

1941 SOUTH 42ND STREET  
SUITE #312  
OMAHA, NEBRASKA 68105

## STAFF

Sue Fredricks .....Executive Director  
Kae Turco.....Volunteer Coordinator  
Brenda Canedy.....Client Resource  
Coordinator  
Lorena Marion.....Office Manager  
Anissa Wilson.....Intake Coordinator

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## HOURS

MONDAY-FRIDAY 8:30-4:30

## OUR MISSION

TO SIMPLIFY THE LIVES OF  
SENIORS BY ENABLING THEM TO  
MAKE INFORMED DECISIONS  
REGARDING THEIR BENEFITS

[www.vas-nebraska.com](http://www.vas-nebraska.com)

# vas

## VOLUNTEERS ASSISTING SENIORS

HOLIDAY EDITION 2016

## Medigap Supplement Plan Reviews

**Medigap Supplement Open Enrollment** Most people have only one Open Enrollment period to enroll in a Medigap Supplement. This six month enrollment period begins when you first start Medicare Part B after turning 65.

**Medigap Policy Premium Increases** The cost of Medigap policies can vary widely. Each insurance company sets its own premiums. Medigap policies can be priced or "rated" in three ways. An "Attained Age" policy is based on your current age. Your premium will increase as you get older. An "Issued Age" policy is based on the age you were when you purchased the plan. You will not have a premium increase as you get older, as you would with an attained age plan. A "Community or No-Age" policy is not based on age. No matter what your age at time of purchase, everyone pays the same rate. All policies are subject to additional rate increases based on inflation and health care costs. As the policy premium increases, many ask if they can change to a lower cost company or plan.

**Medical Underwriting** If you would like to change to a different supplement plan or insurance company, you will need to go through a medical underwriting process with the insurance company. During this process, the insurance company reviews your medical history. Companies are under no obligation to sell you a policy once you are out of your open enrollment period.

**How to review your policy** This process is not part of Medicare Open Enrollment, and can be done any time during the year. If you are interested in reviewing your Medigap Supplement

options, VAS can help. A counselor can show you the plans and pricing offered by insurance companies in Nebraska. You will also be able to review company financial ratings, rate increase history, lives covered, and household discount information. If you are in good health and would like to review your Medigap policy options, call VAS at 402-444-6617 to schedule a review today.

**What if I am on a Medicare Advantage plan and would like to enroll in a Supplement** Once your Medigap Supplement Open Enrollment has ended, your health will be evaluated though the company's medical underwriting process before they will sell you a plan. You will need to coordinate this with your windows of opportunity to enroll in a separate drug plan, as your current drug coverage was included in your Advantage plan.

You can make a switch from Medicare Advantage to a Medicare Prescription Drug plan:

- During Medicare Open Enrollment, Oct.15—Dec. 7. Your drug plan will start January 1.
- During the Medicare Advantage Disenrollment period, Jan. 1—Feb. 15. Your drug plan will start the first of the following month
- Or you could enroll in a '5-star' drug plan at any time.

Do not cancel your current Medigap policy or switch out of your Advantage plan until the new supplement company has cashed your first month's premium check or taken it out of your bank account and the new policy has been issued.



“You are never too old to set another goal or to dream a new dream.”

~ Les Brown



## Medicare Five-Star PDP and MA Plans



### What is a 5-star Medicare Plan?

Medicare uses information from member satisfaction surveys, plans, and health care providers to give overall performance star ratings to plans. A plan can get a rating between 1 and 5 stars. A 5-star rating is considered excellent. These ratings help you compare plans based on quality and performance.

**Prescription Drug Plans** If you missed the Medicare Open Enrollment deadline, enrolled in a prescription drug plan that doesn't cover your drugs, or haven't enrolled in a PDP at all, you still have an option to get coverage in 2017—you may enroll in a 5-star Prescription Drug Plan once from December 8–November 30.

There are two 5-star plans in Nebraska for 2017, both offered by Blue Cross and Blue Shield of Nebraska.

**How does Medicare determine star ratings for prescription drug plans?** The overall rating scores the drug plan's quality and performance in many different topics that fall into four categories:

- **Drug plan customer service:** Includes how well the plan handles member appeals.
- **Member complaints and changes in the drug plan's performance:** Includes how often Medicare and member reported problems

with the plan. Also includes plan performance improvements.

- **Member experience with the plan's drug services:** Includes member rating of the plan.
- **Drug safety and accuracy of drug pricing:** Includes how accurate the plan's pricing information is.

The information comes from sources that include:

- Member surveys done by Medicare.
- Reviews of billing and other information that plans submit to Medicare.
- Results from Medicare's regular monitoring activities.

