

Changing Medicare Plans -- PlanPrescriber Offers 5 Recommendations for 2011 Medicare Disenrollment Period

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Today PlanPrescriber (www.planprescriber.com), a wholly-owned subsidiary of eHealth, Inc (NASDAQ: EHTH), published advice for Medicare beneficiaries considering changing their Medicare coverage during the 2011 Medicare Advantage Disenrollment Period (MADP). This advice is designed to help Medicare beneficiaries make the best choices regarding their coverage options during the 2011 Medicare ADP that runs from January 1 through February 14, 2011.

Medicare beneficiaries enrolled in private Medicare Advantage health plans have the option to leave those plans during the Medicare Advantage (MA) Disenrollment Period. Medicare beneficiaries who choose to leave their Medicare Advantage plan can only switch to "Original Medicare" coverage administered by the federal government, and a stand-alone Medicare Part D Prescription Drug Plan (PDP) if they wish. They cannot use this disenrollment period to go from one MA plan to another.

Original Medicare often does not cover the full cost of care, so Medicare beneficiaries who decide to drop their Medicare Advantage coverage may also wish to purchase supplemental Medicare coverage (often referred to as "Medicare Supplement" or "Medigap") to help cover out-of-pocket costs. However, some limitations, terms and conditions may limit consumers' ability to enroll in a Medicare Supplement plan, depending on the state they live in and the insurer they choose.

To help Medicare beneficiaries make the right decisions about their coverage during the Medicare Advantage Disenrollment Period (MADP) and how the MADP applies to them, licensed agents at eHealthInsurance (an affiliated company of PlanPrescriber) recommend that Medicare beneficiaries take the following actions before disenrolling from a Medicare Advantage plan:

Recommendation #1 -- Check your calendar: In the past, Medicare offered a Medicare Advantage Open Enrollment Period (OEP), which ran from January 1 through March 31 each year. That period gave Medicare beneficiaries three full months to determine if they liked their Medicare Advantage plan before they changed it.

But, in 2011, those three months have been cut in half. The new 2011 Medicare Advantage Annual Disenrollment Period runs only from January 1 through February 14. So, Medicare beneficiaries have less time to determine if they are happy with their Medicare Advantage coverage before they decide to keep it or make a change.

Recommendation # 2 -- Check it before you wreck it: Before you change your coverage, it's a very good idea to be sure that the plan you're moving to still provides the benefits you need, especially because you cannot switch from one Medicare Advantage plan to another during the MADP. You can only disenroll from a Medicare Advantage plan and enroll in original Medicare, either with a stand-alone Medicare Part D Prescription Drug Plan (PDP) or not.

If you plan to drop a Medicare Advantage plan, which often covers a portion of your visits to a primary care physician, you need to check with your doctor to make sure that he or she will still see you. Not all physicians see patients on original Medicare. If your doctor does take Medicare, he or she may charge up to 15 percent more than the Medicare approved amount for each service, although Medicare Supplement plans are available to cover that additional 15 percent.

Recommendation #3 -- Review your prescriptions: Before you move from a Medicare Advantage (MA) plan to original Medicare and a Medicare Part D Prescription Drug Plan (PDP), compare the cost of a PDP that covers your medications with the Medicare Advantage plan you're currently on.

It's very easy to compare plans on a web site like PlanPrescriber.com. The site allows you to input the drugs and doses you're taking, as well as the MA plan that you're currently on, to compare the costs and expenses associated with different plans and types of coverage based on the criteria you enter

Once you've compared the Medicare Advantage plan that you're on with a Prescription Drug plan, you'll have a much more realistic sense of the costs associated with each and you'll be in a better position if you decide to change your coverage. You'll have a much better sense of what you may expect to pay for your prescription drugs under either plan.

Recommendation #4 -- Check out Medicare Supplement Plans: Original Medicare coverage has gaps that could cost you money if you get sick. For that reason, many Medicare beneficiaries who cancel their Medicare Advantage coverage elect to augment their original Medicare with a Medicare Supplement plan.

Medicare Supplement plans typically provide richer benefits than Medicare Advantage plans, but they also usually have higher monthly premiums. There are a total of 10 Medicare Supplement plan types: A, B, C, D, F, G, K, L, M and N (some plans types are not available in all areas). And each plan type is required to cover the exact same benefits, so if you buy plan K from one insurer it must provide the exact same coverage as plan K from another insurer.

Before you cancel a Medicare Advantage plan, review and compare the cost and benefits of the Medicare Supplement plans in your area, and talk to a licensed agent to be sure you can qualify for Medicare Supplement. In some cases, with these plans, an insurer can deny your application for coverage after they evaluate your current medical condition.

Recommendation #5 -- Fill a prescription, fast: Most Medicare beneficiaries don't review their Medicare Advantage Prescription Drug coverage on a yearly basis(1). But, the plans and the drugs these plans cover do typically change from year-to-year. And, if you're ordering 90 day supplies of

medications in order to save money, or having them sent to you through the mail, you may reach the end of the MADP (February 14, 2011) before you're aware that one of the drugs you're taking is no longer covered or that the co-pays or coinsurance have gone up.

If your prescription drug coverage has changed, PlanPrescriber's prescription drug comparison tool can help you find generic alternatives to the drugs you're on -- which could save you money -- or it may show you a Prescription Drug plan you can enroll in that could save you money over your MA plan.

You may be able to get Extra Help to pay for your prescription drug premiums and costs. To see if you qualify for Extra Help, call: 1-800-MEDICARE (1800-633-4227). TTY users should call 1-877-486-2048, 24 hours a day/ 7 days a week; the Social Security Office at 1-800-772-1213 between 7 a.m. and 7 p.m., Monday through Friday. TTY users should call, 1-800-325-0778; or Your Medicaid Office (only required for pieces referencing Part D benefits or cost-sharing).

In general, beneficiaries must use network pharmacies to access their prescription drug benefit, except in non-routine circumstances, and quantity limitations and restrictions may apply.

Medicare has neither reviewed nor endorsed this information

Sources: (1)According to an Opinion Research Survey sponsored by eHealthInsurance that showed only one-in-five (22%) Medicare beneficiaries over the age of 65 planned to review their Medicare coverage options during Medicare's 2011 Annual Enrollment Period (11/15/2010 to 12/31/2010). Data is a summary of findings from two telephone surveys conducted by Opinion Research Corporation among random national samples of 2,019 adults 18 years of age and older, living in private households in the continental United States. The actual data provided in this report includes responses from 595 survey respondents over the age of 65. The data provided here is a subset of the complete survey data. Interviewing for this survey was completed by Opinion Research Corporation during the period of December 2 - 6, 2010. A complete copy of the survey results is available upon request: http://news.ehealthinsurance.com/pr/ehi/medicare-enrollment-survey-finds-188981.aspx

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