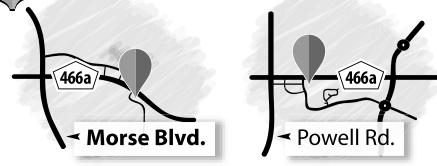
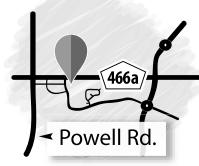


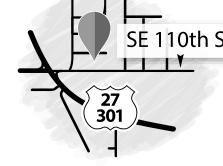
## THE VILLAGES HEALTH



**Colony  
Care Center**  
280 Farmer  
Place, 674-1710



**Pinellas  
Care Center**  
2485 Pinellas  
Place, 674-1720



**Bellevue  
Care Center**  
5051 SE 110th Street,  
674-1730



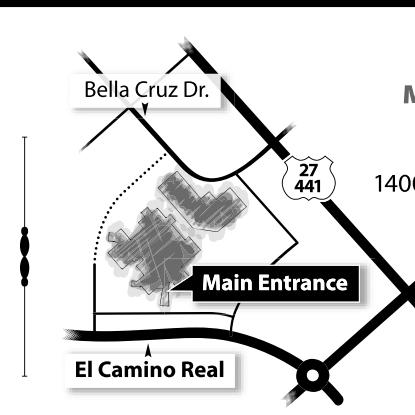
**Santa Barbara  
Care Center**  
1575 Santa Barbara  
Blvd., 674-1740



**Mulberry Grove  
Care Center**  
8877 SE 165th Mulberry  
Lane, 674-1750



**Lake Sumter Creekside  
Care Center**  
1050 Old Camp Road,  
Building 100, 674-1760



## MEDICAL CAMPUS

**Specialty Care Center**  
1400 N. U.S. Highway 27/441,  
Building 810, 674-8731

**The Villages  
Regional Hospital**  
1451 El Camino Real,  
751-8000  
**Urgent Care:** 751-8863

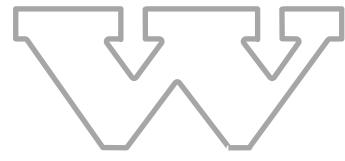
# america's healthiest hometown



Pete Clarkson, CEO of UnitedHealthcare Medicare & Retirement in North/Central Florida, talks about Medicare at Savannah Center in September 2014.

## Learning the Facts About Different Medicare Plans

Pete Clarkson, CEO of UnitedHealthcare Medicare & Retirement in North/Central Florida, offers answers to frequently asked questions.



### What are the differences between Medicare Advantage and Medicare supplement plans?

This is one of the most common questions I get from Medicare beneficiaries. Understanding the differences between Medicare supplement and Medicare Advantage plans, and knowing which option is best for you, can be confusing. And you'll sometimes hear Medicare Advantage referred to as a Medicare supplemental policy, which only adds to the confusion.

Medicare supplement is private health insurance that helps pay some of the costs that original Medicare doesn't cover, like co-payments, coinsurance and deductibles. Generally speaking, original Medicare covers about 80 percent of a beneficiary's Part B health care costs, leaving the remaining 20 percent for the beneficiary to cover out of his or her pocket. Medicare supplement insurance is designed to fill in that gap in original Medicare coverage. This is why it's sometimes referred to as Medigap.

Many people find Medicare supplement plans appealing because they can minimize

their out-of-pocket health care costs, making their spending more predictable. Medicare supplement plans also allow beneficiaries maximum flexibility in the doctors and hospitals they can access for care. There are no networks and referrals are not required. People who have Medicare supplement can visit any health care provider that accepts Medicare patients.

Medicare Advantage, at its essence, is an all-in-one plan. It combines your Part A and Part B benefits into one plan, and most Medicare Advantage plans also include prescription drug coverage. Many people like the convenience and simplicity of wrapping all of their coverage into one plan and having just one insurance card to carry in their wallet.

Medicare Advantage plans usually offer additional benefits beyond what you'll find in original Medicare, such as hearing aids, gym memberships and hearing, vision and dental care. These extra benefits can help Medicare Advantage members maximize their health and also save some money. And some Medicare Advantage plans are available for a \$0 monthly premium, meaning members get additional benefits without having to pay more than their standard Part B monthly premium.

