

Getting Started with Medicare





1



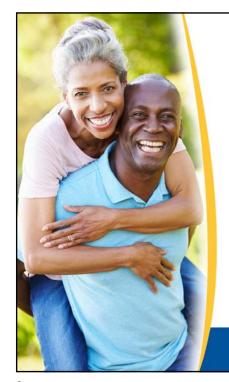
Delaware Medicare Assistance Bureau

- Delaware's State Health Insurance Assistance Program, "SHIP"
- Public Service of Insurance Commissioner Trinidad Navarro
- Funded by the Administration for Community Living
- Provide information and assistance regarding Medicare
- Trained Volunteers
- Offers Speakers, participate in health fairs/community events

2024

Getting Started With Medicare

2



Lesson 1
What's Medicare?



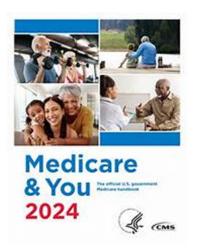
3

Medicare

Health insurance for people:

- 65 and older
- Under 65 with certain disabilities, like ALS (Amyotrophic Lateral Sclerosis, also called Lou Gehrig's disease) without a waiting period
- Any age with End-Stage Renal Disease (ESRD)

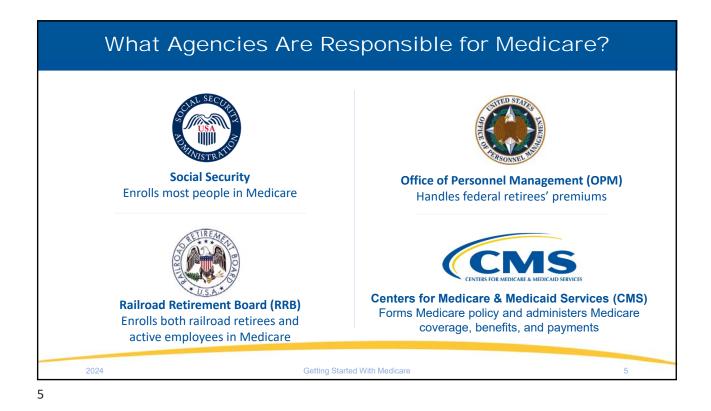
NOTE: To get Medicare you must be a U.S. citizen or lawfully present in the U.S. Must reside in the U.S. for 5 continuous years.

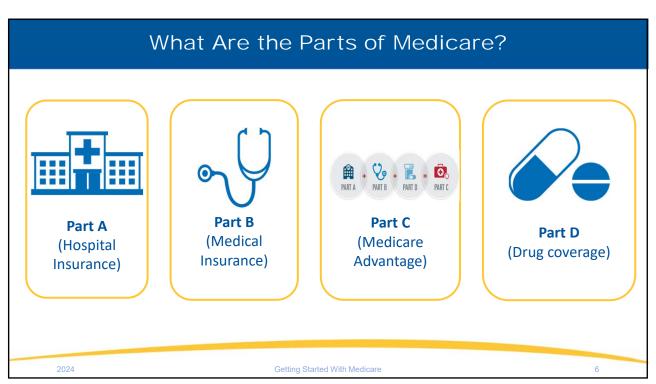


2024

Getting Started With Medicare

4





Automatic Enrollment: Medicare Part A & Part B

Enrollment is automatic for people who get:

- Social Security Benefits
- RRB Benefits

Look for your "Get Ready for Medicare Package"

- Mailed 3 months before:
 - You turn 65
 - · 25th month of disability benefits
- Includes your Medicare card



Important decisions about your Medicare coverage

2024

Getting Started With Medicare

7

7

Some People Must Take Action to Enroll in Medicare



To apply for Medicare 3 months before you turn 65, contact Social Security at <u>ssa.gov</u> or 1-800-772-1213; TTY: 1-800-325-0778



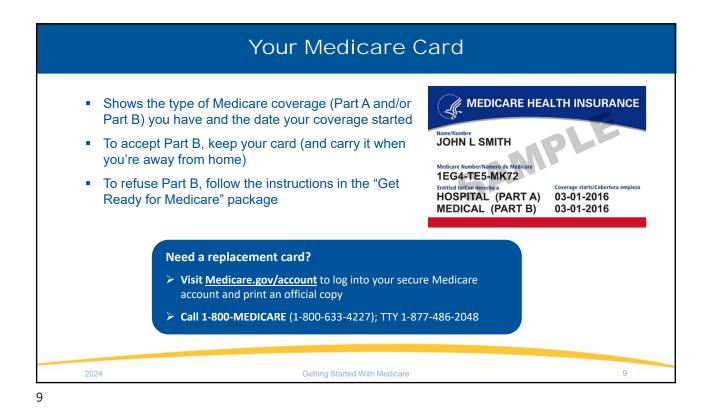
If you retired from a railroad, contact your local Railroad Retirement Board at 1-877-772-5772; TTY: 1-312-751-4701

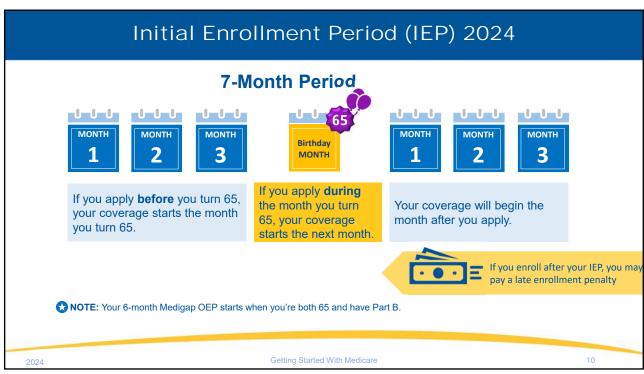
NOTE: The age for full Social Security retirement benefits is increasing. Medicare eligibility age is still 65.



