Medicare Open Enrollment Preview

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Alliance for Health Reform, in partnership with the Kaiser Family Foundation

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Medicare
Open Enrollment Period:
October 15 – December 7, 2015
Medicare Advantage Plans

- Beneficiaries can choose among private plans, such as HMOs and PPOs, as an alternative to traditional Medicare for their Medicare-covered benefits (Parts A and B)
- Most Medicare Advantage plans also provide prescription drug coverage (Part D)
- Plans vary in a number of ways, including in premiums, cost-sharing, extra benefits, prescription drug benefits, and provider networks

Medicare Stand-Alone Part D Plans

- Beneficiaries covered under traditional Medicare may elect to get prescription drug coverage under a stand-alone Medicare prescription drug plan (PDP)
- Part D is offered exclusively by private plans (not integrated into traditional Medicare)
- Part D plans vary in a number of ways, including in premiums, cost-sharing, the list of covered drugs (formularies), and pharmacy networks

Beneficiaries are encouraged to review their options during the open enrollment period and choose a plan that will best meet their needs, but relatively few do.

Exhibit 2: Open Enrollment Period: Medicare Advantage and Medicare Prescription Drug Plans (PDPs)

Exhibit 3: Key Decisions for the Medicare Open Enrollment Period

Traditional Medicare

39 million beneficiaries
(24 million PDP enrollees)

**Decision #1:**
Switch to a new PDP?
(26 options, on average)

**Decision #2:**
Switch from traditional Medicare to Medicare Advantage?

Or...
Make no change

Advantage beneficiaries

17 million beneficiaries

**Decision #1:**
Switch to a new Medicare Advantage plan?
(19 options, on average)

**Decision #2:**
Switch from Medicare Advantage to traditional Medicare?
- Choose a PDP

Or...
Make no change
### What Matters to Beneficiaries?

<table>
<thead>
<tr>
<th>✓ Costs</th>
<th>Traditional Medicare</th>
<th>Medicare Advantage</th>
<th>Part D Plans</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Premiums</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>- Deductibles and cost-sharing</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>- Out-of-network charges/in-network discounts</td>
<td>✓</td>
<td>✓</td>
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</table>

<table>
<thead>
<tr>
<th>✓ Access</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>- Physicians, hospitals and other providers</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>- Pharmacies</td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>- Medications on the formulary</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
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| ✓ Quality                   | ✓                      | ✓                  | ✓            |

✓ A balance between choice and simplicity

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For more information, visit [kff.org/medicare](http://kff.org/medicare)