

Common Open Enrollment Notices

You can make changes to your Medicare coverage each year during Medicare's Open Enrollment, which runs October 15 to December 7. Around September, you will start to receive notices with information about any changes to your coverage for the coming year. Read these notices so you can decide if your coverage will continue to meet your needs or if you should change it.

Annual Notice of Change (ANOC) and Evidence of Coverage (EOC)

- Sent to people who have a Medicare Advantage Plan or Part D plan
- Notices include any changes to your plan in 2025
- Look for any changes to the plan's:



Provider network



Costs



Formulary (list of drugs)

If you are unhappy with any changes to your plan, you can enroll in a different plan for 2025.

Medicare & You Handbook

- Sent to everyone enrolled in Medicare
- Includes information about Medicare-covered services
- Lists Medicare Advantage Plans and Part D plans in your area
- If you did not receive a *Medicare & You* handbook, you can call 1-800-MEDICARE to request that your region's copy be sent to you



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Other notices you may receive



Plan Non-Renewal Notice

You receive this notice in October if you are enrolled in a plan that is leaving the Medicare program in the coming year. You should enroll in a new plan during Open Enrollment. If you do not enroll in a new plan at this time, you will also have until the last day in February to enroll in a new plan.



Consistent Poor Performance Notice

You receive this notice in late October if you are enrolled in a plan that has received a low rating for three or more years in a row. A low rating is three stars or fewer out of five. Plans are rated on their quality and performance, such as how well they handle appeals. This notice encourages you to look at other plan options in your area.

Medicare marketing violations

Beginning in October, you will likely start receiving mail from different insurance companies about the plans they offer. You can use this marketing information to compare your options. Although companies can send you mailings, you should know that they must follow certain rules when marketing their plans.

Some examples of marketing violations include:

- A plan cannot use language that suggests their plan is preferred by Medicare
- A plan cannot call or email you if you did not ask them to do so
- A plan cannot leave information like flyers or door hangers on your car or at your home if they came from a company that did not have an appointment with you



If you think you have experienced marketing violations, you should report it. Keep any documented proof, such as an agent's business card, marketing materials, emails, or phone call records. You can report marketing violations to 1-800-MEDICARE or the Ohio Senior Health Insurance Information Program (OSHIIP) or the Ohio Senior Medicare Patrol. We can explain the government's marketing rules, help you review the incident, and report it to the correct authorities, if needed. Contact information is on the final page of this document.

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Read your Medicare statements

It's important to read your Medicare statements especially during Open Enrollment as you may be switching plans.



You should receive **Medicare Summary Notices (MSNs)** if you have Original Medicare (You can also review your MSNs on your online Medicare.gov account).



You should receive **Explanation of Benefits (EOBs)** if you have a Medicare Advantage Plan or Part D plan.

MSNs and EOBs provide a summary of the services and items you have received and how much you may be billed for them. Remember that MSNs and EOBs are not bills. If you need help reviewing your Medicare statements, you can contact OSHIP or the Ohio SMP (contact information on the last page).



Reading your MSNs and EOBs is an important strategy for detecting potential Medicare fraud, errors, or abuse. Keep the following tips in mind:

- Review yours or your loved one's Medicare statements as soon as they arrive.
- Keep notes of your medical appointments and compare these to your statements to ensure that your MSN or EOB is accurate.
- Confirm that everything listed on the statement is accurate—in other words, that you actually received all listed services or items.
- Contact your health care provider or plan if you have any questions or notice any mistakes on your MSNs or EOBs.
- Contact the Ohio SMP for a free My Health Care Tracker (helps you keep track of your appointments) or to receive assistance on how to read your Medicare statements.



If you find any mistakes on your statements and your provider will not fix them, you can contact the Ohio Senior Medicare Patrol. We help Medicare beneficiaries, their families, and caregivers prevent, detect, and report potential Medicare fraud, errors, and abuse.

Where can I go for more help?

Ohio Senior Health Insurance Information Program (OSHIIP): Contact OSHIIP if you have questions about any notices you receive. OSHIIP counselors can help you understand the notices you receive in advance of the fall Open Enrollment Period. When you contact OSHIIP, a certified Medicare counselor will give you one-on-one guidance based on your unique situation and needs.

Ohio Senior Medicare Patrol (SMP): Contact the Ohio SMP if you receive any notices or Medicare statement charges that seem suspicious. Our trained staff can teach you how to spot and protect yourself from potential Medicare fraud, errors, or abuse.

Ohio Senior Health Insurance Information Program	Ohio Senior Medicare Patrol
800-686-1578 OSHIIPmail@insurance.ohio.gov	800-293-4767 smp@proseniors.org
www.insurance.ohio.gov	www.proseniors.org/ohio-smp
To find a SHIP in another state: Call 877-839-2675 (and say “Medicare” when prompted) or visit www.shiphelp.org	To find an SMP in another state: Call 877-808-2468 or visit www.smpresource.org
SHIP Technical Assistance Center: 877-839-2675 www.shiphelp.org info@shiphelp.org SMP Resource Center: 877-808-2468 www.smpresource.org info@smpresource.org © 2024 Medicare Rights Center www.medicareinteractive.org	
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