

Medicare:

Get to know the basics



SUMMIT
HEALTH

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What is Medicare?

We're here to help you be your healthy best. We've put together this guide to help you understand the basics about Medicare — the federal government program that provides healthcare coverage. Please take a look and let us know if you have any questions along the way.

Our customer service representatives are uniquely trained to answer your questions. Just call 844-721-4938. TTY users, dial 711.

Medicare comes in different options

You have five options for Medicare coverage: Part A, Part B, Part C, Part D and Medicare Supplement.



Part A and Part B

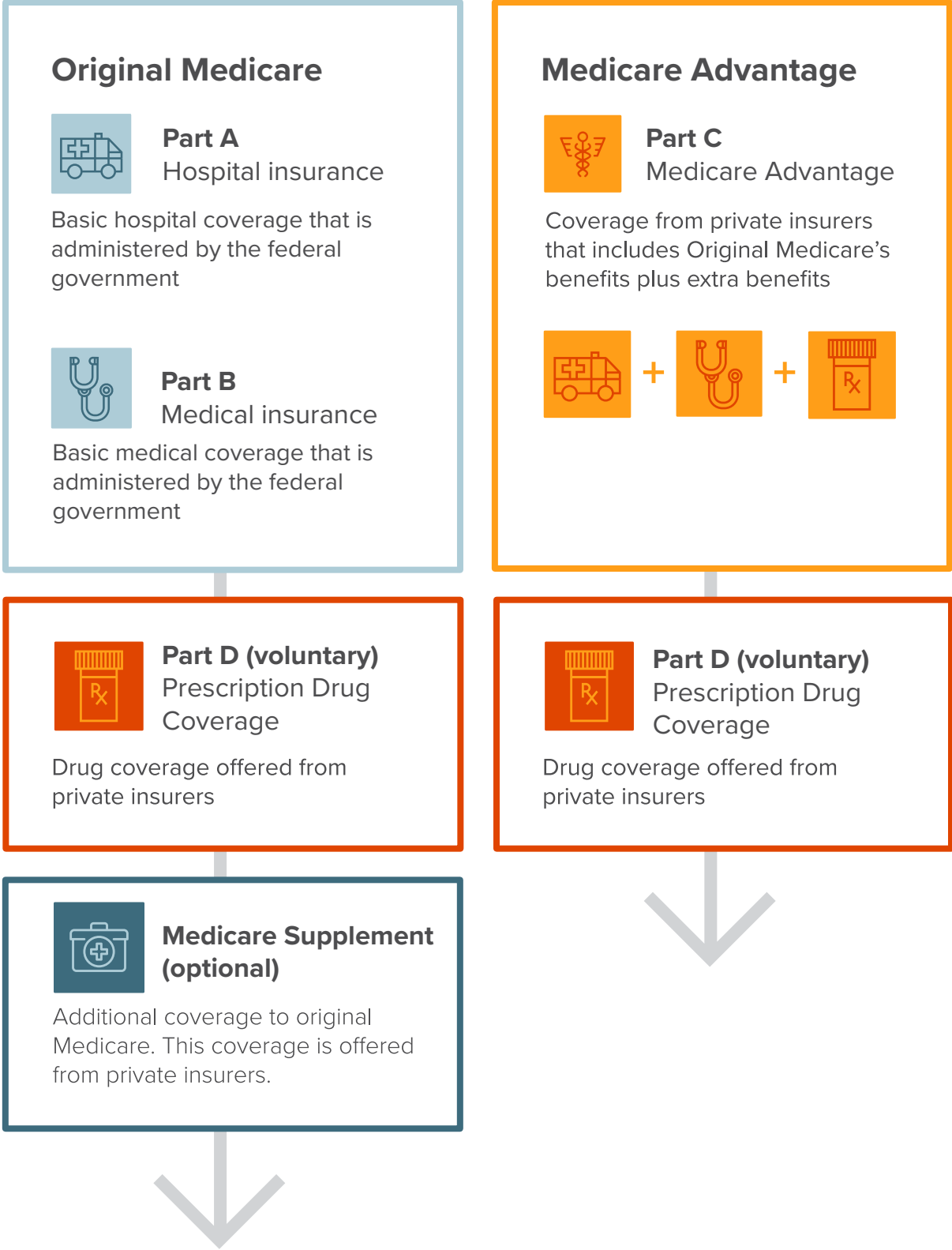
Part A and Part B are also called Original Medicare. Both are administered by the federal government. With Part A and Part B, you can see healthcare providers throughout the U.S. who accept Medicare patients.

