BILL'S HOME TECH
Home & Small Business Tech Solutions

BILL'S COMPLETE MANUALS · NO. 8

Medicare Online

Using Medicare.gov with confidence —
explained in plain English, one step at a time

A plain-English guide to Medicare on the web

Take your time — you can't break it, and I'll show you

Written for you by Bill — Bill's Home Tech

(330) 200-8042 · BillsHomeTech.com

For Medicare.gov and the Plan Finder · facts current November 2026

What's Inside

This is your Medicare Online guide. Read it in any order and at your own pace — there is no test, and you can't fall behind. Keep it nearby and reach for whatever you need. Every feature comes with what it actually does *for you*, and slow step-by-step directions anyone can follow. Medicare updates its website from time to time, so if a button sits in a slightly different spot on yours, don't worry — I'll always tell you what to look *for*, and the idea stays the same. One promise up front: whenever a price, a date, or a rule really matters, I'll send you to check it at the official source — **medicare.gov** or **1-800-MEDICARE** — because those are always right, and I'd rather you trust them than trust my memory of a number that changes every year.

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PART 1

Medicare in Plain English

What Medicare is, the four parts (A, B, C, and D) explained without the jargon, the two main roads you can take, and an honest word about where this book fits. Start here.

CHAPTER 1

A Note from Bill

Hello, and welcome. Whoever is holding this book right now — this is for **you**. Maybe you're brand-new to Medicare and the letters A, B, C, and D are swimming in your head. Maybe you've been on Medicare for years and never once logged in to the website. Maybe a son or daughter keeps saying, "Just go to Medicare.gov," and you'd like to know what on earth they mean. Wherever you're starting from, you've come to the right place, and I'm glad you're here.

I'm Bill. Helping folks feel at home with their technology is what I do every day, and I wrote this book the same way I'd sit down next to you at your kitchen table: patiently, in plain English, with no rushing and no fancy words. If I ever use a term you don't know, I'll stop and explain it right then — you won't have to look anything up.

What this book is — and what it isn't

This is a guide to using **Medicare online** — the official website at **medicare.gov**, the account you can set up there, and the tools that let you compare plans, check your coverage, and look at your claims from your own chair. I'll walk you through all of it slowly.

What this book is *not* is insurance advice. I'm not an insurance agent, and I won't tell you which plan to pick — nobody should, except you, with good information in front of you. What I *will* do is show you how to find that good information yourself, on the official site, so you can make your own choice with confidence. When a decision really matters, I'll always point you to the official help line or a free counselor, and we'll talk about both.

> **FROM BILL**
>
> **Honesty first — that's how I do things**
>
> I'd rather tell you "check that at medicare.gov" than make up a number to sound clever. Medicare's prices, deadlines, and rules can change from one year to the next, so throughout this book I keep the numbers general and send you to the official source for the exact ones. That isn't me being vague — it's me making sure you never act on something out of date.

The big promise: you truly can't break it

Here is the most important thing in this whole book, so I'll say it plainly. **You cannot break Medicare's website by clicking around and looking.** Looking at your plan options doesn't enroll you in anything. Reading your claims doesn't change them. Nearly everything is just

looking until you deliberately click a button that says you want to enroll — and I'll always warn you clearly when you're near one of those. Until then, explore to your heart's content.

WHAT THIS DOES FOR YOU

Why learning this is worth your time

When you can use Medicare online yourself, three good things happen: you can compare plans and possibly save real money, you can spot a billing mistake or a scam before it costs you, and you stop having to wait on hold or wait for a relative to have a free afternoon. That's independence — and peace of mind.

And I'm only a phone call away

This book will carry you a long way on your own. But if you ever get truly stuck, you are never stuck alone — that's not how I do things. Call me at **(330) 200-8042** and we'll work it out together, with no judgment and no eye-rolling. There is no such thing as a silly question. The only bad question is the one you talked yourself out of asking.

— Bill

CHAPTER 2

What Medicare Is (and What "Online" Means)

Before we touch a single button, let's answer the simplest question of all: what *is* Medicare, and what does it mean to use it "online"?

Medicare in one breath

Medicare is the health insurance program run by the United States government, mainly for people **65 and older** (and some younger people with certain disabilities). If you qualify, it helps pay for hospital stays, doctor visits, and — through the right plan — your prescriptions. It's run by a federal agency, and the official website is the one place online that truly belongs to Medicare itself.

GOOD TO KNOW

The one web address that matters

Medicare's official website is **medicare.gov**. Notice the ending: **.gov**, which only real government sites can use. Any look-alike address ending in **.com**, **.net**, or **.org** is *not* the official Medicare — it may be a broker, or worse, a scam. When this book says "go to Medicare's website," I always mean medicare.gov, and nothing else.

So what does "using Medicare online" mean?

It simply means using that website to do things you might otherwise do by mail or by phone. On medicare.gov you can:

- **Learn** how Medicare works — the parts, the costs, what's covered — in plain pages anyone can read, with no account needed.
- **Compare plans** side by side with a tool called the **Plan Finder**, including what your own medicines would cost under each one.
- **Set up a personal account** — your own secure corner of the site — where you can see your specific coverage, your claims, and your card.
- **Enroll in or switch** certain plans during the right time of year, right from the site.

You don't need to do all of that, and you certainly don't need to do it all at once. Many folks just use the site to compare drug plans once a year, and that alone can be worth real money. We'll take each piece slowly.

TIP

Your computer, phone, or tablet — any will do

Medicare's website works on a computer, a tablet, or a phone, in whatever internet program (browser) you already use — Safari, Chrome, Edge, and so on. A larger screen is easier for comparing plans, so if you have a computer or tablet handy, I'd reach for that. But it's the very same website on all of them.

CHAPTER 3

The Parts of Medicare: A and B

Medicare comes in **four parts**, labeled with the first four letters of the alphabet. The letters put a lot of people off, but the idea is simple once you see it laid out. We'll take A and B in this chapter, and C and D in the next.

Part A — the hospital part

Part A is **hospital insurance**. Think of it as the part that helps when you're admitted to a hospital — the room, the nursing care, and some related care afterward, such as a stay in a skilled nursing facility or certain home health and hospice care. Most people have paid into Part A through their working years, so for most folks it costs nothing in monthly premiums.

Part B — the doctor part

Part B is **medical insurance**. This is the everyday part: doctor visits, outpatient care, lab tests, preventive checkups, flu shots, and durable equipment like a walker or a wheelchair. Part B does have a **monthly premium** for most people, and the exact amount is set each year.

HEADS UP

I won't quote you the Part B premium — here's why

The Part B premium and deductible change every year, and what you pay can also depend on your income. If I printed a dollar figure here, it would be wrong by next year. So check the current amount at **medicare.gov** or by calling **1-800-MEDICARE** (that's 1-800-633-4227). That's the honest answer, and it's always the right one.

A and B together are "Original Medicare"

When you put Part A and Part B together, you have what everyone calls **Original Medicare**. This is the traditional program, run directly by the government. With Original Medicare you can generally go to any doctor or hospital in the country that accepts Medicare — and most do.

Part	What it covers, in plain terms
Part A	Hospital insurance — inpatient stays, skilled nursing, some home health and hospice. Usually no monthly premium.

Part	What it covers, in plain terms
Part B	Medical insurance — doctors, outpatient care, tests, preventive care, equipment. Has a monthly premium.
A + B together	Called Original Medicare — the traditional, government-run program.

GOOD TO KNOW

What Original Medicare does NOT include

By itself, Original Medicare (A and B) does **not** cover most prescription drugs you pick up at the pharmacy, and it doesn't cover routine dental, vision, or hearing. That's not a mistake in the design — it's why Parts C and D, and something called Medigap, exist. We'll meet them next. Nobody expects you to know this yet; that's what this book is for.

CHAPTER 4

The Parts of Medicare: C and D

Now the other two letters. These are the parts offered through **private insurance companies** that Medicare approves — so instead of dealing only with the government, you'd also have a company's plan. Don't worry, the site helps you compare them fairly.

Part D — the prescription-drug part

Part D is **prescription-drug coverage** — the part that helps pay for the medicines you pick up at the pharmacy. Because Original Medicare doesn't cover most drugs, many people add a stand-alone **Part D plan** to help with that cost. Each Part D plan has its own list of covered drugs (called a **formulary**) and its own prices, which is exactly why comparing them on the website can save you money.

WHAT THIS DOES FOR YOU

This is where the website really earns its keep

The Plan Finder tool (Part 4 of this book) lets you type in the exact medicines you take and see what each drug plan would charge *you* for *your* prescriptions. Two plans with similar monthly costs can be hundreds of dollars apart once your actual drugs are counted. That's the single most useful thing most folks do on Medicare.gov.

Part C — Medicare Advantage

Part C is better known by its real-world name: **Medicare Advantage**. This is an all-in-one **alternative** to Original Medicare, offered by private insurance companies that Medicare approves. A Medicare Advantage plan bundles your Part A and Part B together, and usually your Part D drug coverage too, into a single plan — often with extras like dental, vision, or hearing that Original Medicare doesn't include.

HEADS UP

Medicare Advantage replaces Original Medicare — you don't have both

This trips up a lot of folks, so let me be clear. A Medicare Advantage plan is a *different road*, not an add-on. If you join one, it takes the place of Original Medicare for your day-to-day care. You still have Medicare — you've just chosen to get it *through* a private plan. These plans often use a network of doctors, so it matters whether your doctor is in it. The next chapter lays the two roads side by side.

A quick picture of all four

Part	In a nutshell
Part A	Hospital. Part of Original Medicare.
Part B	Doctors and outpatient. Part of Original Medicare.
Part C	Medicare Advantage — a private, all-in-one alternative that bundles A, B, and usually D.
Part D	Prescription drugs — added to Original Medicare, or built into most Advantage plans.

TIP

You don't have to memorize this

Nobody keeps all four letters straight at first, and you don't have to. Fold this page down. When you're ready to compare plans, the website walks you through it by asking plain questions — you won't be quizzed on the alphabet. The letters are just labels for "hospital," "doctor," "all-in-one," and "drugs."

CHAPTER 5

Medigap: The Supplement That Fills the Gaps

There's one more piece worth knowing about, because folks hear the word and wonder where it fits. It's called **Medigap**.

What Medigap is

With Original Medicare (Parts A and B), you still pay a share of many costs yourself — deductibles and the slice of each bill Medicare doesn't cover. **Medigap**, also called **Medicare Supplement Insurance**, is a separate policy from a private company that helps pay *those* leftover costs. People buy it for peace of mind — so a hospital stay doesn't come with a surprise bill.

GOOD TO KNOW

Medigap works only with Original Medicare

Here's the key rule: a Medigap policy helps *only* if you have Original Medicare. You cannot use Medigap alongside a Medicare Advantage plan — they're two different roads, and you pick one or the other. Also, Medigap does **not** include drug coverage, so folks on this road usually add a separate Part D drug plan too.

