

Medigap Policies

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 (the gaps) 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 became 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 about the Medigap rules in your state and to get help comparing plan costs and options. Contact information for your SHIP is on the last page.

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 (___) and days 91-150 (___) 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 doctors 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 ___ a day for days 21-100 each benefit period.			✓	✓	✓	✓	50%	75%	✓	✓
Hospital deductible Covers ___ in each benefit period.		✓	✓	✓	✓	✓	50%	75%	50%	✓
Part B annual deductible Covers ___ (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.

*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 standardization systems.

Be aware of marketing violations and enrollment fraud

When comparing or enrolling in plans, here are some red flags to look for:

- A company representative knowingly provides you with misleading policy information
- You feel forced, pressured, or threatened to purchase or recommend a policy
- You are contacted by someone who does not disclose to you that they are trying to sell you a Medigap policy
- You are told you cannot keep or purchase a Medigap that covers the Part B deductible, even though you became eligible for Medicare prior to January 1, 2020
- Someone tries to sell you a Medigap policy, even though they know you are already enrolled in a Medicare Advantage Plan

You should **report these red flags to your Senior Medicare Patrol (SMP)**

Find Local Medicare Help	
State Health Insurance Assistance Program (SHIP) Contact Information	Senior Medicare Patrol (SMP) Contact Information
<p>Call 877-839-2675 and say “Medicare” when prompted, or use the SHIP Locator at www.shiphelp.org</p>	<p>Call 877-808-2468 or visit www.smpresource.org</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 90MPRC0002 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>	