State Senator Liz Krueger's
Health Insurance Updates & Resources

Dear Neighbor,

Many New Yorkers are struggling with a spike in health care costs due to the federal government's failure to renew ACA enhanced premium subsidies. And as a result of H.R. 1, passed by Congress last year, nearly 450,000 New Yorkers lost their Essential Plan coverage on July 1, and millions more with MAGI Medicaid will face mandatory work requirements and more frequent renewals beginning in 2027.

My office is frequently contacted by constituents struggling with a wide range of health care issues, regardless of the type of insurance they have or whether they are uninsured. My staff and I provide assistance with matters such as coverage denials, resolving medical bills, reducing high health care costs, opposing proposed premium rate increases, renewing benefits, and more.

This newsletter provides important Essential Plan and Medicaid policy updates, as well as resources to help you, your family, and your loved ones address health insurance issues and maintain access to needed health care services. The information in this newsletter is accurate at the time of printing, but federal policies may change, and more details will become available as State and local agencies work through how to implement the new federal requirements.

If you would like to be added to my email list, go to krueger.nysenate.gov/contact and click the button to sign up. As always, if you have any questions or need assistance, please contact my office at 212-490-9535 or lkrueger@nysenate.gov.

Best,

LK

NY STATE ESSENTIAL PLAN (EP)

The EP provides comprehensive health insurance with no monthly premiums or deductibles for low-income New Yorkers ages 19-64 who otherwise wouldn't have access to health insurance. New York residents ages 19-64 are eligible if they are citizens or lawfully present in the U.S.; not eligible for Medicaid, Child Health Plus, Medicare, or other health insurance; and have an income between 138% and 200% (previously 250%) of the federal poverty level.

You may apply to enroll in the EP anytime during the year. For information and enrollment help, call the Community Service Society at 212-254-8900 or NY State of Health at 855-355-5777, or visit nystateofhealth.ny.gov.

For assistance with coverage denials or medical billing disputes, please see the list of organizations and the services they provide in the *Resource Guide*.

Important Essential Plan Update: In response to the devastating funding cuts in H.R. 1, Governor Hochul determined last year that it was necessary to make changes to the EP in order to preserve health care for as many New Yorkers as possible. New York submitted a request to the federal government, which was approved, to revert to a previous version of the EP that had a lower income eligibility cap of 200% of the federal poverty level. As a result, individuals with EP coverage with incomes between 200-250% of the federal poverty level (between $31,920 and $39,900 for an individual) are no longer eligible as of July 1, 2026.

Along with many of my legislative colleagues, I tried to convince the Governor to include assistance in this year's State Budget for the hundreds of thousands of New Yorkers losing eligibility due to H.R. 1, but we were unfortunately unsuccessful. I joined more than 75 of my colleagues in a letter to the Governor, available online at bit.ly/EPLegLetter, strongly urging her to protect access to affordable health coverage.

Steps To Take If You Received Notification You Are No Longer Eligible for the EP Due to H.R. 1

If you are enrolled in the EP, you may have received notification by email or in the mail from NY State of Health and/or your health insurance carrier stating that your coverage would end on June 30, 2026. If you received a notice, please take the following steps to ensure that NY State of Health has accurate information and to maintain health insurance coverage:

- It is important to confirm that you are no longer eligible for the EP. The notice of coverage termination may have been sent in error if your income has decreased since you last applied for or renewed your coverage. To verify that NY State of Health has accurate information about your income and other personal information, call the Customer Service Center at 1-855-355-5777.

- If it is confirmed that you are no longer eligible for the EP, you are likely eligible for an ACA Qualified Health Plan (QHP) with a subsidy that will immediately reduce your monthly premiums. Please see the *ACA QHP* section of this guide for more details. If you are eligible for a QHP, you have until August 30, 2026, to enroll. You can request that any QHP plan you enroll in before August 30, 2026, has a retroactive start date of July 1, 2026, meaning health expenses incurred during that time will be covered by your new plan. It is important to investigate QHP options and enroll as soon as possible to obtain replacement coverage. The organizations listed below provide free assistance with selecting a QHP, as well as with determining if you are eligible for subsidies to reduce the monthly premium. Services are available in multiple languages and regardless of immigration status.