Part A and Part B both provide basic coverage, but do not include:

- Most outpatient prescription drugs
- Hearing aids and exams for fitting them
- Routine vision exams and eyeglasses
- Routine annual physical exams with lab tests
- Dental care and dentures
- Long-term care
- Travel outside the U.S. with limited exceptions
- Alternative care, including acupuncture and naturopathic services
- Medical transport services (not by ambulance)



Be sure to enroll in Medicare when you first become eligible. See why on pages 10 and 11.



Comparison tables

Medicare coverage can be more valuable and cost-effective when the benefits that are important to you are combined in a single plan. We’ve created comparison tables to show what benefits Summit Health Medicare Advantage plans include and cost compared to a standard Medicare Supplement plan.

Benefits at a glance:

	Medicare Supp Plan N (Average Non-Smoker 65-69) **	Summit Health Value + Rx (HMO)	Summit Health Standard + Rx (HMO-POS)	Summit Health Premier + Rx (HMO-POS)
Medical Premium	\$133	\$69	\$99	\$140
Medical Deductible	\$203	\$0	\$0	\$0
Part D Prescription Drugs coverage	⊗	✓	✓	✓
Routine Dental	⊗	✓	✓	✓
Routine Vision	⊗	✓	✓	✓
Routine Hearing	⊗	✓	✓	✓

**Premiums, deductibles, and cost-sharing amounted listed are based on 2021 information and may change for 2022. Other Supplemental plans are available.

A closer look at benefits:

	Medicare Supp Plan N (Average Non-Smoker 65-69) **	Summit Health Value + Rx (HMO)	Summit Health Standard + Rx (HMO-POS)	Summit Health Premier + Rx (HMO-POS)
Medical Premium	\$133	\$69	\$99	\$140
Medical Deductible	\$203	\$0	\$0	\$0
Part B excess charges (above Medicare approved amounts)	All Costs	N/A	N/A	N/A
Out of Pocket Maximum INN	None	\$6,650	\$5,100	\$4,000
Part D Prescription Drugs	Not covered Optional PDP Avg. Premium \$34 Deductible \$445	Included in medical premium	Included in medical premium	Included in medical premium
Dental	Not covered Optional Individual Plan = \$56	\$0 Preventive plus \$500 comprehensive allowance included in medical premium	\$0 Preventive plus \$500 comprehensive allowance included in medical premium	\$0 Preventive plus \$500 comprehensive allowance included in medical premium
Routine Vision	Not covered	\$0 exam \$0 frames & lenses	\$0 exam \$0 frames & lenses	\$0 exam \$0 frames & lenses
Routine Hearing	Not covered	\$0 exam \$699 / \$999 per aid	\$0 exam \$699 / \$999 per aid	\$0 exam \$699 / \$999 per aid

**Premiums, deductibles, and cost-sharing amounted listed are based on 2021 information and may change for 2022. Other Supplemental plans are available.

Looking closer at premiums:

	Medicare Supp Plan N (Average Non-Smoker 65-69) **	Summit Health Value + Rx (HMO)	Summit Health Standard + Rx (HMO-POS)	Summit Health Premier + Rx (HMO-POS)
Medical Premium	\$133 x 12 = \$1,596	\$69 x 12 = \$828	\$99 x 12 =\$1,188	\$140 x 12 = \$1,680
Medical Deductible	\$203	\$0	\$0	\$0
Avg. Annual Medical Premium/ Deductible Costs	\$1,799	\$828	\$1,188	\$1,680
Avg. Prescription Drug Plan Premium	\$34 x12 = \$408 lowest premium \$7 x 12 = \$84	Included in medical premium	Included in medical premium	Included in medical premium
Prescription Drug Deductible	\$445	\$250*	\$200*	\$150*
Avg. Annual Medical Premium/ Deductible Costs w/ Prescription Drug Coverage	Avg. PDP = \$2,652 lowest premium PDP = \$2,328	\$1,078	\$1,388	\$1,830
Dental Premium	\$56 x 12 = \$672	Included in medical premium	Included in medical premium	Included in medical premium
Estimated Annual Costs Medical/Drug/ Dental	Avg. PDP = \$3,324 lowest premium PDP = \$3,000	\$1,078	\$1,388	\$1,830

