Medicare 101

2027



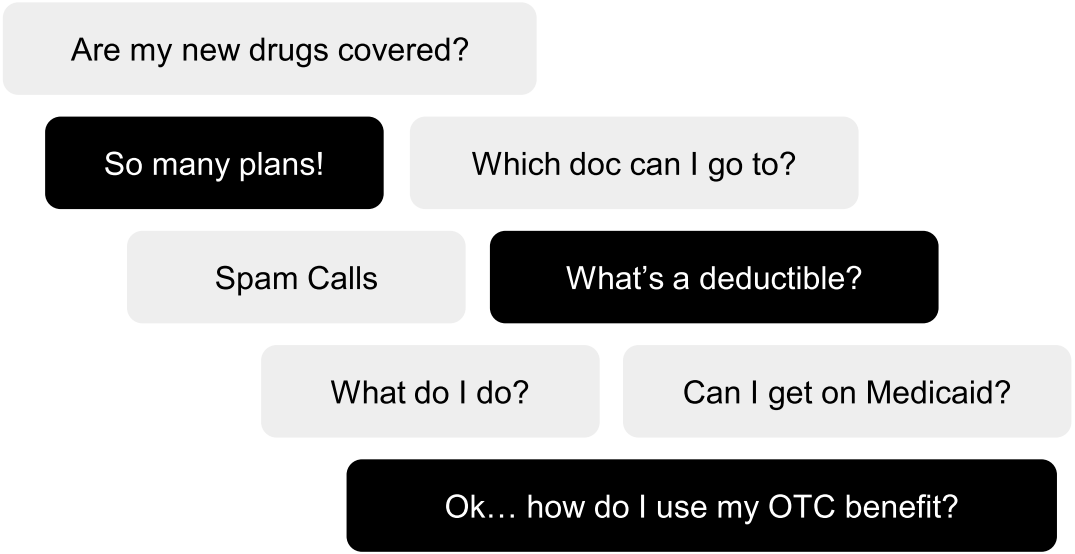
Jamie McDaniels
813-360-1009
mcdaniels.jamie@gmail.com

ALERAGROUP

About Me

I'm a licensed agent with extensive experience in Medicare.

I help you understand Medicare, enroll in the right plan, and maximize your benefits. I am an independent agent, and as a result I'm able to compare most of the plans available to you on the market. I also have a team of professionals who can support you whenever you have questions.
I cut through the noise for you.



Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options



Who I help

I assist clients in every type of scenario. The most common ones are listed below.

- Turning 65
- Over 65, but losing insurance
- Unsure whether to stay on employer insurance or enroll in Medicare
- Unhappy with your current coverage
- On social security disability

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options



The ABCs (and D) of Medicare

What is Medicare?

The U.S. government's largest health insurance program serving more than 62 million people.

MEDICARE IS
- A federal health insurance program
- For U.S. citizens and legal residents
- Individual health insurance

MEDICARE IS NOT
- Medicaid
- Social security
- Family plans



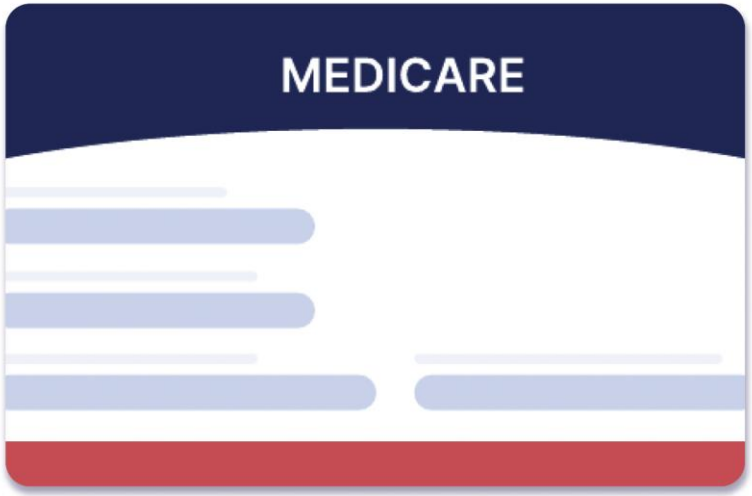
Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Who can get Medicare

You can qualify for Medicare if you meet one of the following requirements:

- Within three months of turning 65 or older, even if you still work
- Younger than 65 with a qualifying disability
- Have end-stage renal disease (ESRD)

Note: you also may be eligible for Medicare Part A through your spouse, though you must meet the age or disability requirement



Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

What does Original Medicare cover?