  Community Service Society (CSS)
  212-254-8900
  633 Third Avenue, 10th Floor, New York, NY 10017
  CSS is a non-profit organization that provides navigator services to help New Yorkers select the QHP that best fits their financial and health care needs. You can receive assistance in person or by phone.

  Chelsea Health Center
  303 Ninth Avenue, 1st Floor, New York, NY 10001
  NYC Health Department counselors are available to provide in-person health insurance enrollment assistance. The Chelsea Health Center is the location closest to Senate District 28. You can also receive assistance by calling 347-665-0214, by submitting a request online at surveymonkey.com/r/7BB62M3, or by texting "CoveredNYC" to 55676.

- If you do not qualify for or cannot afford an ACA QHP, you may be eligible to enroll in NYC Care. Please see the *NYC Care* section later in this guide for details.

MEDICAID FOR THOSE UNDER 65, NOT BLIND OR DISABLED (MAGI MEDICAID)

Medicaid provides comprehensive health insurance coverage to low-income adults ages 19-64 who meet the income requirements. There is no monthly premium or deductible and minimal co-pays. You may apply to enroll at any time during the year.

For more information and to enroll, call the Community Service Society at 212-254-8900 or the New York State of Health at 855-355-5777, or visit nystateofhealth.ny.gov.

Important MAGI Medicaid Update: Due to H.R. 1, people enrolled in MAGI Medicaid will need to satisfy a work requirement in order to maintain their benefits starting January 1, 2027, unless they qualify for an exemption. In addition, most MAGI Medicaid beneficiaries will also need to renew their benefits every six months, instead of yearly, beginning in 2027. Even though the vast majority of MAGI Medicaid recipients are working, states that have already implemented mandatory work requirements have seen a significant number of people lose coverage due to administrative hurdles and difficulty demonstrating compliance. I am extremely concerned that we will see a similar scenario play out in New York.

The federal Centers for Medicare & Medicaid Services released an Interim Final Rule last month providing specific details about the work requirements that can be viewed online at bit.ly/MAGI Medicaid. Public comments may be submitted until July 31, 2026.

If you, a loved one, or a friend are enrolled in MAGI Medicaid, I strongly encourage you to submit a public comment before July 31, 2026. The quickest way to submit a comment is online at regulations.gov/docket/CMS-2026-2047.

Who will be required to satisfy the work requirements?

Adults between the ages of 19 and 64 with MAGI Medicaid coverage are subject to the work requirement if they are not currently pregnant and have not been pregnant during the last 12 months, are not entitled to or enrolled in Medicare, and do not qualify for an exemption.

If the new requirements apply to you, you should expect to receive a notice in early fall by mail or email. It will provide information about what to expect and what you may need to do in the future, including how to meet the requirements. Visit info.nystateofhealth.ny.gov/stay-covered for updates.

What are the new work requirements?

Individuals will be required to complete at least 80 hours of qualifying activities per month, which may include working, volunteering, and/or participating in a job training program; enrolling in an educational program at least half-time; or earning a minimum monthly income of $580, which is the federal minimum wage multiplied by 80 hours.

Who is exempt from the work requirements?

While there may be changes, the Interim Final Rule includes conditions under which people are exempt, including those who are: pregnant, or were pregnant in the last 12 months; enrolled in Medicaid with a disability; diagnosed with a physical or mental health condition that makes it hard to meet the requirements; and parents, guardians, caretaker relatives, or family caregivers to a child under age 14 or a disabled individual. For a complete list of exempted individuals, please visit the NY State of Health website at info.nystateofhealth.ny.gov/stay-covered.

Changes to MAGI Medicaid Renewal

Currently, people enrolled in MAGI Medicaid must renew their benefits every 12 months. Due to H.R. 1, beginning in 2027, most MAGI Medicaid beneficiaries will need to renew every six months to maintain their coverage.

