

*Southern Maine*  
**AGENCY  
On AGING**  
EMPOWERING OLDER ADULTS  
AND THEIR CAREGIVERS

# Welcome to Medicare 2026



# SMAA Programs & Services



Southern Maine Agency on Aging has offices in Portland, Biddeford, and Sanford/Springvale.  
Our services are supported by over 400 volunteers!

## Community Resources

- Information and Resources: helping to navigate program eligibility and resources
- Options Counseling: long term planning for services to support aging in place

## Nutrition

- Meals on Wheels: Providing home-bound adults with nutritious meals
- Community Cafes: Providing socialization and nutritious meals
- As You Like It: Discounted dining out vouchers
- Simply Delivered: purchased meals delivered to your home

## Physical, Social, & Financial Wellness

- Agewell: A Matter of Balance, Tai Chi, Virtual Wellness Classes
- Phone Pals: weekly phone calls for social connection
- Medicare Counseling
- Money Minders: help with bill paying skills
- Respite Care Companions: friendly home visiting program

## Adult Day Programs:

Portland, Biddeford, & Springvale

- Socialization and enrichment for older adults with dementia
- Respite for their caregivers

## Family Caregiver Support

- Education and guidance for caregivers
- Workshops and support groups

# Medicare Basics



# Medicare Myths



- Medicare is free (it's not!)
- Medicare coverage everything (it doesn't!)
- Medicare covers prescription drugs (not automatically!)

# Two Ways to Get Medicare



## Original Medicare (Traditional Medicare)

Part A - Hospital

Part B – Doctor Visits & Services

### Optional Add-ons:

Part D – Drug Coverage

Medicare Supplement / Medigap –  
to pay for your share of Medicare costs

- Run by the federal government
- No networks, pre-approvals, or PCPs required
- Most doctors accept Medicare nationwide
- No cap on out-of-pocket costs, but you can purchase a Supplement to cover them

## Medicare Advantage (Part C / Medicare Replacement)

Part A - Hospital

Part B – Doctor Visits & Services

### Included with most plans:

Part D – Drug Coverage

Extra Benefits such as dental, hearing, and vision.  
Varies greatly by plan.

- Run by private insurance companies
- Pre-approvals, referrals, and PCPs often required
- Smaller, more local network of doctors
- Has a cap on out-of-pocket costs
- Cannot be combined with Medicare Supplement

# Insurance terms



## Premium

A flat rate you pay each month in order to have the plan. Sometimes the premium is \$0!

## Deductible

The amount you must pay before your plan starts to cover you. There might be a separate deductible for health coverage and drug coverage. In 2026, your annual drug deductible can't be higher than \$615.

## Coinsurance

A fee you pay when you receive care. It is a percentage of the total cost. The amount you pay varies by plan and service.

## Copay

A flat fee you pay when you receive care. The amount you pay varies by plan and service.

**Original Medicare**



# Medicare Part A (Hospital Insurance)



Part A covers inpatient hospital care, skilled nursing facility care, hospice care, and home health care.

**Premium** – flat rate paid monthly

➤ **\$0 for most beneficiaries** who have worked in the US for at least 10 years. If you worked fewer than 40 quarters (10 years) in the US in your lifetime, you may need to pay a premium.

**Deductible** – amount you pay before the plan pays

➤ **\$1736** each benefit period. A **benefit period** starts when you begin receiving care in a hospital or skilled nursing facility and ends once you have been home for 60 days.

**Co-pays** – amount you pay after the deductible

➤ A flat rate you pay for each day you spent in a skilled nursing facility or hospital. The number of days resets each benefit period.

## Hospital Co-Pays

Days 1-60: \$0 after deductible  
Days 61-90: \$434/day  
Days 91-150: \$868/day  
After day 150: You pay all costs.

## Skilled Nursing Facility Co-Pays

Days 1-20: \$0 after deductible  
Days 21-100: \$217/day  
Days 101+: You pay all costs.

# Medicare Part B (Hospital Insurance)



Part B covers doctors services, outpatient care, preventative and diagnostic tests, and durable medical equipment.

**Premium** – flat rate paid monthly

➤ **\$202.90** for most beneficiaries. You'll pay more if your income is above 109,000 (single) or 218,000 (married). You could pay \$0 if your income is below \$3261 (single) or \$4407 (married).

**Deductible** – amount you pay before the plan pays

➤ **\$283** each year.

