The Latest News from Your Friends at
Mutsko Insurance Services, LLC
FALL 2025

INSIDE:

Medicare Changes for 2026

Medicare rules, costs, and benefits change every year, but the ones coming in 2026 could have a significant impact on you and the cost of your health care. Here is what you need to know about the changes we will see in Medicare next year and how it might affect you.

Part A deductible will be:

$1716 for days 1 to 60

$429 for days 61-90

$858 for days 91-150.

Part B premiums will increase from $185 to $206.50 a month. The Part B deductible will rise from $257 to $288.

Skilled Nursing will increase to $215.50 a day for days 21-100.

Prescription (Part D) deductible will go from $590 to $615.

The Part D Catastrophic out-of-pocket will increase $100 to $2100. The $2100 is the retail total of what you pay plus what your plan pays, not just your contribution to the cost.

Once you reach this out-of-pocket spending amount (including your deductible, copayments, and coinsurance), your plan pays 100% of your prescription costs for the remainder of the year.

Your Medicare Advantage Plan may have fewer non-medical benefits, including the reduction or elimination of benefits for over-the-counter medications, fitness club memberships, transportation services, and nutrition services.

Beginning in 2026, Original Medicare will begin requiring pre-authorization for certain traditional Medicare services in order to reduce improper billing and fraud.

If you discover you have enrolled in a plan that doesn't meet your needs, call us. We can help you undo what's been done and get you and your coverage back on the right track.

What are Your Options?

Your best defense against rising health-related costs is to be a well-informed consumer. Read the information you receive from your Medicare Advantage plan, Part D Prescription plan and the Medicare & You 2026 Handbook. If you have not received this information by U.S. mail, check your email account, or contact your plan's customer service department to request a copy of your Annual Notice of Change.

If you find your current coverage falls short or you have questions, contact us at Mutsko Insurance Services. Medicare's Fall Annual Election Period begins October 15 and runs through December 7. During this time, you can join,

Continued inside...

Letter from Laura

Dear friends,

The world seems to keep moving so quickly these days. Not a day goes by when I am not faced with changes in our industry, changes in computer technology, and even changes in our office staff. It takes a lot of time and energy to keep up!

So, over the past few months we have looked at various ways to help Mutsko Insurance Services streamline how we communicate with our customers. We have looked at AI technology, chat boxes, and much more. In the end, I have decided we are going to continue the way we have been operating. We will answer our phones. We will meet you in person. You can expect a newsletter with information we believe you need. But, most importantly, we will continue to provide you with the personal service you have come to expect.

I am not promising you that we will never update our use of technology here at Mutsko Insurance Services. But for now, I'm not rushing into a world where instead of a person, a computer answers your questions.

I hope you agree that we can slow-walk changes in something so personal as your insurance needs.

Sincerely,

Laura Mutsko

Medicare Changes continued from page 1

drop or switch Medicare Advantage plans or Part D drug plans. You can also return to Original Medicare. We can help you make any of these changes.

If you discover you have enrolled in a plan that doesn't cover your doctors or prescriptions, costs more than you expected or just doesn't meet your needs – in other words, the wrong plan for you – call us at 440-255-5700. Medicare provides a second opportunity between January 1 and March 31 for those already enrolled in an Advantage plan to make one change, such as switching to another Medicare Advantage plan or moving back to Original Medicare, with or without a Part D drug plan. We will help get you and your coverage back on the right track.

Please continue to read the rest of this newsletter. It contains more important details on 2026 changes in Medicare, Medicare Advantage plans and Medicare Part D plans.

Do you Qualify for Medicare + Medicaid?

You may qualify for a Dual Eligible Special Needs or D-SNP Plan that provides more extras, more savings, more convenience, and more care. These plans are specifically designed for people who have both Medicare and Medicaid. (You may know it as a QMB, SLMB or QI programs.)

