





# Course 9: Election Periods - AEP, MA OEP, ICEP, IEP, & SEPS

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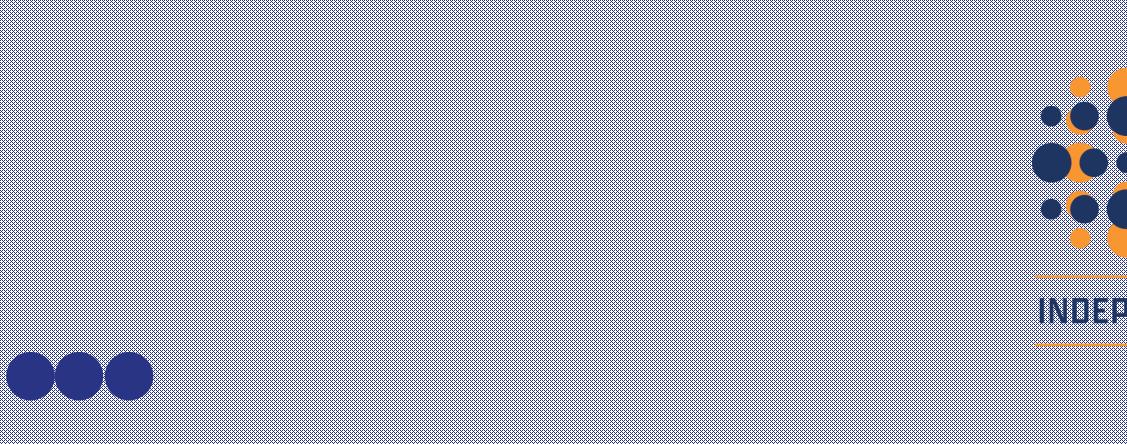


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### INDEPENDENT COMMUNITY BROKER NETWORK



388-361-6316



# Interrupting your

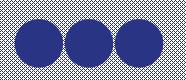
# regularly scheduled

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# Bonus: The Donut Hole – 2024 vs. 2025 What's Changed





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### **INDEPENDENT COMMUNITY BROKER NETWORK**

888-341-4314



### Deductible

Enrollee Pays: 100% of their drug cost until the Part D deductible is met.

Deductible maximum is \$545

### Initial Coverage

Enrollee Pays: 25% of total drug cost

A copayment or coinsurance for each formulary covered drug.

Part D Plans Pay: 75% of total drug cost Until the combined total is \$5030

### Gap ("The Donut Hole")

Enrollee Pays: 25% up to \$8000 TROOP

Part D Plan Pays: 75% Generic drugs 5% Brand-name drugs

Drug Manufacturer Pays: 70% Brand-name drugs

\$8,000 out-of-pocket maximum

### Catastrophic

Enrollee Pays: \$0

Part D Plan Pays: 20% of total drug costs

Drug Manufacturer Pays: 80% of total drug costs

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### Deductible

Enrollee Pays: 100% of their drug cost until the Part D deductible is met.

Deductible maximum is \$590 Initial Coverage

Enrollee Pays: 25% of total drug cost

A copayment or coinsurance for each formulary covered drug.

Part D Plans Pay: 75% of generic drug cost 65% of Brand drug cost

Drug Manufacturer: 10% discount on brand name drugs

\$2,000 out-of-pocket maximum

### Catastrophic

Enrollee Pays: \$0

Part D Plan Pays: 60% of total drug costs

Drug Manufacturer 10% discount on brand-name drugs

Medicare Pays: 20% of brand-name drugs 40% of generic drugs

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### Deductible

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Deductible Initial Coverage Catastrophic 2025 Enrollee Pays: Enrollee Pays: Enrollee Pays: 25% of total drug cost \$0 100% of their drug cost until the Part D deductible is A copayment or coinsurance for Part D Plan Pays: met. each formulary covered drug. 60% of total drug costs Deductible maximum is Part D Plans Pay: Drug Manufacturer: \$590 75% of generic drug cost 10% discount on brand-name drugs 65% of Brand drug cost Medicare Pays: Drug Manufacturer: 20% of brand-name drugs 10% discount on brand name drugs 40% of generic drugs

