



Mystified by Your Medicare Options?

You're not alone!

*2026 facts & figures in plain
terms to help you make
decisions that are right for you.*

Welcome!

**Thank you for
joining me
today!**

INSERT YOUR HEADSHOT, NAME,
TITLE CREDENTIALS, COMPANY
INFO, CONTACT INFO IN THIS
SPACE

Many thanks to our hosts!

Managing Health Care On Your Own Can Feel Overwhelming

We are board-certified Health Care Managers who partner with our clients to ensure their healthcare is fully informed, streamlined, and mindfully managed.

**For confident decisions.
For peace of mind.**

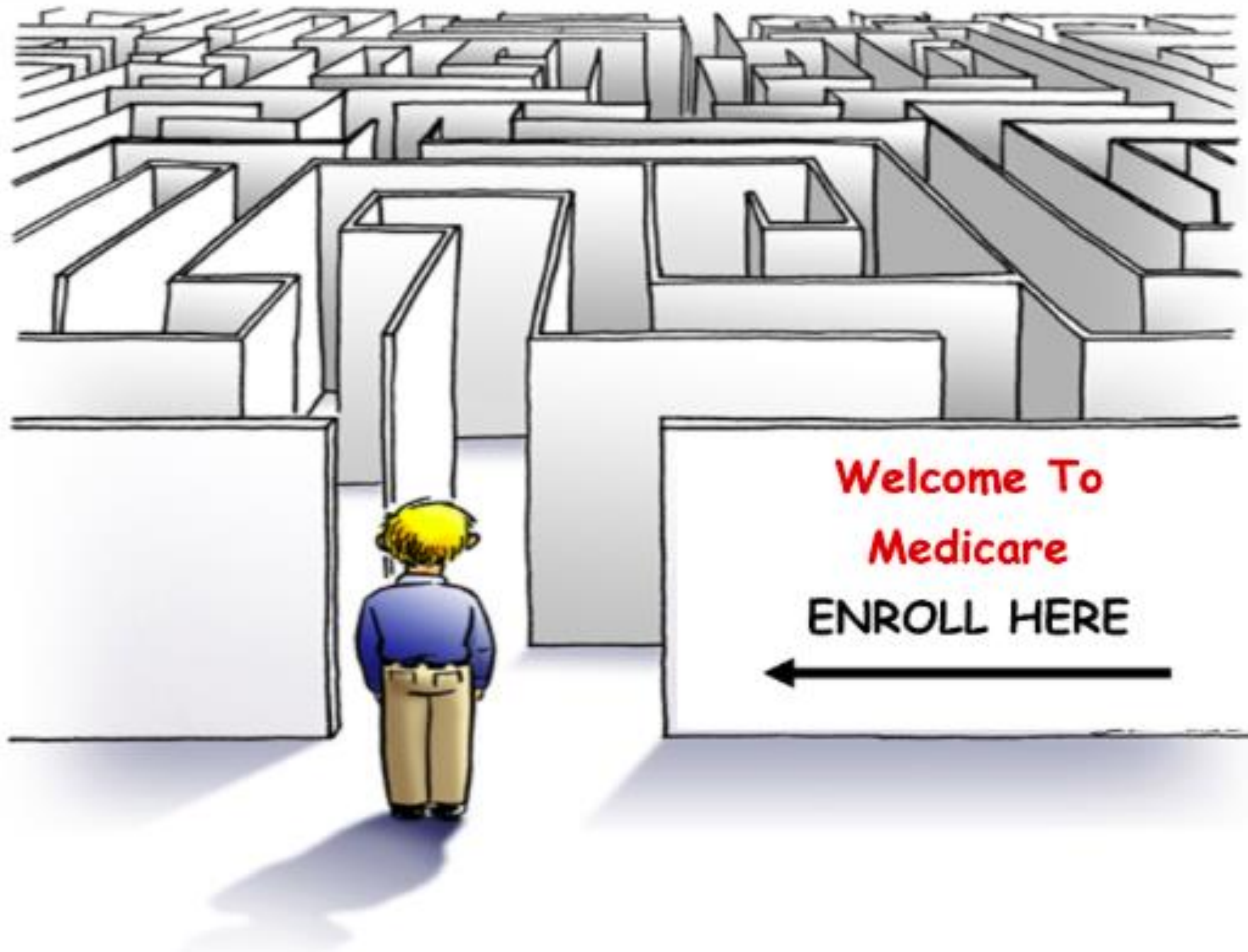
- We coordinate care and communication among doctors
- Accompany to doctor appointments
- Research doctors, treatments, 2nd opinions
- Get answers about insurance benefits, denials, appeals and bills
- Coordinate and guide end-of-life planning, document preparation



