



The Maryland State Medical Society

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TIPS FOR ONGOING OPEN ENROLLMENT

Op-ed in Center Maryland, by Gene Ransom

BALTIMORE, December 10, 2015 — Right now, thousands of Marylanders are in the process of making one of the most important healthcare decisions they will make all year; their purchasing health insurance through the Marketplace. Open enrollment ends next week and the choices that a person makes now can greatly affect one's pocketbook and more importantly, their care. MedChi urges all Marylanders to pay close attention during this vital period. Ultimately, there are several ways people access the health insurance market: through their employer, the Maryland Health Connection, or a government program like Medicare.

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 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 for 2016 began on November 1st. Prior to that date, an individual could purchase or change a health plan if he or she has experienced "life-changing events" or other qualifying circumstances. It is important to remember however, 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 individuals who want to enroll in a Medicare plan or change their coverage, Medicare Open Enrollment began on October 15th and will continue until December 7th. A person need not renew their coverage if they are satisfied with their current plans, and those plans are still offered through Medicare.

When considering health plans, MedChi recommends that you ask the following five questions:

1. Are your family's physicians in-network with the plan you are considering? Seeing a practitioner who is not in your plan's network can leave you with unnecessarily expensive medical bills. Ensuring that the physicians you want to see are in the plan network that you are considering will prevent those 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, you can call your insurance broker or MedChi, The Maryland State Medical Society at 1-800-492-1056 x.3311 (toll-free). Please take the time to understand what you are selecting, what it will cost, and what it will deliver.

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 www.medchi.org.