

# vMedicare Minute Script – August 2024 Common Open Enrollment Notices

You can make changes to your Medicare coverage each year during Medicare's Open Enrollment, which runs October 15 to December 7. Around September, you will start to receive notices with information about any changes to your plan in the coming year. It is important to read and understand these notices, as they can help you decide if you should make changes to your coverage during Open Enrollment.

## Point 1: Understand your Annual Notice of Change and Evidence of Coverage

If you have a Medicare Advantage Plan or a Part D prescription drug plan, you should receive a notice called an Annual Notice of Change, or ANOC for short, and an Evidence of Coverage, or EOC. Your plan should send you these notices by September 30. If you do not receive these notices, contact your plan to request copies. These notices list any changes for your plan in 2025.

There are three kinds of annual plan changes to look for in an ANOC or EOC:

- First, look for changes to your plan's deductibles and copayments, which can change each year. For example, your plan may not have a deductible in 2024 but could have one in 2025.
- Second, look for changes to the plan's network. Plan networks can change each year, which means your doctor or pharmacy may not be in your plan's network for 2025. If you see an out-of-network provider, your plan may not cover any of the cost of your care.
- And third, look for changes to the plan's formulary, which is the list of drugs the plan covers. Formulary changes can happen from year to year, meaning your drug may not be covered in 2025 even if it was covered in 2024. Even if it is still on the plan's formulary, the cost of your drug may have changed. After reading about the changes to your coverage for 2025, decide whether your plan will still be able to meet your needs in the upcoming year.

# Point 2: Learn if there are any problems with your plan.

In October, plans leaving the Medicare program in the coming year send out a Plan Non-Renewal Notice to people enrolled in the plan. If you receive this notice, you should make sure you are covered in 2025. You can choose to enroll in a new Medicare Advantage Plan or Part D plan during Open Enrollment, which again is October 15 through December 7. You can also enroll in a new plan up until the last day in February. You will be disenrolled from your previous plan starting January 1, though, so if you do not pick a new plan by then you will likely experience a gap in coverage until you enroll in a new plan.

In late October, Medicare will also send a Consistent Poor Performance Notice to people enrolled in a plan that has received a low rating for three or more years in a row. A low rating is three stars or fewer out of five. The notice encourages you to look at other plan options in your area.

#### **Point 3: Identify marketing violations.**

In October, you will likely start receiving mail from different insurance companies about the plans they offer. You can use this marketing information to compare your options. Although companies can send you mailings, you should know that they must follow certain rules when marketing their plans. These guidelines are in place to protect you from aggressive or misleading sales and enrollment tactics. For example, a plan cannot use







language that suggests their plan is preferred by Medicare. They cannot call or email you if you have no prior relationship with them and did not ask them to do so. Plans should not leave information like flyers or door hangers on your car or at your home if they came from a company that did not have an appointment with you. When contacting plans, remember that you should take your time to review choices and make an informed decision.

## Point 4: Read your Medicare statements to detect potential fraud, errors, or abuse.

If you have Original Medicare, you should receive Medicare Summary Notices, or MSNs. If you have a Medicare Advantage Plan or Part D plan, you should receive Explanation of Benefits, or EOBs. Both provide a summary of the services and items you have received and how much you may be billed for them. Reading your MSNs and EOBs is important for detecting potential Medicare fraud, errors, or abuse. Keep the following tips in mind:

- Review your Medicare statements as soon as they arrive.
- Keep notes of your medical appointments and compare these to your statements.
- Confirm that everything listed on the statement is accurate—in other words, that you actually received all listed services or items.
- Contact your health care provider if you have questions or notice any mistakes on your MSNs or EOBs.
- Contact the SMP for a My Health Care Tracker (which helps you keep track of your appointments) or to receive assistance reading your Medicare statements.

#### **Take Action:**

- 1. Contact your State Health Insurance Assistance Program (SHIP) if you have questions about any notices.
- 2. Contact your Senior Medicare Patrol (SMP) if you see Medicare statement charges that seem suspicious.
- 3. Contact your Medicare Advantage or Part D plan if you don't receive an ANOC and EOC by October.

Local SHIP Contact Information	Local SMP Contact Information
SHIP toll-free: 800-247-4422	<b>SMP toll-free:</b> 800-247-4422
SHIP email: <u>idahoshiba@doi.idaho.gov</u>	SMP email: <u>idahoshiba@doi.idaho.gov</u>
SHIP website: shiba.idaho.gov	SMP website: <u>https://aging.idaho.gove/stay-</u>
	safe/senior-medicare-patrol-fraud-prevention
<b>To find a SHIP in another state:</b> Call 877-839-2675 and say "Medicare" when prompted, or visit <u>www.shiphelp.org</u> .	<b>To find an SMP in another state:</b> Call 877-808-2468 or visit <u>www.smpresource.org</u> .

This document was supported, in part, by grant numbers 90SATC0002 and 90MPRC0002 from the Administration for Community Living (ACL), Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official ACL policy. SHIP Technical Assistance Center: 877-839-2675 | www.shiphelp.org | info@shiptacenter.org SMP Resource Center: 877-808-2468 | www.smpresource.org | info@smpresource.org

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