MEDICAL MUTUAL®

A Special Presentation for CWRU Employees

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Learn the Medicare A, B, Cs…and D

Understanding Medicare and Your Options

C6066-MCS R4.23

About Medical Mutual

Plans by Ohioans, for Ohioans

90 years of experience as a trusted insurer

As a mutual company, our focus is entirely on our members—we don't answer to Wall Street analysts or pay dividends to investors

Our employees live and work right here in Ohio

We design our Medicare Advantage plans with feedback from people like you

Committed to Ohio communities

232,582
meals provided to food banks

421
total grants awarded to nonprofits

$200,000+
awarded in scholarships

6,000
volunteer hours logged by employees each year*

*2022 Medical Mutual Community Report

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Agenda

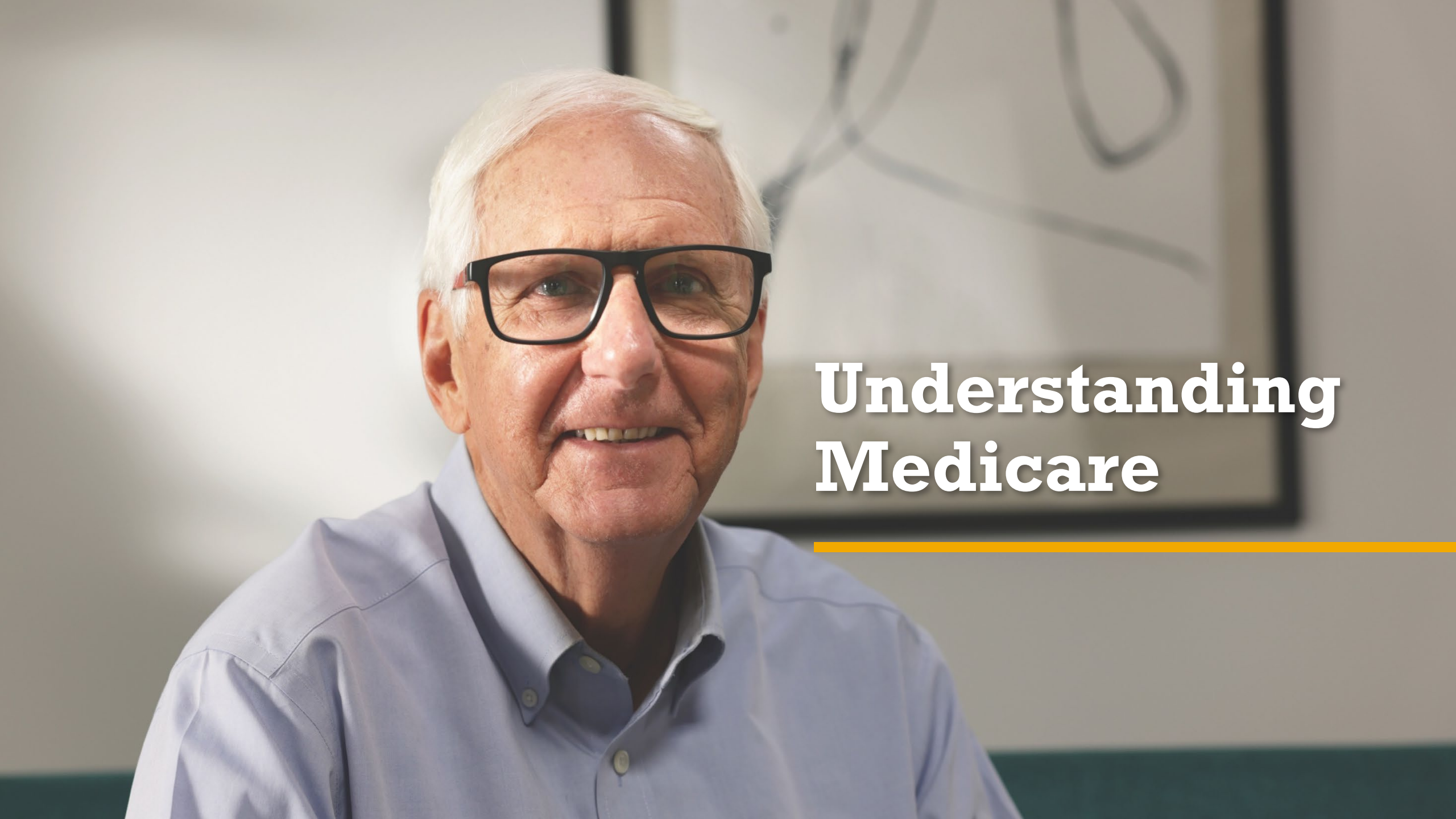
About Medical Mutual

Understanding Medicare

Enrolling in Coverage

Choosing a Medicare Advantage Plan

Helpful Resources



Understanding Medicare

What is Medicare?

- Federal health insurance program administered by the Centers for Medicare & Medicaid
  Services (CMS)
- For people:
  - 65 or older
  - Those under 65 with disabilities
  - Of any age with End-Stage Renal Disease (ESRD)

