

Dear Mr. Austin,

First, let me say I am honored that you called me. I know all this Medicare maze of coverage can be very confusing and believe me if I didn't work with every day for the last 12 years I would be lost as well.

The main reason I try to give people the facts on Advantage Plans is one that may have come up for you and your Retirees. When you join an Advantage Plan when you first get on Medicare, if you find out later that the benefits get worse or you don't like it for any reason, you will have to go through the underwriting process to get anything else. Many times that makes people not be able to get any other kind of coverage. If a person joins a Medigap plan FIRST while they have guaranteed issue in their open enrollment period and then tries out an Advantage plan, Medicare rules state that they have a 12 month free look, if they do not like the Advantage Plan for any reason, they can go BACK to their Medigap plan with NO underwriting, no health questions asked. That is why I advise people that even if they think they want an Advantage Plan to get a Medigap plan FIRST so they have this "warranty" of 12 months.

I don't like for people to get stuck on something and not have choices. So, that is why I recommend doing it that way.

You mentioned that many of your Retirees' have had good results with their coverage and that is fantastic. I would hope they don't change what they have. But for those that do want to look at something else, the problem will be to get through underwriting.

I have found with Blue Cross in Michigan, you have a guaranteed issue Medigap Plan C that is only \$107.00 per month. This would be your only out of pocket costs and you could see any Doctor or Hospital of your choice. There would be no risk involved. The only thing you would need to check is if they have a 3 or 6 month pre-existing clause. But at least, you would be guaranteed to be accepted. The only thing a plan C does not cover is the excess charges, but most doctors do not charge you more than Medicare allows them to for an illness. Advantage Plans NEVER cover excess charges. You can get Medigap plans that cover 100% of excess charges, but Blue Cross does not offer one of those. Doctors by law cannot charge you more than 15% above what Medicare rules is a fair price for that illness. If someone wants to get one of these Medigap plans from Blue Cross, they would need to call them directly, as they do not allow private companies to offer them to you.

The only reason I don't usually recommend Blue Cross is that they routinely market to their Medigap policy holders to get on the Advantage Plans, because they get paid so much more for these plans from the government.

If someone wanted to check prices on other Medigap plans from other carriers, we can help them get price comparisons. Just give us a call, let them know you are a Chrysler Retiree and we will help you ASAP.

Then the next issue would be the Part D drug plans. There are at least 50 plans in each state, that all cover different drugs at different co-pays and premiums. Blue Cross is not competitive and does not have the most comprehensive formulary. We can do a comparison based on your particular medications to make sure they are covered on the plan you choose at the lowest prices. If you go to our Website www.MyPartDusa.com on Nov. 15th all you have to do is enter in your meds and your top 5 plans based on savings comes up for you to see, choose and enroll easily online. You do not have to make a phone call or sign paperwork. We send this enrollment to Medicare for you. If you see your plans and still have questions, we have Consultants that can help you by calling our toll free number.

If you go to my blog at <http://MyPartDusa.com/blog> I have much information on how to MAXIMIZE your drug plans to save even more money. If you begin Jan. 1, by not purchasing your generics on your drug

plan, you will not go into the "dreaded donut hole" as quickly in 2009. Even though you pay a co-pay for your generics, it is the retail prices that are added up to reach the donut hole and your drug plan will ding you 30, 40 or 50 bucks for your generic, even though you only paid your co-pay. I have detailed instructions on the blog about how to make your pharmacy NOT add your generics to your Part D Plan. I have all kinds of other information to help people get the best use of their Medicare coverage plans by clicking on the category they want to read about on the left hand side of the screen.

Also, please do not take our word for it, because if you read our Testimonials we get literally everyday, you can see how other people feel about our services. That is what means the most to me! You can click on the Testimonials red box on the website.

If you wish, you can go to www.OverTheHillCarPeople.com and click on Bulletin Boards and then on My Part D USA to read the topics I have on their website.

I will get out some hard copies of materials for you that we used in the workshops with GM retirees. You can see what one of our comparisons looks like and how we can help you if you so decide to call on us.

Again, Mr. Austin, I want to thank you for contacting me and please let me know if you have questions. I'd be happy to assist you in any way.

Best Regards, Karyn Blake