

the **TOP 5** MISTAKES people make when SELECTING a **MEDICARE PLAN**

Finding the best Medicare plan for your needs can seem complicated. To make the wisest choice, be sure to avoid these common pitfalls as you compare plans.

Turning 65 is a rite of passage for all Americans, who become eligible—and are required—to enroll for Medicare coverage leading up to that special birthday. It's also often a very stressful time, as you have to learn an entirely new way of evaluating your health insurance options.

Medicare is a federal government health insurance program, made up of four individual parts:



Part A:
Hospital Coverage (inpatient care)



Part B:
Medical Coverage (doctor visits, imaging, labs, outpatient procedures)



Part C:
Private Coverage (combining Parts A and B, and often Part D)



Part D:
Prescription Drug Coverage

It can be a little bit intimidating to be faced with so many choices of plans and so many different options. You'll want to start by reviewing the information provided to you by the government through the mail about six months before you turn 65. You can find answers to general questions at [Medicare.gov](https://www.medicare.gov).

The Part C plans are also called Medicare Advantage or Medicare Health plans. They are offered through private insurance companies and closely resemble the types of insurance plans you might have had before you turned 65.

CDPHP® offers several Medicare Advantage plans. You can find out which one suits you best by putting your information into [our health plan selection tool](#).

Then, be sure to avoid these five mistakes when you're comparing plans.

Mistake #1: Going with the cheapest plan—and sacrificing quality.

As you contemplate retirement and perhaps the idea of life on a fixed income, you may be tempted to cut costs wherever possible—including on your insurance plan. However, most people need more care as they age, which means having adequate and appropriate health coverage is more important than ever.

You may already have decided that a Medicare Advantage Plan is the right choice for you. These plans are administered by private insurers, like CDPHP. They meet the requirements set by the Centers for Medicare and Medicaid Services (CMS), the federal agency that runs the original Medicare plans.

The difference is that a Medicare Advantage plan may bundle some types of coverage—like normal medical care and prescriptions—into a format that is similar to the individual or group health plans you may have had while you were employed. In contrast, Original Medicare requires you to assemble different “parts” of your own plan to gain coverage for the care you need.

As a result, you need to pay very careful attention to the specific kinds of coverage that a Medicare plan provides. This is truly a situation in which you often get what you pay for.

For example:



Physicals and Preventive Screenings



Drug, Vision and Dental Coverage



Worldwide Coverage for Emergency and Urgent Care

Lower-cost plans may cover only routine care for healthy people. So don't start by comparing plans' bottom-line costs. Instead, evaluate their benefits first. And remember, you may see different plan structures than you remember from other health insurance plans you've had. Looking at the plan benefits will help you weigh the premium cost as well as the structure of costs you'll have to pay when you receive care.

Ask yourself which services you are likely to need in the coming year and check the prices for them on several plans. Especially if you travel or spend part of the year in a different part of the country, think about all of the situations you may face.

Pay attention to deductibles, too—including separate drug deductibles. The deductible is the amount you have to pay in full each year before you start paying lower out-of-pocket costs for care.

Some plans, like CDPHP Medicare Advantage Plans, have no or low deductibles, although the premiums or costs when you receive care may be higher than other options. Other plans have lower premiums and costs when you receive care, but high deductibles (the good news is that some of these plans qualify you for an additional kind of savings, which we'll explain later in this booklet).



**Prescription
Copays**



**Emergency and
Urgent Care**



**Specialist
Visits**



**Cancer
Treatments**



**Out-of-Area
Care**

Also, look over the maximum coverage per claim, per year, and per lifetime—and limitations on certain conditions.

Mistake #2: **Forgetting that you and your spouse may need different plans.**

This is one of the most commonly overlooked features of Medicare plans. That's because health plans offered by your former employer and individual plans you might have purchased through the Affordable Care Act marketplace both offer a discount for additional family members covered on the same plan.

Also, because you choose the different parts of coverage you need in your Medicare Plan, you might find that you need a plan with prescription drug coverage included, while your spouse doesn't. So, you'll pay less overall if you only purchase necessary coverage.

And, if you turn 65 before your spouse does, they will be required to hold onto other insurance, even though you'll be required to sign up for Medicare. You don't become eligible at the same time.



Mistake #3:

Not checking that the plan covers your favorite doctors, important prescriptions, or travel needs.

It's not uncommon to change doctors—or start seeing more specialists—as you get older. If you've found one or more doctors you love, be sure to check that they are covered by any Medicare plans you're considering.

Don't call your doctor's office and ask, "Do you take XYZ insurance?" or "Do you take Medicare?" Many doctors are covered under some of an insurance company's plans, or some types of Medicare plans, but not all of them.

Instead, you can go to a specific insurance company's website and check the doctors covered under the exact plan you're considering.



[CDPHP Find-A-Doc](#) makes it easy to see if your doctor is covered by any of our plans.

Doctors aren't the only important things to check out. Be sure that your prescription drugs are covered by any Medicare plan you consider—especially if you use a brand name drug that doesn't have a generic option. Some Medicare plans do not include prescription drug coverage at all, while others cover only basic drugs, and some cover a comprehensive list of prescriptions.

