

**COMPARISON CHART**  
**of**  
**MEDICARE SUPPLEMENT INSURANCE**  
**and**  
**MEDICARE CONTRACTING HMOs**  
**Available in Hunterdon County**

**Prepared by the**

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## ***INTRODUCTION***

As Medicare does not cover all medical expenses, some people choose to purchase Medicare Supplement (Medigap) Insurance, or to join a Medicare Advantage Health Maintenance Organization (HMO).

This booklet has been prepared to help you compare the Medicare Supplement Insurance Policies and HMOs approved by the New Jersey Department of Insurance for sale in Hunterdon County, New Jersey. This booklet is **not an endorsement** of the listed policies or HMOs, nor a substitute for the literature offered by the insurance companies and HMOs describing their products in detail. **Purchase only after careful consideration of all the facts. Hunterdon County Division of Senior, Disabilities, and Veteran Services, Senior Health Insurance Program counselors can assist you in using this chart. For an appointment, call 908-788-1361.**

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## **MEDICARE COVERAGE - 2017**

### **MEDICARE PART A:**

<p><b>HOSPITAL CARE</b>.....                  (Semiprivate room, board, general nursing, miscellaneous services, supplies)</p>	<p><b>1-60 Days</b> .....All but \$1,316.00Deductible  <b>61-90 Days</b> .....All but \$329 per Day  <b>91-150 Days</b> .....All but \$658 per Day                  (once in a lifetime)  <b>151+ Days</b> .....No Coverage</p>
<p><b>SKILLED NURSING FACILITY CARE</b>                  (Must be Medicare approved skilled nursing facility. Patient must require specialized approved care and must enter facility within 30 days after hospital confinement of at least 3 days.)</p>	<p><b>1-20 Days</b> .....All (100%)  <b>21-100 Days</b> .....All but \$164.50 per day  <b>100+ Days</b> .....No Coverage</p>
<p><b>HOME HEALTH CARE</b>.....                  (Medically necessary equipment, supplies; part-time or intermittent skilled or health aide services)</p>	<p><b>Services</b> .....100% of Approved Amount  <b>Equipment</b> .....80% of Approved Amount</p>
<p><b>HOSPICE CARE</b>.....                  (Full scope of palliative medical <b>drugs, in-patient respite care</b> and <b>support services</b> for the terminally ill)</p>	<p><b>All but limited costs for outpatient care.</b></p>
<p><b>BLOOD</b>.....</p>	<p><b>All but first 3 pints per calendar year</b></p>

**Coverage shown is for each Benefit Period. A Benefit Period begins the first day of confinement and ends when patient has gone 60 consecutive days without confinement in a hospital or without receiving skilled care in a skilled nursing facility.**

### **MEDICARE PART B:**

<p><b>MEDICAL EXPENSE</b>.....                  (Medically necessary physicians services, outpatient hospital treatment, supplies, therapy, diagnostic tests, equipment, etc.)</p>	<p><b>80% of Approved Amount</b>  <b>(after \$183 Annual Deductible)</b></p>
<p><b>LABORATORY SERVICES</b>.....                  (Blood tests, biopsies, urinalysis, etc.)</p>	<p><b>100% of Approved Amount</b></p>
<p><b>BLOOD</b>.....</p>	<p><b>First 3 Pints 100%; Then</b>  <b>80% of Approved Amount</b>.....  <b>(After \$183 Annual Deductible)</b></p>

## ***DEFINITIONS OF TERMS***

### **APPROVED AMOUNT:**

The amount Medicare determines to be reasonable for a covered service. It may be less than the actual charge.

### **BENEFIT PERIOD:**

Medicare Part A coverage is per Benefit Period, which begins the first day of confinement and ends when patient has gone 60 consecutive days without confinement in a hospital or without receiving skilled care in a skilled nursing facility.

### **CO-INSURANCE:**

Percentage of Medicare Approved Amount not paid by Medicare, after Deductible has been met.

### **DEDUCTIBLE:**

Initial portion of Medicare Approved Amounts not paid by Medicare, but after which Medicare will pay. For Medicare Part A, there is a Deductible for each Benefit Period. For Medicare Part B, there is a Deductible for each calendar year

### **MEDICALLY UNDERWRITTEN:**

Some policies are medically underwritten, which means that coverage may be denied on the basis of medical history except during the first 6 months after enrollment in Medicare Part B.