* Deductible waived on generic & vaccine tiers
**Premiums, deductibles, and cost-sharing amounted listed are based on 2021 information and may change for 2022. Other Supplemental plans are available.

Looking closer at the cost of benefits:

	Medicare Supp Plan N (Average Non-Smoker 65-69) **	Summit Health Value + Rx (HMO)	Summit Health Standard + Rx (HMO-POS)	Summit Health Premier + Rx (HMO-POS)
Medical Premium	\$133	\$69	\$99	\$140
Medical Deductible	\$203	\$0	\$0	\$0
Inpatient Stay	\$0 up to 90 days	\$370 days 1-5 \$0 days 6 & beyond	\$350 days 1-5 \$0 days 6 & beyond	\$315 days 1-5 \$0 days 6 & beyond
PCP Office Visit	\$20	\$10	\$10	\$10
Specialist Office Visit	\$20	\$40	\$35	\$35
Emergency Room	\$50	\$90	\$90	\$90
Part B excess charges (above Medicare approved amounts)	All Costs	N/A	N/A	N/A
Part D Prescription Drugs	Not covered Optional PDP Avg. Premium \$34 Deductible \$445	Included in medical premium Deductible* \$250	Included in medical premium Deductible* \$200	Included in medical premium Deductible* \$150
Dental	Not covered Optional Individual Plan = \$56	\$0 Preventive plus \$500 comprehensive allowance included in medical premium	\$0 Preventive plus \$500 comprehensive allowance included in medical premium	\$0 Preventive plus \$500 comprehensive allowance included in medical premium
Routine Vision	Not covered	\$0 exam \$0 frames & lenses	\$0 exam \$0 frames & lenses	\$0 exam \$0 frames & lenses
Routine Hearing	Not covered	\$0 exam \$699 / \$999 per aid	\$0 exam \$699 / \$999 per aid	\$0 exam \$699 / \$999 per aid

* Deductible waived on generic & vaccine tiers
**Premiums, deductibles, and cost-sharing amounted listed are based on 2021 information and may change for 2022. Other Supplemental plans are available.



Part C

Part C is also called Medicare Advantage. It is the private option for Part A and Part B. You can get Part C through private insurers. Part C plans cover all of Original Medicare's benefits plus some extra benefits that Part A and Part B do not cover.

Some of these benefits may include vision, hearing, dental, and other health and wellness programs.

Medicare Advantage plans limit your out-of-pocket costs for medical services. They have an annual maximum. Once you reach that annual maximum, you will not pay anything for covered medical services for the rest of the year.

Medicare Advantage plans have specific coverage areas. You can only enroll in the plans that are available where you live (your permanent residence).



Part D

Part D is prescription drug coverage. You can get Part D by:

- Enrolling in a Medicare Advantage plan that offers prescription drug coverage
- Joining a stand-alone prescription drug plan from a private insurer

To enroll in Part D, you must also already have Medicare Part A and/or Part B.



Medicare Supplement

Medicare Supplement is also called Medigap. Just like its name, Medicare Supplement supplements Original Medicare. With this type of coverage, Medicare always pays first. Medicare Supplement comes in 12 standard plans that usually only include Medicare-covered services.

Although it is different than a Medicare Advantage plan, Medicare Supplement is sold by private carriers. To apply for Medicare Supplement, you must also already have Medicare Part A and Part B.

Which Medicare option is right for you?

When you consider your Medicare plan options, you may want to think about the following:

- Your lifestyle, priorities and health needs, including chronic conditions
- Your current coverage. Is it from an employer or retiree plan?
- Prescription drug coverage
- Whether or not you need coverage for services that Original Medicare does not cover
- How often you travel
- Whether or not you live in another state for part of the year

You may qualify for Extra Help!

