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# Special Enrollment Periods for Medicare Advantage Plans and Medicare Part D Drug Plans<sup>1</sup>

You're limited in when and how often you can join, change or leave a Medicare Advantage plan (also known as a Medicare private health plan) or drug plan (Part D).

- You can enroll in a Medicare Advantage (MA) or Part D plan during the initial period when you first qualify for Medicare.<sup>2</sup>
- During the first 45 days of each year (the Medicare Advantage Disenrollment Period, or MADP, January 1 through February 14), you can leave your Medicare Advantage plan and change to Original Medicare with or without also selecting a separate stand-alone Medicare drug plan. You can't make any changes to your coverage during this period if you have Original Medicare. You can't switch from one Medicare Advantage plan to another during this period.
- During Fall Open Enrollment, October 15 through December 7, you can change how you get your Medicare health coverage and enroll in, change or drop Medicare drug coverage.
- Outside of the above three periods, you can only change how you get your health coverage and enroll in, change or drop Part D drug coverage if you qualify for a Special Enrollment Period (SEP).

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<sup>1</sup> The information in this chart comes from the "[Medicare Prescription Drug Manual: Eligibility, Enrollment and Disenrollment, Section 30](#)" and the "[Medicare Managed Care Manual: Medicare Advantage Enrollment and Disenrollment, Section 30](#)."

<sup>2</sup> Eligibility requirements and initial enrollment periods for Medicare Advantage and Part D are different. You're eligible to enroll in a Medicare drug plan if you have Part A, Part B or both and live in the service area of a Medicare drug plan. The Part D Initial Enrollment Period is usually the same as the Initial Enrollment Period for Part B, which is the seven-month period that begins three months before you qualify for Part B and ends three months after the month you qualify. You're eligible to enroll in a Medicare Advantage plan if you have **both** Parts A and B. You usually can't get a Medicare Advantage plan if you have End-Stage Renal Disease. The Initial Coverage Election Period (ICEP) for Medicare Advantage begins three months before you are enrolled in both Parts A and B and ends either the last day of the month before you enrolled in both Parts A and B or the last day of your Part B initial enrollment period, whichever is later.

## Special Enrollment Periods

The length of the Special Enrollment Period (SEP) and the effective date of your new coverage vary depending on the reason for the SEP. The plan and, in some cases, the Centers for Medicare & Medicaid Services (CMS), determine whether you qualify for an SEP.

**The SEPs in the tables below let you change your Medicare Advantage plan, Medicare drug plan or both.** The rules for changing Medicare drug plans are the same whether you are in a stand-alone drug plan that only covers drugs or a Medicare Advantage plan that covers both health care and drugs.

## Retroactive Disenrollment

In some cases, CMS may let you retroactively disenroll from your Medicare private health or drug plan. CMS decides the date the disenrollment starts. For example, if you thought you were enrolling in a stand-alone drug plan but instead were misled into joining a Medicare Advantage health plan that includes drug coverage, you can request for your plan disenrollment to go back to the date you first joined the Medicare Advantage plan.

If you're granted retroactive disenrollment, it would be as if you never enrolled in the Medicare Advantage plan. The plan will likely take back any payments it made for your health care and drugs. In this case, you'll want to make sure you have health and drug coverage for the period for which you were retroactively disenrolled. You may have another type of insurance that will pay bills from the retroactive period. Or you may request retroactive reinstatement into the Medicare coverage you had before enrolling in the plan you didn't want. Bills for care and drugs you got while in the plan you didn't want would have to be resubmitted to that other plan.

If you got a lot of health care and drugs while in the plan you didn't want, think carefully about whether it's a good idea to request retroactive disenrollment. You can also request prospective disenrollment, which will change your coverage going forward. In this case the plan won't recoup payments it's already made.

**If you want to switch from one plan to another, it's usually better to just enroll in the plan you want to enroll in.** You'll be automatically disenrolled from your old plan. It's best to call 800-MEDICARE to enroll in a new plan rather than calling the plan directly.