Today's Plan: Our Next Hour Together

- Key issues and details to consider in your open enrollment choices
- Changes to plans for 2026
- Key questions to ask of your insurance broker, or to research yourself
- Tips and information on little known features in Traditional Medicare and Medicare Advantage
- Then, Q&A – Let's talk!

Note: We do not sell insurance nor have any affiliation with the insurance industry.



A Few Background Details

First steps for straightening out the maze

Fall Open Enrollment



October 15th - December 7th

- You may switch between Original Medicare and Medicare Advantage – or vice versa
- You may switch to a different Medicare Advantage Plan
- You may switch to a different Part D plan
- **Coverage starts January 1**

Fall Open Enrollment is a time to consider...



Is your current plan meeting your health and budget needs?

Time to look at any cost and benefits changes for 2026!

- Medicare & You Handbook. Watch your mail, published by the government
- Medicare Advantage/Part D:
 - Annual Notice of Change (ANOC) and/or
 - Evidence of Coverage (EOC)

First, Know the The Medicare “Parts”

Original Medicare From the Government

Part A

Hospital Insurance

Part B

Medical Insurance



Part D

Prescription Drug Plan

(buy from an insurance company)

Supplement Plan

(buy from an insurance company
to cover what Medicare doesn't)

Medicare Advantage by Insurance Companies

Part C

which includes:

Hospital Insurance

Medical Insurance

Prescription Drug Plan
(in most plans, but not all)

All About Medicare

Benefits and Costs



Medicare & You 2026

The official U.S. government Medicare handbook



Medicare

Original Medicare From the Government

Recall the deductions in your paycheck?