### **PRE-EXISTING CONDITIONS:**

For the first six months after enrollment in Medicare Part B (usually at age 65), one cannot be denied purchase of policies listed regardless of medical history or any pre-existing conditions, and higher premium cannot be charged because of such conditions.

Even though insurance companies may sell Medicare Supplement Insurance policies to persons with pre-existing medical conditions, many policies specify a pre-existing period (up to 6 months), during which there will be no coverage for treatment for conditions which existed up to 6 months prior to the effective date of the policy. This pre-existing condition period must be waived for persons purchasing a policy to replace their current Medicare supplement coverage. Some companies also waive the pre-existing condition period for persons who purchase the policy just prior to becoming 65, or within one month of enrollment in Medicare Part B.

## ***MEDIGAP POLICY BENEFITS***

***A Medigap policy is a type of insurance sold by private companies to fill the gaps in Original Medicare Plan coverage. It can only be sold in 11 standardized plans, A through N. The present standardized system was created after consumer groups proved that seniors were being sold policies that duplicated insurance they already had. It's now much easier to compare benefits and choose a policy that best suits your needs. Here are some guidelines to help you make that choice.***

### ***Basic Benefits:***

All plans must include coverage of these costs for 2017 the \$329/day co-payment for hospital days 61-90 per benefit period; \$658/day co-payment for days 91- 150; and 100% of all costs up to 365 additional days per lifetime; the 20% co-payment for medical expenses; and payment for the first three pints of blood yearly.

### ***Part A In-Patient Hospital Deductible (included in plans B through N):***

This benefit pays the deductible (\$1,316 in 2017) for hospital stays. Since the deductible must be met for each new benefit period, this coverage could prove especially valuable should you have one or more return visits to the hospital within the year.

### ***Part A Skilled Nursing Home Co-Insurance (included in plans C through N):***

This benefit pays the co-payment (\$164.50 a day in 2017) for days 21 through 100 of daily skilled care in a nursing home per benefit period. Only a small portion of Medicare beneficiaries require daily skilled care in a nursing home. Because Medigap policies only pay for services covered by Medicare, Medigap coverage is also limited.

### ***Part B Deductible (included in plans C, F):***

This benefit pays for the first \$183 of Medicare-covered medical services in each calendar year. Although it has popular appeal, it's likely to cost as much or more than the maximum benefit you can receive.

### ***Part B-Excess Doctor Charges (100% coverage in plans F):***

This benefit pays the difference between the doctor actual charge and the Medicare-approved charge. Under federal law, physicians who do not accept assignment--that is, do not take as full payment the amount approved by Medicare--cannot charge you more than 15% above that amount. This benefit pays all or part of the excess charges, depending on which plan you choose. If most or all of your doctors accept assignment, you probably do not need this benefit.

## ***MEDICARE ADVANTAGE HEALTH MAINTENANCE ORGANIZATION (HMO)***

Instead of receiving your Medicare coverage in the Original Medicare program, you may enroll in a Medicare Advantage HMO. When you enroll in a Medicare Advantage HMO plan, you are **NOT** giving up Medicare. You are simply receiving your Medicare in a different way. A Medicare Advantage HMO is a type of “managed care” that insurance companies, under a contract with the Federal Medicare agency, offer to people with both Parts A and B of Medicare. The contract period is from January 1<sup>st</sup> through December 31<sup>st</sup>.

Under the contract, the Federal Medicare agency gives the insurance company a fixed amount of money each month (called a “capitation”) for each Medicare member. With the money from the Federal government, the insurance company must provide each member with the same services that are covered under Original Medicare Part A and Part B. Many Advantage HMO plans also include limited coverage for some routine services (e.g. hearing, vision, and dental care). A Medicare Advantage HMO, then, is Medicare coverage for anyone who enrolls in one.

Unlike Original Medicare, when you enroll in a Medicare Advantage HMO, you may only see certain doctors and go to certain hospitals within your area. These doctors and hospitals are called the HMO’s “network”. They have agreed to treat people from the HMO. When you first become a member of the HMO, you must choose a Primary Care Physician (PCP) who manages your care and provides you with most of your health care services. Your PCP will decide if you need to see a specialist, and will give you a written referral. When you receive your health care services, you present the identification card you got when you became a member of the Medicare Advantage HMO plan. You don’t present your Medicare card.