## Premium Penalty for Late Enrollment into Part D

If you do **not** enroll in Part D when you're first eligible, and you don't have other drug coverage that is at least as good as Medicare's (creditable coverage) for 63 days or more, you'll likely have to pay a premium penalty if you later enroll in a Part D plan.

While SEPs let you enroll in Part D outside of a standard enrollment period, you will still owe a premium penalty for late Part D enrollment in many cases. There are two exceptions: You won't have a penalty if you qualify for Extra Help—a federal program that helps pay for most of the costs of the Medicare drug benefit—or if you show that you got inadequate information about the creditability of your other drug coverage.

## Table of Contents

The table in the following pages explains when a Special Enrollment Period may apply to you, how long each SEP lasts, and when your new coverage will begin. If you qualify for different SEPs at the same time, pick the one that is most convenient for your circumstances.

1. You have creditable drug coverage or lose creditable coverage through no fault of your own
2. You choose to change employer/union coverage (through either current or past employment)
3. You're institutionalized
4. You're enrolled in a State Pharmaceutical Assistance Program (SPAP)
5. You have Extra Help, Medicaid or a Medicare Savings Program
6. You want to disenroll from your first Medicare Advantage plan (MA plan)
7. You enroll in/disenroll from PACE (Program of All-Inclusive Care for the Elderly)
8. You move (permanently change your home address)
9. You've had Medicare eligibility issues
10. You're eligible for a Special Needs Plan (SNP) or lose eligibility for your SNP
11. You experience contract violations or enrollment errors
12. Your plan no longer offers coverage
13. You disenroll from your Medicare Advantage plan during the Medicare Advantage Disenrollment Period
14. You qualify for a new Part D initial enrollment period when you turn 65
15. You want to enroll in a five-star Medicare Advantage plan or Part D plan
16. You have been in a consistently low-performing Medicare Advantage or Part D plan
17. You experience an "exceptional circumstance"

# Special Enrollment Periods

You have an SEP if...	Your SEP lasts...	Your coverage begins...
<b>1. You lose creditable drug coverage through no fault of your own or want to keep or enroll in creditable coverage.</b>		
You, <b>through no fault of your own</b> , lose drug coverage that is at least as good as or better than Medicare's (creditable) or your drug coverage is reduced so that it is no longer creditable. (This does not include losing your drug coverage because you do not pay, or cannot afford, your premiums.)	Your SEP to <b>join</b> a Medicare private plan with drug coverage or a stand-alone Medicare drug plan begins the month you are told your coverage will end and lasts for <ul style="list-style-type: none"> <li>• 2 months after you lose your coverage; <b>or</b></li> <li>• 2 months after you receive notice, whichever is later.</li> </ul>	The first day of the month after you submit a completed application; <b>or</b> Up to 2 months after your SEP ends, if you request it.
You want to <b>disenroll</b> from Medicare drug coverage to maintain or enroll in another type of creditable drug coverage such as VA, TRICARE or a state pharmaceutical assistance program (SPAP) that offers creditable coverage.	You can use this SEP to disenroll from a Medicare private plan with drug coverage or a stand-alone Medicare drug plan whenever you are able to enroll in <b>another type</b> of creditable coverage.	The first day of the month after your plan receives your disenrollment request.
You have an SEP if...	Your SEP lasts...	Your coverage begins...
<b>2. You join or drop employer/union health and/or drug coverage regardless of whether it is creditable. Employer coverage may be current or former (retiree plan).</b>		
You choose to: <ul style="list-style-type: none"> <li>• <b>enroll</b> in or disenroll from a employer/union-sponsored Medicare private health or drug plan</li> <li>• <b>disenroll</b> from a Medicare private health or drug plan to take employer/union-sponsored coverage.</li> <li>• <b>disenroll</b> from employer/union-</li> </ul>	Your SEP to <b>join</b> or <b>disenroll</b> from a Medicare private health or drug plan, or to <b>switch</b> private health or drug plans is available to persons who have or are enrolling in an employer plan and ends two months after the month in which your employer or union coverage ends.	Up to three months after the month in which you submit a completed enrollment application.  If your employer/union was late sending in the application, your coverage may begin <b>retroactive</b> to when you submitted the application.