Original Medicare consists of Part A and Part B

Part A
HOSPITAL INSURANCE

- Hospital room & meals
- Intensive care
- Skilled nursing facility care
- Operating room services
- Hospice care
- Rehabilitation services
- Some home health care
- Some drugs & medical supplies for inpatient stays

Part B
MEDICAL INSURANCE

- Doctor visits
- Annual wellness visits & preventive services
- Outpatient care
- Mental health care
- Clinical lab services
- Durable medical equipment
- Ambulance services
- Occupational physical therapy

Cannot be denied coverage • Coverage nationwide

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

What does it cost?

Original Medicare consists of Part A and Part B
→ but NO out-of-pocket maximum

*Note: premium free if you or your spouse worked and paid taxes for 10+ years. If you don't get premium-free Part A, you pay up to $565 each month.

**If you are an above-average income earner, you will have to pay a higher Part B premium.

2027 Data TBA

	Part A 2026 HOSPITAL INSURANCE	Part B 2026 MEDICAL INSURANCE
PREMIUM	$0*	$202.90 Per month**
DEDUCTIBLE	$1736 Per benefit period	$283 Per year
OTHER COSTS	$434 Per day (days 61-90) $868 Per day (after 90)	20% Of costs, plus any excess charges

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Part B: Detailed costs by income bracket

2027 Data TBA

If your yearly income on your 2024 taxes was:

File individual tax return*	File joint tax return*	File married & separate tax return*	You pay (monthly) in 2026
$109k or less	$218k or less	N/A	$202.90
$109k to $137k	$218k to $274k	N/A	$284.10
$137k to $171k	$274k to $342k	N/A	$405.80
$171k to $205k	$342k to $410k	N/A	$527.50
$205k to $500k	$410k to $750k	$109k to $391k	$649.20
$500k or above	$750k or above	$391k and above	$689.90

*Larger number is inclusive. For example, $109k to $137k means that the return must be above $109k up to $137k (inclusive).

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

What's not covered by Original Medicare

Parts A and B **do not cover** the following:

- All of the costs of your care (on the prior slide!)
- Prescription drugs
- Annual physical*
- Dental, vision, and hearing care
- Hearing aids
- Eyeglasses or contacts
- Long-term care
- Most care outside the U.S.

*Note: Original Medicare covers an annual "Wellness" visit 1x every 12 months, but that visit is not a physical exam. It includes a Health Risk Assessment questionnaire and a cognitive assessment.

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options


Getting more
coverage

To cover these coverage gaps and costs, you have two options!

1 Set-and-forget

Enroll in Original Medicare and add 1 or both

MEDICARE SUPPLEMENT OR "MEDIGAP" PLAN
Covers out-of-pocket costs

AND / OR

MEDICARE PART D PLAN
Helps pay for prescription drugs

OR

2 Pay-as-you-go

Enroll in Original Medicare and select an Advantage plan

PART C
Combines Part A and B in 1 plan

PART D
Helps pay for prescription drugs

+ may offer additional benefits, such as transportation and services to promote your health and wellness

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

About Medicare Supplement Plans

You pay a monthly fee in addition to the Part B premium, and the private plan covers the costs in Original Medicare.

- There are 10 plans (each has its own letter) standardized by the Federal Government, but offered by private insurance companies.*
- The monthly fee can generally range from $90 - 400, depending on the plan type and your home state.
- No drug coverage, or routine dental, hearing and vision benefits.
- *No medical underwriting up to 6 months after enrolling in Part B at age 65 or older.
- Guaranteed renewable.
- Coverage nationwide; no provider network.

