



Medicare’s 2024 **Annual Enrollment Period (AEP)** is almost here: **October 15—December 7**. Please read below for what AEP is and steps to follow for your 2024 analysis:



- Only time to change your Part D drug Plan (your new plan begins January 1, 2024)
 - Follow steps below
- Only eligible enrollment period if you want to switch from your Medicare Supplement plan to a Medicare Advantage plan (you may be eligible for a *Trial Right*, 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 Scope of Appointment, Personal Information Sheet AND current Medication List (even if they haven’t changed) by **SEPTEMBER 25th**
 - You can use the enclosed forms OR THE EASIER OPTION is go to our website at **medicarehbs.com** and click on the **2024 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 2024 - **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 16th**
3. Enrollments to change plans for 2024

We will continue doing our appointments virtually with our screen share and electronic enrollment process you are familiar with (please see the section on new CMS recording and disclaimer requirements)

NOTE: We encourage you to submit your forms early so they can be entered in our system. However, please be aware the earliest we can start completing analyses is October 15th

Medicare Advantage plan enrollments continue to climb!

More than half (51%) of Medicare beneficiaries are now enrolled in a Medicare Advantage plan. Should you switch from your Medicare Supplement? It depends on your unique situation. If you're thinking about it be sure you are well informed. Know that we represent all the plans (see disclaimer on Page 3) and will give you a thorough analysis, making sure your doctors and medications are covered. Why might you consider changing:

- Supplemental benefits such as Dental, Vision, Hearing
- Potential cost savings
- You haven't used your Trial Right—the ability to “try” a plan for up to 12 months; if you don't like it you can go back to what you had GUARANTEED

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

WELLCARE Pharmacy changes for 2024

Starting January 1st, Express Scripts Pharmacy will replace CVS Caremark as the preferred mail order provider.

- ALL Wellcare members will **receive a new ID card** prior to 1/1/2024 (whether or not you use mail order)
- If you are currently using CVS Caremark mail order, your prescriptions will be moved to Express Scripts. Look for details late November/early December
- **You MUST switch mail order providers. CVS Caremark will be OUT OF NETWORK for 2024**
- If you are NOT using mail order currently, you can setup with Express Scripts starting 12/1/2023 for January 2024

2024 Part D Drug Plan Coverage Stages

Deductible: \$545

You pay 100% of drug costs if applicable

Initial Coverage limit: \$5,030

You pay copays until the total costs of your drugs reach \$5,030

Coverage Gap(Donut Hole) limit: \$8,000

You pay 25% of retail cost until total costs of your drugs reach \$8,000

Catastrophic Coverage—Ends 2024

Once total costs reach \$8,000, your drug costs will be \$0 for the remainder of the year.

NEW Medicare Drug Legislation



Inflation Reduction Act Timeline

Began in 2023

- Limited insulin copays to \$35/mo
- Eliminated copays for many vaccines - Shingles, RSV, Tdap, Hepatitis A & B, flu, pneumococcal, COVID-19

Beginning 2024

- Eliminates 5% coinsurance for Part D catastrophic coverage
- 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

More Company News

Wellcare is now texting for prescription drug refill reminders. You can opt-out at any time by replying “Stop”

Wellcare has changed member's log in process. Re-registration is required **ONLY IF** you use the online portal. Call Member Services for assistance.

Humana's OTC Catalog and Prescription Drug Guide are going digital. You can call Humana and request they be mailed to you if you prefer.



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.

- **Be sure to add both HBS email addresses to your Safe Sender list:** info@hbsltc.com and clients@medicarehbs.com
- **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
- **Monthly Explanation of Benefits (EOB) statements** you receive from your Medicare Advantage or Drug Plan can help you track deductibles and drug payment stages (ie the Donut Hole) of your filled prescriptions. Should be shown in Section 5: *Your prescription drug claims received*
- **Medicare Summary Notices (MSN)** are mailed to you every 3 months if you have Original Medicare and have had services. It's like an *explanation of benefits*. It shows all your services billed to Medicare, what Medicare paid and the maximum amount you may owe the provider (helpful in determining if you have met your Part B deductible). You can sign up to receive electronically (monthly) through your Medicare.gov account.
- **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 by 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
- **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

Don't forget about Discount Prescription Drug programs . . . SHOP YOUR MEDS

Some medications (because of a plan's deductible, formulary, tiering, etc) can be cheaper with a discount program vs. your Medicare plan. Keep in mind these programs are NOT insurance. They are direct Pharmacy Benefit Managers that are able to pass along significant savings on certain medications. *GoodRx*, *SingleCare* and *WellRx* are good options for retail pharmacy use and *Cost Plus Drugs* for mail order. You can lookup medication costs online, print a coupon to use or download a mobile app. . Keep in mind you must have a prescription on file.

REQUIRED CMS Disclaimer and Call Recording

Per the requirements of the Centers for Medicare and Medicaid (CMS) please note:

For 2024, we will represent 14 organizations which offer 113 products in the state of Colorado. For the additional states we are licensed in, we do not represent all plans. You can always contact Medicare.gov, 1-800-MEDICARE, or your local State Health Insurance Program (SHIP) for help with choices.

All enrollment calls will be recorded. We will require your verbal agreement to be recorded. If you choose not to be recorded we will be unable to assist you through our phone and screen share process.

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

Important date sensitive
2024 Medicare information
Respond by **9/25/2023**

Tom, Tammy, Torrie, Penny, Jenell and Samantha all look forward to working with you again during AEP

Annual Enrollment Period (AEP)
October 15—December 7

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

