



LOCAL HELP FOR PEOPLE WITH MEDICARE

Medicare Minute Script – October 2015

Open Enrollment Period

The Open Enrollment Period each fall is the time of year when you can change your Medicare coverage. Even if you are happy with your current coverage, it is important to explore other options because another plan may better suit your individual needs during the upcoming year. Open enrollment is also the time of year when agents and brokers are marketing Medicare health plans. Marketing can begin October 1st. It's important to know ways of identifying and preventing marketing violations and fraud.

Point 1: Know the changes you can make during Open Enrollment.

During Open Enrollment, you can change the way your Medicare health coverage is delivered (through Original Medicare versus a Medicare Advantage Plan), and add, drop or change Medicare drug coverage (Part D). You can join a new Medicare Advantage Plan or Part D plan and also return to Original Medicare with or without a stand-alone Part D plan. You can make as many changes as you need during this period, but only your last coverage choice before the end of the Open Enrollment Period will take effect. Open Enrollment lasts from October 15th to December 7th each year, and the changes you make during this time will take effect the following January 1st. So, changes you make during this year's Open Enrollment Period will take effect on January 1st, 2016.

Understanding your current coverage will enable you to make an informed decision about your coverage for 2016. Read your plan's Annual Notice of Change (ANOC), revised formulary (the plan's list of covered drugs), and provider/pharmacy network list, which you should have received by September 30. The ANOC lists any upcoming changes in your plan, including costs for health and drug benefits. It is critical to review the revised formulary and pharmacy/provider network listing to ensure that all of your drugs will still be covered next year and that your providers/pharmacies are still in the plan's network. Because plans can make changes in their offerings every year, your current plan may not be your best choice for 2016. It is important to remember that membership in your plan automatically renews each year unless you choose to change your coverage.

Point 2: Match your needs with the appropriate plan choice.

When comparing plans, look first at whether the plan covers all the drugs you take and has all of your providers and pharmacies in its network. Next, look at the plan costs: premium, deductible, and copayments. If you use the online Medicare Plan Finder tool at www.medicare.gov to select the best plan for your needs, call the plan to confirm the information you've gathered there before you enroll. Keep a record of your conversation with the plan representative. This may help protect you if you later discover that the information on which you based your enrollment decision was inaccurate.

You can also review the star ratings of plans. Medicare reviews plan performance each year and releases new star ratings each fall. The Five-Star Quality Rating System is used to measure how well Medicare Advantage Plans and Part D plans perform. Medicare scores how well plans did in several categories, including quality of care and customer service. Ratings range from 1 to 5 stars, with five being the highest and one being the lowest score. The star ratings can be found in Medicare Plan Finder at www.medicare.gov or by calling 1-800-Medicare (1-800-633-4227). It is important to note that a plan's star rating is only one factor to look at when you compare plans in your area. Even though a plan has a high star rating, it may not be right for you. Contact your State Health Insurance Assistance Program (SHIP) for one-on-one assistance with reviewing your 2016 plan options.

Point 3: Protect yourself from marketing violations and fraud.

Medicare has rules about how plans can market themselves and their services during Open Enrollment. Knowing about some of these rules can help you protect yourself from dishonest agents or brokers -- or scam artists *posing*



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as agents and brokers. Though plans **are** allowed to send you mail, plans are **not** allowed to call, e-mail, visit your home, or approach you in public to market their plan without your permission. Plan agents and brokers are not allowed to give you gifts in exchange for your enrollment into a plan. Gifts must be given to everyone regardless of their enrollment, and **cannot be worth more than \$15**.

Verify everything a plan agent or broker tells you before making your final decision. For example, if a broker tells you that your doctor is part of the plan's network, call your doctor to double-check. Importantly, you should never feel pressured to join any plan. To ensure you are not being misled, be particularly suspicious of plan representatives or people who:

- Pressure you with time limits, seeking to enroll you in their plan, regardless of whether or not it meets your needs
- Tell you they represent Medicare and request your Medicare number, Social Security number, or bank account number, such as in exchange for a gift or service.
- Say you will lose your Medicare benefits unless you sign up for a certain plan

If you feel an insurance agent has committed marketing fraud, you should save all documented proof (such as an agent's business card or marketing materials) and report the activity to your local Senior Medicare Patrol (SMP). You may not always be able to detect marketing violations or persons posing as plan agents or brokers. As an added safeguard before you enroll, make sure you understand what a plan is offering you and get it in writing. How does it affect your Medicare and other health benefits (like Medicaid or your retiree/union coverage)? Does it cover the drugs you need? Review the facts before you enroll, and go to trusted and unbiased source for assistance, if needed, such as your State Health Insurance Assistance Program (SHIP).

Take Action:

- 1) Create a list of all the health care providers you see, prescription drugs you take, and pharmacies you use.
- 2) Contact your State Health Insurance Assistance Program (SHIP) for one-on-one assistance with reviewing your plan options for 2016.
- 3) Protect yourself from marketing violations and fraud by double checking all offers made by plans before making a decision
- 4) Report suspicious marketing practices, such as unsolicited calls and visits, to your Senior Medicare Patrol (SMP)

Local SHIP Contact Information	Local SMP Contact Information
SHIP toll-free: SHIP email: SHIP website: To find a SHIP in another state: Call 877-839-2675 or visit www.shiptacenter.org .	SMP toll-free: SMP email: SMP website: To find an SMP in another state: Call 877-808-2468 or visit www.smpresource.org .

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