

THE COMPREHENSIVE GUIDE TO

TURNING 65

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You did it! You are nearing the next chapter in your life and should be proud of this milestone. We are The Bedrock Group. Our entire Medicare division, **Senior Solutions**, is dedicated to helping you achieve health and financial success as you transition to retirement age. This guide is everything you need to succeed in turning 65!

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HOW TO ENROLL IN MEDICARE

How to Enroll

If you are not automatically enrolled in Medicare, there are three ways to apply for Parts A and B:

- Visit the Social Security website at ssa.gov.
- Call Social Security's national customer hotline at
 1-800-772-1213.
- Visit your local Social Security office in person; you can use the locator tool on ssa.gov to find the nearest location.
- Alternatively, you can reach out to us at 833-905-1060 for guidance.

To apply for a Medicare Advantage plan (Part C or D) or a Medigap plan, Senior Solutions, the Medicare Division of The Bedrock Group, collaborates with top-tier insurance carriers. We will help you explore your options to find the best fit for your needs, and our services are always provided at no cost to you. Call 833-905-1060 for more.

How to verify if you are eligible for free Medicare after age sixty-five

You qualify for premium-free Part A at age 65 if you or your spouse worked and paid Medicare taxes for at least ten years, or if you receive Social Security or Railroad Retirement benefits. Premium-free coverage is also available for those with Medicare-covered government employment. However, everyone must pay for Part B coverage, and monthly premiums apply for Part C and D as well. Use Medicare's eligibility and premium calculator to check for free Part A coverage

Does Medicare start the month you turn sixty-five?

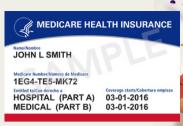
If you enroll in coverage within the first three months of your Initial Enrollment Period, it begins on the first day of the month you turn 65. If your birthday is on the first of the month, coverage starts the previous month. The start dates differ slightly for those who need to purchase Part A coverage.

If you sign up for Part A (If you have to buy it) and/or Part B this Month:	Coverage Starts	
The month you turn	One month after you	
65	sign up	
One-month after you	Two-months after	
turn 65	you sign up	
Two-Months after	Two-months after	
you turn 65	you sign up	
Three-months after	Three-months after	
you turn 65	you sign up	
Open Enrollment Period janı - March 31	July 1st	

Is it required to sign up for Medicare Part A at 65?

No, but your healthcare coverage may lapse if you do not sign up during the Initial Enrollment Period. In addition, if you sign up at a later date, you may have to pay additional penalties for the time that you are signed up.

MEDICARE BREAKDOWN





Medicare has four parts.



Medicare Part A covers medically necessary inpatient hospital stays, care in skilled nursing facilities, hospice care, and some home health care.



Medicare Part D provides standalone prescription drug coverage that works alongside Original Medicare. It is offered through private insurance companies that have contracts with Medicare.



Medicare Part B covers certain doctors' services, durable medical equipment (i.e., wheelchairs), preventative care, outpatient services, lab tests and x-rays, and ambulance services. Part A and Part B are often referred to as Original Medicare



Medicare Part C, also known as Medicare Advantage, is a health plan offered by private insurance companies approved by Medicare to provide Part A and Part B benefits under one plan. Some people get Medicare coverage through a Medicare Advantage plan instead of Original Medicare. Medicare Advantage plans must offer the same level of coverage as Original Medicare and many times will offer expanded benefits such as prescription drug coverage and dental, vision, and wellness programs.



Medicare Part A

You can receive Part A at no cost if you are 65 or older and meet one of these criteria:

- You receive or are eligible for Social Security or Railroad Retirement benefits (requires 40 credits, equal to 10 years of qualifying work).
- Your spouse qualifies for Social Security or Railroad Retirement benefits, including living, deceased, or divorced spouses.
- You or your spouse worked in a government job with Medicare taxes paid.
- You are a dependent parent of a fully insured deceased child.
- If you have fewer than 40 credits, you can still get Part A but must pay a premium.