As a member of a Medicare Advantage HMO, you will not have the same out-of-pocket expenses that you have with Original Medicare. There is no Medicare Part B annual deductible in a Medicare Advantage HMO. You will not be responsible for the Medicare Part B coinsurance of 20% each time you see a doctor. There will not be any Medicare Part A hospital inpatient coinsurance amounts.

Most Medicare Advantage HMOs in New Jersey charge a monthly premium, in addition to the Medicare Part B monthly premium. When you see your PCP, you will pay a fixed amount ranging from \$15 to \$75. If you need to see a specialist, you will pay a fixed co-payment ranging from \$15 to \$75. If you are admitted to a hospital, some Medicare Advantage HMO plans in New Jersey charge a deductible. Most importantly, if you get care outside the HMO’s network without a referral and it is not a medical emergency (life-threatening) or a situation requiring urgent care (when you are geographically in another area), you will be totally responsible for all costs. Neither Medicare nor the HMO will pay anything because Medicare has already given the HMO money to provide you with all of your healthcare services, and the HMO pays the doctors and hospitals in its network and expects you to use them when you need care. You cannot buy a Medicare supplement to pay the out of pocket costs you are responsible for in a Medicare Advantage HMO plan. Medicare supplements only work with Original Medicare.

You may enroll in a Medicare Advantage plan at any time. Your coverage will take effect the first day of the month after the plan receives your enrollment form. You may also disenroll at any time. If you disenroll, you will return to Original Medicare on the first day of the month after the plan receives your written disenrollment request, or the first day of a month you specify in your disenrollment letter.

**Medicare Supplement (Medigap) Insurance Companies  
Offering Policies in New Jersey as of January 2017**

*Please call the companies directly for detailed information about eligibility for enrollment.*

<i>INSURANCE COMPANY NAME</i>	<i>TELEPHONE NUMBER OR CONTACT AGENT</i>	<i>PRE-EXISTING MEDICAL CONDITION WAITING PERIOD*</i>
<b>Aetna Health &amp; Life Ins. Company</b>	1 800-264-4000	None
<b>Aetna Life Insurance Company</b>	1 800-345-6022	None
<b>AARP issued by United Healthcare</b> <i>(AARP Membership is required)</i>	1 800-523-5800	3 months
<b>American Progressive Life &amp; Health Ins. Co. of NY</b>	1 800-332-3377	6 months
<b>Americo Financial Life &amp; Annuity Ins. Company</b>	1 877-212-2346	None
<b>AmeriHealth Insurance Company of New Jersey</b>	1 866-365-5345	6 months
<b>Banker's Fidelity Life Insurance Company</b>	1 888-674-6225	None
<b>Central States Indemnity Company of Omaha</b>	1 866-644-3988	None
<b>Colonial Penn Life Insurance Company</b>	1 800-800-2254	None
<b>Combined Insurance Company of America</b>	1 855-278-9329	6 months
<b>First Health Life &amp; Health Insurance Company</b>	1 800-264-4000	Contact company for eligibility requirements and price quotes
<b>Genworth Life and Annuity Insurance Company</b>	1 877-825-9337	None
<b>Gerber Life Insurance Company</b>	1 877-778-0839	None
<b>Greek Catholic Union of the U.S.A.</b>	1-866-937-5828	None
<b>Horizon Blue Cross Blue Shield of New Jersey</b>	1 888-285-8020	6 months
<b>Humana Insurance Company</b>	1 888-310-8482	3 months
<b>Individual Assurance Company, Life, Health &amp; Accident</b>	1 888-524-3629	None
<b>Loyal American Life Insurance Company</b>	1 866-459-4272	6 months
<b>Manhattan Life Insurance Company</b>	1 800-877-7703	None
<b>Massachusetts Mutual Life Insurance Company</b>	1-855-229-3789	None
<b>Philadelphia American Life Insurance Company</b>	1 800-552-7879	6 months
<b>Polish Falcons of America</b>	1 844-373-9914	Contact company for eligibility requirements and price quotes
<b>Renaissance Life &amp; Health Insurance Company of America</b>	1 844-202-4150	None
<b>Shenandoah Life Insurance Company</b>	1 855-406-9085	None
<b>Transamerica Insurance Company</b>	1 888-511-9080	Contact company for eligibility requirements and price quotes
<b>United American Insurance Company</b>	1 800-331-2512	2 months
<b>United of Omaha Life Insurance Company</b>	1 800-228-9999	None

