

# **Fall Open Enrollment Period**

**Fall Open Enrollment runs October 15 through December 7** and is the time of year when you can make certain changes to your Medicare coverage. You can make as many changes as you need to your Medicare coverage during Fall Open Enrollment. The last change you make will take effect on January 1, 2022. Take action during Fall Open Enrollment to make sure your coverage will meet your needs in 2022.

### Know the changes you can make during Fall Open Enrollment

The changes you can make include:

- Joining a new Medicare Advantage Plan or Part D prescription drug plan
- Switching from Original Medicare to a Medicare Advantage Plan
- Switching from a Medicare Advantage Plan to Original Medicare (with or without a Part D plan)

#### Call 1-800-MEDICARE (1-800-633-4227) to make changes.

**Note:** Depending on the state in which you live, you may also be able to purchase a Medigap policy. Contact your State Health Insurance Assistance Program (SHIP) or State Department of Insurance to learn about state-specific Medigap rights. Visit <u>www.shiphelp.org</u> or call 877-839-2675 to contact your local SHIP.

### **Review your coverage for 2022**

Medicare Advantage and Part D plans usually change each year. Make sure that your drugs will still be covered next year and that your providers and pharmacies will still be in the plan's network.

- If you have **Original Medicare**, visit www.medicare.gov or read the 2022 *Medicare* & *You* handbook to learn about Medicare's benefits for the upcoming year.
- If you have a Medicare Advantage Plan or a stand-alone Part D plan, read your plan's Annual Notice of Change (ANOC) and Evidence of Coverage (EOC).
  - Explore other plans in your area. You may find a cheaper plan that meets your healthcare and prescription drug needs. Research shows you can lower your costs by shopping around.
  - Medicare Advantage Plans have significant flexibility in the supplemental benefits they are allowed to offer their members. This includes the ability to offer benefits to some members that are not directly considered medical care, like nutrition services. This means that there are many factors to consider when comparing Medicare Advantage Plan options during Fall Open Enrollment. Carefully review your plan's EOC and any other plan materials.



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## Things to consider when choosing a new plan

Ask yourself the following questions before choosing a Part D drug plan:

- Does the plan cover all the medications I take?
- Does the plan have restrictions on my drugs?
  - **Prior authorization** means that you must get approval from your Part D plan before the plan will pay for the drug.
  - **Step therapy** means that your plan requires you to try a cheaper version of your drug before it will cover the more expensive one.
  - **Quantity limits** restrict the quantity of a drug you can get per prescription fill.
- How much will I pay for monthly premiums and the annual deductible?
- How much will I pay at the pharmacy (copay/coinsurance) for each drug I take?
- Is my pharmacy in the plans' preferred network?
- Can I fill my prescriptions by mail order?
- What is the plan's star rating?
- If I have retiree coverage, will the Medicare drug plan work with this coverage?

Ask yourself the following questions before choosing a Medicare Advantage Plan:

- How much are the premiums, deductible, and coinsurance/copay amounts?
- What is the annual maximum out-of-pocket cost for the plan?
- What service area does the plan cover?
- Are my doctors and hospitals in the plan's network?
- What are the rules I must follow to access health care services and my drugs?
- Does the plan cover additional health care benefits that are not covered by Original Medicare?
- What is the plan's star rating?
- Will this plan affect any additional coverage I may have?







You may find it helpful to use **Medicare's Plan Finder tool**, which gives you a list of Medicare Advantage Plans and Part D plans, the drugs they cover, and their estimated costs for the year. You can access Plan Finder by going online at www.medicare.gov or calling 1-800-MEDICARE.