If you are less than 65 years old, you are eligible for Part A coverage at no cost if:

- You qualify for Part A at no cost if:
- You've received Social Security disability benefits for 24 months.
- You receive disability benefits for ALS (Lou Gehrig's disease).
- You have end-stage renal disease (kidney failure) requiring dialysis or a transplant and meet specific criteria
- You receive a Railroad Retirement Board disability pension under certain conditions.
- You or your spouse worked in a government job paying Medicare taxes, and you meet disability benefit requirements.
- You're a widow(er) or child (age 50+) of someone who worked in a Medicare-taxed government job and qualify for disability benefits.



MEDICARE ELIGIBILITY REQUIREMENTS PARTS B, C & D

Part B:

If you are eligible for Part A coverage at no cost, you can enroll in Part B coverage by paying a monthly premium. Some people with higher incomes will pay a higher Part B premium.

If you're not eligible for Part A at no cost, you can still buy Part B without buying Part A if you're 65 or older and a United States citizen or a lawfully admitted noncitizen who has lived in the country for at least five years.

Medicare Part C

Private companies offer Part C coverage, with benefits similar to those offered by Medicare, which may provide extra coverage and lower out-of-pocket costs. You can enroll in Part C coverage if you have Medicare Part A and Part B coverage. Once you have reached the coverage limits Medicare covers, you will be entitled to enhanced benefits under a Medicare Advantage Plan

Medicare Part D

If you have Part A and Part B coverage, you can buy Part D coverage. Part D coverage benefits are available as a stand-alone plan or may be part of a Medicare Advantage Part C plan. Depending on your income level, this premium may be higher for some people.





MEDICARE VS. MEDICAID

UNDERSTANDING HOW MEDICARE AND MEDICAID DIFFER.

People often confuse Medicare with Medicaid, so clarifying misunderstandings about each program is essential. The main difference between the two is that Medicare is an insurance program, and Medicaid is a State assistance program.

Medicare helps people pay medical bills from funds they have paid over the course of their working life. For the most part, Medicare serves people 65 or older, with some exceptions for younger people who are disabled and dialysis patients. Many times, Premiums are required for certain parts of Medicare. It is a federal program and is uniformly administered across the United States.

Medicaid has no age restrictions and serves people of all ages based on income. Generally, patients are not required to pay any costs for medical services except in a few limited circumstances. Medicaid follows Federal guidelines, but state and local governments administer it.



MEDICARE ENROLLMENT AFTER 65

When can you enroll in medicare after turning 65? If you lack a qualifying disability to enroll in Medicare before 65, you can do so at 65.

If you receive Social Security or railroad retirement benefits, you will be contacted about three months before turning 65. Residents of the 50 states, Washington, D.C., Northern Mariana Islands, American Samoa, Guam, or U.S. Virgin Islands will automatically enroll in Parts A and B. You can opt out of Part B, for which you pay a premium.

If not receiving Social Security or railroad retirement benefits, enroll in Medicare during the Initial Coverage Election Period to avoid penalties and gaps in health care. This period lasts seven months, starting three months before and ending three months after your 65th birthday.

You can sign up for Medicare even if you don't plan to retire at 65.

You can also apply for Medicare before you turn 65 if:

- You're a disabled widow(er) between 50 and 65.
- You work for the government and become disabled before turning 65
- You or an immediate family have permanent kidney failure
- You had Part B coverage in the past but dropped the coverage
- You turned down Medicare Part B coverage when you first got Medicare Part A coverage
- You or your spouse worked for the railroad industry.



If you don't enroll in Medicare Part B during your initial enrollment period, you have another chance annually during a "general enrollment period" from January 1 through March 31. Your coverage begins on July 1 of the year you enroll.

Be aware that you may have to pay a late enrollment penalty for as long as you have Part B coverage. Your monthly premium will go up 10% for each 12-month period you were eligible for Part B but didn't sign up for

If you are in a Medicare Advantage plan and want to switch to Original Medicare, you can do so between January 1 and February 14. If you switch, you will also have until February 14 to join a Part D plan. Your coverage begins the first day of the month after receiving your enrollment form.



MEDICARE ADVERTISEMENTS



Be prepared for an enormous amount of mail and more!