Extra Help is a Medicare program that helps people with lower incomes pay for some Medicare prescriptions. Those who qualify can get help with their monthly plan premium, yearly deductible, coinsurance and copayments. You can see if you qualify for Extra Help by contacting Social Security at 800-772-1213 or 800-325-0778 (TTY users).

What's the difference between Medicare, Social Security and Medicaid?

- Medicare is health insurance for people age 65 or older. It's also for people who qualify for disability and people younger than age 65 with certain disabilities.
- Social Security is the pension program for people age 62 or older and those with disabilities.
- Medicaid is a state program that provides healthcare for people with limited income and resources.

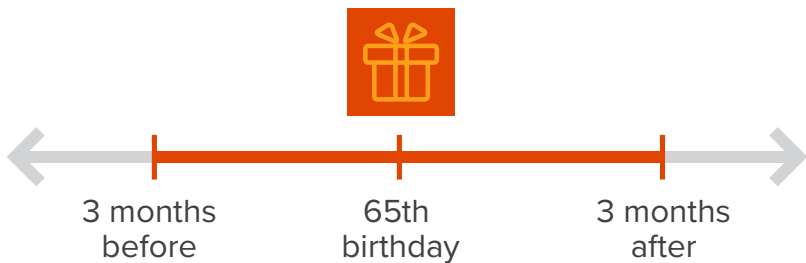
To learn more about each program, visit [medicare.gov](https://www.medicare.gov).



Before you choose a Medicare option, be sure to consider any current coverage you may have. Learn more on page 9.

Time to enroll in Medicare?

You can enroll in Medicare during your initial enrollment period, which is three months before your 65th birthday, your birthday month and three months after. If you are under age 65, you may be able to enroll if you have a qualifying event.



It's important to find out if you can delay enrollment without paying a penalty. See page 9.

If you are working now and are covered by your employer or your spouse's employer, the size of the employer determines whether you can delay enrollment without paying the penalty:

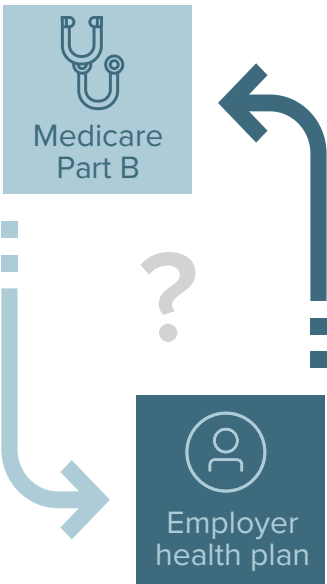
- If the employer has less than 20 employees, and you enroll in Part A and Part B during your initial enrollment period, Medicare will pay before your other coverage. It is best to enroll as soon as you are eligible. If you do not, you may have to pay a Part B late enrollment penalty and have a gap in coverage.
- If the employer has 20 or more employees, talk with your benefits administrator. Ask if they have group health plan coverage as defined by the IRS. If they do, you may be able to delay enrolling in Part A and Part B without paying a lifetime late enrollment penalty.
- If you are getting retiree coverage from an employer, you should sign up for Part A and Part B as soon as you are eligible
- If you have marketplace or other private insurance, you should sign up when you are first eligible and drop your other insurance so that it stops when your Medicare coverage starts

You have eight months after employer coverage ends to enroll without paying a penalty. This is true whether or not you choose COBRA.

Coordinating benefits with your group plan

Please know that Medicare is the primary coverage in certain situations. If you qualify for Medicare Part B, but do not enroll when Medicare is the primary coverage, an employer health plan may not pay for a covered expense that Medicare Part B covers. For example, this may affect you if you have one of the following types of coverage: individual, a group with under 20 employees, domestic partner, COBRA or retiree. This also applies if you are eligible for Medicare due to a disability, and your employer has less than 100 employees. If one of these situations applies and you do not have Medicare Part B, your plan could reduce the amount paid by the amount Medicare Part B would pay, and you would need to pay the amount due. This means that you could be asked to repay claims that had been previously paid.