**Co-insurance** – percentage you pay after the deductible

➤ **20%** for most services  
➤ **\$0** for preventative services

## FREE Covered Preventive Services

- Bone mass measurement
- Colorectal & prostate cancer screening
- Diabetes services and some supplies
- Glaucoma testing
- Screening mammogram

- Pap test/pelvic exam/clinical breast exam
- Vaccinations (including Flu shots)
- Tobacco cessation services
- Cardiovascular screening
- Medicare annual wellness exam

# Medicare Part D



# Medicare Part D (Hospital Insurance)



A Part D Prescription Drug Plan (PDP) is a standalone plan that covers your prescriptions. It can be added to Original Medicare. Penalties may apply if you do not have Prescription Drug Coverage.

**Premium** – flat rate paid monthly

➤ Varies by plan. \$0 - \$150.20 in 2026.

**Deductible** – amount you pay before the plan pays

➤ Varies by plan, up to \$615  
➤ Sometimes only applies to expensive drugs

**Co-pays** – amount you pay after the deductible

➤ Varies by plan and drug.

**Maximum Out of Pocket: \$2100 in 2026** for prescriptions covered by your plan.

This includes your deductible and co-pays. It does not include money you spent on your premium or non-covered drugs.

# Part D – Medicare Prescription Payment Plan (MPPP)



You can spread your prescription costs out evenly throughout the year.  
This program is optional.

- Does not reduce your total cost.
- Can be helpful for people who will meet their \$2100 out of pocket maximum early in the year.
- Contact your Prescription Drug Plan or Medicare Advantage Plan to enroll in the program.

# What is IRMAA?

In 2026, people with incomes above \$109,000 (single) or \$218,000 (married) may pay more for their Part B and Part D premiums.

- Based on your income from 2 years ago
- You'll get a letter from Social Security if you have to pay IRMAA.
- You can request to lower IRMAA if you have had a life changing event that reduced your household income. Visit [ssa.gov/medicare/lower-irmaa](https://ssa.gov/medicare/lower-irmaa) for more information.



# 2026 Original Medicare Costs Overview



|  | 2026 Amount  | Notes   |
|--|--|---|
| Part A monthly premium                 | \$0 for most   | You may pay more if you have fewer than 40 work quarters in the USA.  |
| Part A deductible                      | \$1736   | Paid each benefit period  |
| Part A Hospital Copays                 | Days 1-60: \$0 after deductible<br>Days 61-90: \$434/day<br>Days 91-150: \$868/day<br>After day 150: You pay all costs | Days 1-90 reset each benefit period.<br><br>Days 91-150 are only covered for a total of 60 days in your lifetime.                                   |
| Part A Skilled Nursing Facility Copays | Days 1-20: \$0 after deductible<br>Days 21-100: \$217/day<br>Days 101+: You pay all costs.                             |   |
| Part B monthly premium                 | \$202.90   | You may pay more if you have a high income and are subject to IRMAA.  |
| Part B deductible                      | \$283  | Paid once/year  |
| Part D max out of pocket               | \$2100   | You will not spend more than this in a year for drugs that are <u>covered</u> by your plan. You may spend more on the premium or non-covered drugs. |

# Medigap / Supplemental Insurance



# Medicare Supplement (Medigap) Insurance



Medicare Supplements are extra insurance you can buy from a private insurance company to help pay your share of out-of-pocket costs in Original Medicare.

- All Medigap policies are standardized.
- **Price is the only difference** between plans with the same letter that are sold by different insurance companies.
- You can apply at any time. However, if you do not have guaranteed issue, a plan can deny you or set restrictions on coverage for pre-existing conditions.
- **All** Medicare Supplements cover these Basic Benefits:
  - Part A coinsurance for hospital stays
  - Part B coinsurance
  - Coinsurance for hospice care
- **Some** Medicare Supplements also cover:
  - Part A deductible
  - Part A coinsurance for skilled nursing facilities
  - 80% of emergency care received in a foreign country
  - Part B Excess charges