As you near your 65th birthday, expect a surge of Medicare marketing materials, including:

1. Mail Overload

- Brochures and letters from insurance companies about Medicare plans.
- Official Medicare correspondence, like the "Medicare & You" handbook.

2. Phone Calls and Emails

- Contact from telemarketers and agents offering enrollment assistance.
- Please be careful with personal information.

3. TV and Online Ads

- Commercials promoting the benefits of Medicare Advantage plans.
- Targeted online ads for plan comparisons and free guides.

4. Cold Marketing Tactics

• Please watch out for high-pressure sales tactics; you are not obligated to enroll immediately.

Navigating the Advertising Overload

• Consult a licensed Medicare advisor for clarity. You can learn more here: Understanding the Benefits of Working with a Medicare Advisor.

Turning 65 is exciting; staying informed will help you make the best healthcare choices.





MEDICARE IS NOT ONE-SIZE-FITS-ALL.

How to shop around to find the right Medicare plan for you.

If you decide to call any of the 800 numbers, call an insurance provider directly, or shop online, you must be careful. It's important to compare all carriers for the right option and plan for you.

Even if your neighbor, family member, or friend swears by a particular plan or swears off a particular option/plan, that does not mean the same for you. **Medicare options are not one-size-fits-all.**

Plans, options, benefits, doctors, zip code, income, and your current prescriptions can all affect what plans could be good for you. In turn, you would want to work with those capable of comparing all available options.

No Cost Review 833-905-1060

In a recent Consumer Reports article investigating Part D drug plans, the watchdog found that mistakes in the sign-up process could cost beneficiaries hundreds of dollars a year. Their advice based on the input of an industry expert was this: "You can use the Medicare.gov tool to look at and compare plans in your area, but it is always best to work with a licensed advisor to ensure you receive all the benefits to which you are entitled".

Please call 833-905-1060 to set up a complimentary Medicare Benefits
Review. In addition to being licensed to sell insurance in a specific state, our agents must pass an annual American Health Insurance Plans (AHIP) certification exam to sell Medicare plans. Agents must demonstrate specialized Medicare knowledge to pass the exam and follow CMS, Centers for Medicare, and Medicaid Services guidelines. These certifications are all there to protect you.



Medicare Enrollment and Employer Coverage

1. Employer Coverage Rules:

a. If you have health insurance through an employer with 20+ employees, you can delay enrolling in Medicare Part B without penalty, as your employer coverage will remain primary.

2. Smaller Employers:

a. Medicare becomes the primary payer for employers with fewer than 20 employees, and your employer plan may act as secondary coverage. In this case, enrolling in Medicare Parts A and B is essential.

3. Part A Enrollment:

 a. Part A is typically premium-free for most people and can be beneficial for covering hospital costs. However, if you're contributing to a Health Savings Account (HSA), you should delay Part A to avoid tax penalties.

Health Savings Accounts (HSAs):

 Once you enroll in any part of Medicare, you can no longer contribute to an HSA. Plan to stop contributions at least 6 months before enrolling in Medicare to avoid retroactive coverage issues.

Avoiding Late Enrollment Penalties:

- If you delay enrolling in Medicare Part B because of employer coverage, ensure you have creditable coverage and get proof of coverage from your employer.
- When your employer coverage ends, you'll qualify for a Special Enrollment Period (SEP) to sign up for Medicare without penalties.

Medicare and COBRA Coverage:

• COBRA is not considered creditable coverage for Medicare. If you leave your job and switch to COBRA, you must enroll in Medicare to avoid penalties.

Medicare vs. Employer Plan Costs:

 Compare the costs of staying on your employer plan versus enrolling in Medicare. Medicare may be more affordable, especially with Medigap or Medicare Advantage plans.

Retirement Planning:

- Working past 65 allows you to delay collecting Social Security, increasing your benefit by up to 8% annually until age 70.
- Continue contributing to retirement accounts, such as 401(k)s or IRAs, to build a more significant retirement nest egg.