The standardized letter plans

Medigap policies come in standardized versions, each named by a letter (Plan G, Plan N, and so on). The letters here are *different* from the Parts A/B/C/D — a little confusing, I know. The helpful part is that because they're standardized, a "Plan G" from one company covers the same things as a "Plan G" from another; the main difference is the price and the company. Which letters are available to you can depend on when you became eligible for Medicare, so that's another "check the current rules" item.

HEADS UP

This book won't recommend a Medigap plan

Choosing a Medigap policy is a real insurance decision with real trade-offs, and I'm not an insurance agent. Medicare.gov has a tool to find and compare the Medigap policies sold in your area, and a free SHIP counselor (we'll meet them in Part 8) can talk it through with you at no cost. Please lean on those, not on a pushy salesperson — and never on me guessing.

CHAPTER 6

The Two Roads: Original Medicare vs. Medicare Advantage

Nearly every Medicare decision comes down to one fork in the road. Once you can see the two roads clearly, the whole thing gets simpler. There's no "right" road for everyone — the right one is the one that fits *your* doctors, *your* medicines, and *your* budget.

Road 1 — Original Medicare (often with Medigap and a drug plan)

- You have Parts **A and B** directly from the government.
- You can generally use **any doctor or hospital** in the country that accepts Medicare — no network to worry about.
- Many folks add a **Medigap** policy to cover the leftover costs, and a stand-alone **Part D** plan for prescriptions.
- More pieces to assemble, but lots of freedom in where you get care.

Road 2 — Medicare Advantage (Part C)

- One **all-in-one plan** from a private company, bundling A, B, and usually D together.
- Often includes **extras** — dental, vision, hearing, sometimes a gym benefit.
- Usually uses a **network** of doctors and hospitals, so your own doctor being "in network" matters a great deal. May need referrals.
- Simpler to hold (one card, one plan), but less freedom to roam outside the network.

Question	Original Medicare vs. Medicare Advantage
Choice of doctors	Original: almost any that take Medicare. Advantage: usually a network.
Extra benefits	Original: generally none built in. Advantage: often dental, vision, hearing.
Drug coverage	Original: add a separate Part D plan. Advantage: usually built in.
Number of pieces	Original: a few (A, B, maybe Medigap, maybe Part D). Advantage: usually one plan.
Who to compare with	Both roads can be compared on medicare.gov's Plan Finder.

TIP

Three questions that cut through it

When you compare plans, ask yourself: (1) Are my **doctors** covered? (2) Are my **medicines** covered, and what do they cost? (3) What are the total costs over a year, not just the monthly premium? The Plan Finder answers all three if you give it your doctors, your pharmacies, and your drug list. We'll do exactly that in Part 4.

FROM BILL

There's no wrong question when money and health are involved

This fork in the road matters, and it's perfectly normal to feel unsure. If you'd like a patient person to sit with you while you weigh it — reading the screen together, not selling you anything — that's exactly the kind of call I'm glad to take at (330) 200-8042. And a free SHIP counselor can do the same. You don't have to decide alone.

CHAPTER 7

A Gentle, Honest Word Before We Begin

Before we roll up our sleeves, let me say a few true things plainly. I'd rather set your expectations honestly now than have you feel let down later.

I'm your tech helper, not your insurance agent

My job in this book is to make the **website** and the **account** easy — the buttons, the steps, the staying-safe part. I am **not** an insurance agent, and I won't tell you which plan to buy. That choice is yours, and it should be made with the official information in front of you and, if you like, a free expert at your side.

Who the free experts are

- **1-800-MEDICARE** (1-800-633-4227) — Medicare's own help line, open to everyone, for questions about your coverage, plans, and claims.
- **SHIP** — the State Health Insurance Assistance Program — offers **free**, unbiased Medicare counseling in every state. They don't sell anything. (More in Part 8.)
- A trusted **family member** who can sit beside you, or a call to me if the *computer* part is the stumbling block.

HEADS UP

Be careful who you take plan advice from

Lots of people *want* to give you Medicare advice — because many of them earn a commission when you sign up for a particular plan. That doesn't make them bad, but it does mean their advice isn't neutral. The official help line and SHIP counselors don't earn a commission, which is why I keep steering you to them. Free, unbiased, and on your side.

When numbers appear in this book

You'll notice I almost never print a dollar amount or an exact rule. That's on purpose. Medicare's premiums, deductibles, drug prices, and even some rules are reset **every year**. A number I printed would be out of date before long — and acting on an out-of-date number is worse than having no number at all. So when it matters, I send you to **medicare.gov** or **1-800-MEDICARE**, where the figure is always today's.

WHAT THIS DOES FOR YOU

This approach keeps you safe for years

Because this book teaches you *how to find* the current facts rather than memorizing this year's, it won't go stale on you. The buttons may shift a little and the prices will change, but the way you check them stays the same. Learn the method once, and you're set for every year to come.

That's the lay of the land. Now let's get you online — starting with your own secure account.

PART 2

Getting Online: Your Medicare Account

Why an online account is worth having, exactly what you need before you start, the new sign-in system, and how to create and protect your own secure corner of Medicare.gov.

CHAPTER 8

Why Have an Online Account at All?

You can learn a great deal on Medicare.gov without ever logging in — the lessons and even the Plan Finder are open to anyone. So why bother setting up an account? Because an account is your own *personal* corner, tied to your specific coverage, and it unlocks things the public pages can't show.

What a Medicare account lets you do

- See **your own coverage** — exactly which parts and plans you have.
- View your **claims** — a running list of what Medicare was billed for and what it paid, often sooner than the paper notices arrive.
- See and **print your Medicare card** if yours is lost or you need a copy in a hurry.
- Keep a **list of your drugs and pharmacies** saved, so comparing plans each year takes minutes instead of starting from scratch.
- Manage certain plan choices and keep your **contact details** up to date.

WHAT THIS DOES FOR YOU

The two biggest real-world payoffs

Most folks tell me the account earns its keep in two ways: catching a **billing mistake or a scam** early by glancing at their claims, and **comparing drug plans** fast each fall because their medicine list is already saved. Either one alone can be worth real money and real peace of mind.

GOOD TO KNOW

An account is optional — truly

If setting up an account feels like a bridge too far today, that's perfectly fine. You can skip this whole part, use the open pages and the Plan Finder as a guest, and come back to this when you're ready. Nothing in the rest of the book absolutely requires an account. I'll point out where having one simply makes life easier.

CHAPTER 9

What You Need Before You Start

A little setup beforehand makes the whole thing smooth. Gather these on the table in front of you before you begin, and you won't have to stop halfway to go hunting.

Your checklist

Have this ready	Why
Your Medicare card	The red, white, and blue card with your Medicare Number on it. You'll need that number.
An email address	Your own — one you can open to receive confirmation codes. Not a relative's.
Your phone nearby	The sign-in system often sends a short code by text or call to confirm it's you.
A few quiet minutes	No rush. The first setup takes the longest; after that, logging in is quick.

HEADS UP

You need a Medicare Number first

Here's an important order-of-events: you can only create a Medicare *online account* after you already have Medicare and a **Medicare Number** on your card. If you haven't enrolled in Medicare yet, that comes first — and that step is handled through Social Security, which we'll touch on in a later chapter. If your card hasn't arrived, you can't make the account yet, and that's normal, not a mistake on your end.

About that Medicare Number

Your **Medicare Number** is the string of numbers and letters printed on your card. It is personal and valuable — treat it like a credit-card number. You'll type it in once to connect your account, and after that you shouldn't need to read it aloud to anyone who calls you. We have a whole part on protecting it (Part 7), because scammers want it badly.

TIP

Can't find your card or your number?

If you can't lay hands on your card, don't guess. You can sign in to your **Social Security** account at **ssa.gov** to look up your Medicare Number, or call **1-800-MEDICARE** (1-800-633-4227) and they'll help. We also cover replacing a lost card in Part 6. One way or another, we'll get you that number safely.

CHAPTER 10

The New Front Door: Verified Sign-In

Here's a change worth understanding before you start, because it surprises people who set up an account years ago. Medicare no longer uses its own separate username and password for your account. Instead, it uses a trusted **identity-verification service** to let you in — the same kind of secure sign-in used across many government websites.

What "verified sign-in" means

Rather than Medicare keeping its own password for you, you sign in through one of a few approved services whose whole job is to confirm you really are you. You pick *one* of them, create an account with that service once, and from then on it's your key into Medicare.gov. These services are **free** to use.

The approved services

Service	What it is
Login.gov	The U.S. government's own secure sign-in service, used across many federal websites.
ID.me	A private identity-verification service also used by many government and other sites.
CLEAR	An identity service some folks already have from airports or events.

You only need **one** of these. If you already use one for another government website — say you set up Login.gov for taxes or the IRS — you can use that very same one for Medicare. If you have none yet, Login.gov is a sensible, government-run choice, but any of the three works.

GOOD TO KNOW

Why the extra step actually helps you

I know one more sign-in service sounds like a hoop to jump through. But this system exists to keep crooks *out* of your account — it's much harder for someone to impersonate you when your identity has been properly verified. Think of it as a sturdier front door. A little more effort once, and your account is safer every day after.

HEADS UP

If you had an old Medicare username and password

Folks who made a Medicare account long ago may remember an old username and password (the site used to be called MyMedicare.gov — it now simply redirects to medicare.gov). Once you connect your account to Login.gov, ID.me, or CLEAR, that old username and password no longer work — the new verified sign-in takes over. That's expected. Just use your chosen service from then on.

CHAPTER 11

Creating Your Account, Step by Step

Let's do it together, slowly. Don't worry about getting every tap perfect — you can back up at any point, and nothing here commits you to anything. We're only setting up a way to log in.

Step by step

1. Open your internet program (Safari, Chrome, Edge) and type **medicare.gov** into the address bar yourself. Press Enter. (Type it by hand — don't follow a link from an email.)
2. Look in the **top-right corner** of the page for a link that says **Log in** or **Create account**, and click it.
3. You'll be offered the sign-in services — **Login.gov**, **ID.me**, or **CLEAR**. Choose one. If you don't have any yet, pick one and follow its "create an account" steps.
4. Create your account with that service: you'll give an **email address** and set a **password** for it, and confirm your email by typing in a code they send you.
5. The service will **verify your identity** — it may ask for some personal details to confirm you're really you. Answer honestly; this is the security working as intended.
6. Back on Medicare, enter your **Medicare Number** (from your card) when asked, so Medicare can connect your coverage to your new sign-in.
7. That's it — you're in your own Medicare account. Have a look around; remember, looking changes nothing.

TIP

If it asks for a code from your phone

At some point the service will likely send a **short code** to your phone by text or a call, and ask you to type it in. This is normal and good — it's the "second lock" we'll talk about next. Just read the code off your phone and type it into the website. Never read such a code to a *person* on the phone, though — only type it into the site yourself.