sponsored coverage of any kind (including COBRA <sup>3</sup> ) to enroll in a Medicare private health or drug plan.		
<b>You have an SEP if...</b>	<b>Your SEP lasts...</b>	<b>Your coverage begins...</b>
<b>3. You're institutionalized.</b>		
<p>You <b>move into, reside in, or move out of a qualified institutional facility</b>: a skilled nursing facility, nursing home, psychiatric hospital or unit, Intermediate Care Facility for the Mentally Retarded—ICF/MR, rehabilitation hospital or unit, long-term care hospital, or swing-bed hospital<sup>4</sup> <b>or</b>;</p> <p>You qualify to enroll in a Special Needs Plan (SNP) for institutionalized people<sup>5</sup></p>	<p>Once you move to or reside in a qualified institution, <b>you can enroll in or disenroll from a Medicare private health or drug plan or change your plan once a month.</b> (If you are in an Medicare private health plan, you may change to another Medicare private health plan or change to Original Medicare)</p> <p>In addition, after you move out of the facility, you have two months to <b>enroll in or disenroll</b> from a Medicare private health plan or drug plan, or to <b>switch</b> to another plan (including Original Medicare if you are in a MA plan).</p> <p>You can enroll in or disenroll from the SNP for institutionalized people at any time.</p>	<p>The first day of the month after you submit a completed application, but not before you become institutionalized or qualify to enroll in a Special Needs Plan for institutionalized people.</p>

<sup>3</sup> If you are disenrolling from COBRA and signing up for a Medicare private health plan you must already have enrolled in Parts A and B. You can only delay enrollment into Part B without penalty if you have health insurance from a current employer. COBRA is not considered current employer insurance. You do not need to have Medicare Part B to enroll in a Part D plan.

<sup>4</sup> Only residents of a skilled nursing facility, nursing home, psychiatric hospital or ICF/MR will be eligible to pay a \$0 copay for prescription drugs with Extra Help in 2010 and 2011.

<sup>5</sup> You qualify for an institutional SNP if you: (1) Have lived, for at least 90 days, in a long-term care facility that is served by the SNP or (2) have met your state's guidelines for requiring an institutional level of care for at least 90 days, whether you live in an institution or in a community setting (for example, at home or in a group residence). You can still qualify for an institutional SNP before you have received care for at least 90 days if it is likely that you will need long-term care for at least 90 days.

You have an SEP if...	Your SEP lasts...	Your coverage begins...
<b>4. You're enrolled in a qualified<sup>6</sup> State Pharmaceutical Assistance Program (SPAP) or lose SPAP eligibility.</b>		
You're enrolled in a qualified SPAP (no matter how long you have been a member).	<p>You have an SEP to choose <b>once</b> per year, at any time during the year, to <b>join</b> a Medicare private health or drug plan for the first time or to <b>change</b> to another private health or drug plan, including joining one that works with your SPAP. (If you are automatically enrolled in a Part D plan by your SPAP, you will not have this SEP.)</p> <p>You may <b>not drop</b> Part D coverage using this SEP.</p>	The first day of the month after you submit a completed application.
You lose SPAP eligibility	You have an SEP to join or switch to another Medicare drug plan or Medicare health plan with drug coverage. This applies even if you didn't have Part D before. The SEP starts the month you lose the SPAP because you're no longer eligible or are notified of the loss (whichever comes first) and continuing for two months after you're notified of the loss or lose the SPAP (whichever comes later).	The first day of the month after you submit a completed application.
You have an SEP if...	Your SEP lasts...	Your coverage begins...
<b>5. You have Medicaid, a Medicare Savings Program and/or Extra Help. (You will have no Part D premium penalty if you have Extra Help.)</b>		
You have Medicaid, a Medicare Savings Program or Supplemental Security Insurance. (You get Extra Help automatically.)	<p>You will get an SEP to join, disenroll from<sup>7</sup> or switch <b>Medicare private health or drug plans</b> beginning the month you become eligible for Medicaid or the MSP.</p> <p>-Continued on Next Page-</p>	<p>The first day of the month after you submit a completed application to the Medicare private health or Part D plan.</p> <ul style="list-style-type: none"> <li>• If you do not select a Part D plan yourself, CMS will auto-enroll you in</li> </ul>