**Medicare Advantage Plans** Medicare Advantage plans are also given star ratings. These ratings are based on:

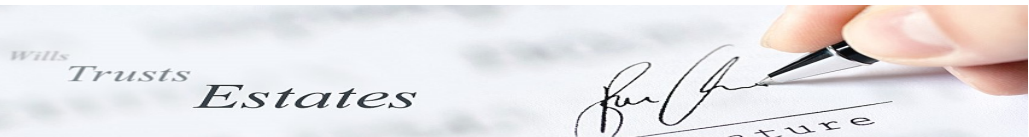
- Member surveys done by Medicare.
- Information from clinicians.
- Information submitted by the plans.
- Results from Medicare's regular monitoring activities.

There are no 5-star Medicare Advantage plans offered in eastern Nebraska for 2017 so the Special Enrollment Period is not available.

For more information on how Medicare determines quality ratings go to: [Medicare Quality Ratings](#)



## VAS Basic Estate Planning



Many of us struggle to understand if, why and when we may need powers of attorney (POA), living wills, revocable trusts and other succession planning tools. Attorney Tom Prohaska has created and will present the VAS Basic Estate Planning Workshop to explain

these tools.

The workshop is being offered on Wednesday, January 25 and Wednesday March 29, at 1:30 pm at the VAS office at The Center, 1941 South 42nd Street, Suite #312. Please call VAS at (402) 444-6617 to reserve a seat.

## Homestead Exemption Filing Assistance

The Homestead Exemption filing process begins February 1st and ends June 30th. VAS assists thousands of eastern Nebraskans each year complete the Homestead Exemption form that is filed with their county. There will be several locations around the metro area where you will be able to receive assistance.

**VAS will be offering assistance by appointment this year.** This should help you get in to your counseling session without a long wait. Call VAS at (402) 444-6617 beginning February 1st to schedule an appointment.

If you have other questions about the Homestead Exemption Program contact VAS at (402) 444-6617 or

Douglas County (402) 444-7060  
 Cass County (402) 296-9310  
 Dodge County (402) 727-3911  
 Sarpy County (402) 593-2122



## 2017 Medicare Part B Premiums

Medicare Part B insurance pays for health care services including doctor visits, laboratory and diagnostic testing, outpatient surgery, emergency room and ambulance services, outpatient mental health, durable medical equipment and home health services not covered by Part A. There is a monthly premium for Part B.

**Part B Premiums for 2015** In 2015, everyone making <\$85,000 (single) or <\$170,000 (couple) had the same Part B monthly premium—\$104.90.

### Part B Premiums for 2016

In 2016 there was no Cost of Living Adjustment (COLA), which meant that the Part B premium increase for 2016 was contingent on the Hold Harmless provision.

**Hold Harmless Provision** The Hold Harmless provision states that:

- Part B premiums cannot increase in years when there is no Social Security cost of living Adjustment and
- The net social Security benefit cannot decrease.

In 2016 the Part B premiums were:

- \$104.90—People who were having their Part B premium deducted from their Social Security in 2015
- \$121.80—Others, such as people not on social

security or starting Medicare in 2016

**Part B premiums for 2017** In 2017, the Cost of Living Adjustment (COLA) will be 0.3%. **For those that had their premiums deducted from Social Security in 2016**, their Part B premium will go up by the same amount they will be receiving in a COLA increase. This means there will be no standard Part B premium for this group as premiums will vary from person to person, based on their Social Security amount.

- If a persons 2016 premium was \$104.90, their 2017 premium will be \$104.90 + 0.3% of their Social Security amount—with the average premium of \$109

- If a persons 2016 premium was \$121.80 their 2017 premium will be \$121.80 + 0.3% of Social Security amount

**For those not taking Social Security or starting Medicare in 2017**, the standard Part B Premium will be \$134/mo.

**Those with incomes >\$85,000 (single) or >\$170,000 (couple)** will have a Part B premium of \$134 plus IRMAA (Income Related Adjustment Amount). For more information on Medicare 2017 costs go to: [2017 Medicare Parts A and B Costs](#) or [2017 Medicare Part D costs](#)



## Volunteers Assisting Seniors

The Center Mall  
 1941 South 42nd Street  
 Suite #312  
 Omaha, NE 68105  
 Phone: 402-444-6617  
 Fax: 402-546-0886  
 E-mail: [sue@vas-nebraska.org](mailto:sue@vas-nebraska.org)  
[www.vas-nebraska.com](http://www.vas-nebraska.com)

## Retirees Sharing the Experiences of a Lifetime!

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 benefits programs.  
 Click here and "like" us



# January 2017

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
2 <b>Holiday</b> <b>Office Closed</b>	3	4	5	6	7
9	10	11	12	13	14
16 <b>Holiday</b> <b>Office Closed</b>	17	18	19 6:30-8:30pm <b>New to Medicare</b> <b>Class</b>	20	21
23	24	25 1:30 - 3:00 <b>Basic Estate</b> <b>Planning</b>	26	27	28
30	31				