Which is your primary coverage?



Eligibility and timing

Depending on your circumstances, there are different time periods when you can enroll in Medicare.

Initial enrollment period

You can enroll in Medicare during your initial enrollment period, which is three months before your 65th birthday, your birthday month and three months after. If you are under age 65, you may be able to enroll if you have a qualifying event. It's important that you know that there may be penalties if you do not enroll. If you decide to delay enrollment, you may have to pay a lifetime late enrollment penalty.

General enrollment period

If you did not enroll during your Initial enrollment period, you have another chance each year to sign up during the general enrollment period, which is from Jan. 1 to March 31. Your coverage will begin on July 1. Please know that you may have to pay a late enrollment penalty for as long as you have Part B.



Please know:
There may be penalties if you do not enroll in Medicare when you first become eligible. If you decide to delay enrollment, you may have to pay a lifetime late enrollment penalty.

Special enrollment period

If you have a qualifying event, you may qualify for special enrollment. You can use special enrollment to enroll in Medicare or make changes to your existing Medicare coverage. Qualifying events can include:

- Losing current insurance or drug coverage
 - Anytime you have a chance to get coverage from an employer, union or program
 - There are other qualifying events for the special enrollment period.
- To learn more, visit [medicare.gov](https://www.medicare.gov).

Annual enrollment period

If you are already enrolled in Medicare Advantage or a stand-alone prescription drug plan; you can make changes to your coverage during the annual enrollment period. Annual enrollment is Oct. 15 – Dec. 7 every year. During annual enrollment:

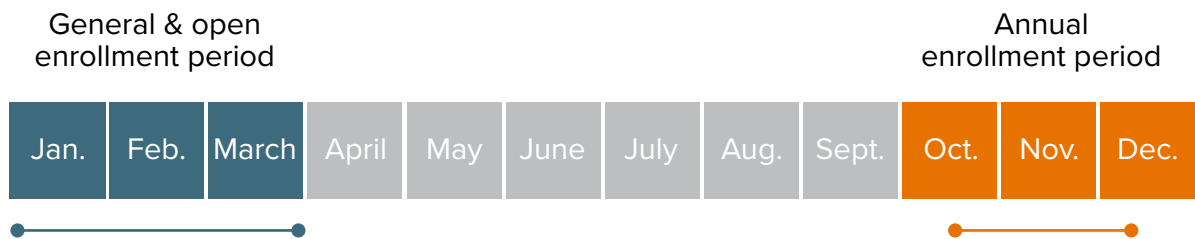
- Eligible beneficiaries can
- Enroll in a Medicare Advantage plan
 - Change Medicare Advantage plans
 - Return to Original Medicare and add a Medicare Supplement plan

Open enrollment period

If you are already enrolled in a Medicare Advantage plan, you can make changes to your coverage from Jan. 1 to March 31 every year.

Medicare Advantage members can:

- Change Medicare Advantage plans
- Return to Original Medicare and add a Medicare Supplement plan. If you apply for a Medicare Supplement plan outside a guaranteed issue period, Underwriting may be required.



How to enroll

If you have not applied for Social Security benefits, you will need to contact Social Security to sign up for Medicare. If you have applied for, or are already receiving Social Security or Railroad Retirement Board benefits, you will receive a Medicare card and packet in the mail three months before your 65th birthday.



Getting Part A and Part B — Original Medicare

You can sign up for Part A and Part B during the initial enrollment period. Most people should enroll in Part A at this time. You can delay enrolling in Part B, but you may have to pay a higher premium.

Most beneficiaries can enroll in Part A without having to pay a monthly premium, but if you enroll in Part B, you will need to pay the monthly premium.

To sign up for Part A and Part B, you will need to contact the Social Security office. You can apply online at ssa.gov. You can also visit a local office.



Getting Part D — prescription drug coverage

If you have already enrolled in Original Medicare, Part A or Part B, you will need to decide whether or not you would like prescription drug coverage. If you know you will need Part D, it's best to get it during your initial enrollment period so that you avoid a late penalty. If you did not enroll in Part D during your initial enrollment period, you can enroll during the annual enrollment period, which is Oct. 15 – Dec. 7.



