

The NEW Medicare Plan Open Enrollment

Harford County Department of Community Services
Office on Aging

First things first...

Medicare Open Enrollment 2020 is...

- October 15th through December 7, 2019
- Any changes during this time will become effective January 1, 2020
- Opportunity to change Prescription or Medicare Advantage Plans
- Married couples and/or dependents MUST do their own selections.
- Medicare's Plan Finder web address is:

www.medicare.gov

This is the only site that has Plan Finder. Make sure you are actually in the Medicare site!

Helpful information to have *before* logging in:

- Beneficiary's Medicare card (red, white and blue card)
- Full list of medications, including dosage, quantity and frequency
- Beneficiary's pharmacy of choice

*If you do not currently take any prescription medications, you will still want to complete Plan Finder to ensure that you will have coverage should you find that you need prescriptions in the next coverage year. Failing to enroll in a Part D plan can result in lifelong premium penalties.

The *New* Medicare Plan Finder-Account Log In

Medicare.gov Log In Español

Find a 2020 Medicare plan

You can shop here for **drug plans (Part D)** and **Medicare Advantage Plans**.
See your 2020 plan options now by logging in or creating an account.

[Log in](#)

[Continue without logging in](#)

Qualify for a Special Enrollment Period?
Log in or create account to change your 2019 coverage.

[Log in](#)

[Continue without logging in](#)

New to Medicare?
Learn about your options & enroll in a plan.

[Continue](#)

Log in to your account

USERNAME

PASSWORD

Log In

[Trouble signing in?](#)

By accessing this system, you agree to our Terms and Conditions. [Read more +](#)

Need an account?

Create an account for a more personalized experience.



Create An Account

Create an account

All fields are required.

MEDICARE NUMBER

[Where can I find my Medicare Number?](#)

LAST NAME

SUFFIX

Select one ▾

EMAIL ADDRESS (IF YOU HAVE ONE)

CONFIRM EMAIL ADDRESS

I don't have an email address

DATE OF BIRTH

For example: 07 05 1970

Month Day Year



DATE OF BIRTH

For example: 07 05 1970

Month Day Year

01 01 2018

ZIP CODE OR CITY

EFFECTIVE DATE FOR HOSPITAL (PART A)

[Where can I find my Part A effective date?](#)

Month ▾ Year ▾

[Don't have Part A?](#)

Continue Cancel



Create an account

All fields are required unless marked as optional.

USERNAME

SECRET QUESTION

SECRET ANSWER

PASSWORD

CONFIRM PASSWORD

Password Creation Guidelines

- Must be 8 to 16 characters long
- Must contain at least one letter
- Must contain at least one number
- Must also contain one or more of the following special characters: @ ! \$ % ^ * ()
- Must be different from the previous six (6) passwords
- Cannot contain your username
- Cannot contain your Medicare Number or SSN

Log in to your account

You successfully created an account.

You can start using your account now. You'll also get a confirmation letter in the mail within 10-14 days to the address on file with Social Security. If you're not sure which address is on file, contact [Social Security](#).

USERNAME

PASSWORD

Log In

[Trouble signing in?](#)

By accessing this system, you agree to our Terms and Conditions. [Read more](#)

Need an account?

Create an account for a more personalized experience.

Create An Account

Answer a few quick questions

Jane Doe

Current coverage: Kaiser Permanente Medicare Advantage Value (HMO)

Plan ID: H2172-006-0

Effective: 01/07/18

Part A coverage starts: 02/01/17

Part B coverage starts: 02/01/17

Current subsidy: This information is visible only if you create an account.



What type of 2020 coverage are you looking for?

- Medicare Advantage Plan
- Drug plan (Part D)
- Drug plan (Part D) + Medigap policy
- Medigap policy
- I'm not sure. Learn more about Medicare coverage options.

Jane Doe

Current coverage: Kaiser Permanente Medicare Advantage Value (HMO)

Plan ID: H2172-006-0

Effective: 01/07/18

Part A coverage starts: 02/01/17

Part B coverage starts: 02/01/17

Current subsidy: None

What type of 2020 coverage are you looking for?

Medicare Advantage Plan

Bundles all Medicare health benefits (with or without drug coverage) plus extra services - like hearing or dental.



Drug plan (Part D)

Drug plan (Part D) + Medigap policy

Medigap policy

I'm not sure. Learn more about Medicare plan options.

ENTER YOUR ZIP CODE

Your date of birth: 04/05/1954

Great! You're still within your Initial Enrollment Period.

Add your search preferences

Do you want to see your drug costs when you compare plans?

Yes

Great!

To see drug costs, get ready to enter the name, dosage, quantity, and frequency for each drug you take regularly.

No

How do you normally fill your prescriptions?

