

Medicare's 2023 **Annual Enrollment Period (AEP)** is almost here: **October 15—December 7**. Please read below for what AEP is and steps to follow for your 2023 analysis:



- Only time to change your Part D drug Plan (your new plan begins January 1, 2023)
 - Follow steps below
- Only eligible enrollment period if you want to switch from your Medicare Supplement plan to a Medicare Advantage plan (plans you see on TV, more about these plans on Page 2)
 - Follow steps below
- If you currently have a Medicare Advantage plan—you can change plans during AEP or during Open Enrollment Period (OEP) which is January 1—March 31
 - **See Page 2** if you are considering changing your Medicare Advantage plan

NOTE: AEP does **NOT** apply to changing from one **Medicare Supplement (Medigap)** plan to another; they can be changed anytime of year based on health underwriting questions.

How To Get Started

1. Complete and submit a Personal Information Sheet AND current Medication List (even if they haven't changed) by **SEPTEMBER 23rd**

- You can use the enclosed forms OR go to our website at **medicarehbs.com** and click on the **2023 AEP tab**

- We have revised our Medication form to make it easier for you to complete
- We now ask for quantity per refill and refill frequency instead of how many you take per day
- Added container size for medications like Inhalers, Drops, Lotions, Creams, Ointments, Gels



If we do not receive completed forms from you, we will assume you do not want an analysis done.

What Will Happen Next

2. Results of your analysis

- If you're a **STAY** we will email you your plan details and costs for 2023 - **review the information carefully**. Call our office if you would like to schedule an appointment to review what we send you
- If a plan **CHANGE** makes sense for you, we will call you to set an appointment to review your options and enroll you in a new plan if you choose to make a change. **Appointments will begin October 17th**

3. Enrollments to change plans for 2023

We will continue doing our appointments virtually with our screen share and electronic enrollment process you are familiar with

The Centers for Medicare and Medicaid (CMS) recently adopted *new* guidelines requiring "sales calls with Medicare beneficiaries to be recorded in their entirety". We bring this to your attention so you'll be prepared when we begin call recording this AEP.

Thinking about changing to a Medicare Plan you saw on TV?

Those ads are for Part C Medicare Advantage plans; not Medicare Supplements. Should you switch? It depends on your unique situation. MOST IMPORTANT is to understand when you call the number on the screen you are talking to a sales agent at a national call center. **PLEASE call us first!** We represent all the plans and will give you a thorough analysis, making sure your doctors and medications are covered by the plan you are considering. (Check out the chart on the next page to see how the number of complaints have skyrocketed for these call centers).

Follow the instructions under “How To Get Started” on Page 1 if you’d like us to do an analysis for you about switching to a Medicare Advantage plan.

Currently have a Medicare Advantage Plan

- If you are happy with your Medicare Advantage plan and want to stay on it for next year, you do NOT have to complete our forms. You can call us and let us know you are a STAY if you’d like. (Remember you can also change during OEP, see below)
- If you are unhappy with your Medicare Advantage Plan and want to make a change effective January 1st, follow the instructions under “How To Get Started” on Page 1
- **Open Enrollment Period (OEP) January 1—March 31**
If you are considering changing Medicare Advantage plans, go ahead and complete forms as instructed on Page 1. We can assist you during OEP. **IMPORTANT** You must contact us during OEP if you’d like to make a change; we are NOT allowed to call you to make a plan change during OEP

UnitedHealthcare AARP Medicare Supplements replacing SilverSneakers

If you have a Medicare Supplement plan with UHC you should have received a letter about their fitness benefit changing from SilverSneakers to Renew Active, **effective January 1, 2023**.

ACTION REQUIRED if you want to use the fitness benefit after **January 1st**: You must visit your member website at myAARPMedicare.com beginning January 1st to get setup with Renew Active. Follow the instructions in your letter. If you need assistance or have questions you can call Customer Service at 800-523-5800, or call our office and we’ll do our best to assist you.

2023 Part D Drug Plan changes

Deductible: \$505 per year

Initial Coverage limit: \$4,660

(When you fall into the donut hole. This is the total retail cost of your medications, NOT your drug co-pays.)