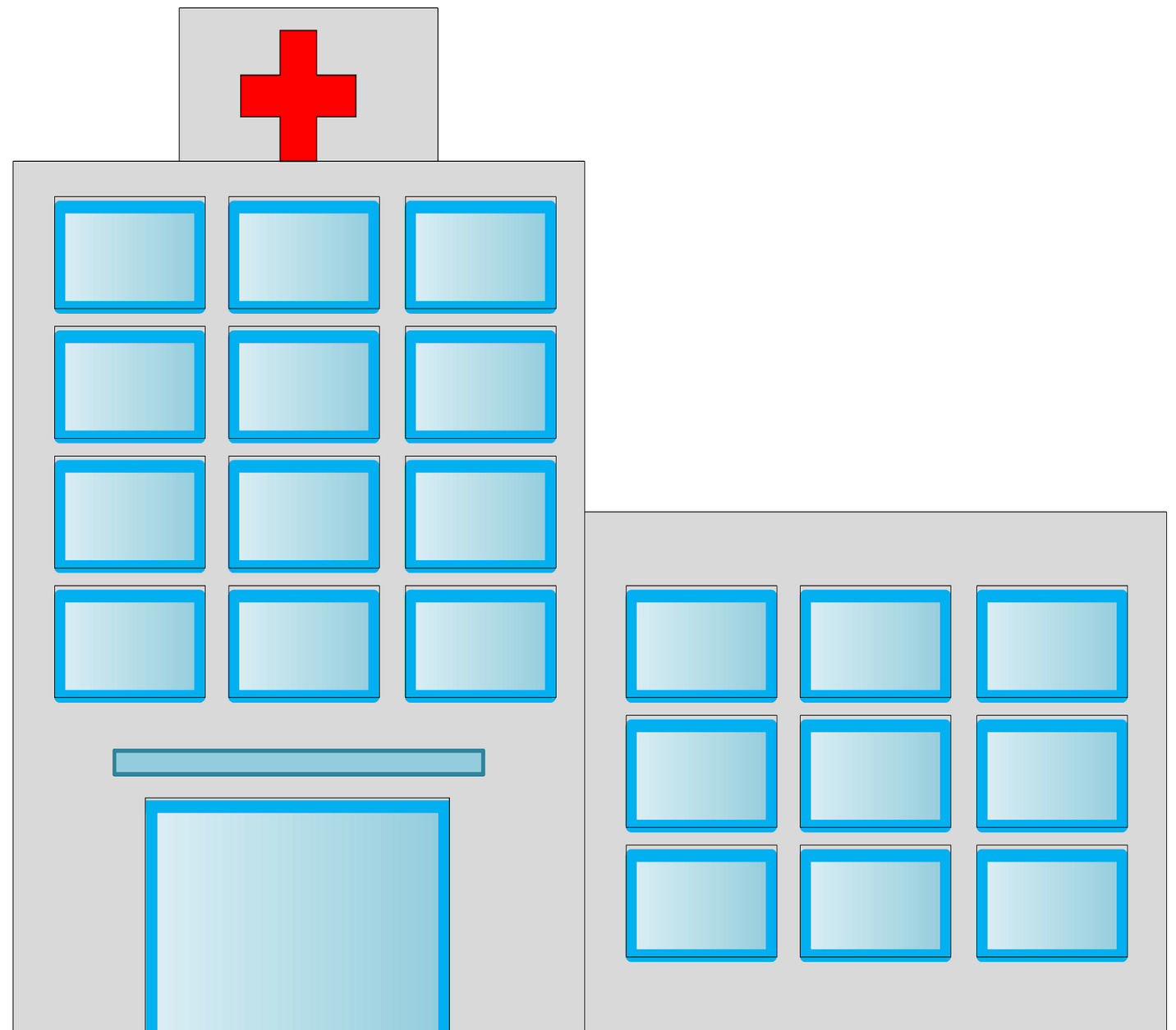
- Part A and Part B, usually deducted from your Social Security checks
- You may go to any doctor in US who accepts Medicare (over 90% do)
- No referral is needed to see specialists: it's your choice
- Need to purchase a prescription plan separately, offered by insurance companies (Part D)
- Highly recommended: purchase a supplemental policy from an insurance company (known as "Medigap")

What's Covered: Medicare Part A

- Hospital *inpatient*
- Skilled nursing facility
- Home health
- Hospice

Not all home health is covered.
Limits on type and duration
(number of days). Check policy!

Your benefit period is not a
calendar year (Jan – December): it
starts with date of hospital
admission.



What *isn't* covered by Medicare?

Long-term care (nursing home, assisted living or memory care)

Most dental care

Routine vision

Cosmetic procedures

Dentures

Hearing aids/exams

Routine foot care

Acupuncture

A “Wrinkle” ... Know Your Status During Hospital Care



Inpatient status? OR Observation status?

(Note: You can make a formal appeal if observation status denied.)



Why important?

Affects coverage for post-hospital rehab, skilled nursing care and home health



3-midnight rule: must be an inpatient for 3+ midnights for rehab, skilled nursing care or home health needed after discharge to be covered by insurance



What should you do?

Ask for inpatient status. Keep asking if necessary!



What's Covered: Medicare Part B

- Doctors' services
- Some preventive care
- Outpatient PT/OT/speech
- Durable medical equipment
- Hospital outpatient services
- Lab tests
- X-rays
- Mental health care
- Some home health, ambulance services, and prescription drugs



Premiums and Costs in 2026

	ORIGINAL MEDICARE	MEDICARE ADVANTAGE
Premium	Part B monthly base \$185	Part B + possible plan premium
Deductible	Part A (\$1676) and Part B (\$257) deductibles	Varies by plan
Copayments/Coinsurances	20% coinsurance for Part B- covered services, e.g. Daily hospital and Skilled Nursing Facility coinsurance	Varies by plan
Maximum Out-of-Pocket (MOOP)	None/No MOOP** **Supplemental plan kicks in to cover	MOOP \$9350 in-network \$14,000 for out-of-network

