MONDAY ALERT

New York State Alliance for Retired Americans

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August 4, 2025

NYSARA Biennial Election Convention

Date: September 4, 2025 10:30 am to 3:00 pm:

Place: NYSUT Headquarters 800 Troy Schenectady Rd. Latham, NY

Purpose: To Elect NYSARA Officers 2025 -2027, Get Information on Issues both nationally and Statewide that have impact on Seniors and Actions to take that have impact. Hearing from people who impact Seniors.

Keynote Speakers: Robert Roach, President National ARA (CONFIRMED), **Ravi Reddi, Senior Staff for US Senator Kirsten Gillibrand** (CONFIRMED), **Greg Olsen, Acting Director NYS Office for the Aging** (Requested) and **NYS Senator Patricia Fahy** (REQUESTED)

Candidates for Office: Barry Kaufmann - President, Paul Schuh - Vice President Labor, Secretary (Opportunity), Gary Lanahan - Treasurer **Nominations will be taken from the floor. Nominee MUST be present and a member of a Statewide payer**

Click to get Registration Form Due by 8/25/2025

Federal Updates

Bipartisan Congressional Budget Action Blocks Proposed Housing Cuts: From our colleagues at the New York Housing Conference: The

House and Senate have both advanced budget bills that reject the most harmful elements of the President's proposed cuts. The Senate bill increases HUD funding by $3.3 billion (to $73.3B), while the House bill proposes a $939 million decrease (to $67.8B). We're particularly concerned about underfunded housing vouchers, the elimination of the HOME program in the House bill, and cuts to public housing in both chambers. The looming funding cliff for 9,400+ Emergency Housing Vouchers in New York also remains unresolved. Amid this challenging climate, bipartisan support for housing remains strong—with progress seen in LIHTC expansion and the bipartisan ROAD to Housing Act. We urge Congress to adopt a final budget that fully funds HUD programs and protects housing access nationwide. Please see NYHC's full analysis here.

Congressional Engagement during August Recess: New York members of the Appropriations Committees should be contacted during the August recess. We recommend inviting them to visit your programs and highlight the impact of federal funding. Here are the key targets - Senate: Kirsten Gillibrand (D-NY); House: Adriano Espaillat (D-NY), Grace Meng (D-NY), Joseph Morelle (D-NY), Nick LaLota (R-NY).

Administration Shift: As previously reported, aging programs will move under the newly named Administration for Children, Families, and Communities (ACFC). According to our DC partners, the next priority is ensuring aging-focused leadership. The current nominee to lead ACFC is Alex Adams (Idaho).

Older Americans Act (OAA) Reauthorization Introduced: A bipartisan bill to reauthorize the OAA has been introduced by Sen. Bernie Sanders (I-VT) and Sen. Bill Cassidy (R-LA). Co-sponsors include: Rick Scott (FL), Kirsten Gillibrand (NY), Susan Collins (ME), Tim Kaine (VA), Markwayne Mullin (OK), Edward Markey (MA), Lisa Murkowski (AK), Ben Ray Luján (NM).

Senior Community Service Employment Program (SCSEP) Funding Delay and Advocacy: Funding for the Senior Community Service Employment Program (SCSEP) continues to be frozen by the Federal administration, putting over $400 million to low-income older adults in jeopardy. SCSEP provides paid, job-based training for low-income older adults, helping them enter or reenter the workforce through both online and on-the-job programs tailored to their needs. Please see a sample letter here that you can use to advocate to the US DOL.

More People are Enrolling in Medicare Advantage at High Cost to Medicare and Taxpayers

A new KFF report examines key trends in 2025 Medicare Advantage (MA) enrollment. MA has seen steady growth in recent years and since 2023 has accounted for more than half of all enrollees. At the same time, Medicare payments to MA plans continue to outpace Original Medicare (OM) spending, and transparency issues within MA hinder effective evaluations and beneficiary decision-making. These dynamics raise costs for beneficiaries and taxpayers, as well as questions about plan value and accountability.

Key Enrollment Trends

More than half of Medicare beneficiaries are enrolled in MA. In 2007, 19% of Medicare beneficiaries were enrolled in MA plans. In 2025, it has reached 54%. If current dynamics continue, the Congressional Budget Office (CBO) projects MA could cover 64% of beneficiaries by 2034.