<sup>6</sup> This list of qualified SPAPs can be found at <http://www.cms.gov/States/Downloads/QualifiedSPAP2.17.09.pdf>

<sup>7</sup> **Don't drop Part D coverage if you have Medicaid! In most cases you will lose your Medicaid benefits.** For more information, call your local Medicaid office.

	<p>As long as you have Medicaid or an MSP, <b>you can switch health or drug plans once a month.</b></p>	<p>a PDP plan effective the first day of the second month after CMS identifies your Extra Help status. CMS will enroll you in the Limited Income NET program through Humana from the month you qualified for Extra Help until the month your auto-enrolled plan starts.</p> <ul style="list-style-type: none"> <li>• If you recently qualified for Extra Help and choose your own Medicare drug plan instead of waiting to be auto-enrolled in one by CMS, you may receive coverage of any uncovered months through the Limited Income NET program through Humana.</li> <li>• If you enroll in a Medicare private health plan without drug coverage, Medicare will automatically enroll you in a Medicare private health plan with drug coverage (MA-PD) offered by that same company. Your MA-PD enrollment could be retroactive.</li> </ul>
<p>You have Extra Help because you applied for it. (You do not have Medicaid or a Medicare Savings Program.)</p>	<p>You will get an SEP to join, disenroll from or switch <b>Medicare private drug plans</b> beginning the month you become eligible for Extra Help. This includes stand-alone Prescription Drug Plans (PDPs) and Medicare Advantage Prescription Drug plans (MA-PDs).</p> <p>As long as you have Extra Help, <b>you can switch drug plans once a month.</b></p>	<p>The first day of the month after you submit a completed application to the Part D plan.</p> <ul style="list-style-type: none"> <li>• If you do not select a Part D plan yourself, CMS will auto-enroll you in a PDP plan effective the first day of the second month after CMS identifies your Extra Help status. CMS will enroll you in the Limited Income NET program through Humana from the month you qualified for Extra Help until the month your auto-enrolled plan starts.</li> <li>• If you recently qualified for Extra Help and choose your own Medicare</li> </ul>

		drug plan instead of waiting to be auto-enrolled in one by CMS, you may receive coverage of any uncovered months through the Limited Income NET program through Humana.
<b>If you lose Medicaid or MSP benefits<sup>8</sup>.</b>	You have one SEP to <b>switch your Medicare private health or drug plan</b> that begins the month you're notified that you will lose Medicaid or MSP benefits and continues for two months after.	The first day of the month after you submit a completed application.
<b>You will lose Extra Help for the next calendar year</b> because you are no longer deemed eligible for it. (You are deemed eligible if you are enrolled in Medicaid, an MSP or SSI.)	You have a one-time SEP to <b>disenroll from or switch your Medicare private health or drug plan</b> from January–March if you were notified you lost Extra Help before January 1.	The first day of the month after you submit a completed application.
You <b>lose Extra Help during the calendar year</b> (occurs in limited circumstances)	You have a one-time SEP to <b>disenroll from or switch</b> your Medicare private drug plan for two months after you are notified of losing Extra Help.	The first day of the month after you submit a completed application
<b>You have an SEP if...</b>	<b>Your SEP lasts...</b>	<b>Your coverage begins...</b>
<b>6. You want to disenroll from your FIRST Medicare private health plan (Medicare Advantage – MA)</b>		
You select a Medicare private health plan when you <b>first qualify for Medicare Part B based on age</b> (65 years old) <sup>9</sup>	You can <b>disenroll</b> from your Medicare private health plan at any time during the 12-months after your health plan coverage first started and go back to Original Medicare with or without joining a stand-alone Medicare drug plan (PDP).	Depends upon the situation.
You dropped your Medigap policy to enroll in a Medicare private health plan <b>for the</b>	You can <b>disenroll</b> from your Medicare private health plan at any time during the	Depends upon the situation.

