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## 2023-2024 Medigap Guaranteed Issue (GI)

### **Humana MA Plans**

**Humana Community: Inpatient Hospital Care** 

#### 2024



## Covered Medical and Hospital Benefits

### **INPATIENT HOSPITAL CARE**

Your plan covers an unlimited number of days for an inpatient stay

**\$350** copay per day for days 1-5 **\$0** copay per day for days 6-90

### 2023



## Covered Medical and Hospital Benefits

Acute inpatient hospital care

**\$285** copay per day for days 1-5 **\$0** copay per day for days 6-90

Your plan covers an unlimited number of days for an inpatient stay.

Humana Gold Plus: Premium

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### 2024



# Monthly Premium, Deductible and Limits

**Monthly Plan Premium** 

\$71

You must keep paying your Medicare Part B premium.

If you receive premium assistance, your plan premium may be

reduced.

### 2023



### Monthly Premium, Deductible and Limits

**Monthly Plan Premium** 

\$68

You must keep paying your Medicare Part B premium.

If you receive premium assistance, your plan premium may be

reduced.

Contra Costa County Health Insurance Counseling and Advocacy Program (HICAP)
Contact Us: (925) 655-1393, (800) 510-2020 or (800) 434-0222

Email: ehsdhicap@ehsd.cccounty.us Visit: www.cchicap.org





#### **Navigating Medicare**

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