

Medicare Supplement Insurance Step-by-step guide MEDIGAP

What's Inside Your 2025 Medigap Guide

This comprehensive guide will walk you through everything you need to know about Medicare Supplement Insurance (Medigap) for 2025. We've organized this information to help you make informed decisions about your healthcare coverage during retirement, with specific tools and resources for comparing plans and insurance providers.

Medigap Basics: What You Need to Know (Page 3)

Essential information about how Medigap policies work, what they cover, and why they're an important part of your retirement healthcare planning.

Understanding Medigap Open Enrollment (Page 4)

Critical timing information about when to enroll for the best rates and guaranteed acceptance, regardless of health conditions.

Detailed Plan Comparisons (Pages 5-6)

Side-by-side comparisons of all standardized Medigap plans, including a comprehensive benefits chart and coverage details.

Plan Comparison Chart and Cost Calculator (Page 6)

Tools to help you evaluate different plans based on your specific healthcare needs and budget constraints.

How to Compare Insurance Companies (Page 7)

Beyond premium prices: what to look for when evaluating Medigap insurance providers for reliability and value.

Special Situations and Considerations (Page 8)

Important information for those with preexisting conditions, under 65, or with specific state regulations affecting their coverage options.

How to Use This Guide: We recommend reading through each section sequentially, making notes about your personal healthcare needs and budget constraints as you go. The worksheet on page 6 will help you compare costs across different plans and providers.

Medigap Basics: What You Need to Know

This guide will cover everything you need to understand about Medicare Supplement Insurance:

What Is Medigap?

Medicare Supplement Insurance, commonly known as "Medigap," is private insurance designed to help pay for costs that Original Medicare (Parts A and B) doesn't cover—such as copayments, coinsurance, and deductibles.

Who Can Buy Medigap?

To purchase a Medigap policy, you must:

- Be enrolled in Medicare Parts A and B
- Be 65 or older (in most states)
- Pay a monthly premium (in addition to your Part B premium)

Note: In some states, Medigap policies are available to people under 65 with disabilities or specific diseases. Check with your State Insurance Department for rules in your area.

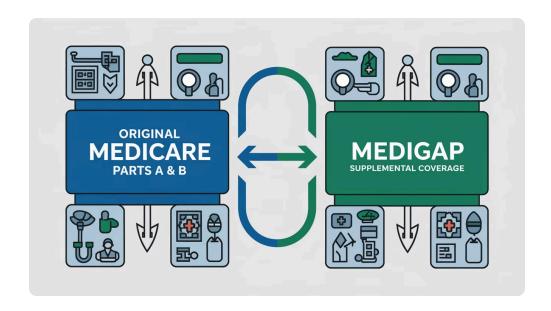
What Medigap Doesn't Cover

Medigap policies generally don't cover:

- Long-term care
- Vision or dental care
- Hearing aids
- Eyeglasses
- Private-duty nursing
- Prescription drugs (You need Medicare Part D for this)



Understanding Medigap Open Enrollment



Medicare-Medigap Relationship

Medigap policies work alongside your Original Medicare (Parts A & B) to fill coverage gaps. While Medicare pays its share of approved costs, Medigap helps cover remaining expenses like copayments, coinsurance, and deductibles.



What's Inside



Your Critical Enrollment Window



Why This Period **Matters**

When your 6-month enrollment period begins Special protections during this enrollment period



Timeline Example

See how the enrollment period works in practice



Consequences of Missing Enrollment

Potential penalties and restrictions

Your Critical Enrollment Window

Your Medigap Open Enrollment Period is a one-time, 6-month window that starts the first month you have Medicare Part B (Medical Insurance) and are 65 or older.



1

Why This Period Is Crucial

During this period, insurance companies:

- Cannot deny you coverage based on pre-existing health conditions
- **Cannot charge you higher premiums** based on your health status
- Must sell you any policy they offer in your area

Example Timeline

If you turn 65 in June and enroll in Part B that same month, your Medigap Open Enrollment Period runs from June 1 through November 30.



3

Consequences of Missing This Window

If you miss your Open Enrollment Period, companies can:

- Charge you 30-50% higher premiums
- Require medical underwriting (health screening)
- Deny coverage altogether for preexisting conditions like diabetes or heart disease
- Impose waiting periods for coverage of pre-existing conditions

CRITICAL ADVICE: Mark your Open Enrollment Period on your calendar and start researching Medigap plans 2-3 months before it begins.

