

AEP CHECKLIST



WHAT IS ANNUAL ENROLLMENT PERIOD (AEP)?

This is the time when you can make changes to your current Medicare Advantage and stand-alone Prescription Drug Plans.

WHEN IS IT?

October 15th - December 7th.

Changes that are made during this time, will be effective January 1st.

WHAT CHANGES* CAN BE MADE?

- The most popular changes are:
- Switch from one Medicare Advantage plan to another Medicare Advantage plan.
- Enroll in a stand-alone Medicare Part D Prescription Drug Plan.
- Switch from one stand-alone drug plan to another stand-alone drug plan.

*Additional acceptable changes can be found on www.CMS.gov

USE THE FOLLOWING QUESTIONS TO HELP GUIDE YOU THROUGH THE PROCESS OF REEVALUATING YOUR MEDICARE COVERAGE OPTIONS.



1

HAS MY HEALTH CHANGED IN THE PAST YEAR?

Have you been diagnosed with a new illness or condition? Are you not using your health coverage as much as you once were?

2

HAVE YOU REVIEWED YOUR ANNUAL NOTICE OF CHANGE LETTER (ANOC LETTER)?

These letters come from your current carrier and will indicate changes for next year. Are the changes going to impact you in a positive or negative way?

3

HOW WELL ARE MY PRESCRIPTION DRUGS COVERED?

Are you in the Donut Hole (Coverage Gap) or feel like you are paying too much for your prescriptions at the pharmacy? Are you using a preferred or mail-order pharmacy?

4

HAVE MY FINANCES CHANGED?

Are your premiums, deductibles, copays, and coinsurance still affordable under your current financial situation? Compare your current finances with your existing Medicare coverage, if it no longer makes sense you may want to look at more affordable options.

5

ARE YOUR DOCTORS STILL GOING TO BE COVERED?

Have you changed doctors or received a notice that your doctor will not be in-network? Doctors can be in-network one year, and out-of-network the next. This is not always communicated to patients.

6

DO YOU WANT EXTRA BENEFITS?

Are you needing dental, vision or hearing aid coverages? Are these offered in your current plan, but needing more coverage? Are you wanting to have over-the-counter benefits or fitness memberships?

7

WHAT CAN I EXPECT MY OUT-OF-POCKET COSTS TO BE NEXT YEAR?

When choosing a plan be aware of any gaps in coverage that may require you to pay out of pocket. What does the worst-case scenario would look like? Consider whether you would be able to afford out of pocket costs in the event of an emergency.

8

WILL YOU BE DOING ANY TRAVELING NEXT YEAR?

Original Medicare can be used nationwide at any provider that accepts Medicare. However, some Medicare Advantage plans rely on a network of doctors that can only be used in specific location.

9

DO YOU RECEIVE ANY FINANCIAL ASSISTANCE?

Have you applied for MO HealthNet and have been approved or waiting for your determination? Are you eligible for LIS or Extra Help? This can be a factor of which plan is best for you.

10

ARE YOU NEEDING MORE OUT OF YOUR PLAN?

Do you need a hearing aid or better dental coverage? Is there a prescription copay that seems to be increasing? You might find there are needs or concerns that have come up the past year. Now is the time to see if there is a plan that can better fit your needs.

NOTES

READY TO REVIEW YOUR MEDICARE PLAN FOR 2023?

Contact US!



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CONTACT US page on our website!

Take a picture to request a review form



FREE* REVIEW

Our agency offers a consultative review of plan options at no-cost to you!

*Agent may be compensated by the insurance carrier based on your enrollment in a plan.

DISCLAIMER: We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800-MEDICARE to get information on all of your options.