

## 2023 SHOPPING INSTRUCTIONS

We offer to **re-shop** our clients Part D and MAPD (Medicare Advantage) plans every year between October 15 and December 7. Plans change every year, and we find good reasons to make changes for some of our clients every year. If this is your first time, welcome to our process. *We want to review even if you just enrolled this year.* This is NOT the time to discuss your Medicare Supplement plans, unless it is also your birthday.

1. If you **DO NOT** want us to shop, you are taking full responsibility for any changes that occur in your drug plan for 2023. We will not be able to make any changes after 12/7/22.

If you **DO NOT want us to shop**, please mail back our form with “NO” box checked and signature. Clearly identify yourself and indicate if that response is just for you or for you and a significant other (by name).

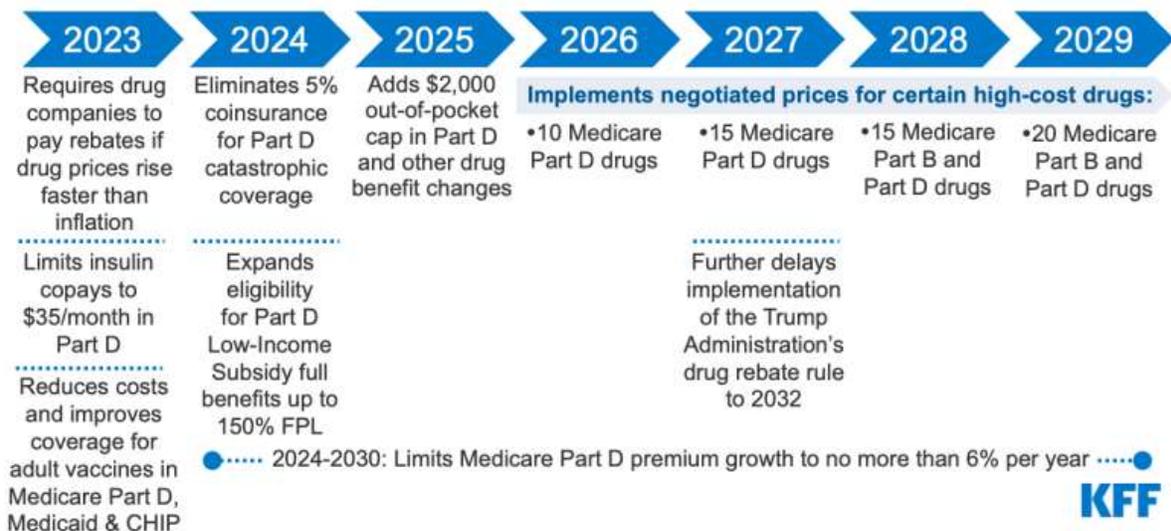
2. **To download fillable forms**, you can complete on your computer go to [pdinsure.net/shopping](https://pdinsure.net/shopping). Please still mail back.
3. **Do you want us to shop?** If “**Yes**”, complete the forms **thoroughly** and send back ASAP. Preferably in the enclosed envelope or drop off. Do not fax or scan email. Return by 10/31/22.
4. **Mail back:** 1. **Drug list** (either the one we provided, our part D drug list shopping form, or your drug list you print after updating your mymedicare.gov account). If applicable state: “no drugs” or “no changes”.  
2. **Shopping Form** 3. **Scope of Sales Appointment Form** 4. **CMS NEW REQUIRED DISCLOSURE form** (see Medicare news on reverse side for more information).
5. Please print clearly and give us complete descriptions of your drugs and pharmacy preference.  
“**As needed**” is not an option. You must designate refills every 1,2,3, 6 or 12 months. Cross off drugs no longer taken off list we provided. Add any new drugs on enclosed drug list form.
6. **Please let us know what drugs you’ve gotten “exceptions for”** and note on your drug list.
7. We only offer to shop those clients that give us access to their mymedicare.gov account.
8. **Help us help you** by updating your drug list and pharmacies on mymedicare.gov. **Note this on the return form.** If you have this capability, let us know **and you’ll be among the first people we review.** If you don’t have your username and password, please email [nelida@pdinsure.com](mailto:nelida@pdinsure.com), [nancy@pdinsure.com](mailto:nancy@pdinsure.com), or [Jerry@pdinsure.com](mailto:Jerry@pdinsure.com) and ask for that info. We will send it out in encrypted form.
9. **We suggest you change your password to something you like and then be sure to let us know or we can’t get in.** You can send an encrypted email. Go to [pdinsure.com/uploads](https://pdinsure.com/uploads) if you don’t have the link.
10. If you’d like to expedite your drug shopping, please attend a webinar Paul and Jerry will be giving on using your mymedicare.gov account to update your drug list. Go to [pdinsure.net/webinar](https://pdinsure.net/webinar) to see the webinar schedule via Zoom. We’ll also be doing some Medicare 101 webinars. Check this same site for webinars that are recorded and on demand.
11. Can we send your packet by email next year? If yes, please note on form to let us know and make sure we’ve got your current email.
12. **Can we send you occasional emails of interest?** Webinars/seminars Paul is doing, events, reminders during the year. Likely not more than once a month and only useful info. Note on your return form or sign up [pdinsure.net/subscribe](https://pdinsure.net/subscribe).
13. Send in any notes on unusual circumstances or requests or questions with your forms.
14. Contact us if you have questions or **think you need to change to a different type of plan.**
15. Let us know if you think you’re paying too much for your Part B or D IRMAA. Also, let us know if you think you might be eligible for Medi-Cal, Low Income Subsidy or Extra help to pay for your drugs.

