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# BWICA Medicare Update 2026

## CALL 212-244-6469 OR 212-AGING-NY

### FOR HIICAP COUNSELOR ASSISTANCE

NYC Department for the Aging

NEW YORK STATE OF OPPORTUNITY. Health Insurance Information, Counseling and Assistance Program

ACL Administration for Community Living

SHIP State Health Insurance Assistance Program

**Medicare Questions? Call Aging Connect at 212-244-6469**

# Fall Open Enrollment

- Annual period when people can make changes to their Medicare coverage
  - Began October 15 and ends December 7
  - New coverage will take effect January 1, 2026

**Join a new plan**

- Join a different Medicare Advantage Plan
- Join a different stand-alone Part D drug plan

**Switch coverage**

- Switch from Original Medicare to a Medicare Advantage Plan
- Switch from a Medicare Advantage Plan to Original Medicare

# 2026 UPDATES

- Part B premium and deductible amounts and Parts B and Part D IRMAA amounts.
- Part A premium and deductible amount and Part A coinsurance.
- Medigap supplemental plan rate increases are pending for several companies.
- Part D base beneficiary premium, deductible, and cost sharing amounts.
- Part D new maximum out-of-pocket limit and new benchmark amount and plans for those qualifying for extra help with their Part D costs.
- New Part D Prescription Drug Payment Plan maximum out of pocket limit.
- Medicare Advantage Plans new Maximum Out-of-Pocket amount limits.
- Medicare Advantage Plan terminations.
- Telehealth restrictions.

# What is Medicare?

Medicare is a Federal program for those who are:

- Age 65 or older
- Disabled
- End Stage Renal Disease
- ALS

# Your Medicare Choices

## Original Medicare

**Part A** Hospital Insurance

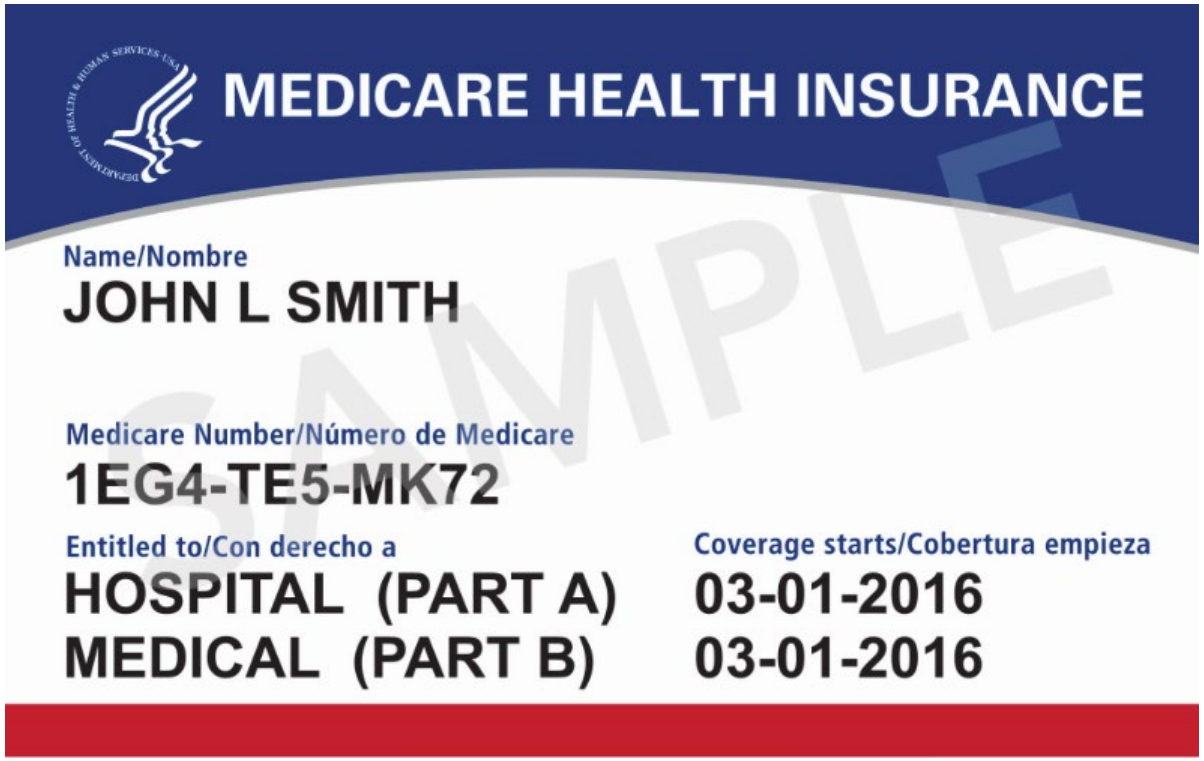
**Part B** Medical Insurance

Can add **Part D** plan unless you have other creditable drug coverage—will pay monthly **Part D premium**