Want more details?
[Medicare.gov/basics/costs/medicare-costs](https://www.Medicare.gov/basics/costs/medicare-costs)



Medicare Costs for People with Higher Incomes

“IRMAA”

Income-Related Monthly
Adjustment Amount (IRMAA)

Determined from tax return
two years prior based on MAGI
(your Modified Adjusted Gross Income)

May Request a New Initial
Determination (for life changing
event, altered financial condition, outdated
information)

Income Related Monthly Adjustments

Yearly Income in 2024		What you pay in 2025	
Individual	Joint	Part B	Part D
\$106,000 or less	\$212,000 or less	\$0 + \$185	Plan Premium
>\$106,000 - <=\$133,000	>\$212,000 - <=\$266,000	\$74 + \$185	\$13.70 + Plan Premium
>\$133,000 - <=\$167,000	>\$266,000 - <= \$334,000	\$185 + \$185	\$35.30 + Plan Premium
>\$167,000 - <=\$200,000	>\$334,000 - <=\$400,000	\$259 + \$185	\$57 + Plan Premium
>\$200,000 - <\$500,000	>\$400,000 - <= \$750,000	\$406.90 + \$185	\$78.60 + Plan Premium
>\$500,000 and above	>\$750,000 and above	\$443.90 + \$185	\$85.80 + Plan Premium

All About Supplemental Plans that go with Medicare

Benefits and Costs

Supplement Plans ("Medigap")

Medigap Benefit	Plan A	Plan B	Plan C	Plan D	Plan F*	Plan G*	Plan K	Plan L	Plan M	Plan N
Part A coinsurance and hospital costs up to an additional 365 days after Medicare benefits are used	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part B coinsurance or copayment	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓ ^{****}
Blood benefit (first 3 pints)	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Part A hospice care coinsurance or copayment	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Skilled nursing facility care coinsurance	✗	✗	✓	✓	✓	✓	50%	75%	✓	✓
Part A deductible	✗	✓	✓	✓	✓	✓	50%	75%	50%	✓
Part B deductible	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗
Part B excess charge	✗	✗	✗	✗	✓	✓	✗	✗	✗	✗
Foreign travel emergency (up to plan limits)	✗	✗	80%	80%	80%	80%	✗	✗	80%	80%
Out-of-pocket limit**	N/A	N/A	N/A	N/A	N/A	N/A	\$7,060 in 2024	\$3,530 in 2024	N/A	N/A

Note: Plan C & Plan F aren't available if you turned 65 on or after January 1, 2020, and to some people under age 65. You might be able to get these plans if you were eligible for Medicare before January 1, 2020, but not yet enrolled. [Learn more about who can buy this plan.](#) ⓘ

All About Drug Plans that go with Medicare

Prescription Drug Plans (Part D)





Part D

Prescription Drug Plans

- May buy through private insurance companies (wise to shop around)
- May buy a stand-alone drug plan to go with your Medicare policy
- Expect preferred, in-network pharmacies
- Expect the covered drugs and rates to change each year... shop around, match your meds to each plan!

How Your Drug Costs Will Be Covered

MOOP amount (Maximum Out-of-Pocket)
you will pay for covered drugs: \$2100 in 2026.

Your Deductible

The maximum deductible: \$615, up from \$590 in 2025.

***Note:** Must pay deductible before plan starts to share costs.*



How it works

You pay for your prescriptions, and your costs are tallied towards the \$2,100 cap.

Once you hit \$2100, you won't pay for any more covered drugs for 2026.

What doesn't count?

Your monthly Part D premiums don't count toward the out-of-pocket maximum.

The Medicare Prescription Payment Plan (MPPP)

Important details!

Have high drug costs at the start of the year ? (due to your deductible)

- You *may* be able spread those payments out over the year.
- Contact the drug insurance company to apply – call, or enroll on its website.



