



Understanding the differences between Traditional Medicare, Medigap and Medicare Advantage

Traditional Medicare

- Consists of Medicare Part A (hospital) and Medicare Part B (medical coverage).
- Part D (drug coverage) must be purchased separately.
- Most people pay a monthly, income-based premium for Medicare Part B.
- Does not cover vision, hearing or dental benefits.
- Does not have an annual limit on out-of-pocket spending.

Medigap

- Optional coverage for Traditional Medicare beneficiaries.
- Pay additional premium to cover services not covered under traditional Medicare such as copays, coinsurance and deductibles.
- Medigap plans are provided by private companies.
- There are 10 different types of Medigap plans that vary by design.
- With a Medigap plan, you are still required to pay Part B premiums.
- Does not have an annual limit on out-of-pocket spending.

Medicare Advantage

- Covers traditional Medicare Parts A (hospital) and B (medical) benefits.
- Almost 90% of Medicare Advantage plans also include Part D (prescription drug) coverage.
- Over 97% of Medicare Advantage plans offer at least a vision, hearing or dental benefit.
- Approximately 50% of Medicare Advantage plans offer all three benefits.
- There is an annual cap limit on out-of-pocket spending. This limit changes each year.
- Medicare Advantage is provided through private insurance companies.
- The government sets quality standards, known as star ratings, for Medicare Advantage plans.
- Under Medicare Advantage, you are still required to pay Part B premiums.
- Some Medicare Advantage plans do not have an additional premium, whereas other Medicare Advantage plans require an additional premium.
- These premiums may differ in cost due to zip code and plan type.

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