

Revised for 2026

DEMYSTIFYING MEDICARE

The “soup-to-nuts” version
(particularly for New York State)

Intro



Julie Woodward
(Celebrating one of her senior birthdays with Go-Green-Save-the-Planet kind of hair)

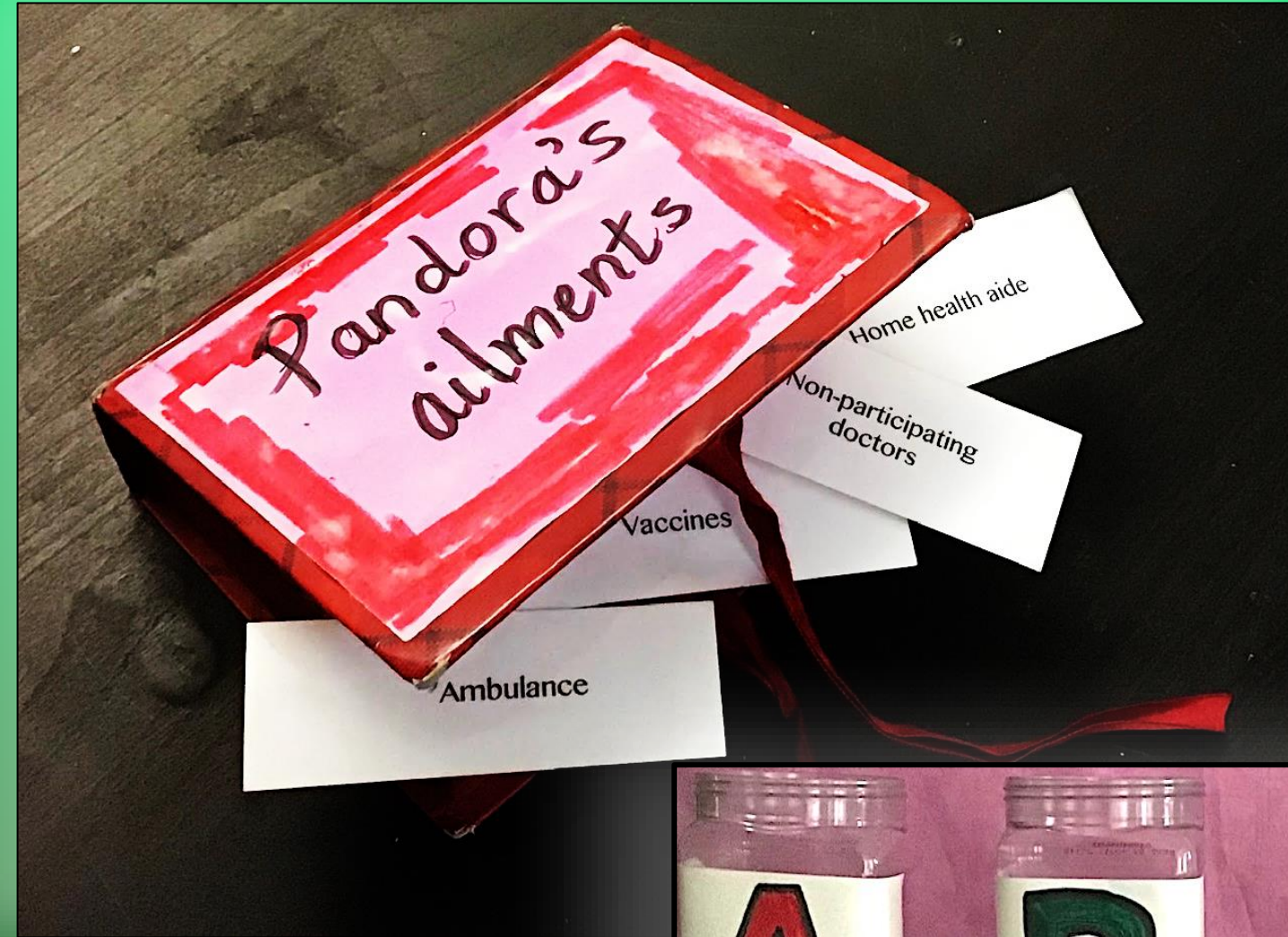
We'd like you to know ...

This program has been prepared in partnership with the Westchester Library System and Westchester County's Department of Senior Services and Programs.

