

MEDICARE MADE SIMPLE GUIDE



GlobalHealth
MEDICARE ADVANTAGE PLANS

It's not about us. IT'S ABOUT YOU!

At GlobalHealth, we understand reviewing your Medicare options can feel overwhelming. However, understanding your Medicare options will give you confidence in making decisions about your health.

This Medicare Made Simple Guide will review topics such as:

- Eligibility Requirements
- The Different Parts of Medicare
- Important Enrollment Periods
- Information on Chronic Special Needs Plans (C-SNP)
- Information on Dual Special Needs Plans (D-SNP)
- Original Medicare, Medicare Advantage and Supplement Comparison
- Out-of-Pocket Costs

Providing you with GENUINE CARE and OPTIMAL HEALTH
will always be our number one priority.

Strong benefits designed to reduce out-of-pocket expenses.

A local customer care team based right here in Oklahoma.

Access to thousands of physicians and many
major hospitals in our network.

If you want to learn more about your Medicare options,
our local agents are here to help.

ARE YOU ELIGIBLE FOR MEDICARE?

You may be eligible for Medicare if you:

- Are 65 or older • Are younger than 65 with certain disabilities

QUESTIONS ABOUT MEDICARE?

1-855-455-7058 (TTY: 711)

8:00 AM-8:00 PM, CST

7 days a week (Oct 1-Mar 31)

Monday-Friday (Apr 1-Sept 30)

What are the DIFFERENT PARTS OF MEDICARE?



PART A (Hospital Insurance)

is part of Original Medicare and covers hospitalization, skilled nursing facilities and home health care.



PART B (Medical Insurance)

is also part of Original Medicare and covers outpatient care, certain doctors' services, medical supplies and preventive care.



PART C (Medicare Advantage)

is an all-in-one alternative to Original Medicare to enhance your health coverage. Medicare Part C, such as a plan from GlobalHealth, combines Part A and Part B and often Part D prescription drugs. Medicare Part C usually offers more benefits for services such as dental, vision and low to no copays on physician visits. You must have Medicare Part A and B to enroll in a Medicare Advantage plan.



PART D (Medicare Advantage)

is an optional part of Medicare that provides prescription drug coverage. You must have Medicare Part A and/or B to enroll in a prescription drug plan. Many of GlobalHealth plans include prescription drug coverage.

Chronic Special Needs Plans (C-SNP)



WHAT IS A C-SNP PLAN?

C-SNPs are types of Medicare Advantage plans designed for Medicare beneficiaries with chronic conditions. Insurers may offer C-SNP plans for only one condition or a group of conditions.

WHAT CONDITIONS QUALIFY?

The Centers for Medicare and Medicaid defines which condition or group of conditions a Medicare Advantage plan may cover through a C-SNP plan. For 2027, GlobalHealth offers C-SNP plans in all of our service area counties.

The applicable chronic conditions for C-SNP plans are:

- Chronic heart failure
- Diabetes mellitus
- Cardiovascular disease including cardiac arrhythmias, coronary artery disease, peripheral vascular disease, and chronic venous thromboembolic disorder

HOW DO C-SNPS HELP?

Every Special Needs Plan has a model of care, approved by the National Committee of Quality Assurance (NCQA). Each member receives a tailored care plan and care team to help manage their chronic conditions and reach their optimal health.

D-SNP is Dual eligible special needs plan



WHAT IS A D-SNP PLAN?

D-SNPs are types of Medicare Advantage plans that provide additional financial help for medical expenses for persons who qualify. To be eligible for a D-SNP plan, you must have Medicare Part A and Part B and qualify for Medicaid.

HOW DO D-SNPS HELP?

A GlobalHealth D-SNP* plan provides enhanced benefits designed to serve your needs.

*Enrollment in a GlobalHealth D-SNP plan is dependent on Medicaid status. Not everyone enrolled in Medicaid qualifies for a GlobalHealth D-SNP plan.

Based on a Model of Care review, GlobalHealth has been approved by the National Committee for Quality Assurance (NCQA) to operate a Special Needs Plan (SNP) through 2028.

Medicare Options COMPARISON

	Original Medicare		Medicare Advantage (also includes C-SNP)	Prescription Drug Coverage	Medicare Supplement
	Part A	Part B	Part C (And sometimes Part D)	Part D	
Inpatient Hospital Stay	•		•		•
Primary Care Physician Visits (PCP)		•	•		•
Outpatient Visits		•	•		•
Lab Tests		•	•		•
X-Rays		•	•		•
Preventive Exams		•	•		•
Prescription Drugs		•	•	•	
How Do I Get Prescription Drug Coverage?	You purchase a Prescription Drug Plan		Included in Medicare Advantage Prescription Drug Plans (MA-PD)	Included	You purchase a Part D plan in addition to the supplement
What Do I Pay?	Deductible and coinsurance.	Monthly Part B premium deductible and coinsurance	You must have Medicare Part A & B*. There are MA and MA-PD plans with \$0 monthly premiums, no medical or drug deductibles.	You must have Medicare Part A and/or Part B and pay a Part D monthly premium	You must have Medicare Part A and B*, may pay a Medicare Supplement monthly premium, and may pay a deductible
Is There a Maximum Out-of-Pocket Protection?	No	No	Yes! All Medicare Advantage plans have a medical maximum out-of-pocket protection	No	Depends on the plan
Will it Pay for Extra Benefits, such as Vision, Dental, Over the Counter Items and Fitness Benefits?	No	No	Yes! Many Medicare Advantage plans offer additional benefits	No	No

