



Collier Legacy Planning llc

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# Legacy Planner

Retirement • Income • Medicare

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Minocqua Lake photo by Ray Loth

## • Mozzarella and Spinach Chicken •

Sometimes I wonder what I can do with chicken to make it even more flavorful. I found a recipe for "Creamy Mozzarella and Spinach Baked Chicken" on <http://simpleseasonal.com> that I'm looking forward to trying, and I hope you will, too. Let's find out how yummy it is!

The recipe was rewritten to make it fit here, but you'll be able to cook from it. Maybe you'll want to check out other recipes on that website? —*Barb Schlaefer*

### Ingredients:

- 4 boneless, skinless chicken breasts
- 8 oz. pkg. cream cheese, softened
- 1 Tablespoon olive oil, and more to coat chicken pieces
- 1/3 cup finely chopped shallots
- 4 cloves garlic, minced
- 4 cups coarsely chopped fresh spinach
- 1/2 cup grated Parmesan cheese
- 2 cups grated mozzarella cheese

### Directions:

- 1 Remove cream cheese from fridge to soften. Get out a large skillet, and a baking dish for the chicken breasts. Preheat oven to 450° F.

- 2 *In large skillet:* On medium-high, heat one tablespoon olive oil for 3 minutes, then add garlic and spinach. Cook until spinach is wilted. Cool.
- 3 *In baking dish:* Prep chicken by removing any fat, and coating each piece with olive oil. Season with salt and pepper.
- 4 *In a bowl:* Combine cooled cooked spinach into softened cream cheese.
- 5 *In baking dish (with chicken in it):* Spread spinach and cream cheese mix over chicken breasts, sprinkle grated mozzarella and Parmesan over the tops. Cover with aluminum foil.
- 6 *Bake for 15 minutes at 450°.* Remove foil, then continue baking for 5 to 10 more minutes until chicken is done (160° internal temperature).



Left, Lance Cheung, USDA; right, ThiloBecker, both from Wikimedia Commons

## Medicare\* Basics

By Raymond Loth

**"How do people navigate this without you? Thank You! Thank You! Your clarity and thoughtfulness are so appreciated. You go the extra miles to take care of others so thoroughly" —Oshkosh Client**

Medicare\* can be a stressful and confusing subject for people. I hope that's not the case for you. **Here are 7 common questions.** (Please see some corresponding info on backside of insert.)

### 1 • How much does Medicare cost? What does it cover? What is Part A... B... C... D...?

- The basic Medicare card (issued by the government) includes **Part A for Hospital** and **Part B for Doctor and Outpatient Services**. (Note included preventative services covered in insert.)
- Part B has a monthly premium.<sup>^</sup> **It was \$148.50 in 2021, and has increased to \$185 in 2025.** This amount is taken out of Social Security, or direct billed if you are not on Social Security. The amount is either increased, or might be eliminated, if your income is outside of (broad) established ranges.

• **A common generalization is that A and B pays for about 80%** of medical costs, and doesn't include prescription drugs. Remaining expenses can be addressed through private insurers offering Medicare supplements ("medigap"), Medicare Advantage ("**Part C**"), and **Part D** (drug) plans. **This is where we come in.**

### 2 • When and How do I sign up^^ for Medicare and additional coverage?

**If you are collecting Social Security** your Medicare card will automatically be mailed about 3 months before your 65th birth month. **Otherwise, you have to apply**, also starting about 3 months before. Benefits begin on the first day of your birth month (1 month earlier if DOB is the first). Social Security Disability recipients may receive coverage before age 65.

### 3 • What is the difference between Medicare Advantage and Medicare Supplement?\*\*\*

Both types of plans are **provided by private companies**, you can only have 1, **and with either type you will STILL pay your Medicare Part B monthly premium.** Both plans are required

*"Medicare\* Basics" continues on the next page.*



"Medicare\* Basics" continued...

to cover all Medicare approved services by helping cover costs not paid by Medicare. They include some combination of monthly premiums and/or out of pocket expenses.

**A Supplement plan is used WITH your Medicare card, as a secondary payor.** You can go to any provider that accepts Medicare. Supplements always have a monthly premium, and can be designed with very little out of pocket cost. When turning 65, you can get these without medical questions. You will need a separate prescription plan.