For individual help from HIICAP-certified counselors, please call our regional helpline at (914) 813-6100.

Medicare can be reached at 1-800-MEDICARE (633-4227) any time.

The briefest possible history of Medicare

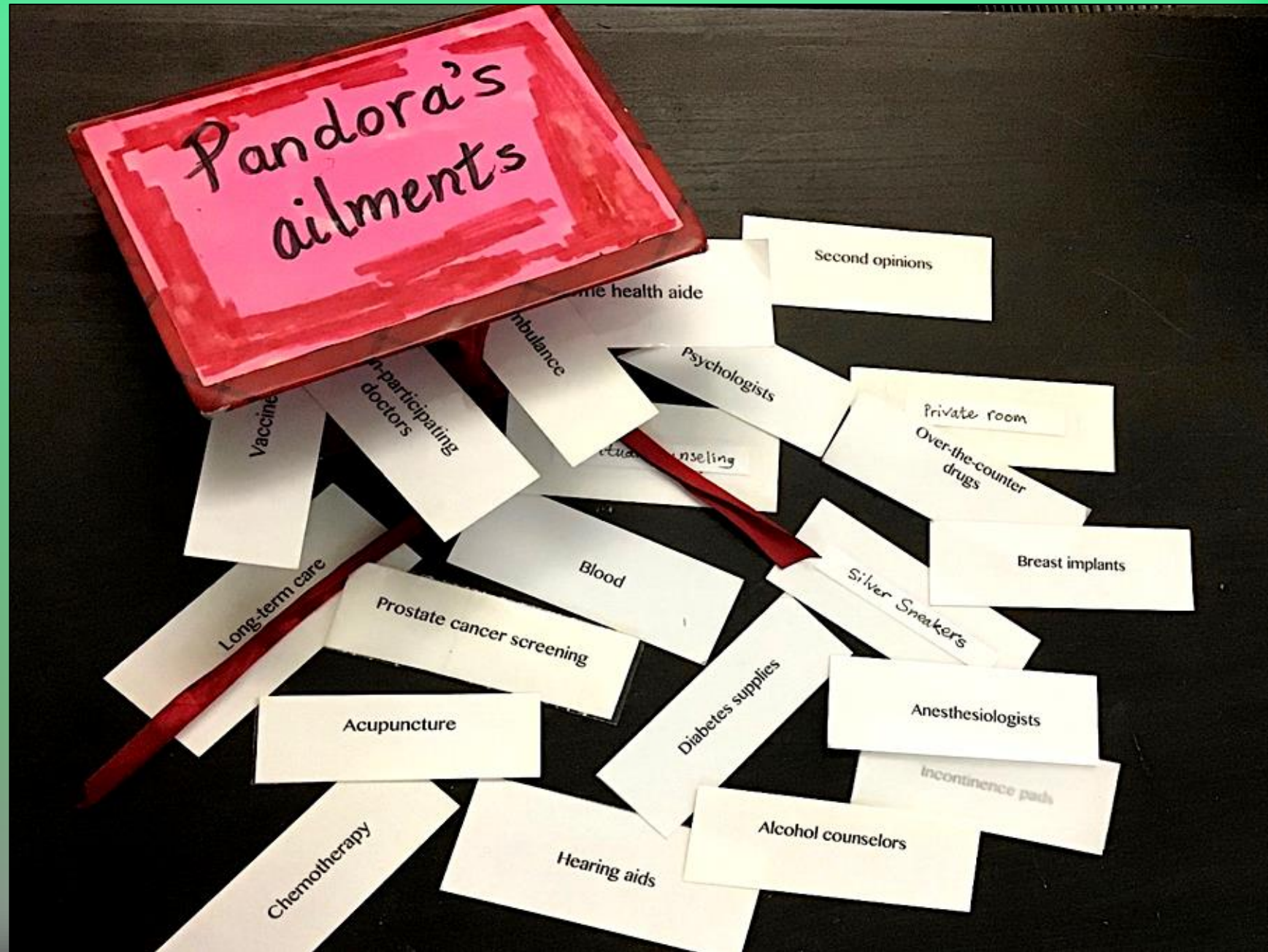


The Game

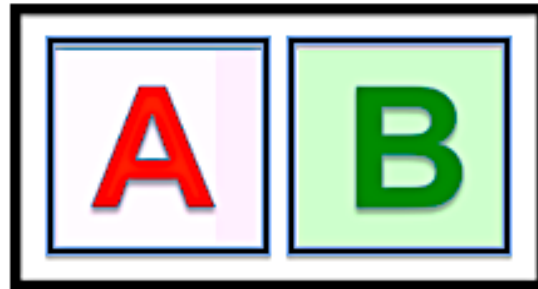


Ailments
not explained
in the Audio

*Download an
explanatory .pdf
from the webpage*



"A la carte"



+

Supplement
(Medigap)

+



Complete dinner



+

Extras

[Part C]

Medicare Advantage Plans

(HMOs, PPOs, etc.)