Can add **Medicare Supplement Insurance** (Medigap) if no other other supplemental coverage—will pay monthly **Medigap premium**

## Medicare Advantage Plan (HMO/PPO)

**Medicare Part C**
**Combines Parts A, B and D and often provides other benefits—many plans - $0 add'l. premium**
**Cannot have a Medicare supplemental plan**


MEDICARE HEALTH INSURANCE
Name/Nombre
JOHN L SMITH
Medicare Number/Número de Medicare
1EG4-TE5-MK72
Entitled to/Con derecho a
Coverage starts/Cobertura empieza
HOSPITAL (PART A) 03-01-2016
MEDICAL (PART B) 03-01-2016
SAMPLE

# 2026 PART B PREMIUM

**Standard Part B monthly premium for 2026 is estimated to be $206.50--$185.00 in 2025.**

# Original Medicare's 2026 out-of-pocket costs

## 3 cost gaps—Part B

1. Part B annual deductible: $288 est.
2. Part B coinsurance: 20% for most
3. Part B excess charges: Up to 15% max*

- Must pay monthly Part B premium regardless of how you get Medicare.
- Lab work and preventive services fully covered if medically necessary and within stated time frames.
- * 5% max in NYS for all except home and office visits.

- No limit on out-of-pocket costs with Original Medicare.
- Can purchase Medigap policy to cover Original Medicare cost-sharing if no retiree coverage, Medicaid, or Medicare Savings Program QMB eligibility.

# Some of the Free* Preventive Benefits covered by Medicare

- "Welcome to Medicare" preventive visit
- Annual “Wellness” visit
- Abdominal aortic aneurysm screening
- Alcohol misuse screening and counseling
- Bone mass measurement
- Breast cancer screening (mammogram)
- Cardiovascular disease Risk Reduction Visit
- Cardiovascular disease screenings
- Cervical and vaginal cancer screening
- Colorectal cancer screenings
  - Screening fecal occult blood test
  - Screening flexible sigmoidoscopy
  - Screening colonoscopy
  - Screening barium enema
  - Multi-target stool DNA test
  - * Free if provider accepts Medicare assignment
- Depression screenings
- Diabetes screenings
- Flu shots (Vaccine)
- Glaucoma tests
- Hepatitis B shots (Vaccine)
- Hepatitis C screening test
- HIV screening
- Lung Cancer Screening
- Medical nutrition therapy services
- Obesity screening and counseling
- Pneumococcal shots
- Prostate cancer screening
- Sexually-transmitted infections screening and counseling
- Tobacco use cessation counseling


- **No limit on out-of-pocket costs with Original Medicare.**
- **Can purchase Medigap policy to help cover Medicare cost-sharing.**

# Original Medicare's 2026 estimated out-of-pocket costs

## 3 cost gaps—Part A (inpatient)

1. Part A deductible--$1,676 per benefit period

   ($1,716 is 2026)

2. Part A days 61-90---$419/day ($429 in 2026)

   Part A days 91-150--$838/day ($858 in 2026)

3. Part A Skilled Nursing Facility-–$209.50 per day (days 21-100) ($214.50 in 2026)

NOTE: You could also be subject to multiple Part A deductibles.

# Covering some or all out-of-pocket costs with Original Medicare

**Retiree supplement benefit**

**Medicaid**

**Medicare Savings Program—QMB**

**If you don’t have the above, you will either have to cover these out-of-pocket costs on your own or purchase a Medigap Supplement.**

# What is Medigap?

- Policies sold by insurance companies.
- Covers "cost gaps" in Original Medicare Plan.
  Part A & B deductibles, co-pays, coinsurance
- Also called "Medicare Supplement Insurance"
- 10 Standardized Policies Available
  - Labeled Plan A thru N
  - Plans of same letter have same coverage!
  - Only premium costs are different!
- Can go to any doctor, hospital, or provider that accepts Medicare in any state. No networks.
- Continuous open enrollment in NYS! Cannot be denied!

