

Medicare Supplement Fact Sheet

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What is a Medicare Supplement?

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Medicare Supplement Insurance, or Medigap, is an insurance policy sold by private companies. It is designed to work in conjunction with Medicare Part A and B. A separate Part D plan is needed for the drug coverage. In order to have comprehensive coverage a person should enroll in all 4 components (see Option 1 below).

Option 1 - Part A, Part B, Medicare Supplement and Part D



What do Supplements Cover?

Medicare Supplements cover the same items Medicare Parts A and B cover. Medicare pays first and pays most of your healthcare costs. Medicare Supplements pay second and help you pay your share (co-pays/deductibles) of the bill. Supplements do NOT cover prescriptions. A separate Part D plan is needed for drug coverage.

There are ten standardized plans. Standardized means, regardless of the company selling a specific plan (Plan G for example) each offers the same benefits. A Plan G from one company covers the exact same items as a Plan G from all other companies. Each of the 10 plans cover different services. These plans are listed on the back.

How much do Supplements Cost?

The monthly premium for a supplement is based on your age, where you live, tobacco use, gender and the coverage you select. A policy with less coverage (like a plan K) is typically less expensive than a policy that offers more coverage (like a plan G). There is also a wide range between companies selling the same policy. **For example, a Plan G policy at age 65 ranges from \$86 - \$282 monthly**, depending on the company you choose.

When can I get a Supplement?

Everyone has a once in a lifetime guaranteed opportunity to purchase a Medicare Supplement. This guarantee happens when a **person is 65 or older and first enrolls in Medicare Part B**. You get six months from the date your Part B starts to choose any supplement from any company. During these six months, companies cannot turn you down due to your health. **If you apply for a policy after your six month period is over or if you are under 65, companies may refuse coverage because of health reasons.**

How do I sign up for a Supplement?

Medicare Supplements are sold by private insurance companies. The Nebraska SHIP can give you information on your Supplement options, including monthly premiums. Once you have selected the company you would like to be insured with you can contact the company directly or work with a local insurance agent to enroll.

For a personalized comparison, including available companies and monthly premiums, please contact the Nebraska SHIP at 1-800-234-7119 or doi.shiip@nebraska.gov.

2019 Medicare Supplement Options

Each Medicare Supplement Plan offers a specific list of benefits. Plan G from one company must offer the same benefits as Plan G from all other companies. Since each plan's benefits are identical from company to company, premium comparison and special conditions are important to consider when choosing a policy that is right for you.

BENEFITS	PLAN A	PLAN B	PLAN C	PLAN D	PLAN F*	PLAN G	PLAN K	PLAN L	PLAN M	PLAN N
Part A Hospital Coinsurance, days 61-90 (\$341 per day)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Hospital Lifetime Reserve, days 91-150 (\$682 per day)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
365 More Hospital Days-100%	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Parts A and B Blood	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Part B Medical Coinsurance (20%)	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓ ¹
Part A Hospice Coinsurance	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Skilled Nursing Facility Coinsurance, days 21-100 (\$170.50 each day)			✓	✓	✓	✓	50%	75%	✓	✓
Part A Hospital Deductible (\$1,364)		✓	✓	✓	✓	✓	50%	75%	50%	✓
Part B Medical Deductible (\$185)			✓		✓					
Part B Excess Charges (15%)					✓	✓				
Foreign Travel Emergency			✓	✓	✓	✓			✓	✓
Out-of-Pocket Limit							\$5,560	\$2,780		

¹ Plan N pays 100% Part B coinsurance except \$20 copay for office visits and \$50 copay for ER visits.

***High Deductible Plan F Policy**—The High Deductible Plan F policy offers the same coverage as a Plan F policy once an annual deductible has been met (\$2,300 deductible in 2019). Prior to meeting the deductible, you are responsible for the costs listed on the left of the above chart. These costs will go towards the annual deductible.

Nebraska Senior Health Insurance Information Program
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