*Note: MA, MN, and WI have plans different from the standard

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Your Medicare Supplement plan options

Note: a Plan A with one carrier offers the same benefits as Plan A with another carrier! The most common plan today is Plan G since it offers the most coverage. The main difference between carriers is price.

* F and G may also have high deductible options. However, Plans C and F are no longer available to people new to Medicare on or after January 1, 2020 as plans can no longer cover the Part B deductible.

Basic benefits	A	B	D	G*	K	L	M	N	C*	F*
Part A: Hospital coinsurance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part A: Hospice care coinsurance	✓	✓	✓	✓	50%	75%	✓	✓	✓	✓
Part B: Medical coinsurance	✓	✓	✓	✓	50%	75%	✓	✓	✓	✓
Part B: Medical preventive care coinsurance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Parts A & B: Blood (first 3 pints)	✓	✓	✓	✓	50%	75%	✓	✓	✓	✓
Additional benefits	**A**	**B**	**D**	**G***	**K**	**L**	**M**	**N**	**C***	**F***
Skilled nursing care coinsurance			✓	✓	50%	75%	✓	✓	✓	✓
Part A 2026 deductible $1736		✓	✓	✓	50%	75%	50%	✓	✓	✓
Part B 2026 deductible $283									✓	✓
Part B excess charges				✓						✓
Foreign travel emergency (lifetime limit $50k)			80%	80%			80%	80%	80%	80%
Out-of-pocket yearly limit					$8000 2026	$4000 2026				

2027 Data TBA

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

About Part C: "Medicare Advantage"

Benefits

All the benefits of Part A and Part B.
You're still in the Medicare program, but plans are offered by private companies.

- Most plans include prescription drugs

Many plans offer additional benefits:

- Transportation to doctor visits
- Services that promote your health and wellness
- Customized benefits to treat specific conditions (chronic illness)

Costs

Continue to pay the Part B plan premium.

- Many plans are $0 premium
- You may have out-of-pocket co-pays and coinsurance when you use services
- Typically have annual out-of-pocket maximum

Other factors

- You may need a referral to see a specialist
- Coordinated care support with provider network

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

About Part D: Medicare Prescription Drug Coverage

Private plans that help cover the cost of prescription drugs

Plans cover:

- Most common medications
- Specific brand name & generic drugs according to the plan's formulary (drug list)
- Vaccines not covered by Part B

How it works:

- You pay a monthly premium. The base premium is $41.33 for 2027.
- You have a co-pay for each medication, based on its tier. There are 4 or 5 tiers, from lowest to highest priced.
- You may also have a deductible
- You may have to use a specific pharmacy network

→ You can get Part D via a stand-alone Part D plan OR via a Medicare Advantage plan that includes prescription drug coverage (MAPD)

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Part D: Detailed costs by income bracket

2027 Data TBA

If your yearly income on your 2024 taxes was:

File individual tax return*	File joint tax return*	File married & separate tax return*	You pay (monthly) in 2026
$109k or less	$218k or less	$109k or less	your plan premium
$109k to $137k	$218k to $274k	N/A	$14.50 + your plan premium
$137k to $171k	$274k to $342k	N/A	$37.50 + your plan premium
$171k to $205k	$342k to $410k	N/A	$60.40 + your plan premium
$205k to $500k	$410k to $750k	$109k to $391k	$83.30 + your plan premium
$500k or above	$750k or above	$391k or above	$91.00 + your plan premium

*Larger number is inclusive. For example, $109k to $137k means that the return must be above $109k up to $137k (inclusive).

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Part D: Coverage stage & formulary

In addition to your premium, you will pay an amount per prescription, which depends on your coverage stage and drug type

Coverage stages

During the year, you may go through drug coverage stages, which impacts the amount paid per prescription

Annual deductible	→	Initial coverage	→	Catastrophic coverage
Insured pays up to $700 in 2027 (not all plans may have)		Insured pays 25% coinsurance for all covered prescriptions up to $2,400 total drug costs in 2027		Insured pays $0 co-insurance/cost share for covered drugs to end of 2027

Formulary

- Drugs are grouped into cost tiers: the lower the tier, the lower the cost
- You may be able to reduce the cost by purchasing via mail or at a preferred pharmacy

Tier 1	Generics, preferred	$
Tier 2	Generics	$$
Tier 3	Brands, preferred	$$$
Tier 4	Brands	$$$$

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options.