Inflation Reduction Act

In 2025, 20 more drugs added with lower prices due to price negotiations since 2020

Eliquis, for preventing strokes and blood clots

Jardiance, for diabetes and heart failure

Xarelto, for preventing strokes and blood clots

Januvia, for diabetes

Farxiga, for chronic kidney disease

Entresto, for heart failure

Enbrel, for arthritis/other autoimmune conditions

Imbruvica, for blood cancers

Stelara, for Crohn's disease

Fiasp and **NovoLog** insulin products

*Insulin remains capped at \$35/mo. and Shingrex , and other vaccines remain free. (Started in 2023)



Part D Medicare Plan Finder

Explore your Medicare coverage options

Pick your 2026 plan from Oct. 15 - Dec. 7.

 [Find out what you can do during Open Enrollment.](#)



Find Medicare health & drug plans

 Use your account

Save time by logging in

- Get a summary of your current coverage
- Use your saved drugs & pharmacies to compare plan costs

Log In

Don't have an account? [Create one.](#)

 Continue without logging in

Choose the year you need coverage and enter your ZIP code:

COVERAGE FOR

☒ 2026 ☐ 2025

ZIP CODE

Continue

- Have a list of your medications on hand to enter (name, dose)
- Know the pharmacies where you would like to get your prescriptions filled.
- Search for plans using your zip code.

Final Fine Points Prescription Plans

- Based on **where you live**
- **If you move** to another area, you must **call your plan** to see if you can keep it or if you must change it



All About Medicare Advantage Plans (the alternative to Medicare)

Benefits and Costs

Medicare Advantage Plans

- *Denial rates are high compared to original Medicare and Supplemental "Medi-Gap" Plans.*
- *Many hospitals and health care systems are dropping Advantage plans or are considering.*

Source: Journal American Medical Assn.
<https://jamanetwork.com/journals/jama-health-forum/fullarticle/2815743>

Private health insurance plans

Include Part A, Part B, and usually Part D

No need for MediGap/Supplemental

May have to use in-network providers

May need a referral to see a specialist

May need prior authorization

Cover same benefits as Original Medicare but different cost-sharing and rules

May cover additional services

IF THERE IS A HOSPITAL YOU PREFER, DOUBLE CHECK WITH THEM ABOUT THEIR POSITION ON THE ADVANTAGE PLAN/S YOU MAY BE CONSIDERING.

Assess your Needs
Know your Rights and Protections

Questions to Ask Yourself

Do I travel often?
Snowbirds?

How often do I see
my PCP and
specialists?

What type of
insurance do my
doctors accept? In-
network? Accepting
new patients?

What health care
services do I
use/need?

What would my
costs be with each
type of plan?

How well does this
plan cover my
prescription drug
costs?



When you meet with insurance agents...

Read	Read what you sign
Don't sign	Don't sign blank applications
Bring	Bring someone with you
Ask	Ask questions and take notes
Get	Get a second visit/conversation
Don't pay	Don't pay cash or write a check made out to agent
Verify	Verify licensed agent
Pause	Read your policy. <i>You have 30 days to change your mind.</i>



