

Retiree Healthcare Costs in 2026: What Every 65-Year-Old Needs to Know



Rising Costs and What They Mean for New Retirees

Retiree healthcare costs are climbing sharply in 2026. Fidelity's annual estimate now puts average lifetime health and medical expenses for a 65-year-old retiring this year at \$185,500, a 7.5% jump from last year, driven by rising costs for chronic condition management and greater utilization of medical services. Standard Medicare Part B premiums have also risen to \$202.90 per month, up from \$185 in 2025 — the largest year-over-year increase since 2022 — and the Part B deductible has climbed more than 10% alongside it.

A persistent knowledge gap compounds the cost pressure: 54% of pre-retirees mistakenly believe Medicare will cover all of their health expenses in retirement, leaving many unprepared for out-of-pocket costs. There is a bit of good news on the prescription side — Medicare Advantage Part D premiums are dropping about 4.5% to \$13.22/month and standalone Part D premiums are falling 2.2% to \$62.86 — though deductibles for those plans are rising 38% to \$434.47, largely offsetting the premium savings.





- Medicare Part B premium: \$202.90/month in 2026, up from \$185 in 2025.
- Average lifetime retiree health costs: \$185,500 for a 65-year-old retiring in 2026 (Fidelity).
- 54% of pre-retirees incorrectly believe Medicare covers all health expenses.
- Part D deductibles rising ~38% even as some premiums fall slightly.

ACTION ITEM: Review your Medicare Part D plan — lower premiums don't always mean lower total cost. Budget for out-of-pocket expenses beyond what Medicare covers, especially dental, vision, and long-term care. Replace garbled text in earlier drafts with this clarified reminder and ensure you compare both premiums and deductibles when open enrollment begins.



Breaking Down the Numbers: Premiums, Deductibles, and Lifetime Costs

Understanding how each component of retiree healthcare spending interacts can help you plan. The 7.5% jump in Fidelity's lifetime estimate to \$185,500 reflects both price inflation in services and higher utilization, especially for chronic conditions that require regular visits, diagnostics, and medications. For many retirees, this figure excludes long-term care, routine dental, and most vision expenses, which can materially increase total lifetime spending if not separately insured or budgeted.

Medicare Part B's increase to \$202.90/month in 2026 is significant for fixed-income households. The more-than-10% rise in the Part B deductible means your upfront outlays before Medicare pays its share will be higher. While some will welcome the modest relief on certain prescription plan premiums, the concurrent 38% deductible increase to \$434.47 for many Part D options may erase those savings for individuals with moderate medication needs.

Practical implication: when evaluating plans, compute an annual "all-in" estimate that includes premiums, expected deductibles, typical copays/coinsurance, and the cost of drugs you actually take. This holistic view prevents surprises and gives a realistic baseline for cash flow planning over the next 12 months and beyond.





Bridging the Knowledge Gap: What Medicare Does and Doesn't Cover

With 54% of pre-retirees incorrectly believing Medicare will cover all health expenses, education is essential. Original Medicare (Parts A and B) covers inpatient hospital and outpatient medical services but typically excludes routine dental, most vision and hearing care, and long-term custodial care. Even covered services often involve deductibles, copays, and coinsurance. Many retirees add a Part D prescription plan and either a Medigap policy or a Medicare Advantage plan to help manage these gaps, but trade-offs remain in provider access, out-of-pocket limits, and formularies.

The apparent good news on premiums — Medicare Advantage Part D premiums at about \$13.22/month and standalone Part D at \$62.86 — needs context. Formularies can change annually, potentially moving your medications into higher tiers that raise your costs despite lower premiums. Rising deductibles to \$434.47 mean you will shoulder more at the start of the year, which can feel like a cash flow shock if not anticipated.

- Review your current medications and check each plan's formulary tier and prior authorization rules.
- Estimate annual costs: premiums + deductible + copays/coinsurance for your medicines and expected visits.
- Budget separately for non-covered services like dental cleanings, crowns, eyeglasses, and hearing aids.
- Consider an emergency cushion for unexpected diagnostics or specialist referrals tied to chronic condition management.