Retail pharmacy

Mail order pharmacy

Both

You'll need to tell us the pharmacies you use most to get accurate drug costs.

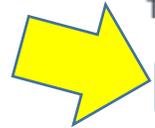


Continue

Add your prescription drugs

Select your drugs from your recent prescriptions

This information is pulled from your Medicare prescription drug claims from the last year.



Kapvay 0.1mg

lisinopril (Zestoretic) 20mg



Microzide 25mg

Norvasc 10mg

Simvastatin 20mg

Synthroid 50mcg

Zinthromax 250mg

None of the above

Note: You do not need to include one time antibiotics, over the counter medications, vitamins or supplements onto your drug list. Your drug list should only include those prescription drugs that you take regularly.

Continue

i You're previewing 2020 plans.

Starting October 15, you can enroll in 2020 plans. [Show me 2019 plans.](#)

Add your prescription drugs

NOTE: If you choose not to create an account, you will need to enter your medication list each time you access Plan Finder.

Begin typing to find & select your drug.

[Clear search](#)

[Browse drugs A-Z](#)

[Can't find your drug?](#)

You have **5 drugs(s)** in your drug list. [See or edit drug list.](#)

Add Another Drug

Done

Tell us about this drug

Atorvastatin

Dosage

Quantity

Frequency

Add to My Drug List

Confirm your drug list

| | | |
|---|-----------------------|---------------------------------|
| Amlodipine 5mg tablet generic | Quantity 30 | Frequency Every month |
| Remove drug | | Edit drug |

| | | |
|--|-----------------------|---------------------------------|
| Atorvastatin 40mg tablet generic | Quantity 30 | Frequency Every month |
| Remove drug | | Edit drug |

| | | |
|--|-----------------------|---------------------------------|
| Levothyroxine sodium 112mcg tablet generic | Quantity 90 | Frequency Every month |
| Remove drug | | Edit drug |

| | | |
|--|-----------------------|------------------------------------|
| Lisinopril 40mg tablet generic | Quantity 90 | Frequency Every 3 months |
| Remove drug | | Edit drug |

| | | |
|--|-----------------------|------------------------------------|
| Spironolactone 25mg tablet generic | Quantity 90 | Frequency Every 3 months |
| Remove drug | | Edit drug |



Add Another Drug

Done Adding Drugs



Add your prescription drugs

Begin typing to find a

[Browse drugs A-Z](#)

[Continue to plans](#)

A generic is available

Lipitor has a lower cost generic version called **Atorvastatin**.

Would you like to add **Atorvastatin** to your list instead?

[Add Generic](#)

[Add brand instead](#)

Select pharmacies near you

Showing 10 pharmacies near 02116 Suffolk County, Boston MA

[Change location](#)

1 SpotRX Pharmacy

2196 E Camelback Rd #200
Boston, MA 02116

1-617-375-9600

2 Fry's Pharmacy

4724 N 20th St
Boston, MA 02116

1-617-375-7969

3 CVS Pharmacy

1610 E Camelback Rd
Boston, MA 02116

1-617-236-4007

4 CVS Pharmacy

1625 E Camelback Rd
Boston, MA 02116

1-617-437-7916

5 Safeway Pharmacy

3132 E Camelback Rd
Boston, MA 02116

1-617-542-2953

6 Target

4111 N 24th St
Boston, MA 02116

1-617-236-8538

7 Phoenix Pharmacy

1701 E Thomas Rd
Boston, MA 02116

1-617-927-6163

8 CVS Pharmacy

2406 E Thomas Rd
Boston, MA 02116

1-617-859-5300



Pharmacies selected

Mail order pharmacy

Select up to 2 more pharmacies

Done

Prescription Drug Plan (PDP) Search and Compare

i You're using the new Medicare Plan Finder.

The new version helps you choose your Medicare coverage and pick a plan. [Take me back to the old Plan Finder.](#)

Medicare.gov | Find a Plan

Log in Español

There may be Medicare Advantage Plans available with lower drug costs. [Tell me more.](#)

[View 6 available Medicare Advantage Plans](#)

25 Prescription Drug Plans available

Filter Plans



Harford, MD [Change location](#)

No filters selected

Showing 10 of 25 Prescription Drug Plans

Sort plans by Lowest monthly premium

\$14.00

Drug plan (Part D) monthly premium

Doesn't include:
\$135.50 Standard Part B premium

Plan Details

Enroll

WellCare

WellCare Value Script (PDP)

Plan ID: [S4802-140-0](#)

\$415.00

Drug deductible

The amount you must pay each year before your plan starts to pay for covered drugs.

PHARMACIES & PRESCRIPTION DRUGS

1 of 1

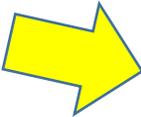
Retail pharmacies in-network

\$39.48

Retail pharmacy
Estimated yearly drug costs

Based on the rest of the year. This doesn't include your monthly plan premium.

