

# COPD and Medicare Made Simple: Understanding Your Benefits

## What Is Medicare?

Medicare is a federal health insurance program that began in 1965 and is overseen by CMS, Centers for Medicare and Medicaid Services, a Department of Health and Human Services (HHS).

Medicare insures:

- people who are a U.S. Citizen or legal resident
- people aged 65 or older,
- people younger than 65 who have been receiving SSDI 2+ years; or
- people with End-Stage Renal Disease that require dialysis or transplant or ALS

Medicare is broken into different areas of coverage called **parts**

Medicare is individual coverage



patientadvocate.org

## Medicare Coverage

### Part A

#### Hospital Coverage

**Part A** covers inpatient hospital services, skilled nursing facilities, hospice care, blood transfusions, and home healthcare; think of Part A as hospital insurance.

### Part B

#### Medical Coverage

**Part B** covers physician fees, outpatient services, some home healthcare services, durable medical equipment, HCP-administered drugs, and some preventative services.

### Part D

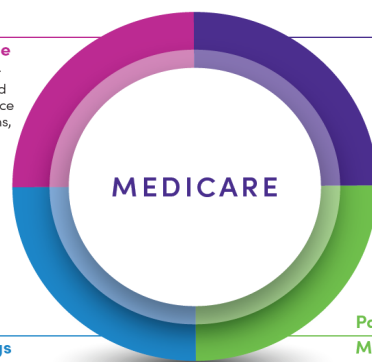
#### Prescription Drugs

**Part D** is a voluntary drug benefit that covers outpatient prescription drugs. Medicare Part C and Part D are administered by private insurance companies/plan sponsors that are approved by and subsidized by the federal government.

