



**STATE OF WISCONSIN
BOARD ON AGING AND LONG TERM CARE**

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<http://longtermcare.wi.gov>

Medicare Advantage Plans

Thank you for contacting the State of Wisconsin Medigap Helpline or Medigap Prescription Drug Helpline. These helplines are a part of the Wisconsin State Health Insurance Assistance Program (SHIP), and our number can be found on the back of the Wisconsin Medicare and You Book. Counseling and resources are available for beneficiaries with any Medicare-related questions.

Medicare Advantage Plans offer beneficiaries enrolled in Medicare Part A and Part B the option to obtain health services through a private Medicare health plan rather than Original Medicare. However, a beneficiary may choose to remain in Original Medicare and is not required to join a Medicare Advantage plan. All Medicare Advantage plans must provide at minimum the same benefits as original Medicare but may offer other 'extra' benefits like dental or vision coverage. Medicare Advantage plans may or may not include Part D prescription drug coverage. Medicare Advantage Plans are available based on the beneficiary's residence county in Wisconsin and all plans are not available in all Wisconsin counties. **Types of Medicare Advantage Plans include:**

PPO – Preferred Provider Organization plans have a defined network with lower co-pays when using in-network provider than a non-network provider. However, non-network providers may be visited if they will accept the plan, usually with higher co-pays and coinsurance.

HMO – Health Maintenance Organization plans are managed care plans with a defined network of providers that must be used. Emergency and urgent care services can be accessed outside of the network. An HMO will not pay for services with a non-network provider unless a referral from the beneficiary's HMO is given to that provider. The HMO may have point of service (POS) agreements where the beneficiary can utilize an out of network provider if they accept the terms and conditions or reimbursement from the beneficiary's plan.

PFFS – Private Fee for Service plans have no identified network of providers and any provider who accepts the terms and conditions of reimbursement by the plan may be seen. PFFS plans are required to have a listing of identified providers who will accept their plan to ensure there are enough providers in their service area.

SNP – Special Needs Plans are designed for a targeted population. They can be for Dual-eligible beneficiaries; Institutionalized persons; or those with identified chronic illnesses. These plans must include Medicare Prescription Drug coverage.

Medicare Advantage Enrollment Periods

There are specific enrollment periods when changes can be made into and out of a Medicare Advantage Plan, these 'periods' are outlined below. To complete an enrollment into or out of a Medicare Advantage Plan beneficiaries can contact the plan directly or Medicare at 1-800-633-4227.

Initial Coverage Election Period (ICEP):

When first eligible for Medicare a beneficiary can decide whether they want to stay with Original Medicare or enroll into a Medicare Advantage Plan. The initial coverage election period runs from 3 months before Medicare starts, the month Medicare begins, and 3 months after the month Medicare starts (7-month timespan). Once an election takes effect, then the ICEP has been used, therefore beneficiaries can only make one election during this timeframe.

Annual Open Enrollment Period (AEP):

The Annual Open Enrollment Period is from October 15th through December 7th. During this time frame, individuals may enroll into, switch, or disenroll from a Medicare Advantage Plan. The last enrollment request made, determined by the application date, will be the enrollment request that takes effect on January 1st.

Note: A beneficiary may not be guaranteed the purchase of a Medicare Supplement Policy when returning to Original Medicare during AEP.

Medicare Advantage Open Enrollment Period (MAOEP):

The Medicare Advantage open enrollment period runs from January 1st through March 31st. During this enrollment period beneficiaries currently enrolled in a Medicare Advantage plan may make a one-time election to switch to another Medicare Advantage plan or drop their MA plan to return to Original Medicare. Beneficiaries using the MAOEP to drop their Advantage Plan may make a coordinating change to enroll in a Part D Prescription Drug plan.

Note: A beneficiary may not be guaranteed the purchase of a Medicare Supplement Policy when returning to Original Medicare during MAOEP.

Special Election Periods (SEPs):

There are special circumstances which give a beneficiary the right to add, change, or drop current coverage including Advantage plans. There are a variety of situations that may create a special enrollment period outlined in [CMS guidance](#).

Advantage Trial Period SEPs:

If enrolled in a Medicare Supplement policy a beneficiary may have the opportunity to enroll in a Medicare Advantage Plan as a trial. There are several different State and Federal trial periods available to beneficiaries.

Link for more information - [Medicare Advantage Trial Periods 10.24.pdf](#)

Advantages and Disadvantages of Medicare Advantage

Advantages:

- Most Medicare Advantage plans have low monthly premiums. Some may not charge any monthly premium.
- Some plans may provide more benefits than are covered under Original Medicare.
- Generally, you can enroll regardless of your health history.

Disadvantages:

- Medicare Advantage plans are annual contracts. Plans may decide not to negotiate or renew their contracts.
- Plans are annual contracts and may change benefits, increase premiums, and increase copayments at the end of each year.
- You may have higher annual out-of-pocket expenses than under Original Medicare with Supplemental insurance coverage.
- Your current doctors or hospitals may not be network providers or may not agree to accept the plan's payment terms.

Source: *OCI Consumer's Guide to Medicare Advantage in Wisconsin* [PI-099.pdf](#).

If you need any additional counseling or resources, contact us again at either of the numbers below. In your message please be sure to include your name, address, call back number, email address (if available), and reason for your call. A counselor will contact you using the information you provide.

Medigap Helpline: (800) 242-1060

Medigap Part D & Prescription Drug Helpline: (855) 677-2783

Thank You,

Medigap Helpline Services
State of Wisconsin Board on Aging and Long Term Care

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