



# CARDINAL ADVISORS

## Medicare Supplement (Medigap)-Plan G-HDG-Plan N

Hans and Tom use a few pages of the 2024 Choosing a Medigap Policy book to discuss Medicare.

MEDICARE SUPPLEMENT (MEDIGAP)-PLAN G-HDG-PLAN N									
-STANDARDIZED PLANS-A,B,C,D,F,G,K,L,M,N-POLICIES IDENTICAL EX. MASS, MINN, WISC.									
-AGE 70, FEMALE, NON-SMOKER, SINGLE-EXAMPLE RATES									
DURHAM, N.C.					ORLANDO, FL.				
	G	HDG	N		G	HDG	N		
MEDICO	\$124.32	\$42.89	\$91.26	MEDICO	\$272.37	\$75.17	\$163.16		
AETNA	\$128.03	\$47.15	\$92.96	AETNA	\$245.07		\$166.93		
CIGNA	\$132.85		\$146.90	CIGNA	\$197.48	\$67.99	\$146.75		
HUMANA	\$136.16	\$44.18	\$87.99	HUMANA	\$216.92	\$75.66	\$166.79		
AARP/UHC	\$138.28		\$99.70	AARP/UHC	\$246.88	\$62.26	\$211.07		
MUTUAL OF OMAHA	\$164.11	\$39.40	\$109.99	MUTUAL OF OMAHA	\$215.47	\$81.88	\$162.76		
AARP/UHC RATED	\$247.15		\$234.05	AARP/UHC RATED					
UNITED AMERICAN	\$310.00	\$51.00	\$303.00	UNITED AMERICAN	\$292.00	\$77.00	\$215.00		

  

<p>PLAN G - COINSURANCE/DEDUCTIBLES - EXCEPT \$257</p> <p>HDG - SAME PLUS \$2,870 HIGH DEDUCTIBLE</p> <p>PLAN N - \$257 PART B + COPAYMENTS + EXCESS CHARGES</p>	<p>- PLAN F IF 71+</p> <p>- BIRTHDAY RULE IN SOME STATES</p> <p>- PRESCRIPTION DRUGS SEPARATE</p>
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- CONSIDER CHANGING SUPPLEMENTS EVERY 3 YEARS
- PURCHASE SEPARATE/PRIVATE LONG-TERM CARE INSURANCE, DENTAL, VISION, AND HEARING
- MEDICAL UNDERWRITING QUESTIONS
- DISCOUNTS WOMEN, NON-SMOKERS, MARRIED PEOPLE, PAYING YEARLY, MULTIPLE POLICIES

INCOME

ESTATE

TAXES

S.S.

MED

LTC

401K/IRA

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# 2024

## Choosing a Medigap Policy:

A Guide to Health Insurance for People with Medicare



**This official government guide has important information about:**

- Medicare Supplement Insurance (Medigap)
- What Medigap policies cover
- Your rights to buy a Medigap policy
- How to buy a Medigap policy



Developed jointly by the Centers for Medicare & Medicaid Services (CMS)  
and the National Association of Insurance Commissioners (NAIC)

## SECTION

# Medigap Basics

## 2

### What's Medigap?

Medicare Supplement Insurance (Medigap) is extra insurance you can buy from a private health insurance company to help pay your share of out-of-pocket costs in Original Medicare, like copayments, coinsurance, and deductibles. Generally, you must have Original Medicare to buy a Medigap policy.

Some Medigap policies cover services that Original Medicare doesn't cover, like emergency medical care when you travel outside the U.S. (foreign travel emergency care). Medigap policies don't cover your share of the costs under other types of health coverage, including Medicare Advantage Plans, stand-alone Medicare drug plans, employer/union group health coverage, Medicaid, or TRICARE.

If you have a Medigap policy and get care, Medicare will pay its share of the Medicare-approved amount for covered health care costs. Then, your Medigap policy will pay its share. Medicare doesn't pay any of the costs of buying a Medigap policy.

A Medigap policy is different from a Medicare Advantage Plan (Part C). A Medicare Advantage Plan is another way to get your Medicare coverage besides Original Medicare, while a Medigap policy only helps pay for the costs that Original Medicare doesn't cover.

Insurance companies generally can't sell you a Medigap policy if you have coverage through a Medicare Advantage Plan or Medicaid.

Every Medigap policy must follow federal and state laws designed to protect you, and policies must be clearly identified as "Medicare Supplement Insurance." **All Medigap policies are standardized. This means, policies with the same letter offer the same basic benefits no matter where you live or which insurance company you buy the policy from.** There are 10 different types of Medigap plans offered in most states, which are named by letters: A–D, F, G, and K–N. In Massachusetts, Minnesota, and Wisconsin, Medigap policies are standardized in a different way.

Words in blue are defined on pages 49–50.