### Part C

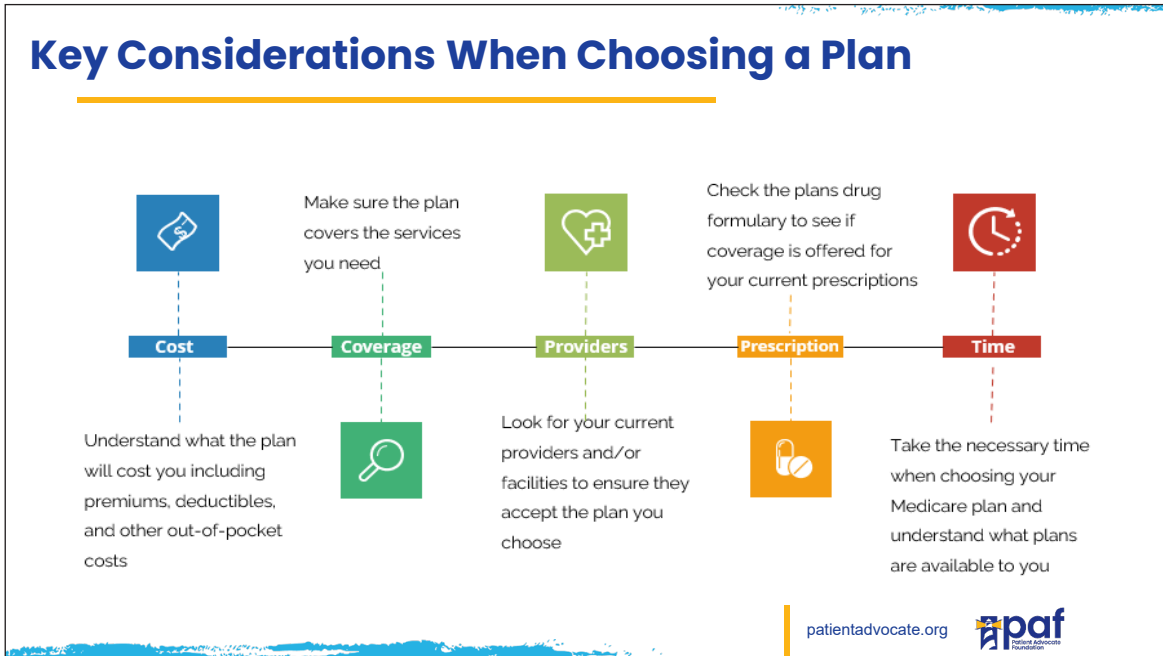
#### Medicare Advantage

**Part C**, also known as Medicare Advantage, offers the same coverage as original Medicare Parts A and B, and, in most cases, Medicare Part D (Medicare Advantage Prescription Drug-MAPD), and may also offer additional benefits such as dental, vision, and wellness programs.



patientadvocate.org

# COPD and Medicare Made Simple: Understanding Your Benefits



## Comparing Medicare Options


MEDICARE PARTS AND COVERAGE					
	MEDICARE PART A	MEDICARE PART B	MEDICARE PART C Advantage Plan	MEDICARE PART D Must Have Part A OR B to Enroll	MEDIGAP Must Have Part A AND B to Enroll
Hospital Stays	✓	✗	✓	✗	✗
Home Healthcare	✓	✗	✓	✗	✗
Hospice Care	✓	✗	✓	✗	✗
Outpatient Care	✗	✓	✓	✗	✗
Doctor's Visits & Tests	✗	✓	✓	✗	✗
Mental Healthcare	✗	✓	✓	✗	✗
Medical Equipment & Supplies	✗	✓	✓	✗	✗
Vision, Hearing & Dental	✗	✗	✓	✗	✗
Transportation	✗	✗	✓	✗	✗
Over-the-Counter Drugs	✗	✗	✓	✗	✗
Health & Wellness Services	✗	✗	✓	✗	✗
Prescription Drug	✗	✗	varies	✓	✗
Copayment & Deductible	✗	✗	✗	✗	✓

patientadvocate.org

# COPD and Medicare Made Simple: Understanding Your Benefits

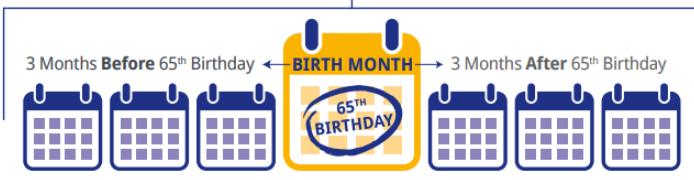
## Weighing Options: Original Medicare vs Medicare Advantage

ORIGINAL MEDICARE	FEATURES	MEDICARE ADVANTAGE
<input type="checkbox"/> No	<b>Require Pre-approval for Services?</b>	<input type="checkbox"/> Yes
<input type="checkbox"/> Most providers accept Medicare across the US	<b>Participating Providers</b>	<input type="checkbox"/> Have a smaller network of providers
<input type="checkbox"/> No out-of-pocket cap	<b>Limits on Costs</b>	<input type="checkbox"/> Has a maximum out-of-pocket cap which may vary depending on the plan, county, and year
<input type="checkbox"/> No coverage for benefits like eye exams, most dental care, and hearing aids	<b>Extra Benefits</b>	<input type="checkbox"/> May offer extra benefits like vision, hearing, and dental services




## Medicare Initial Enrollment Period

7-Month Long Initial Election Period (IEP)



3 Months <b>Before</b> 65 <sup>th</sup> Birthday Enroll as early as 3 months before your 65 <sup>th</sup> birthday Coverage begins on the first day of your birthday month	<b>BIRTH MONTH</b> Enroll during the month of your 65 <sup>th</sup> birthday Coverage begins on the first day of the following month	3 Months <b>After</b> 65 <sup>th</sup> Birthday Enroll in the last 3 months after your 65 <sup>th</sup> birthday Coverage begins on the first day of the month following the month you enroll
--	--	---

[patientadvocate.org](http://patientadvocate.org)


