2026
Open Enrollment Guide for Patients



It's health insurance open enrollment time.

Make sure you're covered!

Use this guide to figure out if your health insurance plan is meeting your needs. Click here to access a Spanish version of the guide.





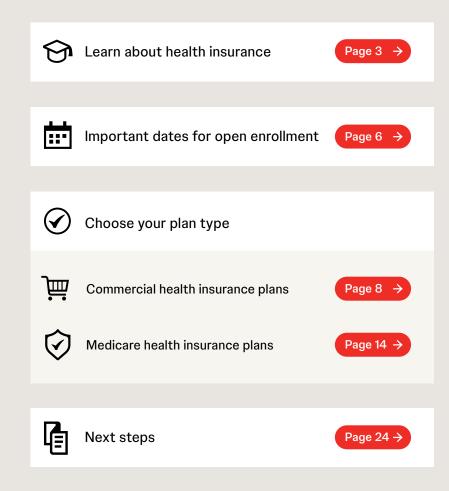


Looking at your health insurance options for next year?

During your health insurance open enrollment period, you can review your plan and make changes. This guide will help you gather the facts about your plan options to find out if your providers and medicines are covered in 2026.

(i) How to use this guide

- Use the buttons on the right to navigate to different sections of the guide
- Depending on your plan type, use the worksheets included to help calculate costs
- Save this brochure and print or copy any pages you may need for reference



First, let's talk health insurance

In this guide, we'll discuss 2 types of plans:



Commercial

Commercial health insurance is a health plan from non-government agencies, such as through an employer, the Health Insurance Marketplace®,* or a private broker.



Government

Government insurance is a health plan you get from the government, such as Medicare, Medicaid, TRICARE, or VA/DoD. In this booklet, we'll be discussing Medicare. Medicare is a government-funded program that offers healthcare coverage for people who are age 65 or older, disabled, or have end-stage renal disease (ESRD) or ALS (also called Lou Gehrig's disease).

How does health insurance work?

Basics of how plans work

Icons you'll see below:









When you have healthcare costs:

First, you pay your deductible.



After you meet your deductible, you and your plan will share the cost of care. You will pay through **co-insurance** or **co-pay**, depending on your plan.



If you have an **out-of-pocket maximum**, once you've paid this amount, your insurance company will pay the remaining covered costs.













Terms to know

Annual (yearly) deductible

The amount you must pay for healthcare services or prescriptions before your plan starts to pay their portion.

Co-insurance

The amount you pay for healthcare services after you meet your deductible. Services may include a doctor's visit, hospital outpatient visit, or prescription medicine. Co-insurance is usually a percentage of the cost of the healthcare service (for example, 20%).

Co-pay

The amount you pay for healthcare services, like a doctor's visit, hospital outpatient visit, or prescription medicine. A co-pay is usually a set amount, such as \$10 or \$20, rather than a percentage.

Out-of-pocket costs

Healthcare costs you pay on your own, such as deductible, co-pay, and co-insurance.

Out-of-pocket maximum

A limit that some health plans have on the total amount you have to pay for your medicines and healthcare services in one year, including all co-pays, co-insurance, and your deductible. Most plans have an individual or family maximum. After you meet this maximum, the plan pays 100% of covered healthcare costs.

Example

Let's assume you have a health plan with a \$1,000 deductible, 20% co-insurance, and a \$3,000 out-of-pocket maximum.

Remember the icons:









If you get an \$11,000 medical bill

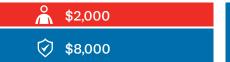
pay your deductible, which is \$1,000.

After you meet your deductible, you pay 20% of the bill in co-insurance, which is \$2,000. Your insurance company pays 80% of the bill, which is \$8,000.

 \rightarrow

After you pay your \$1,000 deductible and \$2,000 in co-insurance, you've reached your \$3,000 out-of-pocket maximum and your insurance company will pay any remaining covered healthcare costs for the year.







Any remaining covered costs for the year

There's a trade-off between your monthly premium and deductible

When choosing a plan, you want to consider your overall costs, but often 2 numbers matter most: Premium and Deductible.

Higher premium

Higher premium/Lower deductible

Usually, the higher your plan's premium (monthly payment), the lower your deductible.

This may mean lower out-of-pocket costs if you know you'll need a lot of healthcare – your monthly payment will be higher, but you may reach your deductible sooner, which means your plan starts sharing costs with you, getting you closer to your out-of-pocket maximum.

Lower premium

Higher deductible

Lower premium/Higher deductible

Usually, the lower your plan's premium (monthly payment), the higher your deductible.

This may mean lower out-of-pocket costs if you are healthy and only need routine healthcare – you'll save on premium costs each month. However, if you need unexpected healthcare services, your out-of-pocket costs may be higher than on a higher premium plan because you'll have to pay until you reach the high deductible.



Premium

The amount you pay, usually every month, for your health insurance. This does not count toward your deductible or out-of-pocket maximum.

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Please note: Individual costs may vary.

Medicare basics (get to know Medicare if you will be 65 or older in 2026)

There are 4 parts of Medicare: A, B, C, and D.

