

How to Choose Medicare Plans to Protect Yourself Against Hundreds of Thousands of Dollars in Cancer Bills

According to the American Cancer Society, 1 in 2 men and 1 in 3 women will be diagnosed with cancer in their lifetimes. Given those odds, it makes sense to choose your Medicare plan with that in mind.

Rather than assume things like cancer only happen to someone else or because there's no cancer in your family you don't have to worry about it, being prepared in case of the unexpected makes sense.

With Medicare plans, you have two ways to do this. Get a Medicare Supplement or an Advantage Plan with a low Maximum Out of Pocket (MOOP), the amount of medical bills you pay before your insurance company pays the rest.

The Supplement, also called Medigap, is inarguably the best choice. If you enroll in the one with the most coverage, Plan G, and you have hundreds of thousands of dollars in cancer bills in a year, easy to do with cancer costs, aside from your monthly premiums, you only pay the \$226 Part B deductible for all those bills. No surprises. No unexpected high MOOPs to pay yearly.

The downside is Supplement premiums are high, somewhere over \$100 per month and an estimated \$300 or more monthly including the Part B \$164.90 and a drug plan, average cost \$30 a month. Plus, the Supplement monthly premiums increase as you grow older, but the coverage is the best Medicare offers.

You can enroll in a Supplement without underwriting, medically qualifying, for 6 months, the Medicare Supplement Open Enrollment, starting when you get Medicare Part B. After that you have to medically qualify and may be denied if you have any expensive medical conditions.

To protect yourself from sky-high cancer costs with an Advantage Plan, the best strategy is to enroll in a plan with the lowest Maximum Out of Pocket that is a good fit for you: your doctors in the network, a PPO for out of network coverage, drugs covered by the plan, and the local hospital that treats cancer in the network.

Usually, these plans will have zero premiums with a premium free drug plan embedded in the plan. You only pay the monthly Part B premium, \$164.90 in 2023.

In Guilford County the Maximum Out of Pockets range from \$2,499 to \$8,300. So, you want a MOOP in the lower end to hold down the costs. Easier to pay \$4,000 than \$8,000. More so since cancer treatments can go on for years and the MOOPs reset yearly.

If you are under age 65 and on Disability with Medicare, an Advantage Plan may be your only choice since the cost of a Supplement is exorbitant when you are under age 65, close to \$400 per month for the Supplement premium not including the Part B and drug plan premiums.

However, at age 65 you get a reset and pay the same for Supplements as everyone else. You will have the 6-month Supplement Open Enrollment after you turn age 65 where companies have to accept you regardless of how expensive your medical conditions are.

Past that 6-month Open Enrollment, you will have to medically qualify, and if you have expensive medical conditions, the companies do not have to accept you.

For cost-free objective help in selecting Medicare plans, call the Seniors' Health Insurance Information Program, SHIP, at Senior Resources of Guilford: 336-373-4816 Ext 253.

SHIP is part of the North Carolina Department of Insurance. Our Medicare counselors are not salespeople on commissions. They are volunteers who cannot recommend plans or tell you what to do. They equip you with adequate Medicare knowledge and comprehensive plan reviews to make the best choices for your important health insurance needs.