<sup>8</sup> If you lose your Medicaid or MSP benefits your Extra Help will continue. If you are deemed eligible for Extra Help by either having Medicaid, SSI or an MSP between January 1 and June 30, then you are eligible for Extra Help for the remainder of the calendar year. If you are deemed eligible for Extra Help between July 1 and December 31 you will be eligible for Extra Help for the remainder of that calendar year and the following calendar year.

<sup>9</sup> In this instance, under federal law if you are 65 and over, you will have guaranteed issue rights to buy certain Medigap policies. Laws in your state may offer additional protections.

<p><b>first time</b> and want to re-enroll in a Medigap policy during your “trial period.”<sup>10</sup> The trial period lasts for 12 months after you enroll in a Medicare private health plan for the first time.</p>	<p>trial period – the 12-months after your MA coverage first started-- and go back to Original Medicare with or without joining a stand-alone Medicare drug plan (PDP).</p>	
<b>You have an SEP if...      Your SEP lasts...      Your coverage begins...</b>		
<b>7. You enroll in/disenroll from PACE (Program of All-Inclusive Care for Elderly)</b>		
<p>You disenroll from a Medicare private health or drug plan to <b>enroll in PACE</b>.</p>	<p>You can <b>disenroll</b> from your Medicare private health or drug plan <b>at any time</b> to enroll in PACE.</p>	<p>Depends upon the situation</p>
<p>You <b>disenroll from PACE</b> to join a Medicare private health or drug plan.</p>	<p>Your SEP to <b>join</b> another Medicare private health or drug plan lasts up to two months after the effective date of your disenrollment from the PACE program.</p>	
<b>You have an SEP if...      Your SEP lasts...      Your coverage begins...</b>		
<b>8. You move (permanently change your home address)</b>		
<p>You move, permanently. You will have an SEP if you move out of your Medicare private health or drug plan’s service area <b>or</b> if you move to an area covered by your plan but more plans are available to you in your new coverage area.</p>	<p><b>If you notify your Medicare private health or drug plan of a permanent move in advance</b>, you have an SEP to <b>switch</b> to another private health or drug plan beginning as early as the month before your move and lasting up to two months after the move.</p> <p><b>If you notify your private health or drug plan of a permanent move after you move</b>, you have an SEP to <b>switch</b> to another private health or drug plan, beginning the month you tell your plan, plus two more full months thereafter.</p> <p><b>If you did not notify your private health or drug plan about a move:</b></p>	<p>You may choose to begin coverage any time between the first day of the month you moved (as long as you have submitted a completed application), and up to three months after your Medicare private health plan or drug plan receives the completed enrollment application.</p>

<sup>10</sup> In this instance, under federal law if you are 65 and over, you will have guaranteed issue rights to buy certain Medigap policies. Laws in your state may offer additional protections.

