A FREE GUIDE FROM THE CLEARING

The Medicare Decision Map Starter Pack

Find your situation. See what to check next. Don't go in blind.

A guide for people who want to understand the Medicare decision before they decide — written to be read slowly, printed, and written on.

No plan sales. · No carrier commissions. · No pressure.

THE IDEA BEHIND THIS GUIDE

Just because Medicare starts with Part A *does not mean your decision starts there.*

Part A Part B Part C Part D Plan G Plan N IEP

AEP OEP SEP

> *The letters can wait. The right place to start is wherever you actually are — turning 65, leaving a job, helping a parent, holding a letter you don't understand. Find that first. The alphabet comes later.*

BEFORE YOU BEGIN

A note before you choose a starting point

Use the closest situation as a starting point, not a final answer.

The situations in this guide are meant to *orient* you — to help you recognize the moment you're in and see what usually matters in it. They are not a ruling on your specific case. Real lives are messier than categories, and Medicare has more exceptions than any short guide can hold.

So read for the shape of your situation, not a verdict. Then verify the details that apply to you before you act.

IF YOUR SITUATION FEELS GRAY

If your situation feels gray, mixed, or more complicated than the page in front of you, pause before assuming the general rule applies to you. "Close enough" is a fine place to start reading — it is not a safe place to make a final decision. When in doubt, verify, or bring it to Fern.

HONEST BOUNDARIES

What this guide can and cannot do

This guide can help you

A calm place to get oriented.

- ✓ Recognize the Medicare moment you're in
- ✓ Understand why that moment matters
- ✓ See what to check before you act
- ✓ Prepare better questions before calling anyone
- ✓ Know when something needs verification
- ✓ Avoid treating a sales pitch as the whole answer

This guide does not

Where to use official sources instead.

- Recommend a specific Medicare plan
- Rank insurance companies
- Enroll you in coverage
- Replace Medicare.gov or SHIP
- Replace a licensed insurance professional
- Replace employer benefits offices or plan documents
- Cover every Medicare exception

01

START WITH YOUR SITUATION

If you are turning 65

IS THIS YOU?

You're approaching 65 and starting to get mail, calls, or that quiet sense that a clock you can't quite see has started.

WHY THIS MATTERS

Miss the right window or delay for the wrong reason, and costs or coverage gaps can follow you later.

WHAT TO CHECK

- Whether you have other coverage that changes your timing (employer, spouse, VA).
- Your Initial Enrollment Period — the seven months around your 65th birthday.
- Whether Part B should start now or be delayed for a valid reason.

FIRST QUESTION TO ASK

What Medicare deadlines actually apply to me — and which ones don't?

IF THIS IS GRAY

Still working with solid employer coverage? The "sign up at 65" rule may not apply the way the mail implies. Don't assume — confirm how your coverage counts.

IF YOU DO NOTHING

The window can close. A late Part B start can mean a lifelong penalty and a gap in coverage you didn't plan for.

WHERE TO GO NEXT

Verify your timing with Social Security before you enroll or delay. Use the free Medicare tools at joinclearing.com/medicare/tools.

BRING THIS TO FERN

Fern doesn't choose a plan for you. Bring your situation and Fern helps you organize what to check next — inside membership.

02

START WITH YOUR SITUATION

If you are leaving work coverage

IS THIS YOU?

You're retiring, being laid off, or coming off a job's health plan — yours or a spouse's — at or after 65.

WHY THIS MATTERS

Losing job coverage can open a special window to join Medicare — but only if you act inside it, and only if the coverage counted.

WHAT TO CHECK

- Whether your job coverage counts as "creditable" for Medicare timing.
- Your Special Enrollment Period — usually up to 8 months after the coverage ends.
- How COBRA fits in (it often does *not* extend your Medicare window).

FIRST QUESTION TO ASK

When exactly does my Medicare window open and close once this coverage ends?

IF THIS IS GRAY

COBRA and retiree plans can feel like "still covered," but they may not protect your Medicare timing. Confirm before you rely on them.

IF YOU DO NOTHING

Wait too long and you can face a coverage gap plus a lifelong Part B penalty.

WHERE TO GO NEXT

Confirm your dates with Social Security and your benefits office. Take the Medicare Fit Check at joinclearing.com/medicare/tools.

BRING THIS TO FERN

Bring your last day of coverage and your options. Fern helps you map what to check next — inside membership.

START WITH YOUR SITUATION

03 If you're comparing Original Medicare and Medicare Advantage

IS THIS YOU?

You've heard both names, maybe seen the TV ads, and you're trying to understand which path fits your life.

WHY THIS MATTERS

These are two different structures, not two brands. The path you pick shapes your doctors, your costs, and how easily you can change later.

WHAT TO CHECK

- Whether your doctors and hospitals take the plan — and stay in network.
- How each path handles referrals, prior approval, and travel.
- Whether you could switch paths later, and what that would take.

FIRST QUESTION TO ASK

What would I be giving up with each path — not just what I'd get?