How Original Medicare Works

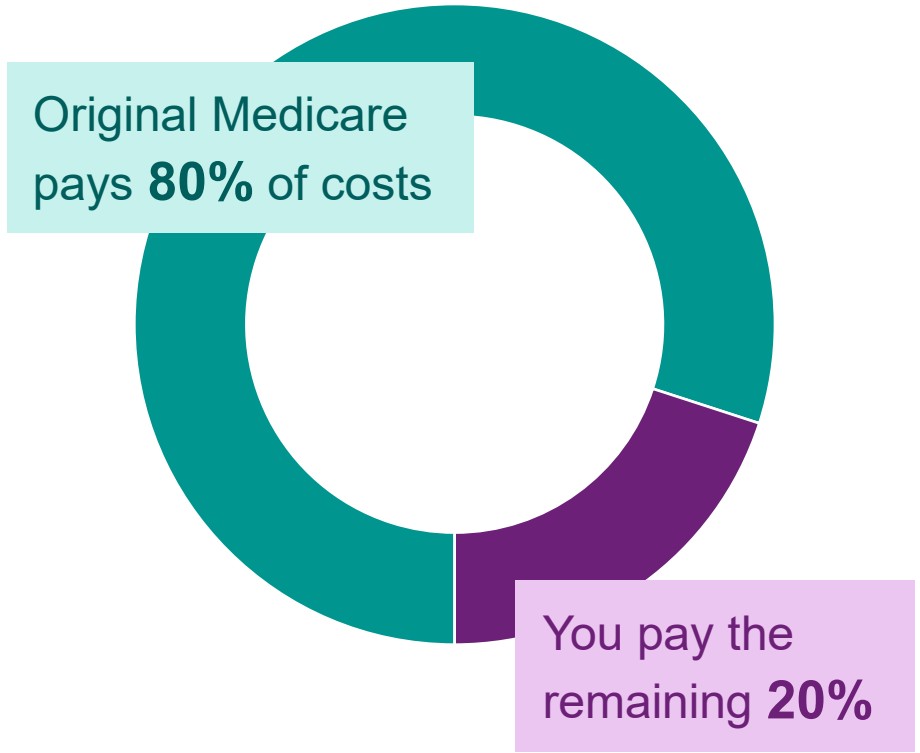
ORIGINAL MEDICARE

PART A
HOSPITAL INSURANCE

PART B
MEDICAL INSURANCE

Typical costs for covered healthcare services

- Original Medicare pays: 80% of costs
- You pay: The remaining 20%



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Medicare Part B Premium

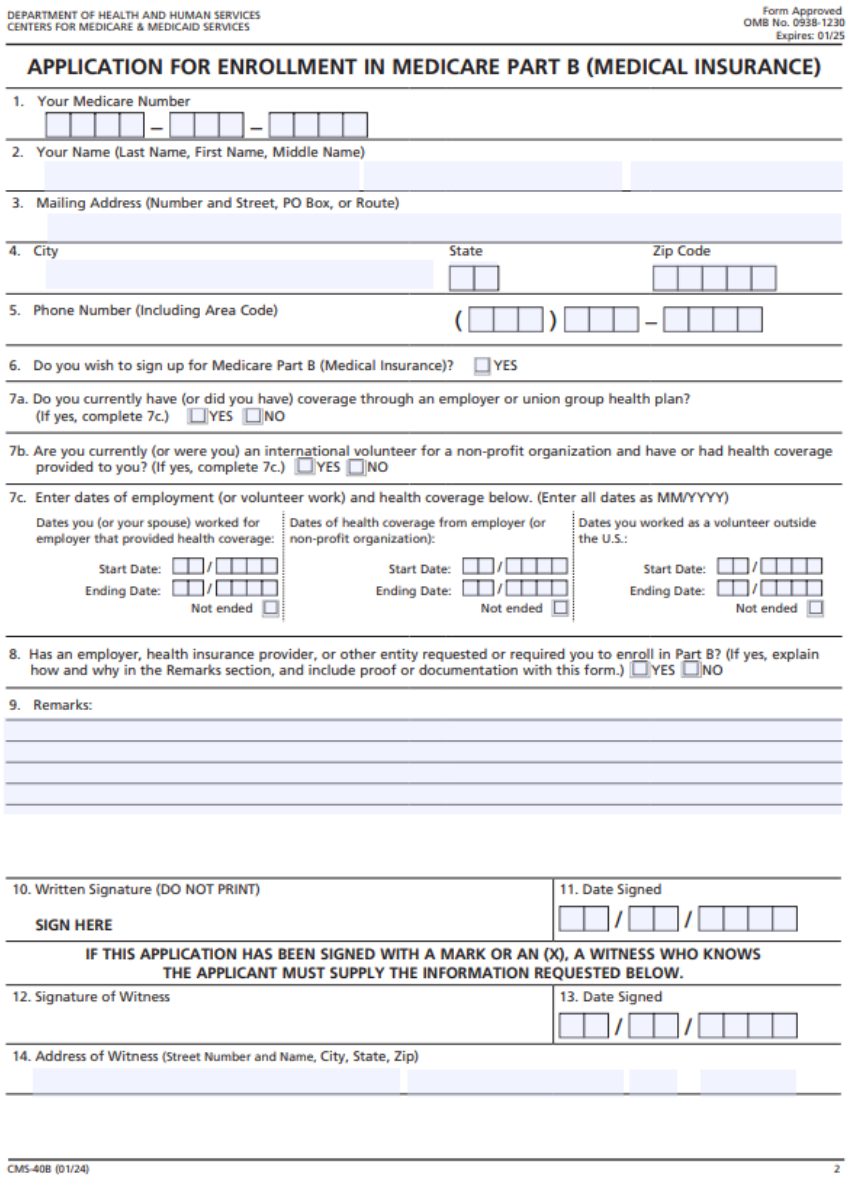
If your yearly income in 2023 was:			
File individual tax return	**File joint tax return**	**File married & separate tax return**	**You pay each month (in 2025):**
$106,000 or less	$212,000 or less	$106,000 or less	$185.00
above $106,000 up to $133,000	above $212,000 up to $266,000	not applicable	$259.00
above $133,000 up to $167,000	above $266,000 up to $334,000	not applicable	$370.00
above $167,000 up to $200,000	above $334,000 up to $400,000	not applicable	$480.90
above $200,000 and less than $500,000	above $400,000 and less than $750,000	above $106,000 and less than $394,000	$591.90
$500,000 or above	$750,000 or above	$394,000 or above	$628.90

Income brackets and surcharge amounts for Part B and Part D IRMAA

IRMAA for 2025

Single	Married filing jointly	Part B Income-Related Monthly Adjustment Amount	Part D Income-Related Monthly Adjustment Amount
Less than or equal to $106,000	Less than or equal to $212,000	$0.00	$0.00
Greater than $106,000 and less than or equal to $133,000	Greater than $212,000 and less than or equal to $266,000	$74.00	$13.70
Greater than $133,000 and less than or equal to $167,000	Greater than $266,000 and less than or equal to $334,00	$185.00	$35.30
Greater than $167,000 and less than or equal to $200,000	Greater than $334,00 and less than or equal to $400,000	$295.90	$57.00
Greater than $200,000 and less than $500,000	Greater than $400,000 and less than $750,000	$406.90	$78.60
Greater than or equal to $500,000	Greater than or equal to $750,000	$443.90	$85.80

