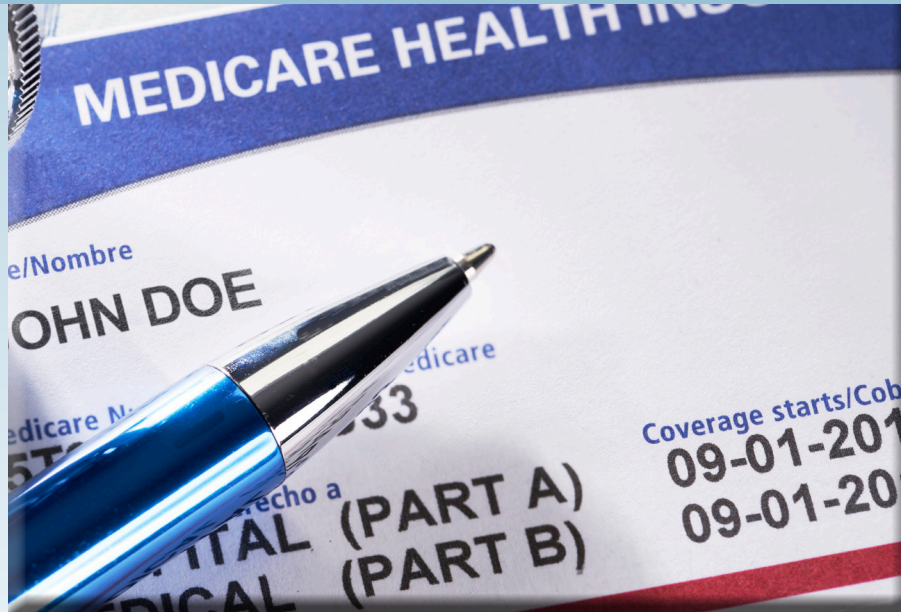


# Medicare Advantage Plan Toolkit



Your Medicare Matters.  
Understand it, Protect it.

**DMAB**  
Delaware Medicare  
Assistance Bureau

Delaware Medicare Assistance Bureau (DMAB)

302-674-7364 | [DMAB@delaware.gov](mailto:DMAB@delaware.gov)

# Dear Medicare Beneficiary:

We know how important your Medicare is to you and we want to help you protect it. We understand that making decisions about your Medicare can be difficult because of all the options now available to you.

Medicare Advantage plans and Part D Prescription Drug plans allow you more choices than ever about your health care coverage. You can either keep your Original Medicare benefits, or you can switch to a Medicare Advantage Plan that will provide your coverage instead of Medicare. And, you can now join a Part D Plan to help pay for your prescription drug costs.

These choices can provide good coverage depending on your current situation. However, all of these choices can create the potential for being misinformed and misguided. Sometimes fraud and abuse can also occur.

This Medicare Advantage Plan Toolkit contains information you need to protect your Medicare. It gives you important tools to use to help you make an informed decision. Please keep your Medicare information in a safe place. Make sure you have it when you sit down with anyone to discuss your Medicare! Review and compare dates and services on your Medicare Summary Notice (MSN) to make sure services listed and details are correct. Also, do make sure you actually received the services for which you are being billed. If you suspect fraud make sure you report it!

Delaware Medicare Assistance Bureau (DMAB), your State Health Insurance Assistance Program (SHIP) in Delaware provides free, unbiased, and confidential counseling on your healthcare benefits. Delaware Senior Medicare Patrol (SMP) can assist you with suspected fraud complaints and referrals. The Delaware Department of Insurance will assist consumers with complaints against insurance agents and advise if an insurance company is licensed in Delaware. The above agencies, along with the agencies listed on Page 8 and 9 of this booklet, will provide assistance to you.



302-674-7364  
or 1-800-336-9500  
(toll-free in Delaware)



1-800-223-9074



302-674-7300

## Your toolkit contains:

- Questions to ask your salesperson and yourself
- Facts on Medicare Advantage Plans and how they work
- Red Flags to look for when considering a plan
- Steps to safeguard your Medicare
- A contact list of helpful Delaware health and consumer agencies

# My Medicare Advantage Checklist

**Making any change to your Medicare is a serious matter.**

**BEFORE** you make any change to your Medicare plan, make sure it is right for **YOU**. Complete the front of this form with your understanding of the plan, and have the sales agent complete the information on the back. Keep this form for your records. Contact DMAB at (302) 674-7364 if you have questions or you need help.

