# Medicare Comparison Guide

Two common paths, side by side, in plain language. This guide explains how each approach generally works and gives you the questions to ask — it does not tell you which one is better, because that depends entirely on your doctors, your prescriptions and your priorities.

## Who this is for

- People choosing between Original Medicare and Medicare Advantage
- People reviewing coverage they already have
- Caregivers comparing options on someone's behalf

## What's included

- A side-by-side comparison of how each path generally works
- What a Medicare Supplement (Medigap) policy is for
- How prescription drug coverage fits each path
- Questions to ask before you choose
- A place to record what you learn

## Two general paths

Most people end up on one of two paths. Neither is universally better. The right one depends on which doctors you want to keep, which prescriptions you take, how you feel about paperwork and networks, and whether you prefer predictable monthly costs or lower costs when you are healthy.

| | Original Medicare (often with a supplement and a drug plan) | Medicare Advantage (Part C) |
|---|---|---|
| **How coverage is delivered** | Coverage comes from Medicare itself, with optional private policies added alongside it. | A private plan approved by Medicare provides your Part A and Part B coverage in one plan. |
| **Choice of providers** | Generally any provider in the United States who accepts Medicare. | Usually a network, and often a service area. Costs and coverage can differ outside the network. |
| **Prescription drugs** | Usually added by enrolling in a separate Part D drug plan. | Often included in the plan, but not always — check each plan. |

| | Original Medicare (often with a supplement and a drug plan) | Medicare Advantage (Part C) |
|---|---|---|
| **Extra benefits** | Not typically included; some people add separate dental or vision coverage. | Some plans include extras such as dental, vision or hearing. Details vary widely by plan. |
| **How costs tend to feel** | More predictable month to month once a supplement is in place. | Often a lower monthly premium, with costs when you use care. |
| **Referrals and approvals** | Generally no referral needed to see a specialist who accepts Medicare. | Some plans require referrals or prior approval for certain services. |
| **Reviewing each year** | Supplements generally continue; drug plans should be reviewed each year. | Plan details can change each year — review your plan's annual notice. |

## What a Medicare Supplement (Medigap) policy does

A Medicare Supplement policy is private coverage that works alongside Original Medicare to help with certain costs Original Medicare leaves to you. It is not a stand-alone plan, it does not include prescription drug coverage, and it is not used with Medicare Advantage.

- Supplement policies are standardized by letter, so the same letter offers the same basic benefits from any company.
- Companies can differ on price, service and how they handle rate changes over time.
- The rules and timing for buying a supplement — and whether health questions apply — depend on your circumstances. Confirm your situation before you assume you can switch later.

## Prescription drug coverage

- Drug plans cover different medicines, and each plan has its own list.
- The same medicine can be handled very differently from one plan to the next.
- Some plans require you to try another medicine first, or to get approval.
- Pharmacies are not all treated the same by every plan.
- Check every medicine you take by name and dose, every year.

## Questions to ask before you choose

- ☐ Are all of my doctors and my hospital included, confirmed with their offices?
- ☐ Is every one of my prescriptions covered, and under what conditions?
- ☐ What happens if I need care while travelling or living elsewhere part of the year?
- ☐ Do I need a referral to see a specialist?

- ☐ What is the most I could pay in a difficult year?
- ☐ What can change next year, and how will I be told?
- ☐ If I choose this now, what are my options to change later?

## Record what you learn

### Option A — what I like / what concerns me

### Option B — what I like / what concerns me

### Doctors confirmed (who I called, and when)

### Prescriptions confirmed

### Still to check

## Important information

This resource is general educational information only. It is not insurance, financial, tax, medical or legal advice, and it does not recommend a specific plan or company. Your own situation may be different — talk with a licensed advisor, and confirm details with the plan or with the official government source before you decide.

Plan availability, benefits, networks and rules vary by company, by plan and by county, and can change from year to year. Always confirm details with the plan itself and with Medicare.gov or 1-800-MEDICARE.

We do not offer every available plan in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800-MEDICARE to get information on all of your options.

Prepared by Bleu Sky's Insurance Solutions. Last reviewed 2026-09-04. Questions? Call (813) 921-6609 — consultations are free and carry no obligation.