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Newsletter for September 2022

This is the first of monthly notes about health insurance and Medicare. Starting October 15th and ending December 7th is the period that Medicare enrollees can switch from an Advantage Plan to another Advantage Plan or to a Preferred Provider Plan.

If you do nothing, you will remain in the plan you currently have. Let's look first at Advantage Plans. The term Advantage Plan refers to a Health Maintenance Organization that is licensed through Medicare to perform all services that Medicare allows. Many of these plans provide additional services such as prescription drug coverage as well as massages, preventive medical care, and even prescription eyeglass coverage. Most of these plans pay the cost of Part B of Medicare. Some charge nothing for membership in its plan. Others generally charge under \$25 per month.

Going to the doctor or hospital under these plans have no or small co pays. You must go to doctors and hospitals that are part of the HMO plan except in an emergency. The plan will provide you with a list of providers you can utilize. Look at the list before you enroll. Is your doctor on the list? Is the hospital you prefer using available to you? I was thinking of using an Advantage Plan from the plan I already had. It was an HMO and I went to doctors and hospitals that I wanted to go to and were covered under the plan before I was eligible for an Advantage Plan. The doctors and hospitals I used were not covered under the Advantage Plan from the same provider. I checked out the doctors that were covered and I didn't like the choices. I decided to enroll in a PPP. I can go to virtually all the doctors and facilities covered under Medicare.

The question I get is, “how do these plans make money?” They get a monthly fee from Medicare for each member whether the member used the services or not. Check the doctors and facilities for doctors and facilities that you feel can provide the care you want adequately. Are the facilities close by? Are the doctors board certified? You can obtain this information at [medicare.gov](https://www.medicare.gov) or by calling 800 MEDICARE. I know Medicare has too many letters, but it is easier to use and remember that Medicare. The phone number is open 24/7. At the website search for Medicare and You. It will provide information about plans in your area and rate them by comments from users.

The main complaint I get is the time it takes to get an appointment. I recently got a complaint about the waiting time for hip replacement surgery. The person had to wait 6 months to get the procedure. Generally, this would not happen under a PPP.

Next month, I will discuss PPPs and in November choices for Federal employees and retirees.