ORIGINAL MEDICARE

The Federal Government manages Original Medicare. Medicare Parts A and B cover 80% of services that Original Medicare covers. In most cases, you must find additional coverage for the remaining 20% and your prescription drug costs. Dental, hearing, and vision coverage is not included.

Medicare Coverage outside of the US

Medicare covers beneficiaries when physically located in the 50 U.S. states, the District of Columbia, and U.S. territories, including Puerto Rico, the U.S. Virgin Islands, Guam, the Northern Mariana Islands, and American Samoa. Rarely, Medicare Part A may cover medically necessary services in a foreign country when a foreign hospital is closer than a U.S. facility.

In some cases, Medicare Part B may cover medically necessary health care while on board a cruise ship within the territorial waters adjoining the U.S. Generally, Medicare won't pay for services you get when a ship is more than six hours away from a U.S. port. Medicare drug plans don't cover prescription drugs you buy outside the U.S.

If you have a <u>Medicare Advantage</u> <u>plan</u>, you should check to see if it covers medical care abroad.

Otherwise, purchasing travel insurance before your trip is recommended, which can help offset overseas costs if emergency care is needed.





MEDIGAP - MEDICARE SUPPLEMENT

Medigap is a supplemental insurance policy sold by private companies that helps pay for some healthcare costs not covered by Original Medicare. Original Medicare covers 80%. Oftentimes, folks enroll in a Medigap plan to cover the 20% left over.

Medigap (Medicare Supplement) plans can include copayments, coinsurance, and deductibles.

One of the most important things to remember about Medigap plans is that they do not include additional benefits like hearing, dental, or vision.

Part D drug coverage is also not included and needs to be purchased separately.

Medigap premiums have an annual increase in premiums.

Unlike Medicare, Medigap policies cover medical care when you travel outside the United States.

To qualify for a Medigap policy, you must already be enrolled in Medicare Part A and Part B.



GET MEDICARE OPTIONS



MEDICARE PART C MEDICARE ADVANTAGE

Medicare Advantage Plans, most commonly referred to as Part C or MA Plans, are provided by private companies approved by Medicare. Over time, MA Plans have become more robust and a good option. However, when you first turn 65, specific factors determine whether this would suit your needs.

A few things to know about Medicare Advantage.

- The Federal Government contracts with private insurance companies to provide you with a plan. The government pays the insurance company a flat fee through the contract. The insurance company then creates agreements with a network of hospitals/providers, keeping your costs low.
- Medicare Advantage does not replace Original Medicare. You still have to pay the Part B Premium. However, some plans pay back some of the Part B Premium, such as Veterans plans. Where you save money is on the no or low cost of MA Premiums.
- Most regular MA Plans have no cost premiums, include Prescription Drug Plans, and provide extra benefits.
- If you are on Medicaid, Medicare
 Advantage would be the right option
 because of the extra benefits you
 receive.

Please <u>click here</u> for a complete list of Medicare Advantage Questions and more information. Or go to our website <u>bedrockfg.com/blog.</u>





MEDIGAP VS. MEDICARE ADVANTAGE



Medicare Advantage Plans

Most have \$0 Premiums. Pay as you go plans or copay plans

All have MOOP - Max Out of Pocket i.e., \$4,800/YR

Most all include Prescription
Drug Coverage

Extra benefits - hearing, dental, visions, OTC, fitness, groceries, utilities, and more

Medigap (Medicare Supplements)

Covers Medicare copays, coinsurance

Annual cost increase

No Prescription Drug Coverage

No extra benefits. Plan will eventually cost more than the MOOP of Medicare Advantage Plans





Thank you for your service! As a Veteran and First Responder-owned agency, we ensure that our Veterans and their families get the right plans and maximum benefits they deserve.

VA, HEALTH BENEFITS, TRICARE, CHAMPVA, MEDICAID, MEDICARE, AND YOU.

