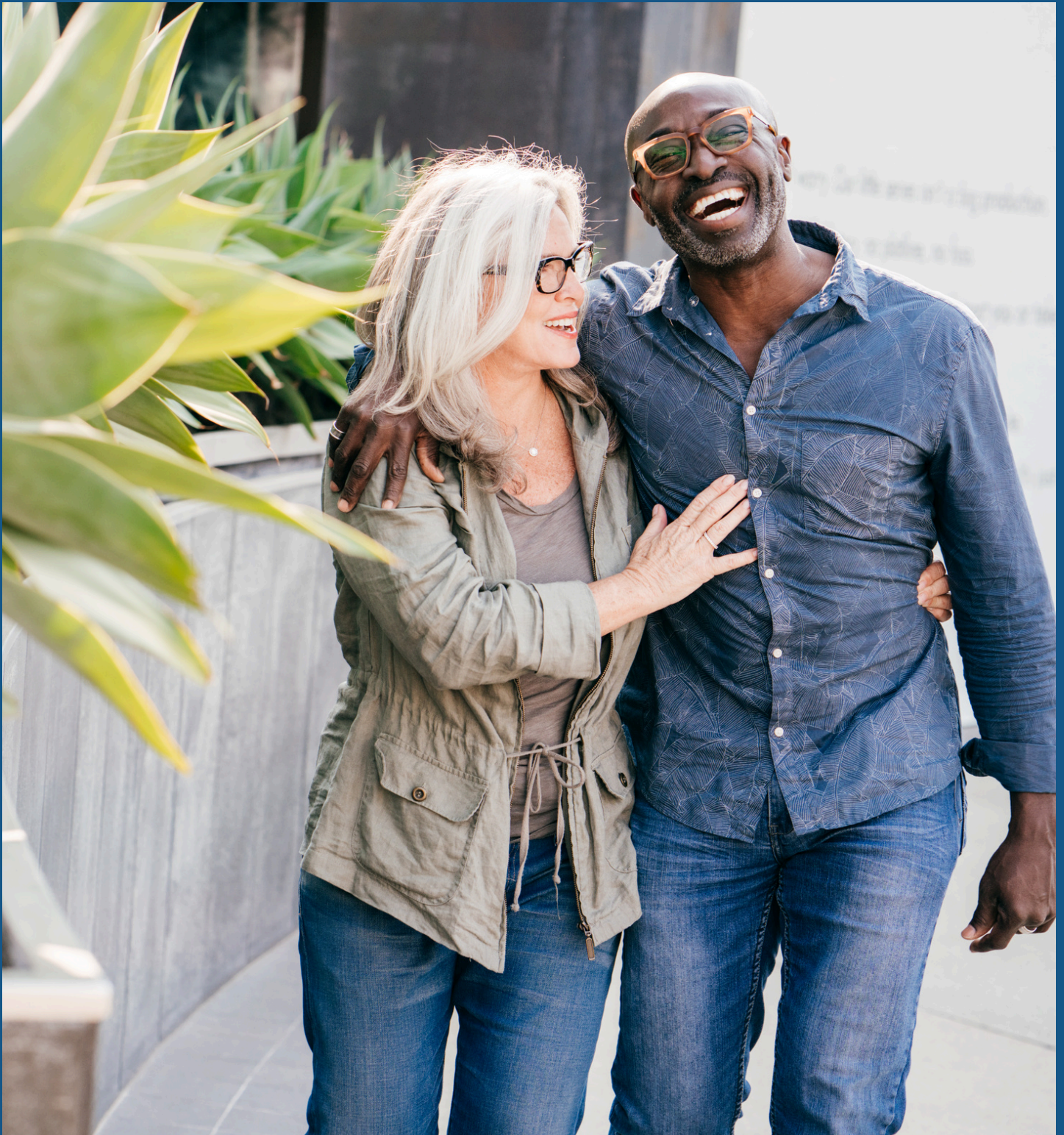


THE COMPREHENSIVE GUIDE



WWW.BEDROCKFG.COM

TO TURNING SIXTY-FIVE



BEDROCKPROPERTY AND CASUALTY



SENIOR SOLUTIONS
LLC

BEDROCKWEALTH MANAGEMENT

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SENIOR SOLUTIONS LLC



Senior Solutions, LLC, the Medicare division of The Bedrock Group, presents the Comprehensive Guide to Turning 65. Bedrock is a Veteran and First Responder-owned full-service insurance agency providing our clients with options for a better retirement. With Bedrock, you can get help with Medicare planning, retirement planning, home, auto, and commercial insurance, and more.

