

Aid and Attendance Benefit *A Little Known Veterans Resource*

While it is not as well-known as many other military benefits, the VA Aid and Attendance benefit provides much needed assistance to individuals who require the regular care of another person to help with bathing, meal preparation, dressing, medication monitoring and other activities of daily living. This benefit is available to Veterans and their surviving spouses who live in assisted living communities, residential care homes and those receiving personal in-home care.

Any wartime Veteran with 90 days of consecutive active-duty service honorably discharged with one day of active duty during wartime is eligible for this benefit. Also eligible are Reservist or National Guard Veterans activated during wartime for 90 days and

surviving spouses of Veterans if married at the time of their Veteran's death.

Proof of the need for

assistance with activities of daily living due to illness, injury or mental illness is required. Certain income qualifications also apply, however most unreimbursed expenses such as insurance premiums, the cost of assisted living, nursing home, or in-home care can help reduce the counted income. Other qualifications may

apply but each case is decided on the facts of the individual's circumstances.

Veterans and their spouses may qualify for the following benefits:

- Veteran: up to \$1881/month.
- Surviving spouse: up to \$1210/month
- Married couple: up to \$2700/month



Veterans and their spouses may qualify for monthly benefits.

INSIDE:

- Prescription Costs Out of Reach?
- Ending Surprise Medical Bills
- Make the Most of Extra Dental Benefits
- Free Covid Test Kits

For more information or help applying for benefits, please contact the Veterans Service Commission in your county. In Lake County, Ohio the phone number is 440-350-2904 or 1-800-899-5253. You can also visit their website at www.lakecountyohio.gov/veteran-services/



Dear Friends,

Can you believe it is 2022? Where did the last year go? Let us all hope things return to something resembling normal this year.

As it is every year, the last two months of the year were a blur for us. Between Open Enrollment season and the holidays, we were constantly busy and your kindness during this time brightened our days. Cecelia, Shireen and I want you to know how much we enjoyed all the gifts of bakery, cookies, candies and 'beverages' that you gave us. Even more, we appreciate your understanding and patience when appointments got delayed or things did not go as expected.

Despite it being such a hectic time, I always enjoy talking to so many of my customers. In many instances, it is my once-a-year chance to do so. Some of you have been with me from the beginning and I cannot tell you how much I appreciate your loyalty. I always tell my friends and family that my customers are the best.

Wishing you all the best in 2022!

Sincerely,
Laura Mutsko

P.S. Many of you have asked about Shireen. Shireen welcomed her daughter, Amelia, to the world on January 14. Mom, Dad and baby are all doing great.

Prescription Costs Out of Reach?

Relief may be a phone call away.

The Northeast Ohio Drug Repository, also known as the Prescription Assistance Program of Ohio, is here to help you with your prescription costs in a big way. This program provides clients with much needed Rx medications for a flat fee of \$10 per prescription per month.

Sound too good to be true? Here's how easy the program works. Ohio residents who find their prescription costs eating up their budget can call Dawn Nickerson at 440-350-1470 to apply for the program. Once their application is approved, they will begin receiving their medications delivered directly to their home through the U.S. Mail. To make things as easy as possible, the program manager helps walk applicants through the application process over the phone, avoiding long delays

for processing.

While not every prescription medication is available every month, the program maintains an inventory of a long list of prescriptions. You can find

this list posted on their website at <https://papofohio.com/>. No controlled substances or diabetic supplies are provided through the program.

To apply, call 440-350-1470 Please leave a message and your call will be returned as soon as possible. You must be a resident of Ohio. Income

guidelines are based on a sliding scale and determined on a case-by-case basis.

The Prescription Assistance Program of Ohio has been made possible in part through the support of the United Way of Lake County, United Way of Geauga County, Lake County Medical Alliance, Visiting Nurse Association of Ohio, and Retired Senior Volunteer Program of Lake County.

We never want to see anyone in Ohio go without their prescription medications because they cannot afford them. We encourage people to call us and take advantage of our resources.

Friends of Mutsko Insurance Services

We enjoy doing business with people and companies who share our standards and serve their customers with honesty and respect.

This month, I would like to acknowledge. . .

Jerry Gorka, Realtor

440-487-8051 • terrygorka@homesmartohio.com

The Niemi Team - Home Smart Real Estate

If you would like to have your business mentioned as a "Friend of Mutsko Insurance" in our newsletter and on our web site, send me an email at lmutsko@mutskoinsurance.com

Ending Surprise Medical Bills

The No Surprises Billing Act went into effect on January 1, 2022. It provides new federal protections against surprise medical bills and prohibits balance billing for certain out-of-network care.

