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Ampifying Life

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Medicare and Open Enrollment

Did you know that in the United States, 10,000 people turn 65 every day? Medicare is a federally administered health insurance program that was established by law in 1965 and implemented for the first time in 1966. In order to be eligible for Medicare, a person must fall in to one of three groups: 1) those who are 65 and older; 2) those who are disabled; or 3) those who have end-stage renal disease (ESRD.)

The rules that govern Medicare are uniform throughout most states, although there are some rules that are applied in specific states or regions and payments vary from one region to another. The program is not free for the people, called beneficiaries, who benefit from Medicare. Rather, it is a program that has a shared cost between the beneficiaries and the federal government. These costs are shared through premiums, deductibles, coinsurance, and payment for non-covered (excluded) services and items.

Some people with Medicare have problems identifying ways to address their rising health insurance premiums, feel overwhelmed with the paperwork generated as a result of using health insurance, struggle to pay for their prescription medication, or simply don't know where to go to get answers for their Medicare questions. For this reason, Congress created State Health Insurance Assistance Programs (SHIPs.) There is a SHIP in every state as well as in Guam, Puerto Rico, the Virgin Islands, and the District of Columbia.

The SHICK program is our state's version of this federally funded service. SHICK provides free assistance to Medicare beneficiaries by helping individuals make informed decisions about their health care coverage during their retirement years. The SHICK program is designed to provide two primary services: 1) Provide information and education about Medicare A, B, C & D, Medicare supplement insurance, long-term care insurance, and other insurance-related topics. 2) Provide one-on-one confidential counseling sessions with trained counselors that focus on specific information or problems related to Medicare and related health insurance concerns.

People with Medicare Parts A, B or both, are eligible to join a prescription drug plan through Medicare Part D. Medicare Open Enrollment Period (OEP) is currently in progress. This is the time of year when Medicare Beneficiaries who are currently

enrolled in a Part D prescription can review their current Medicare prescription plan and determine if they want to stay with the same company and/or plan. It is important that these folks look at their plan during OEP every year. Sometimes the companies drop coverage of certain medications or change the level of coverage they offer to a current medication listed on their formulary. To review their prescriptions during OEP, October 15 – December 7, they need to visit with a SHICK counselor. If you have questions or concerns about your Medicare eligibility, benefits, or coverage feel free to contact me, Shandi Andres, at the Flint Hills District Extension Office in Council Grove, 620-767-5136.