

Medicare's Open Enrollment Period



Medicare's Open Enrollment runs October 15 through December 7 and is the time of year when you can make certain changes to your Medicare coverage. The last change you make will take effect on January 1. Take action during Medicare's Open Enrollment to make sure your coverage will meet your needs in 2025.

Making changes during Medicare's 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 Medicare Advantage
- ✓ Switching from Medicare Advantage to Original Medicare (with or without a Part D plan)

Call 1-800-MEDICARE (633-4227) or visit www.Medicare.gov to make changes.

Review your coverage for 2025

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



Original Medicare:

Visit www.Medicare.gov or read the 2025 *Medicare & You* handbook to learn about Medicare's benefits for the upcoming year.



Medicare Advantage or Part D plan:

Read your plan's Annual Notice of Change (ANOC) and Evidence of Coverage (EOC).

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Considerations 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?
- ❓ 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 prescription by mail order?
- ❓ What is the plan's star rating?
- ❓ If I have other drug 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 benefits not covered by Original Medicare?
- ❓ What is the plan's star rating?
- ❓ Will this plan affect any additional coverage I may have?



You can use **Medicare's Plan Finder tool** to compare plans. Access Plan Finder by going online to www.Medicare.gov/plan-compare or by calling 1-800-MEDICARE (1-800-633-4227)

Protect Yourself from Marketing Violations and Misleading Marketing



During Open Enrollment, health insurance companies try to reach people in various ways, like television commercials, radio ads, events, mailings, phone calls, and texts. The Centers for Medicare & Medicaid Services (CMS) has rules for marketing Medicare Advantage Plans and Part D plans, though. These rules protect Medicare beneficiaries from aggressive or misleading marketing. Knowing the rules and red flags can help you make the best choices for yourself during Open Enrollment.

Watch out for people who:



Ask for your Medicare number, Social Security number, or bank information, especially before you decide to enroll. Someone can use this information to enroll you in a plan without your permission.



Say they represent Medicare. Plans are never allowed to suggest they represent or are endorsed by Medicare or any other government agency. They cannot use the Medicare name or logo on their marketing materials.



Send you unsolicited text messages or phone calls. Plans must provide you with the option to opt out of communications about Medicare products. It must be done annually and in writing.



Pressure you with time limits to enroll in their plan. You can use the entire Open Enrollment Period to make your decisions. You will not receive extra benefits for signing up early for a plan, and you will not lose your Medicare coverage if you don't pick a plan.



Offer you gifts to enroll in their plan. Gifts must be given to everyone at an event regardless of their enrollment choice, and cannot be worth more than \$15.


You should report potential marketing violations to your local Senior Medicare Patrol (SMP) or State Health Insurance Assistance Program (SHIP). Your local SMP or SHIP can help you review the incident, report it to the correct authorities, and continue spotting marketing violations.

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Where can I go for more help?

State Health Insurance Assistance Program (SHIP): Contact your SHIP if you have questions about any notices you receive or have experienced a potential marketing violation. SHIP counselors can help you review your options and pick a plan that meets your needs. SHIP counselors provide trusted, unbiased, and individualized Medicare counseling. Contact information for your local SHIP is below.

Senior Medicare Patrol (SMP): Contact your local SMP if you believe you have experienced a potential marketing violation. SMP team members can help you to prevent, detect, and report potential Medicare fraud, errors, or abuse.

Local SHIP contact information	Local SMP contact information
<p>Toll-free phone number: 1-800-562-6900 Local SHIBA: 509-625-4801</p>	<p>Toll-free phone number: 877-808-2468 (To connect with your SMP, say “Medicare Fraud”)</p>
<p>Online SHIP Locator: www.shiphelp.org</p> <p>Click: </p>	<p>Online SMP Locator: www.smpresource.org</p> <p>Click: </p>

SHIP Technical Assistance Center: 877-839-2675 | www.shiphelp.org | info@shiphelp.org
 SMP Resource Center: 877-808-2468 | www.smpresource.org | info@smpresource.org
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