You must choose:



Original Medicare (Part A and Part B)



Part A - Hospital insurance

Covers inpatient care in hospitals and skilled nursing facilities, hospice, and some home health services.



Part B - Medical insurance

Covers doctors' and other providers' services, including some medicines given by your doctor, outpatient care, durable medical equipment, and some home health services.

You can add:



Medicare Supplement Insurance (Medigap)



Can help pay some of the costs ("gaps") that Original Medicare (Parts A and B) does not cover. Offered through private health plans.

Prescription drug coverage (Part D)



Helps cover the cost of prescription medicines for people with Medicare. It is optional.





Medicare Advantage (Part C)



Part C - Medicare Advantage

An option to get Medicare Part A and Part B benefits through private health plans. Most plans include Part D prescription drug coverage as well. You cannot add Medigap to Part C.

You can add:



Prescription drug coverage (Part D)



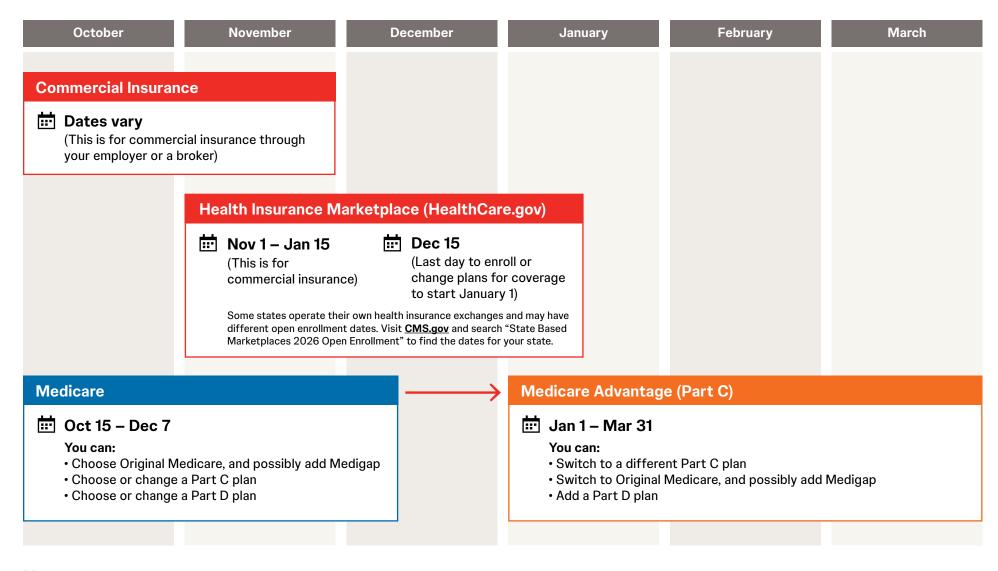
Helps cover the cost of prescription medicines for people with Medicare. It is optional.



Together the "Parts" of Medicare cover a large amount of healthcare needs – but they do not cover everything. For example, Part A and Part B (together referred to as Original Medicare) do not cover: dental care, certain hearing tests, care when you are traveling outside of the United States, eye care, and long-term care. Medicare Advantage (Part C) plans may cover some of these services, but if they include "extras" such as basic dental care, they may charge a higher premium.

- (i) Call your local State Health Insurance Assistance Programs (SHIPs) to get FREE, personalized health insurance counseling. To find a SHIP in your area, visit **ShipHelp.org** or call 1-877-839-2675
- (i) To learn more, visit: Medicare.gov

Important dates for open enrollment



Notes

Which type of plan do you have?

Go to the appropriate section:



Commercial health insurance plans

Let's gather information about your current plan and next year's options

Step 1

Medical Benefit:

Fill in the plan information and costs of healthcare services for you and the family members on your plan after you meet your deductible, including:

- Out-of-pocket costs for medicines that are given by a healthcare provider in a doctor's office, hospital, or clinic (does not include cost of prescriptions you fill at a pharmacy)
- Doctor and hospital visits, and other services this could include **treatment administration**, for example an infusion or an injection

| Current plan | Next year's option 1 | Next year's option 2 |
|--|--|--|
| Plan name: | Plan name: | Plan name: |
| Premium: \$ | Premium: \$ | Premium: \$ |
| Deductible: \$ | Deductible: \$ | Deductible: \$ |
| Out-of-pocket max: \$ | Out-of-pocket max: \$ | Out-of-pocket max: \$ |
| Medicine 1 given to you: | | |
| Is the medicine covered? | Is the medicine covered? | Is the medicine covered? |
| ○ Yes ○ No | ○ Yes ○ No | ○ Yes ○ No |
| Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: |
| Is the treatment administration covered? | Is the treatment administration covered? | Is the treatment administration covered? |
| Yes No | ○ Yes ○ No | Yes No |
| Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: |
| | | |
| Medicine 2 given to you: | | |
| Is the medicine covered? | Is the medicine covered? | Is the medicine covered? |
| | ○ Yes ○ No | ◯ Yes ◯ No |
| Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: |
| Is the treatment administration covered? | Is the treatment administration covered? | Is the treatment administration covered? |
| | ○ Yes ○ No | |
| Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: |

How to fill out Steps 1-3:

- Visit your health plan website or app, or call your health plan.
- 2 Ask questions to get the information you need to fill out the tables in Steps 1-3.