With a D-SNP plan, you will continue to get all your Medicare and Medicaid benefits, plus:

$0 cost Doctor Office Visits
$0 cost Hospital Visits
$0 cost Prescriptions

Extra benefits for Dental, Vision and Hearing

Over the Counter Benefits for non-prescription items

Free Transportation

Some plans may also include a Flexible Benefits card, healthy grocery allowance, and an allowance for utilities:

Interested in learning more? Call or email Shireen for more information: 440-255-5700 Scain@mutskoinsurance.com

We're On Top of This

Many details are yet to be announced concerning 2026 Medicare, Affordable Care plans, Social Security, IRMMA rates, and Prescription Drug programs. We will make every effort to contact you if any newly released information affects your coverage for 2026 and assist you in making any changes in coverage if warranted.

Our next newsletter in January will updates on any changes or you can always contact us at 440-255-5700 if you have concerns about your coverage.

Name Change

Aetna Value Plan is changing its name to Aetna Signature Plan.

Medicare Prescription Payment Plan

Medicare Part D plans will once again offer an optional "payment plan" to help you spread the out-of-pocket costs of your prescriptions over the year instead of paying all at one time.

To take advantage of this plan, your first step is to register with your specific Part D plan provider. Your provider will set up a monthly payment amount that will cover your estimated yearly out-of-pocket costs. Once registered, you will get a monthly bill from your drug plan instead of paying at your pharmacy. Your maximum cost will be $2100 a year, after which all prescriptions will be provided at no charge.

The Medication Prescription Payment Plan does not lower the total amount you pay for your prescriptions. Anyone with a Medicare Prescription Part D plan or Medicare Advantage plan can use this option.

New Rules: Medicare Prior Authorization

Beginning in 2026, Original Medicare will begin requiring pre-authorization for certain traditional Medicare services. While prior authorization has rarely been required by Original Medicare, CMS is implementing this change to reduce improper billing and fraud.

Medicare is NOT changing their requirements, just the timing of them. It will require the same information to be submitted before the procedure is performed instead of after to support Medicare payments.

Prior authorization requirements will apply to seventeen services that CMS says have the potential to be provided as cosmetic procedures rather than medical. Included in the list requiring prior authorization are:

Blepharoplasty (eyelid surgery)
Botulinum toxin injections
Rhinoplasty (nose repair)
Vein ablation (treatment for varicose veins)
Panniculectomy (abdominal wall contouring)

Prior authorization evaluation procedures will be rolled out in six states – New Jersey, Ohio, Oklahoma, Texas, Arizona, and Washington – beginning January 1, 2026.

Check Your Email for Missing Notices

Don't blame the Post Office if you have not received a copy of your ANOC booklet.

Many insurance companies are now sending your annual notice by email instead of U.S. mail. Companies are adopting this practice unless you request otherwise. If your's is missing, please check your email inbox for this important information.

IMPORTANT DATES

Medicare Annual Election Period
Begins: October 15th, 2025
Closes: December 7th, 2025

Medicare Open Enrollment
Begins: January 1st, 2026
Closes: March 31st, 2026

Affordable Care Open Enrollment
Begins: November 1st, 2025
Closes: January 15th, 2026

Goodbye to Extra Benefits

We have heard from some unhappy Anthem Advantage plan beneficiaries concerning the reduction of some extra benefits such as healthy foods, transportation assistance, and over-the-counter drug items. They are especially disappointed to learn that Anthem will no longer provide free Silver Sneaker membership.

Some have asked me to switch them to a different plan that includes Silver Sneakers. However, before you make a move, assess the overall coverage of any options you are considering, making sure they cover your doctors, prescriptions and specialists. You originally chose Anthem for the rich coverage they provide, not the extra benefits. Anthem still provides the coverage you are looking for.

There are many affordable fitness programs being offered throughout our area. We will share these in upcoming newsletters. We will also continue to research other plans and if we find competitive plans that offer the extra benefits you are looking for, we will let you know.

Just for Laughs...

I have everything I wanted as a teenager – only 60 years later. I don't have to go to school or work. I get an allowance every month. I have my own place. I don't have a curfew. I have a driver's licence and my own car. The people I hang around with are not scared of getting pregnant, and I don't have acne. Life is great.

I didn't make it to the gym today. That makes five years in a row.

I decided to stop calling the bathroom the "John" and renamed it the "Jim". I feel much better saying, "I went to the Jim this morning."

When I was a child, I thought "nap time" was a punishment. Now it feels like a small vacation.

The biggest lie I tell myself is, "I don't have to write that down; I'll remember it."