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Congratulations!

Wow. You did it. Congratulations are in order because sixty-five is quite the milestone in your life.

At The Bedrock Group, with our Medicare division, Senior Solutions, LLC, we know that turning sixty-five can be a pivotal time in your and your family's lives. There is much to do. However, for now, take a moment to relax and enjoy your time. You've certainly earned it.

Turning sixty-five means Medicare enrollment and is a significant benefit to you. Enrolling could make a difference if you are still working or have a health plan through your work if you are a veteran and more. However, it could also mean that you are still working, getting ready to retire, or may already be retired. Reaching this age may also bring up questions about your retirement plan. Questions such as what must you do with your pension or 401K? Are annuities a good option? What if you did not have a retirement plan? Is now too late?

The Comprehensive Guide to Turning Sixty-Five is an excellent tool and source for you to learn all the information you need to know, including how to prepare yourself for the constant bombardment of phone calls, mailers, ads, and more. They all promise you something, making it difficult to discern what you need.

We're here to help.

With Bedrock, you can!



How to enroll in Medicare

If you are not automatically enrolled, then there are three ways to apply for Medicare Parts A and B:

- Visit Social Security's website ssa.gov
- By phone. Call Social Security's national customer hotline at 1-800-772-1213.
- In-person. Visit your local Social Security office. Use the agency's locator tool on ssa.gov to find the nearest office.
- **OR, you can call us at 833-905-1060**, and we can provide direction.

To apply for a Medicare Advantage plan (Part C or D) or a Medigap plan, Senior Solutions, the Medicare Division of Bedrock Financial Group, is contracted with all top-tier insurance carriers. We'll review your options to find the one that fits your needs. We always do our services at no cost to you.

How to verify if you are eligible for free Medicare at age sixty-five

You are eligible for premium-free Part A coverage at age 65 if you or your spouse worked and paid Medicare taxes for at least ten years. You get premium-free Part A if you are already getting retirement benefits from Social Security or the Railroad Retirement Board or are eligible to get Social Security or Railroad benefits. Still, you have not yet filed for them. You can also get premium-free coverage if you or your spouse have Medicare-covered government employment.

Remember that while many people get free Part A benefits, everyone who wants Part B coverage must pay. You must also pay a monthly premium for Part C and Part D coverage in addition to your Part B monthly premium.

Medicare has an eligibility and premium calculator that you can access [here](#) to see if you qualify for free Part A coverage.

More information about Medicare Enrollment

To learn the steps you need to take to enroll in the various Medicare programs, go to www.medicare.gov.

If you have questions about Medicare and wish to speak with a licensed advisor, call 833-905-1060.

Various Medicare Programs:

- Original Medicare
- Medicare Supplement (Medigap)
- Medicare Advantage

Does Medicare Start The Month You Turn Sixty-Five?

If you sign up for coverage during the first three months of your Initial Enrollment Period, then your coverage starts the first day of the month you turn 65, unless your birthday is on the first day of the month. If your birthday is on the first day of the month, your coverage starts the first day of the prior month.

If you have to buy Part A coverage, the start dates are slightly different.

If you sign up for Part A (If you have to buy it) and/or Part B this Month:	Your coverage starts:
The month you turn sixty-five	One month after you sign up
One-month after you turn sixty-five	Two-months after you sign up
Two-months after you turn sixty-five	Three-months after you sign up
Three-months after you turn sixty-five	Three-months after you sign up
During the January 1st - March 31st General Enrollment Period	July 1st

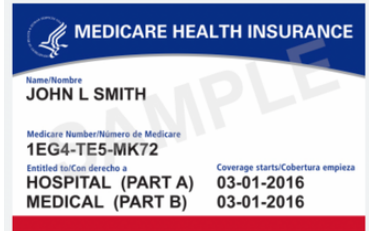
Is it required to sign up for Medicare Part A at age sixty-five?





No. But if you do not sign up during the Initial Enrollment Period, your healthcare coverage may lapse. In addition, if you sign up at a later date, you may have to pay additional penalties for the time that you are signed up.

Do you sign up for Medicare Parts A, B, C, and D at the same time?

