

# **A KIDNEY PATIENT'S GUIDE** TO MEDICARE ADVANTAGE



### **WHAT'S THE DIFFERENCE** between Medicare and Medicare Advantage?

While patients with kidney failure, or end-stage renal disease (ESRD), have historically had to access Medicare coverage, they have been excluded from purchasing a Medicare Advantage (MA) plan. That is, until a new rule granted ESRD patients access to MA plans. It's important to learn what this means for you and how to evaluate your best option.

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### **MEDICARE ADVANTAGE**

Cost	Patients are responsible for paying a 20% coinsurance for covered services and standardized Part A and Part B costs, including a monthly Part B premium.	Varies depending on the plan, but usually includes a copayment for in-network care. MA plans may also charge a monthly premium in addition to a Part B premium.		
Supplemental Coverage	Patient can pay an additional cost to enroll in a Medigap plan to cover the 20% coinsurance.	Patient cannot enroll in Medigap plan.		
Provider Network	Patient can see any provider that accepts Medicare.	Patient can only see in-network providers.		
Medication Coverage	Must sign up for separate prescription medication coverage.	Plan often provides prescription drug coverage, but you may have to pay a higher premium.		
Additional Benefits	Does not cover services like dental, vision or hearing.	May cover additional services (dental, vision, hearing), but can lead to out-of- pocket costs or a higher premium.		
Out-of-pocket Limit	No limit.	Annual out-of-pocket limit with plan covering care after you reach the limit.		

## **ENROLLMENT TIMELINES**



**Special Enrollment Periods (SEP)** can occur when a patient moves out of a service area or the plan does not renew. In these instances, patients can often enroll in a new plan. A new enrollment period, known as SEP65, also allows patients enrolled in an MA plan to disenroll and return to Medicare coverage on or surrounding their 65th birthday.

## **IS MEDICARE ADVANTAGE RIGHT FOR YOU?**

As you approach open enrollment, we encourage all patients to become educated and make an informed decision. *Here are a few things to consider:* 

Are your current providers, like your dialysis clinic, nephrologist or transplant specialist, in-network?



TIP

Medicare Advantage plans have defined networks and service areas, unlike Medicare. Make sure you're informed of the providers in-network and future doctors you may consider seeing to ensure you'll have coverage.

#### Are you eligible for or considering a kidney transplant?



On January 1, 2021, MA plans will no longer be responsible for covering organ acquisition costs for kidney transplants. These costs will continue to be covered in Medicare's Program of All-Inclusive Care for the Elderly (PACE), which provides services to specific elderly populations. For patients not eligible for PACE, they will be required to cover the out-of-pocket costs associated with organ acquisition.



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Disclaimer: This document is intended to provide objective highlights of each plan type, and is not intended to provide any form of individual guidance. Visit your State Health Insurance Assistance Program for more inforamtion at www.shiptacenter.org.