## COPD and Medicare Made Simple: Understanding Your Benefits

### Medicare Eligibility for Workers

- It depends on how you get your health insurance now and the number of employees that work where you (or your spouse) work if you need to sign up for Medicare when you turn 65
- Typically, if you have health insurance through your (or your spouse's) current job, you don't have to sign up for Medicare while you (or your spouse) are still working. You can wait to sign up until you (or your spouse) stop working or you lose your health insurance
- If you're still working and plan to keep your employer's group health coverage, you should talk to your benefits administrator to help you decide when you should enroll in Part B

### Medigap Plan Guaranteed Issue Period

Medicare supplemental insurance also known as Medigap plans, help cover remaining health care costs you have after Original Medicare such as co-payments, co-insurance, and deductibles.

**Important Tip :** Medigap Open Enrollment 6-month period starts the month you turn 65 and you have both Part A and Part B.

During your initial enrollment period, you are protected by "guaranteed issue rights" which require Medigap insurance providers to sell you a plan without restrictions or increasing premium rates based on pre-existing health conditions.

Guarantee issue for Medicare disabled or other enrollment periods vary state by state.

# COPD and Medicare Made Simple: Understanding Your Benefits

## Annual Medicare Open Enrollment



### Two Open Enrollment Periods Every Year

You can switch Medicare options at two times during the year if your circumstances change.

#### 1 Annual election period runs from October 15 through December 7

This is your first opportunity to make changes to your coverage. You can switch between Original Medicare or an MA plan or switch between MA plans. You can also add, change or remove your Part D plan.

#### 2 Medicare Advantage Open Enrollment period runs from January 1 to March 31

During this time, you can only return to Original Medicare (and add drug coverage) or switch between MA plans with or without drug coverage.

[patientadvocate.org](http://patientadvocate.org)



## Special Enrollment Periods

You might be able to leave, join, or change plans if you:

- Stop working or lose your health insurance
- move into a nursing home or skilled nursing facility
- move out of your plan's coverage area
- lose your current medication coverage
- want to change to a plan with a higher star rating



[patientadvocate.org](http://patientadvocate.org)



# COPD and Medicare Made Simple: Understanding Your Benefits

## Medicare Part D Extra Help Program

The Extra Help program helps with the cost of your prescription drugs, like deductibles and copays. You can apply for Extra Help any time before or after you enroll in Part D.


Income and Asset Limits are based on the previous year.

Your situation:	Income limit:	Resource limit: What counts in resource limits? ⓘ
Individual	\$22,590	\$17,220
Married couple	\$30,660	\$34,360

Apply at : <https://www.ssa.gov/medicare/part-d-extra-help>


## Medicare Savings Programs

There are 4 types of Medicare Savings Programs. If you are eligible for these savings programs, they may help to pay Medicare Premiums, deductibles, co-insurance and co-pays. Eligibility is based off income and resources.




**Qualified Medicare Beneficiary Program (QMB)**

This savings program helps pay for Part A premiums, Part B premiums, Deductibles, coinsurance, and copayments.




**Specified Low-Income Medicare Beneficiary Program (SLMB)**

This savings program can help pay for Part B premiums.

**Qualifying Individual Program (QI)** 

This savings program can help pay for Part B premiums.

**Qualified Disabled and Working Individuals (QDWI)** 

This savings program can help pay for Part A premiums for a working disabled person under 65 or if a person loses SSDI and premium-free Part A due to returning to work

## COPD and Medicare Made Simple: Understanding Your Benefits

### Medicare Part D Changes–New for 2025

**Beginning in 2025, the IRA dramatically reduced the OOP costs for Medicare Part D beneficiaries who currently spend more than \$2,000 on their medications.**

\$13,000/ month EXAMPLE:

#### Jill's Prescription Drug Costs



patientadvocate.org

### Medicare Prescription Payment Plan– 2025

- The Medicare Prescription Payment Plan allows people with Medicare prescription coverage (Part D) to pay their out-of-pocket prescription drug costs in monthly installments instead of all at once.
- The Medicare Prescription Payment Plan only applies to Part D and Medicare Advantage plans that offer Part D benefits.

