

Medicare



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INDEPENDENT COMMUNITY BROKER NETWORK



Course 9:

Election Periods

AEP, MA OEP, ICEP, IEP, & SEPs



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888-341-4314

- **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)**

PLAN FOR IT!

How to Maximize **AEP**.

October 15 – December 7th

- 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

ARE YOU READY?

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:

- $100 \text{ app} \div 8 \text{ weeks} = \mathbf{12.5 \text{ apps / week}}$
- 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**

75%

**of Annual
Enrollment
Period volume**

THE NEXT BIGGEST OPPORTUNITY

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)**

DON'T MISS OUT! PLAN AHEAD!

- Initial Election Period (IEP)
- 5-Star Plans
- Change in Residence
- Involuntary Loss of Coverage
- Chronic Condition
- Dual Eligibility
- Extra Help (LIS)
- Medigap SEP (Trial Period)



Initial Election
Period



Loss of Coverage



5-Star Plan



Change of Address



Extra Help (LIS)



Dual Eligible



Chronic Condition



Institutionalized



Medigap SEP



FEMA



IEP for Medicare:

This is a 7-month period when you're first eligible for Medicare. It starts 3 months before the month you turn 65, includes the month you turn 65, and ends 3 months after your 65th birthday.

Using IEP as SEP:

If you delay enrolling in Medicare during your Initial Enrollment Period because you're still working and have health insurance through your or your spouse's current employer, you may qualify for a **Special Enrollment Period (SEP)**. This allows you to sign up for Medicare without facing late enrollment penalties, even if you miss your IEP.

When it applies: If you're covered by an employer health plan (either your own or your spouse's) when you turn 65, you can delay enrolling in Medicare without penalties. The SEP allows you to sign up for Medicare anytime while you're still working or during the 8 months after you stop working or lose your employer health coverage (whichever comes first).



In short, the IEP is the period you first become eligible for Medicare, and if you're covered by employer insurance, you can use a SEP later to enroll without penalties, based on the situation described above.



If someone is on Medicare before age 65 (due to a disability or other qualifying condition), they will typically be eligible for a second Initial Enrollment Period (IEP) when they turn 65.

Medicare before age 65:

People under 65 can qualify for Medicare if they have a disability, a specific medical condition (like End-Stage Renal Disease or Amyotrophic Lateral Sclerosis), or other qualifying factors. When someone qualifies for Medicare due to disability, they usually enroll in Medicare Parts A and B, and their coverage typically starts after a 24-month waiting period (for those with disabilities).

Second IEP at age 65:

Once the person turns 65, they become eligible for Medicare due to age, which is considered a separate qualifying event. This triggers a **second Initial Enrollment Period** (IEP) for them, specifically related to turning 65. This second IEP is the same as it would be for anyone turning 65, and it lasts for 7 months.

Key Points:

- If someone already has Medicare due to a disability, they still have a second IEP when they turn 65 to make any desired changes to their Medicare coverage.
- This second IEP allows them to enroll in Part D (if they hadn't already) or switch between different Medicare plans (like from Original Medicare to Medicare Advantage).
- Missing this second IEP may result in late enrollment penalties or restrictions on when they can make changes to their coverage.



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

Timing:

- Available from December 8 through November 30th of the following year



Change in Residence:

- Beneficiary moved out of their existing plan's service area
- New options available to them as a result of a permanent move

SEP begins:

- Month before the permanent move, IF the plan is notified in advance
- **or**
- Month the beneficiary provide notice of the move

Duration:

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



Involuntary Loss of Coverage:

- This includes losing employer-sponsored coverage due to job loss, your employer dropping coverage, or losing Medicaid or another creditable drug coverage.

Examples of Involuntary Loss:

- Losing your job and employer-sponsored insurance
- Losing eligibility for Medicaid or CHIP
- Your employer drops your current coverage
- Your spouse loses their job and you lose coverage through their plan
- Involuntary loss of another creditable drug coverage
- Leaving a Medicare Cost Plan or Program of All-Inclusive Care for the Elderly (PACE) plan

What Doesn't Count:

- Voluntarily dropping coverage or failing to pay premiums does not trigger an SEP.

Duration:

- The SEP lasts for two full months after the month you lose your coverage, or for two months after you are notified that your coverage is no longer creditable, whichever is later.

What You Can Do:

- During the SEP, you can enroll in a Medicare Advantage plan, switch to a different plan, or enroll in a Medicare drug plan.



Severe or Disabling Chronic Conditions:

Who:

- Beneficiary who has a severe 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.



Dually Eligible & Extra Help-eligible Individuals

The **dual/LIS SEP**¹ will allow full-benefit dually eligible individuals (QMB+, SLMB+, FBDE), partial-benefit dually eligible individuals (QMB, SLMB, QI, QDWI), and Extra Help-only eligible individuals to make a once-per-month election into Original Medicare and a standalone prescription drug plan (PDP). It will also allow a once-per-month election to switch between standalone PDPs. This replaces the quarterly dual/LIS SEP.

The **integrated care SEP** will allow full-benefit dually eligible individuals (QMB+, SLMB+, FBDE) a once-per-month election into a fully integrated dual eligible special needs plan (FIDE SNP), highly integrated dual eligible special needs plan (HIDE SNP), or an applicable integrated plan (AIP). It must be used to align enrollment with an integrated Dual Special Needs Plan (D-SNP) and Medicaid managed care organization (MCO).