## Medicare news:

1. You should be receiving your **Annual Notice of Change (ANOC)**. Please review it for important changes to your plan for 2023. We do not receive these on a timely basis, **so check with us to see if we need a copy.**
2. **Are you OK with having every call with our office recorded?** This new requirement starts 10/1 of this year and requires that we record all our phone conversations. Recordings must be kept for 10 years. CMS has been deluged with complaints of poor practices. We think this is mostly due to the boiler-room high-pressure misleading sales practices from mass marketers (think Joe Namath, JJ Walker, etc. ads). CMS solution? Make everyone record every phone conversation. This doesn't fix the problem and puts a HUGE burden on us smaller agencies. Theoretically, this is designed to protect the consumer from being enrolled in the wrong plans. **PLEASE COMPLETE AND RETURN THE ENCLOSED FORM with others to indicate whether you are OK having your conversations recorded.**
3. **If you hear an ad on TV about Medicare health plans and you have any questions, please give our office a call.** Please call us if you want to discuss alternative **Advantage plans. There are some new ones on the horizon for 2023.** We had to rescue several clients this year that fell for the sales pitch on the 800 number they called.
4. **Insulin copays for those on Medicare should all be \$35 or less throughout the year.** Drug companies are required to pay rebates if their prices rise faster than inflation. Adult vaccines are now covered better (**think Shingrix**).

Figure 1

### Implementation Timeline of the Prescription Drug Provisions in the Inflation Reduction Act



5. **Over-the-counter hearing aids are on the way.** This should sharply drive down the prices and make them more affordable. Many Medicare Advantage plans already include a hearing aid benefit. It will be interesting to see how this affects that coverage.
6. **Medicare will be able to negotiate drug prices.** We see a lot of potential legal challenge here as drug companies try to foil this, so I'm unclear on when it will impact.
7. **Accountable Care Organizations or ACO's are getting a big push.** You may get a letter from CMS asking you to designate someone to be your primary care doctor. In doing so, you will NOT relinquish your ability to see any Medicare contracted provider—yet. I suspect this is the beginning of an attempt to do away with fee for service Medicare and Medicare supplement plans. At this point I would "just say no".
8. **Dental and Vision plans:** We can help you. But, please defer this conversation until after 12/7 unless you're on a Medicare Advantage plan.

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