**A Medicare Advantage plan is used INSTEAD of your Medicare card** (which you still need). Advantage plans either prefer, or require, certain provider groups. They often have little to no monthly premium (Medicare pays the plan). You will have out of pocket expenses for certain medical activities, with a cost limit for the year. They often include prescription drug coverage and some other benefits like dental, vision, hearing, gym membership, etc.

#### 4 • What about drug coverage?

Medicare based drug coverage has historically been complicated. It's based on 5 tiers of drugs, with a deductible, copays, and/or coinsurance. 2025 marks notable improvements, including: an elimination of the expensive and complicated "donut hole" ("coverage gap"), a significantly reduced maximum annual out of pocket—to \$2,000, cost controls on some medications, and an option to spread expensive costs out over remaining months. Wisconsin also has an excellent income based program called Senior Care.

#### 5 • Should I stay on my (or my spouse's) employer-based plan?^

Some employers have options for post-65 coverage. **Factors to evaluate include:** monthly premiums, out of pocket expenses, health, nearness of retirement, etc. I'll be fair and honest in reviewing this with you. If you are leaving employer coverage after age 65, there is a routine process to get your Medicare started.

#### 6 • How do I choose a plan type, and a specific company?

This may be easier than you think. With over 550 Medicare clients to serve, **we want you with a good plan and company that you'll be happy with.** We emphasize flexible provider access, financial advantages for you, and **heavily favor companies with a solid history of client satisfaction and customer service.**

#### 7 • Can I just sign up online without an agent?

Yes, you can. However, you **get exactly the same plan benefits, with added local personal customer service, if you have our office on your team.** We help with initial plan selection, and also other needs for years to come.

**We do sincerely CAUTION you regarding online and phone marketing schemes. These have become increasingly deceitful, manipulative, and unscrupulous and may not be focused on your best interest.**

We recently sent out a random customer service feedback survey to 125 of our clients and received very high ratings in their anonymous replies. Additionally, 99% of our business comes from referrals and return clients.

We hope this has been helpful, and promise that one hour of your time with us will save you many hours of frustration. For further questions please call (920) 233-0033 or email raymond@clpwi.com .

**"I've met with three people on this and you are the most forthcoming which I really appreciate. That is very important to me if we are going to work together."**  
—Oshkosh Client

*\*We are not associated with, or representing, the Federal Government Medicare program, nor is this article intended to explain or define the specific benefits of this program. Our intention is to provide a high-level overview of the areas that Medicare Supplement, and Medicare Advantage plans are designed to address. These are offered by private, generally for profit, companies, some of which we do represent and work with. Please consult www.medicare.gov , www.cms.gov , your local Social Security office, or other such official sources for information on actual government programs.*

*Additionally, this newsletter is generally intended to be educational, and not sales or promotional, in nature—primarily for our established clients. It therefore also comments on other important services and products that many of these clients have, like annuities, life insurance, etc. Any reference to non-Medicare related services is not intended divert the attention of newly interested Medicare beneficiaries.*

*^ Medicare requires people turning 65 to have qualifying medical and drug coverage, and if you do not, there will be penalties in the future. A common alternative to Medicare is an employer-based plan. Part B is still needed for those on VA.*

*^^ Please see "Ask the Pros" on page 4 for information about making CHANGES to your coverage when already on Medicare.*

*\*\* Please see "Case Study" on page 3 for more information on these differences.*

#### Government Agency Contact Phone Numbers

##### • SOCIAL SECURITY OFFICES

Oshkosh	1 (877) 445-0834
Fond du Lac	1 (888) 717-1526
Appleton	1 (877) 694-5495
Portage	1 (888) 875-1681
National	1 (800) 772-1213

##### • ADRC (Aging Disability Resource Center), by county

Winnebago	1 (877) 886-2372
FDL	1 (920) 929-3466
Green Lk	1 (920) 294-4070
Waushara	1 (920) 787-0403
Marquette	1 (855) 440-2372
Dodge	1 (920) 386-3580
Columbia	1 (608) 742-9233

##### • WI SENIOR CARE (drug assistance program)

1 (800) 657-2038

##### • MEDICARE

1 (800) 633-4227

**"Thank you for all you've done to steer us through the difficulties of Medicare. You've helped so much. You are a hard worker and care about people."**  
—Ripon Clients



