

Medigap Policies



Medigaps are health insurance policies that offer standardized benefits to work only with Original Medicare (not with 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. It depends upon your Medigap plan type. Medigaps are designed to cover outstanding deductibles, coinsurance, and copayments. People often refer to these charges as the “gaps” in Original Medicare’s coverage, hence the term “Medigap.” Some Medigaps may also cover health care costs that Medicare does not cover at all, like emergency 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. Note: Massachusetts, Minnesota, and Wisconsin have different Medigap plans.

Listed below are things you should consider when choosing a Medigap plan. Make sure to review the Medigap plan benefits chart on the following page for additional information.

- Plan A offers the most basic coverage, but it is often the least expensive.
- Plans F, C, and G are the most comprehensive Medigaps, but they generally cost more.
- Plans F and C are only available to you if you were eligible for Medicare before January 1, 2020.
- Medigap plans are guaranteed renewable. That means that if 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 and for help comparing your plan options and costs. Contact information for your local SHIP is on the last page of this document.

Medigap policy benefits

For policies sold on or after June 1, 2010

	A	B	C*	D	F*	G	K	L	M	N
Hospital copayment Copays for days 61-90 (\$400) and days 91-150 (\$800) in hospital; Payment in full for 365 additional lifetime days.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part B coinsurance 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 office visits and \$50 for emergency visits
First three pints of blood	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Hospice care Coinsurance for respite care and other Part A-covered services	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Skilled nursing facility (SNF) copay Covers \$200 a day for days 21-100 each benefit period.			✓	✓	✓	✓	50%	75%	✓	✓
Hospital deductible Covers \$1,600 in each benefit period.		✓	✓	✓	✓	✓	50%	75%	50%	✓
Part B annual deductible Covers \$226 (Part B deductible)			✓		✓					
Part B excess charges 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)					✓	✓				
Preventive care 100% of coinsurance for Part B-covered preventive care services after the Part B deductible has been met	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Emergency care outside the U.S. 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. This chart doesn't apply to Massachusetts, Minnesota, and Wisconsin. Those states have their own Medigap system.

Medigap Policies

Be aware of misleading Medigap marketing practices and violations

When comparing or enrolling in plans, it is important to be aware of Medigap rights and protections. Here are some red flags to look for:



A company representative knowingly provides you with misleading Medigap policy information



You feel forced, pressured, or threatened to purchase a Medigap policy



You are contacted by someone who does not disclose to you that they are trying to sell you a Medigap policy



You receive an unsolicited phone call from a company you have no prior relationship with



Someone tries to sell you a Medigap policy, even though they know you are already enrolled in a Medicare Advantage Plan

Who to contact for more Medigap information



- **State Health Insurance Assistance Program (SHIP):** Contact your local SHIP to learn about Medigap rules in your state and for help comparing Medigap plan costs and options. See the next page for contact information.
- **Senior Medicare Patrol (SMP):** Call your local SMP to report potential Medicare fraud, errors, and abuse. See the next page for contact information.
- **Medigap plans:** If you decide to purchase a Medigap, call the plan directly to purchase the policy and enroll.

Local SHIP contact information	Local SMP contact information
<p>Toll-free phone number: 877-839-2675 (To connect with your SHIP, say “Medicare”)</p>	<p>Toll-free phone number: 877-808-2468 (To connect with your SMP, say “Medicare Fraud”)</p>
<p>Online SHIP Locator: www.shiphelp.org Click: </p>	<p>Online SMP Locator: www.smpresource.org Click: </p>
<p>SHIP National Technical Assistance Center: 877-839-2675 www.shiphelp.org info@shiphelp.org SMP National Resource Center: 877-808-2468 www.smpresource.org info@smpresource.org © 2021 Medicare Rights Center www.medicareinteractive.org </p> <p><i>The Medicare Rights Center is the author of portions of the content in these materials but is not responsible for any content not authored by the Medicare Rights Center. This document was supported, in part, by grant numbers 90SATC0002 and 90MPPRC0002 from the Administration for Community Living (ACL), Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy.</i></p>	