Detailed Plan Comparisons



Table of Contents

- Understanding Medigap Open Enrollment Enrollment period details and timeline
- **Detailed Plan Comparisons** (current section)
 - Plan G: Most Popular Option
 - Plan N: Lower Premium Alternative
- Plan Comparison Chart Comprehensive benefits comparison across all available plans

Medigap offers standardized plans labeled with letters (A, B, C, D, F, G, K, L, M, and N). Each plan letter offers the same basic benefits regardless of which insurance company sells it.

Plan G: Most Popular Option

Plan G covers:

- Part A coinsurance and hospital costs (up to an additional 365 days after Medicare benefits are used)
- Part B coinsurance or copayment
- Blood (first 3 pints)
- Part A hospice care coinsurance or copayment
- Skilled nursing facility care coinsurance
- Part A deductible
- Part B excess charges
- 80% of foreign travel emergency care (up to plan limits)

What you pay with Plan G:

- Monthly premium
- Part B deductible (\$239 in 2025)
- After meeting the Part B deductible, you typically pay \$0 for Medicare-approved services

Plan N: Lower Premium Alternative

Plan N covers:

- Same as Plan G, except it doesn't cover Part B excess charges
- You also pay up to \$20 copay for office visits and up to \$50 for ER visits that don't result in admission

What you pay with Plan N:

- Lower monthly premium than Plan G
- Part B deductible (\$239 in 2025)
- Small copayments for some office and emergency room visits
- Any Part B excess charges (up to 15% above Medicare-approved amounts)

Note: Plans C and F are only available to those eligible for Medicare before January 1, 2020.

Plan Comparison Chart

Table of Contents



Coverage Overview

Find detailed coverage information for all standardized Medigap plans (A, B, D, G, K, L, M, and N) currently available to new Medicare enrollees.



Benefits Compared

Compare coverage
percentages across plans
for essential benefits
including hospital
coinsurance, Part B
coinsurance, blood
coverage, hospice care,
skilled nursing,
deductibles, excess
charges, and foreign travel
emergency.



Cost Considerations

Review out-of-pocket limits for Plans K and L, and special cost-sharing requirements for Plan N.

			eme	ergency.				
Benefit	Plan A	Plan B	Plan D	Plan G	Plan K	Plan L	Plan M	Plan N
Part A Hospit al Coinsu rance	100%	100%	100%	100%	100%	100%	100%	100%
Part B Coinsu rance	100%	100%	100%	100%	50%	75%	100%	100%*
Blood (first 3 pints)	100%	100%	100%	100%	50%	75%	100%	100%
Part A Hospic e Coinsu rance	100%	100%	100%	100%	50%	75%	100%	100%
Skilled Nursin g Facility	No	No	100%	100%	50%	75%	100%	100%
Part A Deduct ible	No	100%	100%	100%	50%	75%	50%	100%
Part B Deduct ible	No	No	No	No	No	No	No	No
Part B Excess Charge s	No	No	No	100%	No	No	No	No
Foreig n Travel Emerg ency	No	No	80%	80%	No	No	80%	80%
Out-of- pocket Limit	N/A	N/A	N/A	N/A	\$6,940	\$3,470	N/A	N/A

^{*}Plan N requires copays: up to \$20 for office visits, up to \$50 for ER visits not resulting in admission

Cost Calculator Worksheet

Estimating Your Annual Medigap Costs

Use this worksheet to compare different Medigap plans based on your expected healthcare needs.

1 Table of Contents

2 Step 1: Gather Annual Premium Information

Compare quotes from multiple insurance companies

3 Step 2: Add Your Annual Part B Deductible

Include the standard Medicare Part B deductible

4 Step 3: Estimate Additional Costs for Plan N

Calculate potential copays and excess charges

5 Step 4: Calculate Total Annual Cost

Determine your complete yearly expenses for each plan

6 Step 5: Consider Long-Term Value

Evaluate factors beyond immediate costs

Step 1: Gather Annual Premium Information

Get quotes from at least three insurance companies for the same Medigap plan letter.

Company	Plan G Premium	Plan N Premium	Other Plan:
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

Step 2: Add Your Annual Part B Deductible

All Medigap plans currently being sold require you to pay the Part B deductible.

