Washington State Office of the Insurance Commissioner • Statewide Health Insurance Benefits Advisors (SHIBA)

# October 2019 Approved Medicare Supplement (Medigap) plans

By federal law, the high-deductible plan F has a \$2,300 deductible for the year 2019

The best time to enroll in a Medigap plan is during the first six months you have both Medicare Parts A and B.

People enrolled in Original Medicare who have:

- A Medigap plan B through N can join any Medigap plan except Plan A.
- Medigap Plan A can join any Medigap Plan A.
- More comprehensive health coverage than the Medigap plan they're buying, can join any comprehensive Medigap plan except Plan A.

There's <u>no</u> yearly open enrollment period for Medicare Supplement (Medigap) plans. If you're already enrolled in a Medigap plan, you may apply to buy or switch plans at any time. However, if you're not currently enrolled in a Medigap but want to buy one, rules vary whether insurers may require you to pass a written health screening questionnaire. Not sure if you'll need to take a health screening or have questions about shopping for a Medigap? Call our Insurance Consumer Hotline at: 1-800-562-6900.

Company	Pre- X¹	Health screen <sup>2</sup>	Standardized benefit plans & monthly costs									
Aetna Health and Life <sup>3</sup> 1-855-523-3107			Α	В	С	D	F	G	K	L	M	N
Age 65 and older	No	Yes	\$137	\$168			\$203	\$187				\$142
NOTE: As of Nov. 1, 2019, Aetna Health ar service existing Medigap plans it issued to V					Vashingt	on state	. The co	mpany v	will contir	nue to h	onor and	d
AMERICAN NATIONAL 1-888-290-1085			Α	В	С	D	F	G	K	L	M	N
Age 65 and older	No	Yes	\$158				\$221	\$177				\$153
With a high deductible	No	Yes					\$63					
ASSURED LIFE ASSOCIATION 1-877-223-3666			Α	В	С	D	F	G	K	L	М	N
Age 65 and older	No	Yes	\$239	\$258	\$321	\$264	\$323	\$267				\$231
ASURIS NORTHWEST HEALTH 1-844-278-7472			Α	В	С	D	F	G	K	L	М	N
Age 65 and older	No	Yes	\$154		\$218		\$219	185	\$117			\$145
Notes about Asuris Northwest: These pla Garfield, Grant, Kittitas, Lincoln, Okanogan,			_				Benton, (	Chelan,	Douglas,	Ferry, I	ranklin,	,

**Note:** Plans and premium costs listed are filed and approved by the Washington State Office of the Insurance Commissioner. Premiums listed are for monthly payments through automatic funds transfer, if available. The premium costs may differ for different modes/methods of payment, so be sure to check with the company.

Companies may change their rates at various times throughout the year, so always check with the company for the latest availability and premiums. Plans issued before June 1, 2010 have different rates due to changes in Medicare.