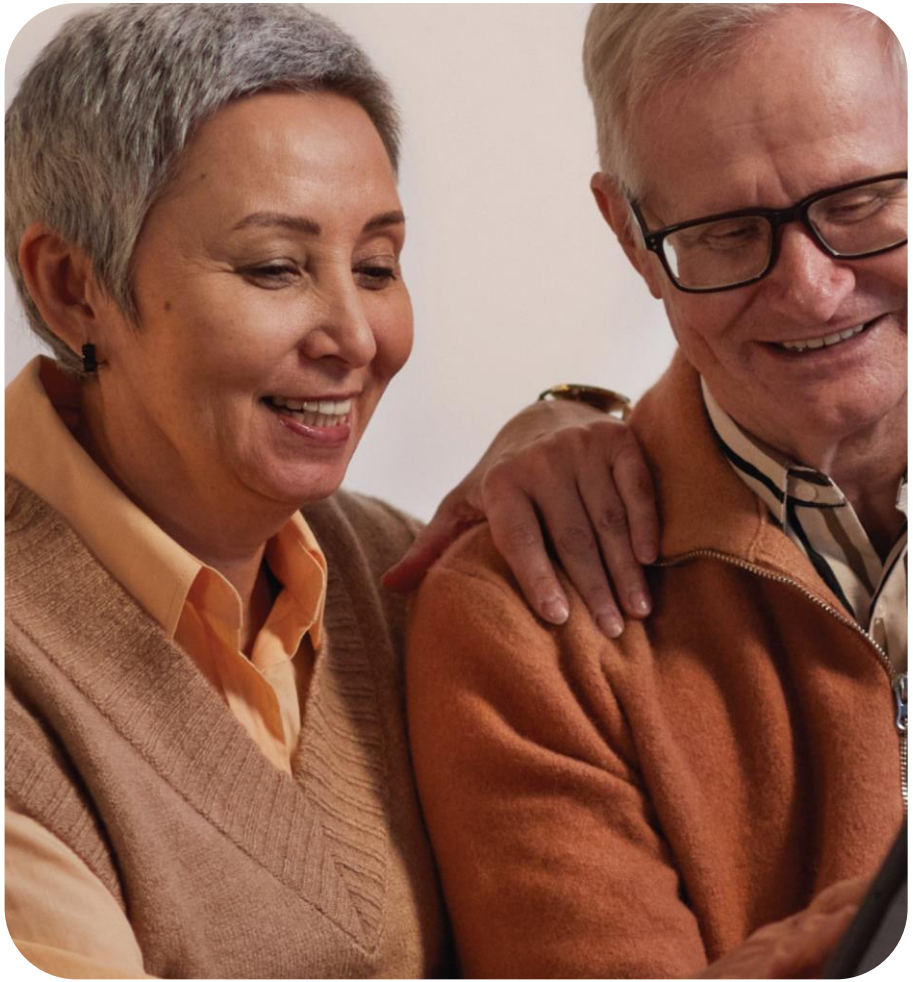

Making a
decision

What should you choose?

	Option 1 Medicare Supplement + Prescription Drug Plan	Option 2 Medicare Advantage
COVERAGE	Everything Original Medicare covers	Everything Original Medicare covers, plus additional benefits
COST	Medigap: -$200 per month 2026 Drug plan: ~$46 per month 2026 Very low out-of-pocket expenses	Typically $0 premium Copays and co-insurance for services $9,250 out of pocket-maximum maximum (in-network) 2026
CHOICE	Any doctor, anywhere, who accepts Medicare. No referral required.	May need a referral May only see in-network doctors
	Know what you'll pay each month	Pay as you go

2027 Data TBA

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options



What should you consider?

It's a personal decision based on cost, convenience, and health history. Consider the following questions:

- What am I willing/able to spend on premiums, deductibles, coinsurance, and copays?
- Does the plan I'm considering have all the benefits I'm looking for?
- How important is it to me to have vision, dental, and hearing services covered?
- Am I okay with having a restricted list of providers and hospitals within a network?
- Do I feel comfortable using this plan to manage any chronic health conditions I have?