No, but you must already be signed up for Parts A and B before signing up for Parts C and D.





Part A Hospital Insurance	Part B Medical Insurance	Part D Drug Coverage	Part C Medicare Advantage
 <p><u>Helps Cover:</u> Inpatient care in hospitals Skilled nursing facility care Hospice Care Home Health Care</p>	 <p><u>Helps Cover:</u> Services from Doctors & healthcare providers Outpatient care Home health care Durable medical equipment Many preventive services</p>	 <p><u>Helps Cover:</u> cost of prescription drugs</p>	 <p><u>Helps Cover:</u> Medicare Parts A + B + D Vision Hearing Dental + more benefits</p>

Medicare has four parts:



Medicare Part A covers medically necessary inpatient hospital stays, care in skilled nursing facilities, hospice care, and some home health care.



Medicare Part B covers certain doctors' services, durable medical equipment (i.e., wheelchairs), preventative care, outpatient services, lab tests and x-rays, and ambulance services. Part A and Part B are often referred to as Original Medicare.



Medicare Part C, also known as Medicare Advantage, is a health plan offered by private insurance companies approved by Medicare to provide Part A and Part B benefits under one plan. Some people get Medicare coverage through a Medicare Advantage plan instead of Original Medicare. Medicare Advantage plans must offer the same level of coverage as Original Medicare and many times will offer expanded benefits such as prescription drug coverage and dental, vision, and wellness programs.



Medicare Part D provides stand-alone prescription drug coverage that works alongside Original Medicare. It is offered through private insurance companies that have contracts with Medicare.





What Are The Medicare Eligibility Requirements?

PART A

If you are 65 or older, you are eligible for Part A coverage at no cost if:

- You currently receive or are eligible to receive Social Security benefits. You must have 40 credits accumulated through the payment of payroll taxes. You earn one credit for every quarter you have worked as long as you meet minimum income guidelines. In other words, 40 credits equal ten years of qualifying work history. If you have less than 40 credits, you can still get Part A coverage, but you will need to pay a premium.
- You currently receive or are eligible to receive railroad retirement benefits.
- Your spouse receives or is eligible for Social Security or railroad retirement benefits. This applies to spouses living, deceased, or divorced from the person seeking coverage.
- You or your spouse worked long enough in a government job where Medicare taxes were paid.
- You are a dependent parent of a deceased child who is fully insured.



PART A - CONTINUED

If you are less than 65 years old, you are eligible for Part A coverage at no cost if:

- You have received or are entitled to receive Social Security disability benefits for 24 months.
- You are getting a railroad retirement board disability pension, and you meet certain conditions.
- You get Social Security disability benefits because of ALS (Lou Gehrig's disease).
- You worked in a government job long enough where you paid Medicare taxes, and you have been entitled to receive Social Security disability benefits for at least 24 months.
- You have kidney failure, receive dialysis or a kidney transplant, and meet other specific requirements.
- You're the child or widow(er), and you are age 50 or older of someone who worked in a government job long enough where they paid Medicare taxes, and you meet Social Security disability program requirements.

PART B

If you are eligible for **Part A** coverage at no cost, you can enroll in **Part B** coverage by paying a monthly premium. Some people with higher incomes will pay a higher Part B premium.

If you're not eligible for Part A at no cost, you can still buy Part B without buying Part A if you're 65 or older and a United States citizen or a lawfully admitted noncitizen who has lived in the country for at least five years.

PART C

Private companies offer **Part C** coverage, with benefits similar to those offered by Medicare, which may provide extra coverage and lower out-of-pocket costs. You can enroll in Part C coverage if you have Medicare Part A and Part B coverage. Once you have reached the coverage limits Medicare covers, you will be entitled to enhanced benefits under a Medicare Advantage Plan. [Read more about part C plans here.](#)

PART D

If you have Part A and Part B coverage, you can buy Part D coverage. Part D coverage benefits are available as a stand-alone plan or may be part of a Medicare Advantage Part C plan. Depending on your income level, this premium may be higher for some people.



MEDICARE HEALTH

Medicaid Insurance

How does Medicare differ from Medicaid?

People often confuse Medicare with Medicaid, so clarifying misunderstandings about each program is essential. The main difference between the two is that Medicare is an insurance program, and Medicaid is a State assistance program.