If a beneficiary already has Medicare Part A…



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Form Approved
OMB No. 0938-1230
Expires: 01/25

APPLICATION FOR ENROLLMENT IN MEDICARE PART B (MEDICAL INSURANCE)

1. Your Medicare Number ☐☐☐☐ – ☐☐☐ – ☐☐☐☐
2. Your Name (Last Name, First Name, Middle Name)
3. Mailing Address (Number and Street, PO Box, or Route)
4. City | State ☐☐ | Zip Code ☐☐☐☐☐
5. Phone Number (Including Area Code) (☐☐☐) ☐☐☐ – ☐☐☐☐
6. Do you wish to sign up for Medicare Part B (Medical Insurance)? ☐ YES
7a. Do you currently have (or did you have) coverage through an employer or union group health plan? (If yes, complete 7c.) ☐ YES ☐ NO
7b. Are you currently (or were you) an international volunteer for a non-profit organization and have or had health coverage provided to you? (If yes, complete 7c.) ☐ YES ☐ NO
7c. Enter dates of employment (or volunteer work) and health coverage below. (Enter all dates as MM/YYYY)

Dates you (or your spouse) worked for employer that provided health coverage:	Dates of health coverage from employer (or non-profit organization):	Dates you worked as a volunteer outside the U.S.:
Start Date: ☐☐/☐☐☐☐	Start Date: ☐☐/☐☐☐☐	Start Date: ☐☐/☐☐☐☐
Ending Date: ☐☐/☐☐☐☐	Ending Date: ☐☐/☐☐☐☐	Ending Date: ☐☐/☐☐☐☐
Not ended ☐	Not ended ☐	Not ended ☐

8. Has an employer, health insurance provider, or other entity requested or required you to enroll in Part B? (If yes, explain how and why in the Remarks section, and include proof or documentation with this form.) ☐ YES ☐ NO
9. Remarks:

10. Written Signature (DO NOT PRINT) — SIGN HERE | 11. Date Signed ☐☐/☐☐/☐☐☐☐

IF THIS APPLICATION HAS BEEN SIGNED WITH A MARK OR AN (X), A WITNESS WHO KNOWS THE APPLICANT MUST SUPPLY THE INFORMATION REQUESTED BELOW.

12. Signature of Witness | 13. Date Signed ☐☐/☐☐/☐☐☐☐
14. Address of Witness (Street Number and Name, City, State, Zip)

CMS-40B (01/24) 2

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Parts of Medicare

Part A | Hospital

Covers inpatient hospitalization, skilled nursing, home health and hospice care.

Part B | Medical

Covers outpatient services (e.g., Doctor visits), durable medical equipment, lab tests and preventive care.

Part C | Medicare Advantage (MA)

Includes Part A and Part B coverage, some plans offer prescription drug coverage and may include extra benefits, like dental and vision.

Part D | Prescription Drug Plan (PDP)

Covers costs of prescription drugs, may help lower prescription drug costs and help protect against higher costs in the future.

Eligibility & Enrollment Guidelines

If you are enrolled in an Individual plan:

- You must enroll in Parts A and B at 65, your Initial Enrollment Period (IEP) – three months before your 65th birthday, the month of your 65th birthday and three months after your 65th birthday
- If your birthday falls on the first day of the month, coverage begins on the first day of the prior month.

If you're covered under your (or your spouse's) current employer group health plan, and still working:

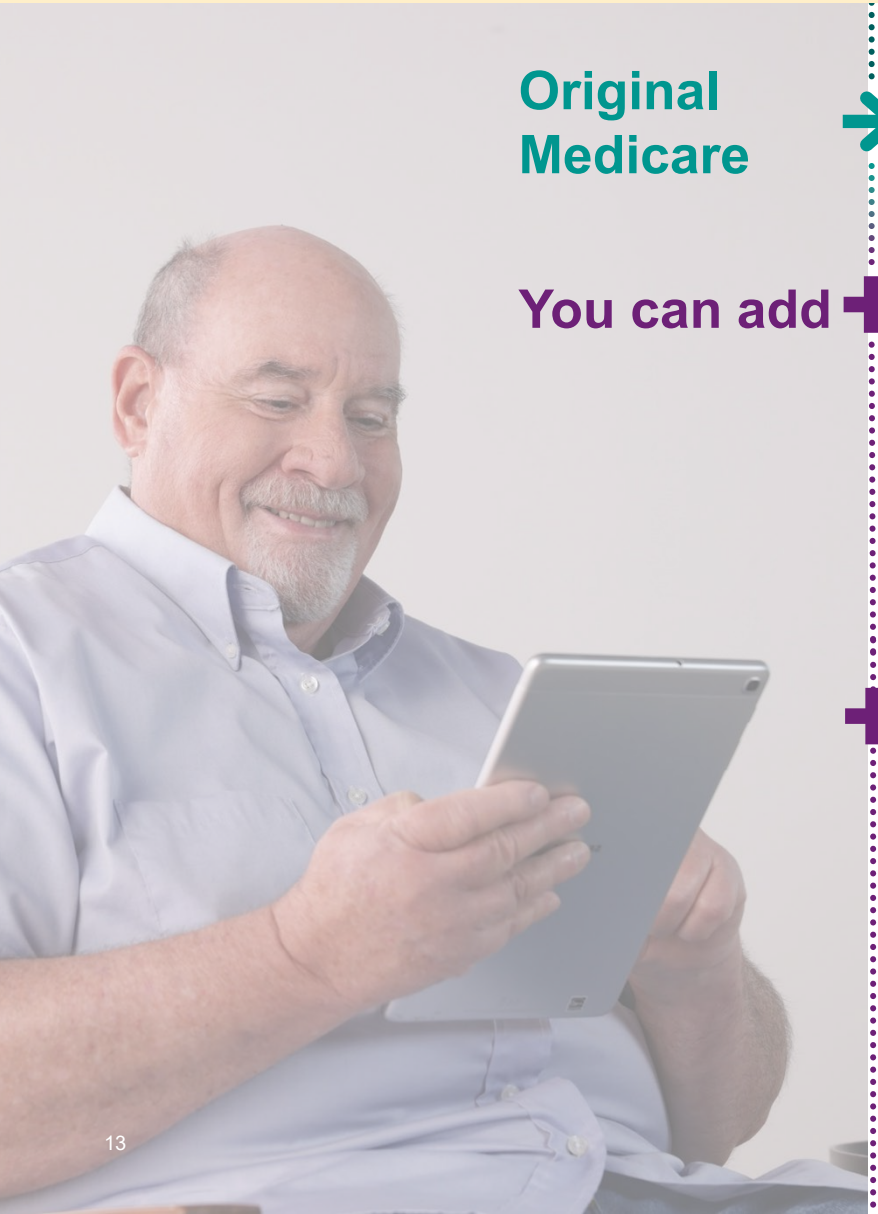
- If the employer has less than 20 employees, sign up for Medicare Part A and B during your IEP.
- If the employer has more than 20 employees, enroll in Medicare Part A during your IEP. You can delay enrolling in Part B.

Some people receive Medicare Part A and Part B benefits automatically.

- Enrollment in Part A and Part B is automatic for those receiving Social Security or Railroad Retirement Board benefits starting the first day of the month they turn 65.
- If you're under 65 and have a disability, you'll automatically be enrolled in Part A and Part B after you get disability benefits from Social Security or the Railroad Retirement Board for 24 months.
- If you have ALS (amyotrophic lateral sclerosis, also called Lou Gehrig's disease), you'll be enrolled in Part A and Part B automatically the month your Social Security disability benefits begin.

Understanding Your Medicare Options

Option 1



Original Medicare

Part A
Hospital insurance

+

Part B
Medical insurance

You can add

Medicare Supplement Insurance plans (Medigap)

- Sold by private insurance companies
- Secondary to Medicare
- Don’t offer prescription drug coverage
- Must be purchased separately

+

Part D / Rx drug coverage (AKA Prescription Drug Plan (PDP))

- Must be purchased from private insurance carriers
- Can be included in a Medicare Advantage plan or stand-alone
- If you don’t sign up for Part D when you’re first eligible, you may have to pay a Late Enrollment Penalty (LEP)

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Medicare Prescription Payment Plan

What is it?

Free program that helps manage out-of-pocket Part D costs by spreading them across the calendar year

Who can sign up?

