

# More Changes Coming to Medicare in 2009

by Kay Ledbetter

**M**ore changes are in store to Medicare in the coming year, said a Texas AgriLife Extension Service specialist. “The Centers for Medicare and Medicaid Services announced changes to the Medicare program for 2009,” said Andrew Crocker, AgriLife Extension gerontologist.

“These changes will take effect Jan. 1. It is important to look carefully at all these changes and determine how they might affect you, especially changes to Medicare Part D, the prescription drug benefit.”

Crocker said many people have already or soon will be receiving a copy of “Medicare & You 2009” in the mail.

“This handbook will help you navigate the services to which you are entitled under Medicare and should be kept in a place for easy reference,” he said. “If you happen to lose your copy or do not receive one, you may access it through the Medicare web site: [www.medicare.gov](http://www.medicare.gov).”

## Part A

An overwhelming majority of Medicare beneficiaries do not have to pay a monthly premium for their Part A benefit, which is inpatient hospitalization coverage. This is because they have at least 40 quarters of Medicare-covered employment or are the spouse or surviving spouse of the beneficiary, Crocker said.

However, for those who may not have worked the required 40 quarters, Part A coverage may be obtained by paying a monthly premium, he said. For those who worked less than 30 quarters, this premium will be \$443 per month for 2009. For those who worked 30 to 39 quarters, this premium will be \$244 in 2009.

Crocker explained the annual Part A deductible in 2009 will be \$1,068, an increase of \$44. This amount is paid by the beneficiary when admitted as a hospital inpatient. The Part A deductible is the beneficiary’s only cost for up to 60 days of Medicare-covered inpatient hospital care in a benefit period.

Beneficiaries must pay additional amounts for stays longer than 60 days, and

these amounts will increase slightly in 2009, he said.

## Part B

For the first time in a number of years, there will be no change in the monthly premium for Medicare Part B, the optional outpatient health insurance, Crocker said. The standard Medicare Part B monthly premium will be \$96.40 in 2009. Additionally, the \$135 annual deductible for services for 2009 is unchanged from 2008.

The 2009 open enrollment period for a person to enroll in or change a Medicare prescription drug plan begins on Nov. 15 and ends on Dec. 31, he said. Any and all changes made will go into effect Jan. 1.

“Each beneficiary should compare the changes in cost and drug coverage that will take place in 2009 to their current prescription drug plan,” Crocker said. “Beneficiaries should then compare this to the costs and coverage of other plans that will be offered in their community.”

He advised they check to see the costs of

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— Andrew Crocker

these plans, the medicines and services they cover, and how it works with their pharmacies and doctors.

“Each beneficiary needs to choose the best plan that meets their prescription drug needs and then enroll in this plan,” Crocker said.

Conditions and costs of each plan will vary by provider and by the plan type, he said. Some plans

offer additional help and some beneficiaries will qualify for extra assistance based on income. To find out the specifics for each plan, consult the plan provider directly.

## Part D

In 2009, monthly premiums will average \$30 and beneficiaries must meet the \$295 annual deductible before the Part D plan begins paying, unless that particular plan has some exception, Crocker said.

Coverage will continue with the beneficiary paying just the co-payment and any residual cost for prescription drugs until the amount paid by the plan and the beneficiary reaches \$2,700. At that point, the beneficiary will be responsible for 100% of drug costs until \$4,350 is reached, unless the particular plan has some exceptions for coverage during this gap period, he said. Once the beneficiary has spent more than \$4,350, coverage resumes under the plan.

According to Centers for Medicare and Medicaid Services, some Part D beneficiaries may see significant premium increases or changes — such as reduced coverage in the gap — if they stay in the same prescription drug plan in 2009.



## For more information:

- ▶ Call 1-800-MEDICARE (1-800-633-4227, TTY 1-877-486-2048). 24-hour help is available from trained Medicare representatives.
- ▶ Visit [www.medicare.gov](http://www.medicare.gov). Compare costs, coverage and more. Get an estimate of out-of-pocket costs for the year.
- ▶ See plan listings in the Medicare & You handbook and information sent by your plan.
- ▶ Talk with local Medicare experts at your State Health Insurance Assistance Program.

**Editor’s Note:** Kay Ledbetter is a communications specialist for the Texas AgriLife Research and Extension Center at Amarillo, which supplied this article.