• Part B Deductible for 2025: \$239

Step 3: Estimate Additional Costs for Plan N

If considering Plan N, estimate the following:

Cost Type	Calculation	Estimated Annual Cost
Office visit copays	(# of expected visits) × (up to \$20)	\$
ER visit copays	(# of expected ER visits) × (up to \$50)	\$
Potential excess charges	Estimate based on whether your doctors accept Medicare assignment	\$

Step 4: Calculate Total Annual Cost

Plan Type	Annual Premium	Part B Deductible	Additional Costs	Total Annual Cost
Plan G	\$	\$239	\$0	\$
Plan N	\$	\$239	\$	\$
Other Plan:	\$	\$239	\$	\$

Step 5: Consider Long-Term Value

Remember that the cheapest option today may not be the best value over time. Consider:

- Company's history of premium increases
- Financial stability rating
- Customer service reputation

Enrollment Checklist

Before Your Open Enrollment Period

- Confirm your Medicare
 Part B enrollment date
- Mark your 6-month
 Medigap Open Enrollment
 Period on your calendar
- Research available
 Medigap plans in your area
- Get premium quotes from multiple insurance companies
- Check if your doctors accept Medicare assignment
- Review your typical medical usage and anticipated needs
- Use the cost calculator worksheet to compare plans

During Your Open Enrollment Period

- Select your preferred
 Medigap plan
- Choose an insurance company with competitive rates and good stability
- Complete the application
- Submit the application early in your enrollment period
- Keep copies of all application materials and correspondence
- Confirm receipt of your application
- Pay your first premium

After Enrollment

- Verify your coverage start date
- Receive and review your
 Medigap policy
- Set up premium payment method
- Create a Medicare.gov account to manage your benefits
- Keep your Medicare and Medigap cards together
- Report any errors or problems immediately

Pro Tip: Don't wait until the end of your Open Enrollment Period. Apply early to ensure adequate processing time and avoid potential gaps in coverage.

Page 8 of 13

How to Compare Insurance Companies: Beyond Premium Prices

While premiums are important, other factors can impact your long-term satisfaction with a Medigap policy.

Financial Stability

Companies with strong financial ratings are more likely to remain solvent and honor their coverage obligations.

- Check ratings from A.M.
 Best, Moody's, or
 Standard & Poor's
- Look for ratings of A or better

Rate Increase History

A slightly higher premium from a company with a history of stable, modest increases may cost less long-term than the cheapest initial option.

- Ask each company about their average rate increases over the past 3-5 years
- Request information about how often they typically raise premiums

Pricing Methods

Companies use different methods to set premiums:

- 1. Community-rated (no-age-rated):
 - Everyone pays the same premium regardless of age
 - May start higher but increase more slowly over time

2. Issue-age-rated:

- Premium based on your age when you buy the policy
- Doesn't increase due to age, but may rise due to inflation

3. Attained-age-rated:

- Premium starts lower but increases as you get older
- o Often the cheapest initially but becomes more expensive over time

Customer Service Quality

- Check complaint ratios through your State
 Insurance Department
- Read reviews from current policyholders
- Call the company with questions to assess their responsiveness
- Ask about their claims processing time and payment accuracy

Special Discounts

Some companies offer discounts for:

- Household (if both spouses have policies)
- Non-smokers
- Automatic payment enrollment
- Annual payment (versus monthly)
- Multiple policies with the same company

Action Step: Create a comparison spreadsheet with these factors for each company you're considering.

Common Mistakes to Avoid: Critical Errors That Can Cost You Thousands

In this section, we'll cover six critical Medicare enrollment mistakes:

1 Waiting Too Long to Enroll

Consequences of delaying beyond your Open Enrollment Period **2** Focusing Only on Premium Cost

Why the cheapest option might cost more long-term

3 Confusing Medicare Advantage with Medigap

Understanding the fundamental differences between coverage types

4 Not Checking if Your Doctors Accept Medicare Assignment

How to avoid unexpected excess charges

Misunderstanding the "Free Look"
Period

Using the 30-day review period effectively

Not Comparing Standardized Benefits

Why benefits are identical across companies for the same plan letter

1

1. Waiting Too Long to Enroll

Mistake: Delaying enrollment beyond your Open Enrollment Period

Consequence: Medical underwriting, higher premiums, possible denial of coverage

Solution: Mark your enrollment period and apply early

2

2. Focusing Only on Premium Cost

Mistake: Choosing the lowest premium without considering other factors

Consequence: Higher long-term costs as premiums increase

Solution: Consider pricing method, company stability, and rate increase history

3

3. Confusing Medicare Advantage with Medigap

Mistake: Not understanding these are completely different types of coverage

Consequence: Enrolling in the wrong type of plan for your needs

Solution: Note that you cannot have both Medicare Advantage and Medigap

4

4. Not Checking if Your Doctors Accept Medicare Assignment

Mistake: Assuming all doctors accept Medicare's approved amount

Consequence: Potential excess charges if you choose Plan N

Solution: Confirm with your providers before selecting a plan

5

5. Misunderstanding the "Free Look" Period

Mistake: Not knowing you have 30 days to review a new policy

Consequence: Being stuck with an unsuitable policy

Solution: Review your policy carefully during this period

6. Not Comparing Standardized Benefits

Mistake: Believing a Plan G from one company covers more than a Plan G from another

