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MEDICARE BASICS GUIDE



Comprehensive Benefits is a licensed insurance agency and not affiliated with the federal Medicare program. Services of Comprehensive Benefits are provided to Medicare beneficiaries at no cost and with no obligation. Comprehensive Benefits is paid directly by the plan selected.

ELIGIBILITY AND ENROLLMENT

Medicare Eligibility

You are eligible for Original Medicare (Parts A & B) if:

You are at least 65 years old, or you're under 65 and qualify on the basis of disability or other special situation.

AND

You're a U.S. citizen or a legal resident who has lived in the U.S. for at least 5 consecutive years.

When can you enroll in a Medicare Advantage or prescription drug plan?

Initial Enrollment Period

- Your initial Enrollment Period (**IEP**) is 7 months long. It includes your 65th birthday month plus the 3 months before and the 3 months after.
- It begins and ends 1 month earlier if your birthday is on the first of the month.
- You may enroll in Part A, Part B or both. You may also choose to join a Medicare Advantage plan (Part C) or a prescription drug plan (Part D).
- Although you are not required to enroll in Part D, there is a penalty of 1% of the average monthly premium for each month you delay enrollment.

Annual Enrollment Period

October 15 – December 7

Special Enrollment Period

Throughout the year

SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG



Medicare Advantage Open Enrollment Period
January 1 – March 31

Annual Enrollment Period, October 15 – December 7

During annual enrollment, you can add, drop or switch your Medicare coverage.

Medicare Advantage Open Enrollment Period, January 1 – March 31

If you're already a Medicare Advantage plan member, you may disenroll from your current plan and either switch to a different Medicare Advantage plan one time only, or go back to Original Medicare during this period.

Special Enrollment Period

Depending on certain circumstances, you may be able to enroll in a Medicare plan outside of the initial enrollment or annual enrollment time frames. Some ways you may qualify for a Special Enrollment Period are if you:

- **Retire** and lose your employer coverage
- **Move** out of the plan's service area
- Qualify for **Extra Help**
- Have been **diagnosed with certain qualifying chronic health conditions**

Special needs plans have other eligibility requirements.

UNDERSTANDING YOUR MEDICARE CHOICES

STEP 1

Enroll in Original Medicare

Original Medicare

Provided by the federal government

PART A

Helps pay for hospital stay and inpatient care

PART B

Helps pay for doctor visits and outpatient care

Medicare covers all Medicare-approved clinical lab expenses. Durable medical equipment and supplies: Medicare generally pays up to 80% of the approved amount after you've reached your deductible.

MEDICARE PART B

The Medicare Income-Related Monthly Adjustment Amount (IRMAA) is an amount you may pay in addition to your Part B or Part D premium if your income is above a certain level. The Social Security Administration (SSA) sets four income brackets that determine your (or you and your spouse's) IRMAA. SSA determines if you owe an IRMAA based on the income you reported on your IRS tax return two years prior, meaning two years before the year that you start paying IRMAA. The income that counts is the adjusted gross income you reported plus other forms of tax-exempt income.

If you are expected to pay IRMAA, SSA will notify you that you have a higher Part B premium. Your Medicare Part B and Part D premiums will change based on income as follows:

If your MAGI (Monthly Adjusted Gross Income) in 2022 was...			You pay in 2024 (per person) Monthly Premiums to Medicare	
Individual Tax Return	Joint Tax Return	Married & Separate Tax Return	Part B Premium + IRMAA	Part D IRMAA (in addition to Part D plan premium)
\$103,000 or less	\$206,000 or less	\$103,000 or less	\$174.70	---
\$103,001 to \$129,000	\$206,001 to \$258,000	N/A	\$244.60 (174.70 + 69.90)	+\$12.90
\$129,001 to \$161,000	\$258,001 to \$322,000	N/A	\$349.40 (174.70 + 174.70)	+\$33.30
\$161,001 to \$193,000	\$322,001 to \$386,000	N/A	\$454.20 (174.70 + 279.50)	+\$53.80
\$193,001 to \$499,999	\$386,001 to \$749,999	\$103,001 to \$396,999	\$559.00 (174.70 + 384.30)	+\$74.20
\$500,000 +	\$750,000 +	\$397,000	\$594.00 (174.70 + 419.30)	+\$81.00

WHAT'S NEXT?

After you enroll in Original Medicare, there are 2 ways to get additional coverage.

