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OPEN ENROLLMENT BEGINS NOVEMBER 1

BALTIMORE– In April 2011, the Maryland Health Benefit Exchange established the Maryland Health Connection, a marketplace for individuals, families, and small businesses to compare and enroll in a health plans or determine eligibility for Medicaid and other assistance programs, federal tax credits, and cost-sharing reductions. Open enrollment to buy, change, or renew a qualified health plan will begin November 1. Until November 1, an individual may purchase or change a health plan if he or she has experienced "life-changing events" or other qualifying circumstances. Please remember that Medicaid enrollment is year-round, and Medicaid-eligible Marylanders may start their coverage immediately. Marylanders who are enrolled in Medicaid must renew their Medicaid coverage once a year through the Maryland Health Connection.

For those who want to enroll in a Medicare plan or change his or her Medicare coverage, Medicare Open Enrollment began **October 15 and will continue until December 7**. For additional Medicare plan information, individuals may call 1-800-MEDICARE or visit <u>www.medicare.gov</u>. Individuals do not need to renew their coverage if they are satisfied with their current plans, and those plans are still offered through Medicare.

Employees who intend to enroll in an employer-sponsored health plan should receive health plan options this fall. Contact your human resources department for additional information.

Gene Ransom, Chief Executive Officer of MedChi, explains, "Good decisions during Open Enrollment can result in better health care and save money for you and your family." When considering health plans, MedChi recommends that you ask the following five questions.

1. Are your family's physicians in-network? Mistakenly seeing an out-of-network provider can leave you with unnecessarily expensive medical bills. Using in-network providers will save you from these additional costs.

2. Does this plan cover your family's medications? If you take prescription medications, check them against the list of plan-approved drugs. Choosing a plan that does not cover your most regular medications will severely increase your family's health care costs.

3. What are the plan's prior authorization and step therapy policies? Prior authorization requires physicians to obtain the carrier's approval before the carrier will pay for certain medications or treatment. Step therapy policies require physicians to prescribe cheaper alternatives before the insurer will cover the preferred treatment.

4. What are the out-of-pocket costs? In order to estimate the full cost of each plan, determine each plan's co-pays, deductibles, and other out-of-pocket expenses for which you will be responsible.

5. What is hidden in the fine print? Reading the plan materials thoroughly will tell you your rights and responsibilities under each plan and can prevent you from incurring unexpected medical costs. If any part of a plan is unclear to you, ask your human resources department or insurance carrier for clarification.

If you have any questions about Open Enrollment, call 1-800-492-1056 (toll-free) or 410-539-0872.

About MedChi

MedChi, The Maryland State Medical Society, is a non-profit membership association of Maryland physicians. Formed in 1799, it is still the largest physician organization in Maryland today. The mission of MedChi is to serve as Maryland's foremost advocate and resource for physicians, their patients, and the public health of Maryland. For more information, please visit <u>www.medchi.org</u>.