# NEBRASKA SHIP NEWSLETTER

## WHAT'S NEW IN 2022?

Medicare changes from year-to-year. Adjustments to coverage and costs are important to note. What changes should people with Medicare expect in 2022?



#### **Medicare Part B Premium**

Each year the Medicare Part B premium is determined by the Centers for Medicare & Medicaid Services (CMS). Changes to premium and other Medicare costs announced in the fall. Many factors may affect what the premium will be. One of the major factors is what the Social Security Administration (SSA) decides concerning Social Security benefits and whether to provide a Cost of Living Adjustment (COLA). In October 2021 SSA announced a 5.9% COLA increase. When COLA applies, the Medicare Part B premium can rise. The standard Medicare Part B premium will rise in 2022 to \$170.10 per month, an increase of \$21.60 per month from 2021 rates.

#### **Hold Harmless Provision & Part B Premium**

Most people will pay the new standard Part B premium. There may be a small number of people who may pay a premium that is lower than the base premium, due to the hold harmless rule. The hold harmless rule protects people with Medicare from having their previous year's Social Security benefit level reduced by an increase in

the Part B premium. People who qualify for this protection are:

- 1. Entitled to Social Security benefits for November and December of 2021;
- 2. Have or will have the Medicare Part B premium deducted from Social Security benefits in November 2021 through January 2022:
- 3. Do not already pay a higher Part B premium due to Income-Related Monthly Adjustment Amount (IRMAA);
- 4. And, do not receive a COLA large enough to cover the increased premium.

The COLA increase is expected to cover the full Part B premium for most people. The hold harmless provision does not protect a person if:

- 1. The person is new to Medicare in 2022. Hold harmless does not apply because enrollment in Part B is not long enough to qualify.
- 2. The person is subject to IRMAA.
- 3. The person is enrolled in the Medicare Savings Program (MSP). The MSP should continue to pay for the full Part B premium.
- 4. The person was enrolled in MSP in 2021 but lost the program because their income increased or they did not recertify.

Note: The hold harmless provision does not remove the Part B late enrollment penalty. The penalty will still apply and will be based on the standard premium.

## Do you REVIEW?

Medicare Advantage Open Enrollment begins January 1.

**CALL NEBRASKA SHIP AT 1.800.234.7119** 

# WHAT'S NEW IN 2022?

# Income Related Monthly Adjustment Amount (IRMAA)

Medicare Part B premiums could be higher for people who's Modified Adjusted Gross Income (MAGI) is above a certain amount. Medicare uses the MAGI reported to the IRS on the tax return from two years ago. In 2022 people who filed an individual tax return in 2020 with a MAGI at \$91,000 or less will pay the standard premium. People who filed a joint tax return in 2020 with a MAGI at \$182,000 or less will also pay the standard premium. People with MAGI above these amounts will pay an IRMAA that could range between \$68.—\$408.20 per month. People who have experienced a life-changing event may appeal and potentially have their IRMAA reduced or eliminated. NOTE: IRMAA also applies to Part D, prescription drug coverage, and an appeal process is also available.

#### **Part B Deductible**

In addition to an increase to the Part B premium, the Medicare Part B deductible will increase in 2022. People in Original Medicare will have a one-time annual deductible of \$233. Once paid, people will share their costs with Medicare at the 80/20 split.

#### **Part A Costs**

Medicare Part A is typically premium free, but other costs exist and can be adjusted from year-to-year. In 2022 the Part A deductible will be \$1,556, which pays for the first 60 days of inpatient hospitalization. Daily copays exist for hospitalization beyond 60 days. In 2022 people will pay:

Days 61—90: \$389 per day

Days 91—150: \$778 per day

• Days 151 and beyond: All costs

#### Part A Costs (Continued)

Cost for skilled nursing facility care will also increase in 2022. Days 1—20 are paid fully by Part A. People will pay a daily copay of \$194.50 for days 21—100. Care received on day 101 or beyond will be fully the individuals responsibility.