Note: For step 2, you may need to check with a different prescription medicine plan to ask about your medicines or see their formulary.



Terms to know

Treatment administration

When a healthcare provider gives you a medicine. This could be an injection or infusion given in a doctor's office, hospital, or clinic. There may be a separate fee for treatment administration, in addition to the cost of your medicine.

Formulary

The **list of prescription medicines** that your insurance plan helps pay for.

| Notes | | |
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Co-pay \$ / co-insurance %:

Co-pay \$ / co-insurance %:

Co-pay \$ / co-insurance %:



Prescription Benefit:

Some plans require that your prescription medicine be covered under the **Prescription Benefit**, even if it is given by a healthcare provider.

Fill in the plan information and costs for prescription medicines. This includes:

- Any additional premium or deductible for prescription medicines
- The costs you pay for prescription medicines for you and the family members on your plan

| Current plan | Next year's option 1 | Next year's option 2 | |
|--|--|--|--|
| Is there a separate premium for Prescription Benefit? Yes \$ | Is there a separate premium for Prescription Benefit? Yes No Is there a separate deductible for Prescription Benefit? Yes No | Is there a separate premium for Prescription Benefit? Yes \$ No Is there a separate deductible for Prescription Benefit? Yes \$ No | |
| Prescription medicine 1: | | | |
| Is the medicine covered by the plan? Yes No | Is the medicine covered by the plan? Yes No | Is the medicine covered by the plan? Yes No | |
| Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | |
| Does it require prior authorization? Yes No | Does it require prior authorization? Yes No | Does it require prior authorization? Yes No | |
| | | | |
| Prescription medicine 2: | | | |
| Is the medicine covered by the plan? Yes No | Is the medicine covered by the plan? Yes No | Is the medicine covered by the plan? Yes No | |
| Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | |
| Does it require prior authorization? Yes No | Does it require prior authorization? Yes No | Does it require prior authorization? Yes No | |



Terms to know

Prescription Benefit

Insurance that covers medicines that patients can take on their own. Also called Pharmacy benefit.

Prior authorization

Some plans require a review and approval of your prescribed medicine before it is used. Your doctor will submit the request, but it may mean there is a delay getting your medicine while your plan contacts your doctor to confirm.



If any of your medicines require prior authorization, reach out to your doctor to:

- · Confirm it's up-to-date
- · Renew if needed

| Notes | | |
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| | Current plan | Next year's option i | Next year's option 2 |
|------|---|---|---|
| Pres | cription medicine 3: | | |
| _ | e medicine covered by the plan? es No | Is the medicine covered by the plan? Yes No | Is the medicine covered by the plan? Yes No |
| Со-р | pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: |
| _ | s it require prior authorization? es ONo | Does it require prior authorization? Yes No | Does it require prior authorization? Yes No |
| Pres | cription medicine 4: | | |
| _ | e medicine covered by the plan? es No | Is the medicine covered by the plan? Yes No | Is the medicine covered by the plan? Yes No |
| Со-р | pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: |
| | s it require prior authorization? es ONo | Does it require prior authorization? Yes No | Does it require prior authorization? Yes No |
| Pres | cription medicine 5: | | |
| _ | e medicine covered by the plan? es No | Is the medicine covered by the plan? Yes No | Is the medicine covered by the plan? Yes No |
| Со-р | pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: |
| | s it require prior authorization? es ONo | Does it require prior authorization? Yes No | Does it require prior authorization? Yes No |
| Pres | cription medicine 6: | | |
| _ | e medicine covered by the plan? es No | Is the medicine covered by the plan? Yes No | Is the medicine covered by the plan? Yes No |
| Со-р | pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: |
| _ | s it require prior authorization? Yes ONo | Does it require prior authorization? Yes No | Does it require prior authorization? Yes No |



A few more items:

The costs you pay for healthcare can also depend on other factors. Fill in some of these other factors in the table below. **These include:**

- Whether your doctors and healthcare providers are in-network or out-of-network
- Whether the company that makes your medicines offers **medicine savings programs** and how your plan treats these payments

| | Curre | ent plan | Next year's option 1 | | Next year's option 2 | |
|--|------------|----------------|----------------------|----------------|----------------------|----------------|
| Are all of your doctors and other healthcare providers in-network? | | | | | | |
| Your healthcare providers | In-network | Out-of-network | In-network | Out-of-network | In-network | Out-of-network |
| For example, Dr. Smith | Х | | | х | Х | |
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| Write down any medicines that offer savings programs, coupons, or discounts. | | | | | |
|--|--|------------|------------|--|--|
| Your medicines | Does the health plan allow payments from savings programs to count toward the deductible or out-of-pocket maximum? | | | | |
| | ○ Yes ○ No | ○ Yes ○ No | ○ Yes ○ No | | |
| | ○ Yes ○ No | ○ Yes ○ No | ○ Yes ○ No | | |
| | ○ Yes ○ No | ○ Yes ○ No | ○ Yes ○ No | | |
| | ○ Yes ○ No | ○ Yes ○ No | ○ Yes ○ No | | |
| | ○ Yes ○ No | ○ Yes ○ No | ○ Yes ○ No | | |
| | ○ Yes ○ No | ○ Yes ○ No | ○ Yes ○ No | | |



Terms to know

In-network visits

Visits to providers, including doctors, hospitals, and other suppliers, who contract with your health plan to give healthcare services to you at a lower cost. Also called "preferred" providers.