If you are eligible for Medicare and Turning 65, there are many misconceptions about Medicare you should know. First, you are not required to enroll in Medicare if you already have coverage through the US Department of Affairs. However, the VA strongly recommends enrolling as soon as you become eligible, and here's why:

- 1. You can expand your coverage with both Medicare and VA benefits
- 2. You could have to pay penalties in the future
- 3. VA health coverage is not one-size-fits-all
- 4. Medicare Advantage Plans provide a dollar amount off of your Social Security

For a deeper dive into the VA + Medicare, please <u>click here</u>. As a veteran, you have options that can save you money for your healthcare and allow you to receive additional benefits.





1. Expert Guidance:

a. <u>The Bedrock Group's</u> Licensed agents are trained in Medicare rules and plan options, making them well-equipped to answer your questions and clarify confusing details.

2. Plan Comparisons:

a. Agents can compare multiple plans from different carriers to help you find one that best fits your healthcare needs, budget, and preferences.

3. Personalized Recommendations:

a. They take the time to understand your unique circumstances, such as preferred doctors, medications, and lifestyle, to recommend tailored plans.

4. Access to Multiple Carriers:

a. Unlike working with a single insurance company, agents often have access to a wide range of Medicare Advantage, Medigap, and Part D plans, giving you more options.

5. Cost Savings:

 a. By analyzing your current healthcare usage, agents can identify plans that save you money on premiums, out-of-pocket costs, and prescription drugs.

6. Enrollment Assistance:

a. They simplify enrollment, ensuring paperwork is completed correctly and on time to avoid delays or penalties.

7. Ongoing Support:

a. A good agent stays available year-round to help with questions, changes to your plan, or support during Medicare's Annual Enrollment Period.

8. No Additional Cost:

a. Their services are free; insurance companies compensate agents, so you get expert advice without extra expense.

9. Compliance and Peace of Mind:

a. Licensed agents adhere to strict Medicare marketing guidelines, ensuring your decisions are based on accurate and unbiased information.

10. Time Savings:

a. Instead of researching and comparing plans yourself, an agent streamlines the process, saving you valuable time and effort.



HOW TO USE YOUR MEDICARE CARD



1 Understand What Your Card Shows:

 Your Medicare card includes your name, Medicare Number, and the start dates for Part A (Hospital Insurance) and/or Part B (Medical Insurance).

2. Present It at Medical Visits:

- Show your card when visiting doctors, hospitals, or other healthcare providers that accept Medicare.
- If you're enrolled in a Medicare Advantage plan, you'll use your plan's card instead of your Medicare card.

3. Use It for Covered Services:

- Your Medicare card gives you access to services covered under Parts A and B, like hospital stays, doctor visits, preventive care, and more.
- For prescription drug coverage, you'll use your Part D plan's card.

4. Keep It Safe but Accessible:

- Protect your card from loss or theft to prevent Medicare fraud.
 Consider storing it in a secure place and only carrying it when necessary.
- If you lose your card, log in to Medicare.gov or call 1-800-MEDICARE to request a replacement.

5. For Secondary Coverage:

 If you have supplemental insurance (Medigap) or employer coverage, present both your Medicare and supplemental plan cards to ensure proper billing.

6. Avoid Sharing Your Card Information:

• Only share your Medicare Number with trusted healthcare providers and insurance agents to protect yourself from fraud.



INCOME + RETIREMENT

WHAT TO DO WITH YOUR RETIREMENT SAVINGS

Retirement is, or finally will be right around the corner and you've built a nest egg. Or you have life insurance policies, and your kids are grown with money and savings of their own. What do you do?

401K ROLLOVER

You have some options with what to do with your 401k. There are better options than cashing out. Your money could be subject to tax, and significant penalties diminish your retirement savings.

Some companies allow you to keep your retirement savings in their plans after you leave, but would you want to? If you have less than \$7,000 in the plan, the money may be automatically returned to you. You cannot add any more to the account, and withdrawal options may be limited, to name a few downsides.

You can roll over the money into an IRA. Here are a few benefits:

- You may have more investment choices than with your employer's plan.
- Your money can continue to grow tax-deferred.
- Rolling assets over can be done by source type to roll over Roth assets independently to a Roth IRA.



