FAMILY CAREGIVER TIP SHEET

Preparing for Medicare Open Enrollment



Medicare Open Enrollment is **October 15–December 7.** It's a chance to review your loved one's coverage and make changes for the coming year.

Even if their current plan works well, reviewing it each year can help prevent unexpected costs and coverage gaps.

Why review Medicare coverage?

Plans can change each year, including:

- Premiums, deductibles, and copays
- Prescription coverage and costs
- Doctor, hospital, and pharmacy networks
- Dental, vision, hearing, transportation, and other benefits

Before Open Enrollment: Get Organized

Gather:

- Your loved one's Medicare card and current plan information
- A current list of medications, including dosages
- Names of doctors and specialists they want to keep seeing
- Preferred pharmacy and mail-order preferences
- Notes about current or anticipated healthcare needs

Review the current plan

Start with the **Annual Notice of Change (ANOC)**, which outlines changes for the coming year.

Check:

- **Costs:** Are premiums, deductibles, or copays changing?
- **Medications:** Are all prescriptions still covered, and at what cost?
- **Providers:** Are doctors, specialists, hospitals, and pharmacies still in-network?
- **Coverage:** Does the plan still meet your loved one's healthcare needs?
- **Out-of-pocket costs:** What are the estimated total costs for the coming year?

Compare your options

Depending on your loved one's needs, they may be able to:

Keep their current plan

If the coverage, providers, medications, and costs still work, no change may be necessary.

Choose a different Medicare Advantage (Part C) plan

Medicare Advantage combines Part A and Part B and often includes Part D prescription coverage. Plans may offer additional benefits.

Change Part D prescription drug plans

Comparing plans may help if medication coverage or costs have changed.

Return to Original Medicare

Some people choose Original Medicare (Parts A and B), with the option to add Part D and supplemental coverage.

Before choosing a plan, ask:

1. What will the total costs be next year?
2. Are all medications covered, and what will they cost?
3. Can my loved one keep their doctors and specialists?
4. Are preferred hospitals and pharmacies in-network?
5. What is the plan's maximum out-of-pocket limit?
6. What additional benefits are included?

Open Enrollment checklist

- [ ] Review the Annual Notice of Change
- [ ] Update your loved one's medication list
- [ ] Confirm doctors, hospitals, and pharmacies are in-network
- [ ] Compare at least two plan options
- [ ] Estimate total healthcare and prescription costs
- [ ] Make any needed changes by **December 7**
- [ ] Keep copies of enrollment and plan documents

Watch Out for Medicare Scams

Open Enrollment can also bring increased scam activity.

- Don't share Medicare or financial information with unsolicited callers.
- Be cautious of anyone promising benefits or savings that sound too good to be true.
- When in doubt, contact Medicare directly through a trusted phone number or website.

Your Open Enrollment timeline

Before October 15
Gather plans, medication, and provider information.

October 15 - December 7
Review coverage, compare plans, and make changes.

January 1
New coverage generally begins.

Get free, unbiased help

You don't have to figure out Medicare alone.

MEDICARE

1-800-MEDICARE
(1-800-633-4227)

MEDICARE.GOV

Official Medicare information and plan resources

STATE HEALTH INSURANCE ASSISTANCE PROGRAM (SHIP)

Free, personalized, unbiased Medicare counseling in every state.

Caregiver tip

Don't assume that "no changes" means "no need to review." Take a few minutes each year to make sure your loved one's doctors, medications, coverage, and costs still line up with their needs.

Medicare rules and plan availability can change. For the most current information, contact Medicare or your state SHIP program.