



# MONDAY ALERT

New York State Alliance *for* Retired Americans

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October 20, 2025

## BiWeekly Updates From Our Friends at LiveOn NY

**Government Shutdown:** The latest updates on the shutdown can be found [here](#). Since October 3, the federal government shutdown has continued with no resolution in sight, as the 10th vote to end the shutdown failed on Thursday. While essential services like Medicare and Social Security remain funded, programs such as SNAP and LIHEAP are funded only through the end of October. Federal workers who help process benefits and respond to public inquiries are furloughed, slowing service for many seniors who rely on these programs. Temporary legal action has blocked layoffs of additional federal employees for now. See [here](#) for a statement from the National Council on Nonprofits.

**Trump Administration Plans Deep Cuts to Social Security Disability Insurance, Particularly for Older Workers:** The Trump Administration is reportedly preparing a rule that could cut Social Security Disability Insurance (SSDI) eligibility by up to 20 percent—the largest reduction in the program's history. The change would make it much harder for people, especially those over 50, to qualify for SSDI or Supplemental Security Income (SSI), despite the law requiring age and education to be considered in eligibility decisions. Such cuts would primarily harm older workers with serious medical impairments, particularly in regions like the South, Appalachia, and the Rust Belt, where more residents rely on disability benefits. Experts warn the policy could deny aid to hundreds of thousands of people and strip benefits from current recipients, deepening economic hardship for vulnerable populations. [Read more here from CBPP.](#)

**SNAP Work requirements:** In a sudden policy shift, the Trump administration has accelerated the rollout of expanded work requirements for the

Supplemental Nutrition Assistance Program (SNAP), potentially cutting off food benefits for tens of thousands of New Yorkers as soon as November. States must now enforce the new rules by the first week of November—months earlier than expected—after the administration ended New York's waiver that had suspended work mandates until next year. Under the change, SNAP recipients aged 18-64 must prove they are working, volunteering, or in school for at least 80 hours per month to receive benefits beyond three months. Advocates and city officials warn that the move will force thousands off food assistance at a time of rising food costs and financial strain. [Please read more here](#) and [here](#).

***Advocacy Win: Senior Employment Program Funds Released!*** The U.S. Department of Labor has agreed to release more than \$300 million in grants for the Senior Community Service Employment Program (SCSEP) following a class action lawsuit that challenged the federal administration's freeze on the funds. SCSEP, a 60-year-old program, provides critical job training and employment opportunities for older Americans seeking to reenter the workforce. The Department had withheld funding from national nonprofits—responsible for running 75% of the program—claiming they were overly focused on diversity, equity, and inclusion (DEI). Thanks to continued advocacy from the Center for Workforce Inclusion and legal action led by Democracy Forward and Jacobson Lawyers Group, the Department has now reversed its decision. While the release of funds is still pending due to the ongoing government shutdown, this marks a major step toward restoring vital workforce supports for older adults. [Read more about the case here.](#)

## **No Kings Rallies For Democracy Draw 7 Million in All 50 States in America**

On Saturday afternoon an estimated crowd of approximately 600 people gathered across the street from the office of Republican Congressional Representative (NY 11) Nicole Malliotakis to protest against Trump administration policies. According to NYC Chapter President Barbara Waldmann, the participants included every age group from the very young to seniors who are unhappy with threats to Social Security, Medicaid and Medicare. The protest was an example of civic engagement and peaceful

resistance, with many participants waving American flags, holding banners and waving colorful signs. The major position of the speakers was that w"our forefathers overthrew King George Iii of England to form a republic almost 250 years ago and that we now need to protect our democracy from a president and members of his executive branch who have wontonly disregarded the purview of the other branches of government. Speakers also emphasized the importance of judicial independence to protect our democracy from executive overreach, as evidenced by the voluminous lawsuits against objectionable executive actions.

In the crowd were seniors who said they loved their country and were participating in their first demonstration ever to exercise their First Amendment right to free speech. They expressed shock at the use of the military in other cities and the violent tactics of ICE enforcers against American citizens and other peaceful residents.

After the rally many participants marched to nearby Clove Lakes Park in a celebratory mood to celebrate the success of their peaceful protest.

Also on Saturday approximately 2,000 people, including Congressman Paul Tonko, gathered at Congress Park in Saratoga Springs. Those people were a microcosm of our nation in terms of demographics both ethnic, background and age. The marched the length of Saratoga Springs and then rallied in Congress Park to hear speakers extoll the virtues of democracy over autocracy, reflect on the ICE actions taken and lament the administrations actions to limit free speech and follow the Constitution. These rallies were part of a national effort in all 50 States that drew approximately 7 million people, about 2 million more than the No Kings rallies in June. NYSARA members took part in these rallies across New York State.