# What Is Medigap?

- You pay a monthly premium for Medigap in addition to the Medicare Part B premium.
- Medigap pays claim after Medicare pays.
- Only covers Medicare approved services.
- Does NOT cover prescription drugs; need separate Medicare Part D Prescription Drug Plan unless you have other creditable coverage.

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# What is Medigap?

- All plans cover Part A coinsurance (Days 61-90), (60) lifetime reserve days plus 365 additional days
  - All cover Part A deductible except Plan A
  - Most plans cover entire Part B (20%) coinsurance
- Standard Benefit/Continuous open enrollment
- Up to 6 month waiting period (WP) for pre-existing conditions BUT credit prior coverage toward WP
  - https://www.dfs.ny.gov/consumers/health_insurance/supplement_plans_rates
- Most insurers/plans have rate changes effective January 2026:
  - Medicare Supplement Insurance Rate Plans

# Services that are not covered by Original Medicare!

- Dental care
- Routine Vision/Eyeglasses
- Hearing Aids
- Long Term Care
- Fully covered/paid for Annual Physical Exam
- Services outside of USA
- Gym memberships, routine medical transportation, OTC shopping cards, hot meals delivered to your home after surgery or nursing home stay, etc.
- Do not sign up for plans that offer these services if you have retiree benefits without first asking your HR department! These plans are designed for the general public.

# Medicare Advantage
# (Part C)

# Medicare Advantage (MA)

- **Eligibility: Must have Parts A and B and live in the Service Area of Plan**
- **Enrollment: October 15 – December 7 (Annual Election Period)**
  **January 1 – March 31 (MA Open Enrollment Period)**
- **Benefits/Costs:**
  - **Covers at least what Medicare does**
  - **Many offer additional benefits (Hearing Aids/Dental/Vision, etc.)**
  - **Fixed co-payments for most services up to Maximum Out of Pocket**
  - **HMOs are most restrictive; PPOs best for snowbirds**
  - **D-SNPs are plans for those with Medicare and Medicaid.**
  - **HMOs typically require referrals to see specialists**
  - **All plans have preauthorization requirements**
  - **Many plans in NYC have no additional monthly premium**
  - **Almost all plans have no co-pay to see primary care provider**
  - **Medicare.gov will have MA plan provider network information**

# Maximum Out of Pocket (MOOP)

- Medicare Advantage (MA) plans have MOOP limit
  - Limit on Part A and Part B out of pocket costs for calendar year
    - If you reach limit, MA plan will cover 100% of Part A and Part B services for remainder of calendar year
- MOOP does NOT include:
  - MA plan premium
  - Part D drug costs
  - Non-covered services (including dental/vision)
- In-Network MOOP limit (HMO)
  - $9,350 in 2025 ($9,250 in 2026)
- In and Out of Network Combined (PPO)
  - $14,000 in 2025 ($13,900 in 2026)

Do the math when looking at making an Original Medicare vs Medicare Advantage decision.

# Part D is available with both forms of Medicare

## Original Medicare

- Purchase a **stand-alone prescription drug plan**
- Or have other **creditable** coverage via retiree benefit.

## Medicare Advantage

- **Part D is generally included,** and individual receives all Medicare benefits from one plan

# Medicare Prescription Drug Coverage (Part D)

- Optional/Voluntary/Penalty
  - 1% per month of average national premium
- 12 Available Stand-Alone Part D (PDP) Plans
  - (10 Plans in 2026)
  - Formulary and Pharmacy Network
- Enrollment Periods
  - October 15 – December 7 (AEP)
  - Special Enrollment Periods
- Part D Plan Cost-Sharing
  - Premium
  - Deductible $590 ($615 in 2026)

# 2025 Part D Changes

- New $2,000 out-of-pocket limit for Part D in 2025
  - $2,100 in 2026--can spread across monthly payments
- Medicare Prescription Payment Plan (MPPP)
  - Enroll in MPPP with Part D plan
    - Pay $0 at pharmacy for covered drugs
    - Plan bills member for monthly Part D costs
- MPPP most helpful for people with high Part D cost-sharing at beginning of year
- Reference: What's the Medicare Prescription Payment Plan?
  - https://www.medicare.gov/publications/12211-whats-the-medicare-prescription-payment-plan.pdf