Special needs plans (SNPs) comprise a growing share of MA Enrollment. Nearly 7.3 million Medicare beneficiaries are enrolled in Special Needs Plans (SNPs), MA plans designed to meet specific care needs; enrollees must meet the special needs category the plan serves like eligibility for both Medicare and Medicaid, or residence in a nursing home or other institutional facility. In 2025, SNPs continue to comprise a growing share of MA enrollment, accounting for 21% of enrollees compared with

14% in 2020. KFF notes this is consistent with "the increasing number of SNP plans available on average and more dual-eligible individuals having access to these plans since the Bipartisan Budget Act of 2018 made SNPs a permanent part of the Medicare Advantage program."

Group MA Plan Enrollment Holds Steady.

Currently, 17% of MA enrollees are in a group plan offered to retirees by an employer or union. Between 2010 and 2025, group enrollment hovered around 17–20% of the MA market, but the actual number of enrollees nearly tripled over that time period, from 1.8 million in 2010 to 5.7 million today.

MA enrollment remains highly concentrated among UnitedHealth and Humana.

In 2025, the average Medicare beneficiary can choose from MA plans offered by nine different parent organizations, similar to last year. And MA enrollment remains highly concentrated among a small number of those insurers. Together, UnitedHealth Group (29%) and Humana (17%) account for nearly half (46%) of MA enrollments nationwide; in more than a quarter of counties (26%) they cover at least 75% of enrollees.

UnitedHealth and Humana market dominance is consistent.

UnitedHealth Group has had the largest share of MA enrollment and largest growth in enrollment since 2010, increasing from 18% of all MA enrollment in 2010 to 29% in 2025. Humana has also had a relatively large share of MA enrollment, though it has been more stable, increasing from 16% in 2010 to 17% in 2025.

Advocacy for Better Medicare Advantage Policies

The Medicare Rights Center understands that ensuring access to optimal coverage options can make Medicare stronger now and in the future. We

will continue to advocate for greater MA payment accuracy and plan accountability, and for changes to improve the enrollee experience.

Missing Data Hamper Evaluation of Plan Quality

As MA covers an increasing share of beneficiaries, it is ever more important to evaluate how well the program serves those enrollees as compared to OM. The public must have the opportunity to better understand how much value Medicare, beneficiaries, and taxpayers are getting for plan payments. Policymakers must address the gaps in data that make these essential evaluations difficult, as well as hold plans accountable for their use of these funds and their obligations to enrollees.

Overpayments Threaten Medicare Sustainability

The shifting coverage landscape means concerns about MA costs are also growing in urgency. The research from independent experts is clear: Medicare overpays MA plans by billions of dollars each year, negatively impacting Medicare's finances while driving up beneficiary premiums and taxpayer costs.

In 2025 alone, the Medicare Payment Advisory Commission (MedPAC) estimates MA payments will be 20% higher—$84 billion more—than what Medicare would have spent to cover the same group of enrollees in OM. As KFF notes, these excess payments have ballooned alongside enrollment. They are "substantially larger than the $18 billion in higher spending a decade ago when about one-third of eligible beneficiaries were enrolled in a Medicare Advantage plan." Unless policymakers intervene, these overpayments will continue to climb with MA enrollment, unnecessarily undermining Medicare sustainability and beneficiary well-being.

Further Reading

Read the KFF report, Medicare Advantage in 2025: Enrollment Update and Key Trends.

Read more from Medicare Rights about MA history, payment, and policy.

Bessent Reveals Trump Accounts are a "Backdoor" to Privatizing Social Security

On Wednesday, Treasury Secretary **Scott Bessent** said that "Trump Accounts" created by the Republican budget bill are a "backdoor for privatizing Social Security," claiming they could eventually supplement or even replace the earned benefits. He later attempted to backtrack in a post on X, saying that the Administration is dedicated to protecting the program.

The private investment accounts will allow the federal government to provide $1,000 to babies born between 2025 and 2028. Parents would be able to contribute additional funding and would have to invest the money in stock funds.