Top picture from Saratoga Springs No Kings Rally  
 Bottom picture from Staten Island No Kings Rally

## **NYSARA President Speaks to NYSUT Long Island Retiree Councils About Senior Issues 2025 and Beyond – They Really DID Mean What They Said**

NYSARA President **Barry Kaufmann** Spoke to about 300 members of the Long Island NYSUT Retiree councils about the current circumstances for Seniors both federally and statewide. He spoke about Social Security diminution fact vs. fiction, Medicaid Cuts and their severe impact on Seniors, Upcoming Medicare Cuts, Cost Increases or MA Light, Union and Civil Service protections, Nutrition and

Housing, The Big “Ugly” Bill and ramifications to NYS, the impacts of the government shutdown and the Trump/DOGE cuts and what they mean. He went over how our representatives voted on the Big “ugly” bill. He finally explained why he was “preaching to the choir” and what actions we must take. He finally ended with the talking point we must repeat every time which is:

“How can you give massive tax breaks to millionaires, billionaires and multinational corporations while cutting healthcare and nutrition to working people and seniors?  
That’s not the America we know, nor the America we want”

## **Medicare Open Enrollment Begins Amid Uncertainty and Rising Costs for Seniors**

The period for Medicare beneficiaries to enroll in new plans or change their coverage began this Wednesday and continues through December 7. Beneficiaries can evaluate changes in their current plans as well as other plans offered in their area. They can also choose different or new coverage based on their needs.

Advocates say it is [especially important](#) for seniors to assess and update their coverage this year. Many Medicare Advantage and Medicare Supplement plans have increased maximum out-of-pocket costs – which represent the total amount patients will put toward their care during the year, including copayments.

It’s likely that many patients will lose access to preferred hospitals and/or doctors and will have fewer options for prescription drug coverage. Medicare insurers are offering fewer Part D plans and scaling back patient preferred organization (PPO) plans in favor of more restrictive health maintenance organization (HMO) plans.

*The Washington Post* reported Wednesday that a new online tool [launched by the Centers for Medicare & Medicaid Services](#) to help Medicare Advantage enrollees compare and contrast their options is riddled with conflicting and incorrect information about providers, and officials are scrambling to fix it.

“Prices are going up and options are shrinking this year, so it’s more important than ever for seniors to take the time to make sure their coverage fits their needs,” said **Robert Roach, Jr.**, President of the Alliance. “Beneficiaries can pay attention to star ratings and the ‘Medicare & You 2026’ handbook to make informed decisions.

They can also contact the State Health Insurance Assistance Program (SHIP) in their area for impartial guidance and resources.”

[Find your local SHIP office here.](#)

## **Why Do Some Seniors Choose Medigap Over Medicare Advantage**

As [Medicare open enrollment](#) kicks into high gear, millions of older adults are taking a fresh look at their health insurance options. For many, that means deciding between sticking with or switching to either a Medicare Advantage plan or a [Medicare supplemental insurance](#) policy, also known as Medigap. It's a choice that can shape not just monthly budgets but also how easily seniors can access the care they need.

At first glance, Medicare Advantage plans may seem like the obvious choice. Many offer low or \$0 monthly premiums and bundle extra perks like dental, vision and hearing coverage. For retirees living on fixed incomes, those features can be appealing. But despite the popularity of Medicare Advantage — [54% of all Medicare beneficiaries are enrolled in these plans](#) — a significant share of seniors continue to rely on Medigap coverage instead.

So what drives some seniors to choose Medigap coverage over Medicare Advantage plans? That answer typically comes down to what people value in their healthcare coverage. Below, we'll break down what to consider.

[Start comparing your Medicare supplemental coverage options online now.](#)

### **Why do some seniors choose Medigap over Medicare Advantage?**

Medigap plans work alongside Original Medicare, covering many of [the out-of-pocket costs that traditional Medicare doesn't](#), like deductibles, coinsurance and copayments. Medicare Advantage plans, on the other hand, replace Original Medicare with a private insurance plan that often comes with its own rules, networks and cost structures. Here's more on why many older adults opt for Medicare supplemental coverage over Medicare Advantage plans:

#### **Access to a wider network of doctors and hospitals**

One of the main reasons seniors opt for Medicare supplemental coverage is the flexibility to see any doctor or specialist who accepts Medicare, anywhere in the nation. There are no restrictive provider networks or referral requirements. For retirees who travel frequently, live in multiple states or simply want to keep their existing doctors, this nationwide access can be a major advantage.

