

Medicare Supplement (MediGap) Insurance

Outline of Coverage

Plan HDG Details



Part A

Services	Medicare Pays	This Plan Pays (After \$2700 Deductible)	You Pay (\$2700+)
Hospitalization			
First 60 Days	All But \$1600	\$1600 (Part A Deductible)	\$0
61st Through 90th Day	All But \$400 a Day	\$400 a Day	\$0
91st Day and After (60 Reserve Days)	All But \$800 a Day	\$800 a Day	\$0
After Reserve (Additional 365 Days)	\$0	100% of Eligible Expenses	\$0
Beyond the Additional 365 Days	\$0	\$0	All Costs
Skilled Nursing Facility Care			
First 20 Days	All Approved Amounts	\$0	\$0
21st Through 100th Day	All But \$200 a Day	Up to \$200 a Day	\$0
101st Day and After	\$0	\$0	All Costs
Blood			
First Three Pints	\$0	100%	\$0
Additional Amounts	100%	\$0	\$0
Hospice Care			
Must Meet Medicare's Requirements, including a doctor's certification of terminal illness	All but very limited coinsurance, coinsurance for outpatient drugs and inpatient respite care.	Pays Copayments and Coinsurance	\$0

Part B

Services	Medicare Pays	This Plan Pays (After \$2700 Deductible)	You Pay (\$2700+)
Medical Expenses			
1st \$226 of Approved Amounts	\$0	\$0	\$226 (Unless Part B deductible has been met)
Remainder of Approved Amounts	Generally 80%	Generally 20%	\$0
Part B Excess Charge	\$0	100%	\$0
Blood			
First Three Pints	\$0	All costs	\$0
Next \$226 of Medicare Approved Amounts	\$0	\$0	\$226 (Unless Part B deductible has been met)
Remainder of Medicare Approved Amounts	80%	20%	\$0
Clinical Laboratory Services			
Tests for Diagnostic Services	100%	\$0	\$0

Parts A & B

Services	Medicare Pays	This Plan Pays (After \$2700 Deductible)	You Pay (\$2700+)
Home Health Care			
Medically necessary skilled care services and medical supplies	100%	\$0	\$0
Durable Medical Equipment			
1st \$226 of Medicare approved amounts	\$0	\$0	\$226 (Unless Part B deductible has been met)
Remainder of medicare approved amounts	80%	20%	\$0

Other Benefits

Services	Medicare Pays	This Plan Pays (After \$2700 Deductible)	You Pay (\$2700+)
Foreign Travel			
1st \$250 each calendar year	\$0	\$0	\$250
Remainder of Charges	\$0	80% up to a lifetime maximum benefit of \$50,000	20% and amounts over the \$50,000 lifetime maximum benefit