

Medicare Advantage Plans for 2026



Is my Medicare Advantage plan going to be the right plan for me in 2026?

This depends. Questions you will need to answer include:

- Are your doctors and other providers still covered? Plans usually let you know, but you may also want to check with your provider and check the plan's provider look-up or ask the plan for a printed directory.
- Will your costs and coverage change? Each year plans are allowed to change premiums, co-pays and co-insurance for covered services. That includes prescription drug coverage as well. They can also drop drugs from their formulary altogether which will increase your costs significantly.
- Are better plans available?

Here are some of the highlights for 2026.

- 4 HMO (Health Maintenance Organization) plans and 1 PPO are offered to anyone with Medicare Part A & B at monthly premiums from \$0 to \$89.
- Central Health and Imperial Traditional have terminated their HMOs. Anthem has terminated their PPO Plan.
- Four Special Needs HMO plans are offered, including two for persons with specified chronic conditions, and two for those with Medi-Cal + Medicare.
- Only one give-back plan is offered for those with VA coverage and Medicare
- Kaiser continues to offer a lower premium Basic Plan with slightly higher co-pays than their more expensive Enhanced Plan

What changes can I make starting October 15th?



You can change to any other Medicare Advantage plan without any health screening. You must enroll in your new plan between October 15th and December 7th. Coverage will start January 1st. If you want to change again, you can do so once anytime in the first 3 months of 2025.

Or, you can leave your current plan and use Original Medicare as your primary insurance, along with a stand-alone prescription drug plan. There is never health screening for this option. See the following page for your rights to purchase a Medicare Supplement (Medigap) policy.



I am unhappy with my Medicare Advantage Plan! Can I use original Medicare as my primary insurance and purchase a Medigap policy plus a Prescription Plan?

The following plans have either terminated or changed at least one of their payment amounts which, under Federal and California laws, entitles you to purchase a Medicare Supplement (Medigap) policy without any health screening. Purchasing a stand-alone prescription plan is also available to you. For those with full Medi-Cal status, it is illegal for companies to sell you a Medigap policy.

Plans which allow you to leave and purchase Medigap from any insurer:

Kaiser Basic; Kaiser Enhanced; Anthem PPO (terminating); Central Health (all plans terminating); All Imperial plans except Dynamic.

You must disenroll from your plan by December 7th for an effective date of January 1, 2026. You can easily do this by joining a stand-alone Prescription Drug Plan. You may then enroll in any Medicare Supplement (Medigap) plan offered by any company before March 2, 2026. Coverage will start the first of the month following your enrollment, or January first, if enrolling before that date. Special timing rules apply for plans which are terminating. See HICAP for more information and assistance.

Plans which allow you to leave and purchase Medigap from their parent company:

AARP Medicare Advantage from UHC; HumanaChoice PPO. You must disenroll from your continuing 2025 plan by February 28th. You can easily do this by joining a stand-alone Prescription Drug Plan. You then may enroll in any Medicare Supplement (Medigap) offered by the parent company (not any company, as noted above). You must do this by March 2, 2026. Coverage will start the first of the month following your enrollment, or January first if enrolling before that date.

Contra Costa County Health Insurance Counseling and Advocacy Program (HICAP)

Contact Us: 925-655-1393, (800) 510-2020 or (800) 434-0222

Visit: www.cchicap.org then 'Contact Us' Email: ehsdhicap@ehsd.cccounty.us



This publication was supported by the Administration for Community Living (ACL), U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$79,376 with 100 percent funding by ACL/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by ACL/HHS, or the U.S. Government.