Out-of-network visits

Visits to providers, including doctors and hospitals, who have not contracted with your health plan, so they charge a higher cost. Also called "non-preferred" providers.

Medicine savings programs

Programs that discount the price of your medicine. These programs may be offered by the companies that make your medicines.

Be informed! Some health insurance plans do not allow payments from medicine savings programs to count toward your deductible and out-of-pocket maximum. Some plans may also seek to enroll you in programs that could impact your out-of-pocket costs or claim to offer low to zero out-of-pocket costs. Signing up for these plan-run programs can change how your medicine savings program supports you. Call the plan and ask before signing up.



Let's see which of next year's plan options will best meet your needs.

- Review steps 1-3 of this guide and fill out the plan information below, including any notes or questions about the plan.
- Do you have enough information to make a decision? Or do you need to gather more information?

Medicare health insurance plans

Compare your Medicare options

Use this tool to compare your Medicare options for next year:

- Step 1: Learn the differences between Original Medicare (Parts A and B) and Medicare Advantage (Part C) to decide which may be right for you.
- Step 2: Fill out the table for the plan you want to use next year to estimate your health plan costs. Then, if needed, consider your options for adding more coverage.
- Step 3: Fill out the table to estimate your medicine costs and if they're covered by your plan.



Step 1: Important differences to consider when choosing between Original Medicare and Medicare Advantage

| Questions to ask: | Original Medicare (Part A and Part B) | OR | Medicare Advantage (Part C) |
|---|--|--|--|
| What is included? | Part A (Hospital Insurance) and Part B (Medical Insurance included Medigap supplement insurance can be added to he your share of Parts A+B costs Part D for prescription drug coverage can also be added | companies p pay • Medigap s extra bene hearing, ar | nbines Part A and Part B and is offered by private approved by Medicare upplement insurance is not available but some plans have afits that original Medicare does not cover like vision, and dental % of plans include Part D |
| Can I see my doctors and specialists? | You can see any doctor who accepts Medicare (99% of doctors in the US) | of do | twork choices may be more limited, with access to <50% ctors in the US, on average. You may pay more to see f-network doctors. |
| Are my medicines and services covered? | Typically, no pre-approvals needed for the physician-administered medicines and medical services you need | like pl | st all plans typically require pre-approval for some services hysician-administered medicines— this could delay or ict your access to care. |
| What are the costs? | • Premiums: \$0 Part A, standard Part B • Deductible: Fixed for Part A and Part B • Annual cost limit: No limit, unless you have Medigal (which may bring Part B costs down to \$0) | premiums Deductible Annual co under Med Plan costs | : Vary by plan. Part C premium is in addition to any required for Part A and Part B es: Vary by plan st limit: Limit varies by plan. Medigap is NOT available licare Advantage coverage vary and there may be a trade-off between higher premium deductible or lower premium and higher deductible |

Add-ons

In addition to choosing Original Medicare or Medicare Advantage, you may have options for adding:

Medicare Supplement Insurance (Medigap) to Original Medicare only

Prescription drug coverage (Part D)



Step 2: Let's gather information about next year's options

Now that you've learned the difference between Original Medicare and Medicare Advantage, let's estimate your costs for next year. Take a look at your options in the tables in this section.

Medicare Parts A and B (Original Medicare)

Medicare Part A helps cover inpatient care in hospitals, skilled nursing facility care, hospice care, and home health care.

Medicare Part B usually covers medicines given by a healthcare provider in a doctor's office, hospital, or clinic – for example, an infusion or an injection. Check Medicare.gov to see what Medicare may cost for you.

Review this table: (Check Medicare.gov for updates.)

Medicare Part B monthly premium \$ Medicare Part B annual deductible \$ 20% of medicine and administration costs, after you meet your deductible

Medicare Part B pays

co-insurance 80% of medicine and administration costs, after you meet your deductible

Medicare Part B

If you choose Parts A and B, consider how you will pay for the costs that Medicare does not cover:

- Tou may decide to pay the out-of-pocket costs yourself (deductible and co-insurance).
- Onsider adding a Medigap plan (Medicare Supplement Insurance) for help with your deductible and for 20% cost-sharing (page 16). Medigap is private health insurance that can help pay some of the costs ("gaps") that Parts A and B do not cover. It may cover all of your out-of-pocket costs. There are many Medigap plans to choose from. Contact your State Health Insurance Assistance Program (SHIP) or visit Medicare.gov/medigap-supplemental-insurance-plans to find a plan that's best for you. To find your local SHIP, visit ShipHelp.org or call 1-877-839-2675.
- Onsider adding Medicare Part D (<u>page 18</u>). Medicare Part D is prescription drug coverage for anyone with Medicare. These plans are offered by private companies that are approved by Medicare. Visit <u>Medicare.gov/plan-compare</u> or call 1-800-MEDICARE (1-800-633-4227) to compare plans.
- Onsider switching to Medicare Part C (Medicare Advantage). Learn more about Medicare Advantage on page 17.



