

Frequently Asked Questions About Medicare.

WHO CAN GO ON MEDICARE? If you are turning 65, you are eligible for Medicare. A person under 65 can also be eligible if they have received Social Security Disability Insurance (SSDI) for more than 24 months.

HOW DO YOU APPLY FOR MEDICARE? There are 3 ways: 1) Call Social Security at their toll-free number (800) 772-1213. This is the most complicated way; 2) Apply online at www.SocialSecurity.gov/medicareonly; 3) In person at your local Social Security Office.

HOW MUCH IS MEDICARE? IS THERE A COST? If you or your spouse worked for at least 10 years and paid Medicare taxes, you won't pay a monthly fee, called a premium, for Part A. Now, for Part B your standard premium is \$206.50/P a month in 2026, unless your Modified Adjusted Gross Income is greater than \$109K/P Single, \$218K/P Married, then you will also pay an Income Related Monthly Adjustment Amount (IRMAA).

WHAT IS MEDICARE PART A? Part A is coverage for inpatient hospital care, skilled nursing facility care, Hospice, and Nursing home care, depending on the circumstance.

WHAT IS MEDICARE PART B? Part B is for Ambulance services, Clinical research, Lab work, Tests, Durable Medical Equipment, getting a second opinion before surgery and some limited Outpatient prescription drugs. Also, this part covers Mental Health – Inpatient, Outpatient and Partial Hospitalization.

WHAT IS MEDICARE PART C? Medicare Advantage Plans are sometimes called Part C or MA Plans. These are offered by private insurance companies approved by Medicare. If you enroll in a Medicare Advantage Plan, you will get your Medicare Part A and Part B coverage from the Medicare Advantage Plan (the private insurance company approved by Medicare) and not Original Medicare. Note: If you go on a Part C plan for more than a year, you may have to go through underwriting in order to return to a Medicare Supplement plan.

WHAT IS MEDICARE PART D? Part "D" is for Drugs. To avoid future penalties, everyone should enroll in a Part D Plan, or a prescription plan which is the same thing. Unless, you have a current prescription plan that is considered credible coverage, such as Veteran Benefits or credible Employer Group coverage. The benefits for **2026** changed due to the Inflation Reduction Act of 2025. Enrollees pay the full cost of their prescriptions until they meet the \$615.00 deductible. (Some plans may have no Deductible). In the Initial Coverage Phase: Enrollees pay 25% of their drug costs, and the plan pays the rest, until their out-of-pocket spending reaches \$2,100.00. After reaching the out-of-pocket limit, then you'll automatically get "catastrophic coverage" for the remainder of the calendar year on covered Part D drugs.

WHAT IS THE DIFFERENCE BETWEEN ORIGINAL MEDICARE AND MEDICARE ADVANTAGE PLANS?

When you have Medicare Part A and Part B, you are on original Medicare, which is the government or the traditional Medicare plan. Original Medicare usually doesn't have a

maximum out of pocket cost. Therefore, if you stay on original Medicare, you should also get a Medigap Plan for your financial protection. Medicare Advantage Plans can be chosen in place of Original Medicare. A Medicare Advantage Plan is regulated by the federal government (CMS) but administered and run by private insurers or insurance companies. Even if you chose to enroll on a MA Plan you are still in the Medicare Program and you still have the same Medicare Rights and Protections, but your benefits are paid through a private plan. These plans must have an Out-of-Pocket Maximum for your protection.

WHAT IS A MEDIGAP PLAN? A Medigap Plan is the same as a Secondary Plan and a Medicare Supplement. All three are the same, just different names. If you stay on Original Medicare, then you should get a Medigap Plan to protect you from expensive Medical Bills. There are different Plans available. The plans that are considered Cadillac plans are the Plan G and F. These are the most popular. The plan F does not have a deductible, co-insurance or co-pay as long it's a Medicare approved service offered by a Medicare assigned provider.

WHAT IS A DRUG FORMULARY? A drug formulary is a list of Drugs provided by Plan D - Drugs. Each plan has its own formulary. It is very important to check your prescriptions against the formulary of the plan that you intend to enroll in.

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Any **Medicare** questions, call Lupe for a free, no-obligation consultation at: **(928) 445-5051.**