

MEDICARE

Myth Busters



Dedicated Senior
Medical Center
A CHENMED COMPANY

A man and a woman are playing in the sand on a beach. The man, on the left, has white hair and is wearing a green short-sleeved shirt and white shorts. He is smiling and has his arms outstretched. The woman, on the right, is wearing a blue and white striped long-sleeved shirt, white pants, and a straw hat. She is also smiling and has her arms outstretched. They are both holding handfuls of sand, which is flying through the air around them. The background shows the ocean and a clear sky.

Don't make a decision about your health based on a Medicare myth.

Medicare Advantage plans are a helpful, trustworthy option for adults ages 65 and older looking for comprehensive healthcare coverage! When paired with Dedicated Senior Medical Center's primary care, you can experience quality healthcare as it should be.

But don't be fooled by the myths surrounding these plans that may cause confusion and make it difficult to understand their benefits. These are 11 common myths about Medicare Advantage plans.

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MYTH #1

Medicare Advantage plans are more expensive than Original Medicare.

False: In fact, Medicare Advantage is the only Medicare plan that limits how much you must pay annually, called the Maximum Out-of-Pocket (MOOP). Many Medicare Advantage plans are \$0 premium plans and offer more benefits and coverage than Original Medicare. According to the Better Medicare Alliance, Medicare Advantage beneficiaries spend nearly \$2,000 less annually on out-of-pocket costs and premiums.

With Medicare Advantage, you may be entitled to extras such as dental, vision, hearing, hearing aids, prescriptions and over-the-counter medicine discounts, as well as access to value-based care by doctors trained in advanced preventive medicine.

Medicare Advantage is the only plan that limits MOOP & offers additional benefits



MYTH #2

Medicare Advantage plans restrict your choice of doctors and hospitals.

False: Many Medicare Advantage plans have networks of doctors and hospitals that you can choose from, just like regular health insurance plans. Some Medicare Advantage plans offer “out-of-network” coverage, which means that if you need to see a doctor or go to a hospital not in the plan’s network, the plan will cover some or the entire cost.

Medicare Advantage plans have networks of doctors & hospitals to choose from



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MYTH #3

Medicare Advantage plans limit your ability to change plans.

False: Medicare Advantage plans are required by law to offer a Medicare Annual Enrollment Period (AEP) when you can switch to a different Medicare Advantage plan or change back to Original Medicare. AEP takes place from October 15 to December 7 every year.

MYTH #4

Original Medicare covers all my medical needs and costs.

False: Original Medicare only covers Part A (hospital visits) and Part B (medical services). Private insurance companies cover Part C (also known as Medicare Advantage plans). Part C offers additional benefits such as dental, vision, hearing aids, etc. and Part D (prescription drug coverage). Unlike Original Medicare, many Medicare Advantage plans already include Part D.

MYTH #5

Medicare Advantage is the same thing as Medicare Supplemental plans (i.e., MedSupp, Medigap).

False: These are two different types of plans, and you cannot have both types of coverage. For example, Medigap is a plan that fills in the healthcare “gaps” not covered in Original Medicare, such as eye check-ups or coverage for new glasses.

Medicare Advantage is a Medicare-approved plan from a private company that offers an alternative to Original Medicare for your health coverage. These “bundled” plans include Part A, Part B, and most all include Part D. You’ll typically need to use doctors in the plan’s network, but there are usually a wide range of options.



Original Medicare covers Part A (hospital visits) & Part B (medical services) only



Many **Medicare Advantage** plans include Part D (prescription drug coverage) & other benefits such as dental & vision

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MYTH #6

Travel is not covered with Medicare Advantage.

False: Medicare Advantage takes care of urgent care coverage and emergencies for travel, with some plans having worldwide coverage. Make sure to check which doctors and hospitals are in a plan's network before you choose a plan, so you can ensure you receive care from the providers you want. In most situations, Original Medicare plans don't cover medical costs outside the U.S.

MYTH #7

Medicare Advantage does not cover chronic diseases.

False: Medicare Advantage plans cannot deny coverage based on your health status. If you are sick or have a chronic disease such as COPD, heart disease or diabetes, you can get coverage and great healthcare. Certain areas even have special Medicare Advantage plans called "Chronic Condition Special Needs Plans" to ensure you get quality care for your condition at an affordable price.

MYTH #8

Medicare Advantage plans are difficult to enroll in.

False: Enrolling in a Medicare Advantage plan is a simple process. To enroll in a Medicare Advantage plan, you can do your own research, or a Medicare licensed agent can help you find the right plan. They can explain how Medicare Advantage plans work; what each plan exactly covers and how much it costs; and see factors such as which doctors and hospitals are included per plan.



Medicare Advantage
takes care of urgent care &
emergencies for travel



Medicare Advantage
provides care for chronic
diseases (COPD, heart
disease, diabetes)

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MYTH #9

Medicare Advantage plans are not as reliable as Original Medicare.

False: The law requires that Medicare Advantage plans follow the same rules and regulations as Original Medicare and cover all the same services. In fact, some Medicare Advantage plans offer additional benefits that Original Medicare does not cover, like gym memberships and transportation to medical appointments.

Medicare Advantage plans follow the same rules & cover the same services as Original Medicare



MYTH #10

Medicare Advantage plans have high deductibles and copay.

False: Medicare Advantage plans often have lower deductibles and copays than Original Medicare, making healthcare more affordable. The important thing to remember is that there are plenty of Medicare Advantage plans out there that can offer you great benefits without high deductibles and copays.

Medicare Advantage plans often have lower deductibles & copays



MYTH #11

You can only enroll in Medicare Advantage during the Annual Enrollment Period (AEP).

False: You can enroll in Medicare Advantage if you have moved, have a chronic condition (such as diabetes, heart disease or COPD), have been impacted by a natural disaster, or if there is a 5-star plan in your neighborhood. Other situations may allow you to switch plans. Check with a Medicare Licensed broker to learn more.



Get the facts about Medicare Advantage.

We get it. Choosing the right plan – or coverage to meet your needs – is a big deal. You want to make the right decision and avoid all the confusion. We're here to help you every step of the way by connecting you with a trusted and licensed Medicare agent. They will help you explore your options, answer questions, and help you enroll in the plan that's right for you.

Ready to see how Dedicated Senior Medical Center and Medicare Advantage can help you live your best life?

- Take a tour of our new medical center.
- Meet and greet our providers and care team.

Call us today: (855) 472-1337

Learn more about us at **www.Dedicated.care**.

At Dedicated Senior Medical Center, we can help you on the path to choosing your Medicare Advantage plan and partnering to help you be healthy and live your best life.



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