Need help with costs?

If you have limited income, resources, or assets, and are having trouble paying healthcare costs, there is help. See "Get help with your Medicare costs" on page 21.

Need help comparing Medicare options?

To compare your Medicare options and find the right plan for you, visit Medicare.gov/MedicareCoverageOptions.

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^aProjected 2026 Medicare Part B premium. Above a certain income level, you will be required to pay the premium PLUS an additional amount for Medicare Part B.

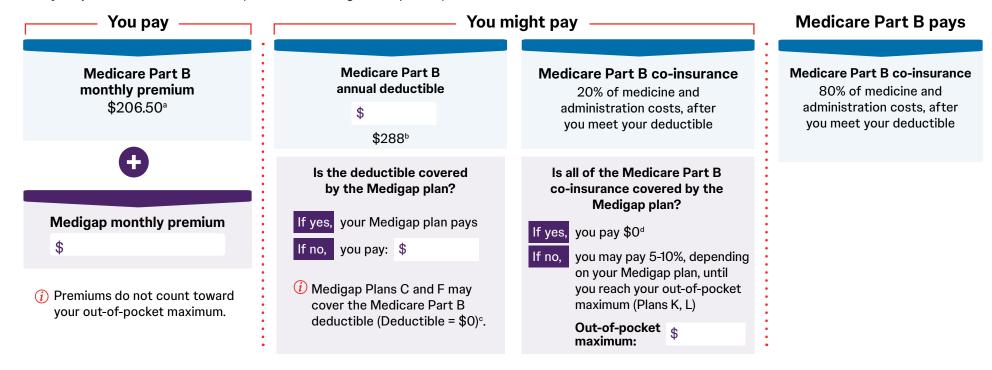
^bProjected 2026 Medicare Part B deductible. Check <u>Medicare.gov/basics/costs</u> for updates. The 2026 Medicare Part B deductible amount should be released in November 2025.

Medicare Part A helps cover inpatient care in hospitals, skilled nursing facility care, hospice care, and home health care.

Medicare Part B usually covers medicines given by a healthcare provider in a doctor's office, hospital, or clinic – for example, an infusion or an injection.

Medigap is private health insurance that can help pay some of the costs ("gaps") that Original Medicare does not cover. With Medicare Part B and a Medigap plan, your out-of-pocket costs may be as low as \$0.

Call your plan and fill out this table: (Check Medicare.gov for updates.)



Projected 2026 Medicare Part B premium. Above a certain income level, you will be required to pay the premium PLUS an additional amount for Medicare Part B.

If you need more coverage, consider:

- Switching to a new Medigap plan.
- Adding Medicare Part D for prescription drug coverage (<u>page 18</u>). Medicare Part D is prescription drug coverage for anyone with Medicare. These plans are offered by private companies that are approved by Medicare. Visit <u>Medicare.gov/plan-compare</u> or call 1-800-MEDICARE (1-800-633-4227) to compare plans.
- Switching to Medicare Part C Medicare Advantage (page 17). However, if you drop your Medigap policy, there are only certain situations where you may be able to get it back.

Projected 2026 Medicare Part B deductible. Check Medicare.gov/basics/costs for updates. The 2026 Medicare Part B deductible amount should be released in November 2025.

elf you got a Medigap Plan C or F before 2020, the Part B deductible is fully covered. If you got Medicare in 2020 or after, the Part B deductible is not covered. If you were newly eligible for Medicare on or after January 1, 2020, Plans C and F are no longer available. Visit Medicare.gov for more information.

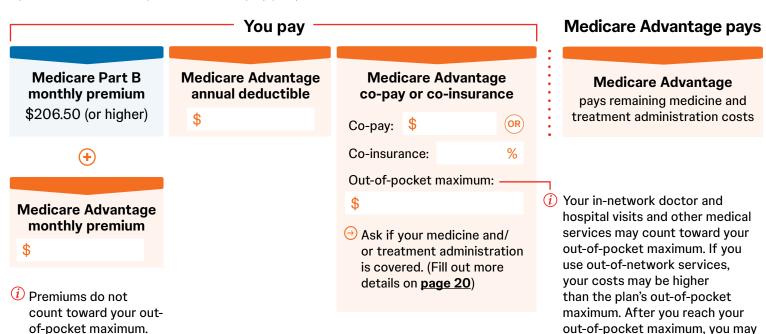
^dTypically, Medigap Plans A-G and M-N pay 20% and you pay \$0. Some states also offer high deductible versions of certain Medigap plans. Visit Medicare.gov/medigap-supplemental-insurance-plans for more information.

Medicare Part C (Medicare Advantage)

Medicare Part C (Medicare Advantage) plans are an alternative to Original Medicare (Parts A and B). Part C plans cover some medicines given by a healthcare provider in a doctor's office, hospital, or clinic – for example, an infusion or an injection. Most plans also offer Part D, which covers prescription medicines – including those you take at home. These plans may have benefits that are not offered under Original Medicare.