Medicare helps people pay medical bills from funds they have paid over the course of their working life. For the most part, Medicare serves people 65 or older, with some exceptions for younger people who are disabled and dialysis patients. Many times, Premiums are required for certain parts of Medicare. It is a federal program and is uniformly administered across the United States.

Medicaid has no age restrictions and serves people of all ages based on income. Generally, patients are not required to pay any costs for medical services except in a few limited circumstances. Medicaid follows Federal guidelines, but state and local governments administer it.





When can you enroll in Medicare after turning sixty-five?

If you do not have a qualifying disability or medical condition that allows you to enroll in Medicare before you turn 65, you can enroll in Medicare when you turn 65.

If you already get Social Security or railroad retirement benefits, you will be contacted about three months before you turn 65. If you live in one of the 50 states, Washington, D.C., the Northern Mariana Islands, American Samoa, Guam or the U.S. Virgin Islands, you will automatically be enrolled in Parts A and B. Because you have to pay a premium for Part B, you can opt out of that coverage.

You can enroll in Medicare during the Initial Coverage Election Period if you are not already getting Social Security or railroad retirement benefits. This will allow you to avoid paying penalties or being subjected to a gap in your health care coverage.

The Initial Coverage Election Period is seven months beginning three months before the month you turn 65 and ending three months after your 65th birthday.

It's important to note that you can sign up for Medicare coverage even if you don't plan on retiring when you turn 65.



You can also apply for Medicare before you turn 65 if:

- You're a disabled widow(er) between 50 and 65.
- You work for the government and become disabled before turning 65
- You or an immediate family have permanent kidney failure
- You had Part B coverage in the past but dropped the coverage
- You turned down Medicare Part B coverage when you first got Medicare Part A coverage
- You or your spouse worked for the railroad industry.

If you don't enroll in Medicare Part B during your initial enrollment period, you have another chance annually during a "general enrollment period" from January 1 through March 31. Your coverage begins on July 1 of the year you enroll. Be aware that you may have to pay a late enrollment penalty for as long as you have Part B coverage. Your monthly premium will go up 10% for each 12-month period you were eligible for Part B but didn't sign up for.

If you are in a Medicare Advantage plan and want to switch to Original Medicare, you can do so between January 1 and February 14. If you switch, you will also have until February 14 to join a Part D plan. Your coverage begins the first day of the month after receiving your enrollment form.

Be prepared for an enormous amount of mail.

What kind of mail should you expect to receive?

Suppose you are eligible for Medicare when you turn 65. In that case, you should get a "Welcome to Medicare" packet and a Medicare card in the mail from the Social Security Administration about three months before you turn 65.

If you aren't already collecting retirement benefits, you'll need to contact Social Security to apply for Medicare. It would be best if you did this about three months before you turn 65; otherwise, you will not be enrolled in Medicare in a timely manner. After you have enrolled, you will get a "Welcome to Medicare" packet that will include your Medicare card.



How to use your Medicare card

You should carry your Medicare card on you so that when you need medical services, you can produce it just like you would for other forms of insurance. Only give your Medicare card and information to medical providers such as doctors' offices, hospitals, pharmacists, or other healthcare providers you trust. If you forget or lose your card, a healthcare provider may be able to look up your Medicare number and information online.

Suppose you lose your card or can't use it anymore because it is damaged. In that case, you can get a replacement card by providing your name, Social Security number, and date of birth to the Social Security Administration. You can do so online by using your "my Social Security" account if you have one (if you don't, you can also create one).

If you have a Medicare Advantage plan, you will be given a separate card that will be used for the services offered by your plan. Be sure to present the right card when you are treated so that the right program can be billed for services.

In April 2018, Medicare began mailing new Medicare cards to more than 57 million participants as part of a fraud and identity theft prevention strategy. New cards do not have Social Security numbers on them. Instead, they have a unique 11-digit callout known as a Medicare Beneficiary Identifier or MBI. This serves as a beneficiary's Health Insurance Claim Number (HICN) instead of the previously used Social Security number.





How to shop around to find the best Medicare Plan

If you decide to call any of the 800 numbers, call an insurance provider directly, or shop online, you must be careful. Even if your neighbor, family member, or friend swears by a particular plan or swears off a particular option/plan, that does not mean the same for you. **Medicare options are not one-size-fits-all.**

Plans, options, benefits, doctors, zip code, income, and your current prescriptions can all affect what plans could be good for you. In turn, you would want to work with those capable of comparing all available options.

