Contents

When is Fall Open Enrollment?............ 1.
How to make plan changes.................. 2.
What you need to know..................... 3.
Tried and true advice........................ 8.
Health care coverage........................ 7.
Drug coverage............................... 9.
Special Enrollment Periods............... 11.
Medicare and Marketplace coverage.... 12.
Get Medicare smart!......................... 14.
Fall Open Enrollment

OCTOBER 15 - DECEMBER 7

During Fall Open Enrollment, you can make unrestricted changes to your Medicare coverage. You can make as many changes as you need, and the last change you make on or before December 7 will take effect on January 1, 2020.

Remember Medicare Enrollment!
How to Make Plan Changes

The best way to enroll in a new plan is to call 1-800-MEDICARE.

Enrolling in a new plan directly through Medicare is the best way to protect yourself if there are problems with enrollment. Write down everything about the conversation when you enroll through Medicare, including the date, the representative you spoke to, and any outcomes or next steps.

Before you enroll in a new plan, follow some simple advice to find the best plan for your situation.

Use Medicare’s Plan Finder tool to search for Medicare Advantage or Part D prescription drug plans. You can use the Plan Finder tool to compare plans based on covered health care services, the drugs you need, the pharmacies you use, and drug costs.

You can also call 1-800-MEDICARE to find out which Medicare Advantage and Part D plans are available in your area. When you receive the list of plans, check the plans’ websites or call them to see which best fits your needs.

Call a plan directly to confirm any information you read online. Make sure the plan includes your doctors, hospitals, and other providers in its network. Confirm that the plan covers all your drugs, and that your pharmacies are preferred and in-network.

When speaking with a plan representative, write down everything about your conversation, including the date, the representative you spoke to, and any outcomes or next steps. This information may help protect you in case a plan representative gives you misinformation.
What You Need to Know

UPDATE FOR 2020

New Medicare Plan Finder

This year, the Centers for Medicare & Medicaid Services (CMS) redesigned the Medicare Plan Finder with a modern design and more user-friendly functionality. Features of the old Plan Finder still exist in the new Plan Finder, but a primary change is the way that an individual searches for plans.

The personalized search requires you to log in to your www.MyMedicare.gov account or make an account if you do not have one. If you plan to do a personalized search, set aside extra time for creating or logging in to your account. If you already have an account but cannot remember the username or password, you will be able to retrieve or reset that information online.

The basic (or anonymous) search requires some personal information, like an your zip code and date of birth. To access the basic search, click on the link on the Plan Finder page that says “Continue without logging in.” Search results and drug lists will not be saved or accessible once you close the page.
Expansion of Medicare Advantage Supplemental Benefits

Some Medicare Advantage Plans cover services that are not covered by Original Medicare. Common supplemental benefits include dental care, vision care, and hearing aids.

Starting in 2019, Medicare Advantage Plans were granted more flexibility in the supplemental benefits they are allowed to offer to their members. This includes the ability to offer benefits that are not directly considered medical care. These benefits might include nutrition services, in-home supports, and home modifications. Starting in 2020, plans are allowed to begin offering even more services to certain members with chronic conditions.

These changes mean that there may be more factors to consider when comparing Medicare Advantage Plan options during Fall Open Enrollment. Carefully review a Medicare Advantage Plan’s Evidence of Coverage and any other materials from the plan. If you are considering a new plan that offers its members additional supplemental benefits, make sure to find out about the costs and coverage restrictions associated with those benefits.
Part D Prescription Drug Costs

The average Medicare prescription drug plan premium for 2020 is $32.74 per month, down from $33.19 in 2019. However, premiums for specific plans and regions vary from year to year. It is important to examine your Annual Notice of Change (ANOC) carefully to determine if and how your plan’s costs or benefits are changing, and if it makes sense to explore other options.

In 2020, you will enter the coverage gap after your total drug costs reach $4,020 (up from $3,820 in 2019). Once in the coverage gap, you have a 75% discount on the cost of your brand-name and generic drugs. You will reach catastrophic coverage after paying $6,350 out of pocket on drugs (up from $5,100 in 2019). During this period, you pay significantly lower copayments or coinsurance for covered drugs.