Medigaps (side 1)

SAMPLE only

Please go to the handout for the version of this planfinder used in the audio



2025 Medigap plan benefits

For plans sold on or after June 1, 2010

	A	B	C	D	F*	G*	K**	L**	M	N
Hospital coinsurance Coinsurance for days 61-90 (\$419) and days 91-150 (\$838) in hospital; Payment in full for 365 additional lifetime days	*	*	*	*	*	*	*	*	*	*
Part B coinsurance Coinsurance for Part B services, such as doctors' services, laboratory and x-ray services, durable medical equipment, and hospital outpatient services	*	*	*	*	*	*	50%	75%	*	Except \$20 for doctors visits and \$50 for emergency visits
First three pints of blood	*	*	*	*	*	*	50%	75%	*	*
Hospital deductible Covers \$1,676 in each benefit period	*	*	*	*	*	*	50%	75%	50%	*
Skilled nursing facility (SNF) daily coinsurance Covers \$209.50 a day for days 21-100 each benefit period			*	*	*	*	50%	75%	*	*
Part B annual deductible Covers \$257 (Part B deductible)			*	*						
Part B excess charges benefits 100% of Part B excess charges. Under federal law, the excess limit is more than Medicare's approved amount when provider does not take assignment; under New York State law, the excess limit is 5% for most services.					*	*				
Emergency care outside the U.S. Emergency care costs during 60 days of each trip, after an annual deductible of \$250, up to a lifetime benefit of \$50,000.			*	*	*	*			*	*
Coinsurance for Part B preventive care services after Part B deductible has been paid	*	*	*	*	*	*	*	*	*	*
Hospice care Coinsurance for respite care and other Part A-covered services	*	*	*	*	*	*	50%	75%	*	*

2026 deductible \$2,950 (out-of-pocket max for Plan K: \$8,000 and Plan L: \$4,000)

Note: Plans C and F are only available to you if you became eligible for Medicare before January 1, 2020.

* Plans F & G also offer a high-deductible option. You pay a \$2,870 deductible in 2025 before Medigap coverage starts.
** Plans K and L pay 100% of your Part A and Part B copays after you spend a certain amount out of pocket. The 2025 out-of-pocket maximum is \$7,220 for Plan K and \$3,610 for Plan L.

Plans E, H, I, and J stopped being sold June 1, 2010. If you bought a Medigap between July 31, 1992 and June 1, 2010, you can keep it even if it's not being sold anymore. Your benefits are different from what's on the chart above.

This chart doesn't apply to Massachusetts, Minnesota and Wisconsin. Those states have their own Medigap systems.

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I'll replace this chart when the MRC makes the 2026 update available.

Medigaps (side 2)

SAMPLE only

Please go to the handout for the version of this planfinder used in the audio.

(A link for Medigaps in Connecticut is also on the webpage.)

GO TO: <https://myportal.dfs.ny.gov/web/guest-applications/medicare-monthly-premiums> (Jan 2, 2026)
 All of Westchester County localities will come out the same. Check for changes each month.
 The amounts in the chart are **PER MONTH** and of course, **PER PERSON**.

Enter your zipcode (this is Ardsley's) 10502 Search County: Westchester

Careful: these prices might not match the audio discussion, as prices can change from month to month. Use the link above for today's prices.