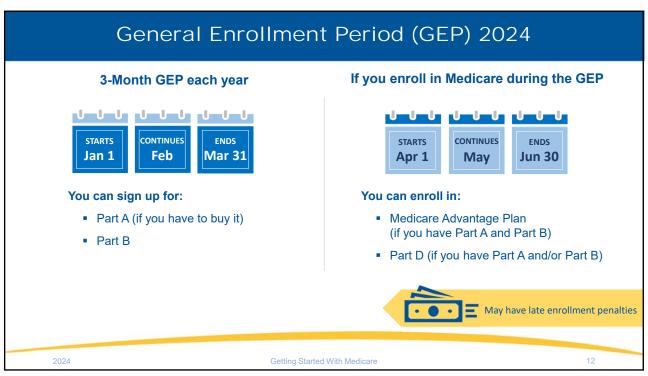
Getting Started With Medicare

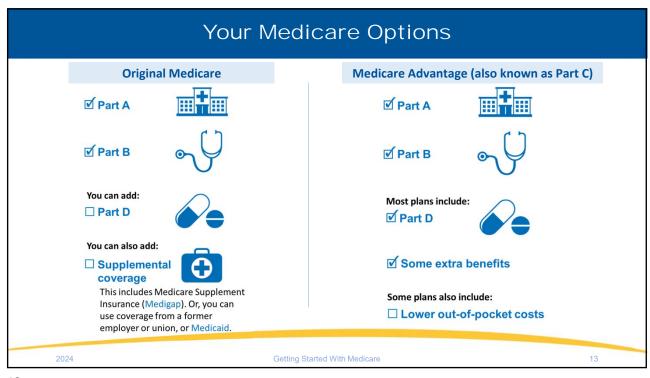
8

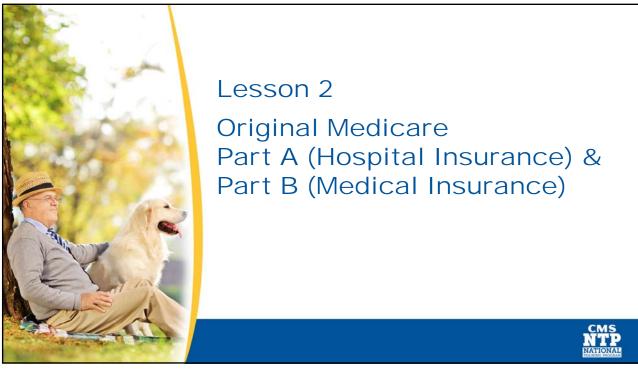












Part A (Hospital Insurance) Covers Inpatient care in a hospital, including: Semi-private room Meals General nursing Drugs (including methadone to treat an opioid use disorder) Other hospital services and supplies Inpatient care in a skilled nursing facility (SNF) after a related 3-day inpatient hospital stay

2024 Getting Started With Medicare

15

Part A (Hospital Insurance) Covers (continued) Part A helps cover: ② Blood (inpatient) ② Hospice care ③ Home health care ③ Inpatient care in a religious nonmedical health care institution (RNHCI) 2024 Getting Started With Medicare Continued) Part A Hospital Insurance

Paying for Part A 2024

Most people don't pay a premium for Part A, but:

- If you or your spouse paid FICA taxes for at least 10 years, you get Part A without paying a premium
- You may have a **penalty** if you don't enroll when first eligible for Part A (if you have to buy it)
 - · Your monthly premium may go up 10%
 - You'll have to pay the higher premium for twice the number of years you could've had Part A, but didn't sign up



2024 Getting Started With Medicare 1

17

What You Pay in Original Medicare in 2024: Part A

Hospital Inpatient Stay

- \$1,632 deductible for each benefit period.
- Days 1–60: \$0 coinsurance for each benefit period.
- Days 61–90: \$408 coinsurance per day of each benefit period.
- Days 91 and beyond: \$816 coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime).
- Beyond lifetime reserve days: all costs.

NOTE: You pay for private-duty nursing, a television, or a phone in your room. You pay for a private room unless it's medically necessary.

Mental Health Inpatient Stay

- \$1,632 deductible for each benefit period.
- Days 1–60: \$0 coinsurance per day of each benefit period.
- Days 61–90: \$408 coinsurance per day of each benefit period.
- Days 91 and beyond: \$816 coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime).
- Beyond lifetime reserve days: all costs.
- 20% of the Medicare-approved amount for mental health services you get from doctors and other providers while you're a hospital inpatient.

NOTE: There's no limit to the number of benefit periods you can have when you get mental health care in a general hospital. You can also have multiple benefit periods when you get care in a psychiatric hospital. Remember, there's a lifetime limit of 190 days.