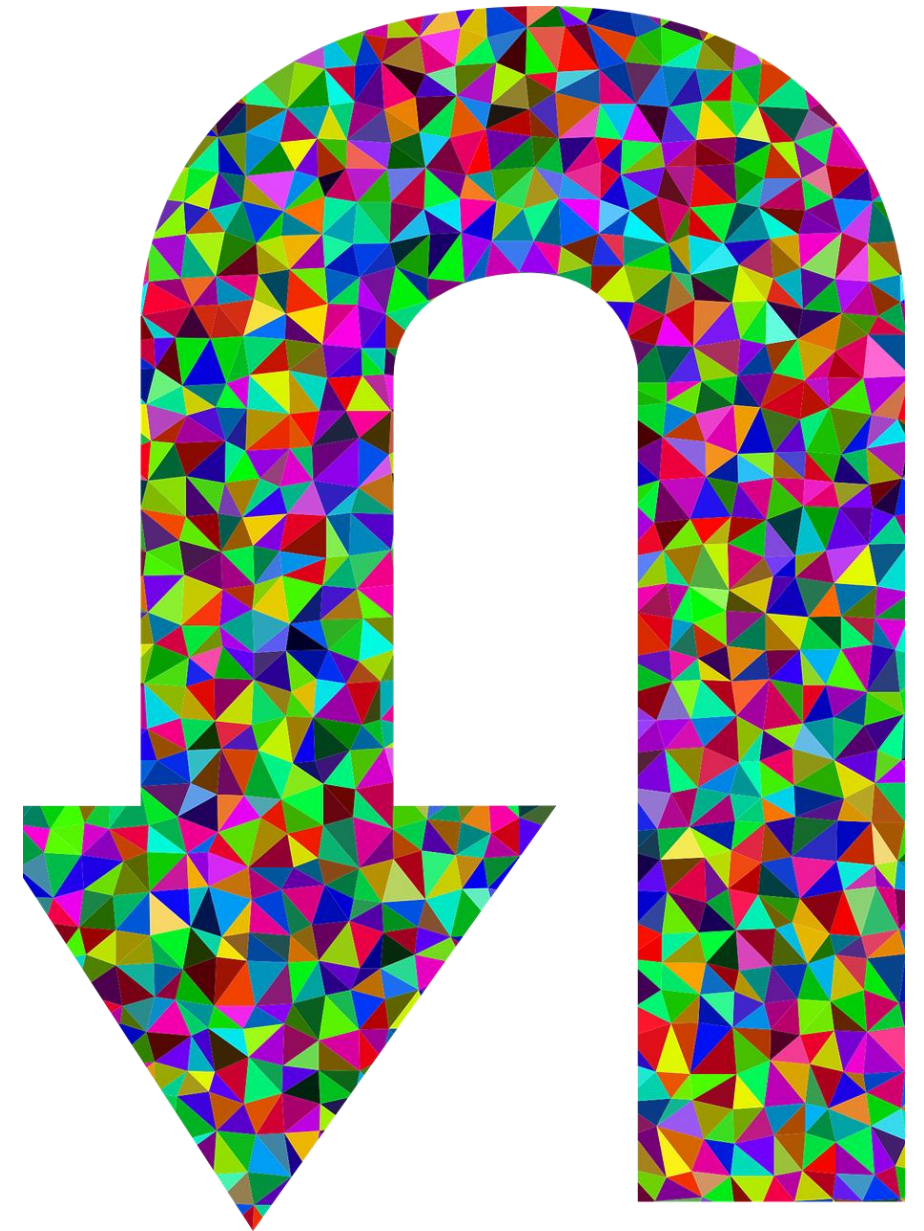
The Rules to Protect You

for Medicare Advantage
and Part D plans.

- No uninvited calls, emails, or visits
- Can't ask for your personal information
- No gifts or prizes > \$15
- No comparisons by name
- No "Medicare Endorsed"

Changed Your Mind?

- Medicare Advantage Open Enrollment Period:
Can change between January 1 – March 31
- If already enrolled in a Medicare Advantage plan, you may switch to another Medicare Advantage plan or to Original Medicare,
October 15 – December 7
- May add or drop Part D, prescription plan
- Check into your MediGap protections/policies.
Contact a SHIP* counselor! Or a reputable independent agent.



A Potential Wrinkle

Want to switch from
Medicare Advantage to
Original Medicare?

