

Fall Open Enrollment Period: A Resource for Journalists



The Fall Open Enrollment Period, during which people with Medicare can make unrestricted changes to their coverage options, has new dates this year: October 15 to December 7. Medicare consumers need to be aware of this change, as well as changes taking place in 2012, in order to assess their options and make the best informed decision.

The Medicare Rights Center has compiled below a list of upcoming changes, expert advice and related issues of interest to people with Medicare. Also included are consumer-friendly resources that may be of interest to your audience.

A Date Change

It's a new year, and there are new dates to remember for Medicare's enrollment season. Starting in 2011, the Fall Open Enrollment Period (also known as the Annual Coordinated Election Period, or ACEP) begins on **October 15** and lasts through **December 7**.

During Fall Open Enrollment, people with Medicare have the right to change their Medicare health and drug coverage options without restriction. They can make as many changes as they need, and the last change they make on or before December 7 will take effect on January 1, 2012.

Tried-and-True Advice

If there's one mantra for the 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 a change only during Fall Open Enrollment. Certain universal advice applies, no matter what Medicare coverage you have:

- 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 by September 30.** It will list the changes in your plan, such as the premium and copays, and will compare the benefits in 2012 with those in 2011. **It is very important that you read your ANOC and consider all of your options, since many plans make changes every year, and your current plan may not be your best choice for 2012.**
- Shop around to find a plan that best meets your needs and makes the most financial sense to you.
- 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 decide to enroll in a new plan, do so by calling 800-MEDICARE rather than the plan itself.

Health Coverage Options

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 in your state, what options you have, and what consumer protections your state provides.
 - See the **Medicare Advantage Disenrollment Period** section below for more information on Medigap rules.
- If you are considering an MA plan, make sure you understand how it works. Take the time to **ask questions**, such as:
 - Will I be able to use my doctors or other providers I want to see?
 - Are they in the plan's network and are they taking new patients who have this plan?
 - Which specialists, hospitals, home health agencies and skilled nursing facilities are in the plan's network?
 - How much will it cost to see my primary care physician? A specialist?
- For more questions to ask, see [What questions should I ask before joining a Medicare private health plan?](#)

Drug Coverage Options

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 (PDP):

- Whether you are considering a new plan or thinking of staying in your old plan, review your ANOC and pay particular attention 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 and confirm the information you've gathered with a plan representative before you enroll. Keep a record of your conversation with the plan representative. This will protect you if you discover that the information on which you based your decision to enroll in a plan was inaccurate.
- For more information, see [How do I compare Medicare private drug plans?](#)

Changes in 2012

Doughnut Hole

- Just as in 2011, there will be a **50 percent** discount for brand-name drugs during the coverage gap (also known as the doughnut hole). The discount for generics during the doughnut hole will increase to **14 percent**.

Medicare Advantage

- Starting in 2012, Medicare Advantage (MA) plans will not be able to charge enrollees for preventive care services that are free for people with Original Medicare. However, if Medicare Advantage enrollees see providers that are not in their plan's network, charges will typically apply. For more information, see [Medicare-Covered Preventive Services](#).

Medicare Advantage and Part D

- Starting in 2012, people with Medicare will have a Special Enrollment Period (SEP) to enroll in an MA or Part D plan with a five-star rating (on a scale of one to five).
 - The SEP can be used at any time during the year, but only **once per year**, and to make only **one change**.
 - For example, consumers with Original Medicare and a PDP could enroll in a five-star Medicare Advantage plan with drug coverage (MA-PD) or in a five-star PDP. In the former case, the consumer would be effectively disenrolled from the PDP and would have drug coverage and health coverage through the MA-PD. In the latter case, he or she would retain Original Medicare and receive drug coverage through the new PDP.
 - In another scenario, a consumer in an MA-PD who enrolls in a five-star MA-only plan (Medicare Advantage **without** drug coverage) would typically not be able to join a PDP until the next Fall Open Enrollment Period, and would therefore be without drug coverage until the following year.
 - Different plans have different networks of providers and pharmacies, so consumers who choose to enroll in a five-star plan may have to choose a new doctor or pharmacy.
 - For these reasons, Medicare Rights advises consumers to think very carefully before enrolling in a five-star plan outside of Fall Open Enrollment.
 - Plan ratings will be available at www.medicare.gov/find-a-plan beginning in early October.

Medicare Advantage Disenrollment Period

- The Medicare Advantage Disenrollment Period (MADP) runs from **January 1 to February 14** each year. During the MADP:
 - People who are unhappy with their Medicare Advantage (MA) plan are allowed to switch to Original Medicare, and **may also add Medicare prescription drug coverage, even if their MA plan did not include drug coverage.**
 - **People in MA plans CANNOT switch to another MA plan.***
 - **People with Original Medicare CANNOT make any changes.***
 - ***EXCEPTION:** People have an SEP to enroll in a five-star MA or Part D plan at any point during the year, including during the MADP. (See explanation above under **Changes in 2012.**)
- Choose your health care options carefully during Fall Open Enrollment. If you are considering an MA plan for 2012, be aware that if you become unhappy with your MA plan, you have the option to switch to Original Medicare during the MADP. But remember, **you may not be able to purchase a Medigap to fill in the gaps in coverage. The rules and consumer protections for Medigaps vary from state to state.** Some consumers may have access to Medigaps, but **may not be protected from higher**

premiums, coverage exclusions or waiting periods. 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 in your state, what options you have, and what consumer protections your state provides.

