



Guide to MEDICARE

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Blue Cross
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Blue Care Network
of Michigan

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Medicare Chat Q & A

Q1: How to find the right plan for your needs?

Answer: If I am going to continue working when I turn 65 I still sign up for Medicare correct o avoid the fine for not signing up?

Answer: You may be able to wait to sign up for Medicare without paying a late enrollment penalty. There are some variables to consider if working past 65, a good resource is Medicare.gov: <https://www.medicare.gov/basics/get-started-with-medicare/medicare-basics/working-past-65>

Q2: What should we look for if we keep our home in MI but spend lots of time out west with our children?

Answer: You would want to look for a plan that offers nationwide coverage or a plan with a strong network of providers so you can still see doctors and access care wherever you are.

Q3: I am 64 years old and in my Medicare "enrollment" period. I also elected to start Social Security earlier this year. My question: Am I already enrolled in Medicare?

Answer: If you elected for Social Security already, you should automatically receive Medicare when turning 65.

Q4: I will get Medicare via U of M retirement. What specifically do I need to "let the Government know" as I will turn 65 in March.

Answer: You will need to contact Social Security to enroll in Medicare Part A & B : <https://www.medicare.gov/basics/get-started-with-medicare/sign-up/how-do-i-sign-up-for-medicare>

Q5: If you want to switch from an Advantage plan to Medicare Original, are there pre-existing conditions/questions?

Answer: No, Original Medicare does not raise pre-existing conditions questions

Q6: I am enrolled in an advantage plan. Do I make a change during the AEP or after the first of the year?

Answer: You would make a change during AEP.

Q7: My 65 start is Dec 1 this year. If I want to use a Medicare Advantage for this month, when do I need to make the selection?

Answer: To have it take effect to align with your Medicare starting, you'd want to complete the application prior to the end of November. But, you are currently in your Initial Election Period

Q8: I have to pay for my office visits and see no benefit from Medicare. I even get charged year after year for my annual wellness checkup. How do I eliminate paying for office visits?

Answer: You could look for a Medicare Advantage Plan that has a \$0 copay to see your primary care provider.

Q9: Just received letter that BCBS Medicare Plus Blue PPO has been discontinued as of 12/31/25. Does BCBS have a similar plan available but maybe renamed for 1/1/2026?

Answer: Our new \$0 PPO plans are called Secure and Value, and we also have a Giveback plan in select service areas.

Q10: So what was the business about the Advantage change period after the first of the year?

Answer: The Medicare Advantage Open Enrollment Period takes place from Jan - Mar and allows a one time change from those enrolled into a Medicare Advantage plan.

Q11: I enrolled in a Medicare Supplement plan on July 1 when i first became eligible. But I now think I should have chosen an Advantage plan. Do I have until December 31 to change plans without showing evidence of insurability?

Answer: You can enroll in a Medicare Advantage Plan during AEP which is 10/15-12/7

MODERATOR



John Hiner

EXPERT SPEAKERS



Bob Callery



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Kyle Ingraham



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Q12: Can you explain the difference between the deductible and the out of pocket maximum?

Answer: “Deductible is the amount you would pay prior to plan services being covered. Maximum out of pocket is the total out of pocket costs you’d pay in a plan year - this includes deductible, copay, and coinsurances.”

Q13: Is AEP for Medigap and Advantage Open Enrollment Period for Advantage?

Answer: Annual Enrollment Period is open to all Medicare eligibles to elect into a Medicare Advantage or PDP for the following year. MA Open Enrollment period is Jan - Mar that allows those in a Medicare Advantage period a one time change to another Medicare Advantage or to original Medicare

Q14: Can you change from Medicare Advantage to Medicare Supplement plan once you are on a Medicare Advantage plan?

Answer: Yes, but there will often times be underwritten and priced based on health after initial Medicare eligibility.

Q15: I travel out of the country with some frequency to visit family. What do I need to know about Medicare when I’m not in the US?

Answer: Medicare does not provide coverage outside of the US. Many Medicare Advantage plans include limited coverage - but you’d want to review your options prior to travel.

Q16: Will I need to show evidence of insurability?

Answer: No, not for Medicare Advantage. You can enroll during AEP.

Q17: I am still working full time with HSA plan, I am not plan to retire until 67, do I have to do anything to avoid the penalty?

Answer: Not if it is considered creditable coverage. Your employer can confirm this.

Q18: Are there any scams we need to be aware of, and if so, what are best indicators to spot them?

Answer: “Unfortunately, there are a lot of scams that target Medicare beneficiaries, especially during the Annual Enrollment Period. Here are some helpful tips: Guard your Medicare and Social Security numbers Avoid answering phone numbers you don’t recognize

If you do answer, try NOT to say the word “yes”
If someone is calling from “Medicare”, hang up – Medicare won’t ever call you
Unless you know you can trust the person you are speaking with, don’t agree to anything or provide your personal information”

Q19: Please explain the difference between PPO and POS?