## What Medigap policies cover

The information on page 11 gives you a snapshot of the standardized Medigap plans available. You can also find out which insurance companies sell Medigap policies in your area by visiting [Medicare.gov/medigap-supplemental-insurance-plans](https://www.Medicare.gov/medigap-supplemental-insurance-plans).

If you need help comparing and choosing a policy, call your [State Health Insurance Assistance Program \(SHIP\)](#) for help.

- All insurance companies that sell Medigap policies must offer at least Medigap Plan A. If they want to offer more policies, they must also offer either Plan C or Plan F to people who were eligible for Medicare before January 1, 2020, but haven't yet enrolled. People new to Medicare on or after January 1, 2020 have the right to buy Plan D or G instead of Plan C or F. Not all types of Medigap policies may be available in your state.
- Since January 1, 2020, Medigap plans sold to people new to Medicare can no longer cover the Part B deductible. Because of this, **Plans C and F aren't available to people new to Medicare on or after January 1, 2020.**
  - If you already have either of these two plans (or the high deductible version of Plan F) or you were covered by one of these plans before January 1, 2020, you'll be able to keep your plan. If you were eligible for Medicare before January 1, 2020, but haven't yet enrolled, you may be able to buy one of these plans.
  - For this situation, people new to Medicare are people who turned 65 on or after January 1, 2020, and people who get Medicare Part A (Hospital Insurance) on or after January 1, 2020.
- Plans D and G with coverage starting **on or after** June 1, 2010, **have different benefits** than Plans D or G bought **before** June 1, 2010.
- **Plans E, H, I, and J are no longer sold**, but if you already have one, you can generally keep it.

In Massachusetts, Minnesota, and Wisconsin, Medigap policies are standardized in a different way. (Go to pages 42–44.) In some states, you may be able to buy another type of Medigap policy called [Medicare SELECT](#). These are standardized plans that may require you to use hospitals and, in some cases, doctors within its network to be eligible for full benefits. (Go to page 19.)

This shows basic information about the different benefits Medigap plans cover.

Benefits	Medicare Supplement Insurance (Medigap) Plans									
	A	B	C	D	F*	G*	K	L	M	N
Part A coinsurance and hospital costs up to an additional 365 days after Medicare benefits are used	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part B coinsurance or copayment	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓ ***
Blood benefit (first 3 pints)	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Part A hospice care coinsurance or copayment	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Skilled nursing facility care coinsurance	X	X	✓	✓	✓	✓	50%	75%	✓	✓
Part A deductible	X	✓	✓	✓	✓	✓	50%	75%	50%	✓
Part B deductible	X	X	✓	X	✓	✓	X	X	X	X
Part B excess charge	X	X	X	X	✓	✓	X	X	X	X
Foreign travel emergency (up to plan limits)	X	X	80%	80%	80%	80%	X	X	80%	80%

Out-of-pocket limit in 2024**	
\$7,060	\$3,530

✓ = The plan covers 100% of this benefit  
 X = The plan doesn't cover this benefit  
 % = The plan covers that percentage of this benefit, and you're responsible for the rest.

\* Plans F and G offer a high-deductible plan in some states (Plan F isn't available to people new to Medicare on or after January 1, 2020.) If you get the high-deductible option, you must pay for Medicare-covered costs (coinsurance, copayments, and deductibles) up to the deductible amount of \$2,800 in 2024 before your policy pays anything, and you must also pay a separate deductible (\$250 per year) for foreign travel emergency care.

\*\*Plans K and L show how much they'll pay for approved services before you meet your out-of-pocket yearly limit and Part B deductible (\$240 in 2024). After you meet them, the plan will pay 100% of your costs for approved services for the rest of the calendar year.

\*\*\* Plan N pays 100% of the costs of Part B services, except for a copayment of up to \$20 for some office visits and up to a \$50 copayment for emergency room visits that don't result in an inpatient admission.

## What Medigap policies don't cover

Medigap doesn't cover everything. Medigap policies generally don't cover:

- Long-term care (like non-skilled care you get in a nursing home)
- Vision or dental care
- Hearing aids
- Eyeglasses
- Private-duty nursing

## Types of insurance that aren't Medigap policies

- Medicare Advantage Plans (also known as Part C)
- Medicare drug plans (Part D)
- Medicaid
- Employer group health plans (including Federal Employees Health Benefits (FEHB) Program, retiree or COBRA coverage), or union plans
- TRICARE
- Veterans' benefits
- Long-term care insurance policies
- Indian Health Service, Tribal, and Urban Indian Health plans

## What types of Medigap policies can insurance companies sell?

In most cases, Medigap insurance companies can sell you only a standardized Medigap policy. If you live in Massachusetts, Minnesota, or Wisconsin, go to pages 42–44.

Insurance companies that sell Medigap policies don't have to offer every Medigap plan. Each insurance company decides which Medigap plans it wants to sell, although federal and state laws might affect which ones they can offer.