Questions? Call our Insurance Consumer Hotline at 1-800-562-6900

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<b>COLONIAL PENN</b> 1-800-800-2254			Α	В	С	D	F	G	K	L	М	N	
Age 65 and older	No	Yes	\$141	\$171		\$175	\$277	\$256	\$96	\$165	\$153	\$162	
With a high deductible	No	Yes					\$67						
FIRST HEALTH LIFE &HEALTH 1-800-264-4000			Α	В	С	D	F	G	K	L	М	N	
Age 65 and older	No	Yes	\$146	\$179			\$214	\$199				\$157	
GLOBE LIFE AND ACCIDENT INSURANC 1-800-801-6831	E CO		Α	В	С	D	F	G	K	L	М	N	
Age 65 and older	Yes	Yes	\$110	\$180	\$209		\$211	\$193				\$166	
With a high deductible	Yes	Yes					\$49						
<b>GPM HEALTH &amp; LIFE</b> 1-866-242-7573			Α	В	С	D	F	G	K	L	М	N	
Age 65 and older	No	Yes	\$182				\$268	\$211				\$151	
HUMANA DENTAL 1-866-205-0000			Α	В	С	D	F	G	K	L	М	N	
Age 65 and older	Yes	Yes	\$134				\$215	\$174				\$140	
With a high deductible	Yes	Yes					\$67						
KAISER FOUNDATION HEALTH PLAN OF Potential members: 1-888-796-5999 Existing members: 1-888-901-4636	WA OPTION	ONS	Α	В	С	D	F	G	K	L	M	N	
Age 65 and older	Yes	Yes	\$130				\$241		\$84			\$135	
Notes about Kaiser Foundation Health Pl Foundation Health Plan of WA Options Med		ions plans:	Kaiser P	ermane	nte medi	cal facili	ties will	not acce	pt Origi	nal Medi	care or l	Kaiser	
<b>LOYAL AMERICAN (Cigna)</b> 1-866-459-4272			Α	В	С	D	F	G	K	L	М	N	
Age 65 and older	Yes	Yes	\$195				\$266	\$195				\$140	

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<b>PREMERA BLUE CROSS</b> 1-800-752-6663			Α	В	С	D	F	G	K	L	М	N	
Age 65 and older	Yes	Yes	\$178				\$223	\$185				\$176	
With a high deductible	Yes	Yes					\$92						
REGENCE BLUECROSS BLUESHIELD (1-844-734-3623	OF OREGON	N .	Α	В	С	D	F	G	K	L	М	N	
Age 65 and older	No	Yes	\$151		\$218		\$219	\$175	\$114			\$140	
Notes about Regence BlueCross BlueS	hield of Ore	gon plans:	These pla	ans are	available	only to	Clark Co	ounty res	sidents.				
<b>REGENCE BLUE SHIELD</b> 1-844-734-3623			Α	В	С	D	F	G	K	L	М	N	
Age 65 and older	No	Yes	\$151		\$213		\$214	\$185	\$115			\$145	
Jefferson, King, Kitsap, Klickitat, Lewis, Ma	ason, Pacilic	, Pierce, San	Juan, Sr	kagit, Sk	amania,	Shonon	nisn, ini	ursion, v	vankiaki	um, wan	ia vvalia,		
Whatcom, and Yakima.  SENTINEL  1-888-510-0668			Α	В	С	D	F	G	K	L	М	N	
<b>SENTINEL</b> 1-888-510-0668	No	Yes	<b>A</b> \$282			<b>D</b>	<b>F</b> \$392	G	K	L	М	N	
SENTINEL	No	Yes		<b>B</b> \$314	<b>C</b> \$388		-	G	K	L	M	N N	
SENTINEL 1-888-510-0668 Age 65 and older STATE FARM INSURANCE (Call local agent) Age 65 and older	No Yes	Yes	\$282	\$314	\$388	\$335	\$392			_			
SENTINEL 1-888-510-0668 Age 65 and older STATE FARM INSURANCE (Call local agent)			\$282 <b>A</b>	\$314	\$388 <b>C</b>	\$335 <b>D</b>	\$392 <b>F</b>	G		_		N	
SENTINEL 1-888-510-0668 Age 65 and older STATE FARM INSURANCE (Call local agent) Age 65 and older TRANSAMERICA 1-866-205-9120 Age 65 and older			\$282 <b>A</b> \$156	\$314 <b>B</b>	\$388 <b>C</b> \$252	\$335 <b>D</b> \$160	\$392 <b>F</b> \$255	<b>G</b> \$160	К	_	M	<b>N</b> \$124	
SENTINEL 1-888-510-0668 Age 65 and older STATE FARM INSURANCE (Call local agent) Age 65 and older TRANSAMERICA 1-866-205-9120	Yes	Yes	\$282 <b>A</b> \$156 <b>A</b>	\$314 B	\$388 C \$252 C	\$335 <b>D</b> \$160	\$392 <b>F</b> \$255	<b>G</b> \$160	K	L	M	N \$124	
SENTINEL 1-888-510-0668 Age 65 and older STATE FARM INSURANCE (Call local agent) Age 65 and older TRANSAMERICA 1-866-205-9120 Age 65 and older TRANSAMERICA PREMIER	Yes	Yes	\$282 <b>A</b> \$156 <b>A</b> \$136	\$314 B B \$179	\$388 C \$252 C \$212	\$335 <b>D</b> \$160 <b>D</b> \$196	\$392 F \$255 F \$213	<b>G</b> \$160 <b>G</b> \$196	K K \$98	L \$145	M \$178	N \$124 N \$168	
SENTINEL 1-888-510-0668  Age 65 and older  STATE FARM INSURANCE (Call local agent)  Age 65 and older  TRANSAMERICA 1-866-205-9120  Age 65 and older  TRANSAMERICA PREMIER 1-888-272-9272	Yes	Yes	\$282 <b>A</b> \$156 <b>A</b> \$136 <b>A</b>	\$314 B B \$179	\$388 C \$252 C \$212	\$335 <b>D</b> \$160 <b>D</b> \$196	\$392 F \$255 F \$213	G \$160 G \$196	K K \$98	L \$145	M \$178	N \$124 N \$168	
SENTINEL 1-888-510-0668 Age 65 and older STATE FARM INSURANCE (Call local agent) Age 65 and older TRANSAMERICA 1-866-205-9120 Age 65 and older TRANSAMERICA PREMIER 1-888-272-9272 Age 65 and older UNITED AMERICAN INSURANCE CO	Yes	Yes	\$282 <b>A</b> \$156 <b>A</b> \$136 <b>A</b> \$134	\$314 B B \$179 B	\$388 C \$252 C \$212 C	\$335 <b>D</b> \$160 <b>D</b> \$196 <b>D</b>	\$392 F \$255 F \$213 F \$230	G \$160 G \$196 G \$203	K \$98 K	L \$145	M \$178 M	N \$124 N \$168 N \$175	
SENTINEL 1-888-510-0668 Age 65 and older STATE FARM INSURANCE (Call local agent) Age 65 and older TRANSAMERICA 1-866-205-9120 Age 65 and older TRANSAMERICA PREMIER 1-888-272-9272 Age 65 and older UNITED AMERICAN INSURANCE CO 1-800-755-2137	Yes No No	Yes Yes Yes	\$282  A \$156  A \$136  A \$134	\$314 B B \$179 B	\$388 C \$252 C \$212 C	\$335 D \$160 D \$196 D	\$392 F \$255 F \$213 F \$230	G \$160 G \$196 G \$203	K \$98 K	L \$145	M \$178 M	N \$124 N \$168 N \$175	

