

2021 Medicare Standard Supplement (Medigap) Plans (For Age UNDER 65)

Medicare Cost Sharing with NO Supplement		Your Obligation with a Standardized Medigap Supplement Plan												
		Plans Available to All Applicants									Plans Available Only to Those Eligible for Part A before 2020			
		G	G(HD) ¹	N	B	D	A	K	L	M	F*	C*	F*(HD) ¹	
US Popularity for age 65 in 2020		59%	6%%	33%	≤0.1%	≤0.1%	≤0.1%	≤0.1%	≤0.1%	≤0.1%	-	-	-	
PART A HOSPITALIZATION		Your Share												
Hospital Deductible: Day 1 of any Benefit Period	\$1,484	\$0	\$0	\$0	\$0	\$0	\$1,484	\$742	\$371	\$742	\$0	\$0	\$0	
Hospital Coinsurance: Days 1-60	\$0/Day	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Hospital Coinsurance: Days 61-90	\$371/Day	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Hospital Coinsurance: Days 91-150 ⁴	\$742/Day	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Hospital Coinsurance: Days 151-516 ⁴	All costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
PART A OTHER COVERAGE														
Skilled Nursing Coinsurance: Days 1-20	\$0/Day	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Skilled Nursing Coinsurance: Days 21-100	\$185.5/D	\$0	\$0	\$0	\$185.5/D	\$0	\$185.5/D	\$92.75/D	\$46.38/D	\$0	\$0	\$0	\$0	
Home Health Care Costs:	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Blood - First 3 Units as Inpatient: (Copay/Year)	\$600 ⁵	\$0	\$0	\$0	\$0	\$0	\$0	\$300	\$150	\$0	\$0	\$0	\$0	
Blood - Additional Units as Inpatient	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
PART B OUTPATIENT & MEDICAL														
Part B Deductible: Annually	\$203	\$203	\$203	\$203	\$203	\$203	\$203	\$203	\$203	\$203	\$0	\$0	\$0	
Part B Medical Coinsurance	20%	\$0	\$0	\$20 ²	\$0	\$0	\$0	10%	5%	0%	\$0	\$0	\$0	
Part B Excess Charge (Non-particip. Dr.)	+15%	\$0	\$0	+15%	+15%	+15%	+15%	+15%	+15%	+15%	\$0	+15%	\$0	
Clinical Lab Tests: Coinsurance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Blood - First 3 Units as Outpatient	\$600 ⁵	\$0	\$0	\$0	\$0	\$0	\$0	\$300	\$150	\$0	\$0	\$0	\$0	
Blood - Additional Units as Outpatient	\$40	\$0	\$0	\$0	\$0	\$0	\$0	\$20	\$10	\$0	\$0	\$0	\$0	
NON-MEDICARE BENEFITS														
Foreign Travel Emergency Care	All Costs	20% ³	20% ³	20% ³	All Costs	20% ³	All Costs	All Costs	All Costs	20% ³	20% ³	20% ³	20% ³	
OTHER COSTS														
You pay deductible, then you pay \$0			\$2,370 ¹										\$2,370 ¹	
Maximum you pay, then you pay \$0								\$6,220	\$3,110					

Footnotes:

- * Plans C, F, and high deductible F are sold only to those who were eligible for Part A before 1/1/2020, whether they enrolled or not.
- 1 - High Deductible Plan. You pay all Gap costs not paid by Medicare until the deductible amount is met before any payment is made by the policy.
- 2 - Plan pays all of Part B coinsurance except for a copayment of up to \$20 for some office visits and up to a \$50 copayment for ER visits that do not result in admission.
- 3 - Within 60 days from the start of your trip. \$250 Deductible per year and \$50,000 Lifetime limit.
- 4 - Using Lifetime Reserve of 60 days.
- 5 - Approximate costs for blood



LOCAL HELP FOR PEOPLE WITH MEDICARE

Frequently Asked Questions and Answers for Medigap (aka Medicare Supplement) Policies

