

Medicare Counseling Services at Wilkinson Senior Center and a Medicare 2026 Update



HICAP Medicare Counselors at ONEgeneration Senior Symposium
(Left) Leonard (Len) Reder and (Right) Phil Marshal

- In June Free In-Person Medicare Counseling will have been available at Wilkinson Senior Center for 2 years!
- New to Medicare: come learn the difference between Original Medicare versus Medicare Advantage
- Learn about how Medicare and Medi-Cal work together
- Learn about Medicare and your employer coverage
- We can help you compare prescription drug plans
- Bring your Medicare questions and problems

It is hard to believe that in June it will be a full two years that I have been Medicare counseling at the Wilkinson Senior Center in Northridge. I am Leonard Reder, a Center for Health Care Rights (CHCR) volunteer for three years and registered with the State of California to perform volunteer HICAP Medicare counseling. **HICAP is the Health Insurance Counseling and Advocacy Program** that provides impartial and unbiased Medicare (and Medi-Cal) counseling services in every county within the United States. As a HICAP counselor I am strictly dedicated to providing neutral and unbiased Medicare education and guidance and not permitted to promote or sell any insurance. Working as part of the CHCR team I receive continuous training on Medicare (and Medi-Cal) and am supported by staff counselors, social workers, and attorneys who possess a vast amount of expertise on all aspects of Medicare. Although officially I am a CHCR volunteer, I spend most of my time at Wilkinson Senior Center doing in-person counseling, so it feels like I am a Wilkinson Senior Center volunteer these days.

Over the past two years, I've enjoyed counseling a diverse range of interesting and very nice clients and collaborating with Wilkinson Center staff and volunteers on the second and fourth Tuesdays each month. My current appointment window is 10:30 a.m.–2:30 p.m. Beginning in February, as I return to college part-time this spring, my schedule will shift to 12:30 p.m.–3:30 p.m. (the building closes at 4:00 p.m.).

There has been a lot of talk about Medicare at the various senior centers but, **I want to assure everyone that Medicare is going to continue for the foreseeable future and there are no significant coverage changes anticipated for 2026.** There are a few updates I would like to discuss.

Part-D Prescription Drug Coverage Update: The **Inflation Reduction Act (IRA)** enacted in 2022 empowered the Center Medicare & Medicaid Services (CMS) to negotiate drug prices for Medicare Part D. In 2026, CMS has announced lower negotiated drug prices take effect for the list of 10 drugs shown in Table 1. These drugs are high-cost, single-source, and frequently used drugs already covered by Part D. The goal of this is to lower costs for Medicare, for you the beneficiary, and for taxpayers. All the Part D plans must include these negotiated drugs on their formularies so this will simplify plan comparisons. It is expected that these new negotiated prices will result in **lower out-of-pocket costs** for you, the beneficiary. The IRA also put a maximum limit on prescription drug

Table 1: List of drugs with negotiated prices for 2026

- Eliquis
- Jardiance
- Xarelto
- Januvia
- Farxiga
- Entresto
- Enbrel
- Imbruvica
- Stelara
- Novolog

out of pocket costs, which this year is \$2100. This means if you pay a deductible plus co-pays of over \$2100 then you go into a catastrophic drug coverage phase which makes your co-pay zero for the remainder of the year.

New Medi-Cal Asset Limits (effective January 1, 2026): Medi-Cal will reinstate asset limits for eligibility. The cap is \$130,000 for individuals and \$195,000 for couples. Countable assets include cash in bank accounts; exempt assets include the home you live in, one vehicle, household items, and certain retirement accounts. If you are already a Medi-Cal beneficiary, you do not need to do anything unless you get a renewal form or request for information from L. A. County. If you get a renewal form, make sure you turn it in with all required documentation by the due date, so you do not lose your Medi-Cal. For details about the asset limit reinstatement refer to https://healthconsumer.org/wp/wp-content/uploads/2025/11/Asset-Limit-Reinstatement-FAQ_2025.pdf.

New Medicare Telehealth Rules: After January 30, 2026, telehealth services will become more limited. Telehealth is communications with a healthcare provider via video or audio-only communication. Behavioral/mental health care, monthly End-Stage Renal Disease (ESRD) visits for home dialysis, diabetes self-management training, and Medicare nutrition therapy will still be available via telehealth. Behavioral health telehealth for new patients will require an annual in-person visit. People who utilize telehealth should ask the provider to make sure it is covered under the new rules.

Prior Authorization Demonstration For Original Medicare Only: You may have heard in the news about The Wasteful and Inappropriate Service Reduction (WISeR) Model evaluation CMS's six-year test of AI-assisted prior authorization with clinician review for select Original Medicare services deemed frequently inappropriately provided or potentially dangerous. The test is in six states—New Jersey, Ohio, Oklahoma, Texas, Arizona, and Washington (**California is not participating**). It applies to Original Medicare beneficiaries and there should be no changes to coverage or payment policy in 2026.

And finally, from now until March 31, 2026, there is a **Medicare Advantage (MA) Open Enrollment Period (OEP)** for current MA enrollees to make one change to either switch MA plans or go to Original Medicare. If you have any questions about this information, please contact CHCR or make an appointment with me at Wilkinson Senior Center.

For more information on the service or to schedule an appointment call CHCR at (213) 383-4519 or visit <https://healthcarerights.org>.