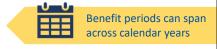
2024

Getting Started With Medicare

18

(continued)			
Skilled Nursing Facility (SNF) Stay	 Days 1–20: \$0 for each benefit period. Days 21–100: \$204.00 coinsurance per day for each benefit period. Days 101 and beyond: all costs. 		
Home Health Care	 \$0 for home health care services. 20% of the Medicare-approved amount for durable medical equipment (DME). 		
Hospice Care	 \$0 for hospice care. You may need to pay a copayment of no more than \$5 for each drug and other similar products for pain relief and symptom control while you're at home. In the rare case your drug isn't covered by the hospice benefit, your hospice provider should contact your Medicare drug plan to see if it's covered under Medicare drug coverage (Part D). You may need to pay 5% of the Medicare-approved amount for inpatient respite care. Medicare doesn't cover room and board when you get hospice care in your home or another facility where you live (like a nursing home). 		
Blood	 If hospital gets it from a blood bank at no charge, you have no charge. If the hospital has to buy blood for you, you must either pay the hospital costs for the first 3 units of blood you get in a calendar year or have the blood donated by you or someone else. 		

Benefit Periods in Original Medicare



Each benefit period:

- · Begins the day you first get inpatient care in hospital or SNF
- Ends after being home for 60 days in a row (not in a hospital or skilled care in a SNF)
- You pay Part A deductible for each benefit period
- No limit to number of benefit periods you can have

2024

Getting Started With Medicare

20



Medicare Part B (Medical Insurance) Covers



- Doctors' services
- Outpatient medical and surgical services and supplies
- Clinical lab tests
- Durable medical equipment (DME) (like walkers and wheelchairs)
- Diabetic testing equipment and supplies
- Preventive services (like flu shots and a yearly wellness visit)
- Home health care
- Medically necessary outpatient physical and occupational therapy, and speech-language pathology services
- Outpatient mental health care services

2024

Getting Started With Medicare

22

Part B: Preventive Services

- Abdominal aortic aneurysm screening
- Alcohol misuse screenings and counseling
- Bone mass measurements
- Cardiovascular behavioral therapy
- Cardiovascular disease screenings
- Cervical and vaginal cancer screenings
- Colorectal cancer screenings
- Counseling to prevent tobacco use and tobacco-caused disease
- Depression screening
- Diabetes screenings
- Diabetes self-management training
- Flu shots
- Glaucoma tests
- Hepatitis B shots

- Hepatitis B Virus infection screening
- Hepatitis C screening tests
- HIV (Human Immunodeficiency Virus) screenings
- Lung cancer screenings
- Mammograms
- Medicare Diabetes Prevention Program
- Nutrition therapy services
- Obesity behavioral therapy
- Pneumococcal shots
- Prostate cancer screenings
- Sexually transmitted infection (STI) screenings & counseling
- "Welcome to Medicare" preventive visit
- Yearly "Wellness" visit

2024 Getting Started With Medicare

23

What's Not Covered by Part A & Part B?

Some of the items and services that Part A and Part B don't cover include:



- Most dental care
- Vision (for prescription glasses)
- Dentures
- Cosmetic surgery
- Massage therapy
- Routine physical exams

- Hearing aids and exams for fitting them
- Long-term care
- Concierge care
- Covered items or services you get from an opt out doctor or other provider

They may be covered if you have other coverage, like Medicaid or a Medicare Advantage Plan that covers these services.

2024

Getting Started With Medicare

24

What You Pay in 2024: Part B Monthly Premiums

Standard premium is \$174.70



Some people who get Social Security benefits pay less due to the statutory hold harmless provision



Your premium may be higher if you didn't choose Part B when you first became eligible or if your income exceeds a certain threshold

2024

Getting Started With Medicare

25

25

Monthly Part B Standard Premium—Income-Related Monthly Adjustment Amount (IRMAA) for 2024

If your yearly income in 2022 (for what you pay in 2024) was:

File Individual Tax Return	File Joint Tax Return	File Married & Separate Tax Return	You pay each month (in 2024)
\$103,000 or less	\$206,000 or less	\$103,000 or less	\$174.70
Above \$103,000 up to \$129,000	Above \$206,000 up to \$258,000	Not applicable	\$244.60
Above \$129,000 up to \$161,000	Above \$258,000 up to \$322,000	Not applicable	\$349.40
Above \$161,000 up to \$193,000	Above \$322,000 up to \$386,000	Not applicable	\$454.20
Above \$193,000 and less than \$500,000	Above \$386,000 and less than \$750,000	Above \$103,000 and less than \$397,000	\$559.00
\$500,000 or above	\$750,000 or above	\$397,000 or above	\$594.00

Paying the Part B Premium

- Deducted monthly from
 - Social Security benefit payments
 - Railroad retirement benefit payments
 - Federal retirement benefit payments
- If not deducted
- Billed every 3 months
- Medicare Easy Pay to deduct from bank account
- Contact Social Security, the Railroad Retirement Board, or the Office of Personnel Management about premiums

2024

Getting Started With Medicare

27

27

Part B Late Enrollment Penalty

- See how your insurance works with Medicare
- Contact your employer/union benefits administrator
- · Penalty for not signing up when first eligible
- 10% more for each full 12-month period
- May have a penalty as long as you have Part B
- Sign up during a Special Enrollment Period
- Usually, no penalty if you sign up within 8 months of employer coverage ending

2024

Getting Started With Medicar

28

What You Pay in Original Medicare in 2024: Part B Yearly Deductible Services 20% for most covered services, like doctor's services and some preventive services, if provider accepts assignment 50 for most preventive services 20% for outpatient mental health services, and copayments for hospital outpatient services NOTE: If you can't afford to pay these costs, there are programs that may help. These programs are discussed later in Lesson 7.

29

Decision: Should I Keep/Sign Up for Part B?