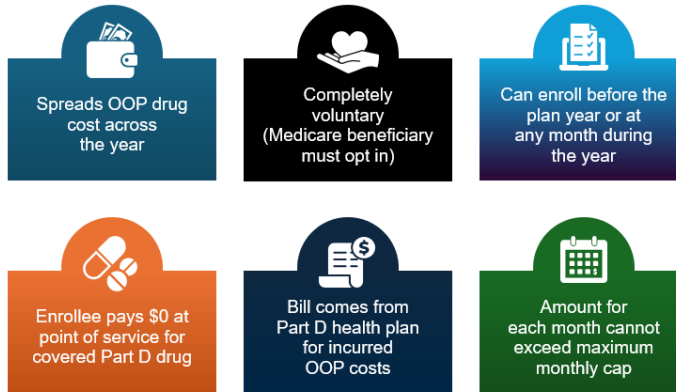
[New Medicare Prescription Payment Plan - Education Resource Library \(patientadvocate.org\)](https://www.patientadvocate.org/education-resources/new-medicare-prescription-payment-plan)

patientadvocate.org

# COPD and Medicare Made Simple: Understanding Your Benefits

## Medicare Prescription Payment Plan

### Key Features for Medicare Beneficiary



### Other Terms

- Smoothing
- MPPP
- M3P

[New Medicare Prescription Payment Plan - Education Resource Library \(patientadvocate.org\)](https://www.patientadvocate.org/education/new-medicare-prescription-payment-plan)

patientadvocate.org

## Medicare Prescription Payment Plan

### Smoothing is a Flexible Tool for Medicare Beneficiaries, though may not benefit everyone

**Example #1: Patient is prescribed a \$500/month drug in January**




**Example #2: Patient is prescribed a \$500/month drug in September**



patientadvocate.org



# COPD and Medicare Made Simple: Understanding Your Benefits



**Joanne**  
Medicare Prescription Payment Plan Case Study

**SOCIAL HISTORY**

Joanne is a 76-year-old widowed retiree living on a fixed income. She resides in a rural community.

**MEDICAL HISTORY**

- Congestive heart failure
- COPD
- Osteoporosis

Multiple hospitalizations in the past year due to heart failure exacerbations.



**FINANCIAL SITUATION**

Joanne's Social Security income puts her at 125% FPL, qualifying her for Low Income Subsidy. She has Original Medicare and Part D.

**CURRENT MEDICATIONS**

Requires a complex medication regimen including multiple brand-name drugs, inhalers, and injectables.

**SHOULD JOANNE OPT IN?**




**Joanne**  
Medicare Prescription Payment Plan Case Study

**SHOULD JOANNE OPT IN?**


Probably not.

Since Joanne is enrolled in Low Income Subsidy, her prescription costs remain low. The new Medicare Prescription Payment Plan would likely provide minimal benefit.

She may prefer to continue paying for prescriptions upfront as she has done in the past.



# COPD and Medicare Made Simple: Understanding Your Benefits



**SOCIAL HISTORY**

Lisa is 60 years old. She is enrolled in Original Medicare.

**CHALLENGE**


High co-insurance under Original Medicare make it difficult to access the full course of pulmonary rehabilitation, contributing to uncontrolled COPD.

**ISSUE**

Lisa's pulmonologist strongly recommends she participate in a pulmonary rehabilitation program to help manage her uncontrolled COPD. While Medicare Part B covers pulmonary rehab, Lisa is responsible for a 20% co-insurance for each session. On her fixed income, Lisa can only afford to attend a few sessions, which isn't enough for effective management of her condition. Without regular rehab, Lisa's symptoms worsen, leading to increased hospitalizations.