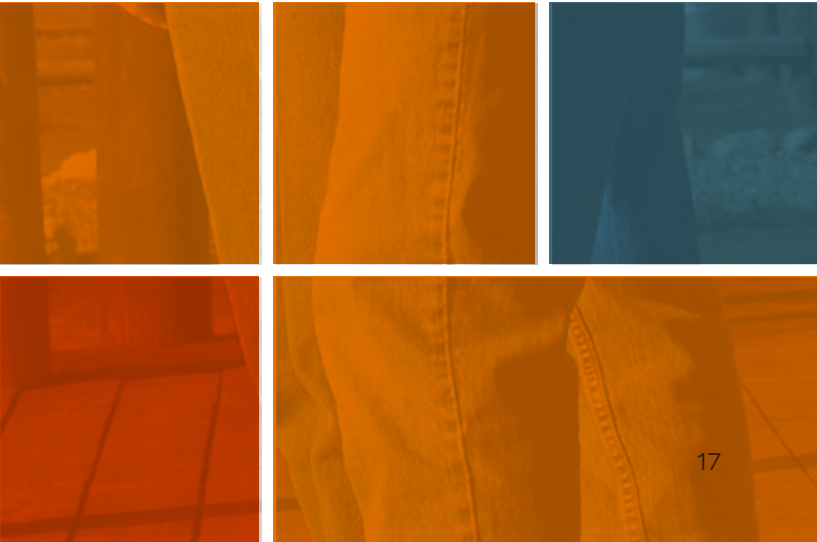
Getting Part C — Medicare Advantage

To search for and enroll in Part C plans, you can visit medicare.gov. You can also contact private insurers directly.



Getting Medicare Supplement

You can buy Medicare Supplement within the six-month period after you turn 65 and are enrolled in Part B.



If you know you will need Part D, prescription drug coverage, it's best to get it during your initial enrollment period so that you avoid a late penalty.

Nondiscrimination notice

We follow federal civil rights laws. We do not discriminate based on race, color, national origin, age, gender identity, sex or sexual orientation.

We provide free services to people with disabilities so that they can communicate with us. These include sign language interpreters and other forms of communication.

If your first language is not English, we will give you free interpretation services and/or materials in other languages.

If you need any of the above, call Customer Service at:
844-827-2355 (TDD/TTY 711)

If you think we did not offer these services or discriminated, you can file a written complaint. Please mail or fax it to:

Summit Health Plan
Attention: Appeal Unit
P.O. Box 820070
Portland, OR 97282
Fax: 855-466-7208

If you need help filing a complaint, please call Customer Service.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services Office for Civil Rights at ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone:

U.S. Department of Health and Human Services
200 Independence Ave. SW, Room 509F
HHH Building, Washington, DC 20201
800-368-1019, 800-537-7697 (TDD)

You can get Office for Civil Rights complaint forms at hhs.gov/ocr/office/file/index.html.

Dave Nesseler-Cass coordinates our nondiscrimination work:

Dave Nesseler-Cass,
Chief Compliance Officer
601 SW Second Ave.
Portland, OR 97204
855-232-9111
compliance@yoursummithealth.com

ATENCIÓN: Si habla español, hay disponibles servicios de ayuda con el idioma sin costo alguno para usted. Llame al 1-877-605-3229 (TTY: 711).

CHÚ Ý: Nếu bạn nói tiếng Việt, có dịch vụ hỗ trợ ngôn ngữ miễn phí cho bạn. Gọi 1-877-605-3229 (TTY: 711)

注意：如果您說中文，可得到免費語言幫助服務。請致電1-877-605-3229（聾啞人專用：711）

주의: 한국어로 무료 언어 지원 서비스를 이용하시려면 다음 연락처로 연락해주시기 바랍니다. 전화 1-877-605-3229 (TTY: 711)

PAUNAWA: Kung nagsasalita ka ng Tagalog, ang mga serbisyong tulong sa wika, ay walang bayad, at magagamit mo. Tumawag sa numerong 1-877-605-3229 (TTY: 711)

تنبيه: إذا كنت تتحدث العربية، فهناك خدمات مساعدة لغوية متاحة لك مجانًا. اتصل برقم (الهاتف النصي: 711) 1-877-605-3229

بولتے ہیں تو لسانی (URDU) توجہ دیں: اگر آپ اردو امانت آپ کے لیے بلا معاوضہ دستیاب ہے۔ پر کال کریں (TTY: 711) 1-877-605-3229

ВНИМАНИЕ! Если Вы говорите по-русски, воспользуйтесь бесплатной языковой поддержкой. Позвоните по тел. 1-877-605-3229 (текстовый телефон: 711).

