

Getting to know Medicare

A guided tour and introduction for veterans and their families



Today, we'll cover:

- Medicare eligibility and enrollment options
- Medicare options
- VA healthcare and Medicare
- How Medicare may affect veteran coverage like VA healthcare, TRICARE for Life and CHAMPVA
- Helpful resources



Are you eligible for Medicare?

You're eligible for Original Medicare (Parts A and B) if:



You're at least 65 years of age
(even if you still work)

OR



You're under 65 and qualify
due to a disability or other
special circumstance

AND



You're a U.S. citizen or a legal
resident who has lived in the U.S.
for at least 5 consecutive years

Medicare enrollment periods, explained

Initial Enrollment Period

If you're enrolling in Medicare for the first time, you have an Initial Enrollment Period (IEP) that begins 3 months before and ends 3 months after you turn 65. It begins and ends 1 month earlier if your birthday is on the first of the month.

Annual Enrollment Period

Oct. 15–Dec. 7

During the Annual Enrollment Period (AEP), you can add, drop or switch your Medicare coverage.

Open Enrollment Period

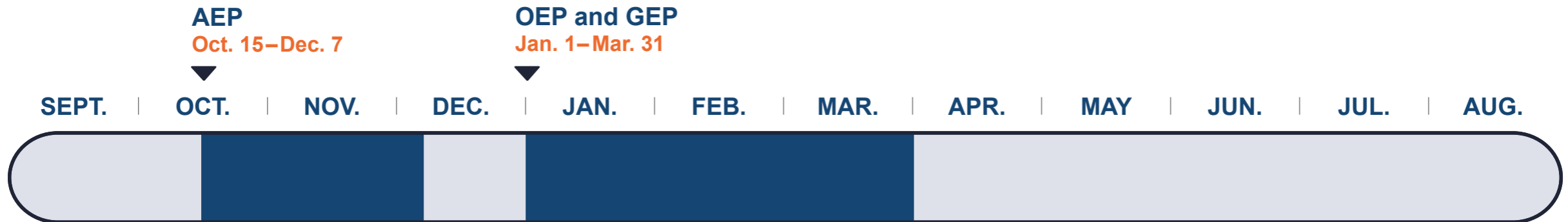
Jan. 1–March 31

If you already have a Medicare Advantage (MA) plan, you may enroll in another MA plan or go back to Original Medicare during the Open Enrollment Period (OEP). You may make only 1 change within the period.

General Enrollment Period

Jan. 1–March 31

If you didn't sign up for Original Medicare during your IEP, you get another chance during the General Enrollment Period (GEP). You may not face a fee or penalty due to VA coverage—for example, if you didn't take Medicare when you were initially eligible due to veteran benefits—but some penalties may apply.

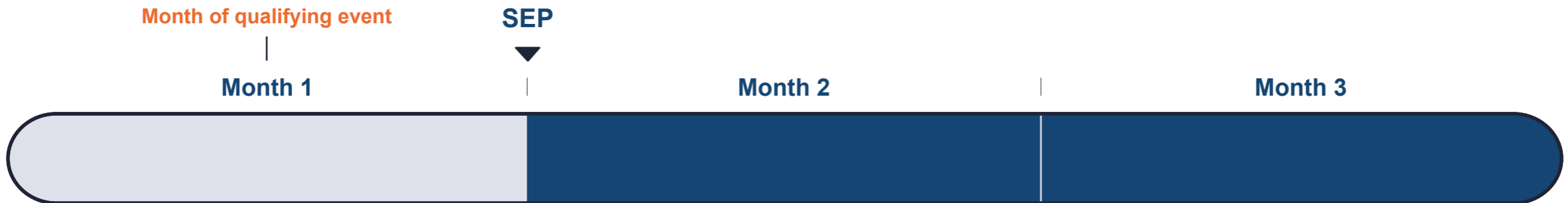


Special Election Period

A Special Election Period (SEP) is an opportunity to enroll in, change or drop your Medicare Advantage or Part D prescription drug plan (PDP) outside of the AEP due to a qualifying life event—without penalty. You generally have 2 months after the month of the qualifying event to make a switch, though specific dates will vary for each person’s situation. Qualifying life events may include:

- You’ve been diagnosed with a qualifying chronic health condition.
- You’ve moved to a permanent residence outside of your current MA plan service area.

