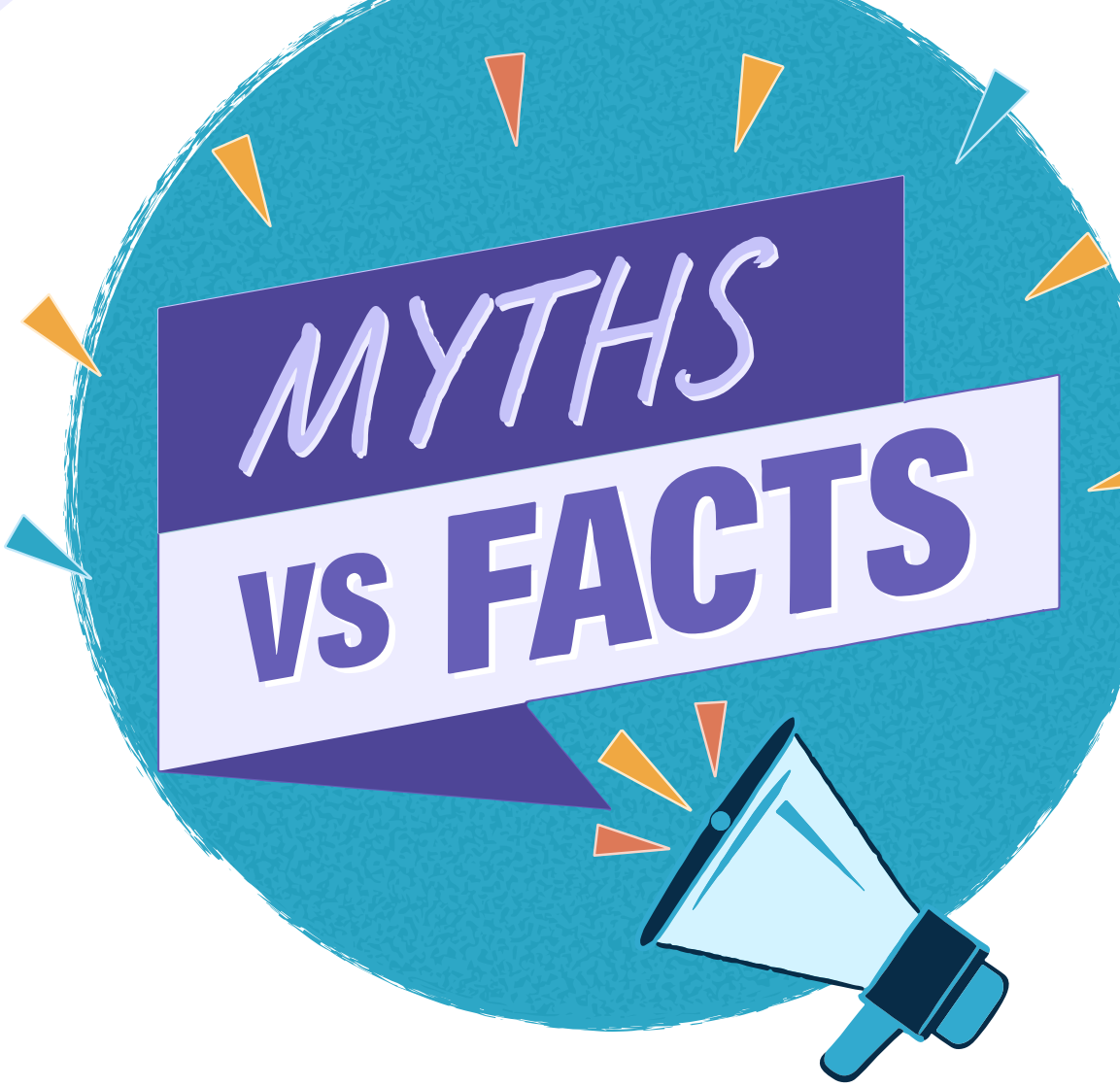


The 5 Medicare Myths That Still Trip Up Smart People

Your No-Panic Reality-Check Guide

Smart retirees still fall for five costly Medicare myths—auto-start at 65, “free” coverage, same-old Advantage plans, harmless brokers, and easy switching. Learn the real rules, life-time penalties, and see myth-busting math in minutes with MyALEXHealth™.

