



NRLN Review, Summary for October 2025

The NRLN Review provides a monthly report on National Retiree Legislative Network actions, events in Congress and important retirement news.

NRLN Survey Will Assess Whether Health Insurers Follow Federal Law

The article below reports that UnitedHealthcare expects its Medicare membership to fall by about one million members next year. The previous number that the NRLN had used in communications was 600,000. Earlier CVS-Aetna stated that it will end nearly 90 MA plans across 34 states in 2026. They are focusing on patients and plans that reliably generate profits—and cutting those that don't. UnitedHealth and CVS are taking actions that include eliminating certain plans, trimming benefits, raising out-of-pocket costs and pulling back from offerings such as PPO plans that give members more choice.

In a few days the NRLN will send an email to NRLN members requesting that you participate in a survey. The NRLN survey is to assess whether company healthcare plan administrators and/or healthcare insurance companies are complying with federal law to notify retirees who are eligible for a Guarantee Issue Right (GIR) and Special Enrollment Period (SEP).

We are in talks with the Centers for Medicare and Medicaid Services (CMS) to mandate that IBM, AT&T, AVAYA and the Tennessee Valley Authority (TVA) companies all send GIR notifications they willfully refused to send in 2023-2024.

Why? An NRLN member and IBM retiree and his wife, retired for years, were using their IBM Healthcare Reimbursement Accounts (HRA) to pay Medigap plan premiums. IBM froze their account, refusing to reimburse Medigap premiums but did not send them a GIR letter. They had to stay with their current insurer because both have chronic diseases and would not be accepted by another insurer without a GIR. They now pay a combined premium of \$651.99 monthly. If IBM had notified them of their GIR as required by federal law, two Medigap plan G plans would cost them a combined monthly amount as low as \$300 in North Carolina.

You may not be affected but it is important you know others deserve our support. Please complete the survey!

[In Medicare, Less Is Now More for Big Insurers](#)

The Wall Street Journal – October 29

Telehealth - Lack of Action

NRLN President Bill Kadereit sent an email to members of the Senate Committee on Finance, Senate Special Committee on Aging, House Committee on Energy and Commerce and House Committee on Ways and Means asking them not to forget that many seniors have been affected by Congress's inaction which let Telehealth access expire on September 30, 2025. He requested that they support passage of H.R.5081/S.2709, Telehealth Modernization Act.

[Opinion: The failure of Trump and Congress to reauthorize Medicare coverage for telehealth is galling](#)

San Francisco Chronicle – October 29

[Telehealth flexibilities expire amid government shutdown](#)

Healthcare Dive – October 1

NRLN Supports CPI-E for COLA Calculation

As Bill Kadereit noted in his NRLN President's Forum message and as the two articles below report, the Social Security Administration (SSA) announced on October 24, there would be a 2.8% Cost-of-Living Adjustment (COLA) for 2026. The COLA increase beginning in January will add about \$56 to an average monthly benefit of \$2,071. Unfortunately, the standard Medicare Part B premium is expected to increase in 2026 by \$21.50 from \$185.00 per month \$206.50.

COLA is based on the Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI-W). The NRLN advocates that the COLA calculation be changed to Consumer Price Index for Elderly (CPI-E) based on older Americans' spending patterns, including high medical costs. Usually, the CPI-E would provide seniors with a slightly larger COLA.

[Social Security 2026 COLA Increase for 75 Million Seniors Released](#)

Newsweek – October 24

[The Social Security Cost of Living Adjustment \(COLA\) for 2026 Is In: Here's What Retirees Need To Know](#)

Investopedia – October 26

Losing Social Security and Medicare?

In the article below, Trump was asked at an October 21 press conference about a Democrat's feedback on the funding bills, "It means death." Trump said, "There's nothing about death. There is death because they're going to lose Medicaid, they're going to lose Social Security, they're going to lose Medicare, all of those things are going to be gone because the whole country would be bankrupt, and you're not going to have any kind of medical insurance."

The NRLN advocates with Congress the way to prevent the loss of Social Security benefits when funding will only be able to pay 77% of current benefits in 2033 is by eliminating the payroll tax cap of \$184,500 (in 2026). Social Security's Chief Actuary has calculated that eliminating the taxable maximum would close about 70% of the shortfall and extend the trust fund's life to about 2060. Rebates paid to Medicare Advantage insurance companies will account for \$1.5 trillion of the \$3.4 trillion federal deficit increase from 2025-2034. Over 27 million in traditional Medicare never benefit from the rebates. The NRLN's proposal is that the taxpayer money spent on private company rebates could prevent the Medicare Hospital Insurance Trust Fund from only being able to pay 89% of current benefits beginning in 2033.

