

# Health Care Reform And Medicare— Separating Myth From Fact

(NAPS)—The passage of the health care law in March 2010 generated a tremendous amount of media coverage and sparked a flurry of interest among the general public. Unfortunately, as information about the law and its impact on Medicare spread, myths and confusion did as well.

More than a year after the passage of the law, some of those myths haven't been completely dispelled, and many people remain confused about how health reform will—and won't—affect Medicare. It's important for the 47 million Americans enrolled in Medicare—and the 10,000 baby boomers who are becoming eligible every day this year—to understand the facts.

Here are a few common myths and facts to help Medicare beneficiaries make informed decisions about their health care coverage:

**MYTH:** I can make changes to my Medicare coverage every year between Nov. 15 and Dec. 31.

**FACT:** Medicare beneficiaries should anticipate some changes to the enrollment periods.

This year, the Annual Election Period (AEP) for enrollees will start and end earlier, running from Oct. 15 to Dec. 7. It's important that beneficiaries carefully review their coverage options because once they select a Medicare plan during the AEP, most will be locked into that choice for the coming year.

**MYTH:** The health care law won't impact my prescription drug coverage.

**FACT:** Beneficiaries enrolled in a Medicare prescription drug plan or a Medicare Advantage plan with drug coverage who hit the coverage gap will be able to take advantage of new cost savings. In 2011, when beneficiaries are in the coverage gap, also called the doughnut hole, they'll get a discount of about 50 percent on the cost of most brand-name drugs and



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a 7 percent discount on the cost of generic drugs. These discounts will gradually increase until the coverage gap is closed in 2020.

**MYTH:** The health care reform law will bring an end to the Medicare Advantage program.

**FACT:** Medicare Advantage plans remain strong and have actually shown growth in membership since the passage of the health care law. Enrollment in Medicare Advantage plans increased by 5 percent from 2010 to 2011.

“Medicare Advantage plans are an alternative to Original Medicare that often provide benefits such as coverage of vision and hearing care, sometimes for no additional monthly premium,” said Tom Paul, chief executive officer of United-Healthcare Medicare & Retirement, which is the largest business dedicated to the health and well-being needs of seniors and other Medicare beneficiaries. “Medicare Advantage plans have a track record of providing comprehensive, cost-effective health coverage, helping more than 11.5 million beneficiaries save money and access services not covered by Original Medicare.”

To learn more about the basics of the Medicare program, visit [www.MedicareMadeClear.com](http://www.MedicareMadeClear.com) or [www.Medicare.gov](http://www.Medicare.gov). To better understand the full scope of changes to Medicare this year, visit [www.HealthCare.gov](http://www.HealthCare.gov).