In a recent Consumer Reports article investigating Part D drug plans, the watchdog found that mistakes in the sign-up process could cost beneficiaries hundreds of dollars a year. Their advice based on the input of an industry expert was this: "You can use the Medicare.gov tool to look at and compare plans in your area, but it is always best to work with a licensed advisor to ensure you receive all the benefits to which you are entitled".

Please call 833-905-1060 to set up a complimentary Medicare Benefits Review. In addition to being licensed to sell insurance in a specific state, our agents must pass an annual American Health Insurance Plans (AHIP) certification exam to sell Medicare plans. Agents must demonstrate specialized Medicare knowledge to pass the exam and follow CMS, Centers for Medicare, and Medicaid Services guidelines. These certifications are all there to protect you.



Benefits for enrolling in a Medicare plan from a local agent

Available Medicare plans vary by market and metro area, so having a local expert working for you gives you the best opportunity to compare the pros and cons of plans you can enroll in. An agent's expertise is further bolstered by the fact that agents who sell Medicare plans are also required to undergo additional training and must get a special certification each year to be able to sell Medicare products.

Your best move is to work with an independent agent representing many companies that sell Medicare plans in your area. By contrast, a captive agent will only represent one or two plans, which may be the right resource to use if you know precisely what plan you want. You could track the same information independently, given enough time, but with much more effort.

At Senior Solutions, the Medicare Division of The Bedrock Group, our agents receive all CMS requirements, are contracted with all top-tier insurance carriers, and receive monthly training to stay on top of Market trends and the most up-to-date Medicare information.

You'll be able to read more about that [here](#).

Using an agent means they're doing the heavy lifting and helping you narrow down choices efficiently so you not only save time but money because you won't be spending your hard-earned dollars on options you may not need.

We provide two options for your complimentary Medicare Benefits Review:

1. You can call our inbound team at 502-200-1516 or
2. 833-905-1060 to set up an in-person appointment at your place or ours.

You can also visit our website or follow us on social media to learn about retirement tips and trends:

www.bedrockfg.com [facebook.com/thebedrockgroupinc](https://www.facebook.com/thebedrockgroupinc)





The Federal Government manages Original Medicare. As mentioned in the beginning pages, you have Medicare Parts A and B, which cover 80% of services covered by Original Medicare. In most cases, you must find additional coverage for the remaining 20% and your prescription drug costs. You also need to find dental, vision, and hearing coverage separately.

As a quick reminder, **Part A** helps pay for inpatient stays in hospitals and skilled nursing facilities, some home care, and hospice care. **Part B** covers doctor services, lab tests, diagnostics, preventative care, outpatient care, and some Medicare equipment and some transportation.

Medicare Coverage outside of the United States:

Medicare covers beneficiaries when physically located in the 50 U.S. states, the District of Columbia, and U.S. territories, including Puerto Rico, the U.S. Virgin Islands, Guam, the Northern Mariana Islands, and American Samoa. Rarely, Medicare Part A may cover medically necessary services in a foreign country when a foreign hospital is closer than a U.S. facility.

In some cases, Medicare Part B may cover medically necessary health care while on board a cruise ship within the territorial waters adjoining the U.S. Generally, Medicare won't pay for services you get when a ship is more than six hours away from a U.S. port. Medicare drug plans don't cover prescription drugs you buy outside the U.S.

If you have a Medicare Advantage plan, you should check to see if it covers medical care abroad. Otherwise, purchasing travel insurance before your trip is recommended, which can help offset overseas costs if emergency care is needed.





Working past 65:

Enrolling in Medicare Part A is strongly recommended even if you plan to work past 65. It's free and may help cover some of the costs not covered by your employer's group insurance plan. You may be able to hold off on Medicare Part B if you still plan to work beyond 65. This depends on whether your employer's health insurance is your primary provider or if Medicare Part B will be your primary provider. If Medicare is your primary provider, you must immediately sign up for Part B. Your employer should be able to inform you who your primary provider will be.

If you continue to work and do not have an employer or union group health plan, or it is secondary to Medicare, you should sign up for Medicare Part B during your Initial Enrollment Period.

Understanding that enrolling in Medicare when you are eligible is important. Just because you have a form of health insurance coverage, this does not mean you should not sign up for Medicare Part B.

Some people delay signing up for Part B if they have other coverage to avoid paying the monthly premiums. But if you don't sign up for Medicare Part B when you are first eligible and don't qualify for a special enrollment period, you may have to pay a late enrollment penalty.