# Medicare Prescription Drug Coverage (Part D)

- People enrolled in Extra Help, either because they were approved for Medicaid or a Medicare Savings Program or because they applied to the SSA for Extra Help, are assigned to a benchmark plan if they don't pick one themselves and enroll.
  - People with Extra Help who enroll in a plan other than the 2 "benchmark plans" pay a reduced premium.
  - Two stand-alone Prescription drug plans (PDP) are closing in 2026 -- Wellcare Medicare Rx Value Plus and CIGNA Rx.
  - Lowest premium for a stand-alone plan (for those without Extra Help) is $35.70 (Healthspring Assurance Rx)(Formerly Cigna Assurance Rx) and the highest is $173.60 (Humana Premier Rx Plan).
- Premiums for four of the 10 plans increased by $50 in 2026. This is reportedly due to plans seeking to reduce their costs resulting from the $2000/year out of pocket limit.

# Medicare Prescription Drug Coverage (Part D)

- **<u>TWO (2) "BENCHMARK" STAND-ALONE PDP PLANS have a FREE PREMIUM</u> for people with FULL "EXTRA HELP" (Low Income Subsidy). The two benchmark plans are *HealthSpring Assurance Rx* (formerly *Cigna Assurance)* and *Wellcare Classic.***

  - ***SilverScript Choice (*Aetna) is no longer a benchmark plan. Members of this plan who have Extra Help will be charged a premium of $57.20 if they remain in the plan in 2026. For those without Extra Help, the premium will be $116.**

- **Benchmark Premium is $58.82 in 2026, down from $72.34 in 2025.**

# Medicare Advantage/Part D Plan Terminations

- Some Medicare Advantage/Part D plans are terminating at end of 2025. Impacted members receive notice from plan by October 2
- Special Enrollment Period for members of terminating plans
  - December 8, 2025 – end of February 2026. New plan effective 1st of following month.
- Members of terminating plans who have Extra Help
  - If don't choose a new plan, will be in Original Medicare and will be assigned to a benchmark Part D plan
- Members of terminating plans who do NOT have Extra Help
  - If don't choose a new plan, will be in Original Medicare
    - With NO Part D drug coverage

# Telehealth

- Before the COVID-19 Public Health Emergency (PHE), Medicare telehealth coverage was very limited. During the PHE, telehealth coverage was temporarily expanded to allow people to receive care from their homes
- UPDATE: As of October 1, 2025, most telehealth services no longer covered under Original Medicare
  - Except for Mental health care, potentially with some requirements for in-person visits
- Note: Telehealth expansion previously set to end March 31, but was extended through September 30
  - Note: When government shutdown ends, Medicare coverage for telehealth could again be extended and coverage may be effective retroactive to October 1