Another key differentiator of Medicare Advantage plans is that they usually have a network of doctors and hospitals where their members can access care. This network structure allows the plans to coordinate their members' care, with the goal of



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**PETE CLARKSON**  
CEO of UnitedHealthcare  
Medicare & Retirement  
in North/Central Florida



**COMING SEPT. 6**  
Villages Health  
patients offer  
their thoughts on  
receiving patient-  
centered care.

ensuring members receive the care they need at the right time and in the most appropriate setting. Ultimately, this can help improve health outcomes. If you access care outside of the network, you'll typically have to pay a higher cost.

Perhaps the simplest way to think about the difference between Medicare supplement and Medicare Advantage is that you add Medicare supplement to your Original Medicare coverage, whereas Medicare Advantage takes the place of your Original Medicare coverage.

### I have diabetes. Is there a special kind of Medicare plan for people like me?

If you have a chronic condition such as diabetes, chronic heart failure or end-stage renal disease, you may qualify for a certain type of Medicare Advantage plan called a Special Needs Plan. These plans are designed to help you live a healthier life and lower your health care costs. "Special needs" is in the name because these plans provide more comprehensive support that's customized to help meet the needs of people who are managing a chronic condition.

Some plans offer a health care team to help coordinate members' care and make sure they're getting the treatments and medications they need. If you think you could benefit from a Special Needs Plan and want to know if you're eligible, you can explore the options available in your area using the plan finder on medicare.gov.

## MEET A DOCTOR

**Dr. Kenneth Henschel** is a neurologist at the Specialty Care Center. He earned his medical degree from the University of Pittsburgh School of Medicine and completed his internship at Allegheny General Hospital in Pittsburgh, followed by his neurology residency at State University of New York at Buffalo.



1

### Why did you decide to become a doctor?

Medicine is really a great field in the sense that it is both humanities and science. It's really a combination of the two. One of the first things that someone who's going through their higher education has to figure out is, are they a science person or are they a humanities person? I decided that I was both. I liked the sciences and I'm good at them, but I also wanted to be working directly with people. Medicine allows me to do that.

2

### Why did you choose the field of neurology?

Neurology is something I fell into, mainly because there wasn't a formula.

There wasn't any cookbook method of determining how to interact with the patient, what to expect from the patient or how to manage the patient. That's distinct from some other areas of medicine where it seemed like things were predetermined once a chief complaint was identified. Like with chest pain, immediately certain things come into play in the algorithm of deciding what to do with the patient. Neurology, on the other hand, is pretty open with regard to how to proceed next. It has to do with the process that we call localization: Where exactly is the problem located? Is it in the brain, the brain stem, the spinal cord, the nerve roots, the nerves, the junction between the nerves and the muscles, which we call neuromuscular junction, or the muscles? Or is it something else outside of that system? That's something that I very much enjoy figuring out for each patient.

3

### What types of things do neurologists treat?

We treat everything from cognitive assessments, such as dementia or memory loss, to things on the opposite end of the spectrum, such as carpal tunnel syndrome, which is basically a condition where a nerve in the wrist is trapped under a ligament.

## ASK A PROVIDER

### What is your personal philosophy of health care?

**Answer Provided by**  
**DENEAL SULLIVAN**  
Pinellas Care Center  
manager



In my role as a manager, I am the coach. So it is to make sure that my staff has the resources and the knowledge and everything that they need to take the best care of the patients and allow them to really live out their dreams.

**Answer Provided by**  
**AUTUMN TRIPP**  
Colony Care Center  
manager



We're part of the team. We're all here together to try to figure out what it takes to make somebody healthy or happy. Everyone defines that differently. So it isn't up to us to judge. It's up to us to help them meet their goals - whatever they are.

**Answer Provided by**  
**JENNIFER PAVLIK**  
Mulberry Grove Care Center  
manager



We're here for the patient. We're here to heal them. We also have a responsibility to keep them accountable for their care, as well, and to help with that. It's a collaborative approach. It's not just us telling them what they need to do. We need them to engage with us.

**Answer Provided by**  
**SHERI HARWOOD**  
Creekside Care Center  
manager



A person has to be involved in their own health care. That's the way that they can help their physician manage it to the best of their abilities to get the best health outcomes. If you're someone who just says, 'Tell me what to do,' then you're not personally invested. If you decide and craft a plan for your health care, then the two of you can manage that together to get the best health care outcomes for you.

## DID YOU KNOW?

**Dr. Tomas Perez**, a primary care physician at the Pinellas Care Center, is a big fan of the 1994 hit movie, "The Shawshank Redemption."