What should you do now if you are enrolled in MAGI Medicaid?

More details about the work requirements and what enrollees will need to do to satisfy them or to be approved for an exemption will be available later in the year. Whether you are enrolled in MAGI Medicaid through NY State of Health or the NYC Human Resources Administration (HRA), please make sure that the agency has your correct phone number, email, and home address so that you will receive important information.

- To update your contact information with NY State of Health, call 855-355-5777 (TTY: 800-662-1220), or log into your online account at nystateofhealth.ny.gov.
- To update your contact information with HRA, call 888-692-6116, or log into your Access HRA account online at a069-access.nyc.gov/accesshra/.
- To inquire when your Medicaid renewal is due, contact NY State of Health or HRA.

MEDICAID FOR THOSE 65+, BLIND, OR DISABLED (NON-MAGI MEDICAID)

Non-MAGI Medicaid provides secondary coverage for eligible low-income individuals who have Medicare. As the secondary payor, Medicaid covers medical services that are not covered by Medicare (dental care, eyeglasses, hearing aids, home care, and institutional care) and assists with Medicare premiums, deductibles, and co-payments. Non-MAGI Medicaid benefits must generally be renewed every 12 months.

If you are enrolled in Non-MAGI Medicaid, the work and renewal requirements described in the previous section on MAGI Medicaid do not apply to you.

You may apply at any time during the year. To apply, visit Access HRA at access.nyc.gov/, call the HRA Medicaid hotline at 718-557-1399, or go to one of the Manhattan Medicaid offices. To inquire when your Medicaid renewal is due, call the HRA Medicaid hotline or log into your Access HRA online account.

For assistance with Medicaid renewals, coverage denials, medical billing disputes, and other health care issues, please view the list of organizations and the services they provide in the *Resource Guide*.

ACA QUALIFIED HEALTH PLANS (QHPs)

QHPs are comprehensive health insurance plans available through the NY State of Health Marketplace, regardless of your age or health status. Monthly premiums, deductibles, and cost sharing vary based on income and the plan chosen. All QHPs must cover essential health benefits required under the federal Affordable Care Act.

You may be eligible for a premium tax credit that will reduce your monthly premiums right away. Premium subsidies are available to those who earn up to 400% of the federal poverty level. In 2026, that is up to $63,840 for an individual and $132,000 for a family of four.

You can enroll during the annual Open Enrollment Period or during a Special Enrollment Period (SEP). The dates of the Open Enrollment Period for 2027 will be announced later in the year. During enrollment, you can compare the cost of Bronze, Silver, Gold, and Platinum level coverage plans to determine which level of coverage will be the most cost-effective while meeting your health care needs. View a list of SEP qualifying life events at info.nystateofhealth.ny.gov/SpecialEnrollmentPeriods.

For more information and to enroll, call the Community Service Society at 212-254-8900 or NY State of Health at 855-355-5777, or visit nystateofhealth.ny.gov.

For assistance with reducing QHP premium costs, coverage denials, medical billing disputes, and other health care issues, please view the list of organizations and the services they provide in the *Resource Guide*.

CHILD HEALTH PLUS (CHP)

CHP provides health insurance for children with no annual deductible or co-payments. The monthly premium varies depending on household income and is $0 for families with lower incomes. See bit.ly/ChildHP.

Even if a parent who is enrolled in MAGI Medicaid loses their Medicaid coverage due to the new work requirements discussed above, if their child is enrolled in CHP, the child will remain enrolled in CHP.

For more information and to enroll, call NY State of Health at 855-355-5777, visit nystateofhealth.ny.gov, or call the Community Service Society at 212-254-8900.

For assistance with coverage denials or medical billing disputes, please view the list of organizations and the services they provide in the *Resource Guide*.

