

Part D Open Enrollment Period: “To-Do” Checklist for Benefits Counselors

Prior to meeting your client:

- Ask the beneficiary to bring or have available all cards and letters (e.g., Annual Notice of Change, reassignment, loss of deemed status).
- Ask client to bring a list of drugs currently taken, including the strength and dosage; suggest bringing a printout from the pharmacy.

During your meeting:

- Review pertinent sections of current plan’s Annual Notice of Change (ANOC).
- When running a comparison by cost, be sure to print out and highlight appropriate information on alternative plans.

After meeting with your client:

- Give the client a checklist to note date of receipt from plan of:
 - Membership card
 - Explanation and use of transition fills
- Check with beneficiary about any need for formulary exceptions or whether any of their medications are indication-based on the plan formulary (i.e., covered for one condition and not another)
- Remind beneficiary you are available to respond to questions or problems
- Give beneficiary your contact info

Open Enrollment Worksheet: Gather Information

Beneficiary's name: _____

Name of beneficiary's 2020 Part D plan: _____

- Plan Membership Number: _____
Check one: PDP MA-PD None – in other creditable coverage (see below for more info)

Beneficiary's membership numbers and effective dates from all other membership cards:

- Medicare Number -- (new card # format)
Part A Effective Date -
Part B Effective Date -
 - Social Security Number
 Same as Medicare number OR SSN --
 - Medigap
Policy Name _____ Policy Number _____
 - Other prescription drug coverage?
Name of Policy: _____
Policy Number: _____
 - Is the other prescription drug coverage:
 - Employer-sponsored health insurance
 - FEHBP
 - VA or TRICARE
 Name of Policy: _____
Policy Number: _____
- ** Is this "other" coverage creditable drug coverage? Yes No

Current Medications List:

Name of Drug	Generic? (Y/N)	Strength and dose (Ex: 30 mg taken twice a day)
1.		
2.		
3.		
4.		
5.		

- **Review pertinent sections of current plan Annual Notice of Change (ANOC)**
- **Record how costs will change for the beneficiary in 2021:**

Premium: 2020: ____ 2021: _____
Deductible: 2020: ____ 2021: _____
Copay/coinsurance: _____

Is the formulary changing in 2021? If yes, for which drugs?

Screen and Assess Options, 4-Step Process

Step 1: Screen for LIS & MSP – run thru [BenefitsCheckUp](#)®

- Is the beneficiary enrolled in LIS/Extra Help in 2020? Yes No
(Note: Can check status in Medicare Plan Finder if client has a registered [MyMedicare.gov](#) account and log-in)
- If not enrolled, is the beneficiary willing to screen for eligibility? Yes No
 - If yes, record the following information:
Monthly Income: \$ _____
Resources: _____
Marital status: Single Married
Living arrangement: Alone or with spouse In another's household
Living in congregate setting Nursing home

Step 2: Use the [Medicare Plan Finder](#) tool

- Baseline: Current plan (refer to Current Medications List on page one)
 - a. Coverage in 2021 for current drugs in current plan
 - b. Pharmacy: _____ In network? Yes No

Step 3: Discuss MA-PD vs. PDP

Step 4: Run comparison by cost, drug coverage, and utilization management

How Beneficiary is Enrolled (no later than December 7, 2020):

Date of enrollment: _____

- Plan Finder
- Paper application mailed to plan
- Enrollment confirmation number
- Note:** Can print out and give a copy to beneficiary, retaining a copy in your file
- Call plan
- Note:** Not recommended as no way to retain proof of enrollment action

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