FROM BILL

Stuck partway through? That's a fine time to call

Identity verification can occasionally hiccup — a detail doesn't match, a code doesn't arrive, a page times out. That's frustrating but fixable, and it's exactly the sort of thing I help with all the time. Call me at (330) 200-8042 and we'll get you through it calmly, or you can call 1-800-MEDICARE for help with the Medicare side. You don't have to wrestle it alone.

CHAPTER 12

Logging In and Out Safely

Once your account exists, getting back in is quick. Let's cover the everyday in-and-out, plus the one safety habit that matters most.

Logging in

1. Go to **medicare.gov** (type it yourself).
2. Click **Log in** in the top-right corner.
3. Choose the sign-in service you set up (Login.gov, ID.me, or CLEAR) and enter its email and password.
4. Enter the **code** it sends to your phone, if asked. You're in.

Logging out

On your **own private** computer or phone at home, it's generally fine to simply close the page when you're done. But if you're ever on a **shared or public** computer — a library, a relative's machine — always **log out** properly first. Look for your name or a **Log out** link, usually in the top-right corner, and click it before you walk away.

STAY SAFE

Never log in from a link someone sent you

This is the single most important safety habit in this whole book, so I'll say it plainly. **Always open Medicare yourself** by typing medicare.gov. If an email, a text, or a phone caller says "log in here to fix your account" or "verify your details at this link," **don't**. Real Medicare never needs you to log in through a link in a message. That link is the number-one trick for stealing accounts. Type the address yourself, every time.

GOOD TO KNOW

Being logged out is not a problem

If you come back later and find you've been logged out, don't fret — that's the site keeping you safe, especially after a while of not using it. Just log in again the normal way. Being asked to sign in again is a sign the security is working, not a sign anything is wrong.

CHAPTER 13

A Strong Password and a Second Lock

Your sign-in service (Login.gov, ID.me, or CLEAR) is protected by a password and, I hope, a second lock. A few minutes here buys you years of peace of mind.

What makes a password strong

- **Long** beats complicated. A phrase of a few words is both strong and memorable — something like **MapleCreek-Garden8** is far better than a short jumble.
- **Unique** to this service — don't reuse the same password you use for email or the bank. If one place is breached, the others stay safe.
- **Not guessable** — skip your name, birth year, pet, or "password123."

The second lock (two-factor)

Two-factor authentication — don't let the name scare you — simply means a **second lock** on top of your password. After your password, the service also asks for a short code sent to your phone. So even if a crook learned your password, they still couldn't get in without your phone in their hand. These sign-in services usually set this up for you, and it's the strongest single thing protecting your account.

STAY SAFE

That code is yours alone — never read it to anyone

The very code that protects you is the one scammers try to trick out of you. No real company or government office will *ever* phone you and ask you to read back a code they just sent. The code is for *you* to type into the website yourself, never to speak aloud to a caller. If someone on the phone wants your code, hang up — it's a scam, every single time.

TIP

Write your sign-in details down — on paper, at home

Forget the old advice about never writing passwords down. For most folks at home, a small notebook kept in a private drawer is far safer than a weak password you can actually remember. Note down *which* service you used (Login.gov, ID.me, or CLEAR), the email, and the password. Just don't carry it in your wallet or stick it on the computer. Paper in a drawer at home is fine.

CHAPTER 14

Two Different Accounts: Medicare vs. Social Security

This one confuses nearly everybody, so let's clear it up gently. There are **two separate government accounts** in your Medicare life, and they do different jobs. Knowing which is which saves a lot of head-scratching.

The two accounts

Account	What it's for
Your Medicare account (medicare.gov)	For seeing your coverage, your claims, your card, and comparing plans. This is the one this book is mostly about.
Your Social Security account (ssa.gov)	For signing up for Medicare in the first place, handling Part B enrollment, and your premiums. It does not show your Medicare claims.

In short: **Social Security** is where you *get* Medicare and handle the money side; **Medicare.gov** is where you *use* and manage the coverage once you have it. They're run by different offices, so they're different accounts with different sign-ins.

GOOD TO KNOW

Why your card number lives in both places

Because Social Security handles enrollment, your Medicare Number can be looked up through your ssa.gov account — which is handy if you've misplaced your card and need the number to set up Medicare.gov. The two accounts don't merge into one, but they do connect at the edges like this. If a step sends you from one to the other, that's normal.

TIP

You don't need both today

If this is all starting to feel like a lot of accounts, take a breath. To use the things in this book, the **Medicare.gov** account is the one that matters. The Social Security account comes up mainly around first enrollment and premiums. Set up what you need, when you need it — there's no prize for having every account at once.

PART 3

Finding Your Way Around Medicare.gov

A calm tour of the website — the main areas, your account home, the search box and help, and how to make every page easier on your eyes. Once you know the lay of the land, nothing feels busy anymore.

CHAPTER 15

The Lay of the Land

When Medicare.gov first opens, there's a fair bit on the screen, and that can feel busy. Let's slow right down and name the few things that matter. Once you know these, the rest falls into place — and you'll stop feeling like you might click the wrong thing.

The top of every page

Across the **top** of medicare.gov sits a row that stays with you no matter where you wander. From left to right you'll generally find the Medicare name (click it to come home), a set of **menu headings** for the main areas, a **search** box, and — over on the right — the **Log in** link (or your name, once you're signed in).

The main areas, in plain terms

Area	What you'll find there
Basics / Get started	Plain lessons on how Medicare works — the parts, costs, and what's covered. No account needed.
Health & drug coverage	Learning about the different kinds of coverage and what each includes.
Find plans / Plan Finder	The big tool for comparing drug plans and Medicare Advantage plans. Part 4 of this book.
Providers & services	Looking up doctors, hospitals, and whether a service is covered.
Your account / Log in	Your personal corner — coverage, claims, and card. Top-right of the page.

TIP

The Medicare name always takes you home

If you ever click something and feel lost, look to the **top-left** and click the **Medicare** name or logo. It carries you straight back to the main page — safe, familiar ground — so you can start over. Just like the front porch of a house, it's always there to return to.

WHAT THIS DOES FOR YOU

A handful of spots and you can run the whole site

You don't need to memorize every heading. If you know **home** (the Medicare name), **search** (the magnifying glass), **Find plans** (the Plan Finder), and **Log in** (top-right), you can reach anything on the site. Everything else you'll pick up naturally as you go.

CHAPTER 16

Your Account Home: The Dashboard

Once you log in (Part 2), you land on your own **account home** — sometimes called a dashboard. It's your personal summary page, and it's laid out to put the useful things within easy reach. Let's walk through what's there.

What you'll typically see

- A greeting with **your name** — a quick reassurance that you're in the right place and it's really your account.
- A summary of **your coverage** — which parts and plans you currently have.
- A link to your **claims** — the running list of what's been billed and paid.
- A way to **see or print your card**.
- Links to **compare plans**, update your details, and manage drug and pharmacy lists.

GOOD TO KNOW

Your dashboard shows YOUR coverage, not everyone's

The public pages of Medicare.gov talk about Medicare in general. Your dashboard is different — it reflects *your* actual coverage and *your* claims. That's why it's behind the secure sign-in: it's personal to you. If something there looks wrong, that's worth a closer look (and possibly a call to 1-800-MEDICARE), because it's your real information.

TIP

Explore your dashboard freely — it's all just looking

Click every tile and link on your dashboard to see what each one does. You can't enroll in anything, change anything, or cause any harm just by looking. The only buttons that commit you to something say so clearly — things like "Enroll" — and we'll cover those carefully in Part 5. Until then, poke around with confidence.

CHAPTER 17

Seeing Your Coverage at a Glance

One of the first things worth doing in your account is simply confirming what coverage you have. A lot of worry melts away once you can see it in black and white.

Finding your coverage details

1. Log in and look on your dashboard for a section called **Coverage**, **My coverage**, or similar.
2. Click it. You'll see which parts you have — **Part A**, **Part B** — and the **effective dates** (when each started).
3. If you have a **drug plan (Part D)** or a **Medicare Advantage** plan, you'll see its name and details here too.

What the dates and labels mean

The **effective date** is simply the day a piece of your coverage began. If you see Part A and Part B both listed with dates, you have Original Medicare. If you see a plan name from a private company, that's your Advantage or drug plan. None of this you can break by reading — it's a statement of what already is.

HEADS UP

If your coverage looks wrong, don't panic — verify it

Now and then someone logs in and the coverage shown isn't what they expected — a part missing, a plan they don't recognize. Before worrying, give it a day (new changes take time to appear), then if it still looks off, call **1-800-MEDICARE** (1-800-633-4227) to confirm. Don't try to "fix" it by clicking enroll buttons; let the help line sort out what's real first.

WHAT THIS DOES FOR YOU

Knowing exactly what you have is powerful

When you can see your own coverage clearly, two good things follow: you can answer a doctor's office confidently when they ask what you have, and you can tell in an instant whether a caller claiming to be "from Medicare" actually knows your real situation — or is fishing. Clarity is its own kind of protection.

CHAPTER 18

The Search Box and Getting Help on the Site

You don't have to hunt through menus to find things. Medicare.gov has a **search box** and a built-in help system that together answer most everyday questions. Let's put them to work.

Using the search box

Near the top of the page you'll see a **magnifying-glass** symbol or a box that says **Search**. Click it, type what you're after in plain words — "replace my card," "what does Part B cover," "find a doctor" — and press Enter. Medicare shows you the pages that match. It's often the fastest way to reach exactly what you need.

Finding answers and definitions

Medicare.gov has plain-English pages explaining nearly every term and task, and often a glossary that defines the words. If a word on the site puzzles you, type it into the search box — chances are there's a short page that explains it kindly.

TIP

Search in your own words

You don't need to use official language. Type the way you'd ask a friend — "how much is a wheelchair covered" or "my card is lost" — and the search usually understands. There's no wrong way to ask, and searching never changes anything. It only shows you pages.

When the website isn't enough — the live help line

If the site can't answer your question, there's always a real person. **1-800-MEDICARE** (1-800-633-4227) is Medicare's own help line, open to everyone, for questions about coverage, plans, claims, and your card. It's free to call. Keep that number handy — I'll repeat it often, because it's the official lifeline.

GOOD TO KNOW

The official number, worth memorizing

1-800-MEDICARE spells out to **1-800-633-4227** on the phone keypad. Either way of dialing reaches the same place. Write it on the card by your phone. When in doubt about anything to do with your Medicare, this is the number that's always right — not a number a stranger gives you in a call or an email.

CHAPTER 19

Making the Website Easier to See and Read

If the writing on Medicare.gov feels small, or the screen is hard on your eyes, you have more control than you might think — and nothing here is permanent, so try things freely and change them back if you like.