[View covered drugs in plan details](#)



Star rating: ★★☆☆☆

Add to compare

\$36.44

Mail order pharmacy
Estimated yearly drug costs

Based on the rest of the year. This doesn't include your monthly plan premium.

[View Drugs & Pharmacies](#)

Comparing 3 Prescription Drug plans

[Back to results](#)

WellCare Value Script (PDP) ✕
 Star rating: ★★☆☆☆
\$14.00
 Monthly premium
 \$415.00
 Yearly drug deductible
 Plan Details
 Enroll

EnvisionRxPlus (PDP) ✕
 Star rating: ★★☆☆☆
\$16.50
 Monthly premium
 \$365.00
 Yearly drug deductible
 Plan Details
 Enroll

Aetna Medicare Rx Select (PDP) ✕
 Star rating: ★★☆☆☆
\$17.20
 Monthly premium
 \$390.00
 Yearly drug deductible
 Plan Details
 Enroll

Overview

| | | | |
|------------|---|---|---|
| Premium | Total \$14.00 | Total \$16.50 | Total \$17.20 |
| Deductible | Yearly drug deductible \$415.00 | Yearly drug deductible \$365.00 | Yearly drug deductible \$390.00 |

Drug coverage & costs

| | | | |
|-----------------------------|---|---|---|
| Drugs covered/Not covered | 5 of 5 Prescription drugs covered Restrictions may apply | 5 of 5 Prescription drugs covered Restrictions may apply | 5 of 5 Prescription drugs covered Restrictions may apply |
| Estimated yearly drug costs | WALGREENS #7357 ✓ In-network \$39.48 | WALGREENS #7357 ✓ In-network \$123.90 | WALGREENS #7357 ✗ Out-of-network \$1,321.38 |

| | | | |
|------------|---|---|---|
| Premium | Total \$14.00 | Total \$16.50 | Total \$17.20 |
| Deductible | Yearly drug deductible \$415.00 | Yearly drug deductible \$365.00 | Yearly drug deductible \$390.00 |

Drug coverage & costs

| | | | |
|-----------------------------|--|--|---|
| Drugs covered/Not covered | 5 of 5 Prescription drugs covered Restrictions may apply. | 5 of 5 Prescription drugs covered Restrictions may apply. | 5 of 5 Prescription drugs covered Restrictions may apply. |
| Estimated yearly drug costs | WALGREENS #7357 ✓ In-network \$39.48 Mail order pharmacy ✓ In-network \$36.44 | WALGREENS #7357 ✓ In-network \$123.90 Mail order pharmacy ✓ In-network \$189.37 | WALGREENS #7357 ✗ Out-of-network \$1,321.38 Mail order pharmacy ✓ In-network \$20.56 |

WellCare Value Script (PDP) ✕

Plan Details

Enroll

EnvisionRxPlus (PDP) ✕

Plan Details

Enroll

Aetna Medicare Rx Select (PDP) ✕

Plan Details

Enroll

Medicare Advantage (MA) Search and Compare

Jane Doe

Current coverage: Kaiser Permanente Medicare Advantage Value (HMO)
Plan ID: H2172-006-0
Effective: 01/07/18
Part A coverage starts: 02/01/17
Part B coverage starts: 02/01/17
Current subsidy: None

What type of 2020 coverage are you looking for?



Medicare Advantage Plan

Bundles all Medicare health benefits (with or without drug coverage) plus extra services - like hearing or dental.

Drug plan (Part D)

Drug plan (Part D) + Medigap policy

Medigap policy

I'm not sure. [Learn more about Medicare plan options.](#)

ENTER YOUR ZIP CODE

02116 Suffolk County, Boston MA

Your date of birth: 04/05/1954

Great! You're still within your Initial Enrollment Period.

\$59.00

Medicare Advantage with drug coverage monthly premium

Doesn't include:

\$135.50 Standard Part B premium

[Plan Details](#)

Open Enrollment starts
October 15

Cigna

Cigna-HealthSpring Preferred (HMO)

Plan ID: [H2108-022-0](#)

\$0

Health plan deductible

The amount you must pay each year before your plan starts to pay for covered services.

COPAYS/COINSURANCE

Primary doctor: \$5 per visit

Specialist: \$50 per visit

PLAN BENEFITS

✗ Vision ✗ Dental ✓ Hearing ✗ Transportation ✓ Fitness benefits [See more benefits](#) ▼

Star rating: Coming Soon

[Add to compare](#)

\$280.00

Drug deductible

The amount you must pay each year before your plan starts to pay for covered drugs.

PHARMACIES & PRESCRIPTION DRUGS

[View covered drugs in plan details](#)

\$6,700 In-network
Out-of-pocket max

Once you spend this amount for covered services in a year, your plan pays 100% for your care.

