

## 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](http://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](http://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](http://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 the Ohio Senior Medicare Patrol (SMP) or Ohio Senior Health Insurance Information Program (OSHIIP). We 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?

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

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

Ohio Senior Health Insurance Information Program	Ohio Senior Medicare Patrol
800-686-1578 <a href="mailto:OSHIIPmail@insrance.ohio.gov">OSHIIPmail@insrance.ohio.gov</a>	800-293-4767 <a href="mailto:smp@proseniors.org">smp@proseniors.org</a>
<a href="http://www.insurance.ohio.gov">www.insurance.ohio.gov</a>	<a href="http://www.proseniors.org/ohio-smp">www.proseniors.org/ohio-smp</a>
To find a SHIP in another state: Call 877-839-2675 (and say “Medicare” when prompted) or visit <a href="http://www.shiphelp.org">www.shiphelp.org</a>	To find an SMP in another state: Call 877-808-2468 or visit <a href="http://www.smpresource.org">www.smpresource.org</a>
SHIP Technical Assistance Center: 877-839-2675   <a href="http://www.shiphelp.org">www.shiphelp.org</a>   <a href="mailto:info@shiphelp.org">info@shiphelp.org</a> SMP Resource Center: 877-808-2468   <a href="http://www.smpresource.org">www.smpresource.org</a>   <a href="mailto:info@smpresource.org">info@smpresource.org</a> © 2024 Medicare Rights Center   <a href="http://www.medicareinteractive.org">www.medicareinteractive.org</a>    The Medicare Rights Center is the author of portions of the content in these materials but is not responsible for any content not authored by the Medicare Rights Center. This document was supported, in part, by grant numbers 90SATC0002 and 90MPPRC0002 from the Administration for Community Living (ACL), Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy. [September 2024]	