Good to Know

- The average Medicare prescription drug plan premium will not increase in 2012; it will remain around \$30. However, premiums for specific plans and regions vary from year to year. It is important for Medicare consumers to examine their ANOC carefully to determine if and how their plan's costs are changing, and if it makes financial sense to explore other options.
- Part D formularies (lists of covered drugs) often change from year to year. Drugs and restrictions can be removed or added. Check your plan's new formulary to see how the drugs you take will be affected. Your ANOC should include a summary of the new formulary. You can also get a complete copy of the formulary on your plan's website or by calling your plan.
- Part D plans can place coverage restrictions, such as quantity limits, prior authorization and step therapy (requiring you to try another drug before the plan will cover the prescribed drug) on certain drugs. Make sure to get the facts about coverage before you enroll in a plan.
- A growing trend is for Part D plans to differentiate between "preferred" and "non-preferred" pharmacies within their network. You pay the least when you use preferred pharmacies. Make sure the pharmacies you use are "preferred."
- Again in 2012, people with higher incomes will pay higher Part B and Part D premiums. Individuals with incomes over \$85,000 (\$170,000 for couples) will pay the higher premiums. Note: The premiums listed on Plan Finder are the basic premiums. They do not reflect the additional amount you must pay if you have high income, even if you enter personalized information.
- The Medicare private plan marketplace continues to be streamlined to ensure meaningful differences exist among plans offered by the same company. Plans from the same company that offer nearly identical benefits have been **consolidated** to help simplify the choices available to consumers. People who were in a plan that was consolidated with other plan(s) will automatically be enrolled in a plan from the same company that has benefits most like those they had. Consolidated plans are not the same as terminated plans, and the rights accorded to people in each group are different.
 - People whose plans have been **consolidated** with others are automatically enrolled into another plan, but they have the right to choose and enroll in a different plan. They have until December 7 to choose a plan. People will find out which plan they have been automatically enrolled into in their Annual Notice of Change (ANOC), which they should receive by September 30.

- Plans that are **terminated** no longer participate in Medicare. Every year there are plans that are terminated.
 - People whose plans have been terminated are entitled to a Special Enrollment Period (SEP), and have until February 29 to choose a new plan. If they do not do so, they will automatically be enrolled in Original Medicare (if their MA plan is terminating) or they will lose drug coverage (if their drug plan is terminating).
 - Note, however, that if they were in an MA plan with prescription drug coverage that terminated and choose Original Medicare or allow themselves to be automatically enrolled in Original Medicare, they must also choose a PDP or else they may lose drug coverage.

Resources

Changes in 2012

- [Health Reform Implementation Timeline](#)
- [Health Reform and Medicare: Closing the Doughnut Hole](#)
- [Medicare-Covered Preventive Services](#)

Enrollment Periods

- [New Open Enrollment and Disenrollment Periods](#)
- [Medicare Advantage Disenrollment Period \(MADP\)](#)
- From Medicare Interactive: [Can I change my Medicare health plan at any time?](#)
- From Medicare Interactive: [What insurance can I buy to fill gaps in Original Medicare?](#)
- [Chart of Medigap Plans](#)
- From Medicare Interactive: [Can I buy a Medigap policy at any time?](#)
- From Medicare Interactive: [When can I buy a Medigap policy if I am 65 or older?](#)
- From Medicare Interactive: [When do I have the right to buy a Medigap policy if I am under 65?](#)

Medicare Health Coverage

- From Medicare Interactive: [What are my Medicare coverage options?](#)
- From Medicare Interactive: [How does Original Medicare work?](#)
- From Medicare Interactive: [What is a Medicare private health plan \(Medicare Advantage\)?](#)
- [Questions to Ask Before Joining a Medicare Private Health Plan](#)
- [Comparing Medicare Options](#)

Medicare Drug Coverage

- [Health Reform and Medicare: Closing the Doughnut Hole](#)
- From Medicare Interactive: [How do I enroll in the Medicare prescription drug benefit \(Part D\)?](#)

- From Medicare Interactive: [How do I compare Medicare private drug plans?](#)
- From Medicare Interactive: [Do I need to review my Medicare prescription drug plan choice every year?](#)

Websites and Helplines

- [Medicare Plan Finder Tool](#) (an online tutorial from the Centers for Medicare & Medicaid Services about how to use Plan Finder)
- Find your State Health Insurance Assistance Program (SHIP) at <http://www.shiptalk.org>
- 800-MEDICARE (633-4227)
- Medicare Rights Center's Toll-Free Consumer Helpline: 800-333-4114 (Monday through Friday, 9 a.m.–5 p.m. Eastern Time)