	<ul style="list-style-type: none"> <li>• and your <b>Medicare drug plan</b> learns from CMS or the post office that you moved over <b>twelve months</b> ago, the plan should disenroll you twelve months after your move. Your SEP to <b>switch</b> to another Medicare drug plan begins at the beginning of the twelfth month and continues through the end of the fourteenth month after your move.</li> <li>• and your <b>Medicare private health plan</b> learns from CMS or the post office that you moved over <b>six months</b> ago, the plan should disenroll you twelve months after your move. Your SEP to <b>switch</b> to another Medicare private plan begins at the beginning of the sixth month and continues through the end of the eighth month after your move.</li> </ul>	
<p>You become eligible for Part D or Medicare Advantage because you have:</p> <ul style="list-style-type: none"> <li>• Moved back to the U.S. after living abroad</li> <li>• You were released from prison</li> </ul> <p>(You aren't eligible for Part D or Medicare Advantage if you live outside the U.S. or are in prison.)</p>	<p>You qualify for an SEP to enroll in Part D plan or a Medicare Advantage plan. You have an SEP to join a private health or drug plan beginning as early as the month before your move and lasting up to two months after the move.</p>	<p>You may choose to begin coverage any time between the first day of the month you moved (as long as you have submitted a completed application), and up to three months after your Medicare private health or drug plan receives the completed enrollment application.</p>
<p><b>You have an SEP if...</b></p>	<p><b>Your SEP lasts...</b></p>	<p><b>Your coverage begins...</b></p>
<p><b>9. You have had Medicare eligibility issues.</b></p>		
<p>You have received retroactive enrollment into Medicare</p>	<p>Your enrollment period to <b>join</b> a Medicare private health or drug plan for the first time</p>	<p>Depends on the situation.</p>

	begins the month that you receive notice of your Medicare entitlement and continues for an additional two months after the month the notice is received. <sup>11</sup>	
You do not have premium-free Part A and you enroll in Part B during the General Enrollment Period (Jan-Mar) with your Part B coverage beginning July 1.	You have an SEP to <b>join</b> a Medicare stand-alone drug plan from April 1-June 30 (after you have enrolled in Part B).	July 1 of that year.
You lost Part B but still have Part A and are involuntarily disenrolled from your MA plan	You have an SEP to enroll in a Medicare stand-alone drug plan that begins when you learn you lost Part B and continues for two additional months.	The month following the month you applied.
<b>You have an SEP if...</b>	<b>Your SEP lasts...</b>	<b>Your coverage begins...</b>
<b>10. You're eligible to join a Special Needs Plan (SNP) or you lose SNP eligibility.</b>		
You're eligible to enroll in a Medicare SNP.	You can <b>leave your Medicare private health or drug plan</b> at any time to enroll in a SNP if you are eligible.  If you have a chronic condition and want to <b>join a chronic care SNP</b> for which you are eligible, you can do so at any time. The SEP ends when you join the private health or drug plan. <b>Note:</b> If you have another chronic condition, you get another SEP to join a different SNP that covers this other condition.	The first day of the month after you submit a completed application.
You lose eligibility to continue getting coverage through your SNP. (SNPs must continue to cover you for at least one month if you become ineligible and for up to six months if it's likely that you will re-qualify within six months.)	You can <b>join</b> another Medicare private health or drug plan beginning the month you no longer qualify for the SNP and ending either three months after your continued period of enrollment ends or when you enroll in another plan, whichever comes first.	The first day of the month after you submit a completed application.

<sup>11</sup> This enrollment period serves as your initial enrollment period for Medicare drug coverage, so you will not face a premium penalty as long as you enroll in a plan within the time limits of your SEP.

<p>You're enrolled in a chronic care SNP, but your provider fails to confirm that you have the chronic condition required for eligibility by the end of the first month of enrollment.</p>	<p>You have an SEP to enroll in a Medicare private health plan with drug coverage or a Medicare private health plan without drug coverage and a stand-alone Medicare drug plan. The SEP begins the month the SNP plan notifies you that you don't qualify and ends two full months after the month of notification or when you enroll in another Medicare private health or drug plan, whichever is earlier.</p>	<p>The first day of the month after you submit a completed application.</p>
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You have an SEP if...	Your SEP lasts...	Your coverage begins...
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**11. You experience contract violations (such as misleading marketing) or enrollment errors.**

