GET THE MOST OUT OF MEDICARE TIPS FOR PEOPLE WITH CYSTIC FIBROSIS

Look for more information about Medicare for people with CF in the Foundation’s Navigating CF series, and see the Glossary of Common Health Insurance Terms [link] for definitions.

What Plan Is Best?
- As a person with cystic fibrosis, you will need one of two options: (1) Original Medicare (Part A hospital and Part B medical) plus a Medicare supplement (Medigap) and either Part D or employer-based prescription drug coverage or (2) a Medicare Advantage (Part C) plan.
- Federal law does not require insurance companies to sell Medigap plans to people younger than 65 and on Social Security Disability Insurance (SSDI) except under certain circumstances, so they may not be an option where you live. Additionally, some plans may consider your health history — known as medical underwriting — or have pre-existing condition clauses that could restrict your coverage or cause the plan to be very expensive.
- Check out all health insurance options that may be available to you, including a family member’s employer group coverage, Marketplace or other private options, Medicaid, and Consolidated Omnibus Budget Reconciliation act of 1985 (COBRA).

What Will You Need?
- Look at the plan’s coverage for your current health needs, as well as services you may need in the coming year: home health care, CF-related diabetes care and supplies, tube feeds, home IV, transplant, hospice, or others.
- Be sure that your doctors, laboratory, care center, and pharmacies are in the plan’s network.
- For Medicare Advantage, make sure all of your medications and providers — including your CF care center, specialists and transplant center — are covered.
- Check the drug plan’s formulary to see if tiers, prior authorizations, quantity limits, or step therapy may make getting your medications difficult.

When Do You Need It?
- Start planning early to avoid coverage gaps and penalties.
- Sign up for Medicare when you first become eligible — your initial enrollment period — to avoid delays and lifetime higher premiums.
- Know the dates and deadlines for open enrollment, the only time each year that you can make changes to your Medicare coverage. Usually, open enrollment occurs October 15 – December 7.
- If you are eligible for Medicare through SSDI and cannot work, remember that you will not get your first SSDI payment for six months after you are deemed disabled by Social Security. In addition, you will receive Medicare coverage 24 months after your first SSDI payment. If you are able, be sure to plan for your financial and coverage needs.

How Much Will It Cost?
- Look at the big picture, not just the monthly expenses that include premiums and out-of-pocket costs. A plan with a higher monthly premium actually may be less expensive when you look at your other out-of-pocket costs.
- With Original Medicare, compare your costs with and without a Medigap plan so you see which has lower total out-of-pocket costs over the course of the year.
- See if you are eligible for foundation, private, or public financial assistance programs. You cannot use manufacturer copay assistance when you have Original Medicare or Medicare Advantage, although you can use foundation or non-profit copay assistance.

Connect with Compass
CF Foundation Compass case managers can help with many questions related to Medicare for people with CF. Call 844-COMPASS (844-266-7277) or email compass@cff.org.