# Medigap / Supplement Plans & Coverage



| 2025<br>Benefit<br>Values | PLAN A         | PLAN B            | PLAN D                       | PLAN G                       | PLAN K*   | PLAN L*   | Plan M                       | Plan N  | PLAN C                       | PLAN F                       |
|---------------------------|----------------|-------------------|------------------------------|------------------------------|---|---|------------------------------|---|------------------------------|------------------------------|
|                           | Basic Benefits | Basic Benefits    | Basic Benefits               | Basic Benefits               | 50% Basic Benefits except 100% Part A Co-insurance            | 75% Basic Benefits except 100% Part A Co-insurance            | Basic Benefits               | Basic, except up to \$20 office copay and up to \$50 ER copay | Basic Benefits               | Basic Benefits               |
| \$209.50/day, Days 21-100 |                |                   | Skilled Nursing Co-insurance | Skilled Nursing Co-insurance | 50% Skilled Nursing Co-insurance                              | 75% Skilled Nursing Co-insurance                              | Skilled Nursing Co-insurance | Skilled Nursing Co-insurance                                  | Skilled Nursing Co-insurance | Skilled Nursing Co-insurance |
| \$1,676                   |                | Part A Deductible | Part A Deductible            | Part A Deductible            | 50% Part A Deductible   | 75% Part A Deductible   | 50% Part A Deductible        | Part A Deductible   | Part A Deductible            | Part A Deductible            |
| \$257                     |                |                   |                              |                              |   |   |                              |   | Part B Deductible            | Part B Deductible            |
| Varies                    |                |                   |                              | Part B Excess (100%)         |   |   |                              |   |                              | Part B Excess (100%)         |
| Varies                    |                |                   | Foreign Travel Emergency     | Foreign Travel Emergency     |   |   | Foreign Travel Emergency     | Foreign Travel Emergency                                      | Foreign Travel Emergency     | Foreign Travel Emergency     |
|                           |                |                   |                              |                              | Out-of-pocket limit \$7,220; paid at 100% after limit reached | Out-of-pocket limit \$3,610; paid at 100% after limit reached |                              |   |                              |                              |

Plans C & F are only available to those new to Medicare before 1/1/2020.

High Deductible Plan F and Plan G are also available with a calendar year deductible of \$2,950 for 2026.

Find this chart and more [here](#).

# Guaranteed Issue for Medigap/Supplement Plans



Guaranteed Issue is when a Medicare Supplement Plan must insure you and give you the plan that you choose. When you have Guaranteed Issue, you cannot be refused coverage even if you have a medical condition.

| When do I have Guaranteed Issue?   |   |
|--|---|
| During your supplement Open Enrollment Period  | For the first 180 days after you first join Medicare  |
| If you lose certain types of insurance coverage like employer coverage, Marketplace coverage, QMB, or your Medicare Advantage plan is involuntarily terminated or discontinued | For 60 days after losing the coverage   |
| You want to join Supplement Plan A   | Insurers must offer at least 1 month/year when anyone can join Supplement Plan A.   |
| You want the same plan or a plan with lesser benefits from a different insurance company   | You can switch any time.  |
| You are in a Medicare Advantage Trial Period   | If you switch to Original Medicare between October-March, you can get guaranteed issue for a Supplement if it has been less than 36 months since you first joined Medicare Advantage. |

Even if you don't have guaranteed issue, you can ask an insurance company to sell you a Supplement at any time. It is up to them whether to sell you the policy.

## Medicare Advantage Plans



# Medicare Advantage Plans (MA)

Managed Care Plans administered by private insurance companies.



## What's Included in Medicare Advantage Plans

All Medicare Advantage plans cover the same services as Original Medicare, but the cost is set by the insurance company.

**Extra Benefits:** many Medicare Advantage plans offer dental, vision, and hearing benefits as well as reimbursement for gym memberships, healthy food, or over the counter drugs.

**Premium** – flat rate paid monthly

- Varies by plan. \$0 - \$109 in 2026.

**Deductible** – amount you pay before the plan pays

- Varies by plan.
- You might have separate deductibles for healthcare and prescriptions.

**Co-pays & Coinsurance** – amount you pay after the deductible

- Varies by plan, service, network status, and drug.
- All plans have an annual Maximum Out of Pocket which varies by plan.

**Medicare Advantage is Managed Care & often requires:**

- Primary Care Physician
- Prior authorizations and referrals
- In-Network providers are cheaper or sometimes required.

# Enrolling in Medicare



# How & when to sign up for Medicare



Most people enroll in Medicare when they turn 65 or when they stop working.