\$106.56

Estimated yearly drug costs

Based on the remainder of the year. This doesn't include your monthly plan premium.

\$30.00

**Medicare Advantage
(without drug coverage)
monthly premium**

Doesn't include:

\$135.50 Standard Part B premium

[Plan Details](#)

Open Enrollment starts
October 15

Kaiser Permanente

Kaiser Permanente Medicare Advantage w/o Part D (HMO)

Plan ID: [H2172-005-0](#)

Star rating: Coming Soon

Add to compare

\$0

Health plan deductible

The amount you must pay each year before your plan starts to pay for covered services.

\$6,700 In-network Out-of-pocket max

Once you spend this amount for covered services in a year, your plan pays 100% for your care.

COPAYS/COINSURANCE

Primary doctor: \$10 per visit

Specialist: \$35 per visit

PHARMACIES & PRESCRIPTION DRUGS

This plan doesn't cover prescription drugs, so you'll pay for the drug's full cost under this plan. Other Medicare Advantage Plans offer drug coverage.

\$5,691.06

Estimated yearly drug costs

Based on the remainder of the year. This doesn't include your monthly plan premium.

PLAN BENEFITS

✓ Vision ✓ Dental ✓ Hearing ✓ Transportation ✓ Fitness benefits [See more benefits](#) ▼

\$28.00

Medicare Advantage with drug coverage monthly premium

Doesn't include:
\$135.50 Standard Part B premium

[Plan Details](#)

Open Enrollment starts
October 15

Kaiser Permanente

Kaiser Permanente Medicare Advantage Standard MD (HMO)

Plan ID: [H2172-004-0](#)

Star rating: Coming Soon

✓ Added to compare

\$0
Health plan deductible

The amount you must pay each year before your plan starts to pay for covered services.

\$0.00
Drug deductible

The amount you must pay each year before your plan starts to pay for covered drugs.

\$6,700 In-network
Out-of-pocket max

Once you spend this amount for covered services in a year, your plan pays 100% for your care.

COPAYS/COINSURANCE

Primary doctor: \$10 per visit
Specialist: \$40 per visit

PHARMACIES & PRESCRIPTION DRUGS

[View covered drugs in plan details](#)

\$582.00
Estimated yearly drug costs

Based on the remainder of the year. This doesn't include your monthly plan premium.

PLAN BENEFITS

✓ Vision ✓ Dental ✓ Hearing ✓ Transportation ✓ Fitness benefits [See more benefits](#) ▼

Plans to compare (1)

Kaiser Permanente Medicare Advantage Standard MD (HMO) ✕

Select 2 more plan(s)

Compare



Comparing 3 Medicare Advantage plans

[Back to results](#)

Cigna-HealthSpring Preferred (HMO) ✕

Star rating: Coming Soon

\$59.00
Medicare Advantage
and drug monthly
premium

\$0 Health plan deductible
\$280.00 Drug plan deductible
\$5,190.00 Out-of-pocket max

Plan
Details

Open Enrollment starts October
15

Kaiser Permanente Medicare Advantage w/o Part D (HMO) ✕

Star rating: Coming Soon

\$30.00
Medicare Advantage
and drug monthly
premium

\$0 Health plan deductible
\$0.00 Drug plan deductible
\$6,594.00 Out-of-pocket max

Plan
Details

Open Enrollment starts October
15

Kaiser Permanente Medicare Advantage Standard MD (HMO) ✕

Star rating: Coming Soon

\$28.00
Medicare Advantage
and drug monthly
premium

\$0 Health plan deductible
\$0.00 Drug plan deductible
\$3,894.00 Out-of-pocket max

Plan
Details

Open Enrollment starts October
15

| | Cigna HealthSpring Preferred (HMO) | Kaiser Permanente Medicare Advantage w/o Part D (HMO) | Kaiser Permanente Medicare Advantage Standard(HMO) |
|--------------------------|--|--|--|
| Premium | Health premium \$46.80 Drug premium \$12.20 Part B premium \$135.50 | Health premium \$30.00 Drug premium \$0.00 Part B premium \$135.50 | Health premium \$0.00 Drug premium \$28.00 Part B premium \$135.50 |
| Deductible | Health plan deductible \$0 Drug plan deductible \$280.00 | Health plan deductible \$0 Drug plan deductible \$0.00 | Health plan deductible \$0 Drug plan deductible \$0.00 |
| Out-of-pocket max | \$5,190.00 | \$6,594.00 | \$3,894.00 |
| Plan features | <ul style="list-style-type: none"> ✗ Vision ✗ Dental ✓ Hearing ✓ Transportation ✓ Fitness benefits View additional benefits | <ul style="list-style-type: none"> ✓ Vision ✓ Dental ✓ Hearing ✓ Transportation ✓ Fitness benefits View additional benefits | <ul style="list-style-type: none"> ✓ Vision ✓ Dental ✓ Hearing ✓ Transportation ✓ Fitness benefits View additional benefits |

