Top 5 questions to ask before you enroll in a Medicare plan

Make a confident, informed decision by asking the right questions before choosing your Medicare plan coverage.

Choosing the right Medicare plan is an important step in protecting your health and finances. Before you enroll, consider asking these key questions to ensure the plan you choose meets your needs.

Visit **hsabank.com/MedicareConsult** or call to schedule your complimentary consultation today.

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1

Does this plan cover my doctors, hospitals and pharmacies?

Provider networks vary by plan. Make sure your preferred doctors, specialists and hospitals are included, and that your local pharmacy is covered.

2

Will my prescriptions be covered — and at what cost?

Each Medicare drug plan has a formulary, or list of covered medications. Check if your prescriptions are included and review the copay amounts.

3

What are my total out-of-pocket costs?

In addition to premiums, you may pay deductibles, copays and coinsurance. Ask about the annual out-of-pocket maximum and other potential expenses.

4

Are dental, vision and hearing benefits included?

Original Medicare doesn't cover these services, but some Medicare Advantage plans do.

5

Does this plan include any extra benefits or wellness programs?

Many Medicare Advantage plans offer extras like transportation, over-the-counter items, fitness memberships or telehealth services. These benefits vary by plan and can add real value.

Bonus tips for a smooth enrollment

Start early: Don't wait until the last minute. Begin reviewing your options before your Initial Enrollment Period (IEP) to avoid missing deadlines or feeling rushed.

Compare plans annually: Even if you're happy with your current plan, it may change next year. Reviewing options during the Annual Enrollment Period (AEP) ensures you're still in the best fit.

Look beyond premiums: A low monthly premium doesn't always mean lower overall costs. Consider copays, deductibles and the plan's out-of-pocket maximum.

Watch for network changes: Doctors and pharmacies can leave or join a plan's network at any time. Reconfirm your providers are still in-network before re-enrolling.

Ask about coordination of care: Some plans offer care coordination or case management for chronic conditions — valuable support if you have ongoing health needs.

Let's find the right plan for you — schedule your appointment with a licensed agent today.

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