**Lisa**

Case Study



## Understanding Cost: Key Terms

Key Term	Definition	Example
<b>Premium</b>	Fixed dollar amount paid each month to have health insurance.	Medicare Part A: \$ 0 for most Medicare Part B: \$185 month for most Medicare Part D: \$36.78 for most Medicare Advantage: varies by plan
<b>Deductible</b>	Fixed dollar amount which you are responsible, before your insurance plan will start paying for healthcare expenses. You pay this deductible once each plan year.	Medicare Part A: \$1,676 Medicare Part B: \$257 Medicare Part D: \$590
<b>Co-insurance or Cost-Share</b>	A percent of the healthcare item or service you are responsible after you have met your deductible.	The coinsurance rate is 20% and the procedure is \$400, you are responsible for paying \$80.
<b>Copay</b>	Fixed dollar amount that you pay for a healthcare service. This will vary for Primary Care, Specialists, Emergency Room, etc.	If the copay is \$20 and the medical visit is \$400, you are responsible for paying \$20 for that visit.
<b>Out-of-Pocket Maximum/Limit</b>	A fixed amount you will pay for medical services in a plan year. Your copays, coinsurance, and deductibles all apply to the maximum. Once you reach this amount, your insurance pays 100% of the covered medical costs for the rest of the plan year.	Medicare Part D: \$2,000 Medicare Advantage: The out-of-pocket maximum is \$9,350. Individual Advantage plans may have lower OOP limits.

\*2025

# COPD and Medicare Made Simple: Understanding Your Benefits

## Understanding Medicare Part B Coverage & Cost

### Part B



DOCTORS' VISITS  
 OUTPATIENT HOSPITAL SERVICES  
 DURABLE MEDICAL EQUIPMENT  
 PHYSICIAN-ADMINISTERED DRUGS

2025 Part B deductible - \$257

Co-Insurance (%) and Co-Pay (Fixed \$) Cost has no limit to how much you could pay out-of-pocket services in a year.

- If Lisa gets the service in a doctor's office, she will pay 20% of the Medicare-approved amount.
- If Lisa receives services in a hospital outpatient setting, she may also require a copayment to the hospital for each rehab session.
- In some instance, a doctor may recommend that you have more rehab sessions than Medicare is willing to pay for. If so, you may incur the entire cost of the extra sessions.

patientadvocate.org



Lisa


Case Study

### STEPS TO TAKE FOR OUT-OF-POCKET MEDICAL COSTS

- **Explore Medicare Savings Programs:** These programs help low-income Medicare beneficiaries with their out-of-pocket costs, including premiums, deductibles, and copayments. Lisa can contact her state's Medicaid program to discuss eligibility and apply.
- **Check eligibility for Medicaid:** Medicaid can help Lisa financially with the cost of her copays and other Medicare costs, including helping with monthly premiums.
- **Seek Financial Assistance from the Pulmonary Rehabilitation Program:** Lisa can inquire if they offer any financial assistance programs, sliding scale fees, or payment plans to help reduce the cost of participation.
- **Explore charitable options:** Some community organizations may offer financial assistance for healthcare expenses.
- **Discuss her financial limitations with her provider:** Explain the challenges she faces in affording the copays and explore alternative options, such as home-based pulmonary rehabilitation programs or less expensive options.



# COPD and Medicare Made Simple: Understanding Your Benefits



**Mary**

Case Study

**SOCIAL HISTORY**


Mary is 63 years old. She is enrolled in a Medicare Advantage plan.