Cigna HealthSpring Preferred (HMO)

Kaiser Permanente Medicare Advantage w/o Part D (HMO)

Kaiser Permanente Medicare Advantage Standard(HMO)

Benefits & costs

| Doctor services | Primary doctor visit \$10 per visit Specialist visit \$35 per visit | Primary doctor visit \$10 per visit Specialist visit \$40 per visit | Primary doctor visit \$5 per visit Specialist visit \$50 per visit |
|-----------------------------------|--|--|---|
| Tests, labs, & imaging | Diagnostic tests & procedures ✓ \$0 copay Lab services \$0 copay Diagnostic radiology services (like MRI) \$100 Outpatient x-rays \$10 Emergency care \$90 per visit (always covered) Urgent care \$35 per visit (always covered) | Diagnostic tests & procedures ✓ \$0 copay Lab services \$0 copay Diagnostic radiology services (like MRI) \$150 Outpatient x-rays \$15 Emergency care \$90 per visit (always covered) Urgent care \$40 per visit (always covered) | Diagnostic tests & procedures ✓ \$0-50 Lab services \$0 copay Diagnostic radiology services (like MRI) \$0-200 Outpatient x-rays \$40 Emergency care \$90 per visit (always covered) Urgent care \$50 per visit (always covered) |

| | Cigna HealthSpring Preferred (HMO) | Kaiser Permanente Medicare Advantage w/o Part D (HMO) | Kaiser Permanente Medicare Advantage Standard(HMO) |
|----------------------------|---|---|---|
| Hospital services | <p>Inpatient hospital coverage \$225 per day for days 1 through 5 \$0 per day for days 6 through 90</p> <p>Outpatient hospital coverage \$200 per visit</p> | <p>Inpatient hospital coverage \$250 per day for days 1 through 5 \$0 per day for days 6 through 90</p> <p>Outpatient hospital coverage \$250 per visit</p> | <p>Inpatient hospital coverage \$390 per day for days 1 through 5 \$0 per day for days 6 through 90</p> <p>Outpatient hospital coverage \$0-400 per visit</p> |
| Preventive services | \$0 copay | \$0 copay | \$0 copay |

Extra benefits

| | | | |
|---|----------------------------|----------------------------|-------------|
| Hearing aids | Not covered | Not covered | Not covered |
| Preventive dental (like oral exams and cleanings) | Covered under office visit | Covered under office visit | Not covered |
| Comprehensive dental (like root canal and implants) | \$0-55 | \$0-55 | Not covered |
| Eyeglasses (frames & lenses) | \$0 copay | \$0 copay | Not covered |
| Wellness programs (like fitness & nursing hotline) | Covered | Covered | Covered |

| | Cigna HealthSpring Preferred (HMO) | Kaiser Permanente Medicare Advantage w/o Part D (HMO) | Kaiser Permanente Medicare Advantage Standard(HMO) |
|--|--|--|--|
| Transportation | \$0 copay | \$0 copay | Not covered |
| Skilled nursing facility | \$0 per day for days 1 through 20 \$150 per day for days 21 through 100 | \$0 per day for days 1 through 20 \$160 per day for days 21 through 100 | \$0 per day for days 1 through 20 \$178 per day for days 21 through 100 |
| Durable medical equipment (like wheelchairs & oxygen) | 20% per item | 20% per item | 20% per item |
| Diabetes supplies | \$0 copay | \$0 copay | 0-20% per item |

Drug coverage & costs

| | | | |
|----------------------------------|--|--|--|
| Drugs covered/Not covered | 5 of 5 Prescription drugs covered Restrictions may apply. | 5 of 5 Prescription drugs covered Restrictions may apply. | 5 of 5 Prescription drugs covered Restrictions may apply. |
|----------------------------------|--|--|--|

Cigna HealthSpring Preferred (HMO)

Kaiser Permanente Medicare Advantage w/o Part D (HMO)

Kaiser Permanente Medicare Advantage Standard(HMO)

Estimated yearly drug costs

WALGREENS #7357

✗ Out-of-network
\$5,691.06

Mail order pharmacy

✗ Out-of-network
\$1,053.80

WALGREENS #7357

✓ Standard in-network
\$633.72

Mail order pharmacy

✓ Standard in-network
\$681.84

WALGREENS #7357

✓ Preferred in-network
\$122.56

Mail order pharmacy

✓ Standard in-network
\$282.76

Kaiser Permanente Medicare Advantage w/o Part D (HMO)

[Plan Details](#)

Open Enrollment starts October 15

Kaiser Permanente Medicare Advantage Standard MD (HMO)

[Plan Details](#)

Open Enrollment starts October 15

Cigna-HealthSpring Preferred (HMO)

[Plan Details](#)

Open Enrollment starts October 15

Username and Password recovery on MyMedicare or Medicare Plan Finder

Log in or create account

USERNAME

PASSWORD

Log in

[Trouble signing in?](#)

Using a shared or public computer? Be sure to log out and close all browser windows when you're done. This will help keep your information secure.