OPTION 1

OR

OPTION 2

Add one or both of the following to Original Medicare

Choose a Medicare Advantage Plan:

Medicare Supplement Insurance

Offered by private companies



Medicare Supplement

Helps pay some of the out-of-pocket costs that come with Original Medicare

Medicare Part D Plan

Offered by private companies



Part D

Helps pay for prescription drugs

Medicare Advantage Plan

Offered by private companies



Part C

Combines Part A (hospital insurance) and Part B (medical insurance) in one plan



Part D

Usually includes prescription drug coverage.



May offer additional benefits not provided by Original Medicare

STEP 2

COVERAGE OPTIONS



Medicare Supplement (MediGap) Policies

You can choose to buy this coverage to fill in gaps in Part A and Part B coverage, including Part B's 20% coinsurance. Costs vary by policy and company.

Part D (Prescription Drug) Plans

Private companies approved by Medicare run these plans. Plans cover different drugs and medically necessary drugs MUST be covered. If you forego prescription drug coverage when starting your Medicare, you may be subject to a penalty if you ever need prescription drug coverage in the future.

Medicare Advantage Plans

These bundled plans include Part A and Part B and usually Part D. Generally, you must see doctors in the plan network. Your costs may be lower than in the Original Medicare, and you may get additional benefits not covered by Original Medicare.

COMPARING MEDICARE ADVANTAGE AND MEDICARE SUPPLEMENT PLANS

Plan Features	Medicare Advantage	Medicare Supplement
Coverage	Includes Original Medicare Parts A and B, plus extra benefits, not covered by Original Medicare.	Helps fill the "gaps" in Original Medicare, covering the out-of-pocket costs Parts A and B don't
Enrollment	There are specific enrollment periods during the year when you can enroll in or switch to a different Medicare Advantage plan	You can apply to buy a Medigap plan any time after you turn 65 and join Part B
Doctors and hospitals	You may be required to use in-network doctors and hospitals	You can see any doctor nationwide that accepts Medicare
Referrals	May need referrals for specialists	No referrals necessary
Costs	Lower premiums but has copays	Higher premiums but little to no copays
Prescription drug coverage	Can be included in a Medicare Advantage Prescription drug plan (MAPD)	Not included, you'll need to purchase a Part D plan if you want Prescription Drug Coverage.
Medical Underwriting	All health conditions accepted, including ESRD	No medical underwriting if you apply during your Initial Enrollment Period (starts 3 months before the month you turn 65, and ends 3 months after)

EMPLOYER COVERAGE & MEDICARE

If you have employer coverage and are still working when you become Medicare eligible you do have a few options.

Options

1. **You can Enroll in Medicare and keep your employer coverage:** You can enroll in Medicare and keep your employer coverage if it is a group health plan, and you are still working or covered through your spouse's employer.
2. **You can Enroll in Medicare and drop your employer coverage:** You can enroll in Medicare and drop your employer coverage if you no longer want or need the coverage, or if the coverage is not a group health plan.
3. **You can Delay enrolling in Medicare:** You can delay enrolling in Medicare if you have employer coverage and are still working or covered through your spouse's employer. However, you should be aware of the Medicare Part B late enrollment penalty if you delay enrollment and don't have other creditable coverage.

It is always recommended to compare the costs and benefits of employer group coverage when considering going on Medicare.

It is recommended that you work with a Trusted insurance broker and your Group HR department to make an informed decision regarding Medicare enrollment while working.



MEET THE TEAM

Comprehensive Benefits is a licensed insurance agency that specializes in Medicare insurance plans. We work with a variety of insurance carriers to offer our clients a range of options for Medicare Advantage, Medicare Supplement, and Prescription Drug Plans. We have a team of licensed agents who can help you navigate the complex world of Medicare and find the plan that fits your needs and budget.



Stephani Shaw
Director Of Marketing
Licensed Agent



Michael Graham
President/CEO
Licensed Broker



Brandon Graham
Director Of Operations
Licensed Agent



Tyler Shirk
Director Of Sales
Licensed Broker



Bryce Graham
Licensed Broker



Caleb Krieg
Licensed Broker



Joe Rumbolo
Licensed Broker

WHY US?

- We provide personalized attention to each client.
- We take the time to understand your unique situation and preferences and tailor our recommendations to meet your specific needs.
- We provide ongoing support to ensure that you are satisfied with your plan and are getting the most out of your benefits.

*Call to speak with one of our Licensed
Insurance Agents:*

314.312.0580

Comprehensive Benefits
2350 S. 7th Street Ste. 120
St. Louis, MO 63104

"We do not offer every plan available in your area. Currently we represent [insert number of organizations] organizations which offer [insert number of plans] products in your area. Please contact Medicare.gov, 1-800-MEDICARE, or your local State Health Insurance Program (SHIP) to get information on all of your options."

