



Mandatory Medicare Advantage

August 5, 2025

Most articles will tell you that Medicare Advantage is a good option for some people—its premiums are lower, sometimes free, and sometimes you get additional benefits like vision and dental care thrown in. The challenge comes when you find yourself needing care that is provided outside of what can be a very narrow provider network—surgical procedures, perhaps, or specialized care from a trusted provider that you’ve worked with for years. Unlike traditional Medicare, those out-of-network costs are born by the patient, in whole or in part. In addition, the Medicare Advantage Provider will have a thrifty evaluation team who will decide whether you really need the care or procedure that you think you need, and care denials are not uncommon.

People are free to weigh the costs and benefits of traditional vs. advantage—currently. But that might change in the future, if a new bill titled H.R. 3467, introduced by Congressman David Schweikert (R-AZ) passes Congress.

Under the proposed legislation, beginning in 2028, anyone entitled to Medicare benefits would be automatically enrolled in the lowest-premium Medicare Advantage plan available in their area. Chances are, this would lock them into a network that does not include the physicians they are accustomed to seeing and might not provide for any medical coverage away from home. The plan would decide which medications are covered, whereas now the participants can shop to make sure any expensive prescriptions are paid for.

The newly enrolled people would be allowed to opt out of the plan that was selected for them, but this could be complicated. And if they miss the window, they’re locked into the plan that they didn’t select for the next three years. No matter what changes the plan makes (raising the premiums, narrowing the networks, declining certain drug coverages, refusing to pay for needed procedures) the person would be required to stay in the plan selected for them—and keep paying for it.

It appears that the Medicare Advantage providers are growing impatient that not enough people are following Joe Namath’s advice into their for-profit systems. So they solved their marketing program by lobbying for a government-mandated funnel into their systems.

Sources:

<https://www.forbes.com/sites/dianeomdahl/2025/07/08/proposed-law-would-mandate-automatic-enrollment-into-medicare-advantage/>

If you have any questions about this article or want to discuss your family finances, investment portfolio, or financial planning advice, please call on me anytime at my number [\(215\) 325-1595](tel:2153251595) or you can [click here to schedule a meeting](#).

Please feel free to forward this article and offer to anyone you know who might have financial questions or need some unbiased advice. Most financial advice is sales advice. In stark contrast, we are fee-only (non-commissioned) fiduciary advisors. We just provide truthful, unbiased advice to our clients.



Jeffrey Broadhurst
MBA, CFA, CFP
Broadhurst Financial Advisors, Inc.



****PRIVACY NOTICE****

This message is intended only for the individual or entity to which it is addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable federal or state law. You are hereby notified that any dissemination, distribution, or copying of this communication, except in accordance with its intended purpose, is strictly prohibited.

Our physical and mail address:

1911 West Point Pike
P.O. Box 301
West Point, PA 19486-0301

Contact us:

Phone: (215) 325-1595
Email: jeff@broadhurstfinancial.com