The late enrollment penalty is 10 percent of the standard Part B premium for each 12-month period when you could have had Part B but didn't, and it lasts for as long as you have Part B.





What is Medigap (Medicare Supplement) Insurance?

Medigap is a supplemental insurance policy sold by private companies that helps pay for some healthcare costs not covered by Original Medicare. Original Medicare covers 80%. Oftentimes, folks enroll in a Medigap plan to cover the 20% left over. Each Medigap plans can include copayments, coinsurance, and deductibles.

One of the most important things to remember about Medigap plans is that they do not include additional benefits like hearing, dental, or vision. Part D drug coverage needs to be purchased separately. The premium does increase year over year as well.

Unlike Medicare, Medigap policies cover medical care when you travel outside the United States. To qualify for a Medigap policy, you must already be enrolled in Medicare Part A and Part B.



Part A Hospital Insurance



Helps Cover:

Inpatient care in hospitals
Skilled nursing facility care
Hospice Care
Home Health Care

Part B Medical Insurance



Helps Cover:

Services from Doctors & healthcare providers
Outpatient care
Home health care
Durable medical equipment
Many preventive services

Part D Drug Coverage



Helps Cover:

cost of prescription drugs

Part C Medicare Advantage



Helps Cover:

Medicare Parts A + B + D
Vision
Hearing
Dental
+ more benefits

Medicare Advantage Plans, most commonly referred to as Part C or MA Plans, are provided by private companies approved by Medicare. Over time, MA Plans have become more robust and a good option. However, when you first turn 65, specific factors determine whether this would suit your needs.

A few things to know about Medicare Advantage.

1. The Federal Government contracts with private insurance companies to provide you with a plan. The government pays the insurance company a flat fee through the contract. The insurance company then creates agreements with a network of hospitals/providers, keeping your costs low.
2. Medicare Advantage does not replace Original Medicare. You still have to pay the Part B Premium. However, some plans pay back some of the Part B Premium, such as Veterans plans. Where you save money is on the no or low cost of MA Premiums.
3. Most regular MA Plans have no cost premiums, include Prescription Drug Plans, and provide extra benefits.
4. If you are on Medicaid, Medicare Advantage would be the right option because of the extra benefits you receive.

Please [click here](#) for a complete list of Medicare Advantage Questions and more information. Or go to our website bedrockfg.com/blogs.



MEDICARE ADVANTAGE PLAN

MEDICARE SUPPLEMENT/MEDIGAP

Most have \$0 premiums (pay as you go plans) or copay plans	Covers Medicare copays, coinsurance
All Have (MOOP) I.E., \$4,900 YR	Costs raise as each year passes
Includes Prescription Drugs	No Prescription Drug coverage
Have extra benefits such as Hearing, Dental, Vision, OTC, Transportation, and gym memberships etc...	Will eventually cost more than the MOOP of the advantage plans





VA Health Benefits, TRICARE, Medicaid, and Medicare

Thank you for your service! If you are eligible for Medicare or Turning 65, there are many misconceptions about Medicare you should know. First, you are not required to enroll in Medicare if you already have coverage through the US Department of Affairs. However, the VA strongly recommends enrolling as soon as you become eligible, and here's why:

1. You can expand your coverage with both Medicare and VA benefits
2. You could have to pay penalties in the future
3. VA health coverage is not one-size-fits-all
4. Medicare Advantage Plans provide a dollar amount off of your Social Security

For a deeper dive into the VA + Medicare, please [click here](#).

As a veteran, you have options that can save you money for your healthcare and allow you to receive additional benefits.





What To Do With Your Retirement Savings

Retirement is, or finally will be right around the corner and you've built a nest egg. Or you have life insurance policies, and your kids are grown with money and savings of their own. What do you do?

401K Rollover:

You have some options with what to do with your 401k. There are better options than cashing out. Your money could be subject to tax, and significant penalties diminish your retirement savings.

Some companies allow you to keep your retirement savings in their plans after you leave, but would you want to? If you have less than \$7,000 in the plan, the money may be automatically returned to you. You cannot add any more to the account, and withdrawal options may be limited, to name a few downsides.

You can roll over the money into an IRA. Here are a few benefits:

- You may have more investment choices than with your employer's plan.
- Your money can continue to grow tax-deferred.
- Rolling assets over can be done by source type to roll over Roth assets independently to a Roth IRA.





