
Overview of Medicare and Tri-care Coverage

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Who is eligible for Medicare

- Individuals age 65+
 - Only if 10 years of work history
 - Self or spouse
- Individuals with permanent disability
 - Defined as 24 months of SSDI payments
- Individuals with end-stage renal disease or Lou Gehrig's disease

Medicare: 4 Parts

- Part A – hospital insurance
 - Funded with payroll tax
- Part B – physicians, outpatient, home health
 - About \$105/month premium
 - \$147/year deductible
- Part C – Medicare Advantage (managed care)
 - Replaces A, B, D
- Part D – drugs
 - Premiums and plan design varies

Public Medicare Supplemental Plans

- Medicaid
 - “Full duals”
 - covers Medicare premiums, cost-sharing , & services up to Medicaid benefits
 - Medicare Savings Programs
 - QMB – 100% FPL
 - Covers Medicare premiums (A & B), Part B premium & co-insurance & deductibles for A & B
 - SLMB & QI-1 – 135% FPL - Part B premium only
- VPharm – wraps Part D
 - 150% FPL: Part D premium, cost-sharing, add’l drugs, diabetic supplies, eye exams
 - 225% FPL: maintenance meds & diabetic supplies

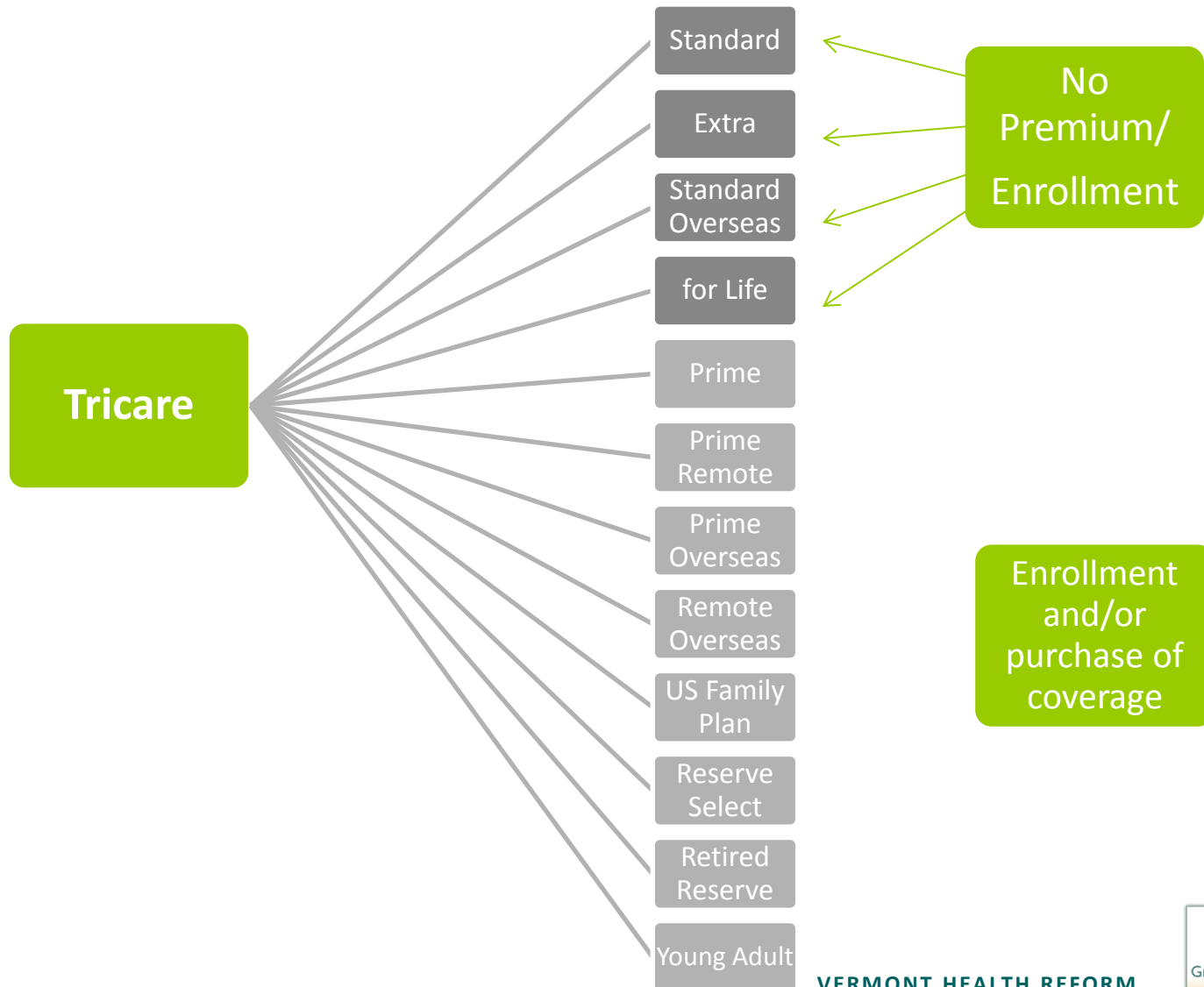
Private Medicare Supplemental Plans

Medigap Benefits	Medigap Plans									
	A	B	C	D	F*	G	K	L	M	N
Part A coinsurance and hospital costs up to an additional 365 days after Medicare benefits are used up	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Part B coinsurance or copayment	Yes	Yes	Yes	Yes	Yes	Yes	50%	75%	Yes	Yes***
Blood (first 3 pints)	Yes	Yes	Yes	Yes	Yes	Yes	50%	75%	Yes	Yes
Part A hospice care coinsurance or copayment	Yes	Yes	Yes	Yes	Yes	Yes	50%	75%	Yes	Yes
Skilled nursing facility care coinsurance	No	No	Yes	Yes	Yes	Yes	50%	75%	Yes	Yes