Make everything bigger with your browser

The simplest trick works on *every* website, Medicare included. In your internet program you can **zoom in** to make the whole page larger:

- On a **computer**: hold the **Ctrl** key (or **Command** on a Mac) and press the **plus (+)** key to enlarge, the **minus (–)** key to shrink. Press Ctrl and **0** to return to normal.
- On a **phone or tablet**: spread two fingers apart on the screen to zoom in, pinch them together to zoom back out.

Bigger text everywhere

You can also make text larger across your whole device in your *device's own* settings — look for **Display** or **Accessibility** and then **Text Size**, and drag the slider until the words are comfortable. (My iPhone, Android, and computer manuals walk through this in detail if you'd like one.)

WHAT THIS DOES FOR YOU

Set it up for your eyes, not someone else's

There's no prize for squinting. A minute spent zooming in means comparing plans and reading your claims is a pleasure instead of a strain — and when you can read every line clearly, you're far less likely to miss a detail or a mistake. Make the screen yours.

CHAPTER 20

On a Phone, Tablet, or Computer

Medicare.gov works on all your gadgets, and it's the same account and the same information on each. Some folks prefer one over another, so here's how they compare — use whatever's comfortable.

Device	When it shines
On a computer	The biggest screen and a keyboard. Best for comparing plans and reading claims carefully. My recommendation for Plan Finder work.
On a tablet	A nice middle ground — bigger than a phone, easy to hold in your chair.
On a phone	Always in your pocket. Handy for a quick look at coverage or to show a doctor's office your card.

Is there a Medicare app?

You don't need any special app to use Medicare online — the website does everything, and it adjusts itself to fit whatever screen you're on. Just open your usual internet program and go to **medicare.gov**. If you ever hear about a "Medicare app," be cautious and confirm it's genuinely from Medicare before installing anything; the website is always the safe front door.

HEADS UP

Be wary of look-alike "Medicare" apps

Because so many people search for Medicare, scammers sometimes post fake "Medicare" apps to catch the unwary. The honest truth is you don't need an app at all — the website covers everything in this book. If you're ever unsure whether an app is real, don't install it; just use medicare.gov in your browser, or call 1-800-MEDICARE to ask.

TIP

Use whichever suits the moment

There's no need to choose one device forever. Many folks check their coverage on the phone during the day and sit down at the computer in the evening for a proper look when comparing plans. It's the very same Medicare account either way — pick whatever's comfortable right now.

PART 4

Comparing Plans with the Plan Finder

The most useful tool on the whole site. How to start a search, enter your medicines and pharmacies, read the results honestly, and compare drug plans and Medicare Advantage plans side by side — so you choose with eyes open.

CHAPTER 21

Meet the Plan Finder

If you learn to do just one thing on Medicare.gov, make it this. The **Plan Finder** is Medicare's official tool for comparing the plans available where you live — side by side, honestly, with no salesperson leaning over your shoulder. It can genuinely save you money, and it's open to everyone.

What the Plan Finder compares

- **Part D drug plans** — stand-alone prescription plans you add to Original Medicare.
- **Medicare Advantage plans (Part C)** — the all-in-one private plans, including the drug coverage built into them.
- It shows you costs, covered drugs, pharmacies, star ratings, and (for Advantage plans) whether your doctors are in the network.

WHAT THIS DOES FOR YOU

Why this tool is worth an afternoon

Plans that look similar on the surface can differ by hundreds of dollars a year once your own medicines and pharmacy are counted in. The Plan Finder does that math *for you*, using *your* drug list. That's the difference between guessing and knowing — and knowing is what keeps money in your pocket.

GOOD TO KNOW

Comparing is not enrolling

Let me put your mind at ease before we start. Using the Plan Finder to look and compare does **not** sign you up for anything. You can run it as many times as you like, change your answers, and close it — nothing happens to your coverage. Enrolling is a separate, deliberate step we cover in Part 5, and the site makes it very clear when you're doing that.

Finding the Plan Finder

From the main page of **medicare.gov**, look for **Find plans**, **Compare plans**, or **Find health & drug plans** near the top. Click it, and you're in. You can use it logged in (so it remembers your drugs) or as a guest.

CHAPTER 22

Starting a Search

The Plan Finder begins by asking a few simple questions to narrow things to your area and your situation. Take them one at a time.

Logged in or as a guest?

Two ways to start	What to expect
Logged in	The tool already knows where you live and can save your drug list for next time. Easiest if you have an account.
As a guest	No account needed. You'll type in your ZIP code and drugs each time. Perfectly fine for a one-time look.

The opening questions

1. Enter your **ZIP code** so the tool shows only plans sold where you live.
2. Tell it what kind of plan you want to compare: **drug plans (Part D)**, or **Medicare Advantage** plans. You can explore both.
3. It may ask whether you get **Extra Help** (a program that lowers drug costs for people with limited income). Answer honestly — it affects the prices it shows.
4. Click to continue. Next it will ask about your medicines — the most important part, coming up in the next chapter.

TIP

There are no wrong answers you can't change

Every question in the Plan Finder can be gone back to and changed. If you pick the wrong plan type or mistype your ZIP, just back up and fix it. The tool is built for trying things. You're exploring, not signing anything, so answer as best you can and adjust as you go.

GOOD TO KNOW

What "Extra Help" means

Extra Help (also called the Low-Income Subsidy) is a federal program that lowers what some people pay for their Part D drug coverage. If you're not sure whether you qualify, that's a perfect question for 1-800-MEDICARE or a free SHIP counselor. It can make a real difference, so it's worth asking about.

CHAPTER 23

Entering Your Medicines

This is the step that makes the Plan Finder so powerful — and the one worth doing carefully. When you tell it exactly which drugs you take, it can show you what *each plan* would actually cost *you*, not a generic estimate.

Adding your drugs

1. When prompted, type the **name of each medicine** you take. Start typing and the tool offers matches — pick yours from the list.
2. For each one, confirm the **dosage** (the strength, like "10 mg") and **how often** you take it. Your pill bottle label has these.
3. Repeat for every prescription. Take your time — accuracy here is what makes the cost estimates trustworthy.
4. When you've added them all, continue to the pharmacy step.

TIP

Have your pill bottles in front of you

Before you start this step, gather your prescription bottles on the table. The label on each has the exact name, the strength, and how often you take it — everything the tool asks for. Working from the bottles means you won't have to guess or remember, and the cost estimates come out accurate.

WHAT THIS DOES FOR YOU

Save your list and next year takes minutes

If you're logged in to your account, the Plan Finder can **save your drug list**. That means next fall, when it's time to compare again, your medicines are already entered — you just update any changes and see the new year's plans. A chore becomes a five-minute check.

HEADS UP

A missing drug can hide a big cost

If you leave out a medicine — especially an expensive one — the plan costs the tool shows you will look lower than reality. So be thorough. It's better to spend a few extra minutes entering every prescription than to pick a plan that turns out not to cover one you rely on.

CHAPTER 24

Choosing Your Pharmacies

Where you fill your prescriptions matters more than most folks expect. The very same plan can charge different amounts at different pharmacies, so the Plan Finder asks which ones you use.

Adding pharmacies

1. When prompted, search for the **pharmacies you use** — by name or near your ZIP code — and select them.
2. You can add more than one, so include your usual drugstore and perhaps a backup.
3. If you're open to **mail-order** (medicines sent to your home), you can include that option too — it's sometimes cheaper for regular prescriptions.

Why the pharmacy changes the price

Many plans have **preferred pharmacies** where your costs are lower, and others where they're higher. It's not always the big chain that's cheapest — sometimes the small local one is, or mail-order. The Plan Finder shows you the difference plainly, so you can see whether switching where you fill a prescription would save money.

GOOD TO KNOW

"Preferred" just means cheaper under that plan

When you see a pharmacy marked **preferred**, it simply means that plan has a deal to charge you less there. It doesn't mean the pharmacy is better or worse — only cheaper under that particular plan. A pharmacy preferred by one plan may not be by another, which is exactly why comparing is worthwhile.

TIP

Try it both ways

If you're curious whether mail-order or a different drugstore would save you money, add a couple of options and let the tool show you. You're only looking — you don't have to change anything in real life unless you decide the savings are worth it. Let the numbers inform you, then choose at your leisure.

CHAPTER 25

Reading the Results Honestly

Now the tool shows you a list of plans with their costs. This is where a little care pays off, because the **monthly premium** is only one piece of the puzzle — and often not the most important one.

The costs you'll see

What it says	What it means for you
Monthly premium	What you pay each month just to have the plan — whether or not you use it.
Deductible	What you pay out of pocket first, before the plan starts sharing costs.
Estimated yearly drug cost	The tool's estimate of what YOUR drugs would cost you over a year under this plan — the number that matters most.
Copays / coinsurance	Your share of each prescription or visit after the deductible.

HEADS UP

Don't judge a plan by its premium alone

The number one mistake folks make is picking the plan with the lowest **monthly premium**. A plan with a low premium can cost you far more over the year if your drugs are pricey under it. Look instead at the **estimated yearly cost** for *your* medicines — premium, deductible, and drug costs added together. That total is the honest number.

GOOD TO KNOW

These are estimates, not promises

The yearly costs the Plan Finder shows are careful *estimates* based on the drugs and pharmacies you entered. Your real costs can vary if your prescriptions change during the year. That's not a flaw — it's an honest estimate doing its best. Use it to compare plans fairly, and confirm specifics with the plan or 1-800-MEDICARE before you rely on an exact figure.

WHAT THIS DOES FOR YOU

The total-cost view is the whole point

When you line plans up by their *total* estimated yearly cost for your situation, the best value usually jumps right out — and it's often not the one with the flashiest premium. That single insight is why this tool exists, and why spending an afternoon with it can be worth real money year after year.

CHAPTER 26

Star Ratings and What They Mean

Alongside the costs, you'll often see each plan given a rating in **stars**, up to five. These are Medicare's own quality ratings, and they're a helpful second thing to weigh besides price.

How the stars work

- **Five stars** is excellent; fewer stars means Medicare's measures found more room for improvement.
- The ratings look at things like customer service, how members rate the plan, and how well it handles care and complaints.
- They're updated each year, so a plan's rating can change.

TIP

Weigh stars AND cost together

Stars aren't the whole story, but they're a useful tie-breaker. If two plans cost about the same for your drugs, the one with more stars is usually the safer bet for good service. If the cheaper plan has notably fewer stars, that's worth a second thought — sometimes a few dollars buys a lot less aggravation.

GOOD TO KNOW

What the stars don't tell you

A star rating can't tell you whether *your* doctor is in the plan's network or whether *your* specific drug is covered well — those you check for yourself in the plan's details. Think of stars as a general report card, not a personal fit. Use them to narrow the field, then check the details that matter to you.

CHAPTER 27

Comparing Drug Plans Side by Side

The Plan Finder lets you pick a few plans and lay them out **side by side**, so you can weigh them without flipping back and forth. This is the comfortable way to make a decision.