Consider:

- Most people pay a monthly premium
 - · Usually deducted from Social Security/RRB benefits
 - · Amount depends on income
- Part B may supplement employer coverage
 - Contact your benefits administrator to understand the impact to your employer plan
 - If you don't have other coverage, declining Part B will mean you don't have full coverage
- Sometimes, you must have Part B

2024

Getting Started With Medicare

30





Medigap Policies

- Are sold by private insurance companies
- Fill gaps in Original Medicare coverage, like copayments, coinsurance, and deductibles
- Each standardized Medigap policy under the same plan letter:
 - Must offer the same basic benefits, no matter who sells it
 - May vary in costs
- Plans are different in Minnesota, Massachusetts, and Wisconsin



2024 Getting Started With Medicare 33

33

Medigap Plan Coverage Medicare Supplement Insurance (Medigap) plans Medicare Part A coinsurance and hospital costs (up 100% 100% 100% 100% 100% 100% 100% 100% 100% 100% to an additional 365 days after Medicare benefits are used Medicare Part B coinsurance or copayment 100% 100% 100% 100% 100% 100% 50% 75% 100% 100%** 100% 100% Blood (first 3 pints) 100% 100% 100% 100% 100% 100% 50% 75% Part A hospice care coinsurance or copayment 100% 100% 100% 100% 100% 100% 50% 75% 100% 100% Skilled nursing facility care coinsurance 100% 100% 100% 100% 100% 50% 75% Part A deductible 100% 100% 100% 50% 100% 100% Part B deductible 100% Part B excess charges 100% Foreign travel emergency (up to plan limits) 80% 80% 80% 80% 80% Out-of-pocket limit in Out-of-pocket limit in 2024** 2024** * Plans F and G also offer a high-deductible plan in some states. With this option, you must pay for Medicare-covered costs (coinsurance, copayments, and deductibles) up to the deductible amount of \$2,800 in 2024 before your policy pays anything. (Plans C and F aren't available to people who were newly eligible for Medicare on or after January 1, 2020.) ** For Plans K and L, after you meet your out-of-pocket yearly limit and your yearly Part B deductible, the Medigap plan pays 100% of covered services for the rest of the calendar year. ** Plan N pays 100% of the Part B coinsurance, except for a copayment of up to \$20 for some office visits and up to a \$50 copayment for emergency room visits that don't result in inpatient admission. Getting Started With Medicare

Medigap Plans

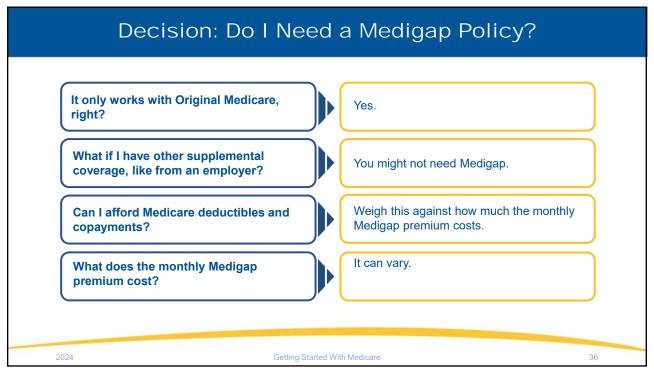
- Standardized plans identified by a letter
 - Plans A, B, D, G, K, L, M, and N are currently sold
 - If your Medicare started before 1/1/20, you are eligible to purchase Medigap Plan C or F
 - Companies don't have to sell all plans
 - Plans with the same letter must offer the same basic benefits
 - Only the policy cost will vary between companies

2024

Getting Started With Medicare

35

35



When's the Best Time to Buy a Medigap Policy?

Usually, during your Medigap Open Enrollment Period (OEP):

- Begins the month you're 65 or older and enrolled in Part B (must have Part A)
- Lasts 6 months minimum; may be longer in your state
- During your Medigap OEP, companies can't:
 - · Refuse to sell you any Medigap policy they offer
 - · Make you wait for coverage
 - Charge more because of a past/present health problem



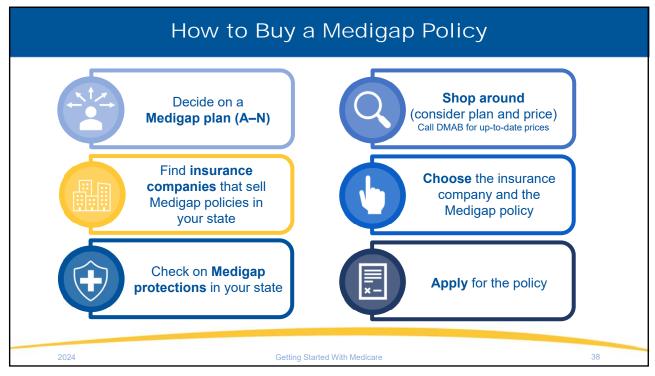


2024

Getting Started With Medicare

37

37





Lesson 4
Medicare Drug Coverage
(Part D)



39

Medicare Drug Coverage (Part D)

- An optional benefit available to all people with Medicare
- Run by private companies that contract with Medicare
- Provided through:
 - Medicare drug plans (also known as PDPs) (work with Original Medicare)
 - Medicare Advantage Plans with drug coverage (also known as MA-PDs)
 - Some other Medicare health plans

2024

Getting Started With Medicare

40

How Part D Works

- It's optional
 - · You can choose a plan and join
 - · May pay a lifetime penalty if you join late
- Plans have formularies (lists of covered drugs), which:
 - Must include range of drugs in each category
 - · Are subject to change—you'll be notified
- Your out-of-pocket costs may be less if you use a preferred pharmacy
- If you have limited income and resources, you may get Extra Help

2024 Getting Started With Medicare

41

If you join late, you may

have a lifetime penalty.

