

AvMed Medicare Transition Support Team – FAQs for M-DCPS Members

1. Why is my AvMed Medicare Advantage plan ending?

AvMed has made the difficult decision to exit the Medicare Advantage Prescription Drug (MAPD) market effective December 31, 2025. This follows a comprehensive review of financial and regulatory challenges, which have made it unsustainable to continue offering MAPD plans while maintaining our high standards and service to our members.

2. When does my AvMed Medicare Advantage coverage end?

AvMed coverage ends: December 31, 2025

3. What are my options for new coverage?

You have several options to consider:

- A. **Enroll in a new Medicare Advantage plan during M-DCPS' Annual Enrollment Period** (AEP) between October 15, 2025, and December 7, 2025.
- B. **Enroll in a new Medicare Advantage plan during the Special Enrollment Period** (SEP) triggered by AvMed's exit from the Medicare market. This is a one-time period that begins December 8, 2025, and continues through February 28, 2026, giving you **an additional opportunity** to select a new plan outside of the standard AEP.
- C. **Return to Original Medicare (Parts A & B)** and consider:
 - Prescription drug coverage obtained through a stand-alone Part D Prescription Drug Plan. Failure to obtain prescription drug coverage may result in a penalty.
 - A Medigap (Medicare Supplement) policy to help with out-of-pocket costs.

If you do not actively select a new Medicare plan during the Annual Enrollment or Special Enrollment Periods detailed above, you may be automatically enrolled into Original Medicare, effective January 1, 2026, and you may be required to obtain a stand-alone Part D Prescription Drug Plan.

We encourage you to contact the FBMC Service Center at 1-855-632-7748 for information and enrollment assistance on the Medicare Groups plans offered through M-DCPS.

4. When does my new coverage begin?

- **If you select a new Medicare plan during the Annual Enrollment Period (AEP)** -between October 15 and December 7:
 - Coverage starts January 1, 2026.
- **If you enroll in a new Medicare plan during the Special Enrollment Period (SEP)** - between December 8 and December 31:
 - Coverage starts January 1, 2026.
- **If you enroll in a new Medicare plan during the Special Enrollment Period (SEP)** - between January 1 and January 31:
 - Coverage starts February 1, 2026.
 - Under this selection, you may be considered to be under Original Medicare for January 2026 and be expected to obtain a stand-alone Part D Plan for your prescription drug coverage needs.
- **If you enroll in a new Medicare plan during the Special Enrollment Period (SEP)** - between February 1 and February 28:
 - Coverage starts March 1, 2026.
 - Under this selection, you may be considered to be under Original Medicare for January and February of 2026 and be expected to obtain a stand-alone Part D Plan for your prescription drug coverage needs.

5. What happens if I don't choose a new plan?

If you do not actively select a new Medicare plan during the **Annual Enrollment Period**, October 15 - December 31, you may be automatically enrolled in **Original Medicare**, with an effective date of January 1, 2026

Alternatively, if you do not actively select a new Medicare plan during the additional opportunity offered by the **Special Enrollment Period**, December 8 - February 28, you may forfeit this additional opportunity, and you may be automatically enrolled in **Original Medicare**, with an effective date of January 1, 2026

Please note that in any case, you are still required to obtain credible prescription drug coverage through a stand-alone Part D Prescription Drug Plan or in a Medicare plan that includes credible prescription drug coverage. This is regardless of whether you take medications or not.

Otherwise, you may be subject to a penalty.

6. Who can help me choose a new plan?

For information on the Medicare Group plans offered through M-DCPS, contact the **FBMC Service Center** at **1-855-632-7748**.

For information on Original Medicare, contact **Medicare** at **1-800-MEDICARE (1-800-633-4227)**; TTY: **1-877-486-2048**.

7. Will my current doctors be covered under a new plan?

When choosing a new plan:

- Verify that your preferred providers are in-network with your new plan.
- If a preferred provider is not within the plan's approved network, please consult with your benefits representative or with the plan for available in-network options.

Contact your doctors and providers to update them once your new coverage is in place.

8. Will my current prescription medications be covered under a new plan?

When choosing a new plan:

- Ensure your prescription medications are included in the new plan's formulary.
- Verify that your preferred pharmacy is in the new plan's pharmacy network.

- If an important medication or pharmacy is not covered under the new plan, please consult with your benefits representative or with the plan for additional options.

Contact your pharmacies to update them once your new coverage is in place.

9. What if I have medical procedures scheduled that extend into 2026?

For help with coordinating and obtaining coverage for procedures and services as of January 1, 2026, we encourage you to contact the Customer Service Department of your new plan for further assistance.

10. How is AvMed supporting Miami Dade County Public School members during this transition?

AvMed has established a Miami Dade County Public Schools dedicated **Medicare Transition Support Team** that will be in place from October 1, 2025 – October 31, 2025. You can reach the AvMed M-DCPS dedicated Transition Support Team by calling **1-844-439-5383**, between the hours of 8:00 am – 8:00 pm, Monday – Friday

After October 31: If you have any questions regarding your current AvMed Medicare 2025 coverage, you may contact the AvMed Member Engagement Department from November 1, 2025, through December 31, 2025, by calling 1-800-782-8633, 8:00 am - 8:00 pm, Monday – Friday and 9:00 am - 1:00 pm, Saturday

After December 31: Contact the Customer Service Department of your new plan for further assistance.

11. What is the Medicare Transition Support Team able to help me with?

- Respond to any M-DCPS member inquiries regarding their AvMed Medicare coverage that is currently in effect in 2025.
- Assist AvMed members that are currently participating in Care Management programs by connecting them with the appropriate AvMed Care Management representative.

- Answer additional questions you may have regarding when and how to select a new Medicare plan for 2026.
- Provide FBMC's Service Center contact information for 2026 Medicare Plan benefit information and enrollment assistance.
- Assist in warm transferring M-DCPS members needing assistance with claims, eligibility, and/or other member related issues for the 2025 plan year to the AvMed Member Engagement Team.

12. Will the Medicare Transition Support Team be able to help me find a new health plan or help me enroll in a new plan for 2026?

Please note that AvMed Representatives are only authorized to discuss AvMed plan benefits. Given that AvMed will not be offering Medicare plans in 2026, AvMed representatives cannot provide information on **any** Medicare plans available in 2026. They cannot suggest or advise on which new plan is best for your needs. For 2026 Medicare plan information and enrollment assistance please call the **FBMC Service Center** at **1-855-632-7748**.