

Changing Medicare Plans before Annual Enrollment Period

There are several reasons why providers and insurance companies have conflict. Generally, it is because they cannot negotiate a contract that makes both parties happy. These negotiations are usually held in a private manner, and no one really hears about it. Occasionally the news gets out that the contract negotiations have reached a stale mate leaving members nervous about their options.

You typically get a letter in the mail advising you that your Insurance Plan and your Provider are no longer going to work together. ***Don't ignore that letter and don't panic either.***

You might find that there are Medicare Plans in your area that are operated by the providers (doctors and hospitals) themselves. This means that some of the conflicts between network providers and the insurance company have been greatly reduced.

You may think that your only option is to find another Medicare plan that allows you to see your doctors and use the facilities you have grown accustomed to. While some beneficiaries state that they would never change primary care doctors or hospitals, there are many who discover that changing doctors is to their benefit.

Medicare Insurance plans allow you to choose your primary care doctor and change if you are not happy with your selection. If you have not looked at other plans in a while, you might discover that there are plans in your area that offer lower out of pocket maximums, have large "in network" doctors and providers, and meet or exceed your priorities when it comes to your health insurance. Some plans allow you to go "outside of the network" as well to see providers at a slightly higher cost giving you more control and freedom.

There are several situations when you can change plans **before** the Annual Enrollment Period. ***The only way to find out is to ask.*** We can help, call us at **(865) 777-0153**.