Find out how Medigap can help fill in your Original Medicare coverage gaps today.

### **More predictable costs over time**

While Medigap plans typically have higher monthly premiums than Medicare Advantage plans, they tend to offer more stable and predictable out-of-pocket expenses. Depending on the plan type, like Plan G or Plan N, Medigap may cover nearly all of the costs left over after Medicare pays its share. For seniors managing chronic conditions or anticipating regular medical visits, that type of coverage predictability can be invaluable.

### **Fewer administrative hurdles**

Medicare Advantage plans often require beneficiaries to obtain prior authorizations before they can be approved for certain treatments or services, and these hurdles can sometimes lead to delays or denials for otherwise necessary medical care. Medigap paired with Original Medicare typically doesn't have these barriers, though, which makes it easier to access care when you need it.

### **Stable benefits year after year**

While Medicare Advantage plans can change their provider networks, cost-sharing rules and benefits annually, Medicare supplemental plans are standardized and don't change once you enroll. That type of stability can make long-term financial planning simpler and reduce the risk of unexpected coverage shifts.

### **How to decide between Medicare supplemental coverage and Medicare Advantage**

Both Medicare Advantage and Medigap have clear benefits and tradeoffs and the right choice often depends on your health needs, financial situation and lifestyle. Here's what to weigh as you're deciding which coverage option makes the most sense for your needs:



## **Consider your healthcare usage**

If you visit doctors frequently, need specialist care or expect ongoing medical costs, Medigap's more comprehensive coverage may make sense. On the other hand, if you're relatively healthy and want to minimize monthly premiums, a Medicare Advantage plan could be more cost-effective.

## **Think about where you receive care**

Seniors who split time between states or travel often may benefit more from Medigap's nationwide coverage. But if your care is primarily local and your providers are in-network, Medicare Advantage could work well.

## **Weigh long-term costs carefully**

While Medigap premiums can rise with age, Medicare Advantage plans can also change cost structures each year. Some seniors start with Advantage plans for the lower premiums and switch to Medigap later. However, in many states, switching to Medigap after your initial enrollment period may require medical underwriting, and you could be denied coverage or face higher premiums if your health has changed.

## **Factor in extra benefits**

Medicare Advantage plans often offer extras like dental, vision, fitness memberships or transportation services. If these are important to you, they might tilt the balance toward Medicare Advantage. Medigap focuses primarily on covering medical costs rather than additional perks.

## **The bottom line**

When choosing between Medicare Advantage and Medigap, there's no universal answer for retirees. Medigap appeals to many seniors because of its flexibility, predictable costs and stable coverage, while Medicare Advantage can be more affordable for those with limited healthcare needs or who value additional benefits.

When weighing your options during open enrollment, be sure to assess your health, budget and lifestyle carefully. By understanding the potential benefits and downsides of each option, you can select the coverage that best fits your unique situation and ensures you have the care you need at a cost you can manage.

## **NYS Statewide Senior Action Council Brings Together Leaders and Activists to Represent *the New Face of Aging* at Annual Conference**



NYSARA's Barbara Waldman and Stephen Madarasz chat with NYS Senate Aging Committee Chair Cordell Cleare following her address to the NYS Senior Action Council Conference in Saratoga Springs.)

NYSARA NYC Chapter President Barbara Waldman and NYSRA Executive Director Stephen Madarasz were among the participants in the New York State Senior Action Council's three day annual conference in Saratoga Springs last week.

Under the theme of the New Face of Aging, the event brought scores of leaders and

activists together from across New York to gain detailed insight into the challenges confronting Seniors, particularly the federal shutdown and the assault on Medicaid, Medicare and the Affordable Care Act.

The program also focused on the many ways that seniors can better coordinate efforts to organize around the issues and respond.

The program featured video addresses from Senators Chuck Schumer and Kirsten Gillibrand, New York State Comptroller Tom DiNapoli and a presentation from NYS Senate Aging Committee Chair Cordell Cleare (D - Harlem), who outlined Senate priorities for Seniors in the next session. They included: Housing, Health Care Workforce, Coordination and Expansion of existing programs and their benefits, Elder Parole and protecting Seniors from exploitation.

Learn more about the program: <https://www.nysenior.org/>

## **Capital District Chapter of NYSARA Plans Alzheimers Program - This Week**

Join fellow NYSARA members, and learn about the heartbreak and challenges of Alzheimer's Disease, how it affects individuals and families and how to access the help and resources you may need.

