

A guide to covering your medical expenses



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Health Care Continues to Be a Concern

#1	72%	5.4%
Paying for health care is	Percentage of investors who	Projected annual growth
the top financial concern	are not doing well saving for	in health care spending
across investors. ¹	health care costs in retirement. ²	through 2028. ³

¹ The 2019 Fidelity Investor Insights Study conducted during the period August 6 through August 26, 2019. It surveyed a total of 2,026 investors, including

1,102 millionaires. The study was conducted via a 25-minute online survey, with the sample provided by Brookmark, a third-party firm not affiliated with Fidelity.

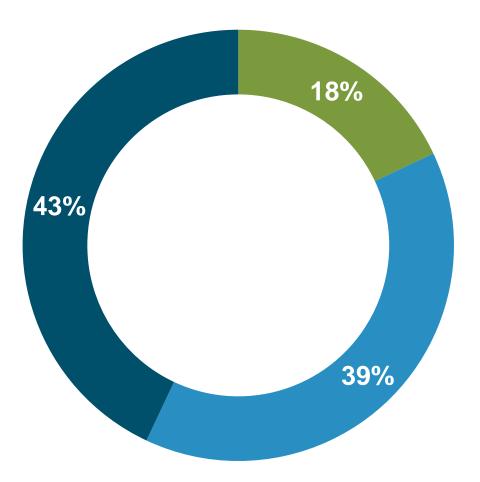
Respondents were screened for a minimum level of investable assets (excluding retirement assets and primary residence), age, and income levels.

² 2020 Fidelity Investments Health Care Engagement Framework Research. See last slide for methodology.

³ Centers for Medicare and Medicaid Studies, National Health Expenditures Projections, 2019–2028.



Where Does Retiree Health Care Money Go?



\$300,000

Out-of-pocket health care expense estimate for a 65-year-old couple

- Medicare Part B and Part D premiums Doctor appointments and hospital visits
- Generics, branded drugs, specialty drugs

Other medical expenses

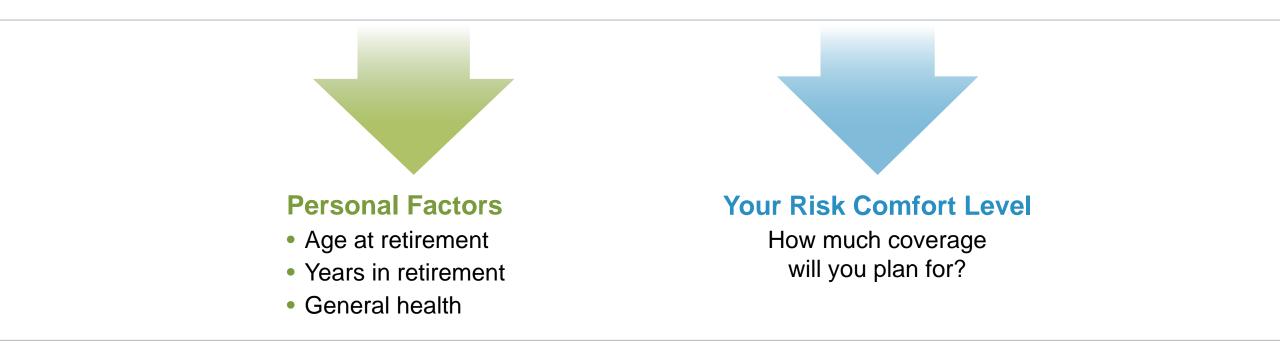
Including co-payments, coinsurance, and deductibles for doctor and hospital visits



Source: 2021 Fidelity Retiree Health Care Cost Estimate. See last slide for methodology.

Your Out-of-Pocket Costs May Vary

INDIVIDUAL COSTS DEPEND ON:





What We'll Cover Today

STEPS YOU CAN TAKE RIGHT NOW

1	Get to know Medicare
2	Estimate your annual Medicare costs
3	Take stock of your funding sources
4	Create a health care plan with your financial representative

The confidence of knowing your health care is covered is one of the most valuable things you can take into retirement.



Get to Know Medicare

What are your Medicare options?

Part A	Hospital insurance
Part B	Medical insurance

Part DPrescription drug coverage

Medigap	Medicare supplemental insurance
Part C	Medicare Advantage plans



Medicare Part A: Hospital Insurance

In-hospital stay in 2021 (per benefit period)		
Days 1–60	\$1,484 deductible	
Days 61–90	\$371 per-day co-payment	
Days 91–150	\$742 per "lifetime reserve day"	
Days 150+	All costs	

Source: Medicare.gov.

Benefit period is a period that begins on the day you are admitted to the hospital and ends when you have been out of the hospital for 60 consecutive days.