- Anyone with a Medicare drug plan or Medicare health plan with drug coverage. Participation is voluntary.
- Call or visit the health plan or drug plan's website. Contact the plan now to sign up for the Medicare Prescription Payment Plan in 2025.

How does it work?

- When you fill a prescription, you won't pay the pharmacy. Instead, you'll get a bill each month from the health or drug plan.
- The monthly bill is based on what you would have paid for any prescriptions, plus your previous month's balance, divided by the number of months left in the year.

Who should not sign up for this payment option?

This payment option may not be a good fit for members who:

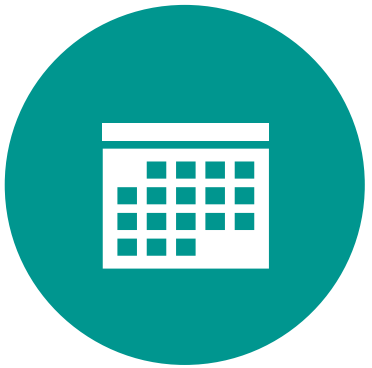
- Have low yearly drug costs or drug costs that are the same each month
- Are considering signing up for this payment option late in the calendar year
- Don't want to change how they pay for their drugs
- Receive Extra Help, a Medicare Savings Program or other programs that help pay for prescription drugs

2025 Part D Changes

Important changes are coming to your Medicare Part D prescription drug benefits in 2025.

Out-of-Pocket Maximum

Plan D out-of-pocket maximum will be capped at **$2,000** instead of $8,000



Payment Program

Option to **spread out drug costs** and pay through a monthly repayment program installments (M3P)

Removal of Coverage Gap

Coverage Gap ("donut hole") phase will be gone

Understanding Your Medicare Options

Option 2

Medicare Advantage, or Part C, combines the benefits of Original Medicare…

Original Medicare →

Part A
Hospital insurance

+

Part B
Medical insurance

…and also include:

+ **Part D**
+ **Dental**
+ **Vision**
+ **Hearing**
+ **Add'l benefits**

Medicare Advantage plans (**like those from Medical Mutual**) offer another way to get Medicare coverage

Medicare Advantage plans are **contracted with Medicare** and must provide coverage that is the same as, or better, than what Original Medicare provides

- When you enroll in a Medicare Advantage plan with Medical Mutual, you receive Part A and Part B – as well as prescription drug coverage and other benefits such as vision, dental and hearing coverage – through us.