Photo: Ray Loth

**"...research shows over and over that most older people are happier than the twenty-somethings who are assumed to be in the prime of life. People over the age of sixty-five have the most stable and optimistic outlook of all adults. The answer lies in something we might commonly call life perspective; ...perspective seems to bring with it a new way of evaluating what is worth one's time, attention, worry, or wrath. For many, this translates into a greater tendency to let go of life's negatives, and to focus on the positives."**

—A Long Bright Future, by Laura L. Carstensen, (from pages 5 and 17)

## Case Study

### Medicare Supplement OR Medicare Advantage?

Mr. & Mrs. J came in seeking options for their Medicare coverage needs beyond basic Medicare A and B.\* The husband was in good health. The wife had various medical concerns and multiple specialists. She felt these would continue and maybe even increase. **They both wanted good coverage and financially sound planning.**

Mr. K decided that he wanted a \$0/mo. Medicare advantage plan. He's okay with some out-of-pocket expenses, and knows there's an annual limit (2025 national average of \$5,400). His plan includes drug coverage and some auxiliary benefits, like gym membership and some basic vision and dental. After 3 years, even though he's had some medical expenses, Mr. K feels that by not having added monthly premiums, he has saved thousands of dollars.

Mrs. L felt that a Supplement would suit her needs, along with a separate drug plan. This combination started off at around \$160/mo. She knows that she can go to any provider that accepts Medicare, and loves the peace of mind from having only minimal out-of-pocket expenses.^ Her annual premium increases have been manageable so far. She too feels that she's saved thousands of dollars over the past few years, in her case, by not having higher out of pocket costs.

In the end, both supplements and advantage plans have a place—depending on your circumstances and personal preferences. Whatever the case, "if you are happy, we are happy!" —Ray Loth

*\* See main article for further general information on Basic Medicare as well as Medicare Supplements and Advantage plans.*

*\*\* Both plans require the Medicare part B premium to the Government, \$185/mo. in 2025.*

*^ This is dependent on how the plan is set up, and all enrollees starting on, or after, Jan. 1, 2020 must accept at least an annual Part B deductible (\$257 in 2025).*



Tomahawk Lake photo by Ray Loth

## Ask the Professional...

**What is the Oct. 15th to Dec. 7th "AEP"? Can I Make Medicare Changes at Other Times?^**

### What is AEP?

AEP is the universal **opportunity that Medicare beneficiaries have to make changes** to their drug (Part D) plan or Medicare Advantage (Part C) plan for January 1. Although changes may be beneficial, all the excessive advertising during AEP can also have the unnerving "grass is greener" effect.

### Do you need to do anything during AEP?

**NO. Medicare Advantage and Drug plans renew automatically** each year unless you are informed otherwise, which is rare. Your plan will update you during AEP regarding plan changes for next year.

**Medicare Supplements** also typically renew automatically, however on your policy anniversary date. If though, you want to **drop your supplement and switch** to an Advantage plan, then AEP would be the time to make such changes.

### Should you be doing something different?

Many do not, however that varies. **Here are 3 scenarios:**

- 1 •** If you have or expect significant changes in your medical activity, then a review may be worthwhile. However oftentimes **your current plan may still be very suitable.**
- 2 •** Some people don't like their monthly premiums, which may be increasing. Others may have a low premium but don't like paying copays. AEP would be a time to see if available options are attractive to you.
- 3 •** Most of our clients are **generally very happy with their current plan and enjoy the stability of keeping it.**

Some clients like to review their plan with us during this time, either in person or on the phone. Others reach out only if they see a particular need, and know that I'll do the same. My job is to care for you according to your personal needs and desire for information.

### How about changes at other times of the year?

There are **some other times** when you may be able to make changes **including:** Jan to March for Advantage plan changes, changing to a "5-Star" plan, if on certain government programs, and if moving.

In conclusion, many people value stability and continuity in planning. We focus on starting you off on well-priced plans with broad provider access and high quality customer service.

**Thank you very much for your business, your loyalty, and your many referrals over the years!** —Ray Loth

*\* Please see (\*) footnote to Main newsletter article, noted on page 2.*

*^ Please note that this article is focused on changes for those already on Medicare. Please see Main article, point #2, for new enrollees sign up timing.*