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

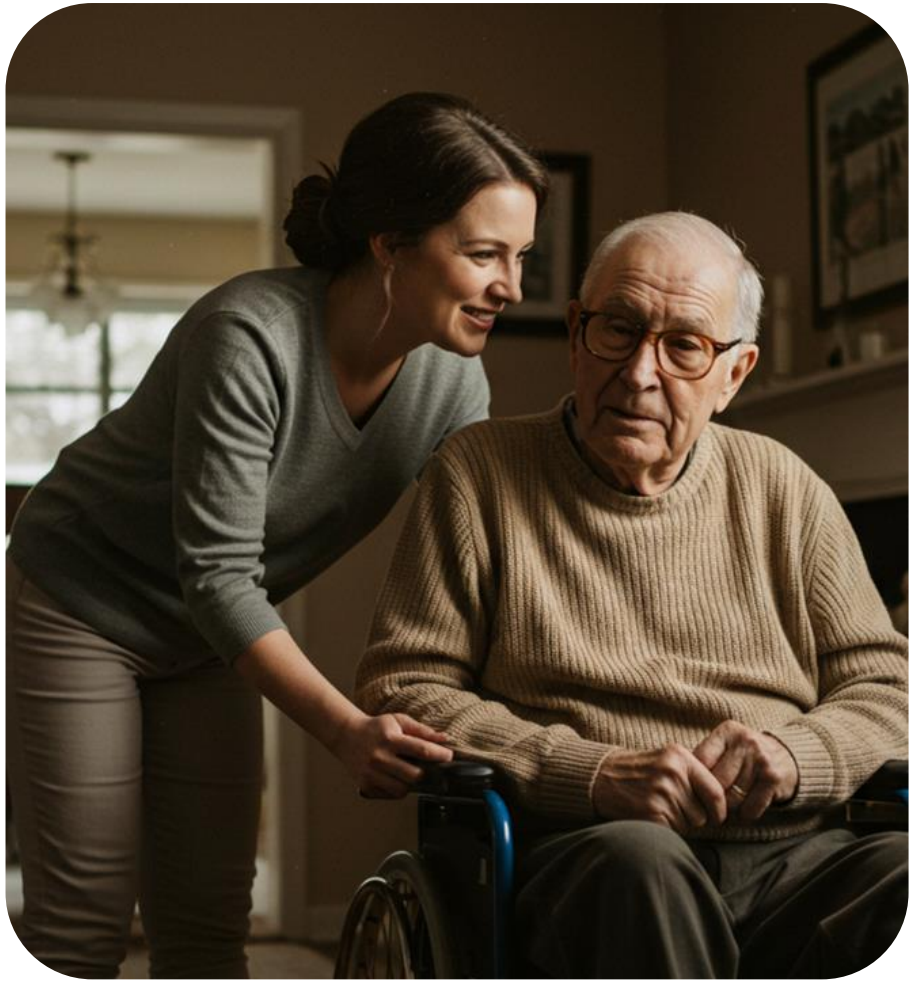


Additional considerations

Special Needs Plans

Medicare Special Needs Plans (SNPs) typically offer more benefits with specific care plans. You may qualify if:

- You have a chronic condition, like diabetes or a heart condition
- You receive Medicaid assistance from your state
- You live in a facility like a nursing home and need additional care



Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options



Financial assistance

Depending on your income and assets, you may qualify for additional assistance through:

- Medicaid
- Medicare Savings Programs to reduce Part A and B costs
- Extra Help (Low Income Subsidy) to reduce medication costs
- Additional local assistance programs