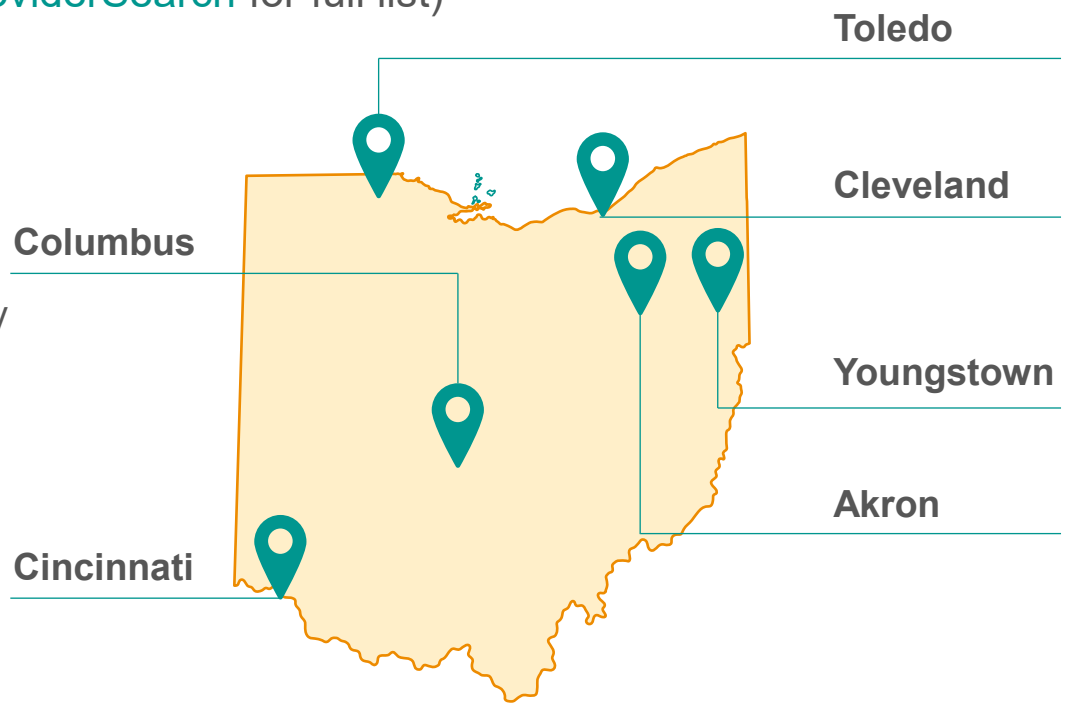
Things to Consider When Choosing a Plan

1 Check to see if your doctor is in our Medicare Advantage network

Our large network means your doctor is likely covered by our plans

Major hospital systems in our network*:

(visit MedMutual.com/ProviderSearch for full list)



- Mercy Health
- ProMedica
- University of Toledo Medical Center

- Cleveland Clinic
- University Hospitals
- MetroHealth

- Mercy Health

- Cleveland Clinic Akron General
- Summa Health

- OhioHealth
- Mount Carmel
- The Ohio State University Wexner Medical Center
  - Arthur G. James Cancer Hospital

- Kettering Health
- Mercy Health
- The Christ Hospital
- TriHealth
- University of Cincinnati Medical Center

*This is not a complete listing. Other providers are available in our network.

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HMO vs. PPO

What is an HMO?

- Access to in-network providers
- Care won’t be covered if you see an out-of-network provider, unless it is an emergency

What is a PPO?

- You can choose to see in-network or out-of-network providers

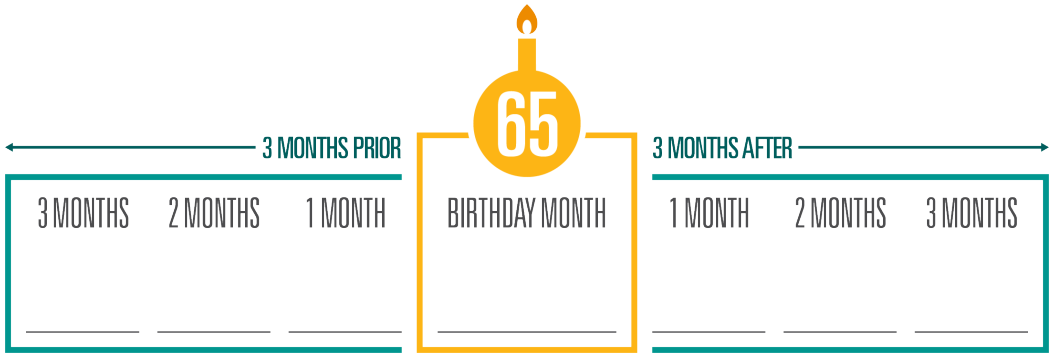
Enrolling in Coverage

Medicare Enrollment Periods

Enrolling for the First Time

Your Initial Enrollment Period (IEP)

- Three months before you turn 65, including the month you turn 65, and three months after your 65th birthday



General Enrollment Period (only for Original Medicare)

Jan. 1 to March 31

- If you miss your Initial Enrollment Period window, this is your other opportunity to enroll

Medicare Enrollment Periods Cont.

Switching Medicare Advantage Coverage

Annual Enrollment Period (AEP)

- Oct. 15 – Dec. 7

Special Enrollment Period (SEP)

- After certain life events:
  - A move out of your plan's service area
  - Begin receiving Medicaid benefits
  - Retiring or losing group coverage

