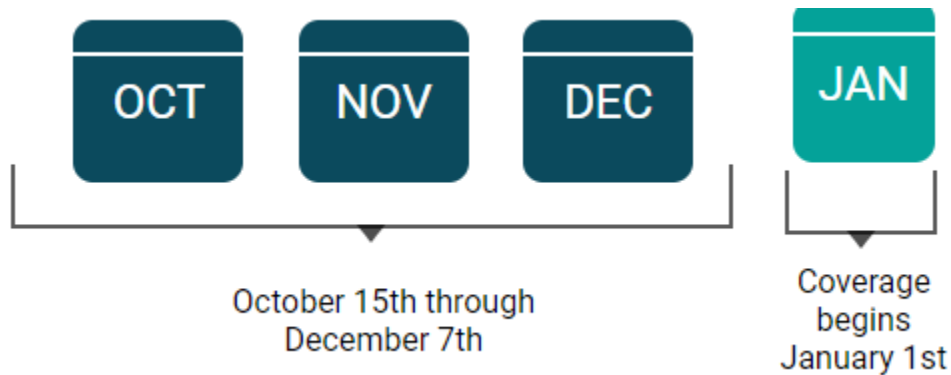








Medicare Open Enrollment Counselor Cheat Sheet



Open Enrollment Dates:

 October 15 – December 7
Changes take effect January 1, 2026

Changes beneficiaries can make during Open Enrollment:

-  Join a new Medicare Advantage plan or Part D prescription drug plan
-  Switch from Original Medicare → Medicare Advantage
-  Switch from Medicare Advantage → Original Medicare (with/without Part D)

Step 1: Review Current Coverage

Medicare Advantage or Part D: Review their Annual Notice of Change (ANOC) and Evidence of Coverage (EOC).

Step 2: Assess Their Coverage Needs

Has their health status changed, requiring new doctors, specialists, or services?
Are their prescriptions still covered? Any restrictions, prior authorizations, or tier changes?

Do their preferred doctors, pharmacies, and hospitals remain in-network?
Are Medicare Advantage plans worth it for their situation (weigh benefits vs. limitations)?





Medicare Open Enrollment Counselor Cheat Sheet



Key ANOC Review Points

When reviewing a beneficiary's ANOC, look for:

Premium: Will their monthly payment change?

Deductible: Will the amount they must pay before coverage starts change?

Maximum Out-of-Pocket (MOOP): Will the yearly spending cap for covered services change? (Remind them drug costs are separate.)

Copayments/Coinsurance: Will the amount they pay for visits, services, or drugs change?

Network: Are there any changes to their providers, facilities, or pharmacies?

Drug Coverage: Are their medications still listed in the formulary? Have any moved tiers, changing their costs?

Other Benefits: Are there new services, or services ending (e.g., dental, vision, fitness, transportation)?





Medicare Open Enrollment Counselor Cheat Sheet



Plan Comparison Guidance

Counselors should:

- ✓ Use Medicare's Plan Finder (www.Medicare.gov/plan-compare).
- ✓ Verify that their doctors and pharmacies are in-network.
- ✓ Consider all costs: premiums, deductibles, copays, and MOOP.
- ✓ Review additional benefits (transportation, home mods, fitness, etc.).
- ✓ Check the plan's star rating for quality.
- ✓ Document plan conversations *if applicable* (date, rep name, details).

⚡ Counselor Quick Tip:

Always remind beneficiaries -

Plans change every year

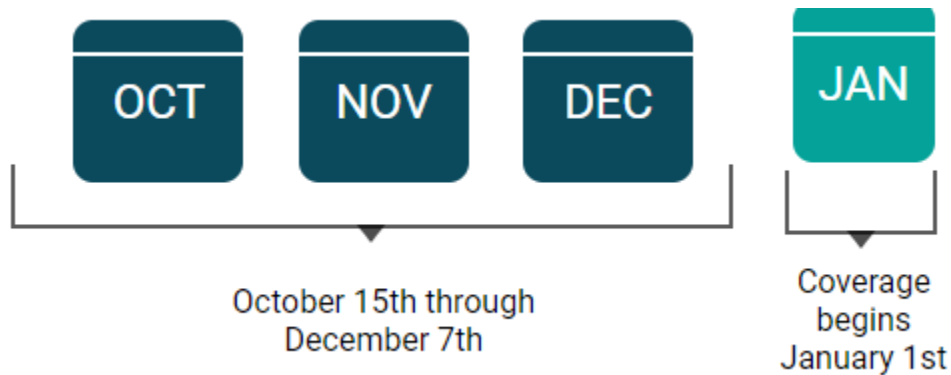
Even if their plan name stays the same, their drug coverage and costs may change

Document every conversation to protect them from misinformation





Medicare Open Enrollment Counselor Cheat Sheet



Medicare Terminology for Counselors

ANOC (Annual Notice of Change): Document from the plan that lists yearly changes in costs, coverage, and services.