IF THIS IS GRAY

Extra perks can be real and still come with networks, limits, or approvals. A benefit is not the whole answer — ask what rule comes with it.

IF YOU DO NOTHING

Defaulting without comparing can lock you into a network or a path that's hard to leave later.

WHERE TO GO NEXT

Compare the tradeoffs with the Medicare Fit Check at joinclearing.com/medicare/tools, then verify networks in plan documents.

BRING THIS TO FERN

Bring your doctors and priorities. Fern helps you see the tradeoffs side by side — inside membership.

START WITH YOUR SITUATION

04 If you're helping a parent, spouse, or someone else

IS THIS YOU?

You're the one making calls, reading mail, and trying to keep someone else's decision from going sideways.

WHY THIS MATTERS

Helping well means gathering the right things first — and knowing what you're allowed to do on someone else's behalf.

WHAT TO CHECK

- What permission or authorization you need to speak for them.
- Their current coverage, doctors, prescriptions, and any deadlines.
- Which decision is actually in front of them right now.

FIRST QUESTION TO ASK

What does this person actually need to decide — and by when?

IF THIS IS GRAY

More than one situation may apply to them at once. Start with the most urgent deadline, not the whole picture.

IF YOU DO NOTHING

Important windows can pass while everyone assumes someone else is handling it.

WHERE TO GO NEXT

Use the worksheets in this guide to gather their details, then see what membership includes at joinclearing.com/membership.

BRING THIS TO FERN

Not sure what to gather? Bring what you have and Fern helps you organize the next step — inside membership.

START WITH YOUR SITUATION

05

If you got a notice, bill, or denial

IS THIS YOU?

A letter arrived — a bill, a denial, a penalty notice, or a plan change — and you're not sure what it means or what it's asking.

WHY THIS MATTERS

Some notices carry deadlines and appeal rights. Reading it calmly, in time, protects options you might not know you have.

WHAT TO CHECK

- What the notice is actually about, and who sent it.
- Any date, deadline, or appeal window printed on it.
- What it's asking you to do — or not do — and by when.

FIRST QUESTION TO ASK

Is there a deadline or appeal window on this — and when is it?

IF THIS IS GRAY

If the language is confusing, don't guess and don't ignore it. Note the date, keep the letter, and verify before you respond.

IF YOU DO NOTHING

A missed appeal window or due date can turn a fixable issue into a permanent one.

WHERE TO GO NEXT

Check the source on the Verify page (p. 16) or with SHIP, then start at joinclearing.com/start.

BRING THIS TO FERN

Bring the letter and the date. Fern helps you find what to check and where to verify — inside membership.

START WITH YOUR SITUATION

06

Two more places people start

If your doctors, drugs, or health needs changed

A new diagnosis, a new prescription, a doctor who left the network — any of these can mean your current coverage no longer fits the way it did.

FIRST QUESTION Does my current plan still cover my doctors and prescriptions next year?

Where to go next — Review your plan's yearly notice and check drugs and networks during Open Enrollment. Use the tools at joinclearing.com/medicare/tools.

If you're not sure where to start

That's a real and common place to be. You don't need to understand all of Medicare to take a first step — you just need to name what's in front of you.

BRING THIS TO FERN

Start with the worksheet on the next page. If it still feels unclear, bring what you wrote to Fern — inside membership at joinclearing.com/membership.

THE CLEARING DECISION MAP

Find your situation, then start there.

YOU ARE HERE

- Turning 65
- Leaving work coverage
- Comparing the two paths
- Helping someone else
- A notice, bill, or denial
- Something changed

1. **See why this moment matters**
   Understand what's actually at stake right now.
2. **Check before you act**
   Gather your dates, doctors, drugs, and any notices.
3. **Verify with an official source**
   Confirm the rule that applies to you — don't assume.
4. **Bring it to Fern, then decide**
   Organize what to check next. Then take your time.

This is the starter map. The full, interactive Decision Map lives at joinclearing.com/medicare/tools.

WORKSHEET

My Medicare Moment

Start by naming where you are. The plan talk comes later.

Check every line that sounds like you right now — more than one is normal. Then answer the prompts in your own words. There are no wrong answers here; this page is just for you.

WHERE I AM RIGHT NOW

- [ ] I am turning 65.
- [ ] I am still working past 65.
- [ ] I am comparing Original Medicare and Medicare Advantage.
- [ ] I am thinking about switching back from Medicare Advantage.
- [ ] I received a notice, bill, or denial.
- [ ] I have an employer credit, stipend, HRA, or exchange plan.
- [ ] I am leaving work coverage.
- [ ] I am covered through a spouse.
- [ ] I am reviewing what I already have.
- [ ] I am helping a parent, spouse, or someone else.
- [ ] My doctors, prescriptions, or costs changed.
- [ ] I am not sure where to start.

IN MY OWN WORDS

The question I need answered first is —

The date or deadline I'm worried about —

Who (if anyone) is pressuring me to decide —

Before I decide, I need to verify —

CHECKLIST

Before you call anyone

Walk in prepared. It changes the whole conversation.

