

Buyer Beware: Medicare Advantage Out of Pocket Maximums reach \$6,700 PER YEAR!



The Medicare Advantage companies make their plans look like a pretty sweet deal. Low to no monthly premium, all inclusive, you can wrap your prescription coverage into one plan, some even offer dental and vision options.

But what's lying just beneath the shiny bright wrapper of a \$0 per month premium are ***huge annual out-of-pocket maximums***. After you reach your out-of-pocket maximum, your Advantage plan will pick up your co-pays and a few other eligible expenses for the rest of the year.

But, figuring out what counts toward that out of pocket maximums is not always easy to understand.

Currently, Medicare has set the highest limit to what Advantage Plans can charge for out of pocket maximums to \$6,700. And, no

surprise, **many popular Medicare Advantage Plans choose to charge you every last penny of that allowable amount.**

And, don't forget, that out of pocket maximum **resets every calendar year.** If you rack up \$6,500 by December this year, you have to start all the way back over at zero on January first!

What counts towards that \$6,700? **Only** co-payments and co-insurance for covered or "eligible" medical services.

What **doesn't** count...

- Monthly Premiums
- Prescription co-pays and plan premiums (These are counted separate from doctor coverage)
- Excess charges at your doctor
- Out of network services (And there are A LOT of these!!)

As you can see, there's much more that **DOESN'T** count towards your out of pocket maximum than what does count. All these "gotcha's" can add up quickly. More than a few of my clients have shared horror stories about getting surprised with huge bills for services they thought were covered by their Advantage Plan, but weren't... and didn't count towards the out of pocket maximum either.

So what alternatives are there to protect yourself from these gotcha's?

Medicare Supplement G, C, or N offer great coverage, but may be more than you want to shell out for a monthly premium– they range between \$80.00 and \$180.00 depending on your age and health status.

However, the **Plan F High Deductible Medicare Supplement** may be a perfect fit. The out of pocket maximum is only \$2,200 – MUCH better than the \$6,700 an Advantage Plan slaps you with. And, with the High Deductible F Medicare Supplement, you have no provider network to fool with and no hidden gotcha's. And remember, with a supplement, Medicare is paying part of your medical expenses all along – you don't have to pay up to your deductible before Medicare starts paying.

Bottom line, the worst case scenario is \$2,200 out-of-pocket with the High Deductible Plan F versus \$6,700 with the Advantage Plan. Which would you rather try to budget for?

It's my opinion that Advantage Plan companies wrap their programs in pretty paper, but lurking underneath are some nasty surprises and big expenses.

Whereas, Medicare Supplements are straightforward, predictable year after year, and afford you far more flexibility and control over your medical care decisions.

Special note for residents of Florida: Medicare premiums are 50% to 100% higher in your state. The High Deductible F supplement runs about \$1900 CHEAPER than a Plan G or Standard Plan F. That's just \$300 less than the out-of-pocket maximum, making the High Deductible F look even better for you.

Questions? Use our [contact form](#) or give me a call! **1-800-866-8950**