Medicare Part B: Medical Insurance

IN 2021, INDIVIDUALS CAN EXPECT TO PAY:

\$203 deductible | **20%** coinsurance for doctors' services and outpatient care

Individual Filer AGI	Joint Filer AGI	Standard Monthly Premium ¹
\$88,000 or less	\$176,000 or less	\$148.50
\$88,001 to \$111,000	\$176,001 to \$222,000	\$207.90
\$111,001 to \$138,000	\$222,001 to \$276,000	\$297.00
\$138,001 to \$165,000	\$276,001 to \$330,000	\$386.10
\$165,001 to \$499,999	\$330,000 to \$749,999	\$475.20
\$500,000 or above	\$750,000 or above	\$504.90

¹ Medicare Part B premiums are calculated based on the recipient's Adjusted Gross Income from two years prior.

Source: Medicare.gov.

Fidelity.

STEP 1

Medicare Part D: Prescription Drug Coverage

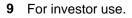
Higher-income beneficiaries pay higher Medicare part B and part D premiums¹

Individual Filer AGI	Joint Filer AGI	Standard Monthly Premium ¹			
\$88,000 or less	\$176,000 or less	Average plan premium = 33.06^2			
\$88,001 to \$111,000	\$176,001 to \$222,000	Plan premium + \$12.30			
\$111,001 to \$138,000	\$222,001 to \$276,000	Plan premium + \$31.80			
\$138,001 to \$165,000	\$276,001 to \$330,000	Plan premium + \$51.20			
\$165,001 to \$499,999	\$330,000 to \$749,999	Plan premium + \$70.70			
\$500,000 or above	\$750,000 or above	Plan premium + \$77.10			

Less than 5% of individuals with Medicare have a higher income and pay a higher premium.³

² Source: Medicare.gov.

³ Source: Medicare.gov, 2019.



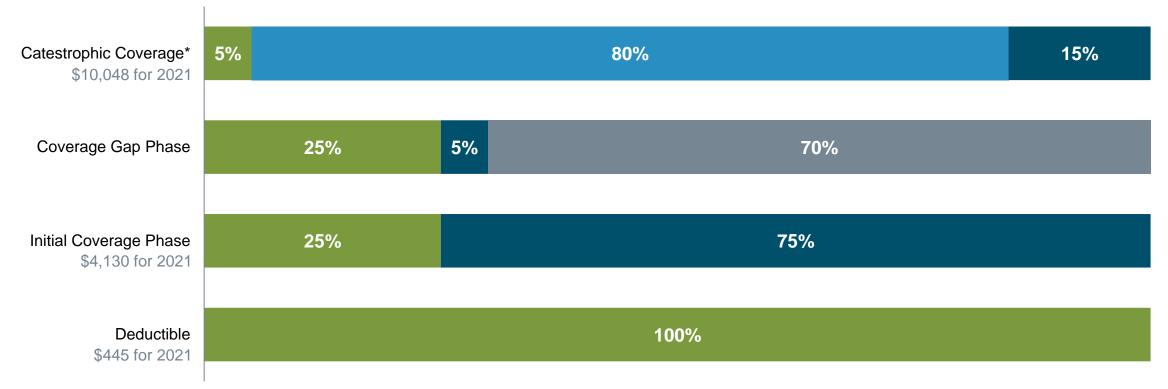


¹ Medicare Part D premiums are calculated based on the recipient's adjusted gross income (AGI) from two years prior.

Medicare Part D: "Donut Hole" Closed

SHARE OF DRUG COSTS PAID

■ Enrollees ■ Medicare ■ Plans ■ Manufacturers

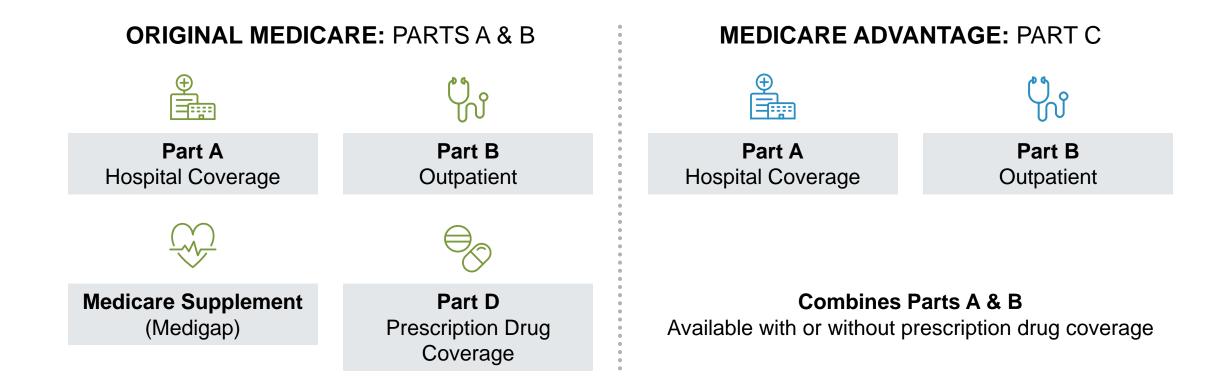


* Corresponds to out-of-pocket spending threshold of \$6,550 for 2021 (equivalent to \$10,048 in total drug spending in 2021, up from \$9,719 in 2020).