Doing a side-by-side compare

1. From the results list, **tick the box** (or tap **Compare**) on two or three plans that interest you.
2. Click **Compare**. The plans appear in columns next to each other.
3. Read across each row — premium, deductible, your estimated yearly cost, and how each of *your* drugs is covered.
4. Pay special attention to any drug marked **not covered** or needing special approval under a plan; that can be a deal-breaker.

Questions to ask as you compare

- Is **every one of my drugs** covered under this plan?
- What's the **total estimated cost** for the year, all in?
- Are there restrictions — like needing the plan's permission before it covers a drug?
- Is my **pharmacy** a preferred one under this plan?

WHAT THIS DOES FOR YOU

Side by side turns a muddle into a choice

Trying to hold three plans in your head at once is how mistakes happen. Laying them in columns and reading across is how clarity happens. When the numbers and the coverage sit next to each other, the right choice for you usually becomes plain — and you can decide calmly, on your own terms.

CHAPTER 28

Comparing Medicare Advantage Plans

Comparing Medicare Advantage (Part C) plans works much the same way, with one big extra thing to check: because these plans use **networks**, whether your own doctors are included matters enormously.

What to check on an Advantage plan

Check this	Why it matters
Your doctors	Are your doctors and hospital in this plan's network? The Plan Finder now includes a provider lookup to help you check.
Your drugs	Advantage plans usually include drug coverage — check your medicines just as you would for a Part D plan.
Extra benefits	Dental, vision, hearing, and the like vary plan to plan. See exactly what each includes.
Total costs	Premium, deductibles, copays, and the yearly out-of-pocket limit — look at the whole picture.

Checking whether your doctor is in network

The Plan Finder now lets you look up **providers** for Medicare Advantage plans — so you can see whether your doctor is listed as in-network. Because this information can occasionally be out of date, it's wise to also **call your doctor's office** and ask, "Do you take this exact plan?" before you rely on it. Two checks, and you can relax.

HEADS UP

Confirm your doctor directly before switching

Provider lists on any website can lag behind reality — a doctor leaves a network, the page hasn't caught up. If keeping your current doctor matters to you (and for most folks it does), don't trust the screen alone. Call the doctor's office and confirm they take the specific plan you're considering. It's a two-minute call that prevents a year of headaches.

FROM BILL

Comparing plans is a fine thing to do together

If you'd like a patient person beside you while you run the Plan Finder — reading the screen together, double-checking your drug list, making sure you didn't miss a setting — that's exactly the kind of visit I enjoy. I won't tell you which plan to pick (that's your call, and a SHIP counselor's specialty), but I'll make sure the *tool* is working for you. Call (330) 200-8042.

PART 5

Enrollment: The Calendar and How to Join or Switch

The dates that matter, what you can do in each window, and the careful steps to enroll or switch a plan online — with clear warnings before any button that actually commits you.

CHAPTER 29

The Medicare Calendar at a Glance

Medicare has a handful of **enrollment periods** — windows of time when you're allowed to join or change certain plans. Outside those windows, the door is usually closed, so knowing the dates is half the battle. Here they are, all in one place.

The windows that matter most

Window	When and who it's for
Initial Enrollment	Your first chance, around when you turn 65. A seven-month window centered on your birthday month.
Fall Open Enrollment	October 15 to December 7 every year. The big annual window for most people to change plans. Changes start January 1.
Medicare Advantage Open Enrollment	January 1 to March 31 every year. For folks already in an Advantage plan to switch or drop it.
Special Enrollment Periods	Extra windows for certain life events — moving, losing other coverage, and more.

GOOD TO KNOW

These two dates are worth circling

October 15 to December 7 is the fall window nearly everyone uses — mark it on your calendar every year. **January 1 to March 31** is the extra window just for people already in a Medicare Advantage plan. Those two spans are durable — they come around the same time each year — so you can plan on them.

HEADS UP

Exact rules can change — confirm the current year

The broad windows above have held steady, but the finer rules — what exactly you can do in each, and any special one-year exceptions — can shift. Before you act, confirm the current details at **medicare.gov** or with **1-800-MEDICARE**. I'm giving you the shape of the calendar; they'll give you this year's fine print.

CHAPTER 30

Your First Time: Initial Enrollment

If you're new to Medicare, your first enrollment is a little different from the yearly windows, and it's tied to your 65th birthday. Let's walk through the shape of it.

The seven-month window

Most people get a **seven-month** stretch to sign up for the first time: the three months before the month you turn 65, the month itself, and the three months after. Signing up in the earlier part generally means your coverage starts sooner, so there's a gentle reason not to wait until the last minute.

Where first enrollment happens

This first sign-up for Parts A and B is handled through **Social Security** (at ssa.gov, or by phone, or at a local office) — remember from Part 2 that Social Security is where you *get* Medicare. Once you have it, you use medicare.gov to manage it and to add a drug plan or choose Advantage.

HEADS UP

Late sign-up can cost extra, sometimes for life

Here's an honest heads-up: if you don't sign up when you're first supposed to (and don't have other qualifying coverage), you can face a **late penalty** that's added to your premium — sometimes for as long as you have Medicare. The rules have exceptions, so don't panic, but *do* check your own timing early with 1-800-MEDICARE or a SHIP counselor. This is one where getting the timing right really matters.

FROM BILL

First-time Medicare is a great reason to get free help

Your first trip through Medicare has the most moving parts and the highest stakes. This is exactly when a free SHIP counselor earns their keep — they'll walk your personal situation through with you, at no cost and with nothing to sell. If the *website or computer* part is the hurdle, that's where I come in, at (330) 200-8042. Between us, you're covered.

CHAPTER 31

Fall Open Enrollment (Oct 15 – Dec 7)

This is the big one — the annual window nearly everyone should at least *look* at, even if you end up changing nothing. From **October 15 to December 7** each year, you can review and change your coverage, and whatever you pick takes effect the following **January 1**.

What you can do in this window

- Switch from **Original Medicare to a Medicare Advantage** plan, or the other way around.
- **Join, drop, or switch** a Part D drug plan.
- Change from one **Medicare Advantage** plan to a different one.

Why look every year, even if you're happy

Plans change their prices and their drug lists every year — and so do your medicines. A plan that was perfect this year might cover one of your drugs differently next year. A quick run through the Plan Finder (Part 4) each fall, with your current drug list, is the best habit in all of Medicare. If everything still fits, do nothing and your coverage simply continues.

TIP

Set a yearly reminder for mid-October

Put a note on your calendar for **October 15** every year: "Check my Medicare drug plan." Pour a cup of coffee, open the Plan Finder with your saved drug list, and see whether your plan is still the best value for next year. Fifteen minutes once a year can save real money — and if it all still fits, you've lost nothing but a coffee's worth of time.

HEADS UP

December 7 is a firm door

Whatever you decide, the plan must receive your choice by **December 7**. Don't leave it to the final day — websites get busy, and a hiccup on the 7th leaves no time to recover. Aim to finish a week early, and you'll never be caught out. If you miss the window, you generally wait until next year, so it's worth respecting the date.

CHAPTER 32

Medicare Advantage Open Enrollment (Jan 1 – Mar 31)

There's a second, smaller window early in the year, and it's just for people who are *already* in a Medicare Advantage plan. If that's you, from **January 1 to March 31** you get one more chance to adjust.

What this window is for

- If you're in a **Medicare Advantage** plan, you can switch to a **different** Advantage plan.
- Or you can **leave** Advantage and return to **Original Medicare** (and add a drug plan).
- It's a safety net — a chance to correct a choice that isn't working out once you've lived with it a little.

GOOD TO KNOW

This window is NOT for everyone

If you have Original Medicare (not an Advantage plan), this January–March window generally isn't yours to use for switching — it's specifically for folks already in Advantage. Don't worry if it doesn't apply to you; your main window is the fall one. When in doubt about which windows you can use, 1-800-MEDICARE will tell you in a minute.

TIP

Use it if your new plan isn't fitting

If you switched into a Medicare Advantage plan in the fall and by January find the network doesn't include your doctor, or something else isn't working, this is your chance to fix it rather than being stuck all year. That's exactly what this window is for — a second look once reality has set in.

CHAPTER 33

Special Enrollment Periods

Life doesn't always line up with the calendar, so Medicare has **Special Enrollment Periods** — extra windows that open when certain things happen in your life. If one applies to you, you may be able to change plans outside the usual dates.

Common events that can open a special window

- You **move** to a new area where different plans are offered.
- You **lose other coverage** — for example, when you retire and leave an employer's plan.
- You qualify for **Extra Help** or other assistance programs.
- Your plan **leaves Medicare** or stops serving your area.

HEADS UP

The rules here are detailed — always confirm

Special Enrollment Periods come with specific conditions and time limits that vary by situation, and they change from time to time. This is firmly a "check the current rules" topic. If you think a life event might open a window for you, call **1-800-MEDICARE** or a SHIP counselor and ask — don't assume one way or the other. They'll tell you exactly what applies to your case.

WHAT THIS DOES FOR YOU

A safety net worth knowing exists

Even if none of these apply today, it's a comfort to know that major life changes don't have to leave you stuck with the wrong coverage until the next fall. If something big shifts — a move, a retirement — remember these windows exist, and make the call to find out what you can do. Being locked in is rarely the whole story.

CHAPTER 34

How to Enroll or Switch Online

When you've compared plans and made your choice, you can often enroll right from Medicare.gov. This is the one place in the book where you *are* committing to something, so I'll flag each real step clearly. Go slowly; there's no rush.

The general steps

1. In the **Plan Finder**, open the plan you've chosen and look for an **Enroll** button. This is the deliberate step — clicking it starts a real enrollment.
2. Confirm your **personal details** and your **Medicare Number** when asked.
3. Read the plan's summary carefully — the costs and what's covered — one more time.
4. Answer the plan's questions and submit. You'll usually get a **confirmation number** — write it down or print the page.
5. Watch for a **confirmation** by mail or email, and for your new plan card to arrive before the coverage start date.

HEADS UP

"Enroll" is the one button that truly commits you

Everywhere else in this book you can click freely, but **Enroll** is different — it starts a real change to your coverage. That's fine when it's what you want; just be sure you've compared carefully first (Part 4) and that this is the plan you mean. If you're the least bit unsure, stop and call 1-800-MEDICARE or a SHIP counselor *before* you click. There's no harm in sleeping on it.

TIP

Save your confirmation like a receipt

When you enroll, you'll get a **confirmation number**. Treat it like a store receipt: write it down, or print the confirmation page, and tuck it somewhere safe. If any question ever comes up about whether your enrollment went through, that number is your proof. A small habit that saves a big headache.

CHAPTER 35

After You Enroll: What to Expect

You clicked Enroll and submitted — now what? Here's the normal sequence, so nothing surprises you and you know when to speak up if something seems amiss.

The usual timeline

- You get a **confirmation** fairly quickly (on screen, then by mail or email).
- In the following weeks, the **plan sends you a welcome packet** and a new **member card**.
- Your new coverage **starts on the effective date** — for a fall-window change, that's January 1.
- Your old plan, if you switched, usually ends automatically when the new one begins — you generally don't have to cancel it yourself.

