

CHOOSING A MEDICARE PLAN

FEATURE	TRADITIONAL MEDICARE	MEDICARE “ADVANTAGE”
Coverage	Part A (hospital) and Part B (outpatient) plans allow access to any Medicare-accepting provider nationwide	Corporate health insurers bundle Parts A, B, and often D (prescription drugs) but restrict access to care
Costs	Predictable monthly premiums; supplemental Medigap plans often needed to cover out-of-pocket costs	Lower premiums tend to be offset by unpredictable copayments/coinsurance, and high out-of-pocket caps
Provider Networks	No network restrictions; beneficiaries can see their choice of any provider that accepts Medicare	Limited provider networks with higher costs or outright denials for out-of-network care
Service Denials	Medicare almost always defers to the clinical judgement of providers and the wishes of patients	Frequent delays and denials; insurers often demand “prior authorization” for medically necessary care
Additional Benefits	Requires a separate Part D plan for prescription drugs; limited extra benefits unless covered by Medigap	Advertised extra benefits (dental, vision, hearing) often come with significant caps and limitations
Reliability	Coverage rules are stable and predictable , providing beneficiaries with consistent access to care	Insurers frequently drop providers and change coverage rules, causing disruptions in care
Profit Incentives	Public program focused on providing robust health coverage to seniors and people with disabilities	Corporate health insurers seek to limit the amount they pay out in medical claims in order to maximize profits
Risk to Taxpayers	Maintains low overhead by paying providers directly, without bringing a middleman into the equation	Overcharges taxpayers by up to \$140 billion annually, money that is rapidly draining the Medicare Trust Fund
Simplicity	Requires multiple plans for comprehensive coverage, but provides a seamless experience once enrolled	Hard to navigate; frequent changes to rules, hidden costs, and coverage denials complicate the patient experience



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