41

Medicare Drug Plan Costs: What You Pay in 2024

Most people will pay:

- A monthly **premium** (varies by plan and income)
- A yearly **deductible** (if applicable)
- Copayments or coinsurance
- Out-of-pocket costs
 - A percentage of the cost while in the coverage gap, which begins at \$5,030 for out-of-pocket spending \$0 after spending \$8,000 out-of-pocket will automatically get catastrophic coverage



2024

Getting Started With Medicare

42

Income-Related Monthly Adjustment Amount (IRMAA): Part D Premium for 2024

If your filing status and yearly income in 2022 was:

File Individual Tax Return	File Joint Tax Return	File Married & Separate Tax Return	You pay each month (in 2024)
\$103,000 or less	\$206,000 or less	\$97,000 or less	Your plan premium (YPP)
Above \$103,000 up to \$129,000	Above \$206,000 up to \$258,000	Not applicable	\$12.90 + YPP
Above \$129,000 up to \$161,000	Above \$258,000 up to \$322,000	Not applicable	\$33.30 + YPP
Above \$161,000 up to \$193,000	Above \$322,000 up to \$386,000	Not applicable	\$53.80 + YPP
Above \$193,000 and less than \$500,000	Above \$386,000 and less than \$750,000	Above \$103,000 and less than \$497,000	\$74.20 + YPP
\$500,000 or above	\$750,000 or above	\$397,000 or above	\$81.00 + YPP

43

Part D Late Enrollment Penalty 2024

- You may have to pay more if you wait to enroll, unless you have:
 - Creditable drug coverage
 - Extra Help
- You'll pay the penalty for as long as you have coverage
 - 1% for each full month eligible and without creditable drug coverage
 - Multiply percentage by base beneficiary premium \$34.70 in 2024.
 Amount changes every year

2024

Getting Started With Medicare

44

Who Can Join Part D?

	To join a Medicare Drug Plan	To join a Medicare Advantage Plan with Drug Coverage
You must	Medicare Part A (Hospital Insurance)	Part A
have	and/or	and
Have	Medicare Part B (Medical Insurance)	Part B

NOTE: To join any Medicare health plan with drug coverage you must be a United States citizen or lawfully present in the U.S.

2024

Getting Started With Medicare

45

45

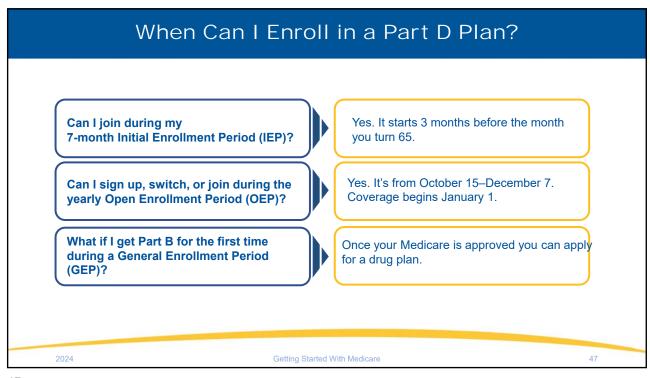
Inflation Reduction Act (IRA) CMS Provisions

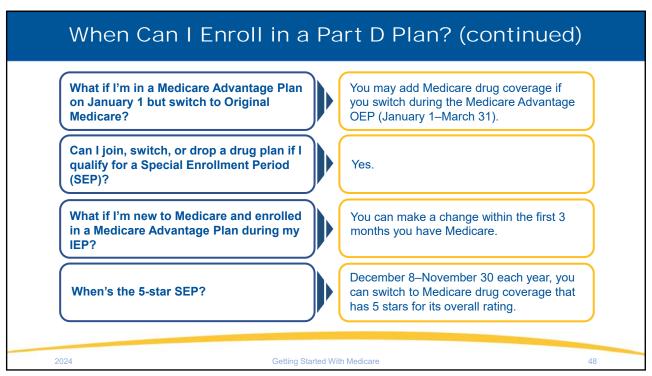
- Places a \$35 monthly out-of-pocket cap on Medicare-covered insulins
- Makes ACIP-recommended vaccines free under Medicare Part D prescription drug coverage
- Makes Medicare Part D prescription drug coverage more affordable
- People with very high prescription drug costs will no longer pay once they reach the "catastrophic phase"
- Full low-income subsidy expanded for people with low incomes
- 2025: All people with Medicare part D will have a \$2000 annual out-ofpocket cap on their drug costs
- 2026: Allows Medicare to negotiate the price of certain high-cost brand name drugs

2024

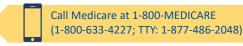
Getting Started With Medicar

46





Choosing a Part D Plan



- Compare plans by computer or phone:
 - Find health and drug plans at Medicare.gov/plan-compare
 - Call Medicare
 - Contact your Delaware Medicare Assistance Bureau "DMAB" 302-674-7364
- To join a Medicare drug plan, you can:
 - Enroll at Medicare.gov/plan-compare or on the plan's website
 - Call DMAB or 1-800-Medicare
 - Enroll on the plan's website or call the plan
 - · Complete a paper enrollment form
 - The plan will notify you whether it has accepted or denied your application

2024 Getting Started With Medicare 49

49

Decision: Should I Enroll in a Part D Plan?

