

WELCOME

ANOC PRESENTATION

Agent Name
Licensed Insurance Agent

REV 7.2026.802275

What is the Annual Notice of Change? (ANOC)

WHAT IS THE ANNUAL NOTICE OF CHANGE? (ANOC)

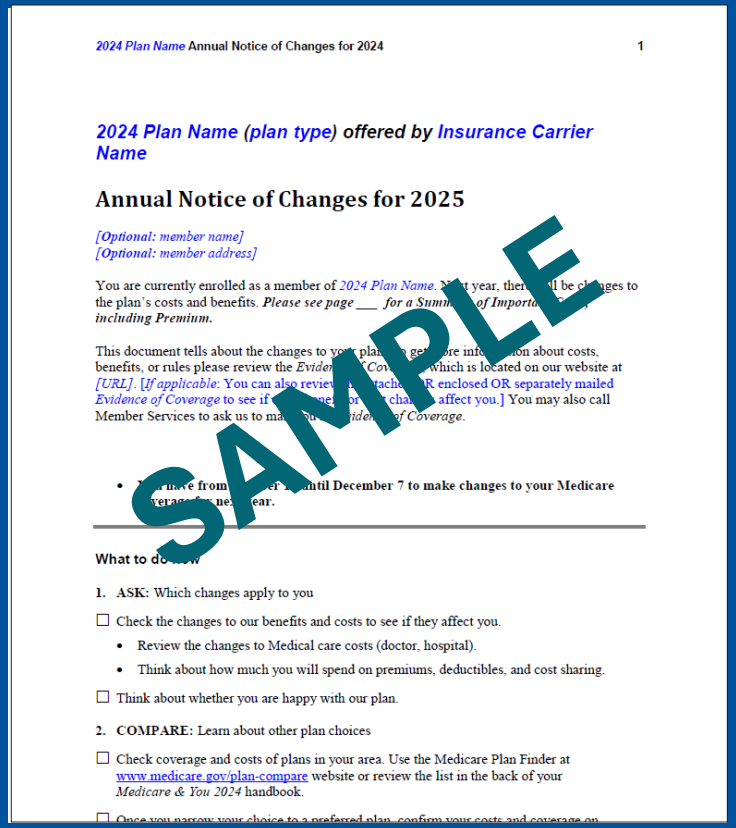
- An ANOC provides important information that can help you decide whether to keep your current plan or look for a new one during the Annual Enrollment Period (AEP) (October 15th–December 7th).
- Your ANOC will include changes to costs, coverage and more that will be effective in January.
- Each ANOC will ensure members have the most up-to-date information before AEP begins.





WHEN WILL I RECEIVE MY ANOC?

An ANOC will always be delivered from your current Medicare plan provider by **September 30th.**



2024 Plan Name Annual Notice of Changes for 2024 1

2024 Plan Name (plan type) offered by Insurance Carrier Name

Annual Notice of Changes for 2025

[Optional: member name]
[Optional: member address]

You are currently enrolled as a member of 2024 Plan Name. Next year, there will be changes to the plan's costs and benefits. Please see page ___ for a Summary of Important Changes, including Premium.

This document tells about the changes to your plan. For more information about costs, benefits, or rules please review the Evidence of Coverage, which is located on our website at [URL]. [If applicable: You can also review or print attached OR enclosed OR separately mailed Evidence of Coverage to see if other changes affect you.] You may also call Member Services to ask us to mail an Evidence of Coverage.

- You have from October 15 until December 7 to make changes to your Medicare coverage for next year.

SAMPLE

What to do now

1. ASK: Which changes apply to you

☐ Check the changes to our benefits and costs to see if they affect you.
- Review the changes to Medical care costs (doctor, hospital).
- Think about how much you will spend on premiums, deductibles, and cost sharing.

☐ Think about whether you are happy with our plan.

2. COMPARE: Learn about other plan choices

☐ Check coverage and costs of plans in your area. Use the Medicare Plan Finder at www.medicare.gov/plan-compare website or review the list in the back of your *Medicare & You 2024* handbook.

☐ Once you narrow your choice to a preferred plan, confirm your costs and coverage on

WHAT IMPORTANT INFO IS IN YOUR ANOC?