By accessing this system, you agree to our [Terms and Conditions](#) +.

No account? Create one now

Create an account for a more personalized experience.

Create Account



Trouble logging in?

What are you having trouble with?

- [Forgot Username](#)
- [Forgot Password](#)
- [Forgot Username and Password](#)

Are you unsure of whether you have an account?

- [Verify Your Account Access](#)

[Return to MyMedicare.gov](#)

Forgot username

Step 1 of 2: Enter Your Information

All fields required.

MEDICARE NUMBER [Info](#)

[Where can I find my Medicare Number?](#)

LAST NAME

SUFFIX

None

DATE OF BIRTH

Month

Day

Year

PROVE YOU'RE NOT A ROBOT

Type the last 3 numbers of 116783?

Continue

Back

Step 2 of 2: Username Reminder

Your MyMedicare.gov user name is **MightyMouse**

Return to [MyMedicare.gov](#) to sign in.

Forgot password

Step 1 of 4: Enter Your Information

All fields required.

MEDICARE NUMBER [Info](#)

[Where can I find my Medicare Number?](#)

LAST NAME

SUFFIX

None

DATE OF BIRTH

Month

Day

Year

Username [Info](#)

PROVE YOU'RE NOT A ROBOT

Type the first and last number of 263?

Continue

Back

Step 2 of 4: Answer Secret Question

All fields required.

Secret Question [Info](#)

In what city did you first meet your spouse?

SECRET ANSWER

Continue

Cancel

Note: If you do not have or remember the correct answer, and make three (3) incorrect attempts, your account will be locked out and you will not be able to access MyMedicare.gov until you complete the registration process.

Forgot password

Step 3 of 4: Change Password

Please update your password using following the [password creation guidelines](#).

All fields required.

NEW PASSWORD

CONFIRM NEW PASSWORD

Continue

Cancel

Password Creation Guidelines

- Must be 8 to 16 characters long
- Must contain at least one letter
- Must contain at least one number
- Must also contain one or more of the following special characters: @ ! \$ % ^ * ()
- Must be different from the previous six (6) passwords
- Cannot contain your username
- Cannot contain your Medicare Number or SSN

Forgot username and password

Step 1 of 5: Enter Your Information

All fields required.

MEDICARE NUMBER [Info](#)

[Where can I find my Medicare Number?](#)

LAST NAME

SUFFIX

None

DATE OF BIRTH

Month

Day

Year

PROVE YOU'RE NOT A ROBOT

What color is the purple pen?

Continue

Back

Step 2 of 5: Username Reminder

Your MyMedicare.gov Username is **MightyMouse**

Please note your MyMedicare.gov username for your records, so that you may visit MyMedicare.gov often.

Continue on to the Forgot Password process in order to change your password.

Continue

Cancel

Forgot username and password

Step 3 of 5: Answer Secret Question

All fields required.

Secret Question [Info](#)

In what city did you first meet your spouse?

SECRET ANSWER

Continue

Cancel

Note: If you do not have or remember the correct answer, and make three (3) incorrect attempts, your account will be locked out and you will not be able to access MyMedicare.gov until you complete the registration process.

Step 4 of 5: Change Password

Please update your password using following the [password creation guidelines](#).

All fields required.

NEW PASSWORD

CONFIRM NEW PASSWORD

Continue

Cancel

Verify account access

Step 1 of 2: Enter Your Information

All fields required.

MEDICARE NUMBER [Info](#)

[Where can I find my Medicare Number?](#)

LAST NAME

SUFFIX

None 

DATE OF BIRTH

Month 

Day 

Year 

PROVE YOU'RE NOT A ROBOT

Type the last 2 numbers of 9953925?

Continue

Back

Step 2 of 2: Registration Status

You have previously enrolled in MyMedicare.gov.

You registered on **07/11/2019**.

You were registered by **Beneficiary (Self)**.

Your MyMedicare.gov user name is **MightyMouse**

Please note your MyMedicare.gov username for your records, so that you may visit MyMedicare.gov often.

Return to [MyMedicare.gov](#) to sign in.

Informed Shopping ...

- Review plan details for:
 - Cost of monthly premium, amount of deductible, and if medications are covered. Pharmacies selected are preferred or standard.
- You can compare up to 3 plans at a time, and this process can be done multiple times by selecting different plans.