Annuities

Annuities fill the retirement income gap by allowing you to convert savings into a stream of income guaranteed to last for the remainder of your lifetime. More than that, some annuities offer a safe place for your money to grow. This allows you to avoid the downturns that come with stock market investments. Suppose you are worried about making your savings last for the entirety of your retirement, in addition to what Social Security provides. In that case, an annuity may be right for you as a part of your retirement plan.

An annuity is an insurance-based retirement plan that creates a stream of income throughout retirement, like a pension. With an annuity, you have a contract with an insurance company, to which you pay a premium - much like life and health premiums - and, in return, receive regular payments over an agreed-upon timeframe.

The main reason to have an annuity is to protect you from the most significant risk to your retirement - outliving your savings.

To learn more about Annuities, [click here.](#)





Pension Maximization

Pension maximization is a retirement income strategy for couples to maximize pension benefits. While this method may be considered high-risk, the reward can be substantial.

When using this strategy, one spouse will opt for the highest annuity payout for their lifetime (single-life annuity) and receive a life insurance policy to give income to the surviving spouse. If one spouse has a pension and is in good health, they would elect the single-life pension payout. This offers the most substantial monthly payments but foregoes survivor benefits to maximize the monthly amount.

Deciding to choose Pension Maximization is quite tricky, but here are some steps to break it down a bit:

- Step 1: The plan participant buys enough life insurance to replace some of the survivor benefits that the spouse would have received under a joint-life annuity.
- Step 2: The plan participant chooses the single-life annuity option upon retirement.
- Step 3: If the plan participant dies first, the insurance company pays a tax-free death benefit to the surviving spouse.
- Step 4: The surviving spouse can use the death benefit to replace the pension income lost when the plan participant dies by purchasing a fixed annuity or investing the proceeds.

Our retirement experts are happy to walk you through this process. Please call 833-905-1060 to set up your in-person complimentary retirement review



Downsizing

The house is different now. Some rooms are barely used. As you approach retirement, life has many transitions, including the thought of downsizing your home, but when is it the right time to do so?

Relocating: Are you thinking of a warmer climate? Perhaps your adult children and grandchildren live in another state, and you wish to be closer. Relocating would be a good reason to downsize your home.

Change in income: Retirement can lower your income even when done correctly. Moving into a smaller home can help with something like large utility bills.

Unused Space: Speaking of large utility bills, you could be heating and cooling rooms that are no longer used. If you have lots of unused space, downsizing can be a good option.

Mobility Issues: You may feel young and spry and be in good health, but sometimes those stairs are more difficult to handle. Downsizing can provide you the opportunity to move into a single-floor home, which will be manageable in your golden years.

Our property and casualty experts are happy to walk you through this process. Please call 833-905-1060 to set up your in-person complimentary retirement review.

[Click Here](#) for Home, Auto, Renters, Condo Insurance, and more.





Downsizing and insurance coverage

If you are ready to downsize, here are some helpful tips for moving into your new living space.

Fix up your home. Sometimes, you only need a fresh coat of paint and other small improvements to boost your home's resale value.

Donate, trash, or keep? You've had many wonderful years in your home, and with that comes many keepsakes, seasonal decorations for your current space, oversized furniture, duplicate items, items you rarely or never used, collectibles, and more. Now is the time to decide what to keep, donate, or throw away.

Condo, home, or apartment? I think exploring each option here could be beneficial depending on your financial situation, retirement plan, mobility, time, and energy.

Check insurance options. There are many items to consider when deciding to downsize. There are differences in coverage options if you move into a new home in a new city or state. Regardless of your downsize option, retirement age is a great time to consider your overall insurance options.



Our property and casualty experts are happy to walk you through this process. Please call 833-905-1060 to set up your in-person complimentary retirement review.

[Click Here](#) for Home, Auto, Renters, Condo Insurance, and more.



OUR TEAM IS HERE FOR YOU.



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We're The Bedrock Group, a Veteran and First-Responder-owned full-service insurance agency providing the benefits and coverage you and your family deserve. Since 2018, we have grown from our home office in New Albany, IN, to over twenty-two states and roughly 100 advisors to provide you with in-person or over-the-phone service from Medicare to Retirement Planning and everything in between.

With Bedrock, you can get the coverage you need.