Insurer	Plan A	Plan B	Plan C	Plan D	Plan F	Plan HDF	Plan G	Plan HDG	Plan K	Plan L	Plan M	Plan N
Aetna Life Insurance	\$318.21	\$362.44			\$422.90		\$406.26					
Bankers Conseco	\$413.53	\$676.14			\$912.98	\$75.69	\$840.28	\$75.69	\$139.97	\$322.45	\$446.64	\$523.54
EmblemHealth Plan	\$248.96	\$344.07	\$423.98		\$758.71	\$88.23	\$432.09	\$67.69				\$314.77
			\$500.00	\$492.00	\$566.00	\$137.00	\$461.00	\$91.00	\$175.00	\$311.00		\$450.00
			\$528.79		\$539.53	\$118.44	\$647.27	\$111.19	\$226.75	\$323.93		\$458.83
			\$512.82	\$539.03	\$516.15		\$511.36				\$526.10	
			\$527.16	\$484.41	\$530.22		\$444.83		\$242.79	\$360.41	\$443.79	\$417.31
			\$443.00		\$419.00		\$372.50		\$113.75	\$230.75		\$299.00

F: \$ _____

G: \$ _____

\$ _____

- Deductible 2 8 3

\$ _____

G: \$ _____

N: \$ _____

\$ _____

- 10 copays 2 0 0

\$ _____

N: \$ _____

HDG: \$ _____

\$ _____

HDG: \$ _____

+ Deductible 2 9 5 0

If you max out \$ _____

- Full G \$ _____

\$ _____

...with these options, you must pay for Medicare-covered costs (coinsurance, copayments, and deductibles) up to the deductible amount of \$2,950 in 2026 before your policy pays anything. Plans C and F are not available to those newly eligible for Medicare on or after Jan. 1, 2020.

Medicare's Planfinder for MAPs and stand-alone Part D plans (rev. August 2025)

Go to [Medicare.gov](https://www.medicare.gov) and click the button "Find health & drug plans". Make sure to click the correct year it gives you a choice.

Note: Medicare makes changes to the planfinder from time to time, especially at the end of the year.

Then log in with an existing account, create an account, or click Continue without logging in. If you do log in, the next screen may tell you "You have an employer plan." If instead you have a marketplace plan, the next screen has lots of info links about your current arrangements (your Medicare card, providers, update saved pharmacies, pay premium, edit account settings, etc., including details about the plan itself). Even from "Welcome" screen you can make changes to some things (e.g., your pharmacies, drug list).

If you don't log in, you won't be able to save your drug list, but that might be the best option on a public computer. Enter your zip code, hit **Continue**, then the type of coverage you're looking for. Pick one of the first two (MAPD or Drug Plan), then **Find Plans**. Answer these two questions:

Do you get help with costs from one of these programs? Select from the drop-down menu, then click **Next**.

Do you want to see drug costs when you compare plans? Click **Yes** in most cases, then click **Next**.

Add your prescription drug(s): Start typing drug name and when it appears, click **Add Drug**. If you asked for a brand name, it will let you know if a generic is available and asks if you'd prefer it. (Add both the brand and the generic separately if you want to compare both; it will price out both, then add them together for a final cost, so be careful of that, since you don't want both of them at the same time.) Enter dosage, quantity and frequency, then click **Add to My Drug List**. Look for **Remove drug** or **Edit drug** to change things you've just added. (If logged in, there's an option to "Add recently filled drugs.") Click **Add Another Drug** or **Done Adding Drugs**. **Warning:** if you're not logged in, add drugs pretty quickly so you don't get kicked off.

Note: When I created my account, Medicare showed my drug history claims for the last year. If this is still happening, select the ones you want to keep, and add any others. This list will be saved after you log out. If you haven't included all of them, there's a link to access to your claim history: put the missing ones in.

Choose up to 5 pharmacies: Click the first box for "Mail-order Pharmacy," choose distance from the drop-down, then up to 4 others from the list. You'll see them get added to the banner at the bottom. Click the "Continue" and the next screen lists the plans in your area, defaulting to "Lowest drug + premium cost" in the drop-down menu of options.

Other links on this screen include changing your zipcode and plan type, and adding filters: **Plan benefits**, **Insurance Carrier**, **Drug Coverage**, **Star Ratings**, plus some others at the **View all filters** link. Details for each plan listed include: name of plan, star rating, monthly premium, yearly drug & premium cost, deductible, drug deductible, In- & Out-of-pocket maximum, "extras," and copays/co-insurance.

Click on **View drugs & their costs** for pricing comparisons and a lot of detailed information.

Scroll down and use the buttons for many more drugs and benefits details, including preferred pharmacies, tiering, coverage gap, drug restrictions (quantity, frequency, step therapy) and all the "extras."