If you <u>have</u> creditable drug coverage, consider costs and coverage:

- Will it pay at least as much as standard Medicare drug coverage?
- Will you or your spouse or dependents lose your health coverage if you join a Medicare drug plan?
- How do your out-of-pocket drug costs compare to out-of-pocket drug costs with a Medicare drug plan?
- How will your costs change if you get Extra Help with your Medicare drug plan costs?
- Is your current drug coverage comprehensive?

If you <u>don't have</u> creditable drug coverage, consider possible penalties:

- Will joining when you're first eligible help you avoid a likely lifetime late enrollment penalty if you join a plan later?
- Do you qualify for Extra Help? (If so, you may enroll in a plan without penalty.

2024

Getting Started With Medicare

50



Lesson 5
Medicare Advantage &
Other Medicare Health
Plans



51

Medicare Advantage Plans (Part C)

M Part A



☑ Part B



Most plans include:

☑ Part D



Some plans also include:

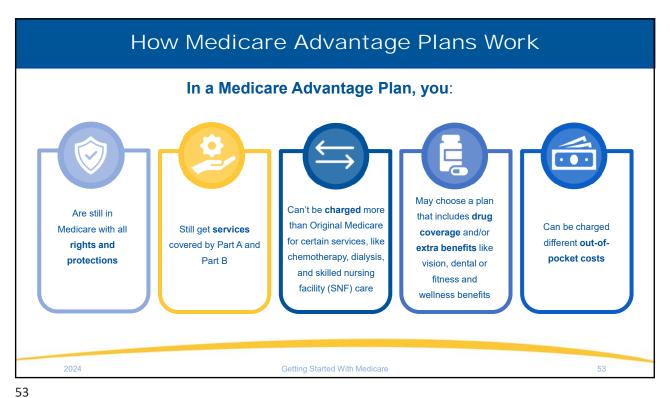
☐ Lower out-of-pocket costs

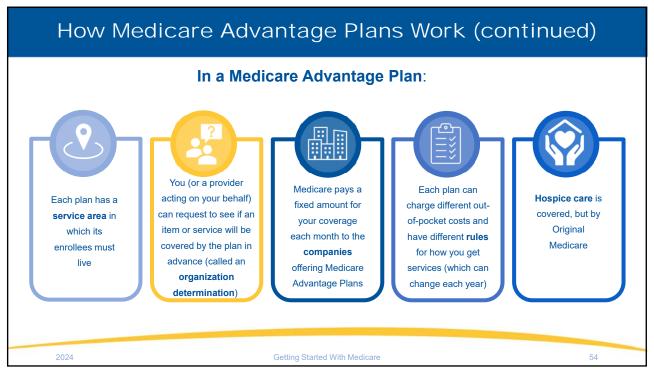
- Another way to get your Medicare Part A (Hospital Insurance) and Part B (Medical Insurance)
 coverage
- Offered by Medicare-approved private companies that must follow rules set by Medicare
- Most Medicare Advantage Plans include drug coverage (Part D)
- In most cases, you'll need to use health care providers who participate in the plan's network (some plans offer out-of-network, but typically at a higher cost)

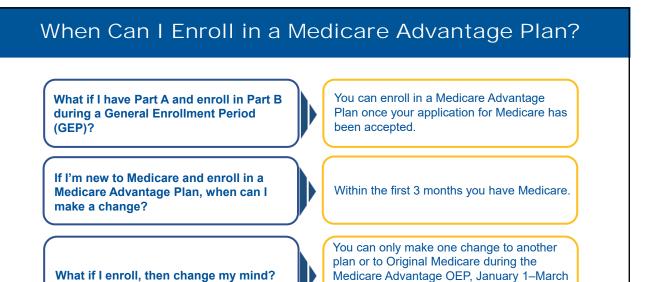
2024

Getting Started With Medicare

52







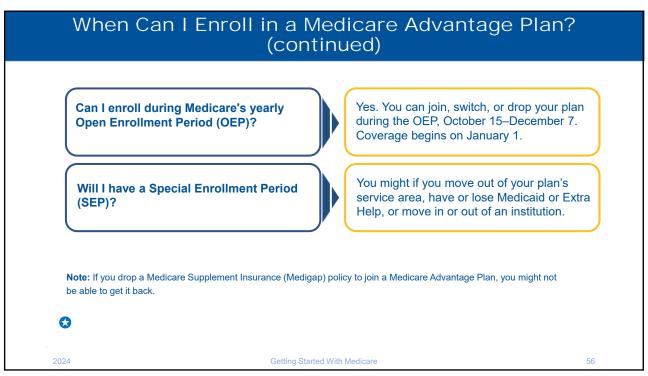
Getting Started With Medicare

55

31. Coverage begins the 1st of the month

after the plan gets your request.

55



Medicare Advantage Costs

- You still pay the Part B premium
 - · A few plans may pay all or part for you
- State assistance for some people with limited income and resources
- You may pay plan an additional monthly premium
- You pay deductibles, coinsurance, and copayments
 - · Different from Original Medicare
 - Varies from plan to plan
 - · May be higher if out of network

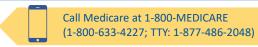
2024

Getting Started With Medicare

57

57

How Do I Enroll in a Medicare Advantage Plan?