Call your plan and fill out this table:

(Premiums and out-of-pocket costs vary by plan)



If your medicine or treatment is not covered or your out-of-pocket costs are too high, consider:

- Switching to a different Medicare Advantage plan.
- Switching to Original Medicare plus Medigap (page 16). Medigap is private health insurance that can help pay some of the costs ("gaps") that Parts A and B do not cover. It may cover all of your out-of-pocket costs. There are many Medigap plans to choose from. To find a plan that's best for you, visit Medicare.gov/medigap-supplemental-insurance-plans or contact your State Health Insurance Assistance Program (SHIP) at 1-877-839-2675 or ShipHelp.org.
- Adding Medicare Part D for prescription drug coverage (<u>page 18</u>). Medicare Part D is prescription drug coverage for anyone with Medicare. These plans are offered by private companies that are approved by Medicare.



Visit Medicare.gov/ MedicareCoverageOptions

or call 1-800-MEDICARE (1-800-633-4227) to compare your Medicare options and find the right plan for you!

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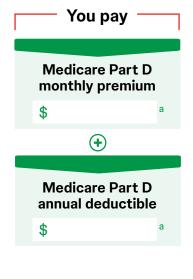
pay \$0 for covered services.

Medicare Part D

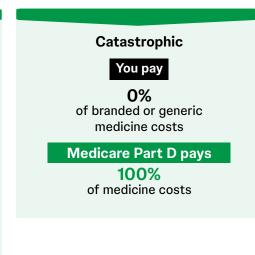
Medicare Part D is prescription drug coverage (including medicines you take at home) that is an optional benefit for anyone with Medicare. These plans are offered by private companies that are approved by Medicare.

Medicare Part D is additional coverage.

Call your plan and fill out this table:



You and your 2026 Medicare Part D coverage split Standard benefit You pay 25% of medicine costs until your total out-of-pocket costs reach \$2,100 **Medicare Part D pays** 65% of medicine costs Manufacturer pays 10% of medicine costs





New! Your out-of-pocket costs will be capped at \$2,100 in total for branded and generic Part D medicines. The coverage gap was eliminated in 2025.

See page 21 to learn about a monthly payment plan offered by Medicare.

aCheck your plan – premiums and deductibles vary by plan. If you are a higher-income beneficiary, you will pay the premium PLUS an additional amount for Medicare Part D.

If you need more prescription drug coverage, consider:

Switching to a new Medicare Part D plan. To compare Part D plans, visit Medicare.gov/plan-compare or call 1-800-MEDICARE (1-800-633-4227).



Terms to know

Catastrophic coverage

Once your total out-of-pocket spending reaches \$2,100. you will enter the catastrophic coverage phase. Then you pay \$0 for all your prescription medicine costs above that amount.

Medicare Prescription Payment Plan

Instead of paying large, up-front costs for Part D medicines. you have the option to enroll in a monthly payment plan to spread your out-of-pocket expenses over the year.

If you have high prescription costs early in the year, this plan could benefit you.

For more details or to enroll, visit your prescription drug plan's website or call member services.

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Step 3: Gather your medicine information

To get an idea of your prescription costs for next year, make a list of all your medicines. Then, for the plan you have chosen, call your plan or check their formulary (covered drug list) to see if your medicines are covered.

| Current plan | Medicare Part B | Medigap | Medicare Part C | Medicare Part D | |
|--|---|--|---|--|--|
| Medicine 1: | | | | | |
| Is the medicine covered? Yes No If needed, is treatment administration covered? Yes No Co-pay \$ / co-insurance %: | Is the medicine covered? Yes No If needed, is treatment administration covered? Yes No Co-pay \$ / co-insurance %: | Does Medigap cover all of your Part B co-insurance? Yes (you pay \$0) No (you may pay 5-10%, depending on your plan) | Is the medicine covered? Yes No If needed, is treatment administration covered? Yes No Co-pay \$ / co-insurance %: | Is the medicine covered? Yes No Co-pay \$ / co-insurance %: | |
| Medicine 2: | | | | _ | |
| Is the medicine covered? Yes No If needed, is treatment administration covered? Yes No Co-pay \$ / co-insurance %: | Is the medicine covered? Yes No If needed, is treatment administration covered? Yes No Co-pay \$ / co-insurance %: | Does Medigap cover all of your Part B co-insurance? Yes (you pay \$0) No (you may pay 5-10%, depending on your plan) | Is the medicine covered? Yes No If needed, is treatment administration covered? Yes No Co-pay \$ / co-insurance %: | Is the medicine covered? Yes No Co-pay \$ / co-insurance %: | |
| | | | | | |
| Medicine 3: | | | | | |
| Is the medicine covered? Yes No If needed, is treatment administration covered? Yes No Co-pay \$ / co-insurance %: | Is the medicine covered? Yes No If needed, is treatment administration covered? Yes No Co-pay \$ / co-insurance %: | Does Medigap cover all of your Part B co-insurance? Yes (you pay \$0) No (you may pay 5-10%, depending on your plan) | Is the medicine covered? Yes No If needed, is treatment administration covered? Yes No Co-pay \$ / co-insurance %: | Is the medicine covered? Yes No Co-pay \$ / co-insurance %: | |

i You can add more medicines on the next page.