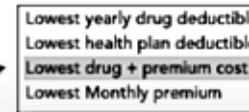
[+ View more drug coverage](#)

[+ View more extra benefits](#)

Back in the previous screen, click the "Add to compare" box for up to 3

Add to compare

plans, then the button at the bottom right corner of the screen to lay these out side-by-side. Major comparison categories are: **Overview**, **Benefits & Costs**, **Extra Benefits**, and **Drug coverage & Costs**. Print using the icon at the top right corner of the screen. At the bottom of each plan are the "Enroll" and "Plan Details" buttons.



MVP Medicare Secure Plus with Part D (HMO-POS)

MVP HEALTH CARE
Star rating: ★

MONTHLY PREMIUM: \$96.20

TOTAL DRUG COST: \$782.66

OTHER COSTS: \$0.00 Health deductible, \$0.00 Drug deductible, \$6,000 In-network

COPAYS/COINSURANCE: Primary doctor: \$0 copay, Specialist: \$40 copay

DRUGS: Includes drug coverage, View drugs & their costs

SAMPLE only
Please go to the handout for the version of this planfinder used in the audio

Planfinder for MAPs and Part D

A	Premium	Deductible	Co-pay/Co-ins.	Penalty
2026	10-yr work history NO	HOSPITAL <input type="checkbox"/> \$1,736	Days 1-60: <input type="radio"/> 0 61-150: some after: full	\$434 \$868
	if Less YES	SNF <input type="radio"/> 0	Days 1-20: <input type="radio"/> 0 21-100: some after: full	\$217
		HOME H.C. <input type="radio"/> 0	0	YES
		HOSPICE <input type="radio"/> 0	minor amounts	if you're not premium-free

Costs in Original Medicare Part A

2026	Premium	Deductible	Co-pays, Co-ins.	Penalty
B	Normal: \$202.90/month Higher (IRMAA): MORE	\$283	20%	YES
D	Normal: PLAN'S Higher: MORE	to \$615	varies	YES

Costs in Original Medicare Parts B & D

Enrolling

Caution:

Medigaps are regulated by the states.

Medigaps discussed in this presentation are operating in accordance with NYS regulations.

SAVE MONEY

MEDICAL

MEDICAID

MEDICARE
SAVINGS
PROGRAM

DRUGS

EXTRA
HELP

EPIC

DISCOUNT
CARDS

DRUG
MFRs

For MSPs, call DSPS
at (914) 813-6448

EXTRA
HELP
Information
and
online application
[Click here](#)

EPIC
Application
[Download a pdf](#)
or
[Fill-in version](#)

MEDICARE HEALTH INSURANCE

YOUR NAME

Member Number
1E4-TE5-MK72

Enrolled to
HOSPITAL (PART A)
MEDICAL (PART B)

Coverage starts
03-01-2016
03-01-2016

COMPANY SUPPLEMENT - PLAN F

MEMBER ID: 000000
NAME: YOUR NAME
EFFECTIVE DATE: Aug. 7, 1989

Rx PRESCRIPTION

NAME: YOUR NAME
ID: 0000000
GROUP: 00000-0

PLAN NAME

HEALTH PLAN

GROUP LOGO
HMO

NETWORK
PCP NAME
PCP TEL NO.
COPAYS
ER
Rx COSTS

Rx

BLUE CROSS BLUE SHIELD

Name: _____
ID: _____
Codes, etc. _____

Traditional
POS
HMO

PPO

No LOGO

↑
MEDICAID, CHIP,
MEDIGAP

Medicare and various kinds of insurance cards

See links in sidebar for updated handouts

Useful telephone numbers

Medicare Preventive Services checklist

Senior Medicare Patrol Fraud Prevention

Appeals & grievances

Misleading advertising

CT Medigaps



**Medicare
& You 2025**

The official Medicare handbook

CLICK to open

The banner features a collage of four photographs: a man in a wheelchair, an elderly man smiling, a woman and man looking at a laptop, and a woman smiling while holding a smartphone. Below the main title, there are three smaller photos: a woman smiling, a group of people gathered around a table, and a woman reading a book to a young boy.

For help with Medicare, Medicaid and other senior benefits, please use our regional helpline:

(914) 813-6100

For help with this presentation, please leave a message for callback at (914) 231-3236 or email SBICmedia@gmail.com.