

Medicare Options Comparison Worksheet

This worksheet will help you compare your different Medicare options, and pick the option(s) that will minimize your out-of-pocket costs. For information about Medicare, visit [TriageCancer.org/Medicare](https://www.TriageCancer.org/Medicare). For an overview of Medicare costs and other information to help you use this worksheet, visit: [TriageCancer.org/Worksheet-Medicare](https://www.TriageCancer.org/Worksheet-Medicare).

Comparing Medicare Advantage Plans (Part C)

Option #1			Option #2		
Type of Plan	Plan Type		Type of Plan	Plan Type	
☐ Employer ☐ Individual Market ☐ Other	☐ HMO ☐ PPO		☐ Employer ☐ Individual Market ☐ Other	☐ HMO ☐ PPO	
Insurance Company Name:			Insurance Company Name:		
Plan Name:			Plan Name:		
Is my primary care physician in the plan's network?	Are my hospitals and specialists (e.g., oncologist, surgeon, rheumatologist) in the plan's network?	Are the prescription drugs I take covered by the plan?	Is my primary care physician in the plan's network?	Are my hospitals and specialists (e.g., oncologist, surgeon, rheumatologist) in the plan's network?	Are the prescription drugs I take covered by the plan?
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No ☐ Only Some	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No ☐ Only Some
Does this Medicare Advantage Plan include prescription drug coverage? *If not, you will also need to shop for a Part D plan and add in those costs. TriageCancer.org/QuickGuide-MedicarePartD		☐ Yes ☐ No	Does this Medicare Advantage Plan include prescription drug coverage? *If not, you will also need to shop for a Part D plan and add in those costs. TriageCancer.org/QuickGuide-MedicarePartD		☐ Yes ☐ No

Part C Plan Costs

Option #1		Option #2	
Monthly Part B Premium	Monthly Part C Premium	Monthly Part B Premium	Monthly Part C Premium
\$ A	\$ B	\$ A	\$ B
Part C Health Deductible	Out-of-pocket Maximum	Part C Health Deductible	Out-of-pocket Maximum
\$ C	\$ C	\$ C	\$ C
Does the plan have out-of-network coverage? If yes, enter %. (Note: some plans have no out-of-network coverage, if so, enter 0%)	%	Does the plan have out-of-network coverage? If yes, enter %. (Note: some plans have no out-of-network coverage, if so, enter 0%)	%

Doing the Math: Part C Plans

Your total out-of-pocket costs for your health care for the year, assuming you reach the out-of-pocket maximum:

Option #1	Option #2
$(\text{ A } \times 12) + (\text{ B } \times 12) + \text{ C } =$	$(\text{ A } \times 12) + (\text{ B } \times 12) + \text{ C } =$
Total Annual Costs not including drug costs	Total Annual Costs not including drug costs

Comparing Medigap Plans

Medigap plans are additional insurance plans you can buy, to help pay deductibles, co-payments, co-insurance amounts, and other expenses Parts A & B (i.e., Original Medicare) do not cover. You can buy a Medigap policy from any licensed insurance company in your state. You will pay an additional monthly premium for a Medigap plan. Medigap plans are standardized, meaning every plan of the same letter/category, has to offer the same benefits.

Option #1		Option #2	
Insurance Company Name:		Insurance Company Name:	
Plan Name:		Plan Name:	
Insurance Company Contact Name:		Insurance Company Contact Name:	
Insurance Company Contact Phone Number:		Insurance Company Contact Phone Number:	
Insurance Company Contact Email Address:		Insurance Company Contact Email Address:	
Plan Type: (A – N, Basic/Extended Basic, etc.):		Plan Type: (A – N, Basic/Extended Basic, etc.):	
Does the plan cover the Part B cost-share?	Am I in a Medigap guaranteed issue period?	Does the plan cover the Part B cost-share?	Am I in a Medigap guaranteed issue period?
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

Medigap Plan Costs

Option #1		Option #2	
Monthly Part B Premium	Part B Deductible	Monthly Part B Premium	Part B Deductible
\$ A	\$283	\$ A	\$283
Medigap Monthly Premium	Medigap Deductible (Note: Only fill in if choosing a High Deductible Plan G or F)	Medigap Monthly Premium	Medigap Deductible (Note: Only fill in if choosing a High Deductible Plan G or F)
\$ B	\$ C	\$ B	\$ C
Out-of-Pocket Maximum (Note: Only fill in if choosing Plans K or L)	\$ D	Out-of-Pocket Maximum (Note: Only fill in if choosing Plans K or L)	\$ D
NOTES		NOTES	

What is your Medicare claim number?

What is your effective date for Part A?

What is your effective date for Part B?



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Doing the Math: Medigap Plans

Complete the information below to add up your total costs for the Medigap Plans you are considering.

