

MEDICARE SUPPLEMENT INSURANCE

from Physicians Life Insurance Company®

a member of the Physicians Mutual family



Physicians
Mutual®

Insurance for all of us.®

First Eligible for Medicare Before Jan. 1, 2020

The chart below shows the 2022 dollar amount you are responsible for depending on which plan you choose.

	Plan A	High Deductible Plan G*	Innovative Plan G**	Plan G	High Deductible Plan F*	Innovative Plan F**	Plan F
Hospital Part A Benefit Period Deductible	\$1,556	\$1,556	\$1,556	\$0	\$1,556	\$1,556	\$0
Skilled Nursing Co-insurance	\$194.50	\$194.50	\$194.50	\$0	\$194.50	\$194.50	\$0
Part B Annual Deductible	\$233	\$233	\$233	\$233	\$233	\$233	\$0
Part B Co-insurance	\$0	20%	20%	\$0	20%	20%	\$0
Part B Excess	All	All	All	\$0	All	All	\$0
Covered Preventive Services***		\$0	\$0	\$0	\$0	\$0	\$0
Plan Deductible ¹		Up to \$2,490 in 2022 Plan then pays 100% for remainder of 2022	Up to \$2,490 in 2022 Plan then pays 100% for remainder of 2022		Up to \$2,490 in 2022 Plan then pays 100% for remainder of 2022	Up to \$2,490 in 2022 Plan then pays 100% for remainder of 2022	
Plan Deductible Elimination Date			January 1, 2025 100% coverage for the remainder of the policy			January 1, 2025 100% coverage for the remainder of the policy	
Other Benefits – Not Covered by Medicare							
Foreign Travel	All	•\$250 Deductible •20% and amounts over the \$50,000 lifetime maximum	•\$250 Deductible •20% and amounts over the \$50,000 lifetime maximum	•\$250 Deductible •20% and amounts over the \$50,000 lifetime maximum	•\$250 Deductible •20% and amounts over the \$50,000 lifetime maximum	•\$250 Deductible •20% and amounts over the \$50,000 lifetime maximum	•\$250 Deductible •20% and amounts over the \$50,000 lifetime maximum

* With the High Deductible Plan F (HDF) and High Deductible Plan G (HDG), you must meet an annual plan deductible before the plan pays anything (except preventive benefits) each year, for the life of the policy. Once plan deductible has been met, policy would pay 100% of covered expenses.

** With Innovative Plan F and Innovative Plan G, you must meet an annual plan deductible before the plan pays anything (except preventive benefits) each year. This deductible automatically goes away January 1, following the end of the third calendar year in which your policy is in force. Once plan deductible has been met, policy would pay 100% of covered expenses.

*** Amounts not paid by Medicare.

¹ 2022 Plan Deductible. This amount may increase each year. Out-of-pocket expenses for this deductible are expenses that would ordinarily be paid by the policy, plus the Part B deductible for HDG. So for both HDF and HDG, this includes the Medicare deductibles for Part A and Part B, but does not include the plan's separate foreign travel emergency deductible.

We are not connected with, or endorsed by, the U.S. Government or the Federal Medicare Program. Please ask your Physicians Life agent/producer and refer to your Brochure and Outline of Coverage for complete details, including benefits and costs of those insurance policies which are available to you. This is a solicitation of insurance. Insurance policy/rider form numbers: L030, L035, L036, L037, L038, F001, F002. **Please see back side for limitations.**

Plan A L030 policy limitations: We will not pay for: a) confinement that begins or expenses incurred while your policy is not in force, (in SC: subject to the Extension of Benefits provisions) b) services of the type not covered by Medicare, unless specifically provided by the policy.

Plan F L035, Plan G L036, High Deductible F L037, and High Deductible G L038 policy limitations: We will not pay for: a) confinement that begins or expenses incurred while your policy is not in force, (in SC: subject to the Extension of Benefits provisions) b) services of the type not covered by Medicare, unless specifically provided by the policy. Preventive Benefits are subject to the following exclusions: 1. Dental services defined by American Dental Association Current Dental Terminology (CDT) codes; 2. Chiropractic services, acupuncture and acupressure services; 3. Weight loss treatment of any type; 4. Prescription drugs or over-the-counter drugs or supplements; 5. All vision services; 6. Experimental preventive services; 7. Any test, screening or procedure to determine the likelihood of developing or passing on to children any disease or disorder, including but not limited to genetic testing.