In some cases, an insurance company must sell you a Medigap policy if you want one, even if you have health problems. You're guaranteed the right to buy a Medigap policy during certain times:

- When you're in your [Medigap Open Enrollment Period](#) (pages 14–15)
- If you have a [guaranteed issue right](#) (pages 21–23)

You may be able to buy a Medigap policy at other times, but the insurance company can deny you a Medigap policy based on your health. Also, in some cases, it may be illegal for the insurance company to sell you a Medigap policy.

## What do I need to know if I want to buy a Medigap policy?

- You can only buy Medigap if you have Original Medicare. Generally, that means you have to sign up for Medicare Part A (Hospital Insurance) and Part B (Medical Insurance) before you can buy a Medigap policy.
- If you have a [Medicare Advantage Plan](#) but are planning to return to Original Medicare, you can apply for a Medigap policy before your coverage ends. The Medigap insurance company can sell it to you as long as you're leaving the Medicare Advantage Plan. Ask that the new Medigap policy start when your Medicare Advantage Plan enrollment ends, so you'll have continuous health coverage.
- You pay the private insurance company a monthly **premium** for your Medigap policy in addition to the monthly Part B premium you pay to Medicare.
- A Medigap policy only covers one person, so if you and your spouse both want Medigap coverage, **you each have to buy your own policy**.
- When you have your [Medigap Open Enrollment Period](#), you can buy any Medigap policy sold in your state from any insurance company that's licensed in your state to sell one.
- **Any new Medigap policy issued since 1992 is guaranteed renewable even if you have health problems. This means the insurance company can't cancel your Medigap policy as long as you stay enrolled and pay the premium.**
- You may have additional rights under state law.
- **The premium amount is the only difference between policies with the same plan letter sold by different companies. There can be big differences in the premiums that different insurance companies charge for the same coverage, so be sure you compare Medigap plans with the same letter (for example, compare Plan A from one company with Plan A from another company).**
- Although some Medigap policies sold in the past covered prescription drugs, Medigap plans sold after 2005 don't include prescription drug coverage. If you want prescription drug coverage, you can join a separate [Medicare drug plan](#) (Part D). (Go to pages 6–7.) To learn about Medicare drug coverage, visit [Medicare.gov](https://www.Medicare.gov), or call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

## What happens if I don't buy a Medigap policy when I'm first eligible? (continued)

### Employer coverage

If you have group health coverage through an employer or union, because either you or your spouse is currently working, you may want to wait to sign up for Part B. Benefits based on current employment often provide coverage similar to Part B, so you wouldn't want to pay for Part B before you need it, and your [Medigap Open Enrollment Period](#) might expire before a Medigap policy would be useful.

When the employer coverage ends, you'll have a chance to sign up for Part B without a late enrollment penalty, which means your Medigap Open Enrollment Period will start when you're ready to take advantage of it. If you or your spouse is still working, and you have coverage through an employer, contact your employer or union benefits administrator to find out how your insurance works with Medicare. Go to page 24 for more information.

## How do insurance companies set prices for Medigap policies?

Each insurance company decides how it'll set the price, or [premium](#), for its Medigap policies. The way they set the price affects how much you pay now and in the future. Each Medigap policy can be priced or "rated" in one of 3 ways:

1. [Community-rated](#) (also called "no-age-rated")
2. [Issue-age-rated](#) (also called "entry-age-rated")
3. [Attained-age-rated](#)



## Comparing Medigap costs

The cost of Medigap policies can vary widely depending on the insurance company, the plan, and where you live. **The benefits in each lettered plan are the same, no matter which insurance company sells it.** The premium (an amount you pay each month) is the only difference between policies with the same plan letter sold by different companies. **There can be big differences in the premiums that different insurance companies charge for the same coverage.**

As you shop for a Medigap policy, be sure you're comparing the same lettered plan offered by different insurance companies. For example, compare Plan G from one company with Plan G from another company. Although this guide can't give actual costs of Medigap policies, you can get this information by calling insurance companies or your State Health Insurance Assistance Program (SHIP).

You can find out which insurance companies sell Medigap policies in your area by visiting [Medicare.gov/medigap-supplemental-insurance-plans](https://www.Medicare.gov/medigap-supplemental-insurance-plans).

The cost of your Medigap policy may also depend on whether the insurance company:

- Offers discounts (like discounts for women, non-smokers, or married people; discounts for paying yearly; discounts for paying your premiums using electronic funds transfer; or discounts for multiple policies).
- Uses medical underwriting or applies a different premium when you don't have a guaranteed issue right or aren't in a Medigap Open Enrollment Period.
- Sells Medicare SELECT policies that may require you to use certain providers. If you buy this type of Medigap policy, your premium may be lower.
- Offers a "high-deductible option" for Plans F or G. If you buy Plans F or G with a "high-deductible option," you must pay the first \$2,800 (in 2024) of deductibles, copayments, and coinsurance for covered services not paid by Medicare before the Medigap policy pays anything. You also pay a separate deductible (\$250 per year) for foreign travel emergency care.