

**Bridging Coverage & Care in 2026:
Medicare OOP Changes, MP3, and
Patient Financial Support**

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OBJECTIVES 2026 NCODA SPRING FORUM

1. Describe the key structural changes and impact on patient out-of-pocket costs of the 2026 Medicare Part D benefit.
2. Explain the purpose and structure of the Medicare Prescription Payment Plan (M3P), including patient participation benefits.
3. Identify common financial barriers and resources to support oncology patient access to therapy for those under the 2026 Medicare Part D redesign.
4. Discuss the roles of the oncology multidisciplinary team in supporting patients through Medicare coverage changes and affordability challenges.
5. Recognize key considerations for incorporating Medicare benefit changes and payment smoothing options into patient education and care coordination processes.




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DISCLOSURES 2026 MEDICARE PART D DESIGN CHANGES
SPRING FORUM

There are no relevant conflicts of interest to disclose for this presentation for the following planners and speakers of this CE activity:

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Agenda

- Introduction & Session Overview
- Medicare Part D Redesign (2026 Updates)
- Medicare Prescription Payment Plan (M3P)
- Financial Assistance & Affordability Resources
- Interdisciplinary Roles & Coordination
- Takeaways, Questions & Closing




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Q1

How familiar are you with the 2026 Medicare Part D redesign and M3P?

- a. Very familiar – actively using in practice
- b. Somewhat familiar – aware but not confident
- c. Limited familiarity – heard of changes but unclear
- d. Not familiar




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Why This Matters: Financial Toxicity in Oncology

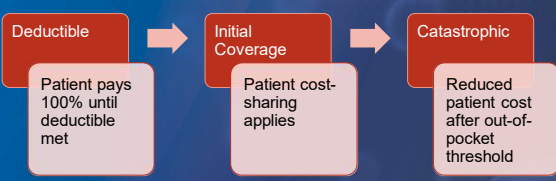
- High-cost therapies continue to drive patient financial burden
- Out-of-pocket costs remain a barrier to treatment access
- Coverage changes in 2026 aim to improve affordability
- Gaps in understanding and coordination still impact care

Centers for Medicare & Medicaid Services, Final CY 2026 Part D Redesign Program Instructions, CMS, 2025.
American Society of Clinical Oncology, Recommendations to reduce out-of-pocket costs for people with cancer // Clin Oncol. 2025.




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2026 Medicare Part D Benefit Structure



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graph LR; A[Deductible] --> B[Initial Coverage]; B --> C[Catastrophic];
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Centers for Medicare & Medicaid Services, Final CY 2026 Part D Redesign Program Instructions, 2025. <https://www.cms.gov/newsroom/press-releases/2025/02/250218-part-d-redesign-program-instructions>




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What Changed in 2026: Impact in Oncology Patients

- Introduction of an annual out-of-pocket (OOP) cap
- Simplified benefit structure across 3 phases
- Shift in financial responsibility across stakeholders
- Increased predictability for high-cost therapies
- Continued affordability challenges for oral oncology medications

Centers for Medicare & Medicaid Services, Final CY 2026 Part D Redesign Program Instructions, 2025.
American Society of Clinical Oncology, Recommendations to reduce out-of-pocket costs for people with cancer // Clin Oncol. 2025.




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What is the Medicare Prescription Plan (M3P)?

- Optional Medicare Part D program
- Allows patients to spread out-of-pocket costs over time
- Applies to covered prescription medications
- Designed to improve affordability through payment smoothing

Example:
\$3000 ➔ \$250/month

Center for Medicare & Medicaid Services, Final CTR 2025 Part D Package Program Instructions, 2025
Topic Center: Medicare Drug Guide, Updated 2025




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What M3P is NOT

- ✗ Does **NOT** reduce total medication cost
- ✗ Does **NOT** eliminate out-of-pocket responsibility
- ✗ Does **NOT** replace financial assistance programs
- ✗ Does **NOT** apply automatically (requires patient opt-in)

Center for Medicare & Medicaid Services, Final CTR 2025 Part D Package Program Instructions, 2025
Topic Center: Medicare Drug Guide, Updated 2025




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Q2

Which statement best describes a key limitation of the Medicare Prescription Payment Plan (M3P)?

- a. It reduces the total annual out-of-pocket cost for medications
- b. It eliminates the need for financial assistance programs
- c. It spreads out-of-pocket costs over time but does not reduce the total amount owed
- d. It automatically enrolls all Medicare beneficiaries

Center for Medicare & Medicaid Services, Final CTR 2025 Part D Package Program Instructions, 2025
Topic Center: Medicare Drug Guide, Updated 2025




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Key Considerations for Patients

- Monthly payments may still be significant
- Total out-of-pocket cost does not change
- Participation is optional and requires enrollment
- Understanding payment obligations is critical
- Additional financial support may still be needed

Centers for Medicare & Medicaid Services, Final CY 2026 Part D Prescription Program Instructions, 2025. Medicare Modernization Act, Update 2025.



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Financial Gaps Still Exist

- High total out-of-pocket costs remain
- Payment timing ≠ affordability
- Patients may delay or decline therapy
- Confusion around benefits and costs persists
- Additional support is often needed

American Society of Clinical Oncology, Recommendations to Reduce Out-of-Pocket Costs for People With Cancer, 2025. National Foundation, 2024 Annual Report.




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Financial Support in the 2026 Landscape

- Financial assistance remains essential despite Medicare redesign
- M3P addresses timing—but not total cost burden
- Demand for support continues for high-cost therapies
- Coordination across multiple resources is often required
- Early identification is critical to avoid delays in care

National Foundation, 2024 Annual Report. NCOA, Recommendations to Reduce Out-of-Pocket Costs, 2025.




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When to Consider Additional Financial Support


- High-cost oral or specialty therapies
- Early in treatment planning—not after delays occur
- Patient expresses concern about affordability
- Large upfront or first-fill costs anticipated
- Coverage understanding is unclear or incomplete

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Where Coordination Breaks Down



- Delayed Identification**
 - Financial risk recognized too late
- Gaps in Resource Awareness**
 - Support options not fully utilized
- Unclear Cost Communication**
 - Patients don't fully understand expectation
- Fragmented Workflows**
 - Multiple steps across teams without alignment

HealthWell Foundation, 2024 Annual Report
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Q3

Which of the following best reflects a key takeaway from the 2026 Medicare Part D redesign and M3P?

- M3P eliminates the need for financial assistance programs
- The Part D redesign removes all patient out-of-pocket costs
- M3P improves affordability by reducing total medication costs
- Coordinated use of benefit design, M3P, and financial assistance is needed to support patient access

HealthWell Foundation, 2024 Annual Report
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SUMMARY 2026 MEDICARE INTERNATIONAL SPRING FORUM

- Medicare Part D redesign improves structure—but not affordability alone
- M3P supports payment timing, not total cost reduction
- Financial assistance remains essential in the 2026 landscape
- Early identification and coordination are critical to patient access

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QUESTION & ANSWER 2026 MEDICARE INTERNATIONAL SPRING FORUM

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