INCOME + RETIREMENT

ANNUITIES

Annuities fill the retirement income gap by allowing you to convert savings into a stream of income guaranteed to last for the remainder of your lifetime. More than that, some annuities offer a safe place for your money to grow. This allows you to avoid the downturns that come with stock market investments. Suppose you are worried about making your savings last for the entirety of your retirement, in addition to what Social Security provides. In that case, an annuity may be right for you as a part of your retirement plan.

An annuity is an insurance-based retirement plan that creates a stream of income throughout retirement, like a pension. With an annuity, you have a contract with an insurance company, to which you pay a premium - much like life and health premiums - and, in return, receive regular payments over an agreed-upon timeframe.

The main reason to have an annuity is to protect you from the most significant risk to your retirement - outliving your savings.

To learn more about Annuities, click here.



INCOME + RETIREMENT

PENSION MAXIMIZATION

Pension maximization is a retirement income strategy for couples to **maximize pension benefits.** While this method may be considered high-risk, the reward can be substantial.

When using this strategy, one spouse will opt for the highest annuity payout for their lifetime (single-life annuity) and receive a life insurance policy to give income to the surviving spouse. If one spouse has a pension and is in good health, they would elect the single-life pension payout. This offers the most substantial monthly payments but foregoes survivor benefits to maximize the monthly amount.

Deciding to choose Pension Maximization is quite tricky, but here are some steps to break it down a bit:

- Step 1: The plan participant buys enough life insurance to replace some of the survivor benefits that the spouse would have received under a joint-life annuity.
- Step 2: The plan participant chooses the single-life annuity option upon retirement.
- Step 3: If the plan participant dies first, the insurance company pays a taxfree death benefit to the surviving spouse.
- Step 4: The surviving spouse can use the death benefit to replace the pension income lost when the plan participant dies by purchasing a fixed annuity or investing the proceeds.





THE BEDROCK GROUP.

At The Bedrock Group, we are a trusted Medicare and life insurance agency dedicated to helping individuals and families confidently secure their future. Whether you're navigating the complexities of Medicare, looking for life insurance solutions, or planning for retirement, we provide expert guidance tailored to your unique needs.

With a focus on integrity, transparency, and exceptional service, we strive to be the solid foundation on which you can build a

secure and healthy future.

Let The Bedrock Group be your partner in protecting what matters most.



The Bedrock Group's flagship Medicare division, Senior Solutions, was created in 2018 to help seniors with Medicare and retirement. We quickly realized the need for more services for seniors and their families. That is how we became Bedrock Financial Group, a veteran and first-responder-owned full-service insurance agency.



Our Vision

We hope to become a trusted resource for health and retirement for individuals and their families. Our team has found that people often require a thorough understanding of their options, especially regarding personal health and finances. We believe we can become a reliable source of information for people seeking Medicare and help with retirement



Our Mission

We know the impact that misinformation about Medicare and Retirement can have on individuals and their loved ones. We also know the impact of rising insurance costs associated with home, auto. and business insurance. Simply put, we take care of our clients like we would want our own families to be cared for. We strive to empower our clients and their families by giving them a deeper understanding of their options and how we can become a valuable resource.



We're Local

Since 2018, The Bedrock Group has made significant strides in reaching more people nationwide. With a home office in New Albany, IN, we have a plethora of advisors stationed across 48 states with multiple local offices. Our advisors are always here to assist you and your clients in person whenever you need them.



THE BEDROCK GROUP LEADSERSHIP TEAM



STEWART DAILY CEO/COFOUNDER Specialty: Life Insurance 15+ Years



DAN LODWICK COO/COFOUNDER Specialty: Medicare 15+ Years



IAN MILLER CFO/COFOUNDER Specialty: Annuities 10+ Years



JAMIE BYRD CMO Specialty: Compliance 5+ Years



DUSTIN DISHON REGIONAL VP Specialty: Medicare + Life Insurance 10+ Years



BRITNEY H WAINSCOTT REGIONAL VP Specialty: Medicare + Medicaid 10 + Years



JAMES "LEE" BOYD REGIONAL VP Specialty: Medicare + Life Insurance 20+ Years



MIKE DINDELDEIN FINANCIAL ADVISOR Specialty: Wealth Management 3 + Years