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UNITEDHEALTHCARE (AARP) <sup>3</sup> 1-800-523-5800		_	Α	В	С	D	F	G	K	L	M	N		
Age 65 and older	No	Yes	\$133	\$195	\$230		\$230	\$190	\$60	\$134		\$155		
Medicare Select Plan*	No	Yes			\$214		\$215	\$181				\$148		
UNITED OF OMAHA LIFE INSURANCE Co 1-800-667-2937	0	•	Α	В	С	D	F	G	K	L	М	N		
Age 65 and older	No	Yes	\$185				\$262	\$205				\$140		
With a high deductible	No	Yes					\$70							
<b>USAA</b> 1-800-292-8556			Α	В	С	D	F	G	K	L	М	N		
Age 65 and older	No	Yes	\$135				\$218	\$172				\$129		
WASHINGTON STATE HEALTH CARE AU BLUE CROSS PREMERA PLANS 1-800-722-1471	JTHORITY	(HCA)	Α	В	С	D	F	G	K	L	M	N		
Age 65 and older	No	No					\$212							
Under age 65 Medicare disability	No	No					\$361							

**Note about Washington State HCA plans:** These rates are for Washington state residents who are NOT a Public Employees Benefits Board (PEBB) member (PEBB members must enroll directly with HCA). State residents should call Blue Cross Premera at 1-800-722-1471 to enroll.

