



NEWSLETTER

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PSA 2 AAA HEALTH INSURANCE COUNSELING ADVOCACY PROGRAM (HICAP)

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AN OVERVIEW

The Health Insurance Counseling & Advocacy Program (HICAP) is a state-sponsored, volunteer-supported program that provides FREE counseling to people with Medicare about their benefits, rights and options, and other health insurance related questions.

HICAP provides unbiased information to help you make an informed decision for your individual health care needs.



ARE YOU TURNING 65?

DO YOU PLAN TO RETIRE? DO YOU PLAN TO CONTINUE TO WORK?

- Do I need Medicare if I have a retiree plan?
- Do I need Medicare Part B and Part D?
- Do you understand Medicare and how it works with employer group health insurance when you continue to work after 65 or when you retire?
- Do I need a Medicare Supplement plan if I have a retiree plan?

Call HICAP at 530-223-0999 / 800-434-0222

- [Medicare Part A \(Hospital\)](#) and [Medicare Part B \(Medical\)](#) coverage. These two parts each have deductibles and co-insurance.
- [Part C](#) are Medicare Advantage Plans.
- [Part D](#) is the prescription coverage.

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- Are you interested in the Medicare Advantage Plans (HMO or PPO), will your doctor accept these plans in Northern California?
- HICAP can help you find Medicare supplement insurance to cover "gaps in Medicare."
- HICAP can help you understand, cost-compare and enroll into the Medicare prescription drug plan.

- Are you about to turn 65 and still working and have employee insurance? Or do not have employee insurance?
- If you do not have employee insurance when eligible for Medicare, you should check with Social Security three months before turning 65 to avoid penalties. If you have employee coverage you will be ok; enroll into Medicare when you quit working or lose employer group

health insurance whichever comes first. You will need to provide proof of insurance after turning 65 when you enroll into Medicare later.

- Are you considering, or have, COBRA? If you are 65, with COBRA, you still need to enroll into Medicare. COBRA is not employee insurance since you are paying the full premium.

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What is ‘Guarantee Issue’?

Medicare does not pay all of your medical expenses, it has ‘gaps’, the deductibles and copays. To help fill these gaps private insurance companies are there to help. When you turn 65 during your initial enrollment period (IEP), or when you retire with no medical insurance, supplemental insurance companies cannot ask you health screening questions or pose waiting periods on you. This is Guarantee Issue. You have no waiting periods. The insurance companies offer you the best, lowest premiums when you enroll into Medicare. Waiting longer after Medicare enrollment will increase the premiums and waiting periods will be in place, and you may have to have health screening to be able to purchase.

Medicare Part D – Prescription Plans

Another part of Medicare is Part D, prescription drug coverage. The enrollment period for prescription coverage is the same as Medicare A and B – seven months; when you retire after 65 you have 60 days to enroll into a prescription drug plan to avoid penalties.

The prescription plans vary...some with deductibles, some without. The plans all have ‘formularies’, the list of medications they cover.

There are ‘levels’ in the plans – deductible, initial level, coverage gap (donut hole), and catastrophic level. The ‘donut hole’ is officially closed. The pharmaceutical companies and Medicare are assisting with copays during this level. The member pays 25% (+/-) during the coverage gap.

Social Security has a program to assist with premiums and copays call “Extra Help”. Our staff and volunteers can assist you in the application process.

Contact HICAP for a ‘Going onto Medicare’ appointment! We will walk you through the enrollment process! There is no fee for our services!!

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HICAP does not sell, endorse, or recommend any specific insurance product.



CALIFORNIA HEALTH ADVOCATES

Health Insurance Counseling & Advocacy Program (HICAP): An Overview

The Health Insurance Counseling & Advocacy Program (HICAP) is a state-sponsored, volunteer-supported program that provides free counseling to people with Medicare about their benefits, rights and options, and other health insurance related questions. HICAP provides unbiased information to help you make an informed decision for your individual health care needs. The California Department of Aging (CDA) provides funding and oversight of the program through contracts with local Area Agencies on Aging (AAA) offices that administer the local HICAP programs.

HICAP does not sell, endorse, or recommend any specific insurance product.

HICAP services are free and include individual counseling and assistance as well as community education services.

Who does HICAP serve?

- Current Medicare beneficiaries
- Adult children and other representatives of Medicare beneficiaries
- People about to become eligible for Medicare or planning for retirement
- People younger than 65 years old who are eligible for Medicare due to a disability
- Service providers, such as social workers, nurses, doctors, and healthcare advocates working with Medicare beneficiaries
- People needing information on long-term care insurance

- Your rights as a health care consumer
- Your Medicare benefits and rights, including how to appeal denials of coverage
- Legal help and representation at Medicare appeals and administrative hearings (through direct assistance or referrals)
- Supplementing Medicare such as Medigap plans, retiree plans, TriCare for Life, VA health benefits
- Medicare Advantage plans, including Health Maintenance Organizations (HMOs), Preferred Provider Organizations (PPOs), Medicare Private Fee for Service Plans (PFFS), Special Needs Plans (SNPs) and Medicare Savings Accounts (MSAs)
- Medicare prescription drug coverage (Part D) offered through stand-alone prescription drug plans (PDPs) and Medicare Advantage prescription drug plans (MA-PDs)
- Low-income assistance programs and how they work with Medicare (Medicare Savings Programs, Part D low-income subsidy, and Medi-Cal)
- Long-term care insurance

“HICAP Counseling Services are provided by trained volunteer counselors who are registered by the California Department of Aging and, who are acting in good faith to provide information about health insurance policies and benefits to you, the client. This information shall not be construed to be legal advice, and the Volunteer HICAP Counselor is generally not liable for acts and omissions in providing counseling to recipients of this service.” (Welfare and Institutions Code, Section 9785 (c) (Chapter 869, Statutes of 1990).

How can HICAP help you?

HICAP services are available in every county in California. Your local HICAP agency can help you by providing information and counseling on:

Medicare Enrollment Periods

IEP

Begins three months before the month of your 65th birthday and continues for three months after

SEP

Eight-month window that begins when your employer coverage ends

GEP

If you miss your IEP, you can sign up for Medicare between January 1st and March 31st of each year

There are certain periods when you can join, change or drop the different parts of Medicare (A, B, C, and D). In other words, you are not allowed to enroll or disenroll whenever you want.

- Initial Enrollment Period (IEP) Parts A & B
- General Enrollment Period (GEP) Parts A & B *January 1-March 31*
- Annual Election Period (OEP) Parts D and C (C=MA)
- Special Enrollment Period (SEP) Parts B, D, MA-PD
- Medicare Advantage (MA) Open Enrollment Period

Call HICAP at 530-223-0999 / 800-434-0222

(A Resource for all your Medicare Questions)

Contact Us
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HICAP services are free and include individual counseling and assistance as well as community education services.



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