

**MEDICARE SUPPLEMENT BENEFITS**  
**2010's STANDARDIZED PLANS**  
**EFFECTIVE JUNE 1, 2010**

This chart indicates the benefits included in each of the standardized Medigap plans. Plans K & L will have a different set of core benefits.

**CORE BENEFITS FOR PLANS A, B, C, D, F, G, M, and N INCLUDE:**

- All Part A coinsurance expenses for:
  - \$322 per day for 61st through 90<sup>th</sup> day in 2016;
  - \$644 per day for 91st through 150<sup>th</sup> day in 2016;
- Part A Hospice coinsurance;
- Upon exhaustion of Part A hospitalization benefits, full coverage of an additional 365 days per lifetime;
- Part B coinsurance or copayment;
  - including Part B Preventive Services
- First three pints of blood each calendar year

Benefits Included	Plan A	Plan B	Plan C	Plan D	Plan F	Plan G	Plan K	Plan L	Plan M	Plan N
Core Benefits	√	√	√	√	√	√	√*	√*	√	√*
Skilled Nursing Facility			√	√	√	√	√* (50%)	√* (75%)	√	√
Part A Deductible		√	√	√	√	√	√* (50%)	√* (75%)	√* (50%)	√
Part B Deductible			√		√					
Part B Excess (100%)					√	√				
Foreign Travel			√	√	√	√			√	√
							Out-of-pocket annual limit	\$4,960 in 2016	\$2,480 in 2016	

\*Core Benefits for Plan K, L, M, and N are the same as listed above with some exceptions. Please refer to the following pages.

**CORE BENEFITS FOR PLANS K & L**  
**2010's STANDARDIZED PLANS**  
EFFECTIVE JUNE 1, 2010

<b>MEDIGAP PLAN K</b>	<b>MEDIGAP PLAN L</b>
Medicare Part A Coinsurance and Hospital Benefits: Days 61 – 150 (100%)	Medicare Part A Coinsurance and Hospital Benefits: Days 61 – 150 (100%)
Medicare Part A Deductible (50%)	Medicare Part A Deductible (75%)
Medicare Part B Coinsurance or Copayment (50%)	Medicare Part B Coinsurance or Copayment (75%)
Blood Deductible (50%)	Blood Deductible (75%)
Hospice Care Coinsurance or Copayment (50%)	Hospice Care Coinsurance or Copayment (75%)
Skilled Nursing Facility Coinsurance (50%)	Skilled Nursing Facility Coinsurance (75%)
<b>2016 Out-of-Pocket annual limit:</b> \$4,960	<b>2016 Out-of-Pocket annual limit:</b> \$2,480

- Medigap Plans K and L provide different cost-sharing amounts for items and services than Medigap Plans A, B, C, D, F, G, M and N.
- You will have to pay some out-of-pocket costs for some covered services until you meet the yearly out-of-pocket limit.
- After the out-of-pocket limit is reached, the Medigap policy will cover 100% of Medicare Part A and B coinsurance amounts for the remainder of the calendar year.
- Charges from your doctor that exceed Medicare-approved amounts, called “excess charges,” are not covered and do not count toward the out-of-pocket limit. You will have to pay these excess charges.

**CORE BENEFITS FOR PLANS M AND  
N  
2010'S STANDARDIZED PLANS  
EFFECTIVE JUNE 1, 2010**

<b>MEDIGAP PLAN M</b>	<b>MEDIGAP PLAN N</b>
Medicare Part A Coinsurance and Hospital Benefits: Days 61 – 150 (100%)	Medicare Part A Coinsurance and Hospital Benefits: Days 61 – 150 (100%)
Medicare Part A Deductible (50%)	Medicare Part A Deductible (100%)
Medicare Part B Coinsurance or Copayment (100%)	Medicare Part B Coinsurance or Copayment (100%) Except for Office visits and Emergency room
Blood Deductible (100%)	Blood Deductible (100%)
Hospice Care Coinsurance or Copayment (100%)	Hospice Care Coinsurance or Copayment (100%)
Skilled Nursing Facility Coinsurance (100%)	Skilled Nursing Facility Coinsurance (100%)
Foreign Travel Emergency (80% after \$250 deductible within first 60 days of travel)	Foreign Travel Emergency (80% after \$250 deductible within first 60 days of travel)

Medigap Plan M and N will be the same as Plan D with the exceptions of:

- Plan M will cover 50% of the Medicare Part A deductible and
- Plan N will cover 100% of the Medicare Part B Coinsurance and Copayment benefits
  - except for a \$20 copay per physician visit and \$50 per Emergency Room visit.
  - Emergency Room visit copay will be waived if admitted into the hospital.