**CHALLENGE**

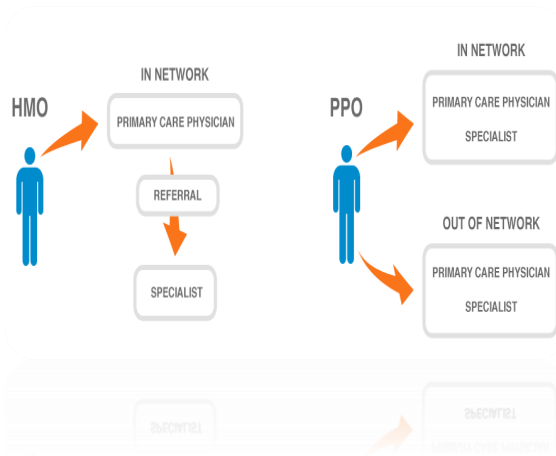
Delays in receiving necessary specialist care due to prior authorization requirements in Medicare Advantage, leading to poor control of COPD symptoms.

**ISSUE**

Mary's COPD has become harder to manage, and her primary care physician referred her to a pulmonologist for specialized care. However, her Medicare Advantage plan requires prior authorization for specialist visits. The approval process takes several weeks, delaying her access to the pulmonologist. During this time, Mary experiences worsening symptoms and ends up visiting the emergency room twice, which could have been avoided with more timely care.



## Understanding Plan Structure and Networks




Structure impacts premium amount, cost-sharing and reimbursement, available providers in-network, paperwork & processes, and more

There are many different types of plan types in the healthcare market

- HMO
- Supplemental
- PPO
- Employer
- POS
- Marketplace
- EPO
- Medicaid
- HDHP
- Medicare
- Indemnity
- TRICARE
- VA Benefits

# COPD and Medicare Made Simple: Understanding Your Benefits




## Mary

Case Study

### STEPS TO TAKE FOR DELAYED CARE

**Ask Your Provider to Intervene:** Mary's provider can reach out to her Medicare Advantage Plan and request an expedited review. Her provider can emphasize her worsening symptoms and the potential for further complications if timely treatment is delayed.

**Switch to Original Medicare:** During open enrollment, Mary can switch her plan. With Original Medicare, she can go to a specialist without a pre-authorization, as long as the provider accepts Medicare.



## Greg

Case Study

### SOCIAL HISTORY

Greg is 55 years old. He is enrolled in a Medicare Advantage plan.

### ISSUE

Greg's COPD is worsening, and his pulmonologist prescribed a combination inhaler to help manage his condition more effectively. However, his Medicare Advantage plan does not cover the specific brand his doctor recommended, insisting on a lower-cost alternative that Greg has tried before with poor results. Unable to afford the prescribed inhaler out-of-pocket, Greg's COPD remains uncontrolled, leading to frequent exacerbations.

### CHALLENGE


Formulary restrictions in Medicare Advantage plans that limit access to effective medications, worsening COPD control.




# COPD and Medicare Made Simple: Understanding Your Benefits


## Understanding Medication Tiers

Uncovered Drugs



**Formulary:**  
A list of prescription drugs covered by a prescription drug plan or another insurance plan offering prescription drug benefits. Also called a preferred drug list



[patientadvocate.org](http://patientadvocate.org)


## Understanding Drug Formulary: Key Terms

Key Term	Definition	Example
<b>Formulary</b>	A list of prescription drugs that the health insurance plan covers. May also be called a preferred drug list	A plan may offer generic only. When crafting a drug formulary, every individual health insurance does it differently. This variety means each health provider's drug formulary is unique.
<b>Tiers</b>	Formularies are often divided into tiers, with each tier corresponding to a level of cost.	A tier-one drug may have a small co-pay, while a higher-tier drug may require a percentage of the total cost.
<b>Prior Authorization</b>	Required approval from your health insurance before a specific medical service, treatment, or medication is provided.	Your provider prescribes a medication that is new to the market. Your provider's office must complete additional paperwork before the medication will be approved and your insurance pays their portion.
<b>Step Therapy</b>	Requirement to try an alternative medication first, often.	When your plan wants you to try a lower cost or alternative medication before considering another.
<b>Quantity Limits</b>	Coverage limit on the amount of medication that will be allowed in a period of time.	For example, 30 tablets per month.

