



# Guide to the Medicare Annual Enrollment Period

Understanding your Medicare plan options and knowing what actions to take (and when) can be overwhelming. But TogetherHealth is here to help.

Use this guide as a resource to review your current Medicare plan on an annual basis. Then call our licensed insurance agents to compare your plan options during the Medicare Annual Enrollment Period. You can start comparing plans with our agents beginning October 1.

 **1-888-973-1755 (TTY 711)**

Weekdays: 8am - 11pm ET

Saturday: 10am - 7pm ET

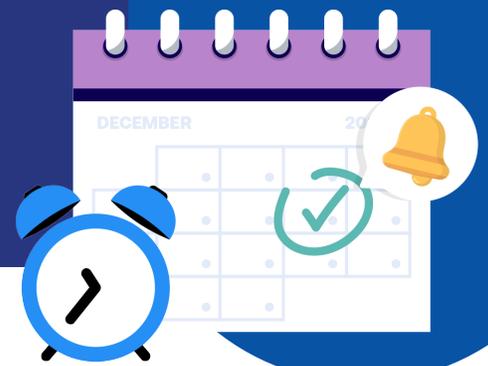
Sunday: 11am - 6pm ET

[www.medicare.healthinsurance.com](http://www.medicare.healthinsurance.com)

Because when it comes to Medicare, we're in this Together.



# The Medicare Annual Enrollment Period (AEP)



## October 15 - December 7

The Medicare Annual Enrollment Period (AEP) - also called the Medicare Open Enrollment Period - is an election period that allows you to make changes to your Medicare coverage each year. **Your new coverage would take effect January 1 of the following year.**

## What changes can I make during the Annual Enrollment Period?

- Change from Original Medicare (Part A and Part B) to a Medicare Advantage plan.
- Change from one Medicare Advantage plan to another.
- Disenroll from your Medicare Advantage plan, go back to Original Medicare, and add a Prescription Drug plan if needed.
- Disenroll from Medicare Advantage, go back to Original Medicare, add a Medicare Supplement plan, and add a Prescription Drug Plan if needed.
- Change from one Prescription Drug Plan (Medicare Part D) to another.
- Enroll in a Prescription Drug Plan
- Cancel your Prescription Drug Plan coverage.



# 3 Tips To Prepare For AEP



## 1 Review Your Plan's Annual Notice of Changes (ANOC)

Your insurance carrier will mail your **Annual Notice of Changes (ANOC) letter in September**. The ANOC will inform you of any changes to your plan's benefits, costs, and rules (i.e. new network changes or restrictions).

Be sure to carefully read this notice every year because it will help you determine if your current plan matches your needs. As you read the ANOC, ask yourself the following questions:

- Is my premium increasing?
- Are there any changes to my copayments and coinsurance for benefits I'm likely to use next year?
- Are my prescriptions still covered, or will their costs increase?
- Do I need referrals or prior authorizations for any services or medications?
- Do I need extra benefits like dental, vision, hearing or fitness programs?

## 2 Make A List Of Your Doctors & Facilities

Write down your preferred doctors, specialists, and healthcare facilities and check your plan's provider directory online annually to ensure your preferred providers remain in network with your plan.

## 3 Know Your Coverage Needs

You may want to make a list of value-added benefits that you're interested in, too. For example, if you're anticipating getting dental work next year, you may want to look into a Medicare Advantage plan with dental coverage. Or, you may be someone who likes to keep active and have social interaction, so a fitness program might be a good fit for you.

# Making Changes During AEP

Medicare premiums, costs and plans can change from year to year. Here are 5 common reasons why you might consider changing your plan during AEP.



## 1 Your Monthly Premium Is Increasing

A premium increase is a common reason to change plans during AEP - especially if you find a different plan that meets your needs for less money.

**Both Medicare Advantage plans and Prescription Drug (Part D) plans can have premium increases.**

## 2 Your Doctors Or Specialists Will No Longer Be In-Network

Your doctors, such as your Primary Care Physician (PCP), may change medical groups, hospital affiliations, or insurance plans that they accept. This may impact your decision to change plans during AEP.

**Each year, be sure to check if your doctors will be in-network with your current plan or the plan you're going to switch to during AEP.**

## 3 Your Medications Are No Longer Covered By Your Plan Or May Be More Expensive

Just like with in-network doctors, some plans may change their drug formularies. If your plan stops covering one of your medications or moves it to a more expensive drug tier, changing plans during AEP may be right for you.