*\*A pre-existing condition is a health problem you have before the date a new insurance policy starts. Medigap companies can refuse to cover your costs for services related to your pre-existing health problems for up to 6 months (some companies have a shorter waiting period per the above chart). After 6 months (or less), the Medigap policy will cover the costs for the pre-existing condition. Medicare will cover the eligible costs for pre-existing medical conditions during the Medigap waiting period. You may be exempt from the pre-existing condition waiting period if you had other creditable health coverage prior to applying for the Medigap.*

**MALE PREFERRED RATES**

**New Jersey Medicare Supplement Policies (Medigap) Monthly Premium at Age 65\***

**January 2017**

Company	Plan A	Plan B	Plan C	Plan D	Plan F	High Deduct F	Plan G	Plan K	Plan L	Plan M	Plan N
<b>Aetna Health &amp; Life Ins.</b>	\$154.77	\$162.93	\$207.08	\$152.86	\$197.17	\$77.64	\$163.93	N/A	N/A	N/A	\$127.45
<b>Aetna Life</b>	\$155.16	\$172.74	\$217.07	N/A	\$206.58	N/A	\$181.33	N/A	N/A	N/A	\$143.08
<b>AARP United Healthcare</b>	\$106.92	\$147.70	\$184.27	N/A	\$175.70	N/A	N/A	\$57.05	\$83.30	N/A	\$118.30
<b>American Progressive Life</b>	\$189.05	\$313.19	\$354.81	\$299.19	\$339.01	N/A	\$276.15	N/A	N/A	N/A	\$199.15
<b>Americo Financial Life &amp; Annuity</b>	\$149.12	N/A	\$194.22	N/A	\$184.97	N/A	\$153.12	N/A	N/A	N/A	\$125.87
<b>AmeriHealth Ins. Co. of N.J.</b>	\$102.85	N/A	\$171.24	N/A	\$163.08	N/A	N/A	N/A	N/A	N/A	\$113.16
<b>Banker's Fidelity Life Ins. Co.</b>	\$144.91	N/A	\$192.25	N/A	\$183.08	\$57.86	\$152.01	N/A	N/A	N/A	\$122.14
<b>Central States Indemnity Company of Omaha</b>	(1) \$161.33	N/A	(1) \$256.50	N/A	(1) \$244.25	N/A	(1) \$190.92	N/A	N/A	N/A	(1) \$154.08
	(2) \$153.67	N/A	(2) \$244.25	N/A	(2) \$232.67	N/A	(2) \$181.83	N/A	N/A	N/A	(2) \$146.75
(1) Price for Central States Indemnity policies sold in Newark Zip Codes starting with 071; (2) Price for this plan outside Newark											
<b>Colonial Penn Life</b>	\$156.39	\$189.03	\$208.11	N/A	\$216.94	\$50.99	\$191.30	\$82.50	\$132.33	\$166.87	\$116.07
<b>Combined Ins. Co. of America</b>	(1) \$165.13	N/A	(1) \$225.48	N/A	(1) \$198.23	N/A	(1) \$168.06	N/A	N/A	N/A	(1) \$169.35
	(2) \$173.40	N/A	(2) \$236.76	N/A	(2) \$208.14	N/A	(2) \$176.47	N/A	N/A	N/A	(2) \$177.82
	(3) \$156.88	N/A	(3) \$214.21	N/A	(3) \$188.32	N/A	(3) \$159.66	N/A	N/A	N/A	(3) \$165.71
(1) Price in Zip Codes starting with 070-073, 079, 086, 088, 089; (2) Zip Codes starting with 074-076, 078, 085; (3) Zip Codes starting with 077, 080-084, 087											
<b>Genworth Life &amp; Annuity</b>	\$150.14	\$189.12	\$212.81	N/A	\$219.71	\$86.47	\$192.32	N/A	N/A	N/A	\$152.74
<b>Gerber Life</b>	\$175.58	N/A	\$238.31	N/A	\$240.62	N/A	\$197.63	N/A	N/A	N/A	N/A
<b>Greek Catholic Union of the U.S.A.</b>	\$153.50	N/A	\$198.01	N/A	\$188.58	N/A	\$159.47	N/A	N/A	N/A	\$129.37
<b>Horizon Blue Cross Blue Shield of N.J.</b>	\$144.02	N/A	\$239.01	N/A	\$200.77	N/A	\$190.02	\$101.43	N/A	N/A	\$119.66
<b>Humana</b>	\$159.66	\$173.76	\$205.96	N/A	\$196.15	\$62.36	N/A	\$116.52	\$149.23	N/A	\$126.04
<b>Individual Assurance Co.</b>	\$171.85	N/A	\$212.79	N/A	\$202.65	N/A	\$158.43	N/A	N/A	N/A	\$133.93
<b>Loyal American Life</b>	\$144.41	N/A	\$213.55	N/A	\$177.96	N/A	\$153.13	N/A	N/A	N/A	\$121.95
<b>Manhattan Life</b>	\$134.00	N/A	\$188.00	N/A	\$178.00	N/A	\$160.00	N/A	N/A	N/A	\$124.00
<b>Massachusetts Mutual Life</b>	\$164.30	N/A	\$209.93	N/A	\$199.88	N/A	\$159.97	N/A	N/A	N/A	\$138.07
<b>Philadelphia American Life</b>	(1) \$136.38	N/A	(1) \$208.92	N/A	(1) \$204.74	(1) \$57.64	(1) \$166.43	N/A	N/A	N/A	(1) \$140.21
	(2) \$123.98	N/A	(2) \$189.91	N/A	(2) \$186.13	(2) \$52.40	(2) \$151.30	N/A	N/A	N/A	(2) \$127.46
(1) Price in Zip Codes in Newark 07101-07108, 07112, 07114, 07175, 07184, 07188, 07189, 07191-07193, 07195, 07198, 07199; (2) Price in all other Zip Codes											
<b>Renaissance Life &amp; Health Ins. Co. of America</b>	\$146.87	N/A	\$196.45	N/A	\$187.09	N/A	\$157.31	N/A	N/A	N/A	\$126.29
<b>Shenandoah Life Ins. Co.</b>	\$150.37	N/A	\$194.63	N/A	\$185.38	N/A	\$153.66	N/A	N/A	N/A	\$121.82
<b>United American</b>	\$158.00	N/A	\$240.00	N/A	\$241.00	\$59.00	N/A	N/A	N/A	N/A	N/A
<b>United of Omaha Life</b>	\$157.54	N/A	\$210.80	N/A	\$186.16	\$55.73	\$150.84	N/A	N/A	\$166.54	\$117.68
<b>United of Omaha Life (Unisex)</b>	\$154.03	N/A	\$206.11	N/A	\$182.03	\$54.58	\$147.48	N/A	N/A	\$162.85	\$115.25