# COPD and Medicare Made Simple: Understanding Your Benefits



**Greg**

Case Study

## STEPS TO TAKE FOR FORMULARY RESTRICTIONS

**Appeal the formulary decision:** Greg and his provider can appeal the plan's decision to deny coverage for the prescribed inhaler. They should submit a detailed letter explaining why the prescribed inhaler is the most appropriate medication for Greg's specific condition, citing medical evidence, Greg's previous experience with an alternative inhaler, and clinical guidelines.

**Explore alternative medications:** Greg and his provider can discuss alternative medications within the plan's formulary that may be more effective than the initially offered alternative.

**Inquire with the manufacturer:** Greg may be able to obtain the medication directly through the manufacturer. Many drug manufacturers have programs that supply patients medications for free if they meet financial guidelines and cannot obtain it through insurance.

**Switch Plans:** During open enrollment, Greg can switch his plan. With Original Medicare, he can purchase a Part D plan, or he can choose a different Medicare Advantage Plan with a more robust formulary.



## Patient Assistance Programs (PAP)

Manufacturer Free Product & Manufacturer Foundation Free Product	<ul style="list-style-type: none"> <li>• Free brand name products that are given to patients by the manufacturer of those products.</li> <li>• Manufacturer can set the eligibility guidelines and duration of assistance</li> <li>• Assistance can be through several sources - direct from manufacturer, the manufacturer's foundation or a third-party supplier.</li> </ul>
Manufacturer Coupon/Card & Manufacturer Foundation Coupon/Card	<ul style="list-style-type: none"> <li>• Manufacturer's provide assistance to commercially insured patients to receive and offset the co-pay costs for their branded product.</li> <li>• Manufacturer can set the eligibility guidelines and duration of assistance.</li> <li>• Assistance can be through several sources - direct from manufacturer, the manufacturer's foundation or a third-party supplier.</li> </ul>
Charitable Patient Assistance Program (PAP)	<ul style="list-style-type: none"> <li>• Independent 501(c)(3) organizations with an OIG opinion, who provide assistance to insured patients to assist with their co-pay costs.</li> <li>• The charity organization sets the eligibility guidelines, amount of assistance and duration independent of manufacturer influence.</li> <li>• Assistance is disease specific and cover all branded or generic treatments without limitations.</li> </ul>

[patientadvocates.org](http://patientadvocates.org)


# COPD and Medicare Made Simple: Understanding Your Benefits

## Charitable Co-Pay Programs

National Charitable Co-Pay Programs: 501(c)(3) organizations provide assistance to insured patients to assist with their co-pay costs. There are income eligibility guidelines, and the charity decides if the disease fund supports all insured patients or just those insured through government benefits.

- [Co-Pay Relief](#) 866-512-3861
- [Accessia Health](#) 800-366-7741
- [CancerCare](#) 866-55-COPAY
- [Good Days](#) 877-968-7233
- [Healthwell Foundation](#) 800-675-8416
- [National Organization for Rare Disorders](#) 800-999-6673
- [Needy Meds](#) 800-503-6897
- [Patient Access Network Foundation](#) 866-316-7263
- [The Assistance Fund](#) 855-845-3663

patientadvocate.org





**Frank**

Case Study

### SOCIAL HISTORY

Frank is 68 years old. He is enrolled in Original Medicare.

### CHALLENGE

Balancing financial concerns with medical recommendations for rehabilitation and addressing patient fears about insurance coverage for SNF care.

### ISSUE

Frank is hospitalized after a severe COPD exacerbation. His doctors recommend he be discharged to a Skilled Nursing Facility (SNF) for short-term rehabilitation and respiratory therapy to stabilize his condition before returning home. However, Frank refuses, worried that Medicare may not fully cover the stay, and he prefers to recover at home. Despite the care team's assurances about the importance of additional rehab, Frank fears the potential out-of-pocket costs and is reluctant to leave the hospital.