| Current plan | Medicare Part B | Medigap | Medicare Part C | Medicare Part D |
|---|---|--|---|----------------------------------|
| Medicine 4: | | | | |
| Is the medicine covered? Yes No | Is the medicine covered? Yes No | Does Medigap cover all of your Part B co-insurance? | Is the medicine covered? Yes No | Is the medicine covered? Yes No |
| If needed, is treatment administration covered? Yes No | If needed, is treatment administration covered? Yes No | ✓ Yes (you pay \$0)✓ No (you may pay 5-10%, depending on your plan) | If needed, is treatment administration covered? Yes No | Co-pay \$ / co-insurance %: |
| Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | | Co-pay \$ / co-insurance %: | |
| Medicine 5: | | | | |
| Is the medicine covered? Yes No | Is the medicine covered? Yes No | Does Medigap cover all of your Part B co-insurance? | Is the medicine covered? Yes No | Is the medicine covered? Yes No |
| If needed, is treatment administration covered? Yes No | If needed, is treatment administration covered? Yes No | Yes (you pay \$0)No (you may pay 5-10%, depending on your plan) | If needed, is treatment administration covered? Yes No | Co-pay \$ / co-insurance %: |
| Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | dopontaling on your planty | Co-pay \$ / co-insurance %: | |
| Medicine 6: | | | | |
| Is the medicine covered? Yes No | Is the medicine covered? Yes No | Does Medigap cover all of your Part B co-insurance? | Is the medicine covered? Yes No | Is the medicine covered? Yes No |
| If needed, is treatment administration covered? Yes No | If needed, is treatment administration covered? Yes No | Yes (you pay \$0)No (you may pay 5-10%, depending on your plan) | If needed, is treatment administration covered? Yes No | Co-pay \$ / co-insurance %: |
| Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | | Co-pay \$ / co-insurance %: | |
| Medicine 7: | | | | |
| Is the medicine covered? Yes No | Is the medicine covered? | Does Medigap cover all of your Part B co-insurance? | Is the medicine covered? Yes No | Is the medicine covered? |
| If needed, is treatment administration covered? Yes No | If needed, is treatment administration covered? Yes No | Yes (you pay \$0) No (you may pay 5-10%, depending on your plan) | If needed, is treatment administration covered? Yes No | Co-pay \$ / co-insurance %: |
| Co-pay \$ / co-insurance %: | Co-pay \$ / co-insurance %: | depending on your plan) | Co-pay \$ / co-insurance %: | |

Get help with your Medicare costs

You may get help with costs that Medicare does not cover if you have low income and limited resources. If you think you might qualify, go ahead and apply – there is no cost or penalty if you find out later that you are not eligible.

See if you qualify for Medicaid

visit your prescription drug plan's website or call member services.

Some patients with limited income and resources may qualify for this government program that offers free or low-cost health care. People who qualify for both Medicare and Medicaid are considered "dual eligible." Medicare pays first, and then Medicaid pays the remaining costs. You'll automatically be enrolled in a Medicare prescription drug plan, and Medicaid may cover some drugs that Medicare doesn't cover. Contact your state Medicaid office at Medicaid.gov.

Programs to help with Medicare Medicare Prescription Extra Help (Low-Income Subsidy) **Medicare Savings Programs Payment Plan** Helps you budget your **Helps pay for Medicare Prescription Drug** Help pay for Medicare Part A and Part B costs out-of-pocket costs for Plan (Part D) costs **Part D medicines** Including premiums, deductible, co-insurance, co-pays Including premiums, deductibles, co-insurance, and co-pays What is Medicare Extra Help? Instead of paying large, up-front costs To qualify for a Medicare Savings for Part D medicines, you can enroll in a Medicare patients can qualify for Extra Help (also called Program, you must have income and Low-Income Subsidy, or LIS) with their Medicare prescription monthly payment plan to spread out your resources below a certain limit. drug plan costs. To qualify, a person must be enrolled in out-of-pocket expenses over the year. Medicare Part D and have both limited resources and limited You apply for Medicare Savings Programs 3 things to know about the Medicare income. You may qualify if your annual income is below through your state. When you apply, your Prescription Payment Plan: 150% of the federal poverty level and you meet the resource state determines which program(s) you · It's free to sign up with your requirements. qualify for. prescription drug plan You should look into the Extra Help program whenever you · You must opt in; it's not included update your Medicare Plan, especially if your income has Visit Medicare.gov/medicareautomatically recently changed. Learn more at medicare.gov/basics/ savings-programs costs/help/drug-costs There is no interest or additional fees See "Apply for Medicare Part D Extra For more information or to enroll, Help program," available at ssa.gov

- (1) There may be other programs available to you, including State Pharmacy Assistance Programs and Patient Assistance Programs offered by drug companies.
- (i) For help finding additional financial support, check out MAT.org, a free search engine that provides information on hundreds of patient assistance resources.