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# **The Predicted Impacts:**



Increased premiums on Standalone Drug Plans



Higher deductibles that impact more tiers of drugs

Decreased Medicare Advantage benefits Potential formulary reductions on standalone PDP







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### INDEPENDENT COMMUNITY BROKER NETWORK



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- ANNUAL Enrollment Period: October 15 December 7th
- MEDICARE Advantage Open Enrollment Period: January 1 March 31st
- INITIAL Coverage Election Period / INITIAL Election Period
- SPECIAL Enrollment Periods (SEPs)

# hber 7th d: January 1 – March 31st **ction Period**



# PLAN FOR 17 How to Maximize **AEP**.

- Identify the "problem children"
  - The worst plans for the person & for the pharmacy
- Do your homework
  - Log into MedicareCENTER
    - Create the client profiles
    - Start evaluations



YOU 



# **SET GOALS**

• Work your timeline. Work backwards.

## **ANNUAL ENROLLMENT PERIOD**

- October 1 October 14: 2-weeks (pre-work)
- October 15 December 7:8-weeks

# **Total: 10-weeks**





## GOAL: 100 apps during AEP

### **THEN:**

- 100 app ÷ 8 weeks = 12.5 apps / week
- How many days/week are you planning on working? **3-days**

### **Therefore:**

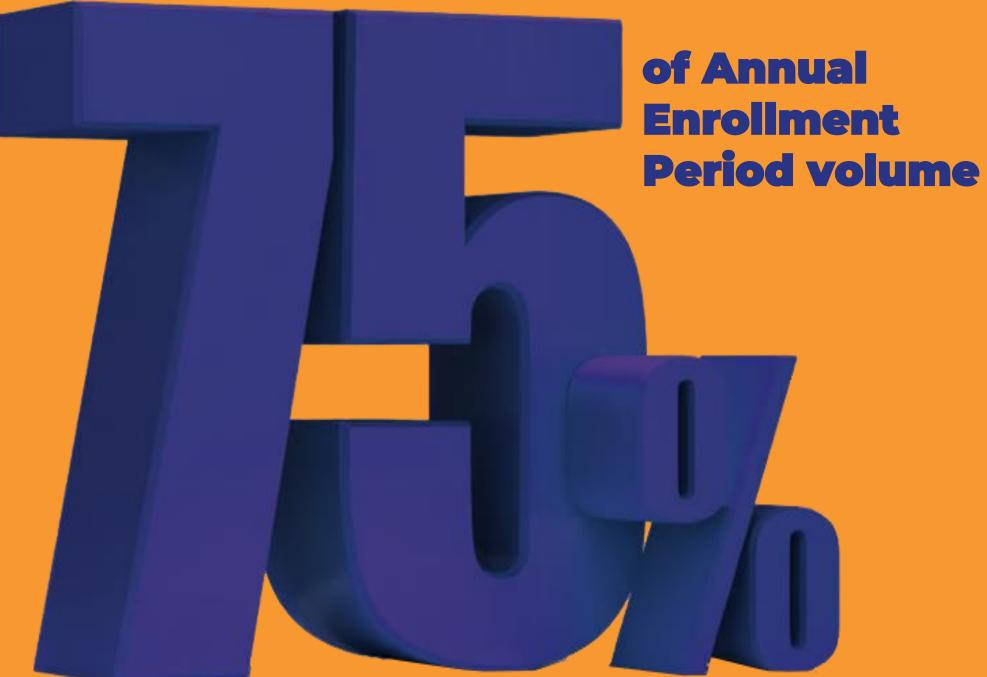
- Must write ~4 apps per day
- Not all people enroll. Average close rate 40%
- This mean you need to meet 8-people per day or 24 ppl/week