Part D formularies (lists of covered drugs) often change from year to year. Drugs and restrictions can be removed or added. It is important that you check the plan’s new formulary to see how the drugs you take will be affected. The ANOC should include a summary of the new formulary. A complete copy of the plan’s formulary should be available on the plan’s website and can be requested by calling the plan.
Medigap Changes in 2020

As a result of federal legislation, individuals who are newly eligible for Medicare on or after January 1, 2020 will not be able to purchase Medigap Plan C or Plan F (including the Plan F high-deductible option). This is because after January 1, 2020, the law prevents individuals new to Medicare from purchasing Medigaps that pay for the Part B deductible. Both Plan C and Plan F cover the Part B deductible.

This law also applies to the three states (Massachusetts, Minnesota, and Wisconsin) that operate their own Medigap systems. People new to Medicare in those states will not be allowed to purchase Medigaps that pay for the Part B deductible.

However, Plan D and Plan G currently provide coverage for all the same out-of-pocket costs, except for the Part B deductible.

If you were eligible for Medicare before January 1, 2020, you will not be affected by these Medigap changes. You will still be able to purchase Plan C or Plan F.

Note: Depending on where you live, you may be able to purchase a Medigap policy during Fall Open Enrollment. However, limitations apply as to who can buy a Medigap and when. There are federal protections for people over 65 to purchase a Medigap in certain situations, and some states offer additional enrollment protections.

Visit Medicare Interactive for more information.
**REMINDER**

**Medicare Advantage Open Enrollment Period**

Beginning in 2019, the Medicare Advantage Disenrollment Period (MADP) was replaced with a continuous Medicare Advantage Open Enrollment Period (MA OEP) that lasts from January 1 through March 31 each year. During this time, individuals enrolled in a Medicare Advantage Plan may make a single change:

- Switch between MA Plans
- Or, switch to Original Medicare with or without a Part D plan.

Any change made during the MA OEP is effective on the first of the following month.

For more information about the MA OEP, visit Medicare Interactive.

**Special Enrollment Period (SEP) for People with Extra Help**

Individuals enrolled in the Low-Income Subsidy (LIS), also known as Extra Help, are limited to changing their Part D plan once per calendar quarter in the first three quarters of the year. Any changes made during this SEP are effective on the first of the following month.

During the fourth quarter, people with Extra Help may use the Fall Open Enrollment Period to make changes to their coverage, with changes effective January 1.
If there’s one mantra for the Fall Open Enrollment season, it’s “review your options.” Every year, the Medicare Rights Center advises people with Medicare to carefully consider how they get their Medicare benefits; most people are allowed to make changes only during Fall Open Enrollment. Here is some tried and true advice we offer beneficiaries depending on their Medicare coverage.

If you have Original Medicare and a supplemental plan (often called a Medigap) and are happy with your coverage, you do not need to make a change.

If you have a Medicare Advantage or Part D plan, you should review all of your coverage options even if you are happy with your current coverage, because plans change their costs and benefits every year.

Read your Annual Notice of Change (ANOC), which you should receive from your plan by September 30. It will list the changes in your plan, such as the premium and copays, and will compare the benefits in 2020 with those in 2019. Your plan may send your ANOC in an email, rather than a hard copy in the mail. If you would like a hard copy, call your plan to request one be mailed to you.

Consider all of your options, since many plans make changes every year, and your current plan may not be your best choice for 2020. Shop around to find a plan that best meets your needs and makes the most financial sense to you.

Wondering what type of coverage is best for you?

Visit Medicare Interactive to learn about the differences between Original Medicare and Medicare Advantage.
Health Care Coverage

What you should know if you are considering enrolling in a Medicare Advantage (MA) Plan.

Even if you are happy with your current coverage, you should review all of your options, including Original Medicare and a Medigap.

Before making your final choice during Fall Open Enrollment, call your State Health Insurance Assistance Program (SHIP) to find out if you will have the right to purchase a Medigap during Fall Open Enrollment, what options you have, and what consumer protections your state provides.