Coverage Gap or Donut Hole: \$4,660—\$7,400 (your out of pocket costs)
You pay 25% of retail cost

Catastrophic Coverage

(after the donut hole up to year end)

Generics \$4.15/Brand \$10.35 or
5% of the cost of the drug

NEW Medicare Drug Legislation



Inflation Reduction Act Timeline

Beginning 2023

- Requires drug companies to pay rebates (to Medicare trust fund) if drug prices rise faster than inflation
- Limits insulin copays to \$35/month
- Eliminates cost sharing for vaccines covered by Part D, ie. Shingles

Beginning 2024

- Eliminates 5% coinsurance for Part D catastrophic coverage
- Limits Part D premium growth to no more than 6% per year
- Expanded eligibility for Part D Low-Income Subsidy

Beginning 2025

- Caps out-of-pocket drug spending at \$2,000

Beginning 2026

- Federal government to negotiate prices for certain high-cost drugs

NEW Insurance Cards

If you have an **Aetna Medicare Advantage** plan, you will receive a new insurance card for 2023. They are changing the names of all their plans.

If you have a **UnitedHealthcare Advantage** plan, you will receive a new “**UCard**”. This will be your new insurance card starting 2023. It will also give you access to your rewards and OTC benefits. **Watch your mail for details.**

Starting January 1, 2023 be sure you use the NEW insurance cards you receive (after January 1st discard any prior insurance cards you have).



Introducing Penny's Corner . . . Making your Medicare Life Easier



Most of you have worked with our Office Manager Penny through the years and know what a valuable resource she is for navigating the wonderful world of Medicare! Read below for some important tips from Penny.

- **The value of setting up an online Member Account** with the insurance company(s) your plan is with. You can do things like:

Print your insurance card	Lookup in-network providers
View claims	Check prescription coverage
Lookup preferred pharmacies	Find a preferred pharmacy when out of state
Verify or make premium payments	Review coverage and benefits

- **Watch your mail.** Companies use regular mail and electronic notifications (if you chose to get emails), to inform you of important coverage information. We do **NOT** receive these notifications. Paying attention to what is sent you can help you avoid things such as your coverage lapsing for non-payment of premium.
 - **IF YOU GET A PREMIUM BILL PAY IT**, even if you elected EFT or deduction from your Social Security
 - It's also a good idea to **check your bank account and see if your EFT is coming out**. Same with checking the deductions from your Social Security. REMEMBER, it can take the first few months of the year for Medicare to get caught up

- **If you change plans during AEP**, you should receive a **new insurance card by mid-January**. If you do not have it be then, call us or member services at the company

- **Starting January 1st, be sure to use the NEW insurance card you receive** for the new plan year—dispose of your old card after January 1st

- **Watch for your Annual Notice of Change (ANOC) for your Part D Drug Plan or Advantage Plan**
 - You should receive by Sept 30th—may come by mail, email or online
 - Make sure to look over this document carefully

Complaint calls to Medicare Skyrocket in 2021

CMS (Centers for Medicare and Medicaid) has seen a more than **155% increase** in Medicare complaint calls related to marketing of Medicare Advantage and Part D drug plans. In 2020 the total was 15,497. That increased to 39,617 for 2021 (not including December). While CMS is not able to directly correlate the spike to the TV ads during fall enrollment, there are strong indicators those ads (and the related call centers) are the primary culprit. *And the reason we are now REQUIRED to record all sales calls with clients.*

Medicare Beneficiary alleged they:	2021	2020
Did NOT consent to enroll in a plan	2663	734
Were misled about which providers were in network	873	292
Had enrollment issues	771	76
Received incorrect plan benefit info or were dissatisfied with plan benefits	723	234
Had other deceptive marketing tactics used on them to enroll in the plan	652	—

***PLEASE CALL US instead of those 800 numbers!**
You can trust that we will give you an honest and accurate review of your options.*

HealthCare Benefit Services Inc.
6638 W. Ottawa Avenue Ste. 120
Littleton, CO 80128

Important date sensitive
2023 Medicare information
Respond by **9/23/2022**

**Tom, Tammey, Torrie, Penny, Jenell and Judy all look forward to working with you again during AEP
And welcome to our newest team member ANNA!**

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Open Enrollment Period (OEP)
January 1—March 31
(You **MUST** be on an Advantage Plan)

