combine Parts A and B, and often Part D (also known as Medicare Advantage Prescription drug plans). These plans may include vision, hearing, and dental benefits, and health and wellness programs that aren't offered by Original Medicare. Medicare Advantage plans are an alternative to Original Medicare, not a supplement to it.

A Medigap (supplemental) plan is another way to help pay for out-of-pocket hospital and medical expenses that aren't covered by Original Medicare.

Even if you don't use many health care services or prescription medications at the moment, keep in mind that even the healthiest person can experience an unexpected illness or accident, and costs can add up fast. Prepare for the unknown as you choose a plan, just in case.

2

Check how long it takes to see a doctor or specialist

It's important to consider how long it typically takes to see a primary care provider or a specialist. Can you call and get an appointment today? While your routine appointments will be scheduled in advance, there may be times when a non-life-threatening injury or illness requires you to get care right away. Some health plans make it quick and easy to see a primary care provider or a specialist by offering same-day or next-day appointments.

3

Take a look at prescription drug coverage

Each health plan that offers prescription drug coverage will include a drug formulary, which is the list of medications the plan covers. Are the medications you're currently taking listed on the formulary?

How much will you pay for brand-name drugs, and how much for generic drugs? Does the plan require that you get prior authorization, or meet other requirements, before your medications are covered?

And are network pharmacies conveniently located for you?

4

Review plan costs

Look carefully at the costs of each plan, especially deductibles, copays, and coinsurance. Then look a little further. How much will you pay for routine visits, surgery, inpatient hospital care, and other services you may need? Is there a yearly limit on what you pay out-of-pocket?

What makes the most sense given your health and financial situation?

5

Consider what's covered when you travel

With Original Medicare, you can travel anywhere in the United States and its territories and get the medical care you need from any doctor or hospital that accepts Medicare. Medicare Advantage plans may not cover your care in the United States outside of the plan's service area, with the exception of emergency and urgently needed care.

Outside of the United States, Original Medicare covers services in a few, limited instances. Some supplemental insurance, such as Medigap plans, provides coverage for foreign travel. Many Medicare Advantage plans provide broader coverage, such as emergency and urgent care worldwide.

Check each plan carefully to see what rules and costs apply.

6

Understand the plan's quality rating

The Centers for Medicare & Medicaid Services (CMS) evaluates the quality of Medicare Advantage plans every year, and their ratings give you an apples-to-apples way to compare plans.

You'll find the most up-to-date Star ratings on the [Medicare Plan Finder tool](#). Or you can call 1-800-MEDICARE (toll free), 24 hours a day, 7 days a week, to get the ratings.

For more details about what the different types of Medicare plans do and don't include, check out our [Understanding Medicare page](#).



Look for technology that makes care more convenient

Life is busy, and you may not always want to make a separate trip to see your doctor and get care. Many plans are now offering technology to give you more ways to get the care you need when and where you want.

Some of the services and digital tools available include: mobile apps, dedicated advice lines, direct email communication with doctors, and even on-demand video visits with doctors and specialists.



Have questions?

To learn more about our Medicare health plans, call **1-855-237-1269** (TTY **711**), 8 a.m. to 8 p.m., 7 days a week, or visit us online at kp.org/medicare.



Did you know?

If you have recently moved, recently turned 65 or have a certain qualifying condition, you may be eligible to enroll today. Call **1-855-237-1269** (TTY **711**) to learn more.



Disclaimers

In California, Hawaii, Oregon, Washington, Colorado, Georgia, and the District of Columbia, Kaiser Permanente is an HMO plan with a Medicare contract. In Maryland, Kaiser Permanente is an HMO plan and a Cost plan with a Medicare contract. In Virginia, Kaiser Permanente is a Cost plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal.

You must reside in the Kaiser Permanente Medicare health plan service area in which you enroll.