Why “smart” people stumble

You’ve negotiated mortgages, rebalanced portfolios, and maybe even filed taxes on your phone. Yet when it’s time to enroll in Medicare for the first time, otherwise savvy adults hit the same land mines. That’s not on you. It’s on a system built around jargon, partial truths, and alphabet-soup complexity.

Below are the five myths we see derail even the most spreadsheet-loving retirees—plus the reality checks to keep you out of trouble.

Why These Myths Matter If You’re Turning 65

Pain Point	What Can Go Wrong	Lasting Damage
Missed enrollment window	Lifetime Parts B & D surcharges	Extra +10% / yr (Part B) & +1% / mo (Part D) forever
Assuming Medicare is “free”	Surprise premiums & IRMAA bills	Blows a retirement budget by $2k-$4k/yr
“Any Medicare Advantage plan will do”	Doctor or drug suddenly out-of-network	Care delays, $$$ out-of-pocket
Blind faith in brokers	Higher-commission plan wins	Pay more, lose benefits
Thinking you can switch anytime	Locked into wrong plan for a year	Underwriting or denial later

Myth-by-Myth Reality Check

1. "Medicare starts automatically at 65."

Truth – Only if you're already drawing Social Security. Everyone else must enroll during a **7-month IEP** (Initial Enrollment Period) around their birthday.

How to Stay Safe

- Circle a calendar date 6 mo. before 65.
- Confirm your employer plan is creditable before delaying Part B.

With MyALEXHealth™

- Enter your birth month once; ALEX highlights your exact deadline and flags penalties if you plan to delay.

2. "Medicare is free."

Reality – Part A may be $0, but Part B runs **$202.90/mo** (in 2026) and climbs with IRMAA (Income Related Monthly Adjustment Amount). Add Part D + Medigap/MA copays and you can out-spend your old work plan.

How to Stay Safe

- Project full-year costs—premiums, drugs, deductibles, IRMAA.
- Time Roth conversions/stock sales so IRMAA bracket jumps don't bite two years later.

With MyALEXHealth™

- One chat with ALEX shows total cost (premiums + drugs + IRMAA + maximum out of pocket) before you enroll.

3. "All Medicare Advantage plans are basically the same."

Reality – Networks, formularies, and extras vary—even across one ZIP Code.

How to Stay Safe

- Verify every doctor, pharmacy, and med against each plan.

With MyALEXHealth™

- ALEX cross-checks providers & prescriptions in real time and throws red flags on any mismatch.

Myth-by-Myth Reality Check

4. "Brokers are free, so there's no downside."

Reality – Brokers are paid by carriers. Great ones disclose all plans; many steer you to higher-commission options.

How to Stay Safe

- Ask for a written list of every available plan **and** the broker's payout.
- Verify with an unbiased digital comparison tool.

With MyALEXHealth™

- Plan-agnostic, quota-free guidance—commission data never enters the algorithm, so you see every option.

5. "If I don't like my plan, I can switch whenever I want."

Reality – You usually get **one** Annual Enrollment Period (Oct 15 - Dec 7). Medigap carriers can underwrite—or deny—you after your first 6-month window.

How to Stay Safe

- If doctor freedom matters, choose Original Medicare + Medigap while you're healthy.
- Schedule a yearly check-in every October.

With MyALEXHealth™

- ALEX highlights lock-in rules, underwriting risk, and penalties so you pick a plan you won't regret.

