

Frequently Experienced Problems: Using My New Medigap Plan



Situation Summary: We hope the transition to your new Medicare Supplement plan has gone well. But we know from talking with thousands of people with Medicare that there can be some speed bumps along the way. It's not unusual to find that once you start using your new insurance plan that some things work differently than you thought they would. We've put together this set of **Frequently Experienced Problems** to guide you through common problems, why they happen and tips for handling the situation.

Received a Bill

Problem: You went to the doctor last week and just received a bill in the mail. Should you pay it?

Why Does This Happen? Hold on before you pay. Your bill may not have made its way through the Medicare approval process yet. With a Medicare supplement plan, first Medicare determines what it will pay, and then the bill is sent on to your Medicare supplement plan. Only then will you know whether you owe anything.



Tip: It is easy to [check the status of your claim](#) with Medicare. Login to [MyMedicare.gov](#). Claims information is usually updated within 24 hours of Medicare processing it. Or watch for your Medicare Summary Notice (MSN) in the mail. It comes every 3 months and will show what Medicare paid and what your plan paid and what you owe. You can sign up to [receive a monthly eMSN](#) too.

Deductible

Problem: Medicare says you need to pay charges adding up to \$166. Why?

Why Does This Happen? You have a plan that requires you to pay your [Part B deductible](#) before your plan begins to pay. You probably chose the plan because you decided the tradeoff between a lower monthly premium and paying the first \$166 (in 2016) in costs for services was a smart financial move for you. Once you meet your deductible, your plan will pick up the remaining approved amount for services covered by Medicare.

Tip: The deductible is an annual Medicare fee. You pay it once and then not again until the next year when you use services. Some plans do cover the fee, but the tradeoff is that your monthly premium may be higher.

New ID card

Problem: You lost or misplaced your ID card and you need it for your upcoming doctor's appointment.

Why Does This Happen? Everybody misplaces things so don't be alarmed. Call the insurance company and have them send you a new card. Or go to their website – many have the capability to download a temporary ID card.

Tip: Make sure you provide your new card anytime you receive services. Most offices will ask. But if they don't and your bill for services is submitted to the wrong insurance company, it will take time to unravel the payment.

Extra Values

Problem: Your friend's plan includes a gym membership. You tried to use your ID plan at the local gym but that didn't work.

Why Does This Happen? Not all Medicare supplement plans offer extra values. The basic health care services covered under your plan are [standardized](#) (the same no matter which company you buy from). But when it



comes to adding extra values it depends on the plan and the state you live in. For example, gym memberships are popular but some states do not permit plans to include them as an extra value.

Tip: Read through your new plan material to find out what values and discounts might come with your plan. Can't find it? Let us know and we'll help.

Premium Rate Increases

Problem: Six months after you buy your plan you receive notice of a premium rate increase.

Why Does This Happen? Your rates will change over time. When it happens depends upon how your plan sets rates. Some plans will increase rates once a year while others may have an increase twice a year. And yes, sometimes rates even go down. Reduce surprises by [understanding how rates change on your plan](#).

Tip: At Longevity Alliance we'll ask you if you want an annual [plan review](#) around your birthday to see if your plan is still a good fit. If you are comfortable with your plan and want to "opt out" just let us know.



Foreign Travel Coverage

Problem: You are heading on a great trip overseas but you are not sure how your plan works if you need health care.

Why Does this Happen? Medicare coverage is different than the insurance you had earlier in life, so it always best to make sure you know what's covered. Different supplement plans cover [travel outside the US](#) differently. Know before you go.

Tip: Plans C, D, E, F, G, H, I, J, M, and N pay 80% of the billed charges for certain [medically necessary](#) emergency care outside the U.S. after you meet a \$250 [deductible](#) for the year. These Medigap policies cover foreign travel emergency care if it begins during the first 60 days of your trip, and if Medicare doesn't otherwise cover the care.

On the Move

Problem: You move and need to change your EFT to a new bank and your new address and don't know where to call.

Why Does This Happen? Tracking down the details can be confusing. So let us know that you are on the move and we'll help you sort out what you need to do and who you need to contact about your insurance.

Tip: Before you move let us do a plan review of what insurance costs will be in your new state. It might be the right time to switch insurance companies or stay with the one you have. We'll compare plans for you. We can also help with your drug plan. Don't wait. There is a [deadline for changing plans](#) once you move.

What's Next

Our commitment to you is to make sure you are comfortable with your plan, and if not, make sure you know your options. If you've "opted out" we'll leave you in peace. Otherwise we'll check in for an annual review of your plan and help you with your drug plan coverage as well. The more you tell us about how and when we should be reaching out to you the more convenient we'll make it for you.

Know More

[Medicare: Buying a Medicare Plan](#)

[Medicare Supplement: Why Rates Go Up?](#)

[Welcome to Longevity Alliance: Services Guide](#)

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