- You qualify for Extra Help.
- You’re retiring and losing employer coverage.
- Your plan is not renewing its contract with the Centers for Medicare & Medicaid Services (CMS) or intends to stop providing benefits in your area at the end of the year.



Understanding your Medicare options

To help you decide the best fit for you, here is an overview of the Medicare options and what each one covers.

Step
1

Enroll in Original Medicare—offered by the federal government.



Part A helps pay for hospital stays and inpatient care.



Part B helps pay for doctor visits and outpatient care.

- If you don't enroll in Part B when first eligible, you'll pay a penalty if you sign up later. The penalty increases yearly and is for life.
- If you cancel Part B coverage, you won't be able to re-enroll until the next January, and re-enrollment may come with a penalty.
- The late-enrollment or re-enrollment penalty still applies if you have VA healthcare, which does not count as creditable coverage for Part B.

Understanding your Medicare plan options

To help you decide the best fit for you, here is an overview of the Medicare options and what each one covers.

**Step
2**

After enrolling in Original Medicare, you can explore additional types of coverage—offered by private companies.

Option 1: Choose a Medicare Advantage plan.

OR

Option 2: Add one or both of the following to Original Medicare.



Medicare Part C (Medicare Advantage) is made up of Part A, Part B and can include Part D (prescription drug coverage) as well as additional coverage.



Medicare Part D is a stand-alone prescription drug plan.



Medicare Supplement insurance (Medigap) plans help pay for some of Original Medicare's out-of-pocket costs.

Benefits *not* available through Original Medicare (Parts A and B):



Most prescription drugs



Long-term care



Most care outside of
the U.S.



Eye exams, glasses
and contact lenses



Gym memberships and
wellness benefits



Hearing exams and
hearing aids



Help with activities of
daily living, like eating
and bathing



Routine dental exams,
cleanings and X-rays



Personal expenses
during hospitalization,
like a phone and TV



Hospital and
psychiatric hospital
stays (beyond a set
number of days)

MEDICARE ADVANTAGE

A few advantages of Medicare Part C for veterans with VA healthcare

- Remains separate from VA healthcare and will not impact a veteran's ability to go to the VA
- Provides additional options to see doctors in the plan network outside of the VA
- Offers emergency coverage outside of the VA
- Offers the same coverage as Original Medicare and may feature additional coverage
- Includes medical and prescription drug coverage in one plan, also known as Medicare Advantage prescription drug (MAPD) plans



Types of MA plans

HMO

Health maintenance organization

With a health maintenance organization (HMO), you have a large network of providers and generally have to stay within the network, which helps keep your out-of-pocket costs in check.

PPO

Preferred provider organization

A preferred provider organization (PPO) offers a large network of healthcare providers and the flexibility of going out of network for care, although you may pay more.

PFFS

Private fee-for-service

You may have more freedom to choose providers with a private fee-for-service (PFFS) plan, but a network arrangement may still apply. Providers who accept Medicare must bill the plan per its terms and conditions.

PRESCRIPTION DRUG PLAN

Medicare Part D and VA healthcare

A Medicare Part D plan helps pay for your prescription drugs. You can choose:

An MAPD plan, which has both medical and prescription drug coverage with one monthly premium

OR

A stand-alone PDP with Original Medicare*

If you have VA healthcare:



You already have creditable prescription drug coverage.



Drug coverage from an MAPD plan or PDP will be separate from your VA drug coverage.



You can use the drug coverage that is cheaper or more convenient for you.



Every plan with prescription coverage has a formulary—a list of drugs it covers.

*A stand-alone prescription drug plan can be paired with a Medicare Supplement insurance (Medigap) plan.

PRESCRIPTION DRUG PLAN

Understanding the Part D stages

Most Medicare prescription drug plans have three stages.

(Note that the information below only pertains to Part D prescription drug costs.)

STAGE 1

Deductible: **you pay 100%**

- You pay all costs until the deductible is met.
- A deductible is the amount you pay for your medication costs before the plan pays its share.
- Deductible amounts and tier exclusions vary across plans—some plans may exclude commonly used medications from the deductible phase.

