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Medicare 101 Training Series

*“The Live event you are about to participate in, is being recorded. As such, it becomes a public record and is subject to disclosure under the Public Records Act (PRA). **We ask that no client specific, confidential, or personal information be discussed.** If you interact with the presenters (e.g., ask questions, make comments, etc.) understand your contributions become part of the public record. If you choose to do so, it implies your consent to being recorded.”*

We will not be taking live questions, please use the Q&A to ask questions, I will respond via email; you are welcome to email me directly as well.

This training will be posted to the DSHS Dual Medicare-Medicaid webpage

<https://www.dshs.wa.gov/altsa/stakeholders/dual-medicare-medicaid>



Medicare's Annual Open Enrollment Period (OEP or AEP)

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Agenda

- Quick Review of Medicare
- What is Medicare's annual Open Enrollment Period (OEP)
- When is it
- Who can participate
- What can Medicare beneficiaries do during OEP
- The Annual Notice of Change (ANOC)

Quick review: Medicare

What is Medicare

Medicare is the federal health insurance program for people:

- **Aged 65** and older
- **Under 65 with a disability** who have received Social Security Disability (SSD) benefits for 24 calendar months
- Must be a U.S. citizen or legal permanent resident (LPR) and must reside in the U.S. for 5 continuous years

Note: Medicare does not cover all medical expenses

Note: Individuals with ESRD and ALS, **do not** have to serve a 24-month waiting period and will automatically receive Medicare Parts A and B the month their Social Security Disability benefits begin

Four Parts of Medicare: Two ways to get Medicare coverage



Medicare Part A inpatient hospital insurance



Medicare Part B outpatient medical insurance

Original Medicare is administered through the federal government

- Can see any provider contracted with Medicare
- Original Medicare (OM) is Part A & Part B only
- Part D prescription coverage is **NOT** included with OM
- OM does **NOT** offer extra supplemental benefits



Medicare Advantage (MA) Part C plans

Part C plans cover everything OM covers in addition to:

- Includes Part D prescription drug coverage
- Added supplemental benefits and services not covered by Original Medicare
- Dual Eligible Special Needs Plans (DSNP) are a type of MA plan
- Administered by private insurance companies



Medicare Part D prescription drug coverage

Part D prescription drug coverage:

- Also known as a Medicare stand alone **P**rescription **D**rug **P**lan (PDP)
- Part D prescription coverage is **NOT** included with OM
- PDPs are available through private insurance companies

Medicare's Annual Open Enrollment Period

(OEP or AEP)

What is Medicare's Annual Enrollment Period (OEP)?

- Occurs every year October 15 – December 7
- Medicare beneficiaries can change their Medicare Part C, Part D, Original Medicare coverage.
- Changes made during OEP take effect January 1st.
- Think of it as your yearly Medicare Health plan coverage check-up.
- If you miss the annual OEP window, beneficiaries will have to wait until next year to make changes (unless they qualify for a Special Enrollment Period).

What Can You Do During the Annual OEP?

The Annual Enrollment Period allows beneficiaries to review their existing Medicare plan and adjust it to fit their current health and financial circumstances for the coming year.

Key actions include:

- **Switch Medicare coverage type:** Beneficiaries can switch from Original Medicare to a Medicare Advantage/(Part C) plan and visa versa.
- **Change Medicare Advantage plan:** Beneficiaries can change their Medicare Advantage (MA) plan, to a different MA plan.
- **Part D Prescription Coverage:** Beneficiaries with Original Medicare, can enroll in a standalone Medicare Prescription Drug Plan (Part D) or switch from one Part D plan to another.
- **Make no changes:** If you are happy with your current Medicare coverage and the plan is still offered in the coming year, you don't need to do anything; your existing coverage will automatically renew.

The Annual Notice of Change (ANOC)

- If you have a Medicare Advantage plan or a stand-alone Medicare prescription drug plan/Part D, you should receive an Annual Notice of Change (ANOC) by September 30th each year.
- All Medicare Advantage plans and stand-alone Part D plans are required to send their enrollees the ANOC for their plan, ahead of Medicare's annual OEP.
- The **ANOC details all changes** to a beneficiaries **MA Part C plan or stand-alone Part D plan** for beneficiaries who have Original Medicare.
- Changes will go into effect January 1
- **Notice of change:** monthly premium, cop-pays, co-insurance, supplemental benefits and provider network,.
- The ANOC may also be **notice** that your plan is **no longer offered** and if you don't act, the plan let's you know they will transfer you to a "comparable plan" which may not be the best option for you.
- **Don't ignore the ANOC!** Use it to make informed healthcare decisions. If you don't receive it, call your plan and request they resend it to you.
- An hour of your time to review your Medicare coverage during OEP for the upcoming year will save you from the headache of the unwanted surprise of increases in costs or loss of coverage for services or medications you need.

Health Plans Make Changes Annually

It is crucial to understand that Medicare Advantage and Part D prescription plans are **not guaranteed** to remain the same year over year. Medicare's annual OEP is your chance to review potential changes before they go into effect January 1st.

Pay close attention to the following areas:

- **Supplemental Benefits:** vision, dental, hearing, grocery allowance and over the counter cash cards, transportation, fitness programs. These supplemental benefits can be added, reduced, or eliminated.
- **Cost:** premiums, deductibles, copayments and coinsurance can increase.
- **Prescription drug coverage (formulary):** The list of covered drugs may change. Your medications might be moved to a different cost tier or no longer be covered at all.
- **Provider and pharmacy network:** Your doctor, specialists, hospital, and pharmacy may no longer be part of the plan's network. Check the plan's directories carefully.