Privatizing Social Security would put Americans' guaranteed benefits at risk at a time when seniors are heavily reliant on them to make ends meet. 65 percent of older Americans rely heavily on Social Security, up from 58 percent in 2010. The Administration has already taken multiple steps to weaken the earned benefit system, slashing the Social Security Administration workforce, making it harder for beneficiaries to file claims, and enacting a tax and budget plan that hastens the insolvency date of the Social Security Trust Fund by one year.

"Social Security isn't a handout. Americans work a lifetime to earn our

modest benefits," said **Richard Fiesta**, Executive Director of the Alliance, in a statement issued on Wednesday. "We will not let this or any administration cut or privatize Social Security without a fight."

As Medicare and Medicaid Turn 60, Retirees Fight Against Attempts to Cut Them

This Wednesday marked the 60th anniversary of Medicare and Medicaid, and Alliance members mobilized to protect the health care programs from the biggest threats they have faced since President Lyndon B. Johnson signed them into law in 1965.

72 million Americans are enrolled in Medicaid and more than 68 million are enrolled in Medicare. The recently passed Republican budget and tax plan included $930 billion in Medicaid cuts, which is likely to lead to the closure of more than 300 rural hospitals and one in four nursing homes across the country. It also included half a billion dollars in automatic, across the board cuts to Medicare.

Alliance members across the country marked the event with Protect Medicare and Medicaid rallies and press conferences. **William Spreter**, president of the central New York chapter of the New York State Alliance spoke during an event co-sponsored with Citizen Action last weekend. On Wednesday, the Nevada Alliance held a Protect Medicare rally in Reno and the Arizona Alliance executive director **Dora Vasquez** spoke at a news conference in Phoenix. The Illinois Alliance held four rallies on Wednesday, including a protest outside of Rep. **Darin LaHood**'s (IL) district office and a Hands Off Medicaid event with Rep. **Eric Sorensen** (IL). More events are scheduled in the coming days.

"Before Medicare and Medicaid, only half the nation's seniors had health insurance," said **Robert Roach, Jr.**, President of the Alliance. "We must stop the disastrous impacts that will result from these cuts. Now is the time to urge lawmakers to protect these essential programs."

Illinois Alliance members hold “Protect Medicaid” signs at a protest at Rep. LaHood’s office (top left); New York State Alliance members at their Medicare/Medicaid birthday event (middle); Ohio Alliance members holding signs at Medicare/Medicaid birthday event in Columbus (bottom left); Nevada Alliance rally in Reno on Wednesday (right)

Alliance Webinar Draws Attention to How Republicans’ “One Big Beautiful Bill” Will Hurt Older Americans

On Thursday, the Alliance hosted a special educational Zoom webinar entitled “The Ugly Truth About the ‘One Big Beautiful Bill,’” outlining the harms created by the Republican budget bill and next steps for fighting back.

The bill gives more than $4 trillion in tax cuts to the wealthiest Americans while increasing the federal deficit by more than $3 trillion, triggering automatic cuts of $490 billion from Medicare over the next ten years, weakening Medicare's ability to negotiate lower drug prices, gutting food assistance, and creating millions of job losses in the health care, agriculture, and clean energy manufacturing industries. It will also enact the largest Medicaid cut in history, endangering nursing home care, rural hospitals, and home and community based services like Meals on Wheels and senior centers.

"We need to continue to reach out and lobby and let people know what's going on and how all these cuts are going to impact Americans," said **David Simon,** Legislative Representative for the Alliance. "Statistics show that only 30 to 40 percent are even aware of this bill, so it's really important to go out and contact members of the media and Congress and make sure that people know what's happening."

Click here to watch the recording.

***KFF Health News*: Chronically Ill? In Kennedy's View, It Might Be Your Own Fault**
By Stephanie Armour

On a recent weekday evening, Ashly Richards helped her 13-year-old son, Case, with homework. He did math problems and some reading, underscoring how much he's accomplished at his school for children with autism.

Richards has heard Trump administration officials suggest that food dyes and pediatric vaccines cause autism and ADHD. That stance, she said, unfairly blames parents.

“There’s no evidence to support it,” said Richards, 44, a marketing director in Richmond, Virginia. “As a parent, it’s infuriating.”

In their zeal to “Make America Healthy Again,” Trump administration officials are making statements that some advocacy and medical groups say depict patients and the doctors who treat them as partly responsible for whatever ails them.