### **SUMMARY:**

Need to speak with +200 people in 8-weeks







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### MEDICARE ADVANTAGE OPEN ENROLLMENT January 1 – March 31st

- Work with in conjunction with the carriers; broker manager program
- Meet with local broker for leads from carrier call center; offer to handle the people who want to meet in person
- Review your Database
  - Note the "crap" plans and scripts Offer to do a plan review
- **Target** February and March

### **Need to Know:**

- Don't advertise as an election period
- Instead "It's a new year, let's review your plan". Market the consultation.
- Ensure the plan they selected is working for them (60-day follow-up)



- Turning 65
- Special Needs Plans D-SNP, C-SNP, I-SNP

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### **5-Star Plan SEP**

You can switch into a plan with a 5-star rating anytime • during the year, even outside of an enrollment period

## **Qualification:**

• Must live in the 5-star plan service area

## **What Actions Can Take Place:**

- May disenroll from a MA plan, PDP, or Cost plan •
- May leave Original Medicare •

### To

ENROLL in a 5-Star MA plan, PDP, or a Cost plan  $\bullet$ 

## **Timing:**

• Available from December 8 through November 30<sup>th</sup> of the following year



# Utilize TURNING 65 Medicare educational events, seminars, or workshops

Remember, events are to help participants understand available Medicare options and ultimately make informed decisions. The GOAL: To INFORM and EDUCATE ONLY!



### WHO:

People who are within a year of turning 65

### WHEN:

### WHAT:

- Keep presentation KISS (Keep It Simple & Straightforward)
- No pressure atmosphere
- General information only, **no specifics**

### WHERE:

Public venue

Best days: Tuesday, Wednesday, or Thursday Pay attention to holidays. Best to be avoided



### **1. Change** of Residence

- **2. Involuntary loss** of creditable coverage
- **3. Gaining or losing** eligibility for Medicaid or the Part D low-income subsidy ("Extra Help")
- 4. Dropping a Medicare Supplement policy after enrolling for the 1<sup>st</sup> time in a Medicare Advantage plan. still in "TRIAL PERIOD" and has guaranteed enrollment.

5. Chronic Conditions

6. Dual Eligible Medicare – Medicaid



### **Change in Residence:**

- Beneficiary moved out of their existing plan's service area

## **SEP begins:**

Month before the permanent move, IF the plan is notified in advance

Or

Month the beneficiary provide notice of the move

### **Duration:**

the move, whichever is later

## **Timing:**

• Effective date up to 3 months after month the enrollment form is received by the plan but NOT earlier than the permanent move

# New options available to them as a result of a permanent move

2 months following the month the SEP begins or the month of

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### Extra Help Income and Asset Limits 2024

Extra Help is a federal program that lowers your Medicare prescription drug coverage (Part D) monthly premium and any deductible, coinsurance, and copayments. You may qualify if you have limited income and assets.

You have	Your eligibility requirements	Your costs
Medicare only	Income Limit Individual: \$1,903/month Couple: \$2,575/month	\$0 premium <sup>3</sup> and deductible
	Individual: \$17,220 Couple: \$34,360	\$4.50 generic copay \$11.20 brand-name copay
Medicare and a Medicare Savings Program (MSP) only	You are automatically enrolled in Extra Help	
Medicare and Medicaid with or without an MSP		\$0 premium <sup>3</sup> and deductible
	You are automatically enrolled in Extra Help	Income above 100% FPL \$4.50 generic copay \$11.20 brand-name copay
		\$1.55 generic copay \$4.60 brand-name copay

<sup>1</sup> Income limits are based on the 2024 Federal Poverty Level (FPL). Limits are higher for each additional relative living with you for whom you are responsible. Income and asset limits on this chart are rounded to the nearest whole dollar. There is a \$20 income disregard (factored into the income limits above) that the Social Security Administration automatically subtracts from your monthly unearned income.