What does a Medigap do? Medigap policies are private insurance policies designed to pay for a portion of the cost of covered medical services that Medicare does not pay - that is, the deductibles and co-pays for Parts A and B of Original Medicare. Medicare pays its share of the Medicare-approved amount to the provider, then your Medigap policy pays its share. These plans make no medical decisions. Benefits of Medigap plans are standardized, designated by letters (A-N); all plans with the same letter designation offer the same coverage. Some plans will pay all the deductibles and co-pays while others expect you to pay some amount each year. See Plan Comparison Chart on page 1 of this handout. Each company sets their own premium, and the premium is in addition to your base Medicare Part B premium. See charts on page 3 and beyond for sample premiums. A Medigap can only be used with Original Medicare and does not cover co-pays associated with Medicare Advantage Plans.

Are there limits on who or where I can use these policies? Medicare is your primary insurance and can be used anywhere in the USA. All physicians, labs, and hospitals and medical equipment providers that accept Medicare patients also accept all Medigap policies, regardless of the company or plan level. With a Medigap policy you use both your Medicare card and your Medigap card. There are no networks, and prior approval is not required, as long as the provider accepts Medicare patients (almost all providers do). Medigap policies will not pay for medical costs that are not covered by Medicare, although some policies add limited foreign emergency travel coverage, and all offer extra days in the hospital. Medigap policies do not include outpatient prescription drug coverage, so you should also enroll in a Stand-Alone Prescription Drug Plan.

What do I need to do to obtain a policy? Most people sign up for a Medigap policy within 6 months of their effective date of Medicare Part B or of losing their employer-based retiree plan. Insurers cannot deny or charge you more for coverage during this period and must sell you any plan they offer. This is called a 'Medigap Open Enrollment' period. Outside of this 6-month period, they can deny you coverage for preexisting conditions or charge you more based on your medical history. There are other 'Guaranteed Issue' periods such as moving or a Medicare Advantage Plan leaving the area. Call HICAP for more information.

Which Plan should I choose? The 3 most popular plans are Plan F, Plan G and Plan N. Plan F has the most comprehensive coverage but is available only for those who were eligible for Part A of Medicare (hospital coverage) before 2020. Plan G has the next most comprehensive coverage and pays for all costs after an annual deductible of \$203 (in 2021). Plan N has the lowest premiums of these 3 options, but you take on some copays for doctor and ER visits. If you visit the doctor frequently, those copays could add up, so in that scenario, Plan G may be a better choice. Some companies offer "high-deductible" options for Plans F or G. With the high-deductible plans, you pay a lower monthly premium but must pay the first \$2,370 (in 2021) of the cost of covered services not paid by Medicare. After you pay the \$2,370 deductible (in 2021), all Medicare covered services are fully covered by the 'high-deductible' plans. All plans are guaranteed renewable regardless of your health situation if you pay your premium.

Some Plans say they offer additional benefits. Aren't the plans standardized? Some companies sell 'Innovative' or 'Enhanced' Plans. They contain all the features of Standardized Plans, but may include additional benefits such as dental discounts, vision, or hearing aids. There are no protections for the added benefits, and they can be eliminated or subject to change at any time. Some plans offer gym memberships and discounts.

Why are there differences in monthly premium costs? Prices are set such that a company can make a profit after all claims are paid and administrative costs met. Prices are adjusted (usually up) each year based on both your age and market medical costs. As mentioned, the plans are standardized so other than premium, there are no differences between companies for the same policy type. Many offer discounts which are not shown in our cost charts, so HICAP recommends always calling a few of the companies (or an insurance broker) for the lower price plans for a specific quote. Premiums listed in our charts were extracted from the SHIP TA Center's National Medigap Plan Finder tool. The exact premium will depend on your birthday and zip code. HICAP does not endorse any specific health insurer and makes no claims as to the listed insurers financial status, reputation, sales practices.