#### **Footnotes Explained:**

- 1 = PreX (pre-existing condition) is a health problem you had within the three months before the effective date of your new plan. For this condition, a company cannot exclude benefits for that condition for more than three months after the coverage effective date. If you replace your policy and your previous policy was in effect for at least three months, you have no waiting period for any pre-existing conditions.
- 2 = No health screen means the insurance company will not ask you any health questions to decide if they will enroll you in its plan.
- 3 = You must be a member of an association to buy these plans.
- \* Medicare Select policies may require you to use specific hospitals, doctors, or other health care providers to get full coverage. They must disclose network restrictions to you.

The appearance of a company on this list does not constitute an endorsement of a company or its policies by the Washington State Office of the Insurance Commissioner, SHIBA, or its volunteers.

Rev. 10-17-2019

## 10 Standardized Medicare Supplement (Medigap) plans chart

Effective on or after Jan. 1, 2019

How to read the chart: ✓ = policy covers 100% of benefit; % = policy covers that percentage; Blank = policy doesn't cover that benefit

Note: The Medicare Supplement policy covers coinsurance only after you've paid the Medicare deductible (unless the policy also covers the deductible).

Basic benefits	Α	В	С	D	F*	G	K	L	M	N
Part A: Hospital coinsurance (plus costs up to an additional 365 days after Medicare benefits end)	✓	✓	✓	✓	✓	✓	✓	<b>✓</b>	✓	✓
Part A: Hospice care coinsurance or copay	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Part B: Coinsurance or copay	✓	✓	✓	✓	✓	✓	50%	75%	✓	<b>√</b> ***
Medicare preventive care Part B coinsurance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Parts A & B: Blood (first 3 pints)	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Additional benefits	Α	В	С	D	F*	G	K	L	М	N
Skilled nursing facility care coinsurance			✓	✓	✓	✓	50%	75%	✓	✓
Part A deductible: \$1,364		✓	✓	✓	✓	✓	50%	75%	50%	✓
Part B deductible: \$185			✓		✓					
Part B excess charges					✓	✓				
Foreign travel emergency (lifetime limit of \$50,000)			80%	80%	80%	80%			80%	80%
Out-of-pocket yearly limit**							\$5,560	\$2,780		

<sup>\*</sup>Plan F offers a high-deductible plan. You pay for Medicare-covered costs up to the deductible amount (\$2,300 in 2019) before your plan pays anything.

**NOTE:** Starting Jan. 1, 2020, Medigap plans sold to people new to Medicare will not cover the Part B deductible. Due to this change, Medigap Plans C and F will no longer be available to people new to Medicare starting on Jan. 1, 2020. If you already have either of these 2 plans (or the high-deductible version of Plan F) before Jan. 1, 2020, you can keep your plan. If you were eligible for Medicare before Jan. 1, 2020, but not yet enrolled, you may be able to buy one of these plans.

### Need more help?

There is no yearly open enrollment period for Medicare Supplement (Medigap) plans. You may apply to buy or switch plans at any time.

However, insurers may require you to pass a health questionnaire. If you have questions about who needs to take the questionnaire, call our Insurance Consumer Hotline.

If you want individual help understanding all of your options, call our hotline and ask to speak with a SHIBA counselor in your area.

<sup>\*\*</sup>After you meet your out-of-pocket yearly limit and Part B deductible, the plan pays 100% of covered services for the rest of the calendar year.

<sup>\*\*\*</sup>Plan N pays 100% of the Part B coinsurance except up to \$20 copays for some office visits and up to \$50 copays for emergency room visits (if the hospital admits you, the plan waives your emergency room copays).

### Insurance Consumer Hotline: 1-800-562-6900



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