# Help with Costs

## EPIC, Help/LIS, and Medicare Savings Program

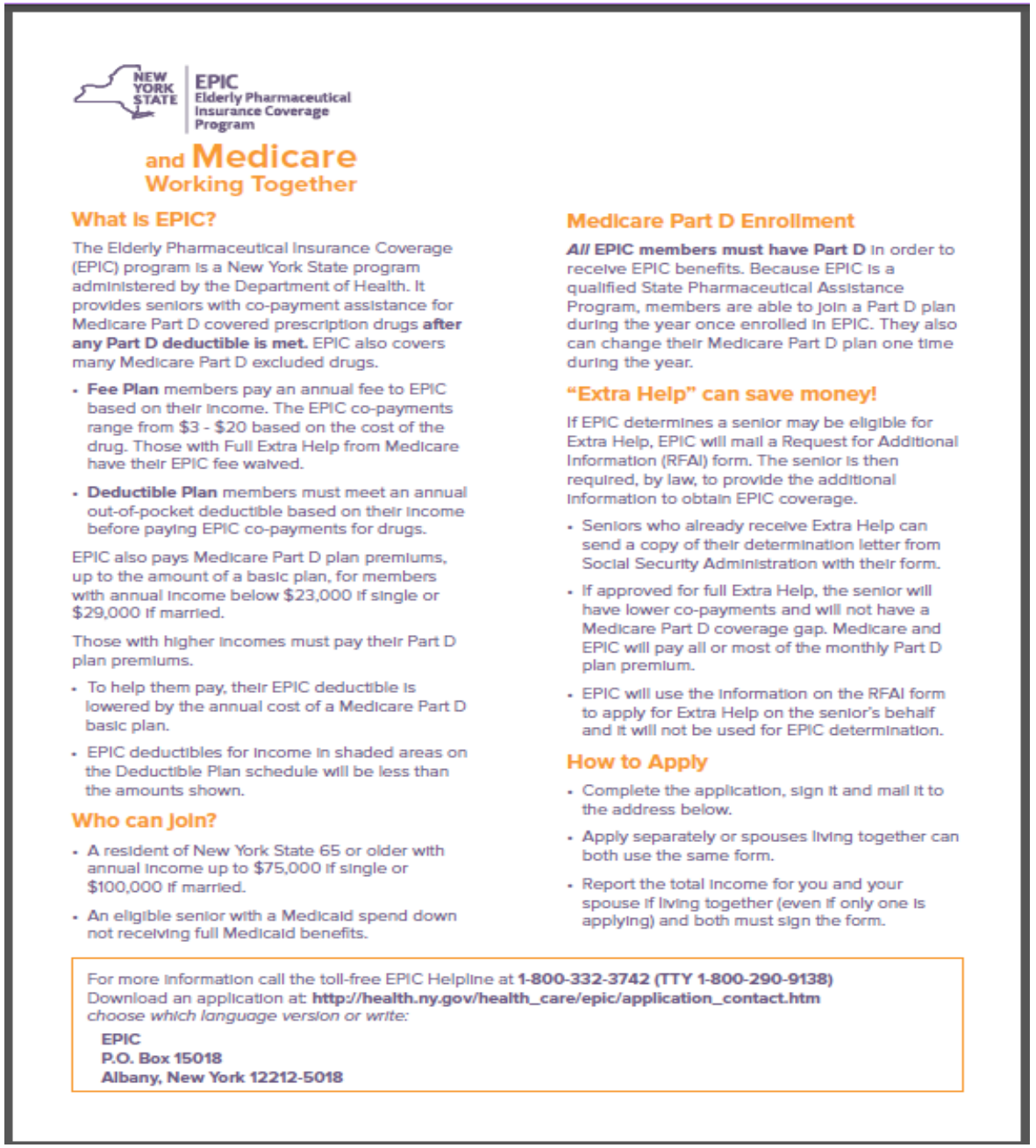
# EPIC

- **Income limit is $75,000 individual/$100,000 joint.**
- **Fee or Deductible Plan based on income amount.**
- **Supplements Part D but does not cover deductible.**
- **Maximum co-pay is $20.**
- **One-time SEP to switch Part D plans.**
- **Sign up if eligible for the deductible plan because there is no fee.**

**1-800-332-3742**

Fillable Application:

https://www.health.ny.gov/forms/doh-5080-fillin.pdf



NEW YORK STATE | EPIC Elderly Pharmaceutical Insurance Coverage Program

## and Medicare Working Together

### What is EPIC?

The Elderly Pharmaceutical Insurance Coverage (EPIC) program is a New York State program administered by the Department of Health. It provides seniors with co-payment assistance for Medicare Part D covered prescription drugs **after any Part D deductible is met.** EPIC also covers many Medicare Part D excluded drugs.

- **Fee Plan** members pay an annual fee to EPIC based on their income. The EPIC co-payments range from $3 - $20 based on the cost of the drug. Those with Full Extra Help from Medicare have their EPIC fee waived.
- **Deductible Plan** members must meet an annual out-of-pocket deductible based on their income before paying EPIC co-payments for drugs.

EPIC also pays Medicare Part D plan premiums, up to the amount of a basic plan, for members with annual income below $23,000 if single or $29,000 if married.

Those with higher incomes must pay their Part D plan premiums.

- To help them pay, their EPIC deductible is lowered by the annual cost of a Medicare Part D basic plan.
- EPIC deductibles for income in shaded areas on the Deductible Plan schedule will be less than the amounts shown.

### Who can join?

- A resident of New York State 65 or older with annual income up to $75,000 if single or $100,000 if married.
- An eligible senior with a Medicaid spend down not receiving full Medicaid benefits.

### Medicare Part D Enrollment

***All* EPIC members must have Part D** in order to receive EPIC benefits. Because EPIC is a qualified State Pharmaceutical Assistance Program, members are able to join a Part D plan during the year once enrolled in EPIC. They also can change their Medicare Part D plan one time during the year.

### "Extra Help" can save money!

If EPIC determines a senior may be eligible for Extra Help, EPIC will mail a Request for Additional Information (RFAI) form. The senior is then required, by law, to provide the additional information to obtain EPIC coverage.

