

# Medicare Supplemental Insurance Policies

If you choose the Original Medicare Plan rather than a Medicare Managed Care Plan or Private Fee-for-Service Plan, you may decide that you need more coverage than Medicare provides. Medicare Supplemental Insurance (Medigap) policies only work with the Original Medicare Plan.

**Many private insurance companies sell Medigap policies for the specific purpose of filling the gaps in Original Medicare Plan coverage.** Similar coverage may also be available to retirees through an employer or union health plan. Other types of insurance may also be available to you.

In all States except Minnesota, Massachusetts, and Wisconsin, Federal law requires insurers to sell you Medigap policies that are one of 10 standard supplemental policies. These 10 types of policies must be labeled with the letters A through J, to make it simple for consumers to compare policies. The chart on the back lists each of the policies and gives basic information on what they cover. State law may limit the types of policies that are actually sold in your State. These policies may pay for some or all of the Medicare coinsurance amounts; some or all deductibles; and certain services not covered by the Original Medicare Plan at all. These may include outpatient prescription drugs, some preventive

screenings, some care in your home, and emergency medical care for travel outside the United States. Some policies provide coverage of health care provider charges over the amount Medicare will pay.

Medicare SELECT refers to a type of Medigap policy. It must meet all of the requirements that apply to a Medigap policy, and it must be one of the 10 standard benefit packages. The only difference is that a Medicare SELECT policy may require you to use doctors and hospitals within its network in order for you to be eligible for full benefits. Because of this limitation, a Medicare SELECT policy will generally have a lower premium than a standard Medigap policy.

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**For more information on Medicare Supplemental Insurance (Medigap) policies, call your State Insurance Department or call the Medicare Hotline (1-800-638-6833) and request a copy of *The Guide to Health Insurance for People with Medicare*. This guide is also available on the Internet at [www.medicare.gov](http://www.medicare.gov). Your local library or senior center may be able help you get this information on their computers.**



# Chart of the Ten Standard Medicare Supplemental Insurance Policies

Medicare supplemental insurance policies can be sold in only 10 standard plans. This chart shows the benefits included in each plan. Every company must make Plan A available. Some plans may not be available in your State.

## Basic Benefits Include:

- Hospitalization: Part A coinsurance plus coverage for 365 additional days after Medicare benefits end.
- Medical Expenses: Part B coinsurance (generally 20% of Medicare-approved expenses).
- Blood: First 3 pints of blood each year.

| A             | B                 | C                           | D                           | E                           | F*                          | G                           | H                                 | I                                 | J*                                   |
|---------------|-------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------------|-----------------------------------|--------------------------------------|
| Basic Benefit | Basic Benefit     | Basic Benefit               | Basic Benefit               | Basic Benefit               | Basic Benefit               | Basic Benefit               | Basic Benefit                     | Basic Benefit                     | Basic Benefit                        |
|               |                   | Skilled Nursing Coinsurance | Skilled Nursing Coinsurance | Skilled Nursing Coinsurance | Skilled Nursing Coinsurance | Skilled Nursing Coinsurance | Skilled Nursing Coinsurance       | Skilled Nursing Coinsurance       | Skilled Nursing Coinsurance          |
|               | Part A Deductible | Part A Deductible           | Part A Deductible           | Part A Deductible           | Part A Deductible           | Part A Deductible           | Part A Deductible                 | Part A Deductible                 | Part A Deductible                    |
|               |                   | Part B Deductible           |                             |                             | Part B Deductible           |                             |                                   |                                   | Part B Deductible                    |
|               |                   |                             |                             |                             | Part B Excess (100%)        | Part B Excess (80%)         |                                   | Part B Excess (100%)              | Part B Excess (100%)                 |
|               |                   | Foreign Travel Emergency    | Foreign Travel Emergency    | Foreign Travel Emergency    | Foreign Travel Emergency    | Foreign Travel Emergency    | Foreign Travel Emergency          | Foreign Travel Emergency          | Foreign Travel Emergency             |
|               |                   |                             | At Home Recovery            |                             |                             | At Home Recovery            |                                   | At Home Recovery                  | At Home Recovery                     |
|               |                   |                             |                             |                             |                             |                             | Basic Drug Benefit (\$1250 Limit) | Basic Drug Benefit (\$1250 Limit) | Extended Drug Benefit (\$3000 Limit) |
|               |                   |                             |                             | Preventive Care             |                             |                             |                                   |                                   | Preventive Care                      |

\*Plans F and J also have a high deductible option. These high deductible plans offer the same benefits as plans F and J. You must pay a deductible of \$1,500 per year before the policy pays anything. There are also additional deductibles that must be met including a separate prescription drug deductible of \$250 per year for Plan J and a separate foreign travel emergency deductible of \$250 per year for Plans F and J.