GATHER THESE FIRST

- [ ] My Medicare situation right now
- [ ] My Medicare or current plan cards
- [ ] My doctors and specialists
- [ ] My preferred hospitals
- [ ] My prescriptions, dosages, and pharmacy
- [ ] My monthly budget comfort zone
- [ ] My worst-case health year concern
- [ ] Any notices, bills, denials, or plan letters
- [ ] Any deadlines I can see
- [ ] What I'd regret if I chose too quickly

THE ONE QUESTION WORTH ASKING OUT LOUD

"Can you explain what I'd be *giving up* with this option — not just what I'd get?"

BEFORE YOU BRING IT TO FERN

Try to bring a situation, not just a vague worry. Even a half-filled worksheet gives Fern something real to work from.

WORKSHEET

What I need this coverage to protect

Name what matters before anyone names a plan.

DOCTORS & CARE

PRESCRIPTIONS

MEDICATION	DOSE	PHARMACY

BUDGET

LIFE FACTORS (TRAVEL, FAMILY, WORK)

WHAT I'D MOST REGRET LOSING

WORKSHEET

Benefit Claim Check

The benefit is not the whole answer. Ask what rule comes with it.

THE BENEFIT BEING DISCUSSED

ASK ABOUT EACH ONE

- [ ] Who told me about it?
- [ ] Who qualifies for it?
- [ ] Is there a network?
- [ ] Does it apply in my county & plan year?
- [ ] Was it in writing? Where?
- [ ] Is there a dollar limit?
- [ ] Is prior approval required?
- [ ] Does unused value roll over?

WHO CAN VERIFY THIS?

WHAT I STILL NEED TO CONFIRM

KEEP THIS ONE HANDY

This page works as a standalone check any time a plan extra sounds great. If you can't find the rule in writing, treat the benefit as unconfirmed.

TRUSTED SOURCES

Where to verify before you act

Verifying isn't a warning — it's just how careful people make calm decisions. These are the places to confirm what applies to you.

Medicare.gov

The official source for coverage, plans, and enrollment.

Social Security

Enrollment timing, Part B, and late-enrollment questions.

Your employer benefits office

Whether your job coverage counts, and how it coordinates.

Plan documents

The real rules: networks, limits, approvals, formularies.

SHIP

Free, unbiased Medicare counseling in your state.

SMP

Help spotting and reporting Medicare errors or fraud.

A licensed insurance professional

For plan specifics — ask what each option gives up, too.

Your state insurance department

Oversight and consumer protection where you live.

OFFICIAL NOTES & VERIFY POINTS

A few rules worth knowing — and verifying

Plain-English summaries, not legal advice. Rules and dates change — always confirm the current details for your situation.

Initial Enrollment Period	The 7-month window around your 65th birthday to sign up. Why it matters: missing it can delay coverage. · Verify at Medicare.gov / Social Security.
Part B late penalty	Sign up late without valid coverage and a surcharge can apply — often for life. Verify whether your coverage protects your timing · Social Security.
Part D late penalty	Going without creditable drug coverage can add a permanent Part D surcharge. Verify "creditable" status with your plan or Medicare.gov.
Medigap open enrollment	A one-time window where Medigap is easiest to get, regardless of health. Timing is strict · Verify with Medicare.gov or SHIP.
Advantage & Part D marketing	There are rules on how plans may market to you. A pitch is not a plan document. Verify any claim in writing · Report concerns to SMP.
SHIP & SMP	Free state programs: SHIP for unbiased counseling, SMP for fraud and errors. Find your state's program via Medicare.gov.

MEMBERSHIP, SIMPLY

When to bring this to Fern

Fern doesn't choose a plan for you. Fern helps you organize what to check next.

- [ ] More than one situation here applies
- [ ] Someone is pressuring you to decide
- [ ] A notice or bill includes a deadline
- [ ] You're comparing paths and want the tradeoffs
- [ ] Your situation feels gray or in-between
- [ ] A benefit sounds useful but unclear
- [ ] You're helping someone and unsure what to gather
- [ ] You want help preparing questions before a call

THE WHOLE IDEA

Ask Fern what to check next.
Then verify before you act.

See what membership includes at joinclearing.com/membership.

YOUR NEXT STEP

You don’t have to figure out all of Medicare today.

That is not the assignment.

1. Find your situation.
2. Write down what matters.
3. Use the free tools.
4. Prepare your questions.
5. Verify the answer before you act.

When you’re ready, start here.

Use the free tools →

See what membership includes

Learn why The Clearing exists — joinclearing.com/why

Join The Clearing — joinclearing.com/join

A final note

We hope this guide is useful. You may share the original, unmodified version with someone who needs a calmer place to start.

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The Clearing does not sell Medicare plans, rank carriers, or earn commissions. This Starter Pack is for educational purposes only. It does not replace Medicare.gov, SHIP, a licensed insurance professional, your employer benefits office, plan documents, or legal, medical, or financial advice. Medicare rules, costs, networks, formularies, and enrollment windows can change — always verify before you decide.

Take your time.

That is not just a nice idea. It is protection.