Answer: A PPO (Preferred Provider Organization) lets you see any provider, in or out of network, without a referral. A POS (Point of Service) plan requires you to choose a primary care doctor and get referrals for specialists, though you can still go out of network - usually at a higher cost.

Q20: I have Medicare Advantage, if I want to make a change, do I do so during the annual enrollment period or during the MA open enrollment? “One time change” is that per year or something else?

Answer: You can do it during the Annual Enrollment Period and it will become effective January 1st - <https://www.medicare.gov/health-drug-plans/open-enrollment>

Q21: I will be turning 65 in March. My ONLY coverage is with the Veteran’s Administration (VA) for my medical and prescription. Do I only need to enroll in Medicare A & B? Or should I also sign up to Med D in case I am out of area for my home VA coverage?

Answer: It’s not mandatory to enroll in Medicare at age 65 if you’re a veteran with VA benefits. However, if you choose not to sign up for Medicare, you won’t have coverage for services you get in facilities outside the VA health system. Here’s a good resource that may address some of your questions: <https://www.ncoa.org/article/how-does-medicare-work-with-va-benefits-and-tricare-for-life>

Q22: I am currently working and will be retiring in July. My husband is 67, enrolled in Medicare Part A and is covered under my insurance. When I retire, is my husband able to change his Medicare coverage or does he have to wait until open enrollment in 2026?

Answer: Yes, the loss of employer coverage would trigger a Special Election Period that would allow him to select coverage.

Q23: Does Michigan have independent agents who might advise you to sign up for original Medicare or an Advantage plan or are they primarily selling their advantage plan?



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Answer: Yes, independent agents would provide guidance that would help you make the right choice for your needs and desires.

Q24: My current medicare supplement plan said they will not increase premiums in January but they will in February. Is that legal? How can I make decisions about continuing with this plan if I don't know their premium cost by December 7th?

Answer: Medicare Supplement (Medigap) plans can raise premiums at any time during the year, as long as they follow state rules and give proper notice. Unfortunately, those increases don't have to align with Medicare's annual enrollment period. Because Medigap plans can be changed year-round (unlike Medicare Advantage or Part D), you can wait until the new premium takes effect and then decide whether to switch to a different Medigap plan or company.

Q25: Does BCBS have Medigap plans that include virtual Physical Therapy programs - such as an app?

Answer: Medigap plans don't include extra benefits like virtual physical therapy apps or wellness programs. They only help pay the out-of-pocket costs - such as deductibles, coinsurance, and copays - for services covered by Original Medicare. Those kinds of extra benefits are usually offered by Medicare Advantage plans, not Medigap.

Q26: If you are thinking of switching to Original Medicare from an Advantage Plan, and I have a medical condition, how much higher premium could I be looking at?

Answer: For most people, Part A is free and there is a premium for Part B - but these are not impacted by health issues.

Q27: Are MMAP counselors still available?

Answer: The State Health Insurance Assistance program, called MMAP (Michigan Medicare/Medicaid Assistance Program) is still available, and is free unbiased Medicare counseling services that help people understand their coverage options.

Q28: Can I enroll in part A and still carry employer provided HSA insurance?

Answer: No, you cannot have an HSA with Medicare Part A because enrolling in any part of Medicare, including Part A, makes you ineligible to contribute to an HSA.

Q29: What about if you have medical insurance that continues after you retire? Do you still need Medicare?

Answer: Confirm with your employer or retiree plan administrator how your specific plan works with Medicare, and if you are required to enroll at age 65.

Q30: If I'm already enrolled in Medicare can I cancel it if I realize I don't need it? And if in the future I do need it (ie I stop using another health insurance) can I re-enroll?

Answer: Yes, you can cancel Medicare. In the future when you want to re-enroll, you can do so during the next open enrollment or if you have a qualifying SEP.

Q31: If I don't get a Part D plan, are there any penalties if I sign up in the future?

Answer: You could face a Part D late enrollment penalty if you don't join a Medicare drug plan when you first get Medicare and go 63 days or more without creditable drug coverage. <https://www.medicare.gov/basics/costs/medicare-costs/avoid-penalties>

Q32: How much are the penalties for Part D late enrollment? I current take no ongoing prescriptions, so I don't see an immediate need for Part D (assuming I'm still not taking medications when I turn 65 in a year and a half).

Answer: You'll pay an extra 1% for each month you go without Part D (that's 12% a year). You can find more details on the Part D late enrollment penalty here: <https://www.medicare.gov/basics/costs/medicare-costs/avoid-penalties>

Q33: What about Rx coupon plans like Good Rx? I'm finding they are cheaper than any Rx plans?

Answer: GoodRx and similar coupon programs can sometimes give you lower prices, but they're not insurance and don't replace a Medicare Part D plan. You can use them instead of Part D for a specific drug, but those costs don't count toward your Part D deductible or coverage limits.

Q34: Please explain part D deductible. Does the plan cover some of the drug, or do I have to pay the entire deductible before the plan covers anything?

Answer: It depends on the whether the deductible covers all tiers or is only for certain tiers. This can vary by plan.