STAGE 2

Initial Coverage: **shared cost with insurance company**

- During the Initial Coverage Stage, the plan pays its share of the cost of your covered prescription drugs, and you pay your share (your copayment or a coinsurance).
- Both you and your insurance plan pay medication costs until your Part D out-of-pocket costs reach \$2,100.

STAGE 3

Catastrophic Coverage: **insurance plan pays 100%**

- During this stage, you pay nothing for the remainder of the calendar year.
- The plan is responsible for the full cost for your covered Part D prescription drugs.

How Original Medicare works with your TRICARE for Life or CHAMPVA coverage

- You must maintain Parts A and B of Medicare (Original Medicare) to keep TRICARE or CHAMPVA as secondary coverage.
- Coordination of billing is not required.
- You have the flexibility to see any provider who accepts Original Medicare.
- Creditable drug coverage is included with TRICARE and CHAMPVA—copays may apply.

Medicare Advantage and your TRICARE for Life or CHAMPVA coverage¹







- If you're only looking for additional coverage, consider a stand-alone dental/vision plan or Federal Employees Dental and Vision Insurance Program (FEDVIP).²
- If you decide to enroll in an MA plan, the MA plan will become your primary coverage, and you must see providers in network for that MA plan.
- Accordingly, TRICARE and CHAMPVA beneficiaries should only consider enrolling in an MA or MAPD plan if they can coordinate billing and plan to stay within the MA plan's network for their provider.
- TRICARE and CHAMPVA may help cover copays for in-network providers, **but unlike Original Medicare, coordination of billing will need to be coordinated by you and your providers.**³

Note: If you enroll in a Medicare Advantage plan, it will impact the claims process between Medicare and TRICARE for Life. Please reach out to a TRICARE for Life or CHAMPVA representative for more information.

Sources:

1. "[Using TRICARE for Life at Veterans Affairs Facilities](#)," U.S. Department of Defense, last accessed March 14, 2025, www.tricare.mil/Plans/HealthPlans/TFL/TFL_VA.
2. "[Dental Benefits for Retirees and Survivors](#)," U.S. Department of Defense, last accessed March 14, 2025, www.tricare.mil/CoveredServices/Dental/RetireeSurvivorBenefit.
3. "[TRICARE For Life Handbook](#)," U.S. Department of Defense, January 2025, last accessed March 14, 2025, https://tricare.mil/Publications/Handbooks/tricare_for_life.

Factors to consider when choosing coverage

 Cost	How much will you pay for premiums, deductibles, coinsurance and copayments?
 Coverage	Does the plan include prescription drug coverage or other additional coverage?
 Network	How does the plan affect other coverage you may have, such as VA healthcare?
 Convenience	Are you required to submit claim forms and other paperwork? Can you get prescriptions by mail?
 Health history	How often have you needed care in recent years? Do you have a chronic condition requiring ongoing care?
 Health future	Your health may change. Consider what your future medical needs may be.



Helpful resources

VA Healthcare

VA health benefits hotline: 877-222-8387 (TTY: 711)
Monday–Friday, 8 a.m.–8 p.m., Eastern time

General information: www.va.gov/health-care/

TRICARE/TRICARE for Life

TRICARE for Life (Wisconsin Physician Services): 866-773-0404
(TTY: 711) Monday–Friday, 5 a.m.–10 p.m., Central time

TRICARE for Life website: www.tricare.mil/Plans/HealthPlans/TFL

TRICARE East (prior to Medicare): 800-444-5445 (TTY: 711)
Monday–Friday, 8 a.m.–5 p.m., Eastern time, excluding holidays

TRICARE West (prior to Medicare): 844-866-9378 (TTY: 711)
Monday–Friday, 5 a.m.–9 p.m., Pacific time

TRICARE (prior to Medicare) website: www.tricare.mil/

CHAMPVA

CHAMPVA Help Line: 800-733-8387 (TTY: 711)
Monday–Friday, 8:05 a.m.–7:30 p.m., Eastern time

General information: www.va.gov/health-care/family-caregiver-benefits/champva/

Medicare

- Medicare customer service: 1-800-MEDICARE (1-800-633-4227) 24 hours a day, 7 days a week. If you use a TTY, call 1-877-486-2048.
- General information: www.medicare.gov



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