

Medicare Planning Tool

Health Needs Assessment



How do you know which kind of Medicare coverage may be right for you?

You know what you want out of life. Deciding what you want out of a health plan isn't so easy. We can help. This simple assessment tool will help explain why you may need more coverage than Medicare alone, and outline your health care needs and options. It's your first step toward choosing the right Medicare plan for you when it's time to enroll.

No matter what your plans are for retirement, you need to plan for health care expenses. As good as Original Medicare is, it only pays about 80% of your medical expenses. The remaining 20% is your responsibility, and it could add up to thousands of dollars! For example, if you have no coverage other than Medicare, you could pay \$1,260* for a single day in the hospital.

Complete the following health care assessment to find the Medicare plan that may be right for you. Here's how it works: Review "Your Needs" and "Your Options." Then for each row, make one checkmark for "Your Plan Preference" — choose either Medicare Advantage or Medicare Supplement.

Your Needs	Your Options	Your Plan Preference	
Provider Needs Doctors and Hospitals	<p>With a Medicare Advantage HMO plan, your primary care doctor works with a network of specialists to coordinate your health care.</p> <p>With a Medicare Supplement plan, you manage your own care and can use any doctor or specialist who accepts Medicare.</p>	<input type="checkbox"/> Medicare Advantage	<input type="checkbox"/> Medicare Supplement
Budget Needs	<p>A Medicare Advantage HMO plan has no or low monthly premium costs but some additional costs, like copayments, when you use certain services.**</p> <p>A Medicare Supplement plan has a higher monthly premium, but you will pay less out of pocket as you use the plan.**</p>	<input type="checkbox"/> Medicare Advantage	<input type="checkbox"/> Medicare Supplement
Prescription Drug Needs	<p>If you have prescription drug needs, some Medicare Advantage HMO plans have built-in prescription drug benefits.</p> <p>Medicare Supplement plans don't include prescription drug coverage, but you can purchase a stand-alone Medicare Part D prescription plan.</p>	<input type="checkbox"/> Medicare Advantage	<input type="checkbox"/> Medicare Supplement

Your Needs	Your Options	Your Plan Preference	
<p>Health Care Needs</p>	<p>A Medicare Advantage HMO plan may be a better choice if you have complex health needs, or if you see the doctor only a few times a year. You'll have a lower monthly premium** with more out-of-pocket costs for usage, plus you get access to a care manager to help you with complex health situations.</p> <p>A Medicare Supplement plan may be better if you want the freedom to use any doctor or hospital that accepts Medicare. The monthly premium is higher, but expect little to no out-of-pocket expenses.**</p>	<input type="checkbox"/> Medicare Advantage	<input type="checkbox"/> Medicare Supplement
<p><i>IMPORTANT NOTE: Both kinds of plans provide comprehensive coverage that helps pick up where Original Medicare leaves off.</i></p>			
<p>Travel Needs</p>	<p>If you travel outside Massachusetts, both a Medicare Advantage HMO plan <u>AND</u> a Medicare Supplement plan provide emergency coverage.</p> <p>If you live outside the state for part of the year, a Medicare Supplement plan also gives you the ability to receive routine care from any doctor who accepts Medicare.</p>	<input type="checkbox"/> Medicare Advantage	<input type="checkbox"/> Medicare Supplement

Congratulations! You've completed your assessment. Add up “Your Plan Preference” checkmarks for each column. Which plan has more checkmarks, Medicare Advantage or Medicare Supplement? The answer gets you one step closer toward choosing the right plan for your health and your lifestyle.

Take the next step — join us for a FREE Informational Meeting!†

Now that you've started thinking about your health care needs, come to an Informational Meeting for the opportunity to speak with one of our Medicare Specialists one-on-one.

Visit thmp.org/meetings to find meetings in your area.

Or call 1-800-593-6760†† (TTY 1-888-899-8977).

We'll help you choose the right Medicare plan when it's time to enroll. More than 100,000 Massachusetts residents with Medicare have turned to Tufts Health Plan Medicare Preferred. We're here to help you, too. And remember, you can enroll 3 months before your 65th birthday.



Can't attend a meeting? Visit us online at thmp.org or call our Medicare Specialists at 1-800-593-6760^{††} (TTY 1-888-899-8977).

TUFTS Health Plan Medicare Preferred

* This is the 2015 deductible for Medicare Part A and may change on January 1, 2016.

** You must continue to pay your Medicare Part B premium.

† A sales person will be present with information and applications. For accommodation of persons with special needs at sales meetings, please call the toll-free number above.

†† Specialists available Monday – Friday, 8 a.m. – 8 p.m. (7 days a week, Oct. 1 – Feb. 14).

Tufts Medicare Preferred Supplement plans are offered in accordance with Massachusetts law. Members must have Medicare Part A and Part B to enroll in this plan.

Medicare Advantage Plans:

Tufts Health Plan Medicare Preferred is an HMO plan with a Medicare contract. Enrollment in Tufts Health Plan Medicare Preferred depends on contract renewal.

The benefit information provided is a brief summary, not a complete description of benefits. For more information, contact the plan. Limitations, copayments, and restrictions may apply.

Benefits, formulary, pharmacy network, premium and/or copayments/coinsurance may change on January 1 of each year.