ATTENTION: si vous êtes locuteurs francophones, le service d'assistance linguistique gratuit est disponible. Appelez au 1-877-605-3229 (TTY : 711)

توجہ: در صورتی کہ بہ فارسی صحبت می کنید، خدمات ترجمہ بہ صورت رایگان برای شما موجود است. با (TTY: 711) 1-877-605-3229 تماس بگیرید.

ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपको भाषाई सहायता बिना कोई पैसा दिए उपलब्ध है। 1-877-605-3229 पर कॉल करें (TTY: 711)

Achtung: Falls Sie Deutsch sprechen, stehen Ihnen kostenlos Sprachassistentendienste zur Verfügung. Rufen sie 1-877-605-3229 (TTY: 711)

注意：日本語をご希望の方には、日本語サービスを無料で提供しております。1-877-605-3229（TTY、テレタイプライターをご利用の方は711）までお電話ください。

YourSummitHealth.com

અગત્યનું: જો તમે (ભાષાંતર કરેલ ભાષા અહીં દર્શાવેલ) બોલો છો તો તે ભાષામાં તમારે માટે વિના મૂલ્યે સહાય ઉપલબ્ધ છે. 1-877-605-3229 (TTY: 711) પર કૉલ કરો

ໂປດຊາບ: ຖ້າທ່ານເວົ້າພາສາລາວ, ການຊ່ວຍເຫຼືອດ້ານພາສາແມ່ນມີໃຫ້ທ່ານໂດຍບໍ່ເສັຍຄ່າ. ໂທ 1-877-605-3229 (TTY: 711)

УВАГА! Якщо ви говорите українською, для вас доступні безкоштовні консультації рідною мовою. Зателефонуйте 1-877-605-3229 (TTY: 711)

ATENȚIE: Dacă vorbiți limba română, vă punem la dispoziție serviciul de asistență lingvistică în mod gratuit. Sunați la 1-877-605-3229 (TTY 711)

THOV CEEB TOOM: Yog hais tias koj hais lus Hmoob, muaj cov kev pab cuam txhais lus, pub dawb rau koj. Hu rau 1-877-605-3229 (TTY: 711)

ត្រូវចងចាំ៖ បើអ្នកនិយាយភាសាខ្មែរ ហើយត្រូវការសេវាកម្មជំនួយផ្នែកភាសាដោយឥតគិតថ្លៃ គឺមានផ្តល់ជូនលោកអ្នក។ សូមទូរស័ព្ទទៅកាន់លេខ 1-877-605-3229 (TTY: 711)

HUBACHIISA: Yoo afaan Kshtik kan dubbattan ta'e tajaajiloonni gargaarsaa isiniif jira 1-877-605-3229 (TTY: 711) tiin bilbilaa.

โปรดทราบ: หากคุณพูดภาษาไทย คุณสามารถใช้บริการช่วยเหลือด้านภาษาได้ฟรี โทร 1-877-605-3229 (TTY: 711)

FA'UTAGIA: Afai e te tautala i le gagana Samoa, o loo avanoa fesoasoani tau gagana mo oe e le totogia. Vala'au i le 1-877-605-3229 (TTY: 711)

IPANGAG: Nu agsasaoka iti Ilocano, sidadaan ti tulong iti lengguahe para kenka nga awan bayadna. Umawag iti 1-877-605-3229 (TTY: 711)

UWAGA: Dla osób mówiących po polsku dostępna jest bezpłatna pomoc językowa. Zadzwoń: 1-877-605-3229 (obsługa TTY: 711)





To learn more, visit YourSummitHealth.com

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