Can I change policies if it gets too expensive? There is no annual 'Open Enrollment' for Medigaps. After your initial enrollment period ends, you have a 'guaranteed issue' opportunity each year on and 60 days after your birthday to switch your existing plan to the same or lower plan with your current or any company that sells that plan. If you have a Medicare Advantage plan and wish to switch to Original Medicare plus a Medigap, please contact HICAP at (925) 655-1393 or (800) 434-0222 or (800) 510-2020.

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2021 Medicare Supplement (Medigap) Plans Contra Costa County Monthly Rates for Age Under 65 (by price of plan G)

Company Name	Plan Type#	Plans Available to All Applicants									Plans Available Only to Those Eligible for Part A before 2020			Date
		G	G (HD)	N	B	D	A	K	L	M	F*	C*	F* (HD)	
&AARP UNITEDHEALTHCARE	Standard	261	-	-	275	-	197	102	-	-	328	326	-	6/1/21
CONTINENTAL LIFE (AETNA)	Standard	301	-	216	293	-	232	-	-	-	410	-	-	9/1/20
HEALTH NET	Standard	301	-	312	-	350	229	-	-	-	327	-	137	2/1/20
CIGNA HEALTH AND LIFE	Standard	305	-	249	-	-	283	-	-	-	374	-	101	8/24/20
&EVERENCE ASSOCIATION	Standard	329	-	257	-	-	307	-	-	-	353	-	-	4/1/21
NATIONAL GUARDIAN LIFE	Standard	335	-	279	-	-	281	-	-	-	377	-	-	10/1/20
STATE FARM	Standard	342	-	262	-	341	194	-	-	-	360	356	-	1/1/21
HEALTH NET	Innovative	358	-	-	-	-	-	-	-	-	332	-	-	2/1/20
COMBINED INSURANCE CO	Standard	365	-	264	-	-	226	-	-	-	436	-	-	11/1/20
UNITED WORLD	Standard	371	-	309	-	-	339	-	-	-	470	-	-	5/25/21
&USAA LIFE	Standard	379	-	200	-	-	198	-	-	-	306	-	-	7/1/20
GARDEN STATE LIFE	Standard	387	-	319	-	-	307	-	-	-	517	-	-	1/1/21
NATIONAL HEALTH	Standard	403	-	318	-	-	361	-	-	-	472	-	138	1/1/21
HUMANA	Standard	408	110	295	385	-	359	206	299	-	499	492	123	6/1/21
ANTHEM BLUE CROSS	Standard	412	-	333	-	-	256	-	-	-	539	-	-	3/1/21
HUMANA (ACHIEVE)	Innovative	448	146	382	-	-	367	-	-	-	502	-	-	6/1/21
UNITED AMERICAN	Standard	469	-	384	392	504	288	-	-	-	585	553	-	4/15/21
INDEPENDENCE AMERICAN	Standard	578	-	436	-	-	539	-	-	-	600	-	-	4/8/21
BLUE SHIELD OF CALIFORNIA	Standard	877	-	707	-	-	658	-	-	-	-	-	-	1/1/21
BLUE SHIELD OF CALIFORNIA	Innovative	891	-	-	-	-	-	-	-	-	986	-	-	1/1/21
SENTINEL SECURITY LIFE	Standard	-	-	291	340	-	296	-	-	-	444	430	-	10/1/20
OXFORD LIFE	Standard	-	-	310	-	-	344	-	-	-	506	-	-	10/1/20
ANTHEM BLUE CROSS	Innovative	-	-	-	-	-	-	-	-	-	513	-	-	3/1/21

Notes: '*' - Plans C, F, and high deductible F are sold only to those who were eligible for Part A before 1/1/2020, whether they enrolled or not.

