Standardized Medicare Supplement ("MediGap") Plans Offered in Connecticut

CHOICES
1-800-994-9422

Current Monthly Rates[1]

NOTE: Rates shown are monthly electronic funds transfer rates. Rates may vary by mode of payment. Check with the company for more information.

Company Information			Plans Available to All Applicants over Age 65 Beneficiaries with Disabilities under age 65 may only purchase A or B plans (or C plan if eligible)[3]									Plans Only Available to Those First Eligible for Medicare Prior To 1/1/2020			Important Dates	
Individual Plan Companies	**Telephone Number**	**Pre-ex Cond.[2]**	**A[3]**	**B[3]**	**D**	**G**	**G High Deductible[4]**	**K**	**L**	**M**	**N**	**C[3]**	**F**	**F High Deductible[4]**	**Date Approved**	**Effective on or After**
Anthem Blue Cross & Blue Shield	1-800-238-1143	6 mos.	$826.37			$201.57					$166.08		$285.33		10/03/19	1/1/20
Cigna Health & Life Ins. Co.	1-866-459-4272	6 mos.	$260.16			$275.21					$217.29		$325.21	$77.33	8/07/19	11/1/19
Colonial Penn Life Ins. Co.	1-800-800-2254	N/A	$1,233.40	$907.25		$551.59	$66.65	$129.57	$389.10	$537.92	$359.39		$719.63	$60.68	10/3/19	1/1/20
Combined Ins. Co. of America	1-855-278-9329	N/A	$385.38			$318.09					$248.00		$326.64		2/6/20	3/1/20
First Health Life and Health Ins. Co.	1-866-465-1023	N/A	$204.17	$250.98		$275.06					$173.18		$295.72		1/6/20	4/1/20
Globe Life & Accident Ins. Co	1-800-801-6831	2 mos.	$190.50			$281.50	$49.50				$198.50		$299.00	$47.50	2/25/19	3/1/19
Humana Ins. Co.[5]	1-888-310-8482	3 mos.	$349.84			$284.56	$75.35	$121.04	$210.60		$259.79		$331.01	$75.65	2/1/19	6/1/19
Loyal American Life Ins. Co.	1-866-459-4272	6 mos.	$303.75			$270.33					$192.40		$323.99		3/21/19	8/1/19
Omaha Ins. Co.	1-800-775-6000	N/A	$622.94			$369.59	$55.00				$219.49		$437.00	$88.68	5/6/19	7/1/19
Transamerica Life Company	1-800-797-2643	6 mos.	$218.93		$263.47	$263.34		$124.69	$185.11	$227.93	$214.33		$343.98		11/25/19	3/1/20
United American Ins. Co.	1-800-331-2512	2 mos.	$222.00	$317.00	$352.00	$348.00	$50.00	$135.00	$200.00		$207.00	$354.00	$313.00	$50.00	12/13/19	2/15/20
USAA Life Ins. Co.	1-800-531-8000	N/A	$376.21			$245.99					$171.53		$284.24		2/4/20	9/1/20
Group Plans	Payment of a group membership fee is required for group plan purchase. All rules listed apply to both group and individual plans.															
United HealthCare Insurance/AARP	1-800-523-5800	3 mos.	$166.25	$290.75		$198.25		$63.50	$123.50		$160.75	$361.75	$259.00		9/9/19	1/1/20

1. CT plans are community-rated and guaranteed-issue, meaning rates are the same regardless of age, and issuance of a policy cannot be denied based on age or pre-existing condition. Please see note #3 below regarding plans for individuals with disabilities.
2. Those age 65 or older without prior employer health insurance, MA-PD, or Medigap coverage within 63 days of Medigap enrollment may have a waiting period before preexisting health conditions are covered by the Medigap policy. All beneficiaries under age 65 are subject to applicable pre-existing condition waiting periods, regardless of prior coverage.
3. Medicare beneficiaries under age 65 who qualify for Medicare due to disability may only purchase plans A or B, as well as Plan C if the start of Medicare eligibility began before 1/1/2020.
4. Please see Note # 1 on reverse side for information on high deductible plans F and G.
5. Humana Insurance Company offers Plans A, F, High Ded. F, K and N with dental and vision benefits for an additional monthly cost of $13.25.

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Benefit Chart

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Core Benefits	Plans Available to All Applicants over Age 65 Beneficiaries with Disabilities under age 65 may only purchase A or B plans (or C plan if eligible)							Plans Only Available to Those First Eligible for Medicare Prior To 2020	
	Plan A	**Plan B**	**Plan D**	**Plan G**[1]	**Plan K**	**Plan L**	**Plan M**	**Plan N**	**Plan C**	**Plan F**[1]
Hospital Coinsurance: Days 61-91 $352 per day	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Hospital Coinsurance: Days 91-150 $704 per day[2]	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Hospital Payment in Full: 365 additional days[2]	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Parts A&B blood deductible: First 3 pints	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Part B 20% Co-insurance[3]	100%	100%	100%	100%	100%	100%	100%	100%[4]	100%	100%
Additional Benefits										
Part A deductible = $1,408 per benefit period[5]		100%	100%	100%	50%	75%	50%	100%	100%	100%
Skilled Nursing Facility days 21-100 = $176 per day			100%	100%	50%	75%	100%	100%	100%	100%
Part B Annual Deductible $198									100%	100%
Part B Excess Charges[6]				100%						100%
Foreign Travel Emergency: Deductible $250, then plan pays 80% up to $50,000			Yes	Yes			Yes	Yes	Yes	Yes
Out of pocket limit:	N/A	N/A	N/A	N/A	$5,880[7]	$2,940[7]	N/A	N/A	N/A	N/A

1. Plans F and G have a high deductible option which require first paying a plan deductible of **$2,340 for 2020** before the plan begins to pay. Once the plan deductible is met, the plan pays 100% of covered services for the rest of the calendar year. High deductible Plan G does not cover the Medicare Part B deductible. However, high deductible Plans F and G count your payment of the Medicare Part B deductible (but not the separate $250 foreign travel emergency deductible) towards meeting the plan deductible.
2. Days 91-150 in the hospital are considered Lifetime Reserve Days and can only be used once. Once lifetime reserve days are used, all Medigap plans will cover the full cost of 365 additional days, which can also only be used once in your lifetime.
3. Covers coinsurance for **most** outpatient services, including observation status in a hospital, doctor visits, physical or occupational therapy, medical and surgical supplies, durable medical equipment, ambulance services, mental health services, preventive services and certain specific outpatient prescription drugs.
4. 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 an inpatient admission.
5. Part A Benefit Period begins the first day you enter hospital and ends when you have not received skilled care for 60 consecutive days. You may be responsible for the Part A deductible multiple times per year if you have multiple benefit periods.
6. Medicare providers who do not accept assignment can charge up to 15% above the Medicare-approved rate. DME providers CAN charge beyond 15% if they do not accept assignment.
7. For Plans K and L, after you meet your out-of-pocket yearly limit (**$5,880 for Plan K and $2,940 for Plan L in 2020**) and your yearly Part B deductible **($198 in 2020)**, the Medigap plan pays 100% of covered services for the rest of the calendar year.

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