Who's Eligible to use the Dual/LIS SEP & Integrated Care SEP

SEPs	Eligible Individual	Partial-Benefit Dual	Full-Benefit Dual
Dual/LIS SEP	✓	✓	✓
Integrated Care SEP	✗	✗	✓

Plans that may be selected using Dual/LIS Sep & Integrated Care SEP

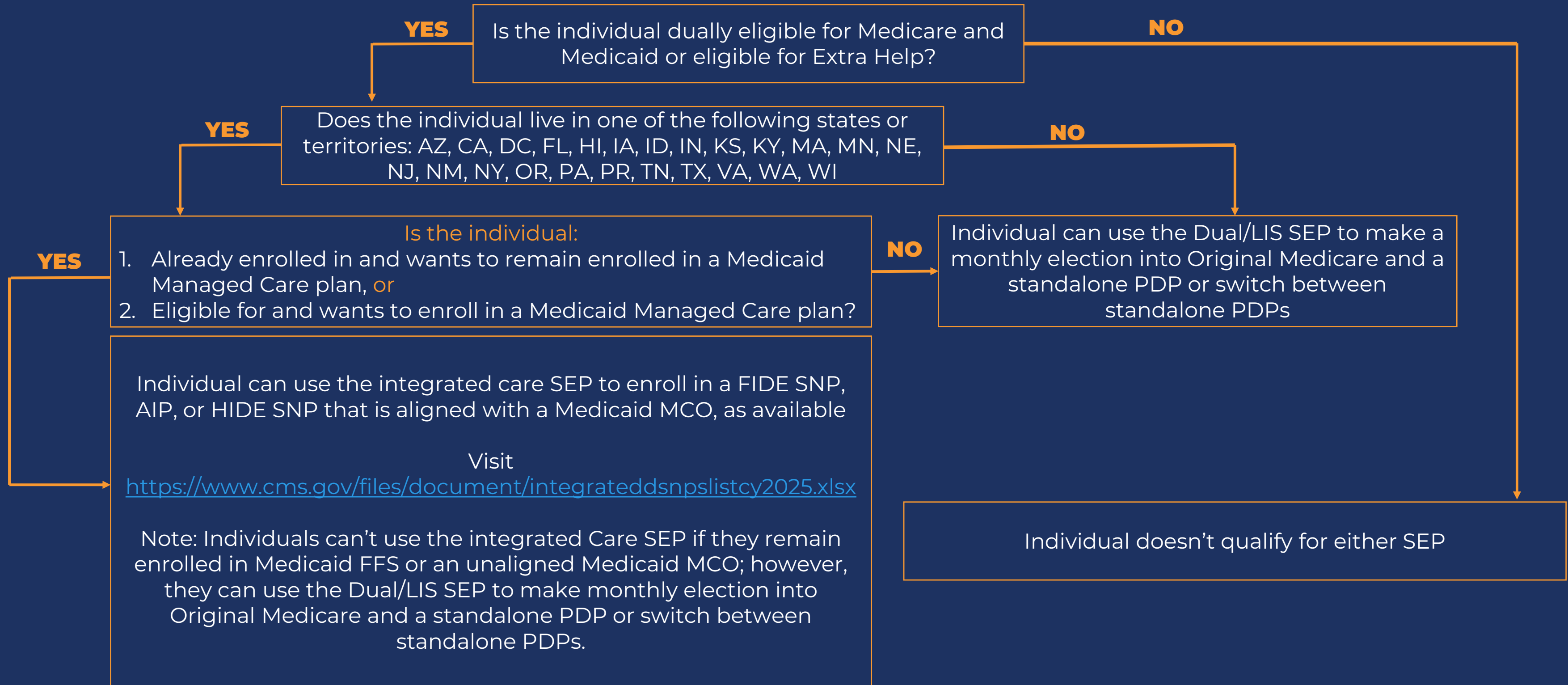
SEPs	Standalone PDP	Non-D-SNP Medicare Advantage	FIDE SNP, HIDE SNP, AIP
Dual/LIS SEP	✓	✗	✗
Integrated Care SEP	✗	✗	✓

Dual/LIS SEP and Integrated Care SEP won't allow enrollment into non-D-SNP Medicare Advantage Plans or switching between non-D-SNP Medicare Advantage plans. Dually eligible and other Extra Help-eligible individuals can choose any Medicare Advantage Plan during the Medicare IEP, MA OEP, OEP, and other SEPs that apply.

¹An individual is not eligible for the dual/LIS SEP if they have been identified as an "at-risk beneficiary" or "potential at-risk beneficiary"



Determining Eligibility for the Dual/LIS SEP & Integrated Care SEP





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 \$23,712 for an individual or \$31,968 for a married couple
- Resources are below \$17,600 for individual or \$35,130 for a married couple
- Not incarcerated

How to Apply:

- Online at www.SSA.gov/ExtraHelp
- Call 800-772-1213 / TTY 800-325-0778

*Income limits are based on the Federal Poverty Level (FPL), which changes every year in February or March. Until the Federal Poverty Level (FPL) is released, eligibility is based on the 2025 income limits



Extra Help Income and Asset Limits 2025

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: \$1,976/month Couple: \$2,664/month Asset limit² Individual: \$17,600 Couple: \$35,130	\$0 premium ³ and deductible \$4.90 generic copay \$12.15 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	You are automatically enrolled in Extra Help	\$0 premium ³ and deductible Income above 100% FPL \$4.90 generic copay \$12.15 brand-name copay Income below 100% FPL⁴ \$1.60 generic copay \$4.80 brand-name copay

¹ Income limits are based on the Federal Poverty Level (FPL), which changes every year in February or March. Until the Federal Poverty Level (FPL) is released, eligibility is based on the 2025 income limits. 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

² Asset limits include \$1,500 per person for burial expenses.

³ 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.

⁴ You pay \$0 copays if you are institutionalized or receive home and community-based services.



Medigap SEP

What is it?

Any Medicare beneficiary who dropped a Medicare Supplement 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



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Thank you!