

# Medigap Policies

## Medigap plans

Medigaps are health insurance policies that offer standardized benefits to work with Original Medicare (not Medicare Advantage). They are sold by private insurance companies. If you have a Medigap, it pays part or all of certain remaining costs after Original Medicare pays first. Medigaps may also cover health care costs that Medicare does not cover at all, like care received when traveling abroad.

Remember, Medigaps only work with Original Medicare. If you have a Medicare Advantage Plan, you cannot buy a Medigap.

## Choosing a Medigap policy

Insurance companies may offer up to 10 different Medigap policies to choose from: A, B, C, D, F, G, K, L, M, and N. Each lettered policy is standardized. This means that all policies labeled with the same letter have the same benefits, no matter which company provides them, though prices vary. Companies are not required to offer all 10 standardized Medigap policies, meaning some may be unavailable in your state.

Listed below are things you should consider when choosing a Medigap plan. Make sure to review the Medigap plan benefits chart for additional information. Note: Massachusetts, Minnesota, and Wisconsin have different Medigap plans.

- Plan A offers the most basic coverage, covering a core set of coverage gaps, but it is often the least expensive.
- Plans F, C, and G are the three most comprehensive Medigaps, but they generally cost more.
- Plans F and C are only available to you if you were newly eligible for Medicare before January 1, 2020.
- Medigap plans are guaranteed renewable. That means that as long as you pay the premium, you can keep your plan. However, premiums may change yearly.
- Shop around. Different insurance companies charge different premiums for the exact same policy.
- Contact your State Health Insurance Assistance Program (SHIP) to learn when you can purchase a Medigap in your state. Call 877-839-2675 or visit [www.shiphelp.org](http://www.shiphelp.org) to contact your local SHIP.

# Medigap policy benefits

For policies sold on or after June 1, 2010

	A	B	C	D	F*	G*	K**	L**	M	N
<b>Hospital copayment</b> Copays for days 61-90 (__) and days 91-150 (__) in hospital; Payment in full for 365 additional lifetime days.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
<b>Part B coinsurance</b> Coinsurance for Part B services such as doctors' services, laboratory and x-ray services, durable medical equipment, and hospital outpatient services.	✓	✓	✓	✓	✓	✓	50%	75%	✓	Except \$20 for doctors visits and \$50 for emergency visits
<b>First three pints of blood</b>	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
<b>Hospice care</b> Coinsurance for respite care and other Part A-covered services	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
<b>Skilled nursing facility (SNF) copay</b> Covers ___ a day for days 21-100 each benefit period.			✓	✓	✓	✓	50%	75%	✓	✓
<b>Hospital deductible</b> Covers ___ in each benefit period.		✓	✓	✓	✓	✓	50%	75%	50%	✓
<b>Part B annual deductible</b> Covers ___ (Part B deductible)			✓		✓					
<b>Part B excess charges</b> 100% of Part B excess charges (Under federal law, the excess limit is 15% more than Medicare's approved charge when provider does not take assignment)						✓	✓			
<b>Preventive care</b> 100% of coinsurance for Part B-covered preventive care services after the Part B deductible has been met	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
<b>Emergency care outside the U.S.</b> 80% of emergency care costs during the first 60 days of each trip, after an annual deductible of \$250, up to a maximum lifetime benefit of \$50,000.			✓	✓	✓	✓			✓	✓

Plans C and F are only available to you if you became newly eligible for Medicare before January 1, 2020.

\*Plans F & G also offer a high-deductible option. You pay a \$2,370 deductible in 2021 before Medigap coverage starts.

\*\*Plans K and L pay 100% of your Part A and Part B copays after you spend a certain amount out of pocket. The 2021 out-of-pocket maximum is \$6,220 for Plan K and \$3,110 for Plan L.

This chart doesn't apply to Massachusetts, Minnesota, and Wisconsin. Those states have their own Medigap systems.