Surprise bills often occur when a patient goes to a facility that is in-network with their insurance company but receives services at that facility from an out-of-network provider. They are then surprised by medical bills not covered by their insurance plan. We often see this in emergency situations when the patient does not have a choice in their care.

It also occurs when, for example, an out-of-network anesthesiologist works with an in-network surgeon or an out-of-network radiologist reads an

X-ray ordered by an in-network doctor.

DOES THIS ACT COVER MEDICARE BENEFICIARIES?

The No Surprises Billing Act covers people enrolled in private large and small group health plans, self-insured health plans, and Federal Employee Health Benefits plans. Some plans bought under the Affordable Care Act (ACA) are also covered. People who are covered by Medicare, Medicare Advantage plans, Medicaid, Veterans Affairs Health Care, or TRICARE already have all these protections.

WHAT DOES THE "NO SURPRISES BILLING ACT" DO?

The act protects you in the following ways. **1.** Private insurance plans are required to

apply in-network cost-sharing for out-of-network claims for emergency care.

2. Providers are prohibited from billing patients more than the in-network amount for surprise medical bills. **3.** It provides a process for insurers and providers to resolve disputes about charges and payments.

KNOW WHAT YOU ARE SIGNING.

Be aware that out-of-network providers may ask you to sign a waiver allowing them to balance bill you for medical charges. If you sign a Notice and Consent to Balance Bill, you waive your right to protections under the No Surprises Billing Act. That means the provider can bill you for the full out-of-network amount and take steps to collect it.

For more details on the No Surprises Billing Act, please go to <https://www.cms.gov/nosurprises/consumers/new-protections-for-you>.

Make the Most of Extra Dental Benefits

A popular benefit for Anthem Advantage plan members has always been their dental care coverage. The biggest complaint members had was that the coverage included in the plan was just not enough to cover their costs.

I have some good news for all my Anthem MediBlue Preferred Plus (HMO) and the MediBlue Preferred (HMO) members that is guaranteed to improve your smile. In the 2022 plan, Anthem has expanded its Preventive Dental Services coverage for MediBlue Preferred Plus (HMO) and the MediBlue Preferred (HMO) plan members and now covers 2 oral exams, 2 cleanings, 1 dental x-ray, and 1 fluoride treatment every year.

Anthem 

MORE COVERAGE

Both MediBlue Preferred Plus and Medi-Blue Preferred plans now include an allowance

up to \$1500 for covered comprehensive

dental services each year. Doctors and Dentist in the Preferred Plus plan are at zero copay. Doctors and Dentists in the Preferred plan are at 50% coinsurance for Restorative and Extraction services and 70% coinsurance for Endodontics, Periodontics, Crowns and Denture services.

You can use this \$1500 allowance for extra exams, cleanings, x-rays, crowns, fillings, bridges, implants, dentures and more.

STACKING BENEFITS

Your new, improved Anthem benefits go beyond Original

Medicare with Anthem Essential Extras. This year, you have a new choice, the \$500 Flex Account Master Card Debit Card to cover out-of-pocket Dental, Vision and Hearing costs. The \$500 Flex Account card is an option in both MediBlue Preferred Plus and Medi-Blue Preferred plans.

If you choose the Flex Account as your Essential Extra option, you can stack this benefit with your \$1500 comprehensive dental coverage, giving you a \$2000 annual allowance for dental services. By stacking these benefits for your dental coverage, you may have sufficient coverage for your dental needs and no longer need any Optional Enhanced Dental and Vision Coverage that costs you more.

If you need help evaluating your optional coverage, please contact me. Anthem's plans give you choices, so you get the options and services you need the most and I am here to help you with those choices.

Pasta for Puppies!

RETURNS

MONDAY, APRIL 11, 2022



Our favorite fund raising event is back! If you are still holding tickets from the canceled 2020 event, please call Linde at 440-951-2468 and let her know if you will be attending the event this Spring!

How to Get FREE CovidTest Kits

Each household in the U.S. can now order four free COVID-19 at-home tests shipped directly to their home at no cost! All you need to do is visit COVIDtests.gov and enter your contact information and mailing address. Those who may have difficulty accessing the internet or need additional help can call 1-800-232-0233.

The tests are rapid antigen “at-home” or “self” tests — not PCR tests which require a lab drop-off. These provide your test results within 30 minutes.

Guard against scammers trying to steal your personal information. When ordering tests, use the official, secure government website: <https://COVIDtests.gov>. Watch out for phone scammers, too. If you get a phone call requesting information so that free at-home tests can be mailed to you, hang up — it’s a scam!

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