What is the name of the Medicare Advantage Plan? \_\_\_\_\_

See the "Get the Facts" flyer for definitions of types of plans.

Is this a Health Maintenance Organization (HMO) Plan?  YES  NO

Is this a Preferred Provider Organization (PPO) Plan?  YES  NO

Is this a Private Fee-for-Service Plan?  YES  NO

Is this a Special Needs Plan?  YES  NO

Does the plan include Prescription Drug (Part D) coverage?  YES  NO

How did the Medicare Advantage Plan company contact me?

Family

Mail

Phone

Seminar

Door-to-Door

I contacted them

Other

What are the major differences between this plan and my Original Medicare? \_\_\_\_\_

How much will my new Premium payment be? \$ \_\_\_\_\_ (Old Premium Payment \$ \_\_\_\_\_)

What will I have to pay when I see my doctor? \$ \_\_\_\_\_ (Old Amount \$ \_\_\_\_\_)

What will I have to pay when I go into the hospital? \$ \_\_\_\_\_ (Old Amount \$ \_\_\_\_\_)

What will I have to pay for skilled nursing facility care? \$ \_\_\_\_\_ (Old Amount \$ \_\_\_\_\_)

YES  NO Have I asked all my medical providers (doctors, hospitals, etc.) if they accept the plan?

YES  NO Can I return to Original Medicare at any time?

YES  NO Was a detailed written plan description left with me?

YES  NO Have I contacted DMAB at 302-674-7364 if I have additional questions?

YES  NO Will I have to pay for rehabilitative care?

If you have questions about the completion of this form, contact DMAB by calling 302-674-7364, or send your questions by e-mail to [DMAB@delaware.gov](mailto:DMAB@delaware.gov)

# Have the Insurance Agent Complete

## Agent/Broker/Company Information

Agent/Broker Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

My Delaware license number is: \_\_\_\_\_

The plan I am offering is: \_\_\_\_\_

Medicare Advantage (MA) Plan     Prescription Drug Plan only

Complete the rest of this form only if the plan is Medicare Advantage.

This plan  does  does not include Prescription Drug Coverage.

This Medicare Advantage (MA) Plan is:

- HMO (Health Maintenance Organization)     SNP (Special Needs Plan)  
 PPO (Preferred Provider Organization)     PFFS (Private Fee-for-Service)  
 MSA (Medicare Medical Savings Account)

This plan  will  will not affect your enrollment in Original Medicare.

This plan  will  will not include additional out-of-pocket expenses.

The premium will be \$ \_\_\_\_\_. You will still be required to pay your Part B premium \$ \_\_\_\_\_.

I have told the customer that by enrolling in the Plan (please initial):

\_\_\_\_ The plan will provide the primary health coverage instead of Original Medicare.

\_\_\_\_ Original Medicare will no longer pay for your health care once enrolled in the plan.

\_\_\_\_ You will be given a new Plan card, but, keep the Original Medicare card.

\_\_\_\_ Once enrolled, you may be “locked” in the plan for the remainder of the year.

\_\_\_\_ The plan is not a Medicare supplement plan and does not replace Medicare supplement insurance.

Agent/Broker Signature \_\_\_\_\_ Date \_\_\_\_\_

# Get the Facts

## Medicare Advantage Plans

Medicare Advantage Plans are healthcare plans approved by Medicare and provided by private insurance companies. There are several different types of plans:

|                                                                                                                                                                                   |                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Health Maintenance Organization (HMO)</b></p>                                                                                                                               | <p><b>Preferred Provider Organization (PPO)</b></p>                                                                                                                                             | <p><b>Medical Savings Account (MSA)</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p>Plans must cover all Part A and Part B health care. Most require you to go to doctors, specialists, or hospitals on the plan's list, except in an emergency.</p>               | <p>Plans are available in a local or regional area and you may pay less if you use doctors, hospitals, and providers in their network, but pay additional costs for outside network visits.</p> | <p>Plans combine a high deductible health plan with a Medical Savings Account that beneficiaries can use to manage their healthcare costs.</p>                                                                                                                                                                                                                                                                                                                                                                              |
| <p><b>Private Fee-for-Service (PFFS)</b></p>                                                                                                                                      | <p><b>Medicare Special Needs (SNP)</b></p>                                                                                                                                                      | <p>Medicare Advantage Plans provide all of your Part A (Hospital Insurance) and all of your Part B (Medical Insurance) coverage and other medically necessary services just like you have under Original Medicare.</p> <p>Medicare Advantage Plans may provide good coverage for some beneficiaries. You must make sure you can afford to pay any co-payments as well as the monthly premium. You also need to check to see if your healthcare providers are part of the plan's network or if they will accept payment.</p> |
| <p>Plans allow you to go to any doctor or hospital that accepts the plan's payment. The plan decides how much it will pay and what you will pay for the services you receive.</p> | <p>Plans are specially designed to meet the needs of people who live in certain institutions, are eligible for both Medicare and Medicaid, and/or have one or more chronic conditions.</p>      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

# Recognize the Red Flags

## THE MARKETING AND SELLING OF MEDICARE ADVANTAGE PLANS

You have a lot of choices when it comes to your Medicare. Medicare Advantage Plans are health plan options approved by Medicare and run by private companies. These plans can be an alternative to traditional Medicare. Recognize the “Red Flags” before you enroll in a new plan.



**A sales person appears at your door uninvited.**

Strict marketing guidelines do not allow home visits unless you have given the company permission before the visit.



**A sales person contacts you in person or by phone and says they are with Medicare or Social Security. They may even hand you a red, white, and blue business card. Medicare and Social Security do not make home visits or unsolicited phone calls.**



**A sales person tells you the plan is a Medicare Supplement Plan and that it will not affect your Original Medicare.**

The plan IS NOT a Medicare Supplement Plan. The plan will provide your primary health care coverage instead of Medicare.



**A sales person tells you that your doctor accepts the new plan.**

Your doctor may or may not accept the plan. It is important to contact your doctor directly and check to see if he or she will accept the new plan before you sign anything.



**A sales person wants to see your Medicare card and have you sign something. Do not** show the sales person your Medicare card! **Do not** sign anything you have not read. **Do not** sign anything you do not understand.



**A sales person wants you to make a decision today without taking the time to make sure you understand the new plan.**

### Take your time!

**Complete these 4 steps BEFORE you make changes to your Medicare.**

**1 – Ask Questions. 2 – Take Your Time. 3 – Understand. 4 – Call DMAB 302-674-7364**



# Follow the Steps

**Making any change to your Medicare is a very serious matter!  
Safeguard your Medicare by completing these 4 steps.  
Remember, it's your Medicare – Understand It, Protect It!**

## **1. ASK QUESTIONS!**

- ▶ **Have the salesperson complete the “Get Information” form.**
- ▶ **You complete the “Ask Questions” form.**
- ▶ **Keep both forms for your records**

## **2. TAKE YOUR TIME!**

- ▶ **Take time to make your decision.**
- ▶ **Know what is being offered to you and how it will affect you.**

## **3. UNDERSTAND!**

- ▶ **Make sure you understand before you make any changes.**
- ▶ **Get paperwork first then consult with someone you know and trust.**

## **4. Delaware Medicare Assistance Bureau (DMAB) at 302-674-7364**

- ▶ **DMAB is here to help you.**
- ▶ **DMAB services are free and confidential.**
- ▶ **Call 302-674-7364 to find a local counselor in your community.**

### **To Delaware Medicare and Medicaid beneficiaries and their families:**

We hope that this Medicare Advantage Plan Toolkit contains information to help you protect yourself against healthcare fraud, waste, and error.

DMAB, would like to thank staff and volunteers for their continuous dedication while serving thousands of Delaware's older adults and caregivers throughout the state.

This toolkit was adapted, with permission, from the Virginia Department for the Aging and Virginia Insurance Counseling and Assistance Program (VICAP). This toolkit has been produced by DMAB, Delaware State Health Insurance Assistance Program, with financial assistance in whole or in part by grant number 90SAPG0104-01-00, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201.

