

Medicare Annual Enrollment is Happening Now

Before choosing a Medicare plan, know your options, do your research and select the plan that best meets your needs

Nov 29, 2019

Medicare annual enrollment opened in October and will close on Dec. 7. Determining which Medicare plan is the best is an important decision for individuals nearing age 65 or those who qualify due to a disability.

According to Ed Sandrick, director of Humana Veterans Channel, even veterans receiving benefits through the VA might be interested in additional health care options, such as access to urgent care or providers closer to home.

“Many Medicare and Medicare Advantage plans will not conflict with a veteran’s VA benefits. They can have both,” said Sandrick, a member of VFW Post 3873 in Naperville, Ill.

Information about various plans is available at www.medicare.gov. The sign-up window for Medicare lasts seven months and begins three months before you turn 65.

“Evaluating the costs of the various Medicare plans, including premiums, deductibles, co-payments and maximum out-of-pockets, is important information to consider,” Sandrick said. “Also important to consider, think about the provider networks that participate in the plans. Veterans should study their total health care expenses from the past year and what they may spend in the coming year.”

Medicare Part A and Part B also is known as original Medicare. Part A includes hospital stays, skilled-nursing facilities, hospice and some home health care. Part B covers specific doctors’ services, outpatient care, medical supplies and preventative services.

Original Medicare does not cover costs at 100 percent, and supplemental plans are designed to make up the difference.

NATIONAL HEADQUARTERS

406 W. 34th Street
Kansas City, MO 64111
Office 816.756.3390
Fax 816.968.1157

WASHINGTON OFFICE

200 Maryland Ave., N.E.
Washington, D.C. 20002
Office 202.543.2239
Fax 202.543.6719

info@vfw.org
www.vfw.org

After enrolling in Medicare Part A and B, you have the opportunity to enroll in an all-in-one plan called Medicare Advantage, or Part C.

“All the benefits under Part A and B are covered through a private insurer,” Sandrick said. “It also may include additional benefits such as fitness center memberships as well as dental, hearing and vision coverage.”

Prescription coverage is an important part of the Medicare decision, too.

“Additionally, veterans can look at their prescription medication needs and plans’ drug formularies — that is, the list of drugs a Medicare Advantage prescription drug plan covers,” Sandrick said. “Original Medicare alone does not include prescription drug coverage. Veterans who may be receiving their prescription drugs from their VA benefits may not need a plan that includes prescription drugs and may want to explore a Medicare Advantage plan that does not have prescription coverage built in to avoid benefit conflicts.”

Another option is Medigap, a Medicare supplement that covers some health care costs that are not covered by Medicare.

“These standardized plans do not include prescription drug coverage, nor do they include the extra benefits that many have come to expect from Medicare Advantage plans and generally have a higher monthly premium,” Sandrick added.

Finally, Medicare Part D provides prescription drug coverage and is offered by insurance companies approved by the government.

Medicare participants have the opportunity to make changes to their plan during annual enrollment periods, Oct. 15 through Dec. 7.

If you have questions about your Medicare options, call VFW’s Member Benefits Department at 1.800.821.2606, option 1.

This article is featured in the November/December 2019 issue of [VFW magazine](#), and was written by Janice Phelan. Phelan is a freelance writer based in Lee's Summit, Mo.