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

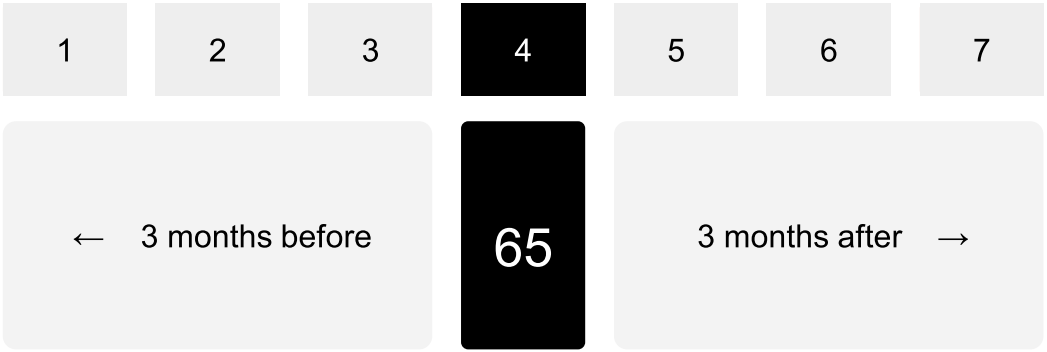


Enrolling in Medicare

Enrolling in Original Medicare

INITIAL ENROLLMENT PERIOD:
3 months before and after the month you turn 65

- Enroll at SSA.gov for Original Medicare
- Enroll in Part A; you can delay Part B



If you miss it, you can enroll during the General Enrollment Period (Jan - Mar for Parts A and B). Late enrollment premium penalties apply, so don't miss it!

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Enrolling in Medicare Supplement

For 6 months after the month you're 65 and older, and enrolled in Part B, you may enroll in a Supplement plan

- No underwriting required*
- Guaranteed renewable

↓

1	2	3	4	5	6



6 months after the month you're 65 or older and enrolled in Part B

(you may be able enroll before you turn 65, but the plan won't take effect until the month of your 65th birthday. In short, sign up before you turn 65 so there's no coverage gap!)

If you enroll later, you may be denied based on your health history or see higher premiums.

Note: You have guaranteed issue rights typically when you have other health coverage that changes in some way. Special situations will apply.

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Working past 65

3 months before and after the month you turn 65

	Can delay without penalty if:	Cannot delay without penalty if:
COVERAGE	20 or more employees	Fewer than 20 or more employees
CHOICE	Considered "creditable"	Not considered "creditable"

What if I'm covered by my spouse's employer?

You may be able to delay if your employer-based health coverage is through your spouse. It depends on your spouse's employer and any rules the employer has around covered dependents

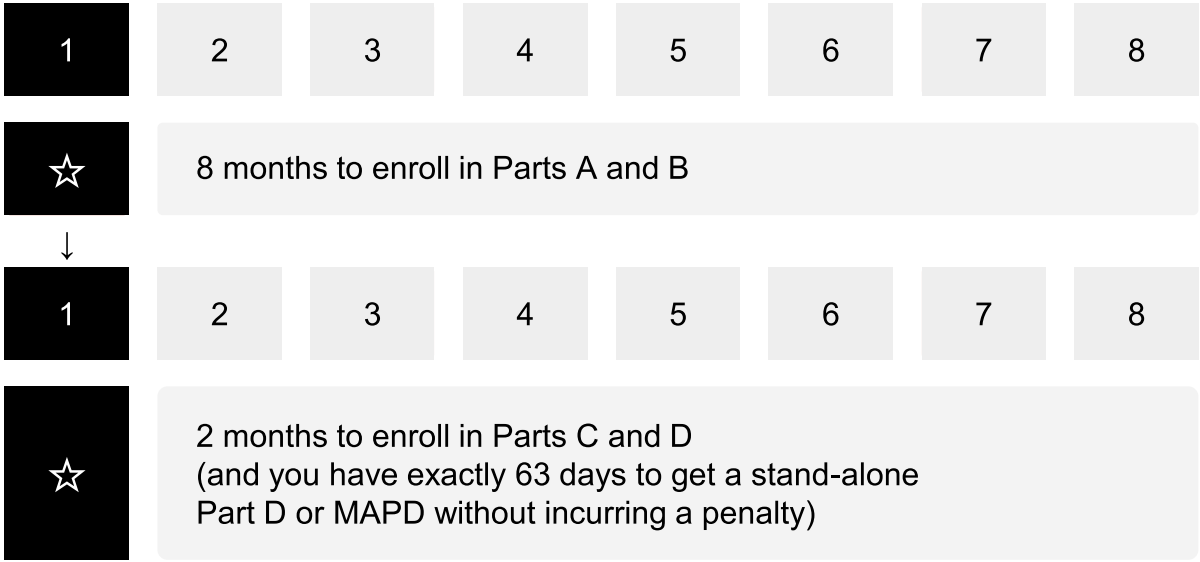
Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Enrolling in Medicare, after 65