Other Healthcare Expense EXAMPLES:

	Original Medicare		Medicare Advantage	Prescription Drug Coverage	Medicare Supplement
	Part A	Part B	Part C (And sometimes Part D)	Part D	
4 PCP Visits with Lab and X-Rays	Not Covered	Part B monthly premium x12 (or higher). Part B deductible and 20% coinsurance.	Monthly premium* x 12. Many plans have no deductibles, no coinsurance, simple copays, and maximum out-of-pocket protection.	Not Covered	Monthly premium*. May pay a deductible.
2 Specialist Visits	Not Covered				
What If You Had a Hospitalization?	Deductible	Not Covered			

*Must continue to pay Part B premium. Dollar amounts provided are informational only and may change year to year.

Sources: <https://www.medicare.gov/>



What are the different Enrollment Periods?



SPECIAL ENROLLMENT PERIOD (SEP)

Certain qualifying events may allow plan changes throughout the year. Can you answer yes to at least one of these questions?

Do you have **both** Medicare and Medicaid?

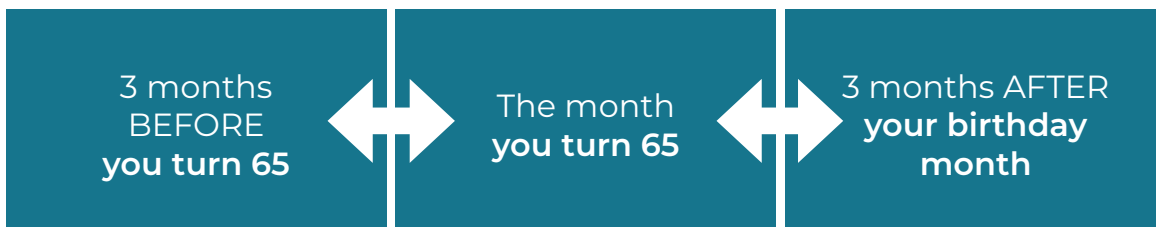
Have you recently moved?

Are you **leaving your employer or union coverage?**

Do you qualify for a **Special Needs Plan?**

Are you turning **65 SOON** or have you turned **65 WITHIN THE LAST 3 MONTHS?**

You can enroll in a Medicare Advantage plan during a 7-month window around your 65th birthday:

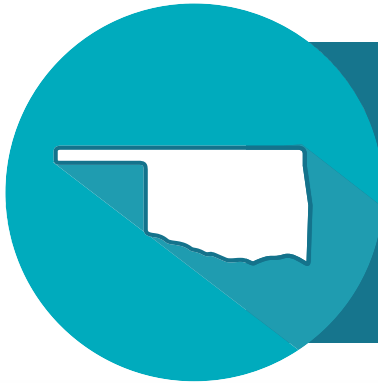


ANNUAL ENROLLMENT PERIOD

If you are a current Medicare beneficiary who doesn't qualify for an SEP, you can review your coverage options, but cannot enroll in a different plan until the Annual Enrollment Period. The Annual Enrollment Period (Oct 15 - Dec 7) is a short window of time when you can enroll or make changes to your current Medicare Advantage coverage.

WHAT QUESTIONS SHOULD I CONSIDER when selecting a plan?

- Can I talk to someone local?
- Is the plan easy to use?
- What is the monthly plan premium?
- Are there medical and drug deductibles?
- What are the costs for the services I use most often?
- Are there extra benefits such as vision, dental and over-the-counter allowances?
- What is my maximum out-of-pocket protection?
- What are the costs to see my physician?
- What are the costs for my prescriptions?



GlobalHealth is **OKLAHOMA-BASED** and may be able to help you SAVE on your Medicare expenses. Enrolling in the right Medicare plan option is an important decision. Our local and friendly agents can help you understand your Medicare options.





GlobalHealth

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CALL OUR MEDICARE MEDICARE ADVANTAGE HELP LINE!

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GlobalHealth is an HMO plan with Medicare and Oklahoma Medicaid program contracts. Enrollment in GlobalHealth depends on contract renewal. By calling this number you will be able to communicate with an Authorized Sales Representative. H3706_0004030726_C