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**The City of New York  
Community Board 8 Manhattan  
Health, Seniors, and Social Services Committee  
Thursday, November 7th, 2024 – 6:30 PM  
Conducted Remotely on Zoom**

**Minutes**

**Board Members Present:** Meryl Brodsky\*, Barbara Rudder, Ellen Polivy\*, Judy Schneider, and Todd Stein.

\*Public Member

**Approximate Number of Public Attendees:** 9

This meeting was called to order at 6:30 PM.

**Item 1: A discussion and explanation by Emily Whicheloe, Director of Education at the Medicare Rights Center, about the difference between Medicare, Medicare Supplemental Insurance, Medicare Advantage, and Medicaid, and updates to these plans.**

The senior community is besieged with ads and phone calls selling its Medicare products during this open enrollment period. Therefore, Community Board 8 Manhattan's Health, Seniors, and Social Services Committee invited Emily Whicheloe, Director of Education at the Medicare Rights Center, to explain the various options.

Original Medicare is a government-managed program that includes Part A and B. Part A covers hospital and other inpatient care such as rehab and hospice. Part B covers doctor visits and other outpatient care such as emergency ambulance transportation and preventative services such as colonoscopy, mental and speech, chiropractic services, etc. Traditional Medicare does not cover hearing, visual and dental care, alternative medicine, cosmetic procedures, nursing and homemaking care, private hospital rooms, non-emergency transportation, etc. The price of Medicare, or premiums, are standardized by the government and usually deducted from Social Security. In addition, a deductible is paid until the insurance kicks in, and a copayment of 20% is charged for medical costs. Supplementals of MediGap insurance can be purchased to cover the copayment.

Part D is separate drug insurance. Each insurance has a list of covered formulations or drugs with costs. The Inflation Reduction Act controls costs. Starting in 2025, out of pocket costs will be capped at \$2,000 and drug costs can be spread over the year. Currently, vaccines such as shingles are cost-free, and insulin is limited to \$35 per month.

Medicare Advantage, or Part C, is private insurance not administered through the government. It combines Parts A, B and D into one plan, and supplemental plans cannot be added. Although services such as eye, hearing, and dental care may be included, the coverage is usually minimal. There is an \$8,000 limit to out-of-pocket costs. The plan has different coverage and costs. The cost of insurance companies is high because they do a lot of advertising and agent payments, and therefore payment of providers may be less. All providers must be in network and need authorization for any specialty care.

**Item 2: Old Business**

No items of Old Business were discussed.

**Item 3: New Business**

No items of New Business were discussed.

The committee adjourned at approximately 7:50 PM

*Wilma Johnson and Barbara Rudder, Co-Chairs, Health, Seniors, and Social Services Committee*