**May not qualify for a
Supplemental (Medi-Gap)
plan if you have a pre-
existing condition.**

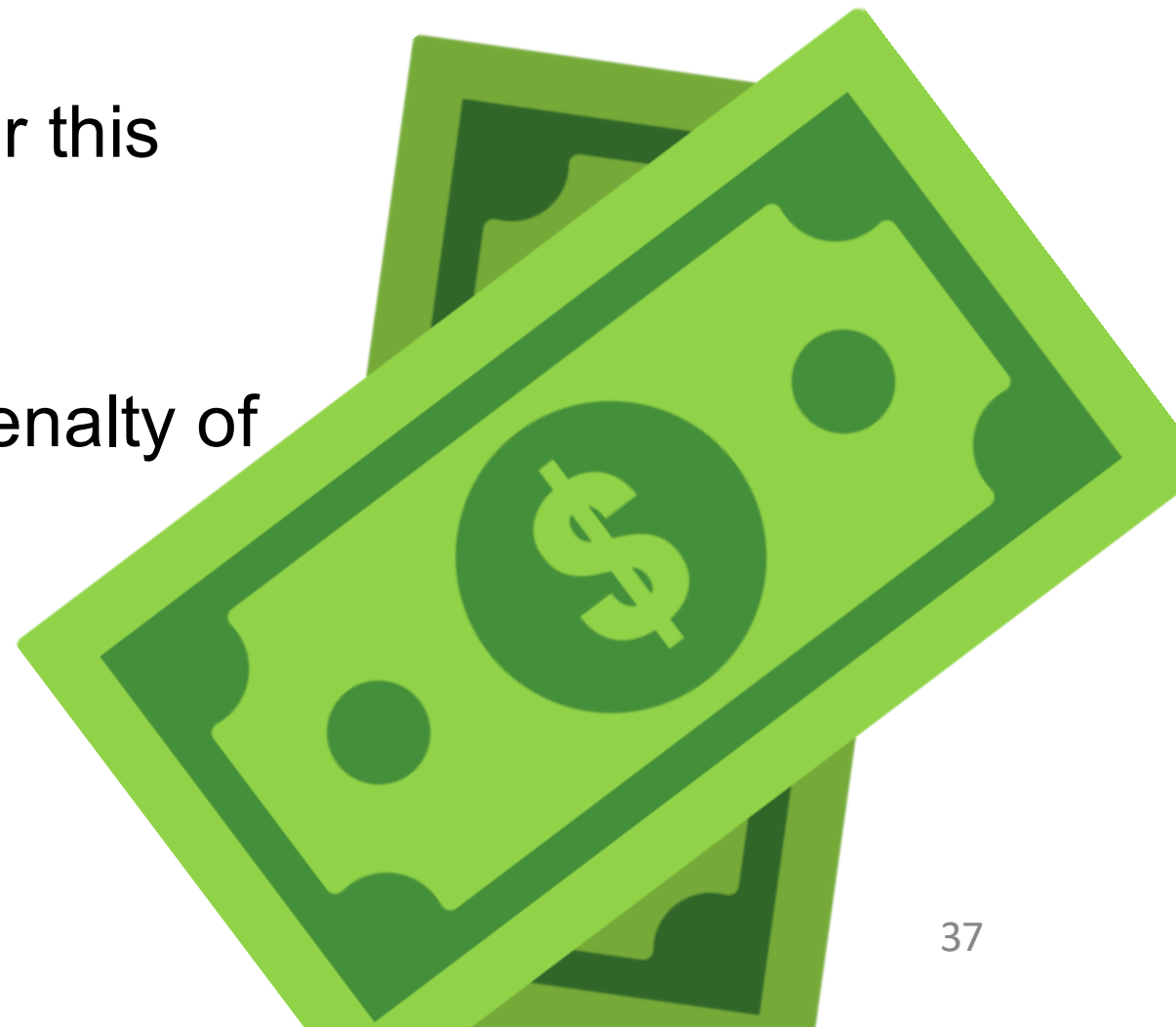


Finally... Fine Points to Know

If you don't get Part B coverage, age 65...

- Either through Medicare or an Advantage Plan, **and**
- You don't have any other insurance for this coverage (i.e., an employer plan)

You will incur a lifetime late enrollment penalty of 10% per year.



Another Fine Point to Know!

In most states, if you don't get a Supplemental/"Medigap" plan when you **first** enroll in Medicare at age 65...

