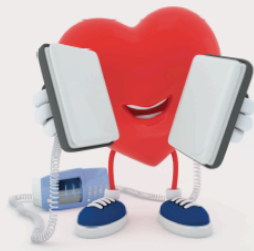


Shock Treatment



Consumer Guide To Costs
NOT Covered By
Health Insurance or
Medicare

Shock Treatment

Costs **NOT** Covered by
Health Insurance & Medicare

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NATIONAL ADVISORY CENTER *for*
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Most people don't know exactly what their health insurance or Medicare covers. It's confusing ... and it changes. And, to be completely, honest, it's really NOT important UNTIL the day comes when you go to a doctor, have to go to the hospital or need care at home.

Then it's very important.

Because if the costs are **NOT COVERED** by your health insurance or Medicare ... guess who is responsible? **You!** That's why we titled this guide "Shock Treatment." -- a look at various health care costs people often think are covered ... but they ARE NOT.

* Please keep in mind that this is generalized information. Medicare is complex and so are insurance policies. And, things change. I've done my best to provide accurate current information. But I always advise reading and asking questions, of the professionals you work with. And, if you know of things that need changing in this guide, please E-mail me at jslome@shorttermcareinsurance.org

COSTS YOU MAY PAY EVEN WITH A HEALTH INSURANCE POLICY

- ⊗ Annual Deductible
- ⊗ Per-Event Co-Pay
- ⊗ Prescription Co-Pay
- ⊗ Recovery Care
- ⊗ Uncovered Services

COSTS NOT COVERED BY MEDICARE [Medicare Part A *]

- ⊗ Doctors' Physical Exams
- ⊗ Eye Exams or Eyeglasses
- ⊗ Hearing Exams or Hearing Aids
- ⊗ Home Care Providers
- ⊗ Private Duty Nursing

National Advisory Center for
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www.ShortTermCareInsurance.org

A Rapid Overview of Medicare Coverage & Gaps

Your 65th birthday is a special one because under current law that's when most Americans are entitled to receive Medicare health coverage. Medicare provides significant benefits ... but not everything is covered.

Most Americans are entitled to **Medicare Part A** that covers hospital stays or nursing care. Part A does not cover doctors' fees. Part A has significant limitations that include covering costs for a limited period of time. Plus, in 2015, you have to pay a \$1,260 deductible per benefit period.

Medicare Part B is optional and covers some of the costs not covered by Part A, including portions of some doctors' fees and some lab tests and some home health care services. Individuals pay for Part B coverage directly out of their Social Security benefits ... and costs increase yearly.

Then there are "**Medicare Advantage**" plans offered through private insurance companies approved by Medicare. These plans vary in cost, depending on what they include. Some will include vision and dental coverage and even some prescription drug coverage.

"**Medigap**" or "**Medicare Supplement**" policies are also sold by private insurance companies. They are only available if you are enrolled in Medicare Part A and Part B. There are many different options and it really pays to work with a knowledgeable professional to compare these plans.

Finally, "**Medicare Part D**" covers prescription drugs. Costs for Part D coverage will vary and will be based on your household income. These plans often come with various limitations and may have a deductible and co-payments.

Costs That May NOT Be Covered By Your Medicare Plan

Medicare provides a "Wellness" exam BUT NOT a standard physical exam. If you have a Medicare Advantage or Medigap plan see if physical exams are covered.

✓ **A SHORT TERM CARE PLAN CAN PAY FOR PHYSICAL EXAMS EVEN IF YOU HAVE COVERAGE.**

Medicare (by law) cannot pay for vision or hearing tests ... and not for glasses or hearing aids. If you pay for a Medicare Advantage or Medigap plan see if these are covered. Are they covered in full (100%) or only partially? Are they covered ONLY after you meet a deductible?

✓ **A SHORT TERM CARE PLAN CAN PAY FOR HEARING & VISION EVEN IF YOU HAVE COVERAGE.**

✓ **A SHORT TERM CARE PLAN CAN PAY FOR GLASSES & HEARING AIDS.**

Medicare does NOT pay for prescription drugs. Those are typically covered only if you have Part D and even then, deductibles or co-pays may apply.

