

Congress Should Reconsider Medicare Advantage as Seniors Lose Coverage

Citizens' Council for Health Freedom Calls on Congress to Restore Health Security by

Moving the Money Back to Original Medicare



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Corporate health plans are terminating Medicare Advantage coverage for

hundreds of thousands of senior

citizens while Medicare pays these corporations \$76 billion more this year than the same seniors would cost in Original Medicare.

Citizens' Council for Health Freedom (CCHF) is drawing attention to two facts about the instability in Medicare Advantage:

- Humana will cancel plans affecting approximately 600,000 senior citizens in 2027, Chief Financial Officer Celeste Mellet announced on the corporation's July 29 second-quarter earnings call. Humana dropped roughly 500,000 members going into 2026 when it left three states and 194 counties.
- UnitedHealthcare exited Medicare Advantage plans covering more than 600,000 members going into 2026, insurance division Chief Executive Officer Tim Noel announced on the corporation's second-quarter 2025 earnings call. UnitedHealthcare told investors in January it expected to lose 1.3 million members this year.

Medicare pays Medicare Advantage corporate health plans an estimated 14 percent more in 2026 — \$76 billion — than the same senior citizens would cost in Original Medicare, according to the March 2026 Report to Congress from the Medicare Payment Advisory Commission (MedPAC). Included is a record-high rebate averaging \$2,660 per enrollee, an extra payment above what the corporation bid to cover Medicare services. These corporations project spending 8 percent of their rebate dollars on administrative expenses and profit while terminating plans in markets where returns fall short.

Senior citizens pay for this. Federal law sets the Medicare Part B premium to cover 25 percent of Part B spending, and Medicare funds Medicare Advantage partly through Part B. MedPAC estimates Part B premiums will run \$11 billion higher in 2026 — about \$175 per person — including for senior citizens in Original Medicare, who receive none of the extra benefits their premiums buy.

"Why is Congress pushing seniors into coverage they could lose every year? And why is Congress paying these health plans so much extra money to provide so little security to seniors," asked Twila Brase, RN, PHN, president and co-founder of CCHF. "As Medicare runs out of money, 10,000 baby boomers enter the program every day expecting it to be there for the rest of their life. Congress should redirect the billions in Medicare Advantage base payments, rebates, and bonuses back to Original Medicare, where seniors have greater freedom to choose their doctors and hospitals at a lower cost to taxpayers."

CCHF points to reports of hospitals leaving Medicare Advantage networks, limiting treatment options and causing patients to travel farther for care:

- In 2026, 25 health systems are dropping or narrowing Medicare Advantage (MA) contracts, per Becker's Hospital Review. The Mayo Clinic left the networks of most UnitedHealthcare and Humana MA plans.
- A study published in JAMA in February 2026 found nearly 3 million Medicare Advantage enrollees — about one in 10 — had to find other coverage in 2026 after corporate health plans exited the markets where they lived. Senior citizens in rural areas lost Medicare Advantage plans at twice the rate of senior citizens in urban areas. Vermont saw the steepest disruption, where 92 percent of Medicare Advantage enrollees lost the plans they had chosen.

CCHF warns that senior citizens who leave Medicare Advantage may face another obstacle as they return to Original Medicare. In most states, Medigap insurers, which pay bills not paid by Original Medicare, are allowed to use medical underwriting, a review of a person's health history, to refuse to sell seniors a policy, except when federal guaranteed-issue protections apply.

"Medicare Advantage does not give senior citizens the health security they need," Brase said. "Unlike Original Medicare, there's no guarantee that the coverage will be there. Ultimately, Congress should give seniors the right to leave Medicare and buy a cost-effective, affordable major medical indemnity policy that will not leave them hanging every year."

CCHF urges senior citizens to read its free [Medicare How-To Guide](#) before the annual enrollment period opens on October 15.

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