

Frequently asked questions

Health care decisions are important, and can be confusing. It's our job to make them easier. At Extend Health, we've worked with hundreds of thousands of retirees to make their complex health care and Medicare decisions straightforward and simple. After helping so many through this process, we know that people often have similar concerns, so we've compiled a list of answers to the most frequently asked questions.

Q: How do I ensure that I can continue to see my current doctor?

A: Extend Health understands the importance of being able to continue to see your current doctor. We recommend talking to your doctor prior to contacting Extend Health, to determine which insurance company plans he or she accepts. This will make your enrollment call more efficient. Extend Health may need your doctor's information (name, address, etc.) in order to help you enroll. Call us, or log in to your Extend Health account, to provide this important information to us as soon as possible.

Q: Can I continue to use the same insurance company?

A: In many cases you can. Although we understand the importance of staying with an insurance company you already know and trust, we also know that employer-sponsored health plans and individual health plans may work differently, even within the same insurance company. Many people we work with find that their existing insurance company does not always offer a plan that is tailored to their specific needs. We can

compare your current insurance carrier with other carriers so you can make a decision that best fits your specific needs. The plan that fits you best may be with your current insurance company, or you may discover that another insurer has a plan that works better for you.

Q: Are any of the options and rates affected by my current or past health status?

A: No. For those who are changing from employer-based group health coverage to individual coverage, there are no restrictions placed on your coverage, nor is any "penalty" reflected in your premiums.

Q: Will I lose or "replace" my Medicare?

A: You will not lose Medicare, but it may work differently depending on the type of plan you choose.

Medicare Advantage plans are administered by private insurance companies that are a part of the Medicare program. If you enroll in a Medicare Advantage plan it will cover all of your Medicare benefits. You must have Medicare Part A & Part B in order to enroll in a Medicare Advantage plan.

Medigap (Medicare Supplement) plans work in tandem with Medicare. Medicare continues to be the primary payer of medical expenses. A Medigap plan pays for expenses that Medicare does not cover.

Q: Do I need to keep paying my Medicare Part B premium?

A: In order to qualify for a Medigap or Medicare Advantage plan, beneficiaries must be enrolled in and continue to pay for Medicare Part B.

Q: Will my new plan be as good as my current plan?

A: Individual Medicare plans work differently than group health insurance plans. However, we work with the top national and regional insurance companies to ensure that you will have quality plan options.

Benefit advisors will help you find a plan that best suits your needs. In many cases, the new plan will be better than your current plan, because it can be more tailored to your specific needs.

Q: What can I expect to pay for my new plan?

A: What you will pay depends on the type of plan that you select. Extend Health's research shows that many people will continue to pay about the same as they have under group coverage with their former employer. But some may pay more and others will pay less. The type of plan you choose will dictate the amount you pay.

As a general rule, Medicare Advantage plans tend to have lower premiums but require copayments for services. Medigap plans tend to have higher premiums with low or no copayments for services. During the enrollment season your Extend Health benefit advisor will work with you to understand the costs—and benefits—of the different coverage options available to you.

Q: Will I have to pay for my new health plan when I enroll?

A: When you enroll in a new plan, you will need to begin making premium payments to the insurance company in order to maintain your coverage. Some insurance companies may require the first month's premium payment during the application process. In this case, you should expect to make a payment within a few days of your enrollment. Please have your billing information ready when you make your enrollment call to Extend Health.

Most insurance companies give you several billing options for ongoing payments: direct billing, Electronic Funds Transfer from your checking account, or automatic deduction from your social security check.

Q: Is Extend Health going to be available next year to assist me if necessary?

A: Yes. You may continue to work with Extend Health after your enrollment to receive assistance with your health insurance needs.

Q: When will I be able to see the plan options and costs?

A: The federal government approves all the benefits and rates for the upcoming calendar year by October. The *Enrollment Guide* you receive from Extend Health will contain the designated time period when you will be able to evaluate and enroll in a health care plan. Additionally, you can access our website to review plan options after you receive your *Enrollment Guide*.

Q: Do you offer dental insurance?

A: Yes; dental insurance plans offered by Delta Dental and Humana are available through Extend Health. These plans span a wide range of services. The Delta plan is available nationwide, while the Humana plan is currently available in all but the following states: HI, ME, MT, OR, and VT.

Learn more about plan features by contacting an Extend Health benefit advisor, or on the Extend Health website.

Q: Do you offer a vision plan?

A: Yes. The vision insurance option available through Extend Health offers immediate access to premium vision coverage—including annual eye exams, prescription eyewear, personalized care and more—from one of the most trusted names in eye care, VSP Vision Care.

The VSP® Vision Care product, available through Extend Health, is the nation's largest eye care provider. You'll have access to a nationwide network of

22,000 community-based independent eye doctors. You'll get affordable services, great savings, and great choices in eyewear—all located in your neighborhood.

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Q: Do you offer plans that cover me in multiple states – I am a snowbird and often visit or live in warmer climates during the colder months? Are there plans that will cover me when I travel domestically or internationally?

A: Medigap plans are accepted by every Medicare-participating provider in the U.S., with some emergency benefits worldwide. If you travel frequently or live part of the year out-of-state, these plans may be right for you. Part D plans provide nationwide coverage from participating pharmacies. Medicare Advantage plans cover urgent and emergency services nationwide, but some may not provide nationwide coverage for non-emergency services. If you live part of the year out-of-state, these plans may not be right for you.

Q: If I don't like the plan that I enrolled in, when can I change?

A: Every year you will have an Annual Enrollment Period during which you can investigate other medical and drug plans and potentially enroll in a different plan. However, during

these annual enrollment periods your current medical conditions may limit the plans available to you. You will receive notification from Extend Health of the annual enrollment period – we encourage you to contact us should you have any questions.

Q: If I have other options for coverage (spouse, military, etc.) and don't enroll with Extend Health this year can I enroll with you next year or at some other point in the future?

A: Yes, but you will need to discuss this situation with an Extend Health benefit advisor to determine if you would be eligible for any financial support.

Q: Will my premium rates increase every year? If so, by how much?

A: In general, insurance premiums do increase every year. The increase in plan cost year-to-year can vary widely.

We advise our enrollees to contact us and compare other plans if you experience rate increases in the 10-15% range.

Q: If I like the benefit advisor I talk to can I request that same advisor again?

A: Yes. In fact if you call us from the same phone number of your initial call, the system will automatically attempt to route you to the same benefit advisor.

Q: If I need assistance can someone else contact Extend Health and talk with a benefit advisor on my behalf?

A: Yes, but they can only enroll you in a plan if they have your medical Power of Attorney.

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