[Social Security, Medicare are "going to be gone," Donald Trump warns](#)

Newsweek – October 21

NRLN Says Be Vigilant During Medicare Enrollment Period

The opening paragraph of an NRLN President's Forum message by Bill Kadereit on October 7 provided the following caution. The Medicare Open Enrollment Period is October 15 - December 7. Older Americans with a Prescriptions Drug Plan (PDP), Medigap (Supplemental), Medicare Advantage (MA) and other plans need to

be vigilant because MA insurers may non-renew or reduce service, a.k.a. terminate your 2025 plans effective January 1, 2026. The following three articles provide information that may be useful to you during the enrollment weeks ahead.

[Here's how to save during Medicare open enrollment 2026 as costs continue to rise](#)

Nerd Wallet – October 26

[4 Changes to Both Medicare Part D and Medicare Advantage Taking Effect in 2026](#)

FinanceBuzz Money – October 23

[Big Changes Are Coming for 2026 Medicare Plans. What You Need to Know.](#)

The Wall Street Journal – October 15

[Prescription drug coverage options are shrinking for Medicare shoppers](#)

Associated Press – October 11

NRLN Opposes CMS Trial for Traditional Medicare Prior Authorization

As the Moneywise article below reports, the Trump administration [Centers for Medicare and Medicaid] plans to introduce a new program in 2026 that uses AI to approve or deny care for [traditional] Medicare enrollees. An NRLN Action Alert was issued on August 20 asking members to tell their U.S. Representative and Senators to prevent the trial. During the NRLN's Fly-In to Washington, DC September 15 - 17, attendees told members of Congress and their staffs that traditional Medicare should not be turned into a Medicare Advantage prior authorization program where insurance companies can deny or delay medical services for millions of older Americans. The Action Alert remains available if you want to add your voice in opposition to the trial in six states. Go to: <https://nrln.org/2022/12/action-alert/#/home/>.

The first sentence of the Commonwealth Fund article below states, "Policymakers are increasingly interested in reforming how commercial insurers use prior authorization." The author notes, "Prior authorization is widely disliked by patients and clinicians, many of whom believe it delays care and has a negative effect on clinical outcomes." The Commonwealth Fund proposes a "traffic-light" framework that is informed by insights from clinical practice and health economics.

[Trump administration to test new AI Medicare gatekeeper in 6 states — but experts worry the cost-saving program could compromise care in the US](#)

Moneywise – October 19

[Rethinking Prior Authorization in Medicare Advantage](#)

Commonwealth Fund – October 22

Mayo Clinic Not In-Network for UHC and Humana MA Plans in 3 Midwestern States

The NRLN has often cautioned Medicare Advantage enrollees they may not have in-network access to national clinics for their healthcare coverage. The article below is an example. Starting in 2026, Mayo Clinic will no longer be in-network in Minnesota, Wisconsin and Iowa for Medicare Advantage plans offered by UnitedHealthCare (UHC) and Humana. If you have Medicare Advantage or you are considering enrolling in a plan, check whether the Mayo Clinic and other national clinics are in-network if that is important to you now or possibly in the future.

<https://www.kttc.com/2025/10/22/mayo-clinic-will-be-out-of-network-certain-medicare-advantage-plans-2026/>

[Mayo Clinic will be out-of-network for certain Medicare Advantage plans in 2026](#)

KTTC Rochester, MN – October 22

NRLN Legislative Committees' Work

The NRLN's Legislative Advisory Committee (LAC) prioritizes retirement-related bills it reviews during its twice-a-month conference calls. The LAC submitted the following bills for the Legislative Action Priorities Committee (LAPC) to consider for action. The LAPC took the actions below on the bills during its October 13 conference call.

The work of the LAC and the LAPC provides the cornerstone for much of the dealings with members of Congress and their staff.

H.R.610, Close the Medigap Act of 2025, would prohibit discriminatory pricing and coverage denials for patients seeking supplemental Medigap coverage. This bill (1) expands guaranteed issue rights with respect to Medigap policies (Medicare supplemental health insurance policies), (2) eliminates certain limitations on Medigap policies for newly eligible Medicare beneficiaries, and (3) modifies other provisions related to Medigap policies. (Guaranteed issue rights require that a policy be offered to any eligible applicant without regard to health status.).