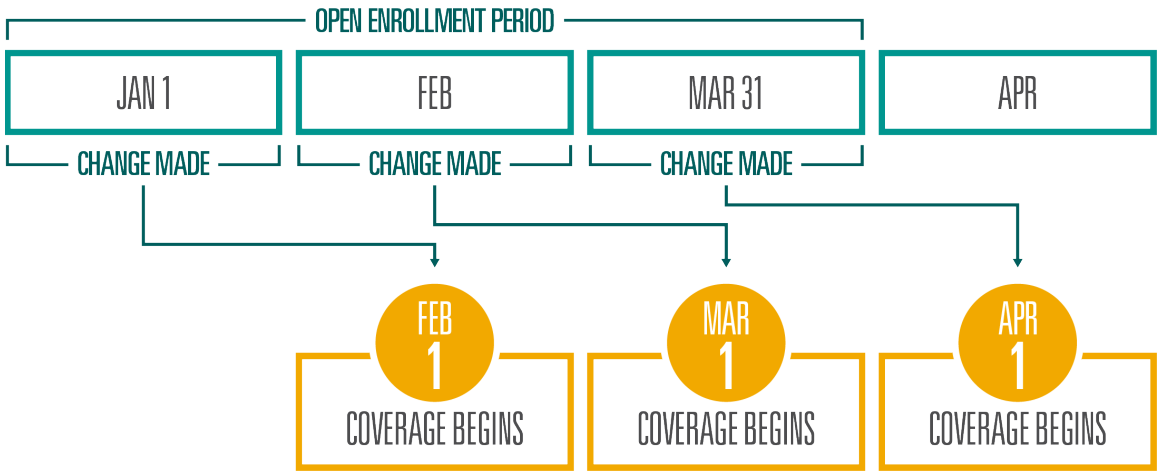
Medicare Enrollment Periods Cont.

Medicare Advantage Open Enrollment Period (MA OEP)

- Jan. 1 – March 31

During this period, you can:

- Switch from one Medicare Advantage plan to another
- Disenroll from your Medicare Advantage plan and return to Original Medicare
- Coverage begins the month after you make a change



Choosing a Medicare Advantage Plan

Things to Consider When Choosing a Plan (Cont.)

2 Check to see if your medications are covered

The formulary, or list of covered drugs, is built with a team of healthcare providers with thoughtfulness and care

Visit MedMutual.com/MAPlanInfo for a full list.

3 Find network pharmacies

Plans have a large selection of preferred and standard in-network pharmacies, as well as a mail-order option

Visit MedMutual.com/ProviderSearch for a full list.

Low-Income Subsidy

Low-Income Subsidy (LIS), also known as Extra Help, is a Medicare program administered by the Social Security Administration (SSA) to help individuals with limited income and resources pay for some health care and Part D prescription drug-related costs.

- The beneficiary must meet certain income and resource limits in order to qualify for LIS benefits.
- "Medicare's Extra Help program helps people with limited income pay for their prescription medications[1]."

1 CMS: The Centers for Medicare & Medicaid Services is part of the Department of Health and Human Services (HHS)

Helpful Resources

Helpful Resources

Ask Me!

I'm a licensed agent and can help you find a Medicare plan that fits your specific needs.

Social Security Administration

Check out your SSA statement, change your address and/or manage your benefits. Visit SSA.gov or call 1-800-772-1213.

Medicare Helpline

Find health and drug plans, apply online and/or find other useful information. You can also download the *Medicare & You* booklet by visiting Medicare.gov or by calling 1-800-633-4227.

Ohio Senior Health Insurance Information Program (OSHIIP)

You can call 1-800-686-1578. TTY users can call 1-614-644-3745 or visit Insurance.Ohio.gov.

Eldercare Locator

Find local services for older adults, caregivers and their families. It's a public service of the U.S. Administration on Aging. Visit Eldercare.gov or call 1-800-677-1116.

Questions?

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MedMutual Advantage plans are HMO and PPO plans offered by Medical Mutual of Ohio with a Medicare contract. Enrollment in a MedMutual Advantage plan depends on contract renewal. This is a solicitation for Medicare Supplement insurance through Medical Mutual of Ohio. Neither Medical Mutual nor any of its agents or Medicare Supplement insurance policies are connected with or endorsed by the U.S. or state government, Social Security or federal Medicare program. The Medicare Supplement insurance policy will include the exclusions, limitations, reduction of benefits and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, call or write your insurance agent or Medical Mutual. Medical Mutual Medicare Supplement insurance plans are being offered through Medical Health Insuring Corporation of Ohio. Contact will be made by a licensed insurance agent or insurer. The amount of benefits provided depends upon the plan selected and the premium will vary with the amount of the benefits selected.

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