# Be your Own Advocate

- **Delaware Medicare Assistance Bureau (DMAB)** - is one of 50 State programs that receive grants from the Administration for Community Living. DMAB utilizes volunteers to educate Medicare beneficiaries and their caregivers about Medicare health care benefits, Medigap insurance, and Medicare assistance programs. DMAB operates a toll-free number 1-800-336-9500 in Delaware for anyone that would like to make an appointment to speak with a counselor. If you would like to help with SHIP initiatives in your community, please call DMAB at 302-674-7364. Keep your toolkit in a safe place and refer to it as needed. Volunteers and Department of Insurance staff are trained to assist older Delawareans with Medicare and other types of health insurance, medical bills and patients' rights issues such as grievances and appeals.

- **Delaware Department of Insurance** - The Delaware Department of Insurance is responsible for overseeing and regulating insurance companies and agents doing business in Delaware. The goals of the Insurance Department's Consumer Services Division include protecting consumers and advocating on their behalf and informing consumers of their rights and options when it comes to insurance. You may contact the Consumer Services Division with questions, or if you have a problem or complaint, by visiting the Department of Insurance website at [www.insurance.delaware.gov](http://www.insurance.delaware.gov) or by calling 302-674-7300.

- **Senior Medicare Patrol (SMP)** - The Delaware Senior Medicare Patrol Program provides public information to encourage people who have Medicare to carefully read their Medicare summary notices and ask questions if they do not think the information is correct. This program also trains people who are retired to help other Medicare beneficiaries get the information they need when they suspect fraud, waste, or abuse of the Medicare program. Visit <http://dhss.delaware.gov/dhss/dss/smp.html> or call 1-800-223-9074.

- **Livantra Beneficiary and Family Centered Care Quality Improvement Organization (BFCC-QIO)** - Livantra is an authorized contractor of the Centers for Medicare & Medicaid Services and the designated BFCC-QIO. Visit <https://livantaqio.com/en> or call the BFCC-QIO Medicare beneficiary helpline number at 1-888-396-4646.

- **Social Security Administration** - The Social Security Administration is responsible for enrolling beneficiaries into Medicare Part A and Part B. They also offer financial assistance for those enrolled into a Medicare Part D prescription plan. To find out if you qualify, or learn how to apply for the financial assistance, visit [www.socialsecurity.gov/prescriptionhelp](http://www.socialsecurity.gov/prescriptionhelp) or call 1-800-772-1213.

- **Delaware Prescription Assistance Program (DPAP)** - The goal of the Delaware Prescription Assistance Program (DPAP) is to help pay for prescription medications for elderly and/or disabled individuals who cannot afford the full cost of filling their doctor's prescriptions. The program is designed to aid eligible individuals who have no prescription insurance other than Medicare Part D and whose income is at or below 200% of the Federal Poverty Level (FPL), or whose prescription costs exceed 40% of their income. The Delaware Prescription Assistance Program will provide each eligible individual with up to \$3000 per year toward medically necessary prescription drugs. The program does not pay for diabetes drugs or supplies for Medicare recipients. Medicare currently provides this coverage for both insulin and non-insulin dependent patients. Visit <http://dhss.delaware.gov/dhss/dmma/dpap.html> or call 1-800-996-9969.

- **Office of the Attorney General** - The Office of the Delaware Attorney General enforces state and federal consumer protection laws related to things like identity theft, consumer fraud, and telemarketing scams and enforces laws that protect businesses and consumers from behavior that defeats healthy competition. Visit <http://attorneygeneral.delaware.gov> or contact their Consumer Protection hotline at 1-800-220-5424.



• **Nemours Senior Care** - The Nemours Senior Care, which opened in 1981, provides care for thousands of elderly Delawareans. Patients receive key health services such as dental care, eye care, eyeglasses, hearing tests and hearing aids. Visit <http://www.seniorcarenemours.org> or call Patient Services Department in Wilmington 302-651-4400 or in Milford 302-424-5420.

• **Medicare HHS Office of the Inspector General Hotline** - The mission of the Office of Inspector General (OIG), as mandated by Public Law 95-452 (as amended), is to protect the integrity of Department of Health and Human Services (HHS) programs and the health and welfare of the beneficiaries of those programs. Visit <http://oig.hhs.gov/fraud/hotline/> or call 1-800-447-8477.