Fast Facts & Penalties at a Glance

Penalty	When It Hits	Financial Bite	Lasts
Part B Late-Enroll	Miss IEP & no creditable coverage	+10% of standard premium per 12-mo gap	Lifetime
Part D Late-Enroll	63+ days with no drug coverage	+1% of base premium per month missed	Lifetime
IRMAA Surcharge	Income > $109k / $218k	$81–$487 +/mo (Part B) + $14.50–$91 /mo (Part D)	Year-by-year

Knowing the Myths ≠ Dodging Them

Just turning 65 or brand-new to Medicare? Dodging these traps starts with seeing the math ***before*** you click “Enroll”:

- Transparent cost projections (premiums + drugs + IRMAA)
- Real-time doctor & drug matching
- Penalty and deadline alerts baked in

That’s exactly why we built **MyALEXHealth**—no sales pitch, no mystery acronyms.

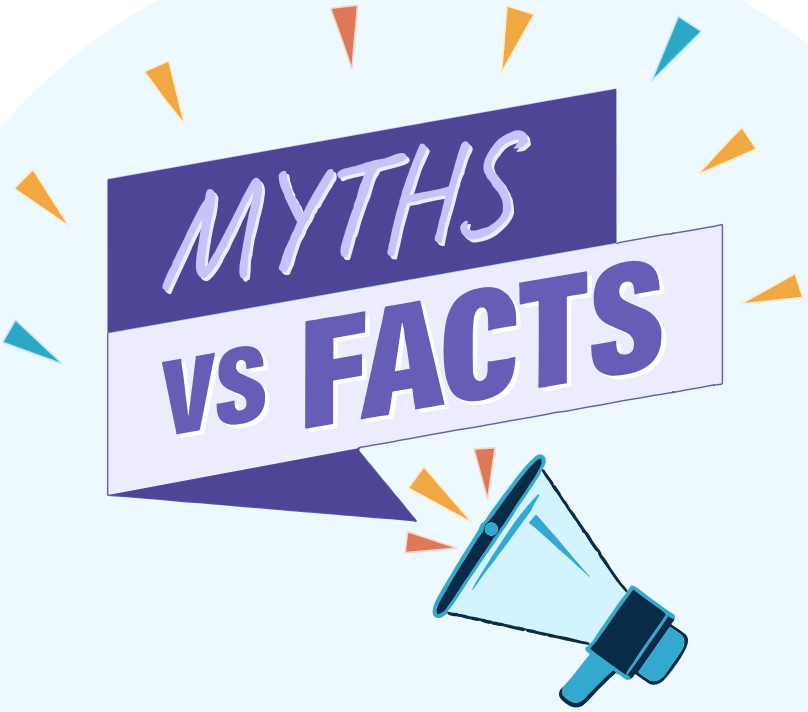
FAQ

- **Does Medicare start automatically at 65?**
  Only if you already draw Social Security. Everyone else must enroll during a 7-month Initial Enrollment Period around their 65th birthday or face lifetime surcharges.
- **Is Medicare free?**
  Part A may be premium-free, but Part B costs $202.90/mo in 2026 and can rise with IRMAA. Add Part D and supplemental coverage and many retirees pay more than they did under employer insurance.

Ready to Bust Every Myth for Good?

With ALEX, turn Medicare confusion into confidence in under 30 minutes.

Launch ALEX now >



We work with multiple Medicare plan carriers including:

Aetna Inc. • Devoted Health, Inc. • Humana Inc. • Mutual of Omaha Insurance Company

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Enrollment in a plan may be limited to certain times of the year unless you qualify for a Special Enrollment Period or are in your Medicare Initial Enrollment Period.

Medicare Advantage and Part D plans are insured by a Medicare Advantage HMO, PPO and PFFS organization with a Medicare contract and/or a Medicare-approved Part D sponsor. Enrollment depends on the plan's contract renewal with Medicare.

We do not offer every plan available in your area. Currently we represent 4 organizations which offer 1,056 products in your area. Please contact *Medicare.gov* or 1-800-MEDICARE to get information on all your options.

Not all carriers offer these benefits. Plans vary by region and state. Limitations and exclusions may apply.

Medicare Supplement insurance is generally available to individuals age 65 and older enrolled in Medicare Parts A and B. Availability for beneficiaries under age 65 who qualify for Medicare due to disability or End Stage Renal Disease varies by state. Benefits, eligibility, and premiums may vary by state.

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