<p>Your Medicare private health or drug plan <b>violated a material provision of your contract</b> such as:</p> <ul style="list-style-type: none"> <li>• Failing to provide you on a timely basis with benefits available under the plan;</li> <li>• Failing to provide benefits in accordance with applicable quality standards;</li> <li>• Giving misleading information in the private health or drug plan's marketing to get you to enroll in the plan.</li> </ul>	<p>Your SEP to <b>switch to another Medicare private health or drug plan</b> begins once the regional CMS office has determined that a violation has occurred. (If you are in an MA plan, your SEP allows you to <b>disenroll</b> from your plan and either <b>change</b> to Original Medicare or join another MA plan)</p> <p>You can <b>switch to</b> another Medicare private health or drug plan during the last month of enrollment in your current plan.</p> <p>If you do not choose another private health or drug plan immediately, your SEP is extended for 90 days from the time of your disenrollment in the plan.</p>	<p>The effective date of the new Medicare private health or drug plan will be the first of the month following the month the new private health or drug plan receives the completed application or up to three months after it receives the completed application.</p> <p>In some cases, CMS may process a retroactive disenrollment and/or retroactive enrollment in another private health or drug plan</p>
<p>A <b>federal employee</b> made a mistake in your enrollment or disenrollment in a Medicare drug plan</p>	<p>You have one SEP to <b>enroll</b> in and/or <b>disenroll</b> from a Medicare drug plan that begins the month of CMS approval and lasts two additional months.</p>	<p>Depends on the situation.</p>
<p>CMS sanctions (finds fault with) a Medicare private health or drug plan and you disenroll in connection with that sanction.</p>	<p>The length and start date of your SEP to <b>join</b> a new private health or drug plan depends on the situation.</p>	<p>Depends on the situation.</p>
<p>CMS determines that your previous drug</p>	<p>You have one SEP to <b>enroll</b> in or <b>disenroll</b></p>	<p>Depends on the situation.</p>

coverage did not adequately inform you of a loss of creditable coverage or that your drug coverage was not creditable.	from a Medicare drug plan that begins the month of CMS approval and lasts two additional months. (In this case, CMS may waive your premium penalties.)	
You have an SEP if...	Your SEP lasts...	Your coverage begins...
<b>12. Your Medicare private health or drug plan no longer offers Medicare coverage.</b>		
Your Medicare private health plan or drug plan doesn't renew its service. (Your private health plan or drug plan must notify you by October 1 if it won't offer Medicare drug or health coverage next year, and it must continue to provide coverage through the end of the current calendar year.)	Your SEP to <b>switch</b> to another Medicare private health or drug plan lasts from <b>December 8</b> of that year through the last day of <b>February</b> of the next year. (This SEP is in addition to the Fall Open Enrollment period from October 15 through December 7, when you can switch Medicare health coverage and enroll or disenroll from Part D drug coverage.)	<ul style="list-style-type: none"> <li>• Enrollments made from October 15 through December 31 are effective January 1.</li> <li>• Enrollments made during January are effective February 1.</li> <li>• Enrollments made in February are effective March 1.</li> </ul>
Mid-year, your Medicare private health plan or drug plan closes or changes its contract with CMS so that you will be forced to disenroll from the private health or drug plan. (Your private health or drug plan must notify you 60 days before the proposed date of termination or modification.)	Your SEP to <b>switch</b> to another Medicare private health or drug plan begins two months before the proposed closing or changes take place and ends one month after they occur.	You can ask that your new private health or drug plan coverage start the month after you get notice and up to two months after your old Medicare private health or drug plan coverage ends.
CMS terminates your Medicare private health or drug plan's contract because of misconduct or other problems. (Your private health or drug plan must give you 30 days notice before the termination date.)	Your SEP to <b>switch</b> to another Medicare private health or drug plan begins one month before the termination occurs and lasts for two months afterward.	You can choose to have your new Medicare private health or drug plan coverage begin up to three months after the month your old coverage ended.
CMS decides to immediately terminate its contract with your Medicare private health or drug plan.	CMS will notify you of the termination and your SEP. The termination may be mid-month.	Depends on the situation.