- Seniors who already receive Extra Help can send a copy of their determination letter from Social Security Administration with their form.
- If approved for full Extra Help, the senior will have lower co-payments and will not have a Medicare Part D coverage gap. Medicare and EPIC will pay all or most of the monthly Part D plan premium.
- EPIC will use the information on the RFAI form to apply for Extra Help on the senior's behalf and it will not be used for EPIC determination.

### How to Apply

- Complete the application, sign it and mail it to the address below.
- Apply separately or spouses living together can both use the same form.
- Report the total income for you and your spouse if living together (even if only one is applying) and both must sign the form.

For more information call the toll-free EPIC Helpline at **1-800-332-3742 (TTY 1-800-290-9138)**
Download an application at: **http://health.ny.gov/health_care/epic/application_contact.htm**
*choose which language version or write:*

**EPIC**
**P.O. Box 15018**
**Albany, New York 12212-5018**

# EPIC and Drug Manufacturers

- EPIC supplements Part D
  - Only for drugs covered under Part D
    - But drug manufacturer must also participate with EPIC
- Bausch Health stopped participating as of Sept. 30, 2025

  Includes Diazepam, Pepcid, Wellbutrin, and other medications--includes Diazepam, Pepcid, Wellbutrin, and other medications
- Merck stopped participating with EPIC as of July 30, 2025
    - Includes Januvia and other medications
- GlaxoSmithKline previously stopped participating with EPIC as of July 2023

# (Part D) Extra Help/LIS

- Automatic with Medicaid/Medicare Savings Program
  - Otherwise, need to apply to Social Security for LIS
    - Income Limit
      - $1,976 Individual ($2,664 for couples)
    - Asset/Resource Limit
      - Up to $17,600 ($35,130 for couples)
      - Co-Pays
      - $4.90 Generic/$12.15 Brand-Name
      - $5.10/$12.65 (2026)
      - Special Enrollment Period (SEP)
      - SEP allows one election per month BUT only to enroll in stand-alone Part D plan (PDP), NOT to enroll into MA plan

# Medicare Savings Programs

- No resource/asset limit.
- Automatic Part D extra help.

  - Qualified Medicare Beneficiary (QMB)
    - $1,820/individual per month.
    - $2,453/couple per month.
    - Covers Part B monthly premium, Parts A and B coinsurance and deductibles, most Part D costs.

# Medicare Savings Program

## – Qualified Individual (QI)

- $2,446/individual per month.
- $3,299/couple per month.

- Covers Part B monthly premium and most Part D costs.
- Automatic Part D Extra Help.
- Can use spend down strategies to lower qualifying income.

# HOW CAN I GET HELP?

**WWW.MEDICARE.GOV**

**1-800-MEDICARE**

**HIICAP—212-244-6469/212-AGING-NY**

# HIICAP/SHIP

- **Medicare Questions? Call HIICAP/SHIP**
  - **212-AGING-NYC (212-244-6469)**
  - **Outside of NYC 1-800-701-0501**
  - **Outside of New York State**
    - https://www.shiphelp.org/ - **SHIP Locator**
- **Introduction to Medicare webinars:**
  - https://www.eventbrite.com/e/medicare-orientation-understand-your-costs-and-choices-in-medicare-tickets-116307108693
- **Medicare Advantage Plan Panel Marketing Meetings:**
  - **In-Person – Manhattan, Bronx and Brooklyn**
    - **Schedule and Registration:**
      - MEvent Registration - Google Forms

# QUIZ—TRUE OR FALSE?

**You're Automatically Enrolled In Medicare.**

**Medicare Is Free & Covers all of my medical expenses.**

**You Can Only Receive Medicare From The Government.**

**You're Stuck With Your Medicare Plan Once You Choose It.**

**Medicare Advantage Plans Are Expensive.**

**If Your Spouse Has Medicare, You're Automatically Enrolled.**

**You Need A Referral To See A Specialist With A Medicare Advantage Plan.**

**If You're Still Working At 65, You Don't Have To Sign Up For Medicare.**

**Your Income Level Affects Whether You Can Get Medicare.**

**I can enroll in Medicare whenever I want.**

**Medicare will notify me when it's time to enroll.**

**Medicare Advantage and Medicare Supplement plans are the same.**

**Medicare and Medicaid are the same thing.**

**Medicare costs the same for everyone.**

**I can't sign up for Medicare because of my health.**

# Questions?