GOOD TO KNOW

Don't throw away your old card too soon

Keep your old plan card until the new coverage has clearly started and you've used the new card successfully at least once. There's no harm in holding onto it a few extra weeks. If anything about the switch seems not to have taken, the old card and your confirmation number together help sort it out quickly.

HEADS UP

If your new card doesn't arrive, don't just wait

If the effective date is near and no card has come, don't assume it'll work itself out. Call the **plan** directly (the number is on your welcome packet or the plan's page) or **1-800-MEDICARE** and confirm your enrollment went through. It almost always did — but a quick call turns worry into certainty, and catches the rare hiccup before it affects your care.

WHAT THIS DOES FOR YOU

You did a grown-up, money-saving thing

Comparing plans and enrolling online is genuinely one of the most capable things a person can do with Medicare — many folks never manage it and simply overpay year after year. If you got through this, give yourself real credit. You took charge of your own coverage, and that's worth being proud of.

PART 6

Your Coverage Day to Day

The everyday business of being on Medicare: your card and how to replace it, reading your claims online, understanding your Medicare Summary Notice, keeping an eye on preventive care, and paying your premiums.

CHAPTER 36

Your Red, White, and Blue Card

Your Medicare card is a small, important thing. Let's make sure you understand what it is, what the number on it means, and how to see a copy online whenever you need one.

What the card is

The official Medicare card is **red, white, and blue**, with your name and your **Medicare Number** on it. You show it (or give the number) when you get care under Original Medicare, so providers know how to bill. If you're on a Medicare Advantage or drug plan, you'll also have a **separate card** from that private plan — keep both.

Seeing and printing your card online

1. Log in to your account at **medicare.gov**.
2. Look for **Get my Medicare card**, **Print my card**, or a card icon on your dashboard.
3. You may be asked to confirm it's you (enter your password again). That's a good sign — it's protecting your number.
4. View the card on screen, and **print** it if you need a paper copy in a hurry.

GOOD TO KNOW

A printed copy is not a replacement card

Printing your card from the website gives you a handy paper copy to tide you over, but it's not the same as the official plastic/paper card mailed to you. For everyday use the printed copy is usually fine, but if you've truly lost your card, go ahead and order a real replacement too — that's the next chapter.

STAY SAFE

Guard that number like a credit card

Your Medicare Number is valuable to crooks because they can use it to bill Medicare for fake services in your name. Treat it exactly like a credit-card number: don't read it aloud in public, don't give it to anyone who calls *you*, and only share it with your own trusted doctors and pharmacy. Part 7 goes deep on protecting it.

CHAPTER 37

Replacing a Lost or Damaged Card

Cards get lost, run through the wash, or chewed by a grandchild's puppy. It happens, and replacing one is straightforward and free. Let's cover the honest ways to do it.

Ways to get a replacement

How	Details
Online — Medicare.gov	Log in and look for the option to order or print your card. Often the quickest.
Online — Social Security	Because Social Security handles your enrollment, you can also request a replacement Medicare card through ssa.gov.
By phone	Call 1-800-MEDICARE (1-800-633-4227) and they'll arrange a new card by mail.

While you wait for the new one

A mailed replacement takes a little while to arrive. In the meantime, you can **print a copy** from your Medicare.gov account (previous chapter) to use for appointments. Your doctors can also look up your coverage with your name and other details, so a lost card rarely means you can't get care.

SCAM ALERT

Nobody calls you to "replace" your card for a fee

This is one of the most common scams, so hear it clearly: a replacement Medicare card is **free**, and you order it yourself — Medicare does *not* phone you offering a new card and asking for a fee, your bank details, or your number to "activate" it. If a caller does any of that, it's a scam. Hang up and, if you actually need a card, order it yourself online or at 1-800-MEDICARE. Part 7 covers this in full.

CHAPTER 38

Understanding Your Claims Online

A **claim** is simply a bill a doctor or hospital sends to Medicare for care you received. When you log in to your account, you can see a running list of these — often sooner than the paper notices arrive. It's one of the most useful things to glance at now and then.

Finding your claims

1. Log in at **medicare.gov**.
2. Look for **Claims** or **My claims** on your dashboard and click it.
3. You'll see a list by date: who provided the care, what it was for, what Medicare was billed, and what Medicare paid.
4. Click any single claim to see more detail.

What to look for

- **Dates and providers you recognize** — care you actually received.
- **What Medicare paid** and what, if anything, is left for you or your other coverage.
- Anything that looks **unfamiliar** — a service you didn't have, a provider you never saw.

WHAT THIS DOES FOR YOU

A glance at your claims is quiet protection

Checking your claims every month or two is like glancing at your bank statement — most of the time all is well, and the quick look is its own reassurance. But if a fake charge ever slips in (someone using your number), you'll catch it here, early, when it's easy to deal with. Five minutes of looking is worth a great deal of safety.

HEADS UP

See something you don't recognize? Don't ignore it

If a claim shows a service or provider you don't recognize, it could be an honest billing mix-up — or it could be fraud using your Medicare Number. Either way, don't shrug it off. First check with the provider or your doctor's office; if it still doesn't add up, report it (Part 7 shows how) and call **1-800-MEDICARE**. Catching these early protects you and the whole program.

CHAPTER 39

The Medicare Summary Notice (MSN)

If you have Original Medicare, you'll receive a document called the **Medicare Summary Notice**, or **MSN**. It's not a bill — it's a summary of the claims processed for you over a stretch of time. You can get it in the mail, and you can also see this information in your online account.

What the MSN tells you

- The **services and supplies** that were billed to Medicare for you.
- What Medicare **approved and paid**.
- The **amount you may owe** the provider, if any.
- Whether a claim was **approved or denied**.

GOOD TO KNOW

"This is not a bill" — really

The MSN says right on it, "This is not a bill," and it means it. It's a summary so you can check that everything billed in your name is correct. Don't pay anything based on the MSN itself — pay actual bills from your providers. The MSN's job is to let you *verify*, not to collect.

Seeing it online instead of (or besides) by mail

In your Medicare account you can review your claims any time without waiting for the paper notice, and you can often choose to go **paperless** — getting an email when a new notice is ready instead of a letter. Whichever you prefer, the information is the same; online is simply faster and easier to search.

TIP

Match your MSN against your own memory

When your MSN arrives (or when you read your claims online), run your eye down the list and ask for each line, "Do I remember that visit or service?" The things you remember are almost certainly fine. It's the line you *don't* recognize that's worth a second look. A couple of minutes, and you've guarded your number for another quarter.

CHAPTER 40

Statements for Advantage and Drug Plans

If you're on a Medicare Advantage or a Part D drug plan rather than Original Medicare, you get a similar kind of summary — usually called an **Explanation of Benefits**, or **EOB** — from your private plan instead of the MSN.

What the EOB is

An **Explanation of Benefits** is your plan's summary of what it was billed, what it paid, and what you owe, over a period of time. Like the MSN, it is **not a bill** — it's a record for you to check. You'll typically find it both in the mail from your plan and in your account on the *plan's* own website.

GOOD TO KNOW

Two different websites for two different jobs

Keep this straight and life gets simpler: **medicare.gov** is Medicare's own site, best for your overall coverage, claims under Original Medicare, and comparing plans. Your **private plan** (the Advantage or drug company) has its *own* website and app for the details of that plan — its EOB, its drug list, its network. You may use both, and that's normal.

HEADS UP

Check your EOB with the same care as an MSN

Whether it's called an MSN or an EOB, the habit is the same: read down the list and look for anything you don't recognize. Fraud can show up on a private plan's statement just as it can on Medicare's. If a prescription or service looks wrong, call your plan (number on the statement) and, if it smells like fraud, report it — Part 7 shows how.

CHAPTER 41

Keeping Track of Preventive Care

Medicare covers a range of **preventive services** — checkups, screenings, and shots meant to catch problems early or prevent them altogether. Many are covered at no cost to you, and the website can help you keep track of what you're due for.

Examples of preventive care

- A yearly **wellness visit** to review your health and plan ahead.
- Screenings for things like certain cancers, diabetes, and heart conditions.
- **Flu and other recommended shots.**

Finding what's covered and what you're due

Search Medicare.gov for **preventive services** to see the full list and how often each is covered. Your account may also show a record of preventive services you've used, which helps you and your doctor see what's coming due. As always, the exact list and schedule are kept current on the official site — check there rather than relying on memory.

WHAT THIS DOES FOR YOU

Free checkups are a benefit worth using

Preventive care is one of the kindest things Medicare offers — many of these visits and screenings cost you nothing, and they're designed to keep small problems from becoming big ones. It's genuinely money and worry saved down the road. If you're not sure what you're entitled to, ask your doctor or check the site; don't leave a free benefit on the table.

CHAPTER 42

Paying Your Premiums

Some parts of Medicare come with a monthly **premium** — the regular payment to keep the coverage. How you pay depends on which coverage it is, and there are a few tidy options.

How premiums usually get paid

What	How it's typically handled
Part B premium	Often deducted automatically from your Social Security payment, if you get one. Otherwise billed to you.
Paying a Medicare bill	If you're billed directly, you can pay online, by mail, or by automatic bank withdrawal. Your account shows the options.
Plan premiums (Advantage / Part D)	Paid to the private plan, by the methods that plan offers — often automatic bank or card payment.

HEADS UP

I won't quote premium amounts — check the current year

As with everywhere in this book, I won't print premium dollar figures, because they're reset every year and can depend on your income. Your exact premium is shown in your account and confirmed by **1-800-MEDICARE**. If a premium changes and you're unsure why, that's a fine reason to call and ask — there's often a simple explanation.

SCAM ALERT

Medicare doesn't demand payment by gift card or wire

Hear this clearly, because it's a classic scam: real Medicare premiums are paid through normal, boring methods — a deduction, a mailed bill, a bank withdrawal. Medicare will **never** phone you demanding immediate payment by **gift card**, wire transfer, or a payment app, and never threatens to cancel your coverage "today" unless you pay right now. That urgency and those payment methods are the tell. Hang up and verify at 1-800-MEDICARE. Part 7 has the full rundown.

TIP

Automatic payment prevents a nasty surprise

If keeping track of a monthly bill feels like one worry too many, setting premiums to pay **automatically** from your bank account means you'll never accidentally miss one and risk your coverage. Set it up once, and it quietly takes care of itself. Your account or your plan can help you turn it on.

PART 7

Staying Safe: Medicare Scams

The most important part of this book. Why scammers target Medicare, how to protect your number, the big scams to know by heart — the fake "new card," the pushy phone call, the too-good offer — and exactly how to report fraud and get help.

CHAPTER 43

Why Scammers Target Medicare

I'll be honest with you, because that's how I do things. Medicare is a favorite target for scammers, and it's worth understanding why — not to frighten you, but because a little know-how makes you nearly scam-proof. You can use Medicare confidently *and* be safe. The two go together.