## Automatically Enrolled

### Who:

- Age 65 and already collecting Social Security Benefits

### When:

- Starts the first day of your 65<sup>th</sup> birth month

### Who:

- Under 65 and receiving SSDI

### When:

- Starts on the 24<sup>th</sup> month of SSDI or earlier if you have ALS or End Stage Renal Disease (dialysis)

## Need to Sign Up

### Who:

- Not yet collecting Social Security Benefits when you turn 65

### How:

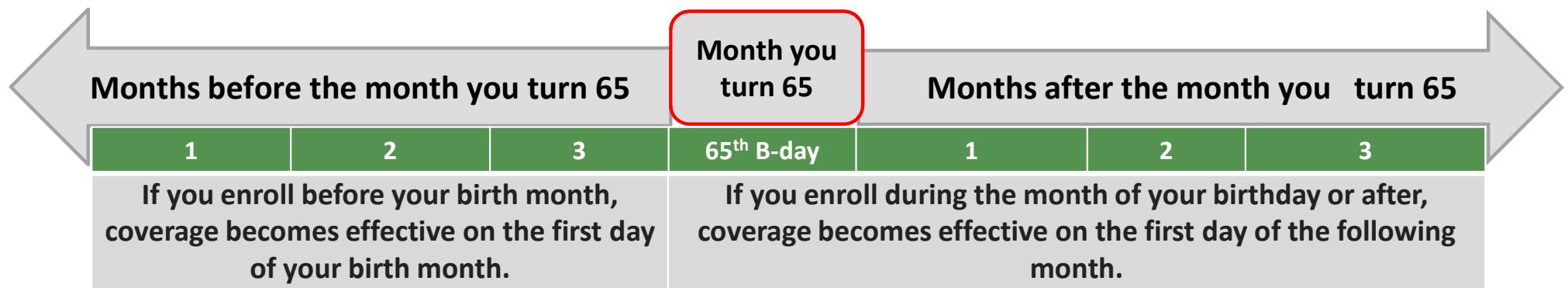
- Contact the Social Security Administration online or by phone.

### When:

- You can sign up any time between three months before you turn 65 until 3 months after you turn 65. This is your **Initial Enrollment Period**.
- You can delay enrollment in Medicare if you have health insurance based on your or your spouse's active employment. The employer must have more than 20 employees.
- Starts the first day of the month after you sign up

# Medicare Initial Enrollment Period (IEP)

## 7 month period:



*Note: If your birthday is on the 1<sup>st</sup> of the month, your Medicare coverage starts the 1<sup>st</sup> of the month before your birthday and your initial enrollment period starts and ends 1 month earlier than shown above.*

**If you don't have other creditable health insurance coverage, you must enroll during this timeframe to avoid late enrollment penalties.**

- Tell the Social Security Administration whether you want Part A, Part B, or both. You will then be enrolled into Original Medicare Part A and/or B.
- Next, choose whether you want to add Part D or Part C (Medicare Advantage). You must have Part A and B to join Part C.

# Delaying Medicare Enrollment



**You can delay Medicare Enrollment** if you have creditable coverage for Part B and Part D. Creditable coverage includes:

- Group health insurance coverage based on your or your spouse's active employment and the employer has more than 20 employees.

**You must enroll in Medicare** during your Initial Enrollment Period to avoid late enrollment penalties if you have:

- No other health insurance
- Insurance through the Marketplace/ACA/ObamaCare
- MaineCare/Medicaid
- COBRA
- You are turning 65 and have employer insurance but there are 20 or fewer employees
- Or you are on SSDI and have employer insurance but there are 100 or fewer employees

# Medicare and Health Savings Account (HSA) Contributions



- You cannot make contributions to an HSA while on Medicare
- To avoid a tax penalty, you should make your last HSA contribution the month before your Part A coverage begins
  - Premium-free Part A coverage will be retroactive 6 months from when you sign up for Part A or apply for benefits, but no earlier than the first month you're eligible for Medicare. Make sure to take this into account when planning HSA contributions.
    - Example 1: You are 68 and plan to retire and join Medicare in October. This means Part A will actually start 6 months earlier, in February. Your last HSA contribution should be in January.
    - Example 2: You turned 65 in April. You join Medicare in June. Part A will be retroactive to April since Medicare could not start any earlier than April.