Math #1 (Use if choosing Medigap Plan G)

Option #1

$$\left(\underline{\text{A}} \times 12 \right) + \left(\underline{\text{B}} \times 12 \right) + \underline{\$283} =$$

Part B Deductible

Total Annual Costs not including drug costs

Option #2

$$\left(\underline{\text{A}} \times 12 \right) + \left(\underline{\text{B}} \times 12 \right) + \underline{\$283} =$$

Part B Deductible

Total Annual Costs not including drug costs

Math #2 (Use if choosing a High Deductible Medigap Plan G or F)

Option #1

$$\left(\underline{\text{A}} \times 12 \right) + \left(\underline{\text{B}} \times 12 \right) + \underline{\text{C}} + \underline{\$283} =$$

Part B Deductible

Total Annual Costs not including drug costs

Option #2

$$\left(\underline{\text{A}} \times 12 \right) + \left(\underline{\text{B}} \times 12 \right) + \underline{\text{C}} + \underline{\$283} =$$

Part B Deductible

Total Annual Costs not including drug costs

Math #3 (Use if choosing a Medigap Plan K or L)

Option #1

$$\left(\underline{\text{A}} \times 12 \right) + \left(\underline{\text{B}} \times 12 \right) + \underline{\text{D}} + \underline{\$283} =$$

Part B Deductible

Total Annual Costs not including drug costs

Option #2

$$\left(\underline{\text{A}} \times 12 \right) + \left(\underline{\text{B}} \times 12 \right) + \underline{\text{D}} + \underline{\$283} =$$

Part B Deductible

Total Annual Costs not including drug costs

Math #4 (Use if you have a Medigap Plan C or F)

Option #1

$$\left(\underline{\text{A}} \times 12 \right) + \left(\underline{\text{B}} \times 12 \right) =$$

Total Annual Costs not including drug costs

Option #2

$$\left(\underline{\text{A}} \times 12 \right) + \left(\underline{\text{B}} \times 12 \right) =$$

Total Annual Costs not including drug costs

Medicare Part D

Medicare Part D provides prescription drug coverage. Plans have different monthly premiums and formularies (list of drugs covered by a plan), so costs vary by plan. In 2026, the most you will pay out-of-pocket for covered Part D drugs is \$2,100; for both stand-alone Part D Plans and Medicare Advantage plans. If your Medicare Advantage plan includes drug coverage, you do not need to add a Part D premium cost here.

Option #1

$$\left(\underline{\text{A}} \times 12 \right) + \$2,100 =$$

Your Part D Cost

Option #2

$$\left(\underline{\text{A}} \times 12 \right) + \$2,100 =$$

Your Part D Cost

Making Your Final Choice

Part B of Medicare has a 20% co-insurance amount. Many chemotherapies are covered under Medicare Part B, which can lead to high out-of-pocket costs. Buying a Medigap plan that pays for Part B's 20% co-insurance can lower out-of-pocket costs. This example shows how: Jimmy is almost 65 and is about to begin 1 year of chemotherapy, which will cost \$10,000 a month. The three boxes below show what his costs would be just for his chemotherapy, if he had just Parts A & B (i.e., Original Medicare); Original Medicare plus a Medigap Plan G; or a Medicare Advantage plan. Note: the costs for Medigap G and Medicare Advantage plans are estimated here for this example. Below the example, you have the chance to compare your options by filling in the blanks.

Example: Original Medicare

$$(\$202.90 \times 12) + \$283 + [(\$10,000 \times 20\%) \times 12] = \$26,717.80$$

Part B Premium
= \$2,434.80

Part B
Deductible

Part B 20% Co-
insurance = \$24,000

Total

Example: Original Medicare + Medigap Plan G

$$(\$202.90 \times 12) + \$283 + (\$300 \times 12) + \$0 = \$6,317.80$$

Part B Premium
= \$2,434.80

Part B
Deductible

Medigap Premium
= \$3,600

Part B 20% Co-
insurance paid for
by Medigap Plan G

Total

Example: Medicare Advantage (Part C)

$$(\$202.90 \times 12) + (\$0 \times 12) + \$9,250 = \$11,684.80$$

Part B Premium
= \$2,434.80

Part C Premium
= \$0

Part C
OOP Max

Total

Doing Your Math: Original Medicare

$$(\text{ } \times 12) + \$283 + \text{ } = \text{ }$$

Part B Premium Part B Deductible Part B 20% Co-insurance Total

Doing Your Math: Original Medicare + Medigap _____

$$(\text{ } \times 12) + \$283 + (\text{ } \times 12) + \text{ } = \text{ }$$

Part B Premium Part B Deductible Medigap Premium Medigap Deductible or OOP Max, if the plan you choose has either Total

Doing Your Math: Medicare Advantage (Part C)

$$(\text{ } \times 12) + (\text{ } \times 12) + \text{ } = \text{ }$$

Part B Premium Part C Premium Part C OOP Max Total

Your Total Estimated Annual Medicare Costs for Medical Care & Prescription Drugs

(Add the total from the Medicare option you selected above to your Part D total)

$$\text{\$ } \text{ } + \text{\$ } \text{ } = \text{\$ } \text{ }$$

Medicare Option Total Part D Total Total Estimated Annual Cost