

Table 1: Benefits for 2012 Medicare Supplement Insurance Plans

✓ = Plan covers 100% of the described benefit. “50%” or 75% = Plan pays that percentage of the cost. If the column is blank, the plan doesn’t cover that benefit

BASIC BENEFITS	STANDARD PLANS										
	A	B	C	D	F	FHD*	G	K	L	M	N
Hospitalization: Part A co-insurance for days 61 – 90 (\$283 per day) and days 91 – 150 (\$566 per day) while using your 60 day lifetime reserve days, and all costs after 150 days. Plus 100% coverage for 365 additional days after Medicare benefits end.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Medical Expenses: Part B co-insurance (generally 20% of Medicare-approved expenses) or co-payments for hospital outpatient services (after you meet the \$162 yearly Part B deductible), for other than preventive services.	✓	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓***
Blood: First three pints of blood each year.	✓	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Hospice Care: Coverage of cost sharing for all Part A Medicare-eligible hospice and respite care expenses.	✓	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓

	A	B	C	D	F	F ^{HD} *	G	K	L	M	N
ADDITIONAL BENEFITS											
Skilled Nursing Facility Co-insurance \$141.50 per day for days 21 - 100 per <i>benefit period</i> .			✓	✓	✓	✓	✓	50%	75%	✓	✓
Medicare Part A Deductible \$1,132 per <i>benefit period</i> .		✓	✓	✓	✓	✓	✓	50%	75%	50%	✓
Medicare Part B Deductible \$162 per year in 2011.			✓		✓	✓					
Emergency Care Outside U.S. 80% of the cost of emergency care that begins during the first two months of each trip (you pay a \$250/year deductible). Up to \$50,000 in lifetime.			✓	✓	✓	✓	✓			✓	✓
Medicare Part B Excess Charges Difference between doctor's charge and Medicare's approved amount. <i>Note: Vermont law prohibits doctors from billing patients for the difference between their charge and Medicare's approved amount. However, services received in other states may be subject to these excess charges.</i>					✓	✓	✓				
Medicare Prevention Care Part B Coinsurance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Yearly Out-of-Pocket Limit**								\$4,640	\$2,320		

Plan F^{HD} is a high deductible plan. Benefits from plan F^{HD} will not begin until out-of-pocket expenses exceed \$2,000 in 2011 before your Medicare Supplement plan pays anything.

*After you meet your yearly out-of-pocket limit and your yearly Part B deductible (\$162 in 2011), the Medicare Supplement plan pays 100% of covered services for the rest of the calendar year. Out-of-pocket limit is the maximum amount you would pay for coinsurance and copayments.

** Plan N pays 100% of the Part B coinsurance except up to \$20 copayment for office visits and up to \$50 for emergency department visits