# Other Key Enrollment Periods

## Important Dates to Remember



| General Enrollment  | Open Enrollment  | Medicare Advantage Open Enrollment Period   | Low income enrollment period   | Special Enrollment Periods   |
|---|--|---|--|--|
| <b>Jan 1 – March 31</b>   | <b>Oct 15 – Dec 7</b>  | <b>Jan 1 – March 31</b>   | <b>All year</b>  | <b>Varies</b>  |
| An annual opportunity to join Medicare if you didn't enroll on time. Late enrollment penalties may apply. | An annual period when everyone on Medicare can make changes to their coverage. | An annual period when Medicare Advantage plan enrollees can: <ul style="list-style-type: none"><li>• Switch to another MA plan</li><li>• Return to Original Medicare and add a Prescription Drug Plan</li></ul> | People who receive financial assistance for Medicare can do the following at any time: <ul style="list-style-type: none"><li>• Switch to Original Medicare</li><li>• Change their Prescription Drug Plan</li></ul> | You can enroll in or change Medicare after a life changing event like losing other health insurance or moving. |

# Programs that help with Medicare costs



# Medicare Savings Program (MSP)

Medicare Savings Programs (MSP) help people who meet income guidelines pay for some or all of their Medicare costs.

| 2025 Monthly Income Limits |          |          |
|----------------------------|----------|----------|
|                            | QMB      | QI       |
|                            | 185% FPL | 250% FPL |
| Single                     | \$2,413  | \$3,261  |
| Couple                     | \$3,261  | \$4,407  |

| Medicare Savings Program (MSP) Coverage Levels              |     |    |
|---|-----|----|
| X indicates Medicare cost may be lowered at QMB or QI level | QMB | QI |
| Medicare Part A Premium                                     | X   |    |
| Medicare Part A Deductible                                  | X   |    |
| Medicare Part A Co-Insurance                                | X   |    |
| Medicare Part B Premium                                     | X   | X  |
| Medicare Part B Deductible                                  | X   |    |
| Medicare Part B Co-Pay                                      | X   |    |
| Medicare Part B Co-Insurance                                | X   |    |
| The <u>Extra Help Program</u> (Medicare Part D Assistance)* |     |    |
| Medicare Part D Premium                                     | X   | X  |
| Medicare Part D Deductible                                  | X   | X  |
| Medicare Part D Donut Hole                                  | X   | X  |
| Medicare Part D Co-Pay                                      | X   | X  |
| Maine RX  | X   | X  |

Contact Southern Maine Agency on Aging to see if you qualify and for help signing up: (207) 396-6524



# SMAA's Medicare Program can assist with:

- Welcome to Medicare Seminars
- Preventing Medicare Fraud and Abuse Presentation
- 1:1 Medicare Counseling either in-person or remote
- Assistance applying to the Medicare Savings Program
- General Medicare Questions
- QMB Improper Billing
- Appeals



# Helpful Contact Information



| Office   | Phone  | Reason to Contact  |
|--|--|--|
| Southern Maine Agency on Aging Medicare Counseling Program | 207-396-6524<br><a href="http://smaaa.org">smaaa.org</a>   | <ul style="list-style-type: none"><li>• Welcome to Medicare Seminars</li><li>• 1:1 Medicare Counseling</li><li>• Applying to the Medicare Savings Program</li><li>• General Medicare Questions</li><li>• Appeals</li></ul> |
| Medicare   | 1-800-Medicare / 1-800-633-4227  | <ul style="list-style-type: none"><li>• General Medicare question</li><li>• Original Medicare Appeals</li><li>• Fraudulent claims or activity</li></ul>  |
| Social Security Administration                             | National: 1-800-772-1213<br>Portland: 877-319-3076<br>Saco: 877-253-4715<br><a href="http://SSA.gov">SSA.gov</a> | <ul style="list-style-type: none"><li>• Enrolling in Medicare</li><li>• Medicare eligibility questions</li></ul>   |
| Maine DHHS – Department of Health & Human Services         | 1-855-797-4357   | <ul style="list-style-type: none"><li>• Processes Medicare Savings Program and MaineCare applications</li><li>• Eligibility questions or appeals</li></ul>   |
| Legal Services for Maine Elders                            | 1-877-774-7772   | <ul style="list-style-type: none"><li>• Help finding coverage and affording prescriptions for low income beneficiaries</li></ul>   |

# Thank you!



Southern Maine Agency on Aging offers Medicare Counseling and presentations like these for free.

Donations are always welcome. Ways to donate:

Visit [smaaa.org/donate](http://smaaa.org/donate)

Make a gift over the phone: 207.396.6500

Or send a check to:

Southern Maine Agency on Aging – Development Office  
30 Barra Road  
Biddeford, ME 04005