Make sure you understand how any plan you are considering works. Take the time to ask questions such as:

- Are my doctors and other providers in the plan’s network? Are they taking new patients who have this plan?
- Does this plan cover any services that Original Medicare does not, like dental, vision, or hearing services?
- How much will it cost to see my primary care physician? A specialist?
- For more questions to ask before joining a Medicare Advantage Plan, visit Medicare Interactive.
Drug Coverage Options

What you should know if you are considering switching to a new Part D plan, either as part of an MA Plan or as a stand-alone prescription drug plan.

Review your Annual Notice of Change (ANOC) and pay particular attention to the summary of the new formulary (list of covered drugs).

If you use the online Plan Finder tool at www.medicare.gov to select the best plan for your needs, call the plan directly and confirm the information you read online. This will help you avoid making a decision based on inaccurate information.

Don’t go by the price of the plan alone. Check to see if the plan you are considering covers all the medications you take. Also, see if the plan has any coverage restrictions, such as prior authorization, step therapy, or quantity limits.

For more information about questions to ask when comparing Part D plans, visit Medicare Interactive.
Special Enrollment Periods
Other times to enroll in Medicare

Special Enrollment Period (SEP) for Five-Star Plans

You have an SEP to switch into a five-star plan from your current plan. The five-star SEP encourages Medicare Advantage Plans to improve their quality ratings. You can enroll into a new Medicare Advantage Plan or stand-alone Part D plan that was given an overall plan performance rating of five stars for the year 2019. You may only use this SEP once per calendar year. You must also be eligible to join the plan (i.e., live in the plan’s service area).

For more information on this and other SEPs, visit Medicare Interactive.

Recap: Special Enrollment Period for People with Extra Help

Individuals enrolled in the Low Income Subsidy (LIS), also known as Extra Help, can also change their Part D plan once per calendar quarter in the first three quarters of each year. Previously, people with Extra Help could make drug plan changes once per month. Any changes made during this special enrollment period are effective on the first of the following month.

People with LIS may use the Fall Open Enrollment period during fourth quarter to make changes to their coverage, with changes effective January 1.

Recap: The Medicare Advantage Open Enrollment Period (MA OEP)

The MA OEP occurs each year from January 1 through March 31. During this time, individuals enrolled in a Medicare Advantage Plan may make a single change:

- Switch between MA Plans
- Or, switch to Original Medicare with or without a Part D plan.

Any change made during the MA OEP is effective on the first of the following month. For more information about the MA OEP, visit Medicare Interactive.
Health Insurance Marketplaces and Medicare

The Health Insurance Marketplaces are forums where uninsured and underinsured people can purchase health insurance.

The important thing to know is that **Marketplaces do not affect your Medicare coverage**. Medicare Advantage Plans, Part D plans, and Medigap policies are not sold through the Marketplace.

**If you are eligible for Medicare, you should not use the Marketplace to get health and drug coverage.**

**There are two exceptions:** if you are eligible for Medicare because you have End-Stage Renal Disease (kidney disease that requires dialysis or a transplant) or you have to pay a premium for Medicare Part A (hospital insurance), you can choose to enroll in a Qualified Health Plan (QHP) through the Marketplace instead of Medicare.

Note that you should consider all consequences carefully before deciding to take a Marketplace plan instead of Medicare. You cannot have any part of Medicare when purchasing a Marketplace plan. If you decide to enroll in Medicare later, you may have to wait for the General Enrollment Period (GEP) to sign up. Using the GEP to enroll means you may experience gaps in coverage and incur late enrollment penalties.
It is important to remember that plans offered through the Marketplace are not the same as Medicare, even though the Marketplace enrollment period overlaps with Medicare’s Fall Open Enrollment. You should use the Medicare Fall Open Enrollment Period to review and make changes to your Medicare health and drug coverage. You should not use the Marketplace open enrollment period. If you enroll in a Marketplace plan before you qualify for Medicare, make sure to disenroll from the Marketplace plan and enroll in Medicare when you first qualify to avoid gaps in coverage or late enrollment penalties. For more information on Medicare and the Marketplaces, visit Medicare Interactive.

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