#### **Medicare Advantage Open Enrollment**

In 2019 Medicare added the Medicare Advantage Open Enrollment Period. This period begins

January 1 and ends March 31 of each year. Only people enrolled into a Medicare Advantage plan may make one change during this time. This may include changing from one Advantage plan to a



different Advantage plan or dropping the Advantage plan and return to Original Medicare and, if needed, join a Medicare Part D plan.

#### **General Enrollment Period**

People that are eligible for Medicare and do not have Medicare Part A and/or Part B in place may sign up for these benefits during Medicare's General Enrollment Period. People may sign up between January 1 and March 31 and will see their coverage begin on July 1. Monthly late enrollment penalties may apply for those who enroll during this time.

## **Medicare Savings Programs**

People who meet certain income and resource limits may be able to get help to pay for Medicare premiums and reduce prescription drug costs. Qualifying for a savings program may also relieve an individual from late enrollment penalties. People may contact Nebraska SHIP at 1.800.234.7119 to learn more about these programs.

# **CALL NEBRASKA SHIP AT 1.800.234.7119**

# UNDERSTANDING **MEDICARE & GENETIC TESTING**

# IS IT A SCAM?

Genetic testing scams emerged in 2019 targeting cancer screening and pharmacogenetics (medication metabolization). The latest growing genetic testing fraud trend focuses on cardiovascular genetic testing. Scammers are offering people with Medicare cheek swabs for genetic testing to obtain their Medicare information for fraudulent billing purposes or possibly medical identity theft.

### What is Cardiovascular Genetic Testing Fraud?

Cardiovascular genetic testing fraud occurs when Medicare is billed for a cardio type of test or screening that was not medically necessary and/or was not ordered by an individual's treating physician. Testing may be advertised as "free" or "at no cost." Individuals could be responsible for the entire cost of the test, with the average amount between \$9,000 to \$11,000.

## When is Cardiovascular Genetic Testing **Covered by Medicare?**

- When the test is medically reasonably and necessary.
- When it is ordered by a treating physician.
- When a treating physician orders the test as a diagnostic service and uses the results to manage the patient's condition.

# **Prevent Genetic Testing Fraud**



Be sure your doctor has assessed you condition.

Although Medicare covers many genetic tests to detect heart disease, it is not a test to predict or screen for cardiovascular disease.



Do not give out your personal **information** to someone calling claiming your cardiologist has requested the testing.



Do not give out your personal information or accept screening services

from someone at a community event.



Always read your Medicare **Summary Notice (MSN) or Explanation of Benefits (EOB).** 

The words "gene analysis," "molecular pathology," or "laboratory" may indicate questionable genetic testing has occurred.



Report suspected Medicare fraud to the Nebraska SHIP!

1-800-234-7119

**PROTECT** Personal Information

**DETECT** Fraud and Scams |

**REPORT** Your Concerns

### **Medicare Educational Events**

Nebraska SHIP hosts a number of Medicare • educational events to help people understand their Medicare benefits.

People with Medicare, their families, and/or friends are welcome to attend or contact Nebraska SHIP to request education for their group or organization. Nebraska SHIP is available through its statewide hotline at 1.800.234.7119 or by visiting www.doi.nebraska.gov/ship.

Welcome to Medicare:

Lincoln—January 11

Webinar—January 20

Navigating Medicare.gov:

Lincoln—January 18

Webinar—January 27

#### Find these words:

**MEDICARE** 

**PREMIUM** 

**DEDUCTIBLE** 

**COLA** 

**HOLD HARMLESS** 

**SOCIAL SECURITY** 

**IRMAA** 

**APPEAL** 

**PENALTIES** 

**ENROLLMENT** 

ADVANTAGE PLAN

CMS

**SHIP** 

**EDUCATION** 

NEBRASKA

Contact Nebraska SHIP with questions about your Medicare benefits.

1-800-234-7119

Local help for Nebraskans with Medicare.