H.R.5081/S.2709, Telehealth Modernization Act, would extend telehealth access for Americans enrolled in Medicare through fiscal year 2027. Telehealth services are an essential part of America's healthcare system. It is a fact that having to physically travel to a doctor's office or hospital can present a serious barrier to care for seniors, people with disabilities, and people who live in rural areas that are far from a health care provider. Telehealth worked during COVID and should be available and more widely adopted. The Telehealth Modernization Act takes us one step closer to protecting and expanding access to telehealth for Americans who depend on it

H.R.5269/S2761, RESULTS (Reforming and Enhancing Sustainable Updates to Laboratory Testing Services) Act of 2025, would reform Medicare's Clinical Laboratory Fee Schedule to protect timely access to routine and lifesaving lab tests for seniors. Currently, reimbursement rates for clinical laboratory tests are based on data from less than one percent of labs. While the potential cuts have been continuously delayed by Congress, without permanent action, there will be increasing cuts to payments for tests, jeopardizing care. The RESULTS Act will strengthen how Medicare sets and updates payment rates for these tests. It builds on prior efforts from Congress by allowing the Centers for Medicare and Medicaid Services (CMS) to use comprehensive private claims data to establish fair, market-based rates for widely available tests. The bill reduces administrative burden on labs, adds guardrails to avoid destabilizing cuts, and updates reporting timelines so patients, providers, and payers can plan with confidence.

On October 13, 2025, NRLN President Bill Kadereit sent letters to House Committee on Energy and Commerce Chairman Brett Guthrie (KY-02) and Ranking Member Frank Pallone (NJ-06) and Committee on Ways and Means Chairman Jason Smith (MO-08) and Richard Neal (MA-01) requesting Committee votes on **H.R.610**, **H.R.5081** and **H.R.5269**. A copy of the letters to the Committee Chairmen were sent to the sponsors of the bills: Representative Lloyd Doggett (TX-37) H.R.610; Representative Earl "Buddy" Carter GA-11) H.R.5081, and Representative Richard Hudson (NC-09) H.R.5269.

On October 13, 2025, NRLN President Bill Kadereit sent letters to Committee on Finance Chairman Mike Crapo (ID) and Ranking Member Ron Wyden (OR) requesting a Committee vote on **S.2709** and **S.2761**. A copy of the letter to the Chairman Crapo was sent to the sponsors of the bills: Senator Tim Scott (SC) S.2709 and Senator Thomas Tillis (NC) S.2761.

The above bills have been posted on the NRLN website Bills webpage at:
<https://nrln.org/2020/12/legislative-action-network/#/bills> which feeds the NRLN Report Card.

The letters noted above have been posted in Letters to Washington in the Archives at:
<https://nrln.org/2021/05/letters-to-washington-2/>.

Key News Articles Posted in October

During October 65 links to news articles related to retirement issues were researched and posted IN THE NEWS on the NRLN website home page. The headlines below are links to the articles. Or read the articles at

www.nrln.org under IN THE NEWS in the right column. Scroll down the right column and click on the headline to access the article you want to read. Below are some of the headline links.

[Watch out for these potential traps when signing up for Medicare](#) – October 30

[Opinion: The failure of Trump and Congress to reauthorize Medicare coverage for telehealth is galling](#)
– October 29

[In Medicare, Less Is Now More for Big Insurers](#) – October 29

[Health officials scrambling to fix new Medicare directory after report finds widespread coverage errors — how it could leave seniors paying more](#) – October 29

[How to Handle Social Security When a Beneficiary Dies](#) – October 27

[Medicare Advantage Enrollees Have Access to About Half of the Physicians Available to Traditional Medicare Beneficiaries](#) – October 27

[AI-powered scams target Medicare users during enrollment](#) – October 27

[Here's how to save during Medicare open enrollment 2026 as costs continue to rise](#) – October 26

[Here's how to save during Medicare open enrollment 2026 as costs continue to rise](#) – October 26

[Social Security 2026 COLA Increase for 75 Million Seniors Released](#) – October 24

[The Social Security Cost of Living Adjustment \(COLA\) for 2026 Is In: Here's What Retirees Need To Know](#) – October 24

[4 Changes to Both Medicare Part D and Medicare Advantage Taking Effect in 2026](#) – October 23

[Centers For Medicare And Medicaid Services Calls Back Furloughed Workers](#) – October 23

[Medicare open enrollment: What seniors should know before making changes](#) – October 23

[Mayo Clinic will be out-of-network for certain Medicare Advantage plans in 2026](#) – October 22

