MEDICARE SUPPLEMENT PLANS

PLEASE SEE THE DIFFERENT OPTIONS BELOW	Α	В	С	D	F*	G	K	L	M	N
Part A: Coinsurance and hospital costs up to an additional 365 days after medicare benefits are used up	V	√	\checkmark	V	\checkmark	√	\checkmark	\checkmark	\checkmark	√
Part B: Coinsurance or copayment	\checkmark	√	\checkmark	\checkmark	\checkmark	\checkmark	√ 50%	1 75%	\checkmark	V ***
Blood (first 3 pints)	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	√ _{50%}	√ 75%	\checkmark	\checkmark
Part A: Hospice care coinsurance or copayment	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	√ 50%	√ 75%	\checkmark	\checkmark
Skilled nursing facility			\checkmark	\checkmark	\checkmark	\checkmark	√ _{50%}	√ 75%	\checkmark	\checkmark
Part A: Deductible		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	√ _{50%}	√ 75%	√ 50%	✓
Part B: Deductible			\checkmark		✓					
Part B: (excess charge)						\checkmark	\checkmark			
Foreign travel exchange (up to plan limits)			√ 80%	√ 80%	√ 80%	√ 80%			√ 80%	√ 80%
Out-of-pocket limit **							\$4,960	\$2,480		

^{*} Plan F also offers a high-deductible plan. If you choose this option, this means you must pay for medicare-covered costs up to the deductible amount of \$2,180 in 2016 before your Medigap plan pays anything.

^{**} After you meet your out-of-pocket yearly limit and your yearly Part B deductible, the Medigap plan pays 100% of covered services for the rest of the calendar year.

^{***} Plan N pays 100% of the Part B coinsurance, 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 inpatient admission.