

- By visiting www.Medicare.gov you can find doctors, providers, hospitals, plans and suppliers in your area that fit your needs. This tool also lets you search and compare nursing homes, home health providers and dialysis facilities. You can search by ZIP code and select your preferences for physician specialty and gender.

Change in enrollment periods:

- **The open enrollment period for Original Medicare, Part D prescription drug coverage and Medicare Advantage plans now occurs from October 15 through December 7 of each year.** Visit www.Medicare.gov for more information.
- Between January 1 and February 14 of each year, any individual enrolled in a Medicare Advantage plan may disenroll in their coverage and return to Original Medicare (Parts A and B) and enroll in Part D prescription drug coverage.

The ACA and Long-Term Care

The ACA originally created a program called the Community Living Assistant Services and Supports (CLASS) program. CLASS was intended to be a voluntary, nationwide long-term care insurance program to become available beginning October 2012. However, on October 14, 2011, Health & Human Services Secretary Kathleen Sebelius determined that the CLASS program was no longer viable and is no longer available.

For more information on how to purchase private long-term care insurance, see the Kansas Insurance Department's "Long-Term Care Insurance and Shopper's Guide".

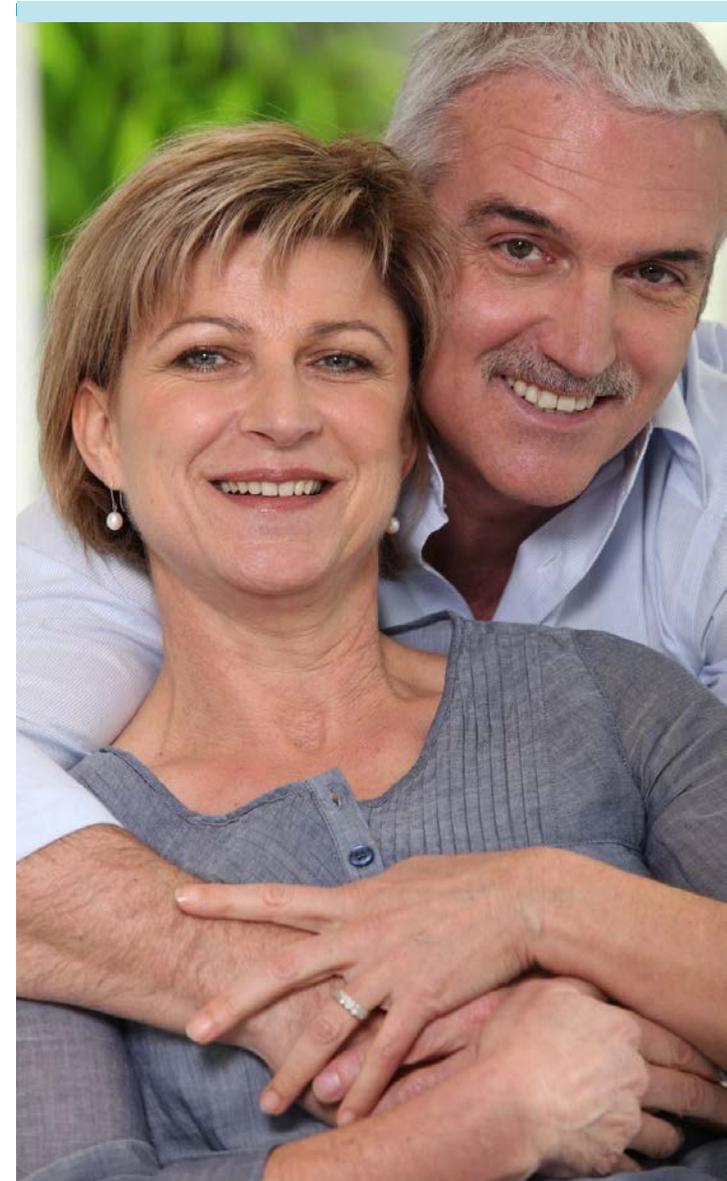
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Medicare eligible Kansans *and the* Affordable Care Act





About the Affordable Care Act

The Affordable Care Act (ACA), sometimes referred to simply as “health care reform” or “Obamacare”, was passed into law on March 23, 2010.

The ACA and Medicare

Very few changes in the ACA affect Medicare. The few changes that do are outlined below.

Medicare Advantage plans:

- All Medicare Advantage plans will be assigned a quality rating by the federal government to help consumers determine which plan is best for them.
- The ACA also extends the Special Needs Program (SNP) of Medicare through the end of the 2013.

Part D prescription drug coverage:

- Premiums for Part D coverage will increase for individuals who

earn \$85,000 or more each year, and for couples who earn \$170,000 or more each year.

- A phase-in process for closing the “doughnut hole” coverage gap through 2020 is established. Individuals in the doughnut hole will be responsible for the following percentages of each of their medications:

Year	Brand name	Generic
2013	47.5%	79%
2014	47.5%	72%
2015	45%	65%
2016	45%	58%
2017	40%	51%
2018	35%	44%
2019	30%	37%
2020	25%	25%

Preventive health benefits:

- As of January 1, 2011,

Medicare beneficiaries no longer have to pay to receive certain preventive services, including breast cancer screenings/mammograms; colonoscopies and other colorectal cancer screenings; diabetes screening; flu shots, pap tests and pelvic exams; prostate cancer screenings; smoking cessation counseling; and obesity screenings.

- Original Medicare beneficiaries are eligible to get a free yearly wellness visit to help develop prevention and wellness plans.

Tools to improve and manage care:

- Medicare’s “Blue Button” online tool at www.MyMedicare.gov lets you download your Medicare claims and other personal information, such as emergency contacts, names of pharmacies and providers, allergies, medical conditions and prescription drugs.