Also, don't neglect other service providers you might see.



Doctors



Hospitals



Labs



Imaging Centers

Not every health plan covers all of the services that are most convenient to you or that you may trust the most. That's especially true if the health plan is part of a large national organization, which may have contracts with other national service groups and not as many local providers.

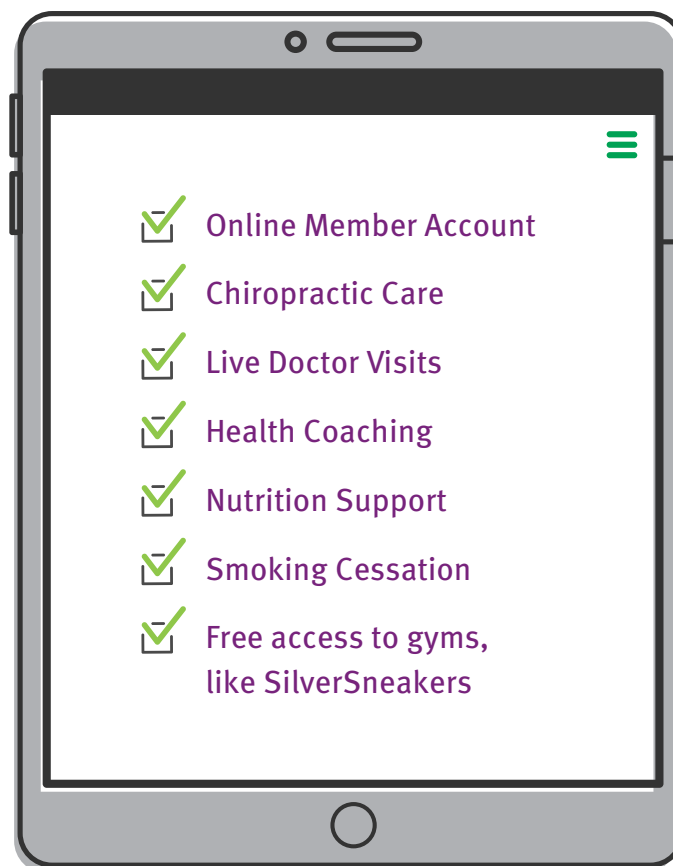
If your retirement plans include travel in the U.S. or abroad, cruises, or splitting your year between homes in different states, don't forget to look into the coverage available under different Medicare plans. Some do not cover travel at all, while others, like those from CDPHP, cover emergency treatment worldwide, so you can enjoy your hard-earned trips.

Mistake #4: Ignoring the extras that help you stay healthy.

Many Medicare Advantage plans provide convenient preventive health perks at little to no cost, in addition to standard coverage.

In addition to helping you stay healthy, some of these provide an opportunity to meet new people and get out of the house—features that are even more valuable if you’ve just left full-time employment for retirement.

CDPHP® plans include all of the extras to the right—and more. Our CDPHP Customer ConnectSM locations even welcome community members to drop by and get questions answered by a knowledgeable member relations specialist.



**Preventive Health
Rewards**



**Weight-Management
Programs**



**Mail-Order Pharmacy
Discount**

Mistake #5: Disregarding the insurer's reputation, especially regarding customer service.

If you find two Medicare plans with similar networks and benefits, but one is priced much lower, take a look at the company's customer service reviews.

There are a few ways to do that:

- Recall whether you had insurance you liked or disliked in the past
- Ask the state department of insurance for the number of complaints against an insurer
- Ask your family and friends about the insurance company's reputation
- Search online for reviews

Customer service is something you hope you never need. When you do, though, it's guaranteed to be urgent and important. Consider how you like to interact. Does one company suit your preferences more than the other?

At CDPHP, we're proud to be able to say:



99%*
Customer satisfaction



88%*
the number of callers who say their
needs were met the 1st time they called



8/15
The portion of CDPHP board members
who are practicing physicians

**Results above are a blend of CDPHP products for 2024 YTD.

Learn How CDPHP Can Help You

CDPHP has a reputation for excellence.



CDPHP Medicare HMO and PPO health plans are among the highest-rated, both in New York State and around the country, by NCQA.*

CDPHP® Medicare Advantage



Out of 5 Stars Overall from Medicare 2025
*Every year, Medicare evaluates plans based on a 5-star rating system.
For more information on star ratings, visit www.medicare.gov.*



Named a Best Insurance Company - Medicare Advantage 2025 in New York by U.S. News & World Report

CDPHP® Medicare Advantage is an HMO and PPO with a Medicare contract. Enrollment in CDPHP Medicare Advantage depends on contract renewal.

* NCQA Health Plan Ratings 2024.

Health insurers who earn the most Stars help their members to:



Stay healthy
(screenings, tests, vaccines)



Manage chronic
conditions



Have a good experience
with the company

Find Your Best Plan

Try our handy selection tool to learn which CDPHP Medicare Advantage plan is best for you—or your spouse.

plans.cdphp.com

Capital District Physicians' Health Plan, Inc. | CDPHP Universal Benefits,® Inc.

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