✓ **A SHORT TERM CARE PLAN CAN REIMBURSE YOU FOR PRESCRIPTION MEDICATIONS EVEN IF PART D PAYS.**

THE LATEST RISK YOU FACE: There is a huge difference in being "admitted to a hospital as an in-patient" and being "admitted for observation." If you have been admitted (not admitted for observation) to a hospital and stay for at least 3 days, Medicare **MAY** cover what happens to you upon discharge (**IF** you meet the Medicare triggers and conditions). **IF NOT**, or if you were **NOT** a hospital in-patient, Ka-ching! You have a hospital bill to worry about ... any you'll be paying all or part of costs for a stay in a skilled nursing (rehab) facility and for home care services. And, coverage is limited in terms of days, after 20 days only part is covered.

✓ **A SHORT TERM CARE PLAN CAN COVER MANY COSTS FOR CARE YOU'LL NEED WHILE YOU RECOVER.**

Medicare Resources

Medicare & You informational guide - download a copy at medicare.gov

Find Medicare Insurance Agents @ American Association for Medicare Supplement Insurance medicaresupp.org

Costs May NOT Be Covered By Your Individual Health Insurance Plan

Starting in 2014, every person in the U.S. must have minimum health coverage (or an exemption).

Whether you have private health insurance through your employer (workplace) ... or coverage that you pay for individually (including ObamaCare), you likely are going to pay for some health care costs.

A Harvard University study reported that about half (47%) of U.S. bankruptcies were tied to health care expenses. And, the majority of these people had health insurance when the illness or accident occurred. Some experts feel the number is misleading. But every year millions of Americans face medical bills they have to pay. Often the bills come along with a health condition that makes it hard (or impossible) to work.

The risk of medical (health care) costs that you will have to pay for yourself or your family members is real.

Depending on your health insurance plan, you may pay:

- ⊙ **A YEARLY DEDUCTIBLE** - can be as much as \$5,000.
- ⊙ **CO-INSURANCE**: 20 percent or a co-payment (say, \$15 each time you visit the doctor).
- ⊙ **CO-PAYMENTS FOR PRESCRIPTIONS**: even when they are generic.

Costs NOT covered by your health insurance may include:

- ⊙ **EYE EXAMS**, glasses, hearing exams and hearing aids.
- ⊙ **PRIVATE NURSING**
- ⊙ **COSTS FOR INFERTILITY TREATMENT, WEIGHT LOSS SURGERY, COSMETIC SURGERY**
- ⊙ **RECOVERY OR CARE SERVICES** provided in your home while you recover from an accident or after a difficult pregnancy.

Recovery Care (Short Term Care) Benefits Pre-Retirees

People associate long-term care with care one needs in your 70s, 80s or 90s.

Younger people also need care -- but NOT in the same way. And, often it's only a few weeks or months of care that is needed.

That's where a **RECOVERY CARE** (also referred to as a **Short Term Care**) insurance policy can provide significant care. These policies pay for care -- generally for up to 360 (some for 365) days.

Some policies include other benefits as well. **EVEN IF YOU DO NOT NEED CARE**, you can take advantage of these benefits that will pay for physicals, for eye exams and glasses, for prescription drugs and more.

These benefits paid directly back to you **EVEN IF THEY ARE PAID FOR OR COVERED BY YOUR INDIVIDUAL HEALTH INSURANCE**.

Is Recovery Care (Short Term Care) Right For You?

If you get a physical exam every year ... **YES, Recovery Care policies may reimburse the cost. ✓**

If you take prescription medications costing \$150+ a year ... **YES, costs can be covered (often a nominal deductible and/or co-payment may be involved). ✓**

If you get an eye exam or wear glasses ... **YES, Recovery Care Policies can reimburse these costs. ✓**

To Find A Short Term Care Insurance Expert Call 818-597-3205