# COPD and Medicare Made Simple: Understanding Your Benefits

## Understanding Medicare Part A Coverage & Cost

### Part A



INPATIENT HOSPITAL CARE

SKILLED NURSING SERVICES

HOSPICE CARE

#### Hospital inpatient stay

In 2025, you pay:

- \$1,676 deductible per benefit period
- \$0 for the first 60 days of each benefit period (after you pay the deductible)
- \$419 per day for days 61-90 of each benefit period
- \$838 per "lifetime reserve day" after day 90 of each benefit period (up to a maximum of 60 days over your lifetime)
- All costs for each day after day 150

#### Skilled Nursing Facility stay

In 2025, you pay:

- \$0 for the first 20 days of each benefit period
- \$209.50 per day for days 21-100 of each benefit period
- All costs for each day after day 100 of the benefit period

patientadvocate.org



Frank

Case Study

## STEPS TO TAKE FOR FINANCIAL CONCERNS FOR CARE

**Explore Financial Assistance Programs:** Some SNFs may offer financial assistance programs or sliding-scale fees for patients with limited financial resources.

**Explore Medicare Savings Programs:** These programs help low-income Medicare beneficiaries with their out-of-pocket costs, including premiums, deductibles, and copayments. Frank can contact his state's Medicaid program to discuss eligibility and apply.

**Discuss Home Health Care:** Frank can explore the possibility of receiving skilled nursing care and rehabilitation services at home, which would be cheaper than in a SNF.

- Medicare Coverage: Medicare Part A covers home health care under certain conditions.
- Home Health Agencies: Work with the hospital discharge planner to find a reputable home health agency.



## COPD and Medicare Made Simple: Understanding Your Benefits

### Hospital Charity Care Resource – Dollar For

Dollar For helps patients navigate hospital financial assistance, or charity care, programs.

Helps with hospital bills for facilities that receive federal funding. There is a prescreening tool for patients.

Does not help with any other medical bill issues such as appeals, negotiating payment plans, etc.



See if you qualify,  
then fill out our  
patient form



We'll prepare your  
application for you  
and send it to the  
hospital



We work with you  
and the hospital to  
get you medical  
debt relief

PAF Link: [dollarfor.org/PAF](https://dollarfor.org/PAF)

[patientadvocate.org](https://patientadvocate.org)

### External Resources:

- **Medicare:** <https://www.medicare.gov> or 800-633-4227
- **Medigap:** <https://www.medicare.gov/health-drug-plans/medigap>
- **Extra Help:** <https://www.ssa.gov/medicare/part-d-extra-help>
- **Medicare Savings Program :** <https://www.medicare.gov/basics/costs/help/medicare-savings-programs>
- **Medicaid:** <https://www.medicicaid.gov>
- **DollarFor:** [dollarfor.org/PAF](https://dollarfor.org/PAF)
- **SHIP (State Health Insurance Assistance Program):** <https://www.shiphelp.org>



[patientadvocate.org](https://patientadvocate.org)



## COPD and Medicare Made Simple: Understanding Your Benefits

### PAF Medicare Educational Resources:

- **PAF's Education Resource Library:** <https://education.patientadvocate.org>
- **PAF's Medicare Resource Center:** <https://www.patientadvocate.org/medicare>
- **Making the Most of Your Medicare Benefits: A Guide to Navigating Medicare With Confidence:** <https://education.patientadvocate.org/resource/making-the-most-of-your-medicare-benefits-a-guide-to-navigating-medicare-with-confidence>
- **7-Module Interactive Training Series Available:** <https://patienteducation-paftraining.talentlms.com>
- **Choose Wisely: Tips for Medicare Open Enrollment:** <https://bit.ly/3Q7Fxa1>
- **Step by Step Guide to Choosing a Medicare Plan:** <https://bit.ly/3einL6m>
- **Medicare Prescription Payment Plan:** <https://education.patientadvocate.org/resource/new-medicare-prescription-payment-plan>



patientadvocate.org