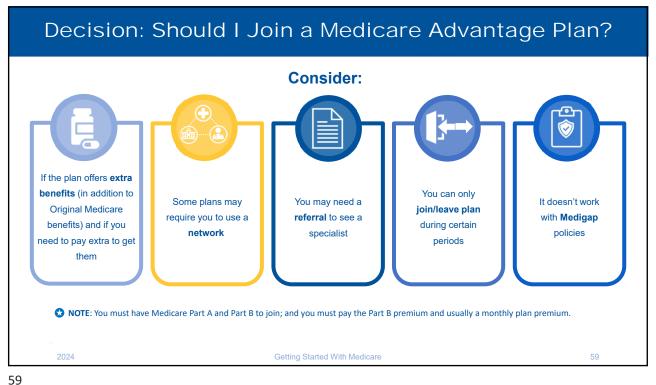


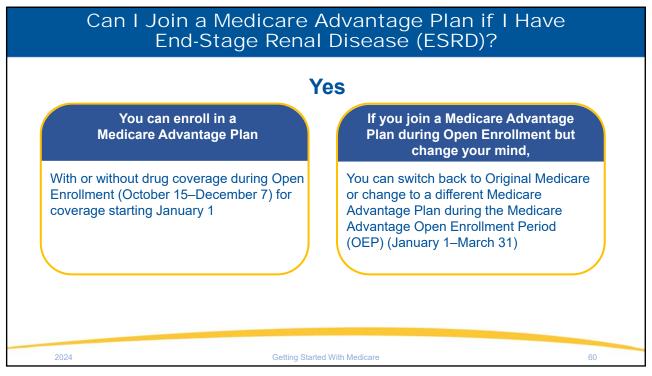
- Find health and drug plans at Medicare.gov/plan-compare
- Once you understand the plan's rules and costs, here's how to join:
 - Visit the plan's website to see if you can join online
 - Fill out a paper enrollment form
 - Call the plan for plan details and to join (visit <u>Medicare.gov/plan-compare</u> to get your plan's contact information)
 - Call DMAB 302-674-7364 or Medicare 1-800-633-4227

2024

Getting Started With Medicare

58





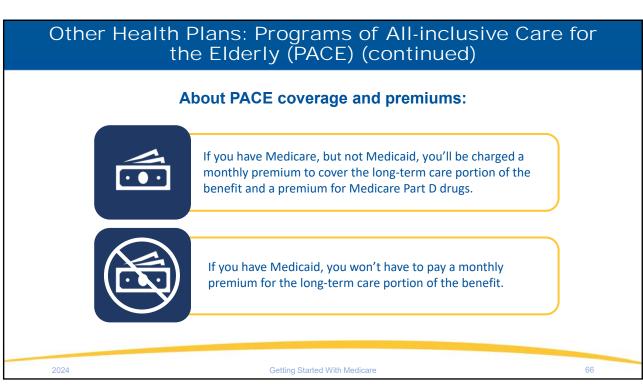
Original Medicare	Medicare Advantage (Part C)		
You can go to any doctor or hospital that takes Medicare, anywhere in the U.S.	In many cases, you'll need to use doctors and other providers who are in the plan's network (for non-emergency care). Some plans offer non-emergency coverage out of network, but typically at a higher cost.		
In most cases, you don't need a referral to see a specialist.	You may need to get a referral to see a specialist.		

Original Medicare vs. Medicare Advantage: Cost			
Original Medicare	Medicare Advantage		
For Part B-covered services, you usually pay 20% of the Medicare-approved amount after you meet your deductible. This is called your coinsurance.	Out-of-pocket costs vary—plans may have different out-of-pocket costs for certain services.		
You pay a premium (monthly payment) for Part B . If you choose to join a Medicare drug plan, you'll pay a separate premium for your Medicare drug coverage (Part D).	You pay the monthly Part B premium and may also have to pay the plan's premium . Plans may have a \$0 premium and may help pay all or part of your Part B premium. Most plans include Medicare drug coverage (Part D).		
There's no yearly limit on what you pay out of pocket, unless you have supplemental coverage—like Medicare Supplement Insurance (Medigap).	Plans have a yearly limit on what you pay out of pocket for services Medicare Part A and Part B covers. Once you reach your plan's limit, you'll pay nothing for services Part A and Part B covers for the rest of the year.		
You can get Medigap to help pay your remaining out- of-pocket costs (like your 20% coinsurance). Or, you can use coverage from a former employer or union, or Medicaid.	You can't buy and don't need Medigap.		

Original Medicare vs. Medicare Advantage: Coverage			
Original Medicare	Medicare Advantage (Part C)		
Original Medicare covers most medically necessary services and supplies in hospitals, doctors' offices, and other health care facilities. Original Medicare doesn't cover some benefits like eye exams, most dental care, and routine exams.	Plans must cover all of the medically necessary services that Original Medicare covers. Most plans offer some extra benefits that Original Medicare doesn't cover—like some routine exams and vision, hearing, and dental.		
You can join a separate Medicare drug plan to get Medicare drug coverage (Part D).	Medicare drug coverage (Part D) is included in most plans. In most types of Medicare Advantage Plans, you can't join a separate Medicare drug plan.		
In most cases, you don't have to get a service or supply approved ahead of time for Original Medicare to cover it.	In some cases, you have to get a service or supply approved ahead of time for the plan to cover it.		
2024 Getting Starte	ed With Medicare 63		

Original Medicare	Medicare Advantage (Part C)
Original Medicare generally doesn't cover care outside the U.S. You may be able to buy a Medicare Supplement Insurance (Medigap) policy that covers care outside the U.S.	Plans generally don't cover care outside the U.S. Some plans may offer a supplemental benefit that covers emergency and urgently needed services when traveling outside the U.S.