Source: KFF.org



Medigap (Medicare Supplement) vs. Medicare Advantage





Medigap: Supplemental Medicare Insurance Ten standard plans offering different levels of coverage

Premium cost varies by insurance company and state			No coverage for dental, hearing, or vision							
Flexibility to see any doctor who accepts Medicare			No prescription drug coverage							
					Mediga	p Plans				
Medigap Benefits	Α	В	C*	D	F*	G*	K	L	М	N
Part A coinsurance and hospital costs up to an additional 365 days after Medicare benefits are used up	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Part B coinsurance or copayment	Yes	Yes	Yes	Yes	Yes	Yes	50%	75%	Yes	Yes
Blood (first 3 pints)	Yes	Yes	Yes	Yes	Yes	Yes	50%	75%	Yes	Yes
Part A hospice care coinsurance or copayment	Yes	Yes	Yes	Yes	Yes	Yes	50%	75%	Yes	Yes
Skilled nursing facility care coinsurance	No	No	Yes	Yes	Yes	Yes	50%	75%	Yes	Yes
Part A deductible	No	Yes	Yes	Yes	Yes	Yes	50%	75%	50%	Yes
Part B deductible	No	No	Yes	No	Yes	No	No	No	No	No
Part B excess charge	No	No	No	No	Yes	Yes	No	No	No	No
Foreign travel exchange (up to plan limits)	No	No	80%	80%	80%	80%	No	No	80%	80%
Out-of-pocket limit	N/A	N/A	N/A	N/A	N/A	N/A	\$6,220	\$3,110	N/A	N/A

* Plans F and G also offer a high-deductible plan in some states. With this option, you must pay for Medicare-covered costs (coinsurance, copayments, and deductibles) up to the deductible amount of \$2,370 in 2021 before your policy pays anything. Plans C and F aren't available to people who were newly eligible for Medicare on or after January 1, 2020.



Medicare Part C – Medicare Advantage

MEDICARE ADVANTAGE PLANS

HMOs, PPOs, private fee-for-service plans, Medicare specialty plans Costs may increase if you use out-of-network doctors

Address Part A and Part B expenses,

and often others, such as prescription drugs

Hearing, dental, and vision (not covered under Medicare) may be covered



Which One Is Right for You?

Medigap

Original Medicare + Medigap Supplement

- May have higher premiums, but typically lower or no copays
- Freedom to choose doctors
- No referrals necessary
- Some routine services are not covered, such as vision and hearing
- Covered anywhere in the U.S.

Medicare Advantage Medicare Advantage Plan

- Generally lower premiums, but has copays
- Usually includes prescription drug benefits
- May be restricted to network
- May need referrals for specialists
- May include extra benefits, such as vision, hearing, or fitness
- Emergency services only outside service area

It's not always easy to choose.



Questions to Weigh When Considering Plan Options

Do you have coverage for dental, hearing, and vision care-services not covered by Medicare?

Is it important for you to continue seeing your current physicians?

Have you estimated the total out-of-pocket costs for prescription drugs?

Do you want flexibility to choose providers—particularly specialists?

Do you have protection from catastrophic illness?



Create a Health Care Coverage Plan

Hypothetical example of Medicare costs for 65-year-old couple with income <\$176,000

Medicare Part A	\$0 Deductible and co-payments covered by Medigap Plan G
Medicare Part B	\$1,985 for premium Coinsurance covered by Medigap Plan G
Medicare Part D	\$2,463.60 for premium ¹
Medigap Plan G	\$1,786 for premium ²
Annual total	\$6,234.60 per person or \$12,469.20 per couple

¹ Actual premiums paid by Part D enrollees vary considerably. For 2021, PDP monthly premiums may range from \$5.70 to \$205.30 (unweighted by plan enrollment). Part D enrollees with higher incomes pay an income-related premium surcharge. Source: An Overview of the Medicare Part D Prescription Drug Benefit, KFF.org.

