

THE NEW MEDICARE ADVANTAGE OPEN ENROLLMENT PERIOD

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The Senior Medicare Patrol of New Jersey (SMP) is a federally funded program of the Administration for Community Living. The grant for this program has been awarded to the Jewish Family Services of Middlesex County, 32 Ford Avenue, Milltown, New Jersey 08850, telephone number 732-777-1940. Its mission is to assist Medicare beneficiaries in fighting health care fraud, waste and abuse. SMP also seeks to educate Medicare beneficiaries about Medicare so they will not become victims of fraud, waste and abuse.

Medicare Advantage Disenrollment Period Ending.

Beneficiaries in a Medicare Advantage plan previously had a Disenrollment Period from January 1 to February 14 every year. This disenrollment period ended on December 31, 2018. It has been replaced with a new Medicare Advantage Open Enrollment Period. This new period was effective starting January 1, 2019.

The old Medicare Advantage Disenrollment Period had permitted beneficiaries to drop their Medicare Advantage plan and return to Original Medicare (Part A and Part B). It also allowed a beneficiary to sign up for a stand-alone Medicare Part D Prescription Drug Plan.

The New Medicare Advantage Open Enrollment Period

Starting January 1, 2019, a new Medicare Advantage Open Enrollment Period will run from January 1 – March 31 every year. If you are already enrolled in a Medicare Advantage plan, you will have a one-time opportunity to:

- Switch to a different Medicare Advantage plan.
- Drop your Medicare Advantage plan and return to Original Medicare, Part A and Part B.
- Sign up for a stand-alone Medicare Part D Prescription Drug Plan (if you return to Original Medicare). Most Medicare Advantage plans include prescription drug coverage already. Usually you cannot enroll in a stand-

alone Medicare Prescription Drug plan if you already have a Medicare Advantage plan.

Medicare Advantage Open Enrollment: why would I want to switch to a different Medicare Advantage plan?

- Medicare Advantage plans can change every year. Premiums, co-pays and deductibles may change and a beneficiary may find and switch to a plan more suited to his/her needs.
- If a beneficiary is not happy with the Medicare Advantage plan's network (doctors and hospitals who participate in the plan) or a beneficiary discovers that their doctor has dropped out of the plan's network and no longer accepts the plan, he/she may want to switch to a plan that their doctor participates in.
- Medicare Advantage plans are required to provide beneficiaries with similar coverage as Original Medicare. Many of them also include coverage beyond Original Medicare (Part A and Part B). For example, most plans include prescription drug coverage, and some include routine vision services, some dental and hearing services or other benefits such as Silver Sneakers program. With new changes in Medicare, Medicare Advantage plans may soon offer other services such as adult day care services, home and bathroom safety devices, transportation and home meals. Of course a beneficiary should review the plan documents carefully to understand these services and their limitations.
- These extra benefits (beyond Part A and Part B) can change year to year. For example, suppose you take certain medications and you have a Medicare Advantage Prescription Drug plan. Your plan might cover your prescriptions. But sometimes a plan changes its formulary (list of covered medications). If your drugs are no longer being covered, you should seriously consider changing Medicare Advantage plans.
- Medicare Advantage plans may change premiums, deductible and co-pays every year. You might even be able to find a Medicare Advantage plan with a zero premium that was not available in 2018.
- Some Medicare Advantage plans can provide better service than others and can be rated higher or lower than other plans. Medicare has a star rating

system that rates Medicare Advantage plans from 1 to 5 stars. Many beneficiaries may feel uncomfortable staying in a lower rated plan.

Every fall, your plan will send you an Annual Notice of Change. Pay attention to this, because it lists any changes to your benefits or plan rules. A plan formulary may change at any time. You will receive notice from your plan when necessary.