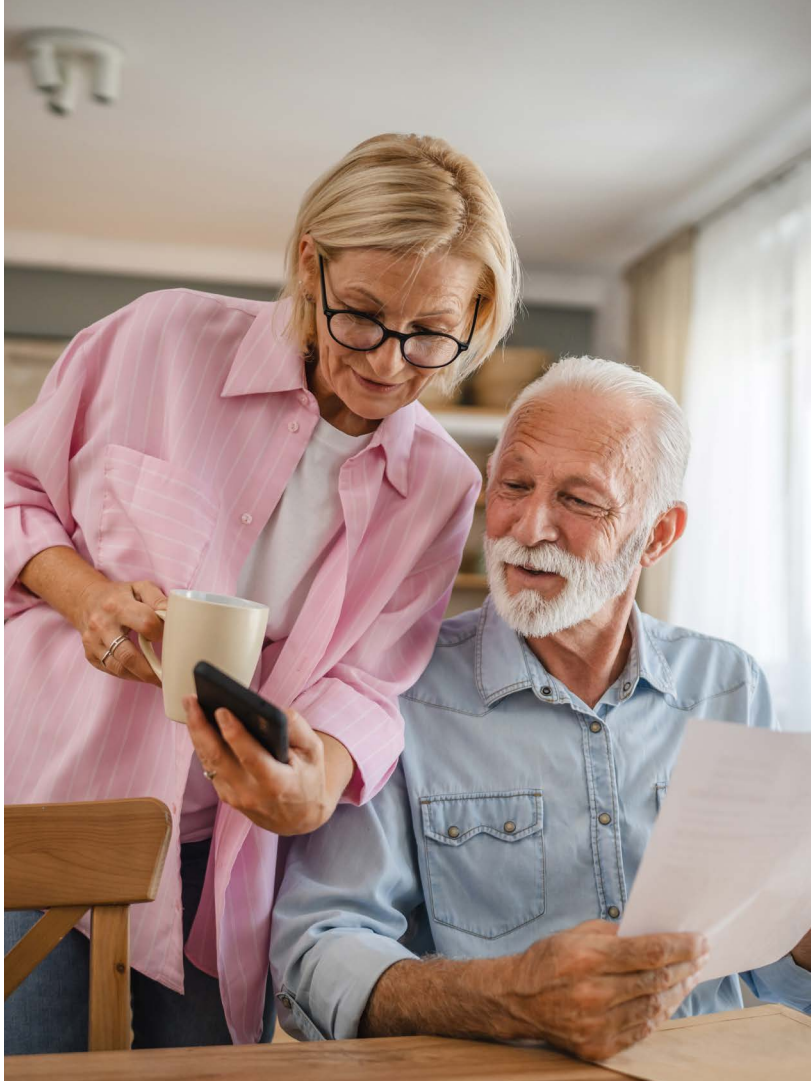
- ✔ New benefits that have been added to your plan
- ✔ Changes that affect the service area you use

TAKE NOTE: Changes to your health that may affect what services you need and how often you need them

- Do your plan benefits still meet your care needs?

COST CHANGES

- Is the premium going up, going down or staying the same?
- Note any additional costs like deductibles, copays and coinsurance
- Has the maximum out-of-pocket cost changed?





PROVIDER NETWORK

- Is your hospital of choice in-network?
- Is your doctor(s) of choice in-network?
- Will you need a referral for specialists?



PHARMACY NETWORKS

Is your pharmacy in-network? Preferred or Standard?

DRUG LIST

- Have the tiers changed cost?
- Are the drugs you currently take listed on the formulary?
- Have your drugs changed tiers on the formulary? Note how this may affect your cost.



STAR RATINGS

- Star Ratings help CMS determine up to 40 unique quality and performance measurements on the insurance company and the plan itself.
- Star Ratings help to determine how much money the carrier receives from the government so they can build out their plan benefits.
- Carriers receive a ranking of 1–5 stars; 5 stars is the highest rating.



WHAT'S NEXT?

Stay on this plan	Change to a new plan
No new enrollment is needed to stay on your current plan.	If you find that the plan discussed no longer meets your needs, please schedule an appointment with us to review alternative options. *If you are voluntarily changing plans, you MUST enroll in a new plan by December 7th of this year.*
If you continue to pay your premiums (if applicable), the plan will roll in to the next year.	OR, if your plan is leaving the area, you will need to enroll in a new plan. *If your plan is exiting the market, you MUST enroll in a new plan by the last day of February next year.*

QUESTIONS?

THANK YOU!

READY TO FIND THE PLAN THAT FITS YOUR NEEDS OR HAVE MORE QUESTIONS?

I am here to help you at no cost or obligation to you!

My contact information:

Agent Name

Phone Number (TTY:711)

License #

Email/Website

By calling the number above, you will be directed to a licensed insurance agent.

This is a solicitation for insurance. Not connected with or endorsed by the U.S. government or federal Medicare program. Licensed sales agents can answer your questions and provide information about Medicare insurance options, such as Medicare Advantage, Prescription Drug (Part D) and Medicare Supplement insurance plans. A Medicare Advantage Plan is a health insurance plan provided through a private insurer and delivers Medicare Part A and Part B benefits. A Part D Drug Plan is a prescription drug insurance plan provided through a private insurer and delivers Medicare Part D benefits.