Help with Medicare and Health Plan Comparison

- **SHIBA (Statewide Health Insurance Benefit Advisors):** Free, unbiased Medicare counseling offered through the WA Office of the Insurance Commissioner (WA OIC)
 - **Call SHIBA: 1-800-562-6900**
 - **Find Medicare OEP Counseling Events near you:** <https://www.insurance.wa.gov/insurance-resources/medicare/get-free-medicare-help-shiba/find-medicare-counseling-and-events-your-area>
 - **Find a local SHIBA office near you:** <https://www.insurance.wa.gov/insurance-resources/medicare/get-free-medicare-help-shiba/find-local-shiba-office>
 - **Medicare Plan Finder/Medicare plan comparison tool:** <https://www.medicare.gov/plan-compare>
 - **HCA Apple Health Medicare Connect (DSNP) information/resources:** <https://www.hca.wa.gov/free-or-low-cost-health-care/i-need-medical-dental-or-vision-care/apple-health-medicare-connect>
 - **DSHS Dually eligible for Medicare-Medicaid information/resources:** <https://www.dshs.wa.gov/altsa/stakeholders/dual-medicare-medicaid>

Key Takeaways: Medicare's Annual Open Enrollment

- Medicare OEP is the annual opportunity to review and change your Medicare coverage for the coming year.
- Occurs annually October 15th through December 7th. Changes made take effect on January 1st.
- Your healthcare needs may have changed: A new diagnosis, medication, or doctor could mean your current plan is no longer the best fit. Take this time to review all coverage options.
- Your MA Part C or Part D plan can change annually: Your Medicare Part C and Part D coverage is NOT guaranteed to remain the same year over it. Health plans make changes annually to premiums, co-pays, deductibles, supplemental benefits, prescription formulary and provider networks.
- You could save money: Don't miss the chance to find a plan with lower premiums or better coverage for your specific needs.
- Read your Annual Notice of Change (ANOC). Your plan sends this document every year by September 30th, and it details all the changes to your health plan for next year. Don't throw it out!. Use it to make informed health plan coverage decisions.
- If you didn't get the ANOC or tossed it – call your Medicare health or prescription plan and request, they mail you a copy.
- Verify your coverage. Check if your prescription drugs are on the plan's formulary and if your doctors and hospitals are still in-network.
- Decide by December 7th. If you find a better plan, make the switch.
- If you're happy with your plan and it's still offered, you don't need to do anything—your coverage will automatically renew.
- [Medicare.gov](#) Medicare Plan Finder, compare and/or enroll Part C both DSNP or non-DSNP Medicare Advantage plans and stand-alone Rx drug plans.
- HCA Apple Health Medicare Connect (DSNP) website on all things dually eligible and **includes MA plan contact information** and resources <https://www.hca.wa.gov/free-or-low-cost-health-care/i-need-medical-dental-or-vision-care/apple-health-medicare-connect>
- For help with Medicare enrollment [call SHIBA 1-800-562-6500](#)
- DSHS Dually Eligible Medicare-Medicaid information/resources: <https://www.dshs.wa.gov/altsa/stakeholders/dual-medicare-medicaid>



Thank You

Resources

- HCA Aligned Enrollment one pager: <https://www.hca.wa.gov/assets/free-or-low-cost/apple-health-medicare-connect-aligned-enrollment.pdf>
- Dual Eligible Special Needs Plans(DSNPs): <https://www.hca.wa.gov/free-or-low-cost-health-care/i-need-medical-dental-or-vision-care/dual-eligible-special-needs-plan-d-snp>
- Dual Eligible Special Needs (DSNPs) service area guide: <https://www.hca.wa.gov/assets/free-or-low-cost/d-snp-service-area-guide.pdf>
- How do I contact the MA DSNP plans?: <https://www.hca.wa.gov/free-or-low-cost-health-care/i-need-medical-dental-or-vision-care/dual-eligible-special-needs-plan-d-snp#how-do-i-contact-the-plans>
- How do I change my BHSO only plan?: <https://www.hca.wa.gov/free-or-low-cost-health-care/i-need-medical-dental-or-vision-care/dual-eligible-special-needs-plan-d-snp#how-do-i-change-my-behavioral-health-services-only-plan>
- DSHS Dual Medicaid-Medicaid (trainings & resources): <https://www.dshs.wa.gov/altsa/stakeholders/dual-medicare-medicaid>
- Centers for Medicaid & Medicare (CMS) federal site of everything you might want to know about DSNPs: <https://www.cms.gov/Medicare/Health-Plans/SpecialNeedsPlans/D-SNPs>
- Medicare Enrollment Periods and related forms: <https://www.medicare.gov/basics/get-started-with-medicare/sign-up/when-does-medicare-coverage-start>
- Medicare Savings Program (MSP): <https://www.hca.wa.gov/free-or-low-cost-health-care/i-need-medical-dental-or-vision-care/medicare-savings-program>
- Social Security Administration (SSA) enroll in Medicare <https://www.ssa.gov/medicare/sign-up>
- SHIBA: Get help with Medicare enrollment and navigating dual eligibility: <https://www.insurance.wa.gov/statewide-health-insurance-benefits-advisors-shiba>
- Medicare & You Handbook: <https://www.medicare.gov/medicare-and-you>