

Medicare Corner

Corrie Borde, Insurance Agent

Recently I met a father whose 28 year old **daughter suffers from a chronic health condition**. In our discussion it was communicated that his daughter primary plan is not covering certain durable medical equipment and treatments required for her to live. Although she has Medicare coverage, the incorrect PPO option was chosen that is not working in conjunction with her healthcare needs and is furthermore not cost effective. I then asked, "How long has your daughter been on Medicare Disability?" and the father replied "about five years." The father has been paying **\$10,000 per year** for out of pocket cost (in addition to insurance premiums), because he was not educated on Medicare Supplement (Medigap) options that could support his daughter's needs.

As of today, Medicare Supplement plans (Medigap) are available in conjunction with Medicare Disability. Medicare Disability recipients have a six month window from the effective date of Part B Medicare to apply for Medigap coverage – If this deadline is not met, a recipient has to wait until their 65th birth month to once again be eligible for Medigap coverage. Please note that not all Medigap insurance carriers have these plans available for recipients whose age is below 65. It is extremely important that Medicare Disability recipients explore all options and procure a competent, unbiased insurance agent to advise, as these decisions affect lives.

On another important note – **Have you visited your trusted primary care physician or specialist to find out that your newly elected Medicare Advantage (Medicare**

Part C) selection is not accepted?

Filled a drug prescription to find out that your medication is not covered?

Or if you simply made the incorrect decision for your 2019 plan year Medicare election?

Did you know? There is a short time to cure!

I recommend that you consult with an agent that is contracted by most carriers in your area that takes an unbiased approach in helping you find a solution that best fits your personal needs. To verify which carriers your agent represents visit: <https://licenseesearch.fldfs.com/>

Restoration of the Medicare Advantage Open Enrollment Period

The 21st Century Cures Act eliminates the existing MA disenrollment period that currently takes place from January 1st through February 14th of every year and, effective for 2019, replaces it with a new Medicare Advantage open enrollment period (OEP) that will take place from January 1st through March 31st annually. The new OEP allows individuals enrolled in an MA plan, including newly MA-eligible individuals, to make a one-time election to go to another MA plan or Original Medicare. Individuals using the OEP to make a change may make a coordinating change to add or drop Part D coverage.



**Source: CMS Finalizes Policy Changes and Updates for Medicare Advantage and the Prescription Drug Benefit Program for Contract Year 2019 (CMS-4182-F)*

Corrie Borde, Insurance Agent, 8265 N Wickham Rd Ste A, Melbourne, FL 32940
321.961.5930 Direct, 321.252.2340 Office,
321.989.0272 Facsimile www.baapa.us **SS**

65TH ANNIVERSARY SEASON - 2018/2019

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