What the crooks are after

- Your **Medicare Number** — with it, they can bill Medicare for fake services in your name and pocket the money.
- Your **bank or card details** — to take money directly.
- Your **personal information** — name, birth date, Social Security number — to steal your identity more broadly.

Why older folks get targeted

Scammers go where kind, trusting, polite people are — and they prey on the worry that comes with health and money. None of that is a weakness on your part; it's exactly the decency they abuse. The good news is that their tricks are **repetitive**. Once you know the handful of patterns in this part, you'll spot them coming a mile off.

WHAT THIS DOES FOR YOU

A little knowledge makes you a hard target

Scammers want the easy mark — the person who doesn't know the rules. The moment you know that Medicare never calls demanding your number or payment by gift card, their whole script falls apart. You don't have to be suspicious of everyone; you just have to know a few bright-line rules. This part gives you those rules.

FROM BILL

When in doubt, there's no shame in checking with me

If you ever get a call, a letter, or an email that feels off and you'd like a second opinion before you do anything — that is never a bother, and it's one of my favorite kinds of call. Ring me at (330) 200-8042. A two-minute "does this seem right to you?" has saved folks real money and real heartache. Asking is the smart move, not the silly one.

CHAPTER 44

Protecting Your Medicare Number

Your Medicare Number is the single most important thing to guard. Protect it the way you'd protect a credit-card number, and you've closed the door on most Medicare fraud before it starts.

The simple rules

- **Only share it with people you sought out** — your own doctors, your pharmacy, your trusted plan. Never with someone who contacts *you*.
- **Never give it to a caller, emailer, or texter** who asks for it, no matter who they claim to be.
- **Don't carry the card needlessly.** Keep it safe at home unless you have an appointment where you'll need it.
- **Don't read it aloud** in public places where others can overhear.

STAY SAFE

Real Medicare already HAS your number

Here's the clearest test in the whole book. The *real* Medicare already knows your Medicare Number — they issued it. So they would never call you up and ask you to "confirm" or "verify" it. Anyone who phones, emails, or texts asking you to give or confirm your Medicare Number is, by that fact alone, not Medicare. Full stop. Don't give it.

If your number may already be exposed

If you fear you've given your number to the wrong person — it happens to careful people too — don't be embarrassed; act. Start watching your claims closely (Part 6), call **1-800-MEDICARE** to report it, and consider reaching out to the Senior Medicare Patrol (coming up in this part). The sooner you flag it, the less harm it can do.

GOOD TO KNOW

Why a stolen number is worth catching early

Unlike a credit card, you can't simply cancel a Medicare Number on a whim. That's exactly why *watching your claims* matters so much — it's your early-warning system. Catching a fraudulent charge in its first week is a quick phone call; catching it a year later is a mess. The habit of a monthly glance is your best defense.

CHAPTER 45

The "New Card" Scam

This is the big one — the scam I most want you to know by heart, because it comes around again and again, especially whenever there's any news about Medicare cards. It plays on a reasonable worry, which is what makes it work.

How the scam goes

Someone contacts you — by phone, email, or text — claiming you need a **new Medicare card**: a "plastic" card, a "chip" card, an "updated" card. To send it, they say, they just need to **confirm your Medicare Number**, or your Social Security number, or a small **"processing fee."** It all sounds official and helpful. It is neither.

The truth about Medicare cards

- Medicare cards are **free** — there is never a fee to get one.
- When Medicare does issue or replace a card, it arrives **by mail**, with a letter — not through a phone call asking for your details.
- Medicare does **not** phone you out of the blue to "activate" or "verify" a new card.
- You order a replacement *yourself*, online or at 1-800-MEDICARE — it's never something a caller arranges for you.

SCAM ALERT

If a "new card" call asks for anything, it's a scam

Burn this into memory: any unexpected call, text, or email about a **new or updated Medicare card** that asks you to confirm your number, pay a fee, or give bank details is a **scam** — every time, no exceptions. Hang up or delete it. If you genuinely wonder whether you need a new card, don't use any number *they* gave you: go to medicare.gov yourself, or call 1-800-MEDICARE (1-800-633-4227). The real answer is always on the other end of *that* number.

TIP

Verify a real card change the safe way

Now and then there is legitimate news about Medicare cards, and that's precisely when the scammers crawl out. To check the truth safely, **log in to your own account** at medicare.gov and look at your card there, or call 1-800-MEDICARE. Never judge whether a card notice is real by how official the *caller* sounds — judge it by checking the official source yourself.

CHAPTER 46

Phone Call and Phishing Scams

Most Medicare scams come by phone, and increasingly by email and text too (that last pair is called **phishing** — fishing for your information with fake messages). The tricks share a family resemblance once you know what to watch for.

The warning signs — a scam's fingerprints

- **They called you** out of the blue, claiming to be from Medicare, Social Security, or your plan.
- They create **urgency** — "act now," "your coverage will be canceled today."
- They ask for your **Medicare Number, Social Security number, or bank details**.
- They want payment by **gift card, wire transfer, or a payment app**.
- A **link in an email or text** wanting you to "log in" or "verify" — don't click it.

STAY SAFE

The caller ID can lie — don't trust it

Scammers can make your phone display "Medicare" or a real-looking government number; it's called **spoofing**, and it's easy for them to do. So a trustworthy-looking name or number on your screen proves *nothing*. Judge a call by what it asks for, never by what the caller ID says. If it asks for your number or money, it's a scam no matter whose name shows.

What to do with a suspicious call or message

1. **Don't give any information.** It's perfectly polite to say nothing and hang up.
2. **Hang up** (or delete the email/text). You owe a scammer no courtesy.
3. If you're worried it *might* be real, call back on the **official number you look up yourself** — 1-800-MEDICARE, or the number on your own card — never a number they gave you.
4. Tell someone — a family member, or me — especially if you're second-guessing yourself.

TIP

"Let me call you back" ends almost every scam

You never have to act on the spot. A simple "I don't give information over the phone — I'll call Medicare myself" and a hang-up defeats nearly every phone scam, because the whole trick relies on rushing you. A real office won't mind you calling back on the official number. A scammer will push hard against it — and that push is your confirmation.

CHAPTER 47

Too-Good-to-Be-True Offers and Free Gifts

Not every scam sounds scary; many sound *wonderful*. Free gifts, free equipment, extra benefits — all offered if you'll just hand over your Medicare Number. The warm, generous tone is the disguise.

Common bait

- A **"free"** back brace, knee brace, or other equipment "covered by Medicare" — just confirm your number.
- **Free genetic testing** or health screenings offered at a fair, a health event, or by phone.
- An offer of **extra benefits or money** if you switch plans right now over the phone.
- A "**refund**" Medicare supposedly owes you, needing your bank details to send it.

SCAM ALERT

If they need your number to give you a gift, it's a trap

Here's the pattern under all of these: something nice is dangled, but to get it you must hand over your **Medicare Number** or bank details to someone who contacted *you*. That's the trap. A genuine benefit you're owed goes through your own doctor or your plan — never through a stranger at your door, your phone, or a booth who needs your number first. When in doubt, decline and check with 1-800-MEDICARE.

HEADS UP

Pressure to "switch right now" is a red flag

Be especially wary of anyone pushing you to **switch plans on the spot** during a phone call — promising extra benefits if you decide this instant. Real plan choices are made calmly, by comparing on medicare.gov or with a free SHIP counselor, during the proper enrollment windows. Nobody legitimate needs you to switch *right now* over the phone. That urgency is the sales trick, or the scam.

CHAPTER 48

Spotting Fraud on Your Statements

Your claims list, your Medicare Summary Notice, and your plan's Explanation of Benefits (all from Part 6) aren't just paperwork — they're your window into whether anyone is misusing your number. A regular glance is your best fraud detector.

What fraud looks like on a statement

- A **service or item you never received** — a brace, a test, a visit that didn't happen.
- A **provider you've never seen** or a place you've never been.
- The **same service billed many times**.
- Equipment billed that you never ordered or wanted.

Make it a habit

Once a month or so, log in and run your eye down your recent claims (Part 6). Ask of each line: "Do I remember this?" The familiar ones are fine; it's the stranger you're hunting for. If something doesn't fit, first check with the provider in case it's an honest mix-up — then, if it still looks wrong, report it.

WHAT THIS DOES FOR YOU

You're guarding the whole program, not just yourself

When you catch and report a bogus charge, you protect your own number *and* help stop crooks who are stealing from Medicare — money meant for real care for real people. That quick monthly look makes you a quiet guardian of a program that matters to millions. It's a small civic good, and it feels good to do.

CHAPTER 49

Reporting Fraud and Getting Help

If you spot fraud, suspect a scam, or think you may have given information to the wrong person, there are real people whose job is to help — free of charge. Knowing who to call turns a scary moment into a manageable one.

Who to contact

Who	What they help with
1-800-MEDICARE	1-800-633-4227 — report suspected fraud, questionable charges, or scam contacts. Medicare's own line.
Senior Medicare Patrol (SMP)	A free program that helps you prevent, detect, and report Medicare fraud. Great for a second opinion on something fishy.
Your plan	For an Advantage or drug plan, the number on your card or statement, to query a charge.
Bill's Home Tech	(330) 200-8042 — if you'd like a calm second opinion before you act, or help checking your account online.

What to have ready when you report

- The **date** and **details** of the suspicious charge, call, or message.
- Your **Medicare Number** (you'll give it to the *official* line you called — not to anyone who called you).
- Any **statement or notice** showing the questionable item.

STAY SAFE

Giving your number to a line YOU called is different

You might notice a seeming contradiction: I say never give your Medicare Number over the phone, yet reporting fraud means giving it. The difference is **who started the call**. When *you* dial the official 1-800-MEDICARE, you know who's on the other end, and sharing your number is safe. The rule is really: never give it to someone who called *you*. You calling them is fine.

FROM BILL

If you've been caught out, call me — no judgment, ever

Scammers are professionals, and smart, careful people fall for their tricks every day. If you think you slipped up, please don't sit with it in shame. Call me at (330) 200-8042 and we'll calmly go through what to check, what to change, and who to report it to. There is no eye-rolling here and never will be — only help. The brave thing is to speak up early.

PART 8

Odds, Ends & When to Call Bill

The helpful extras — free counselors, helping a loved one, keeping your details current, quick fixes when the site misbehaves — plus a one-page cheat-sheet and an honest word about when to pick up the phone.

CHAPTER 50

Free Help: SHIP Counselors and More

You are never alone with Medicare, and some of the best help costs nothing. I've mentioned these folks throughout the book; here they are gathered in one place, so you know exactly who to turn to and for what.