You have an SEP if...	Your SEP lasts...	Your coverage begins...
<b>13. You disenroll from your Medicare private health (MA) plan during the Medicare Advantage Disenrollment Period (MADP)</b>		
You disenroll from your Private Health Plan (MA) plan during the Medicare Advantage Disenrollment Period (January 1 – February 14)	You should enroll in a Medicare stand-alone drug plan when you disenroll from your MAPD plan. You can disenroll from your MAPD plan by submitting a disenrollment request or by simply enrolling in a stand-alone drug plan.	The month following the month you submit an enrollment request.
You have an SEP if...	Your SEP lasts...	Your coverage begins...
<b>14. You qualify for new Part D initial enrollment period when you turn 65</b>		
You qualify for new Part D initial enrollment period to join a Medicare drug plan because you are a person with a disability who is turning 65 (If you are already enrolled in a Medicare drug plan and are paying a late premium penalty, the penalty will end when the enrollment period starts)	You have an SEP to disenroll from a Medicare private health (that does or does not include drug coverage) to join Original Medicare or to enroll in a Medicare private health plan that does not include drug coverage. You may also use your additional IEP to join a stand-alone drug plan. The SEP begins and ends with the additional Part D IEP to join a Medicare drug plan—usually the seven month period including three months before you turn 65, the month you turn 65, and the three months after you turn 65.	If you are not already enrolled in a Part D plan, your coverage will usually start the month following the month you submit an enrollment request.
You have an SEP if...	Your SEP lasts...	Your coverage begins...
<b>15. You want to enroll in a five-star Medicare Advantage plan or Part D plan</b>		
You want to enroll in an MA or Part D plan that has an overall Plan Performance Rating of five stars and you're otherwise eligible to enroll in the plan. (For example, you live in the plan's service area.)	Plan Performance Ratings are released every fall and apply to the following calendar year. Your SEP to join a five-star MA or Part D plan starts <b>December 8</b> of the year <b>before</b> the plan is considered a five-star plan. It lasts through <b>November 30</b> of the year the plan is considered a five-star	<ul style="list-style-type: none"> <li>• Enrollments December 8 through December 31 are effective January 1.</li> <li>• Enrollments January 1 through November 30 are effective the month following the month you submit an enrollment request.</li> </ul>

	plan. You can use this SEP to change plans one time per year.	
<b>You have an SEP if...</b>	<b>Your SEP lasts...</b>	<b>Your coverage begins...</b>
<b>16. You have been in a consistently low-performing Medicare Advantage or Part D plan</b>		
You have been in a consistently low-performing plan, meaning that the plan has received an overall Medicare star rating of less than three stars for three consecutive years.	You have an SEP to enroll into a higher quality plan throughout the year. You should receive a notice from CMS in late October, saying that you are in a low-performing plan. You have the remainder of that year, as well as the following year, to switch to a plan rated 3 stars or more. To use this SEP, you must call 800-MEDICARE directly. Note: This is separate from the five-star SEP listed above.	The month following the month you submit an enrollment request.
<b>You have an SEP if...</b>	<b>Your SEP lasts...</b>	<b>Your coverage begins...</b>
<b>17. You experience an “exceptional circumstance”</b>		
If your circumstances do not fit into any of the other SEP categories, you have the right to ask CMS to grant you an SEP based on your particular exceptional circumstances. <sup>12</sup>	Depends on the SEP.	Depends upon the circumstances.

<sup>12</sup> CMS can also grant “exceptional circumstance” SEPs to groups identified by a common problem or characteristic (for example, members of a particular plan who were all misled about the plan’s offerings). Many of the SEPs mentioned in this chart were created as “exceptional circumstance” SEPs.