Part A deductible	No	Yes	Yes	Yes	Yes	Yes	50%	75%	50%	Yes
Part B deductible	No	No	Yes	No	Yes	No	No	No	No	No
Part B excess charges	No	No	No	No	Yes	Yes	No	No	No	No
Foreign travel exchange (up to plan limits)	No	No	Yes	Yes	Yes	Yes	No	No	Yes	Yes
Out-of-pocket limit**	N/A	N/A	N/A	N/A	N/A	N/A	\$4,940	\$2,470	N/A	N/A

What is TRICARE?

- TRICARE is the health care program serving uniformed service members, military retirees and their families.
- To be eligible for TRICARE you must be enrolled in the Defense Enrollment Eligibility Reporting System (DEERS).

Tricare



Vermont and TRICARE

- 2,307 Service Members were eligible for TRICARE Reserve Select
- 315 Service Members on Active Duty Guard or Active Duty Orders were eligible for TRICARE.
- Roughly 1400 Vermonters are enrolled in a TRICARE Prime. This plan offers managed care for retirees that are not yet eligible for TRICARE for Life.
- 2,264 Vermont Medicaid members have TRICARE insurance that serves as a primary payer over Medicaid.
- Note: Numbers from 2011

Issues with TRICARE

- TRICARE Prime does not cover routine care for beneficiaries out of state
- TRICARE Standard and Extra have higher cost sharing and deductibles than other TRICARE programs
- TRICARE beneficiaries have difficulty receiving counseling
 - TRICARE contractor does not recognize some psychologists
 - TRICARE does not reimburse substance abuse counselors

Financial Analysis

S.252 Populations at a Glance				
Based on UMASS/Wakely Report. All \$ in Millions				
Type of Coverage	2017 Group Members	GMC Secondary	Administrative Cost	Total Cost
Medicare	128,739	\$83	\$6	\$89
Other Federal (FEHBP/Military/VA)	30,499	\$21	\$2	\$23
Total	159,238	\$104	\$8	\$112