The free helpers worth knowing

Helper	What they're for
SHIP	State Health Insurance Assistance Program — free, unbiased, one-on-one Medicare counseling in every state. They don't sell anything.
1-800-MEDICARE	1-800-633-4227 — Medicare's own help line for coverage, claims, plans, cards, and reporting fraud.
Senior Medicare Patrol (SMP)	Free help to prevent, spot, and report Medicare fraud and scams.
Medicare.gov	The official website — plain lessons, the Plan Finder, your account, all in one place.

What makes SHIP special

A **SHIP counselor** will sit with you — on the phone or in person — and talk through your own situation: which road suits you, how to compare plans, what a notice means. Crucially, they earn **no commission** and have **nothing to sell**, so their advice is genuinely on your side. For the plan *choices* I won't make for you, SHIP is who I'd send you to.

TIP

How to find your local SHIP

Every state has a SHIP, though it sometimes goes by a slightly different local name. To find yours, search Medicare.gov for **SHIP**, or simply call **1-800-MEDICARE** and ask them to connect you with free local counseling. It's one of the best-kept secrets in Medicare, and it's there for the asking.

WHAT THIS DOES FOR YOU

Unbiased help is worth seeking out

So much Medicare "advice" comes from people who profit when you choose a certain plan. Free, unbiased counseling is the antidote — real guidance with no angle. Using it isn't a sign you can't manage; it's a sign you're managing wisely. The savviest folks I know lean on SHIP every year.

CHAPTER 51

Helping a Loved One (or Being Helped)

Many folks manage Medicare for a spouse, a parent, or a friend — or have someone help them. That's a kind and normal thing. A little setup makes it work smoothly and keeps everyone's information safe.

Doing it the right way

- Medicare has a way to **authorize** a trusted person to speak with Medicare on your behalf — ask 1-800-MEDICARE how to set up that permission.
- If you help someone, use **their** account and **their** sign-in, with their knowledge — never pretend to be them or set things up behind their back.
- Keep their Medicare Number and sign-in details as carefully as you'd keep your own.

GOOD TO KNOW

Authorization lets helpers actually get answers

Without proper authorization, Medicare won't discuss someone's coverage with you — even a close family member — because of privacy rules. Setting up that permission ahead of time (through 1-800-MEDICARE) means that when you call to sort something out, they can actually talk to you. It's worth doing before you need it.

FROM BILL

Helping a parent with this? I do it all the time

Some of my favorite visits are sitting down with an adult son or daughter and their parent, getting the account set up, the drug list saved, and everyone comfortable — so the family can help without the parent feeling handled. If that's your situation, I'd be glad to help you set it up right. Call (330) 200-8042.

CHAPTER 52

Keeping Your Information Up to Date

A little housekeeping keeps Medicare running smoothly for you. When life changes, a few updates make sure your notices, cards, and payments all reach the right place.

What to keep current

- Your **mailing address** — so cards and notices arrive. (Address changes often go through **Social Security**, since they handle your enrollment record.)
- Your **phone number and email** in your Medicare account, for notices and codes.
- Your **drug list and pharmacies** in the Plan Finder, so each year's comparison is accurate.
- Your **payment details**, if you pay premiums automatically.

TIP

Moving? Tell Social Security first

Because your official record lives with Social Security, the surest way to update your address for Medicare is through **ssa.gov** or by calling them. Do that when you move, and your Medicare mail will follow you. A missed address change is a common reason cards and notices go astray — a two-minute update prevents it.

WHAT THIS DOES FOR YOU

Current details mean nothing slips through

When your address, phone, and email are current, your cards arrive, your notices reach you, and the security codes that protect your account land where they should. It's quiet, unglamorous housekeeping — and it's exactly what keeps Medicare from becoming a headache. Five minutes after any big life change, and you're set.

CHAPTER 53

Quick Fixes When the Site Won't Cooperate

Now and then Medicare.gov acts up — a page won't load, a sign-in won't take, the site feels stuck. Before you worry, try these simple fixes, which clear up the great majority of everyday hiccups.

The things to try, in order

1. **Check your internet.** The website needs a connection. If other sites won't load either, that's the culprit — check your Wi-Fi or move nearer the router.
2. **Close the page and open it fresh.** Shut the browser tab, reopen it, and type medicare.gov again. This clears most little glitches.
3. **Restart your computer, phone, or tablet.** Turn it off and on again. It's the oldest fix in the book because it so often works.
4. **Try a different device or time.** If a page still won't behave, try your phone instead of the computer, or come back in an hour — sometimes the trouble is on their end, not yours.
5. **Reset your sign-in if needed.** If you can't get in, your sign-in service (Login.gov, ID.me, or CLEAR) has a "forgot password" or help option to get you back in.

TIP

"Have you tried turning it off and on again?" really is the answer

It sounds like a joke, but restarting the device — or just closing and reopening the page — genuinely fixes most everyday problems. It's the first thing I try on a call, and nine times in ten it's all that's needed. It never deletes anything, so there's no risk in trying it first.

FROM BILL

When the quick fixes don't do it, that's what I'm for

If you've tried these steps and something's still not right — a sign-in that won't work, a page that won't load — don't spend your whole afternoon wrestling with it. That's exactly the moment to call me at (330) 200-8042. A fresh pair of eyes often sorts it out in minutes, and you get your afternoon back.

CHAPTER 54

Your Medicare Online Cheat-Sheet

Tear this page out, or fold its corner. These are the everyday things, all in one place.

The numbers and address to keep by the phone

For this…	Use this
Medicare's official website	medicare.gov (type it yourself — note the .gov)
Medicare's help line	1-800-MEDICARE (1-800-633-4227)
Free, unbiased plan counseling	Your local SHIP (ask 1-800-MEDICARE to connect you)
Sign up / address / premiums	Social Security — ssa.gov
Patient tech help	Bill's Home Tech — (330) 200-8042

Getting around the website

To do this…	Do this
Log in to your account	medicare.gov → Log in (top-right) → your sign-in service
Compare drug / health plans	Find plans / Plan Finder → enter ZIP and drugs
See your claims	Log in → Claims
See or print your card	Log in → Get my Medicare card
Make the page bigger	Hold Ctrl (or Command) and press + ; or pinch-zoom on a phone

The dates to remember

Window	What it's for
Oct 15 – Dec 7 (every year)	Fall Open Enrollment — most people's window to change plans
Jan 1 – Mar 31 (every year)	Medicare Advantage window — switch or drop an Advantage plan
Around your 65th birthday	Initial Enrollment — your first seven-month sign-up window

Staying safe

Situation	What to do
Caller wants your Medicare Number	Don't give it — real Medicare already has it. Hang up
"New card" call asking for a fee or your number	It's a scam. Hang up. Order a card yourself if needed

Situation	What to do
Asked to pay by gift card or wire	Always a scam. Stop. Verify at 1-800-MEDICARE
A charge you don't recognize	Check with the provider, then report it to 1-800-MEDICARE
Not sure if something's real	Don't act. Call Bill or 1-800-MEDICARE for a second opinion

CHAPTER 55

A Plain-English Glossary of Medicare Words

Medicare has a vocabulary all its own, and the words can make simple things sound harder than they are. Here's a plain-English dictionary of the terms you'll meet. Keep it handy for the first while; soon you won't need it.

Word	What it means
Original Medicare	Parts A and B together — the traditional, government-run program.
Part A	Hospital insurance — inpatient stays and related care.
Part B	Medical insurance — doctors, outpatient care, tests, equipment.
Part C / Medicare Advantage	A private all-in-one alternative to Original Medicare.
Part D	Prescription-drug coverage.
Medigap	A supplement that helps pay Original Medicare's leftover costs (not used with Advantage).
Premium	The regular (usually monthly) payment to keep a coverage.
Deductible	What you pay out of pocket first, before coverage starts sharing costs.
Copay / coinsurance	Your share of a cost after the deductible.
Formulary	A plan's list of covered drugs.
Network	The doctors and hospitals a plan works with (matters for Advantage plans).
Plan Finder	Medicare.gov's tool for comparing drug and Advantage plans.
Claim	A bill a provider sends to Medicare for your care.
MSN	Medicare Summary Notice — a summary of claims (not a bill), for Original Medicare.
EOB	Explanation of Benefits — the plan's version of the MSN, for Advantage/Part D.
Open Enrollment	The yearly window (Oct 15 – Dec 7) to change coverage.
SHIP	State Health Insurance Assistance Program — free Medicare counseling.
SMP	Senior Medicare Patrol — free help against fraud and scams.
Extra Help	A program that lowers drug costs for people with limited income.
Spoofing	When a scammer fakes the name or number shown on your caller ID.

CHAPTER 56

When to Call Bill

I built this book so you could do most things with Medicare online yourself, at your own pace, with confidence. And you can. But part of doing things well is knowing when a task is worth handing to someone who does it every day — so you can spend your time living your life instead of wrestling with a website. Here's my honest take on when to pick up the phone.

Good reasons to call

- You're **stuck setting up or getting into** your Medicare account — a sign-in that won't work, a verification that won't go through.
- You got a call, letter, or email that feels off and you'd like a **second opinion** before you do anything — always a good call, never a bother.
- You'd like a patient person to **sit beside you while you compare plans** on the Plan Finder, double-checking your drug list and settings.
- You want help **reading your claims or a notice** and making sense of what you're seeing.
- Something just isn't working the way this book describes, and you've tried the quick fixes once or twice.

What I will and won't do — honestly

I'll make the **website, the account, and the safety** easy — that's my trade. What I **won't** do is tell you which plan to buy or act as your insurance agent; that choice is yours, and for the plan decision itself a free **SHIP counselor** or **1-800-MEDICARE** is the right, unbiased expert. I'll gladly get the *tool* working for you so you can decide clearly — I just won't decide for you, and you shouldn't trust anyone who's too eager to.

What working with me is like

I'm Bill, and I run **Bill's Home Tech** right here in Portage County, Ohio. I've spent **30+ years** helping people feel at home with their technology, and I treat every call the way I'd want my own parents treated: patiently, in plain English, with no rushing, no jargon, and never, ever any eye-rolling. There is no such thing as a silly question with me.

How to reach me	
Call or text	(330) 200-8042
Book online	billshometech.com/book

How to reach me	
Where I serve	Portage County, Ohio and nearby
What it costs	Fair, honest, and told to you up front — no surprises

FROM BILL

You're never a bother — that's the whole job

Some folks hesitate to call because they don't want to be a nuisance. Please don't feel that way. Helping you is not an interruption to my work — it *is* my work, and it's work I love. Whether it's a five-minute question or sitting down to set up everything from scratch, I'm glad to help. That's what I'm here for.

GOOD TO KNOW

If you reach my website, you may meet Sophie

When you visit billshometech.com, you might be greeted by **Sophie**, my friendly assistant on the site. She can answer quick questions and help you book a time with me. She's there to make reaching me easier — but a real person (me) always does the actual help.

Thank you for letting me be your guide through Medicare online. Take your time, protect your number, lean on the free help when a decision is big, and remember — you really can't break it by looking, and you're never stuck alone. I'm proud of you for learning something new.

— Bill