INS MARKETING SYSTEMS
AN INTEGRITY PARTNER OFFICE

# 2026 Medicare Made Simple

Your guide to confident Medicare conversations, application readiness, and plan review questions.

**Inside:**
Medicare parts, enrollment timing, 2026 cost highlights, Part D updates, who pays first, appointment checklist, and questions to ask before you enroll.

Updated for 2026. Prepared for educational use by INS Marketing Systems.

# Table of Contents

# 1. What Medicare Is

Medicare is federal health insurance for people 65 or older and for certain younger people with disabilities or specific conditions. Most people think about Medicare in four parts:

| Part | What it generally helps cover |
|---|---|
| Part A | Inpatient hospital care, skilled nursing facility care, hospice care, and some home health care. |
| Part B | Doctor services, outpatient care, durable medical equipment, home health care, and many preventive services. |
| Part C | Medicare Advantage plans offered by Medicare-approved private companies as an alternative way to receive Medicare benefits. |
| Part D | Prescription drug coverage from private companies approved by Medicare. |

# 2. Your Two Main Coverage Paths

When you first enroll and during certain enrollment periods, you usually choose between Original Medicare and Medicare Advantage. Your best fit depends on doctors, prescriptions, travel habits, budget, and whether you want extra benefits or supplemental coverage.

| Original Medicare | Medicare Advantage |
|---|---|
| Includes Part A and Part B. You can add Part D and may buy a Medigap policy if eligible. | A Medicare-approved plan from a private company that bundles Part A and Part B, and often Part D. Networks, referrals, prior authorization, costs, and extra benefits vary by plan. |
| Can use any doctor or hospital in the U.S. that takes Medicare. | Usually uses a network or service area. You must have Part A and Part B and live in the plan service area. |

# 3. Enrollment Windows to Know

**Initial Enrollment Period**
Usually lasts 7 months: it starts 3 months before the month you turn 65 and ends 3 months after that month.

**Special Enrollment Period**
May apply after initial enrollment for situations such as current employer coverage ending, certain errors, disasters, Medicaid changes, and other qualifying events.

**General Enrollment Period**
January 1-March 31 each year for people who missed their first chance and do not qualify for a Special Enrollment Period. Coverage generally starts the first day of the month after signing up.

**Open Enrollment**
October 15-December 7 each year. You can join, switch, or drop Medicare Advantage or Part D coverage for the next year.

**Medicare Advantage Open Enrollment**
January 1-March 31 for people already in a Medicare Advantage Plan. You may switch to another Medicare Advantage Plan or return to Original Medicare once during this period.

**Tip: Employer, retiree, COBRA, VA, TRICARE, Medicaid, and Marketplace coverage can affect Medicare timing. Review your situation before delaying Part B or changing plans.**

# 4. 2026 Cost and Drug Coverage Highlights

Costs vary by plan, income, provider, pharmacy, drug list, and coverage choices. These 2026 amounts are useful for orientation but do not replace official documents or plan-specific Evidence of Coverage materials.

| Cost item | 2026 amount / reminder |
|---|---|
| Part A inpatient hospital deductible | $1,736 per benefit period |
| Part A hospital coinsurance days 61-90 | $434 per day |
| Part A lifetime reserve day coinsurance | $868 per day |
| Skilled nursing facility coinsurance days 21-100 | $217 per day |
| Part B standard monthly premium | $202.90 |
| Part B annual deductible | $283 |
| Part D out-of-pocket cap | $2,100 for covered Part D drugs in 2026 |

Prescription drug updates: In 2026, Medicare continues implementation of negotiated prices for selected high-cost drugs and the Part D annual out-of-pocket cap is $2,100 for covered drugs. The Medicare Prescription Payment Plan can help spread drug costs across the year, but it does not lower total drug costs.

# 5. How Other Insurance Can Affect Medicare

If you have Medicare and another type of coverage, the payer that pays first is called the primary payer. The payer that pays second may help with remaining costs only when its rules cover the service. Who pays first depends on the coverage type, employer size, active employment, disability or ESRD status, and other details.

| |
|---|
| **Current employer group coverage**<br>Ask the employer or benefits administrator whether the group plan pays before or after Medicare and whether Part B is required. |
| **Retiree or COBRA coverage**<br>These often do not count as current employment coverage for Part B timing. Delaying Medicare may create penalties or gaps. |
| **VA, TRICARE, Medicaid, workers compensation, no-fault or liability coverage**<br>Coordination rules vary. Tell providers and plans about all coverage you have to help avoid billing delays. |
| **Best practice**<br>Before changing coverage, document the answers you receive from the employer, union, plan, or benefits administrator. |

# 6. Application Readiness Checklist

| | |
|---|---|
| [ ] Medicare card or Social Security/Medicare eligibility information | [ ] Date you want coverage to start |
| [ ] Current health insurance cards and employer/retiree coverage details | [ ] List of prescriptions, dosage, frequency, and preferred pharmacy |
| [ ] Doctors, specialists, hospitals, clinics, and preferred pharmacies | [ ] Budget range for monthly premiums, copays, deductibles, and out-of-pocket exposure |
| [ ] Travel patterns, seasonal residence, or out-of-area care needs | [ ] Questions about dental, vision, hearing, transportation, OTC, fitness, or other extra benefits |

# 7. Questions to Ask Before Enrolling

- Are my doctors, hospitals, and pharmacies in network?
- Are my prescriptions covered, and what tiers and restrictions apply?
- What is the total cost picture: premium, deductible, copays, coinsurance, and maximum out-of-pocket?
- Do I need referrals or prior authorization for common services?
- How does the plan handle travel or care away from home?
- Will changing coverage affect employer, union, retiree, Medicaid, VA, or TRICARE benefits?
- What happens if my health needs or prescriptions change during the year?

**Remember: Plan availability, networks, formularies, and benefits are local. Always check current plan documents and use Medicare.gov/plan-compare for plan-specific comparisons.**

# Source Notes

Prepared using official Medicare and CMS publications. For current details, always verify at Medicare.gov, CMS.gov, SocialSecurity.gov, and plan documents.

| Publication | URL |
|---|---|
| Medicare & You 2026 | https://www.medicare.gov/publications/10050-medicare-and-you.pdf |
| How Medicare Works with Other Insurance | https://www.medicare.gov/publications/02179-how-medicare-works-with-other-insurance.pdf |
| Your Medicare in 2026: What You Need to Know | https://www.medicare.gov/publications/12229-your-medicare-in-2026-what-you-need-to-know.pdf |
| Your Medicare Benefits | https://www.medicare.gov/publications/10116-your-medicare-benefits.pdf |
| 2026 Medicare Parts A & B Premiums and Deductibles | https://www.cms.gov/newsroom/fact-sheets/2026-medicare-parts-b-premiums-deductibles |