**Date:** Thrs. Oct. 23

**Time:** 1-2:30 pm

**Place:** Jos. Zaloga

American Legion Post

4 Everett Road

Albany, NY

**Guest Speaker: Bill Gustafson, Alzheimer's Association of New York State**

***Nearly 7 million Americans are living with Alzheimers - Come and Learn what you need to know!***



**Please RSVP to Jack Rohl : [jack\\_rohl@yahoo.com](mailto:jack_rohl@yahoo.com) or (518) 275-5073**

## **Reminder: Only Four Weeks Until the Alliance's Annual Retirement Security Symposium on November 19**

There's still time to register for our annual Retiree Security Symposium, *The Looming Retirement Security Crisis*, on Wednesday, November 19, 2025, from 9:00 AM to 4:00 PM at AFL-CIO headquarters in Washington, DC.

**Liz Shuler**, President of the AFL-CIO, and Rep. **John Larson** (CT), Ranking Member, House Committee on Ways and Means Social Security Subcommittee, have been invited to speak at the event.

Due to limited space, please RSVP at <https://tinyurl.com/Symposium111925> by November 1, 2025. A continental breakfast and lunch will be provided. The event will also be livestreamed. Respondents who RSVP to attend virtually will receive the link for the livestream.

If you have any questions, please contact Joni Jones at [jjones@retiredamericans.org](mailto:jjones@retiredamericans.org) / 202-637-5377.

## **States Take Action to Lower Drug Prices for Patients**

Last week, Colorado regulators [approved a novel legislative measure](#) to cap the price of Enbrel, a high cost prescription drug used to treat autoimmune diseases like rheumatoid arthritis. The state's Prescription Drug Affordability Board, created by the state legislature in 2021, previously found Enbrel's price to be "unaffordable."

The new measure bases Enbrel's lower cost on the reduced price negotiated for Medicare beneficiaries last year: \$2,355 for a 30-day supply, about a third of the previous list price of \$7,402 for the same supply. The board is also considering reducing costs for Stelara, a Johnson & Johnson drug used to treat Crohn's disease and plaque psoriasis and Cosentyx, a drug produced by Novartis to treat plaque psoriasis and similar illnesses.

Amgen, the drugmaker that produces Enbrel, attempted to block the legislation in a

lawsuit filed and ultimately dismissed last year. The corporation is expected to challenge the move in court again.

Other states have started their own efforts to lower drug prices for residents. At least 11 states have created their own prescription drug affordability boards, according to data from April 2024. Three other states are considering their own price limits: Maryland, Minnesota and Washington.

The local government in the District of Columbia also passed a law in 2005 that prohibits the sale of any patented drug being sold in the District at an excessive price. The pharmaceutical industry challenged the legislation and the court ultimately agreed that it clashed with patent laws.

"Americans pay the highest drug prices in the world, and the financial burden is especially great for seniors," said **Richard Fiesta**, Executive Director of the Alliance. "Medicare drug price negotiation passed under the Biden Administration provided relief on the federal level and it's wonderful to see states are working to further reduce costs for their residents."

## **Deepfake Ads Promoting Benefits for Seniors Explode on Meta Social Media Platforms**

[A new report](#) from the Tech Transparency Project identified 63 scam advertisers that spent \$49 million on fraudulent Instagram and Facebook ads promoting fake stimulus checks, government benefits, and healthcare payments, accounting for 150,600 political ads published in the last 12 months.

The ads use deepfake videos of important political figures or celebrities created with artificial intelligence tools to direct victims to fraudulent, malicious websites. One ad, published by the Relief Eligibility Center, targeted men and women over the age of 65 in more than 20 states and featured a deepfake video of President **Donald Trump** urging seniors to visit a website to get their "FREE \$5,000 check from Trump."

Advertisers that want to publish political ads on Meta in the United States are required to undergo an identity verification and authorization process, but that has not prevented fraudsters from finding new ways to evade detection for longer

periods using artificial intelligence and other tools.

Meta disabled 35 of the 63 fraudulent ad accounts, but only after they were able to publish dozens and sometimes even hundreds of ads that reached tens of thousands of potential victims. Six of the ad accounts spent over \$1 million before they were finally deactivated.

"This analysis is deeply concerning. The fact that these ads have proliferated so easily is unacceptable and we expect Meta to take immediate action to correct the situation," said **Joseph Peters, Jr.**, Secretary-Treasurer of the Alliance. "Older Americans and their loved ones should always use reliable sources to double check the accuracy of claims made in an advertisement on social media, rather than clicking on links directly."