NYC CARE

NYC Care is a health care access program that provides free and low-cost services to NYC residents, regardless of immigration status, who do not qualify for or cannot afford health insurance based on federal guidelines. Services are provided at NYC Health + Hospitals locations, including 11 hospitals and dozens of community-based health centers. NYC Care enrollees receive a membership card to access primary and specialty health care services on a sliding fee scale, choose their own doctors, and get affordable medications and dental care.

For more information and to enroll, call 646-692-2273 or visit nyccare.nyc.

EMPLOYER-SPONSORED INSURANCE

Approximately 50% of New Yorkers receive health insurance through their employer. Employer-sponsored plans may be fully funded (employer purchases a health insurance policy to cover health care for employees) or self-funded (employer pays for health care for employees directly with its own assets, but may contract with a private health insurance company to administer the self-funded plan). It is important to know that many employer-sponsored health insurance plans are regulated by the federal government or by other states and are not subject to New York State insurance laws and protections (coverage requirements, continuation of coverage, network adequacy, rates, premiums, etc.). All plans, regardless of whether they are regulated by the federal government, other states, or New York State, must comply with the patient protections included in the federal Affordable Care Act.

For assistance with coverage denials, medical billing disputes, and other health care issues, please view the list of organizations and the services they provide in the *Resource Guide*.

MEDICARE

Medicare is a federal health insurance program for all citizens age 65 or above, and those under age 65 with certain disabilities. Medicare enrollees have the option to choose between Original Medicare or a Medicare Advantage Plan. Many beneficiaries are eligible for one of the savings programs that help pay premiums, deductibles, co-payments, and prescription drug costs for income-eligible New Yorkers.

There is an Initial Enrollment Period (IEP) for Medicare Parts A (hospital coverage) and B (medical coverage) when you turn 65. It is important to get Parts A and B, as well as Part D and Medigap coverage during the IEP, in order to avoid monthly late enrollment penalties, higher premium rates, and delays in coverage.

To ask questions about enrolling, call Medicare at 800-633-4227. Before enrolling, it is important to learn about Medicare coverage options. Please contact the organizations listed in the *Resource Guide* below for more information about plans and coverage options.

You can also contact organizations listed in the *Resource Guide* for assistance with reducing Medicare coverage costs, coverage denials, medical billing disputes, and other health care issues.

RESOURCE GUIDE

Community Service Society (CSS)
Hotline: 212-254-8900
cssny.org/programs/entry/community-service-society-navigator-network
CSS's navigator service helps New Yorkers enroll in free and affordable health insurance, including QHP Plans, the Essential Plan, and Medicaid. If you have a QHP plan, CSS can help with determining eligibility for premium subsidies. During Open Enrollment and Special Enrollment Periods, CSS can assist with comparing levels of coverage to select the most cost-effective QHP plan for your needs.

Community Health Advocates (CHA)
Hotline: 888-614-5400
communityhealthadvocates.org/
CHA is a program of CSS that helps New Yorkers with any type of insurance, or those who are uninsured, to navigate the health care system and access services. Staff can provide assistance with medical billing issues, appealing coverage denials, resolving medical debt, locating low-cost care, and more. CHA also helps consumers select the best Medicare prescription drug and Medigap coverage to reduce costs and determine if they are eligible for a Medicare Savings Program or a prescription drug savings program (EPIC or Extra Help). Call the hotline or email cha@cssny.org.

Health Insurance Information Counseling and Assistance Program (HIICAP)
NYC HIICAP Hotline: 212-602-4180
nyc.gov/site/dfta/services/health-insurance-assistance.page
HIICAP provides free information about Medicare coverage options, programs to reduce your premium and prescription drug costs, Medicaid Managed Care, and Medicare-Medicaid dual eligibility. Call for help with enrolling in Medicare during your Initial Enrollment Period and with making changes to Medigap, prescription drug, and other Medicare coverage during annual Open Enrollment periods. HIICAP can also assist with selecting cost-effective coverage and determining if you are eligible for a Medicare Savings Program or a prescription drug savings program (EPIC or Extra Help) to reduce your health care costs.