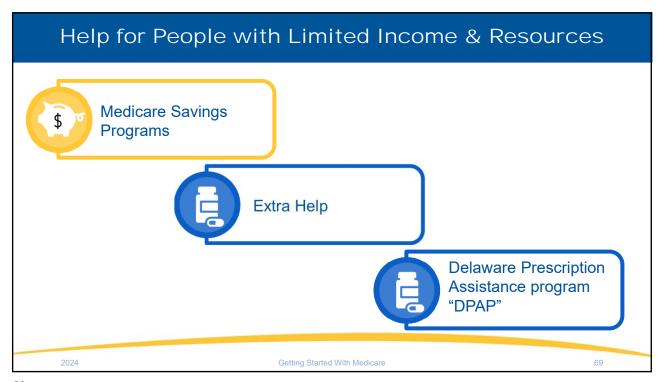
Other Health Plans: Programs of All-inclusive Care for the Elderly (PACE) (continued) Delaware PACE Programs: New Castle County: St. Frances LIFE Wilmington: 302-660-3351 Newark: 302-661-7400 Kent/Sussex County: PACE for Life Milford Wellness Village Milford: 302-865-3565 Website: Paceyourlifemwv.com

67



Lesson 6
Help for People with
Limited Income &
Resources





Minimum Federal Eligibility Requirements for Medicare Savings Programs				
Medicare Savings Programs	Individual Monthly Income Limits	Married Couple Income Limits	Helps Pay Your	
Qualified Medicare Beneficiary (QMB)	\$1,215	\$1,643	Part A and Part B premiums, and other cost-sharing (like deductibles, coinsurance, and copayments)	
Specified Low-Income Medicare Beneficiary (SLMB)	\$1,458	\$1,972	Part B premiums only	
Qualifying Individual (QI)	\$1,640	\$2,219	Part B premiums only	
2024	Getting Starte	ed With Medicare	70	

What's Extra Help?

- Program to help people pay for Medicare drug costs (Part D) (also called the low-income subsidy (LIS))
- If you have the lowest income and resources, you pay no premiums or deductible, and small or no copayments
- If you have slightly higher income and resources, you pay reduced deductible and a little more out of pocket
- No coverage gap or late enrollment penalty if you qualify for Extra Help
- NOTE: A Special Enrollment Period (SEP) allows you to change your Medicare drug plan (also known as a PDP) once per guarter in the first 3 guarters of the year

Getting Started With Medicare

71

Qualifying for Extra Help

You automatically qualify for Extra Help if you get:

- Full Medicaid coverage
- Supplemental Security Income (SSI)
- Help from Medicaid paying your Medicare premiums (Medicare Savings Programs; sometimes called "partial dual")

If you don't automatically qualify you must:

- Apply online at ssa.gov/benefits/medicare/prescripti onhelp.html
- Call DMAB at 302-674-7364
- Call Social Security at 1-800-772-1213; TTY: 1-800-325-0778

Getting Started With Medicare

Extra Help	Monthly Income Limits	Resource Limits	Helps Pay Your
Single Person	\$1,822	\$16,660	Pays some or most of your Medicare Part D premiums and prescription drug cost.
Married Couple	\$2,465	\$33,240	Pays some or most of your Medicare Part D premiums and prescription drug cost.

Getting Started With Medicare

73

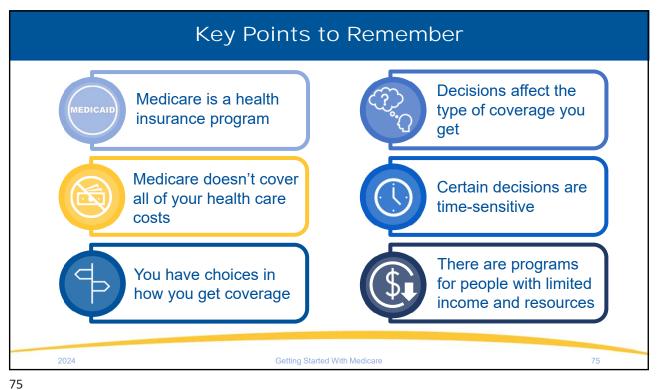
Delaware Prescription Assistance Program (DPAP)

DPAP program will pay up to \$3000 per person each benefit year. Copays are 25% or a minimum of \$5.00. DPAP does not pay for mail order drugs.

To Qualify:

- Resident of Delaware and 65 or older, or on Medicare due to disability.
- Income below \$2,226 per month or have a drug cost more than 40% of your income.
- Enrolled into a Medicare Prescription Drug Plan
- DPAP 1-844-245-9580

Getting Started With Medicare



Helpful Websites and Phone Numbers

- Delaware Medicare Assistance Bureau "DMAB" Insurance.delaware.gov/dmab 302-674-7364
- Medicare

www.Medicare.gov

1-800-633-4227

Social Security 1-800-772-1213

www.ssa.gov

1-800-772-1213

 Delaware Senior Medicare Patrol "SMP" (Report Medicare Fraud) dhss.delaware.gov/dhss/dsaapd/medicare_fraud.html 1-800-223-9074

Getting Started With Medicare