EOC (Evidence of Coverage): Detailed plan handbook with coverage rules and benefits.

Premium: Monthly cost beneficiaries pay for Medicare coverage.

Deductible: What they pay before coverage begins.

Coinsurance: Percentage of a cost they must pay for a service.

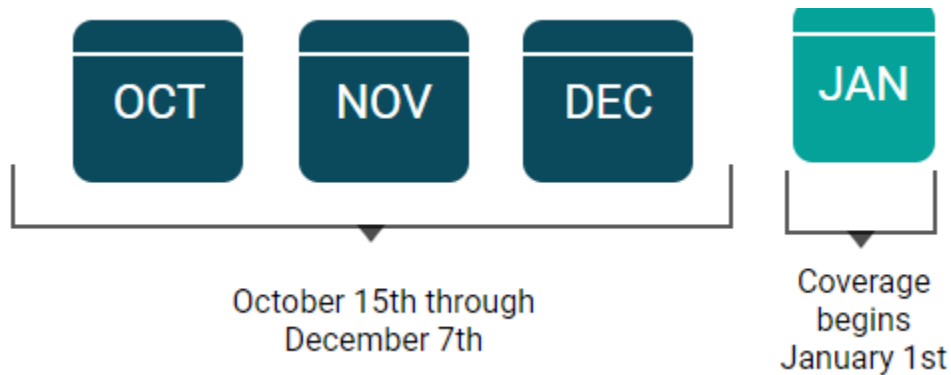
Copayment (Copay): Flat fee they pay for each service or drug.

MOOP (Maximum Out-of-Pocket): The most they'll pay for covered services in a year (excludes drugs).





Medicare Open Enrollment Counselor Cheat Sheet



Medicare Terminology for Counselors

Formulary: Plan's official list of covered drugs.

Network: Doctors, hospitals, and pharmacies under contract with the plan.

Star Ratings: Medicare's quality score (1–5 stars) for Advantage and Part D plans.

Original Medicare: Government-administered Part A (Hospital) & Part B (Medical).

Medicare Advantage (Part C): Private plan combining A + B, often with Part D and extras.

Part D: Stand-alone prescription drug coverage plan.





Medicare Open Enrollment Counselor Cheat Sheet



Medicare Terminology for Counselors

Extra Help/LIS (Low-Income Subsidy)

- A federal program that helps beneficiaries with Part D prescription drug costs.
- Can lower or eliminate monthly premiums, copays, and remove late penalties.
- Available through Social Security or automatic with Medicaid/SSI/MSP approval.

MSP (Medicare Savings Programs)

- State-run programs that help pay Medicare costs.
- QMB: Pays Part A & B premiums, deductibles, coinsurance, and copays.
- SLMB & QI: Pay Part B premium only.
- QDWI: Pays Part A premium for certain disabled beneficiaries who return to work.
- Automatically qualifies beneficiaries for Extra Help/LIS.





To Our Amazing Medicare Counselors ...

You. Are. Essential.

Whether you're helping beneficiaries over the phone or face-to-face, your work matters. You are guiding people through some of the most important health care choices of their lives — and that impact is huge. Thank you for showing up with compassion, patience, and professionalism every single day.

Counselor Tips & Reminders

- Take care of yourself first. Your health and well-being come before the work.
- Hydrate! Keep water close by — your brain works better when you're hydrated.
- Stretch & breathe. Short breaks reset your body and mind.
- Drive safe. Arriving safely to and from in-person events is part of the job.
- Set healthy boundaries. On the phone or in person, it's okay to pause if a conversation gets uncomfortable.
- Reach out if you need help. If you ever feel unsure, overwhelmed, or unable to assist a beneficiary, contact your VSC right away. **You are never alone in this work.**

Remember -

- Your guidance gives people confidence.
- Your patience brings peace to stressful situations.
- Your kindness leaves a lasting impact.

We see you. We value you. We are proud to work alongside you.