**You can receive drug coverage from a stand alone Prescription Drug plan (PDP) or from a Medicare Advantage Prescription Drug plan (MAPD). In either case, you can find a new plan that will cover your medications or cover them at lower prices.**

## 4 You Need More Coverage And/Or Benefits

Original Medicare (Parts A and B) does not cover dental, vision or hearing benefits, for example. But a Medicare Advantage plan may cover these extra benefits, plus fitness programs, telehealth services and rides to doctor appointments.

**Be sure to evaluate your health care needs and required services each year to ensure your current Medicare coverage is what you need.**

## 5 Your Plan's Star Ratings Have Changed

Medicare uses member satisfaction surveys and plans to give performance star ratings to plans. A plan can get a rating between 1 and 5 stars (5 is considered excellent). This overall rating gives a quick summary of your plan's performance in several categories like quality of care and customer service.

**This 5-star rating system is updated each fall and can help you to compare plans based on quality and performance.**

# What if I miss the Medicare Annual Enrollment Period?



## Medicare Advantage Open Enrollment Period

If you already have Medicare Advantage coverage, you will have another opportunity to make changes to your plan during the **Medicare Advantage Enrollment Period (MA-OEP) on January 1 - March 31 each year.**

During the MA-OEP, you can make the following plan changes:

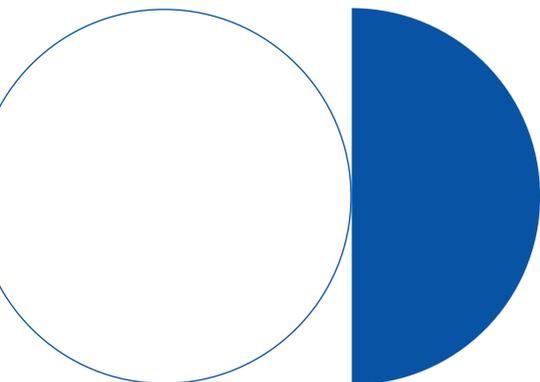
- Switch from one Medicare Advantage Plan to another.
- Drop Medicare Advantage and return to Original Medicare.
- Switch or add a Prescription Drug Plan if you return to Original Medicare, depending on your Medicare Advantage coverage status.

***If you make a change during MA-OEP, your new coverage will be effective on the first day of the month after you make the change. For example, if you enroll in a different Medicare Advantage plan on February 10, your new coverage will be effective on March 1.***

## Medicare Special Enrollment Periods (SEP)

You might have another opportunity to make a change to your coverage if you qualify for a Special Enrollment Period (SEP). Some common reasons for Special Enrollment Periods are:

- Moving to a new county or state where you have new Medicare Plan options
- Gaining or losing eligibility for Medicaid
- Moving into or out of an institution like a Skilled Nursing Facility or Nursing Home
- Your plan loses or fails to renew its contract with CMS



When you enroll in a plan during an SEP, your new coverage will be effective on the first day of the month after you enroll.





**We're here to help you compare your options and find you  
a Medicare plan that meets your individual needs.**

**Contact us today!  
1-888-973-1755 (TTY 711)**

Our licensed insurance agents are available to help 7 days a week.

Weekdays: 8am – 11pm ET

Saturday: 10am – 7pm ET

Sunday: 11am – 6pm ET

[www.medicare.healthinsurance.com](http://www.medicare.healthinsurance.com)

This is an advertisement for Medicare Advantage and Prescription Drug Plans. Outside of the Medicare Annual Enrollment Period, members can enroll in a plan only if they meet certain criteria. Health insurance agency services are provided by TogetherHealth, LLC, Health Plan Intermediaries Holdings, LLC or Total Insurance Brokers, LLC, part of the Benefytt Technologies, Inc. family of companies. These companies are licensed and certified representatives of Medicare Advantage organizations and Part D plans that have a Medicare contract. Enrollment in any plan depends on contract renewal. Your call will be directed to one of our licensed insurance agents or another third party sales organization we may work with, who can help you determine your eligibility, as well as offer information to help you enroll in a Medicare Advantage and/or Prescription Drug plans available from one of the Medicare-contracted carrier(s) we represent. There is no obligation to enroll.

We do not offer every plan available 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 (TTY users should call 1-877-486-2048) 24 hours a day/7 days a week to get information on all your options.