Explore Medicare resources

Learn more about Medicare, Medical Benefits, and Prescription Benefits below. Visit <u>Medicare.gov/publications</u> to order or download free Medicare resources in a variety of formats and languages.

I want to learn more about Medicare

Medicare

Visit Medicare.gov/publications to order or download free Medicare resources.

Medicare Resource Guide

Read this guide from Johnson & Johnson to learn more about Medicare coverage options. Visit Johnson & Johnson to learn more about Medicare coverage options. Visit Johnson & Johnson to learn more about Medicare coverage options. Visit Johnson & Johnson to learn more about Medicare coverage options. Visit Johnson & Johnson to learn more about Medicare coverage options. Visit Johnson & Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more about Medicare coverage options. Visit Johnson to learn more abo

Medicare and You Handbook

Visit <u>Medicare.gov/medicare-and-you</u> to download the official US government Medicare handbook.

Understanding Medicare Advantage Plans

Read this Medicare guide. Visit Medicare.gov/publications/12026-Understanding-Medicare-Advantage-Plans.pdf

Medicare Costs

To learn more about Medicare costs, visit Medicare.gov/basics/costs/medicare-costs

State Health Insurance Assistance Programs (SHIPs)

Your local SHIP helps Medicare-eligible individuals, their families, and caregivers make informed health insurance decisions to get the best care and benefits. To find a SHIP in your area, visit **ShipHelp.org** or call **1-877-839-2675.**

| Notes | | |
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Explore Medicare resources (cont'd)

I want to learn more about Medical Benefits

Medicare Supplement Insurance

Read this Medicare guide. Visit Medicare.gov/publications/11575-Getting-Started-Medicare-Supplement-Insurance.pdf

Choosing a Medigap Policy: A Guide to Health Insurance for People with Medicare

Read this Medigap guide. Visit Medicare.gov/publications/02110-medigap-guide-health-insurance.pdf

I want to learn more about Prescription Benefits

Your Guide to Medicare Prescription Drug Coverage

To learn more about Prescription Drug Coverage, visit Medicare.gov/drug-coverage-part-d

Medicare Plan Finder

Use the search tool on <u>Medicare.gov/plan-compare</u> to compare Medicare Prescription Drug (Part D) plans in your local area.

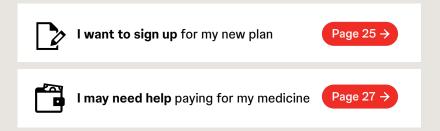
Extra Help with Medicare Prescription Drug Plan Costs

To see resources for Extra Help with Medicare Prescription Drug Plan Costs, visit ssa.gov/benefits/medicare/prescriptionhelp

| Notes | | |
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Next steps

Go to the appropriate section:



What's next?

You're ready to sign up for your new plan

Follow the steps below to sign up for insurance, based on the type of plan you have:



If you have coverage through the Health Insurance Marketplace[®],* take this information to a trained assister in your area or visit HealthCare.gov

(i) Keep in mind the dates for your open enrollment period, which are on **page 6**.



If you have private or commercial insurance through your employer, talk to the appropriate department such as Human Resources or call your plan.



If you have private or commercial insurance through a broker, call them or call your plan and share this information.



If you have Medicare, call 1-800-MEDICARE (1-800-633-4227) or visit <u>Medicare.gov/MedicareCoverageOptions</u>

Once you've signed up for a new plan:

- Give your new plan information to:
 - your healthcare providers
 - your pharmacies
 - any patient support programs you use
- Check to see if any new prior authorizations are needed for your medicines

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Get help paying for your Johnson & Johnson medicines

At J&J, we don't want cost to get in the way of treatment you need. We can help you explore options to lower your out-of-pocket cost for your medicine by J&J. No matter what type of insurance you have—or even if you don't have insurance—J&J's patient support programs can help explain your medicine insurance coverage and potential out-of-pocket costs and help find programs that may help you pay for your medicine by J&J.

Savings Programs from J&J

J&J offers Savings Programs that may be able to help people using commercial or private insurance pay for their medicine from J&J. Depending on your insurance plan, savings may apply to co-pay, co-insurance, or deductible. There are no income requirements, and you may participate without sharing your income information. See program requirements at <u>JNJwithMe.com</u>.

Additional Affordability Support from Johnson & Johnson

Patient assistance is available if you are uninsured or have commercial, employer-sponsored, or government coverage that does not fully meet your needs. You may be eligible to receive your medicine from J&J at no cost for up to one year if you meet the eligibility and income requirements for the Johnson & Johnson Patient Assistance Program. See terms and conditions at <u>JJPatientAssistance.com</u> or call 833-742-0791.



To learn more

- → Explore savings options at JNJwithMe.com
- → Visit JNJwithMe.com/Contact-Us for the phone number for your medicine by J&J.



Congrats!

You've finished the 2026 Open Enrollment Guide for patients. We hope this guide helped you gather the information you need to make an informed decision about the best health insurance plan for you and your family.



Questions?

Visit <u>JNJwithMe.com/Contact-Us</u> for the phone number for your medicine by Johnson & Johnson. Multilingual phone support is available.

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