[Rethinking Prior Authorization in Medicare Advantage](#) – October 22

[Social Security, Medicare are “going to be gone,” Donald Trump warns](#) – October 21

[5 Myths About Medicare Advantage — And What To Know Before Enrolling](#) – October 21

[Ballad Health Accuses UnitedHealthcare of Medicare Manipulation](#) – October 21

[How to avoid scams during Medicare, ACA open enrollment](#) – October 20

[Medicare introduces new primary care services in 2026](#) – October 20

[How do long-term costs and network coverage compare between Medigap and Medicare Advantage?](#) – October 20

[Medicare Advantage plans embrace riskier patients](#) – October 20

[New Social Security scam features fake U.S. Supreme Court letter](#) – October 17

[9 Major Medicare Changes for 2026: What's Coming for Premiums, Drug Prices, and Program Cuts](#)
– October 17

[Medicare Advantage May Limit Access to Top Cancer Centers](#) – October 16

[Mayo Clinic will leave most Medicare Advantage networks at UnitedHealthcare, Humana](#) – October 16

[Why do some seniors choose Medigap over Medicare Advantage?](#) – October 16

[New Medicare Advantage navigation tool contains inaccuracies, faces hiccups as open enrollment begins](#) – October 16

[Here's what's really stopping Medicare Advantage from covering all of America's seniors](#) – October 15

[Big Changes Are Coming for 2026 Medicare Plans. What You Need to Know.](#) – October 15

[How to save on 2026 Medicare costs during open enrollment](#) – October 15

[Significant Social Security, Medicare changes backed by most Republicans](#) – October 14

[Insurers Are Cutting Medicare Advantage in 2026: Steps to Take If Your Provider Exits](#) – October 14

[Major health insurer dealt legal blow over Medicare Advantage ratings](#) – October 14

[Health in the Golden Years: What to know about this year's Medicare sign-ups](#) – October 14

[Lousy Medicare Insurance Is Worsening Outcomes For All Patients](#) – October 13

[What to Do About These Three Medicare Changes During Open Enrollment](#) – October 13

[Good or bad changes? Not your grandma's Social Security office anymore](#) – October 12

[Expert warns of looming Social Security cuts due to 1 powerful force no US politician controls — and Congress will fall to its knees. Prepare now](#) – October 11

[Prescription drug coverage options are shrinking for Medicare shoppers](#) – October 11

[Winners and losers from 2026 Medicare Advantage star ratings](#) – October 10

[Trump administration moves to fire HHS employees amid shutdown](#) – October 10

[Column: Elon Must Should Pay the Same Social Security Tax That You Do](#) – October 10

[Social Security update: New warning issued](#) – October 9

[Oz speaks out about shutdown, Medicaid cuts, Medicare Advantage audits and more](#) – October 7
[2 Major Healthcare Companies Are Ditching Medicare Advantage In These US Locations](#) – October 7
[White House Responds to Social Security Change Report](#) – October 6
[Sentara Health Plans no longer offering certain Medicare Advantage plans in 2026](#) – October 6
[US court rejects Novo Nordisk's challenge to Medicare drug pricing plan](#) – October 6
[Health insurers are reducing Medicare Advantage options next year](#) – October 6
[As Medicare open enrollment starts, beware health care cons coming your way](#) – October 5
[Medicare users could soon lose perks they love — like choosing their own doctor](#) – October 4
[Why fewer seniors are expected to enroll in Medicare Advantage next year — and opt for original Medicare instead](#) – October 4
[Doctors cancel telehealth appointments as Medicare coverage lapses](#) – October 3
[Why fewer seniors are expected to enroll in Medicare Advantage next year — and opt for original Medicare instead](#) – October 3
[Do retirees really need supplemental coverage with Original Medicare?](#) – October 3
[Major health insurers scaling back Medicare Advantage offerings in 2026](#) – October 2
[Medicare users could soon lose perks they love — like choosing their own doctor](#) – October 2
[Aetna Announces 2026 Medicare Advantage Plans](#) – October 2
[Humana's 2026 Medicare Advantage Plans with Expanded Benefits and Simplified Coverage](#) – October 2
[US health insurers reduce Medicare Advantage operations in 2026](#) – October 1
[180,000 Medicare beneficiaries could lose their UnitedHealth coverage](#) – October 1
[Another Shutdown Casualty: Medicare Telehealth Coverage](#) – October 1
[Telehealth flexibilities expire amid government shutdown](#) – October 1