Consequence: Paying more for identical coverage

Solution: Remember that benefits are standardized; only compare prices and company

quality

6

Special Situations and Considerations

Below you'll find guidance on how to handle Medicare enrollment during specific life circumstances:



Working Past Age 65

How employer coverage affects your Medicare decisions



Moving to a New State

Managing your Medigap policy when relocating



Pre-existing Conditions Outside Open Enrollment

Options when you have health issues but missed initial enrollment



Switching Medigap Policies Later

Considerations for changing your supplemental coverage



Working Past Age 65

If you have employer health coverage through active employment:

- You may be able to delay Medicare enrollment without penalty
- Check with your benefits administrator to see if your employer plan is "creditable coverage"
- You'll get a Special Enrollment Period when you lose that coverage



Moving to a New State

- Medigap policies are generally valid nationwide, but premiums vary by location
- You may want to compare rates in your new state
- Some states offer additional rights to purchase or switch Medigap policies



Pre-existing Conditions Outside Open Enrollment

If you have health issues and are outside your Open Enrollment Period:

- Some states offer additional consumer protections
- Check if you qualify for any guaranteed issue rights
- Contact your State
 Health Insurance
 Assistance Program
 (SHIP) for guidance



Switching Medigap Policies Later

If you want to change Medigap policies after your Open Enrollment Period:

- You'll likely face medical underwriting
- Apply for the new policy before canceling your current one
- Use the 30-day "free look" period to evaluate your new policy

Where to Get Help

Official Resources

Medicare

Website: <u>Medicare.gov</u>

• **Phone:** 1-800-MEDICARE (1-800-633-4227)

• Hours: 24 hours a day, 7 days a week

State Health Insurance Assistance Program (SHIP)

Free, personalized counseling from trained volunteers

• Website: shiphelp.org

• **Phone:** 877-839-2675

State Insurance Department

- Regulates insurance companies in your state
- Handles complaints against insurers
- Can provide information about companies' complaint histories

GovClarity Resources

- Visit our YouTube channel for more Medicarerelated videos
- Download our other guides covering different Medicare topics
- Subscribe for updates on Medicare changes and enrollment periods



Remember that getting personalized assistance can help you navigate the complexities of Medicare and ensure you're making the best choices for your specific situation.

Page 12 of 13

Final Checklist and Glossary

Table of Contents

1. Introduction to Medicare

Overview of Medicare and its parts

2. Medigap Plans

Understanding supplemental coverage options

3. Enrollment Periods

When to sign up for Medicare and Medigap

4. Choosing the Right Plan

Comparing costs and benefits

5. Where to Get Help

Official resources and assistance

6. Final Checklist & Glossary

Action steps and key terminology

Final Checklist: Taking Action

- Identify your Medigap Open Enrollment Period
- Research available Medigap plans (focus on Plans G and N for most people)
- Get quotes from at least three insurance companies
- Compare pricing methods and company stability
- Complete and submit your application during your Open Enrollment Period
- Keep copies of all documents
- Set up a Medicare.gov account to manage your benefits

Remember, the right Medigap decision now can protect your finances for years to come. Don't rush, but don't delay—take advantage of your Open Enrollment Period for the best coverage at the best price.

Glossary of Terms

Assignment:	A doctor's agreement to accept Medicare's approved amount as full payment for services.
Coinsurance:	Your share (percentage) of the costs for covered services after you pay deductibles.
Copayment:	A fixed amount you pay for a covered service.
Deductible:	The amount you must pay before Medicare or your insurance begins to pay.
Excess Charge:	The difference between what a doctor charges and what Medicare approves (limited to 15% above Medicare-approved amounts).
Guaranteed Issue Rights:	Situations when insurance companies must sell you a Medigap policy, cannot deny you coverage, and cannot charge you more for pre-existing conditions.
Medical Underwriting:	The process of evaluating your health status when applying for insurance.
Medigap Open Enrollment Period:	The 6-month period that starts the month you turn 65 and enroll in Medicare Part B.
Premium:	The periodic payment to Medicare or a private insurance company for health coverage.

Page 13 of 13

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