- *May* not be able to get one later
- *May* get one, but charged more
- *May* be denied coverage for pre-existing conditions



Where to Find Good Information

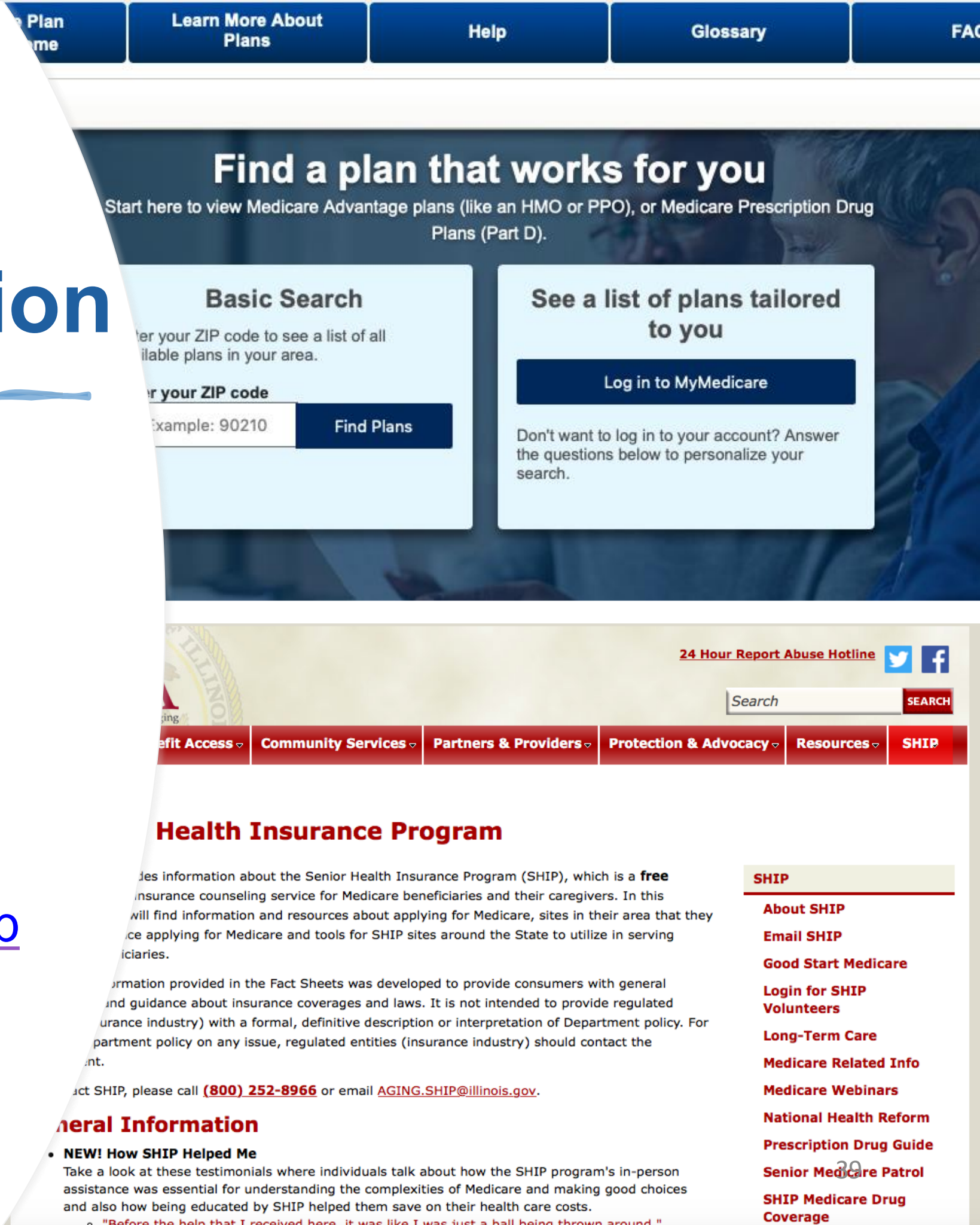
Medicare Plan Finder

www.medicare.gov

Senior Health Insurance Program/"SHIP"

www.illinois.gov/aging/ship

800-252-8966



Let's Talk! Questions? Ideas?



INSERT YOUR HEADSHOT, NAME,
TITLE CREDENTIALS, COMPANY
INFO, CONTACT INFO IN THIS
SPACE

Thank you!

- If this information was helpful to you, kindly spread the word about today's presentation with your friends.
- I speak on many other health care topics, too!
(In person or ZOOM!)
- Just call or drop a note!

