MEDICARE

Why Clients Need More Coverage









Why More Coverage?

- Medicare was not designed to cover all of the costs of health care for its recipients.
- The design of coverage leaves large holes, or gaps, where consumers could experience potentially large amounts of cost sharing.
- Additionally, there is no cap to the amount that a Medicare recipient could be responsible for, in annual cost sharing.





Examples

What are some examples of cost-sharing Medicare Recipients could experience?

- Part A Deductible: \$1408
- Skilled Nursing Facility: \$176 per day for days 21-100
- Part B Deductible: \$198
- Part B Coinsurance: 20% cost sharing on most outpatient services





Why?

Why do clients need coverage in addition to Medicare?

- There is no cap to annual expenses
- Potential exposures could significantly impact consumers; many of whom are on a fixed income
- Cost Certainty and annual limits to expenses are extremely important to most Medicare recipients





Potential High Cost Situations

- Multiple Inpatient Hospital stays
- Skilled Nursing Facility Charges
- Outpatient surgeries
- Durable Medical Equipment
- Part B Medications





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Seeking Additional Coverage

When presented with these potential cost scenarios, most consumers will seek Coverage in addition to Medicare. Some of these options include:

- Medicare Supplement
- Medicare Advantage
- Medicaid