<sup>2</sup> Asset limits include \$1,500 per person for burial expenses.

<sup>3</sup> You pay no premium if you have a basic Part D drug plan with a premium at or below the Extra Help premium limit for your area

<sup>4</sup> You pay \$0 copays if you are institutionalized or receive home and community-based services

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### Low Income Subsidy (Extra Help): Helps people with Medicare pay for prescription drugs, and lowers the costs of Medicare prescription drug coverage.

### **Qualifications:**

- Live in the United States or the District of Columbia • Entitled to Medicare Part A or Part B or both • Annual income below \$22,590 for an individual or \$30,660 for a married couple

- Resources are below \$17,220 for individual or \$34,360 for a married couple
- Not incarcerated

### **How to Apply:**

- Online at <u>www.SSA.gov/Extral</u>
- Call 800-772-1213 / TTY 800-325-0778

\*Income limits are based on the 2024 Federal Poverty Level.





## **Medigap SEP**

### What is it?

Any Medicare beneficiary who dropped a Medigap policy when they enrolled for the **first time in a Medicare Advantage** plan has a SEP during the first 12 months ("Trial Period") of their enrollment in the Medicare Advantage plan.

They can elect to disenroll from their first MA plan and go back to Original Medicare with a guaranteed eligibility period to rejoin a Medicare Supplement plan.

## **Duration**:

12 months

## **Timing:**

• The first 12 months of enrollment in a Medicare Advantage plan after dropping a Medicare Supplement plan





## **Severe or Disabling Chronic Conditions:**

### Who:

Beneficiary who has a sever or disabling chronic condition

## **Chronic Conditions:**

- Lasting one or more years
- Requires ongoing medical attention
- Limits activities of daily living
- Examples: Diabetes, chronic heart failure, stroke, cardiovascular disorders

### **SEP Duration:**

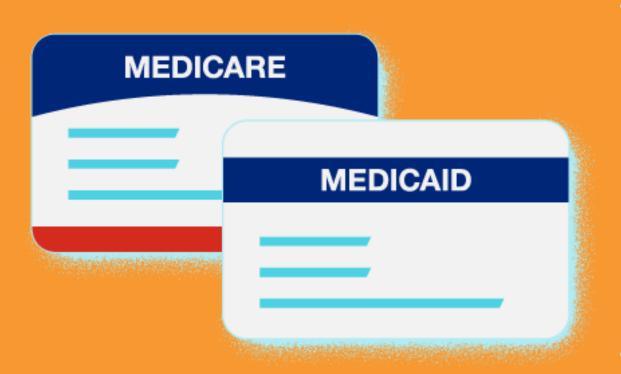
- As long as the individual has the qualifying condition
- SEP ends once the individual enrolls in a C-SNP

### Loss of Special Needs SEP

Beneficiaries enrolled in a SNP who are no longer eligible for the SNP because they no longer meet the specific special needs status have a SEP that begins the month the individual's special needs status changes and ends when they make an enrollment request or 3 calendar month after the effective date of involuntary disenrollment from the SNP, whichever is earlier.

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# **Dual Special Needs Plan (D-SNP)**

- For people who have both Medicare and Medicaid.
- Designed for people who may need more help because of disabilities, age, or health conditions

## **Eligibility Requirements:**

- Receive Medicaid benefits
  - You are under age 65 and meet the requirements for low-income families, pregnant women and children, individuals receiving Supplemental Security Income (SSI), disability or other special situation.
  - You are at least 65 years old and you also:
  - Receive Extra Help or assistance from your state
  - Are blind or have a disability, but do not need longterm care
- Have Medicare Part A and Part B
  - You're at least 65 years old, or you're under 65 and qualify on the basis of disability or other special situations AND
  - You're a U.S. citizen or a legal resident who has lived in the U.S. for at least 5 years in a row
- Live in service area

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# Thank you!





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