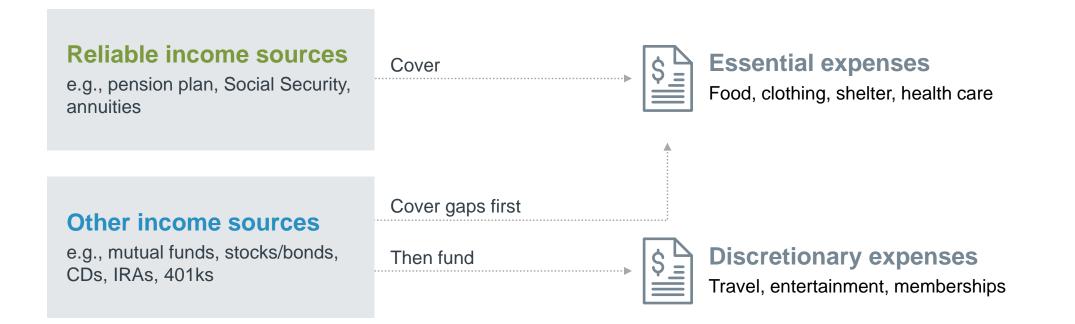
² Average 2018 annual premium, Kiplinger "Two Medigap Plans to Be Phased Out."



STEP 3

Take Stock of Your Funding Sources

Use your sources of dependable income to cover health care and other essential expenses





For illustrative purposes only.

Create a Health Care Plan with Your Financial Representative

Your representative can help you:

Check health care expense estimates

Categorize essential and discretionary expenses

Review sources of income

Create a plan to ensure that health care and other essential expenses are covered

Develop a financial strategy for discretionary spending



Appendix

Additional health care topics



Key Dates for Medicare

Part A & B	Part D	Part C
Regular Medicare	Prescription drug coverage	Medicare Advantage plans
 3 months before reaching age 65 (7-month enrollment window) Late enrollment penalty (some exceptions apply) 	 Initial enrollment deadline is the same as Parts A & B Annual enrollment window for changes: October 15–December 7 	 Similar to regular Medicare (Parts A & B) Window to add, drop, or change: October 15–December 7 Window to drop existing plan and switch to regular Medicare if plan is non-renewing: January 1–February 14 Calendar-year enrollment Limited ability to make changes



Medicare and Working Beyond Age 65 What you need to know

Working at a company with	
fewer than 20 employees	

Enroll in Medicare Parts A & B.

Medicare will now be your primary coverage and your employer-based coverage will be secondary.

Working at a company with **20 or more employees**

Are you already collecting Social Security?

Yes You will be automatically enrolled in Medicare Parts A & B upon reaching age 65, but can opt out of part B.

You do not have to enroll in any parts of Medicare. You can enroll later during your special enrollment period and not be subject to late-enrollment penalties, provided you have had creditable health insurance.

If I'm not collecting Social Security and Medicare Part A is "free," shouldn't I go ahead and enroll in Part A?

Pro You can enroll in Medicare Part A, and Part A may pick up some hospital expenses not covered by your employer-based coverage.

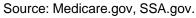
Con Once enrolled in Medicare Part A (and/or B) you can no longer contribute to an HSA, as Medicare is not considered high-deductible insurance.



Source: Medicare.gov.

Medicare and Health Savings Accounts (HSAs)

- No contributions to HSA after enrollment in Medicare
- Once Social Security starts, Medicare (Part A) enrollment is automatic and HSA contributions must stop
- If not receiving Social Security, can defer Medicare to keep HSA
- -Compare HSA/High Deductible Health Plan to Medicare (benefits and costs)





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The 2020 Fidelity Investments Health Care Engagement Framework Research was an online survey of 5,014 employees. The survey was conducted by Greenwald and Associates, an independent third-party research firm on behalf of Fidelity from February 20–March 5, 2020.

2021 Retiree Health Care Cost estimate based on a hypothetical opposite-gender couple retiring in 2021, 65-years-old, with life expectancies that align with Society of Actuaries' RP-2014 Healthy Annuitant rates projected with Mortality Improvements Scale MP-2020 as of 2021. Actual assets needed may be more or less depending on actual health status, area of residence, and longevity. Estimate is net of taxes. The Fidelity Retiree Health Care Cost Estimate assumes individuals do not have employer-provided retiree health care coverage, but do qualify for the federal government's insurance program, Original Medicare. The calculation takes into account cost-sharing provisions (such as deductibles and coinsurance) associated with Medicare Part A and Part B (inpatient and outpatient medical insurance). It also considers Medicare Part D (prescription drug coverage) premiums and out-of-pocket costs, as well as certain services excluded by Original Medicare. The estimate does not include other health-related expenses, such as over-the-counter medications, most dental services and long-term care.

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