

What to Ask Before You Choose a Medicare Advantage Plan

A simple, no-nonsense checklist to help you make a confident choice.

When you're turning 65, it's no surprise that more than half of new Medicare beneficiaries choose a Medicare Advantage plan. For many people, it's a strong option because the premiums are lower, the benefits are bundled together, and the out-of-pocket costs are predictable. It's not the right fit for everyone, but for most, it offers an affordable, convenient way to get their Medicare coverage in one place.

When you're comparing Medicare Advantage plans, it's not about who advertises the most "extras." It's about making sure the plan works for **your** doctors, **your** prescriptions, and **your** lifestyle. Here's what I always walk clients through:

1. Your Doctors & Care Team

- Are your primary doctor and specialists in-network?
- Do you need referrals to see specialists?
- If you travel, will you be covered outside your home area?

2. Prescription Coverage

- Are your current medications covered—and at what tier?
- Which pharmacies are preferred in the plan?
- Will any of your medications need prior authorization?

3. Costs & Financial Protection

- What is the annual maximum out-of-pocket?
- What are the copays for common services (office visits, labs, imaging, specialists)?
- Have premiums been steady, or do they jump around year to year?

4. Hospital & Emergency Care

- Are your preferred hospitals in-network?
 - How does the plan handle urgent care or emergency services when you're traveling?
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5. Dental, Vision & Hearing

- Does the plan include dental, vision, and hearing benefits?
 - Are the benefit amounts meaningful—or just the basics?
 - Are the providers for these services easy to get to?
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6. Care Coordination & Chronic Conditions

- Does the plan offer any care coordination or case management?
 - If you have a chronic condition, is there an SNP (Special Needs Plan) designed for your situation?
 - Are there extras like transportation, in-home support, or post-hospital benefits?
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7. Travel, Lifestyle & Convenience

- Do you spend part of the year in another state?
 - Does the plan offer telehealth or virtual visits?
 - Does it include fitness or wellness benefits you'll actually use?
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8. The Plan's Track Record

- What is the plan's Medicare Star Rating?
- Has it been consistent with quality and pricing over the years?
- How does their customer service stack up compared to other carriers?

9. Enrollment Flexibility

- If your needs change, how easy is it to switch plans during AEP?
 - Would a Medigap plan give you more flexibility?
 - What happens if you move out of the service area?
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The Most Important Questions

The most important questions when choosing a Medicare Advantage plan are:

- Are my current doctors, specialists, and preferred hospitals in the plan's network?
Medicare Advantage plans typically have specific provider networks, and using out-of-network providers can lead to very high—or even full—out-of-pocket costs.
- Are all my current prescriptions covered in the plan's formulary, and how much will they cost? Each plan has its own list of covered medications and pricing tiers, and these can change each year, so it's essential to double-check your medications.

If you choose a plan with a strong Star Rating, it means many other members are satisfied with their care and service. And that's a good indicator that the plan delivers on what it promises.

This is where working with an advisor truly makes a difference. A good plan isn't just about coverage, it's about making sure it supports your health needs, your budget, and the way you receive care.