LiveOn NY Benefits Outreach and Assistance Program
212-398-5045
liveon-ny.org/benefits-outreach
Older adults can receive free and confidential screenings and application or renewal assistance with Medicaid, Medicare Savings Programs, prescription drug savings programs (Extra Help, EPIC), and more. To schedule a one-on-one appointment, call 212-398-5045, email benefits@liveon-ny.org, or fill out the form at liveon-ny.org/benefits-outreach.

Continues on next page.

RESOURCE GUIDE, CONTINUED

Medicare Rights Center (MRC)
Hotline: 800-333-4114
medicarerights.org/
MRC provides direct assistance to older adults and people with disabilities, as well as friends, family, caregivers, and professionals with Medicare questions or problems. Call for information about Medicare coverage, rights, and benefits, and for assistance with appealing Medicare coverage denials. Visit the Medicare Interactive website to make confident, informed choices about your coverage at medicareinteractive.org/.

NY State Attorney General (NYS AG)
Health Care Helpline: 800-428-9071
ag.ny.gov/resources/individuals/health-care-insurance
The NYS AG safeguards the rights of health care consumers by investigating and taking enforcement action against insurers, providers, drug companies, and other parties that engage in fraudulent, deceptive, or illegal practices. Call the helpline for assistance with getting access to care, resolving problems with insurance companies and health care providers, and learning about New York's consumer protection laws. You can also file a health care complaint online at pcf.ag.ny.gov/form/HCF.

NY State Department of Financial Services (DFS)
Consumer Hotline: 800-342-3736 or consumers@dfs.ny.gov
dfs.ny.gov/
DFS regulates and investigates complaints against health insurance providers that are subject to New York insurance law. New Yorkers can file consumer complaints against commercial plans related to prompt payment, reimbursement, coverage, network adequacy, benefits, rates, and premiums online at dfs.ny.gov/complaint. To oppose a proposed premium rate increase submitted to DFS for approval by your ACA QHP plan provider, your employer-sponsored plan provider, or your Medigap plan provider, submit a public comment within 30 days of receiving notification at myportal.dfs.ny.gov/web/prior-approval/submit-a-comment.

Senator Krueger's Older Adult Resource Guide
The guide includes detailed information about Medicare, MAGI Medicaid, Non-MAGI Medicaid, and information about savings programs, as well as many other resources for older adults, their family members, and caregivers. The guide is available online at nysenate.gov/senators/liz-krueger or by calling my district office at 212-490-9535 to receive a copy by mail.

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Albany, NY 12247

State Senator Liz Krueger's

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Health Insurance Updates & Resources 2026

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UPCOMING VIRTUAL TOWN HALLS

Major Changes Are Coming to the Student Loan System in 2026: Are You Prepared?

Sweeping federal policy changes are reshaping the student loan landscape for both new borrowers and those with existing loans. Join Senator Krueger and experts from the Community Service Society's Education Debt and Consumer Assistance Program to learn how these changes may affect your monthly payments, eligibility for loan forgiveness, and the amount you can borrow. Whether you are a student or parent borrower, this event will give you the insights and steps you need to adapt quickly and avoid costly surprises.

Tuesday, July 21, 6:30 p.m. - 7:30 p.m.

To RSVP and submit questions in advance, visit bit.ly/StudentLoans2026. You can also RSVP by emailing lkrueger@nysenate.gov or calling 212-490-9535.

New York State's Newly Enacted Medical Aid in Dying Law

Governor Hochul signed New York's Medical Aid in Dying Act into law earlier this year, and it will take effect on August 5. Join Senator Krueger and hear from Compassion & Choices about what this new end-of-life care option looks like, who is eligible, how eligible New Yorkers can access the law, and what care planning resources are available to patients, families, and the broader community.

Tuesday, July 28, 2 p.m. - 3 p.m.

To RSVP and submit questions in advance, visit bit.ly/MAID2026. You can also RSVP by emailing lkrueger@nysenate.gov or calling 212-490-9535.

To receive email updates on legislation, events, and resources, join my mailing list at krueger.nysenate.gov/contact or scan this QR code.