As we leave Plan Finder...

- *Although one can enroll in the plan of choice by clicking the enroll button, we recommend reviewing the print out of compared plans carefully before making a decision.*
- Contact the plan using the numbers provided to review their offerings.
- Enrollment can be completed by:
 - Contacting the plan directly by phone, or
 - Medicare Plan Finder using your Username and Password at a later date, or
 - Calling 1-800-MEDICARE.
- **REMEMBER! OPEN ENROLLMENT ENDS ON DECEMBER 7TH SO IT IS IMPORTANT TO COMPLETE ENROLLMENT BEFORE THAT DATE. ENROLLMENT WILL BECOME EFFECTIVE JANUARY 1, 2020.**

NOTE: The costs of drug co-pays are estimated, based on drug prices at the beginning of October, and are subject to change.

Assistance for Low- Income Individuals

Assistance for Low-Income Individuals

Medicare Savings Programs (MSPs): Eligibility and Coverage (2019)

| Type of MSP | Financial Eligibility* | Effective Date of MSP Enrollment | Benefits Covered by the MSP |
|--|--|---|---|
| Qualified Medicare Beneficiary (QMB) | <p><u>Monthly Income**:</u> (at or below 100% FPL/+ \$20 income disregard per household) \$1,041/\$1,061 if single \$1,410/\$1,430 if married</p> <p><u>Alaska</u> \$1,300/\$1,320 if single \$1,761/\$1,781 if married</p> <p><u>Hawaii</u> \$1,199/\$1,219 if single \$1,622/\$1,642 if married</p> <p><u>Resources^:</u> \$7,730 if single, \$11,600 if married</p> | The first of the month following the month eligibility is documented. | <ul style="list-style-type: none"> -- Part A hospital deductible (\$1,364/per benefit period) -- Part A hospital copays: days 61-90 (\$341 daily), days 91-150 (\$682 daily) -- Part A SNF copays: days 21-100 (\$170.50 daily) -- Part A monthly premium (up to \$437) -- Part B annual deductible (\$185) -- Part B monthly premium (\$135.50) -- Part B 20% coinsurance (amount varies) |
| Specified Low-Income Medicare Beneficiary (SLMB) | <p><u>Monthly Income**:</u> (between 100-120% FPL/+ \$20 disregard) \$1,249/\$1,269 if single \$1,691/\$1,711 if married</p> <p><u>Alaska:</u> \$1,560/\$1,580 if single \$2,113/\$2,133 if married</p> <p><u>Hawaii:</u> \$1,438/\$1,458 if single \$1,946/\$1,966 if married</p> <p><u>Resources^:</u></p> | 3 months retroactive from the date of application <u>if</u> your client meets eligibility criteria during those months. | -- Part B monthly premium (\$135.50) |
| | <p><u>Monthly Income**:</u> (between 121-135% FPL/+ \$20 disregard) \$1,406/\$1,426 if single \$1,903/\$1,923 if married</p> | 3 months retroactive from the date of application <u>if</u> your client meets eligibility criteria during those months. | -- Part B monthly premium (\$135.50) |

| | | | |
|---|---|---|---|
| Qualifying Individual (QI) | <u>Alaska:</u> \$1,755/\$1,775 if single \$2,378/\$2,398 if married <u>Hawaii:</u> \$1,618/\$1,638 if single \$2,190/\$2,210 if married <u>Resources^:</u> \$7,730 if single, \$11,600 if married | | |
| Qualified Disabled Working Individual (QDWI) | <u>Monthly Income:</u> \$4,249 if single*** \$5,722 if married*** <u>Alaska:</u> \$5,285 if single \$7,129 if married <u>Hawaii:</u> \$4,879 if single \$6,572 if married <u>Resources:</u> \$4,000 if single, \$6,000 if married | 3 months retroactive from the date of application <u>if</u> your client meets eligibility criteria during those months. | -- Medicare Part A monthly premium up to \$437/month in 2019 (for people with Medicare who are under age 65, disabled, and no longer qualify for free Medicare Part A or Medicaid because they returned to work and their income exceeds the limit) |

Notes

* States can apply more liberal income and resource eligibility criteria. Check with your state Medicaid agency.

**Income limits, as per CMS guidance, are rounded up to the next dollar. States may disregard other income aside from the standard \$20 general exclusion.

***QDWI income thresholds include other earned income disregards.

^ Resources do not include \$1,500 per person burial allowance. States vary on how they count this resource; see [our burial disregard fact sheet](#) for more information.

All figures in this chart are derived from <https://www.medicaid.gov/medicaid/eligibility/medicaid-enrollees/index.html>.