If you delayed enrollment, you can enroll the month after the last month of employment or health coverage. You may:

- Enroll in Part A and/or Part B
- Enroll in Part C or Part D stand-alone plan
- Enroll in a Medicare Supplement plan (within 6 months)

↓ Month after the last month of employment or employee health coverage



Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Changing your plan

If you don't like your initial decision, you can always change it!*

*Note: while you have opportunities to change plans, if you elect to start on a Medicare Advantage plan and then later decide to switch to a Medigap plan, you may be subject to underwriting requirements as you will be outside the guaranteed issue period.

Medicare Annual Enrollment [October 15 - December 7]

- Switch from or into a Medicare Advantage plan
- Join, switch, or drop a Prescription Drug Plan

Medicare Advantage Open Enrollment [January 1 - March 31]

- Open only to Medicare Advantage Plan members to switch or drop plans

Special Enrollment Periods: Qualifying Events

- E.g. you move, lose coverage, qualify for a Special Needs Plan, start receiving State financial assistance, and other qualifying events
- Time frames vary depending on the Special Enrollment Period

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options



Don't be late!

If you're late enrolling in Parts A, B and D, you can face a penalty.

Part A	10%, if not qualified for premium free
Part B	10%, if not qualified for special enrollment period (e.g.loss employer coverage)
Part D	1% of current average premium for each month, if more than 63 days without creditable coverage*

*Note: see the "Terminology" section for what qualifies as creditable coverage

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Getting through the terminology

Benefit Period	The length of time Original Medicare uses to assess your use of hospital and skilled nursing facilities. It begins the day you're admitted as an inpatient to a hospital or skilled nursing facility and ends when you haven't gotten any care from these facilities for 60 consecutive days.
Coinsurance	The amount of money (usually represented as a percentage of the total cost) that you may be required to pay for services once you hit your plans deductible.
Copay	The amount of money you may be required to pay for medical services or supplies, like doctor's appointments and medications
Deductible	The amount of money you will be required to pay out of pocket for healthcare services and supplies including medications before your insurance plan starts to cover any amount of the costs
Lifetime reserve days	If you have Original Medicare and require hospitalization for more than 9O days in a single benefit period a portion of your costs for 60 additional reserve days will be covered. You'll pay coinsurance for each one of these reserve days, and Medicare will cover whatever is left over.
Out-of-pocket limit	The maximum amount you have to pay for covered health care services in a plan year is called the out-of-pocket maximum. Medicare Advantage plans are required to set annual dollar limits on these costs. Original Medicare does not have an annual out-of-pocket maximum.
Premium	The monthly payment you make to Medicare to receive the benefits of your healthcare plan.
Creditable coverage	Coverage and plan benefits that are up to the same standards as Medicare are considered "creditable coverage". Beneficiaries with other sources of creditable coverage - for example, through an employer - may stay on that plan and avoid late enrollment penalties.

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Thank you



Jamie McDaniels

813-360-1009

mcdaniels.jamie@gmail.com

www.jamiemcdaniels.com

Disclaimer: This presentation is for educational purposes only. We strive to ensure the accuracy of our information. However, this presentation is not intended as a substitute for your lawyer, doctor, healthcare provider, financial advisor, or pharmacist. For more information on your Medicare coverage, please be sure to seek legal, medical, pharmaceutical, or financial advice from a licensed professional in your area or telephone Medicare at 1-800-633-4227.

Not affiliated with the U.S. government or federal Medicare program. We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800 MEDICARE to get information on all of your options

Confidential and proprietary. For internal/agent use only. Do not distribute without explicit permission.