'&' - Some form of membership required

'#' - "Innovative" (sometimes known as "Extra") F or G plans may include additional benefits such as dental, vision, or hearing aids

'-' - Policy not offered

Sample Premiums as of 5/13/2021 from SHIP Medigap PlanFinder

2021 Medicare Standard Supplement (Medigap) Plans (For Age UNDER 65)

Company	Plan Type	Age	Plans Available to All Applicants									Plans Available Only to Those Eligible for Part A before 2020		
			G	G (HD)	N	B	D	A	K	L	M	F*	C*	F* (HD)
ANTHEM BLUE CROSS - 877-685-3300	Standard	<65	\$412	-	\$333	-	-	\$256	-	-	-	\$539	-	-
ANTHEM BLUE CROSS - 877-685-3300	Innovative	<65	-	-	-	-	-	-	-	-	-	\$513	-	-
&AARP UNITEDHEALTHCARE - 1-888-378-0849	Standard	<65	\$261	-	-	\$275	-	\$197	\$102	-	-	\$328	\$326	-
BLUE SHIELD OF CALIFORNIA - 800-393-6130	Standard	<65	\$877	-	\$707	-	-	\$658	-	-	-	-	-	-
BLUE SHIELD OF CALIFORNIA - 800-393-6130	Innovative	<65	\$891	-	-	-	-	-	-	-	-	\$986	-	-
CIGNA HEALTH AND LIFE - 1-855-891-9368	Standard	<65	\$305	-	\$249	-	-	\$283	-	-	-	\$374	-	\$101
COMBINED INSURANCE CO - 800-225-4500	Standard	<65	\$365	-	\$264	-	-	\$226	-	-	-	\$436	-	-
CONTINENTAL LIFE (AETNA) - 800-358-8749	Standard	<65	\$301	-	\$216	\$293	-	\$232	-	-	-	\$410	-	-
&EVERENCE ASSOCIATION - (800) 348-7468	Standard	<65	\$329	-	\$257	-	-	\$307	-	-	-	\$353	-	-
GARDEN STATE LIFE - 409-763-4661	Standard	<65	\$387	-	\$319	-	-	\$307	-	-	-	\$517	-	-
HEALTH NET - 1-800-944-7287	Standard	<65	\$301	-	\$312	-	\$350	\$229	-	-	-	\$327	-	\$137
HEALTH NET - 1-800-944-7287	Innovative	<65	\$358	-	-	-	-	-	-	-	-	\$332	-	-
HUMANA - 1-800-457-4708	Standard	<65	\$408	\$110	\$295	\$385	-	\$359	\$206	\$299	-	\$499	\$492	\$123
HUMANA (ACHIEVE) - 1-800-457-4708	Innovative	<65	\$448	\$146	\$382	-	-	\$367	-	-	-	\$502	-	-
INDEPENDENCE AMERICAN - 212-355-4141	Standard	<65	\$578	-	\$436	-	-	\$539	-	-	-	\$600	-	-
NATIONAL GUARDIAN LIFE - 800-548-2962	Standard	<65	\$335	-	\$279	-	-	\$281	-	-	-	\$377	-	-
NATIONAL HEALTH - 0	Standard	<65	\$403	-	\$318	-	-	\$361	-	-	-	\$472	-	\$138
OXFORD LIFE - (866) 641-9999	Standard	<65	-	-	\$310	-	-	\$344	-	-	-	\$506	-	-
SENTINEL SECURITY LIFE - 1-800-247-1423	Standard	<65	-	-	\$291	\$340	-	\$296	-	-	-	\$444	\$430	-
STATE FARM - 800-782-8332	Standard	<65	\$342	-	\$262	-	\$341	\$194	-	-	-	\$360	\$356	-
UNITED AMERICAN - (800) 331-2512	Standard	<65	\$469	-	\$384	\$392	\$504	\$288	-	-	-	\$585	\$553	-
UNITED WORLD - (855) 977-6312	Standard	<65	\$371	-	\$309	-	-	\$339	-	-	-	\$470	-	-
&USAA LIFE - 800-531-8722	Standard	<65	\$379	-	\$200	-	-	\$198	-	-	-	\$306	-	-

Notes: '*1' - Plans C, F, and high deductible F are sold only to those who were eligible for Part A before 1/1/2020, whether they enrolled or not.

'&' - Some form of membership required

Sample Premiums as of 5/13/2021 from SHIP Medigap PlanFinder