FRAUD AND OTHER MISLEADING INFORMATION

The screenshot shows a Google search for "Medicare" with several search results and a Wikipedia entry. Annotations include:

- Says "AD" (Advertisement):** Points to the first search result: "Medicare Enrollment 2017 - You May be Eligible to Enroll".
- Paid ad:** Points to the second search result: "Mutual of Omaha Medicare Plans - Supplemental Health Insurance".
- Not ".gov" (Not Government):** Points to the third search result: "Medicare Part D Plans".
- Click Here!:** Points to the official Medicare.gov link.

Red text on the right side of the image reads: "Watch for scams / misleading companies!" and "There are many things that present like Medicare that are not Medicare!".

COMMERCIALS

NOT Medicare

Link:

<https://www.ispot.tv/ad/Auif/medicare-coverage-helpline-extra-benefits>

Actual Medicare

Link: <https://www.youtube.com/watch?v=nXEAK0TbL9Q>

QUESTION TO ASK:

Is the source of information trying to sell something or inform about something?

Fraud: Marketing Schemes

* Summarized from www.SMPResource.org

Guidelines are in place to limit the ability of providers and suppliers to market equipment and supplies directly to beneficiaries. These marketing guidelines prohibit unsolicited direct contact with beneficiaries. [Marketing of Medicare-covered items can only take place under one or more of the following three circumstances:](#)

- **The beneficiary has given written permission to be contacted**
- **The supplier is contacting the beneficiary about an item already provided**
- **The supplier has furnished one Medicare-covered item within the previous 15 months**

The cost...

- Medicare loses an estimated 60 billion dollars each year due to fraud, errors, and abuse.
- Approximately 250,000 beneficiaries are listed as having their medical identity compromised through stolen or misused Medicare numbers.
 - NEW in April 2018: Medicare will be issuing new cards that do not utilize beneficiaries' Social Security numbers.

Senior Medicare Patrol (SMP)

PREVENT – DETECT – REPORT

Adapted from page 3 of the "SMP Foundations Training Manual".

We are the first line of defense!

- **EDUCATE!**

- Inform your clients about what scams look like
 - Soliciting phone calls asking for private information.
 - Solution: Hang up!
 - Unknown persons soliciting in senior housing or community settings.
 - Solution: NEVER disclose information to people going “door-to-door”
 - REMEMBER the 3 rules that govern Marketing for Medicare services:
 - The beneficiary has given written permission to be contacted
 - The supplier is contacting the beneficiary about an item already provided
 - The supplier has furnished one Medicare-covered item within the previous 15 months

- **EMPOWER!**

- Encourage beneficiaries to review their statements regularly and report any charges for services they did not receive.
- Provide contacts to report abuse, such as Senior Medicare Patrol (SMP), Office of Inspector General (OIG), and CMS (Centers for Medicare and Medicaid Services). See slide 42 contact information.

Helpful links and contacts:

MEDICARE

www.medicare.gov

Ph: 1-800-Medicare

- Use Plan Finder, explore many helpful tools regarding Medicare

DEPT. OF HUMAN RESOURCES / DEPT. OF SOCIAL SERVICES

<https://mydhrbenefits.dhr.state.md.us/dashboardclient/#/home>

Ph: 410-836-4700 (Harford County DSS)

- Apply for Medicaid benefits.

SOCIAL SECURITY ADMINISTRATION

www.SSA.gov

Ph: 1-800-772-1213 (National) or
1-877-701-2142 (Harford County)

- Apply for Extra Help with prescriptions.

MARYLAND SENIOR PRESCRIPTION DRUG ASSISTANCE PROGRAM (SPDAP)

<http://marylandspdap.com/>

Ph: 1-800-492-6116

- State prescription assistance. \$40 towards monthly premium and potential coverage gap assistance.

CENTERS FOR MEDICARE & MEDICAID SERVICES

www.CMS.gov

Ph: 1-800-392-8896

- General assistance and report fraud.

DEPARTMENT OF HEALTH AND HUMAN RESOURCES

WWW.HHS.GOV

Ph: 1-877-696-6775 (National)

- General assistance with public programs.

MARYLAND INSURANCE ADMINISTRATION

<http://www.insurance.maryland.gov>

Ph: 1-800-492-6116

- General assistance with enrollment in various types of insurance.

SENIOR MEDICARE PATROL (SMP)

<http://www.smpresource.org/>

Ph: 1-800-243-3425

- Report Medicare fraud. Stay up-to-date on schemes and scams.

OFFICE OF THE INSPECTOR GENERAL

<https://oig.hhs.gov/fraud/report-fraud/index.asp>

Ph: 1-800-HHS-TIPS (1-800-447-8477)

- Report Medicare fraud.

Contact information:

Training provided by:

Harford County Office on Aging

145 N. Hickory Ave.

Bel Air, MD 21014

Ph: 410-638-3025

***Thank you for joining us
today!***