

2018 Medicare Open Enrollment: October 15 – December 7

What is Open Enrollment?

The Medicare open enrollment period (OEP) takes place every year and gives you the opportunity to review and change your coverage. In most cases, this is your only chance each year to make changes.

What are My Options?

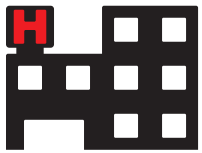
The Medicare OEP is specific to Prescription Drug Plans (PDP) and Medicare Advantage Plans (MAP). There is a separate general enrollment period for Original Medicare, Parts A and B, which occurs every year Jan. 1-March 31.

Standard Prescription Benefits Structure

If you are happy with your current coverage, simply review your plan's benefits for the next year to confirm nothing has changed that would impact you. If your plan is ending or you want to explore your options during open enrollment you can view plans in your area at www.medicare.gov. You can also contact Caring Voice Coalition's health insurance counseling team at 888-267-1440 for help.

COVERAGE ROUTES

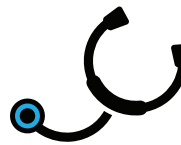
Option 1: I have Medicare Part A only



Part A
Hospital
Coverage



You can add/
change
Part D
Medicare Prescription
Drug Coverage



Part B
Medical
Insurance



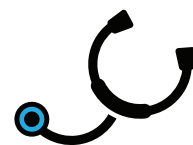
You can add/
change
Part D
Medicare Prescription
Drug Coverage

Option 3: I have Medicare Part A AND Medicare Part B



Part A: Hospital Coverage

and



Part B: Medical Insurance



You can add/change
Part D Medicare
Prescription Drug Coverage

You can add
OR change



You can add/change
Part C Medicare Advantage
Coverage

Things to Consider



What coverage do you currently have?
How does or doesn't it meet your needs?
Do you need prescription coverage?
Do you need vision, dental, hearing or medical benefits outside of what Original Medicare covers?
What medical costs or procedures do you anticipate for the upcoming year?



What monthly premium can you afford?
What deductible amounts are you comfortable with?
What are the copay and coinsurance amounts?
For Medicare Advantage plans, what out-of-pocket maximum are you comfortable with?



Are your medications covered?
Do any medications require prior authorization?
Do any medications have a quantity limit?
Does it meet your needs?
Is your preferred pharmacy in-network?



For Medicare Advantage plans:

- Are your physicians in-network?
- If not, does the plan have out-of-network benefits?
- What type of plan network is best for you? (See below)

Plan Network Types

Health
Maintenance
Organization
HMO

Point
of
Service
POS

Preferred
Provider
Organization
PPO

Private
Fee for
Service
PFFS