\* If older than age 65, contact company for rate quotes. Unisex - see attached. NOTE: If applying for policy after your first six-months of Medicare Part B, the company may turn you down for coverage, or charge higher rates based on your health conditions.



**FEMALE PREFERRED RATES**

**New Jersey Medicare Supplement Policies (Medigap) Monthly Premium at Age 65\***

**January 2017**

Company	Plan A	Plan B	Plan C	Plan D	Plan F	High Deduct F	Plan G	Plan K	Plan L	Plan M	Plan N
<b>Aetna Health &amp; Life Ins.</b>	\$134.53	\$141.78	\$180.09	\$132.95	\$171.43	\$67.47	\$142.61	N/A	N/A	N/A	\$110.79
<b>Aetna Life</b>	\$144.16	\$160.66	\$204.24	N/A	\$192.24	N/A	\$168.91	N/A	N/A	N/A	\$133.49
<b>AARP United Healthcare</b>	\$106.92	\$147.70	\$184.27	N/A	\$175.70	N/A	N/A	\$57.05	\$83.30	N/A	\$118.30
<b>American Progressive Life</b>	\$171.97	\$284.70	\$322.52	\$272.23	\$308.30	N/A	\$250.93	N/A	N/A	N/A	\$173.22
<b>Americo Financial Life &amp; Annuity</b>	\$129.67	N/A	\$168.88	N/A	\$160.84	N/A	\$133.15	N/A	N/A	N/A	\$109.45
<b>AmeriHealth Ins. Co. of N.J.</b>	\$102.85	N/A	\$171.24	N/A	\$163.08	N/A	N/A	N/A	N/A	N/A	\$113.16
<b>Banker's Fidelity Life Ins. Co.</b>	\$129.39	N/A	\$171.65	N/A	\$163.47	\$51.66	\$135.73	N/A	N/A	N/A	\$109.05
<b>Central States Indemnity Co. of Omaha</b>	(1) \$140.17	N/A	(1) \$223.00	N/A	(1) \$212.42	N/A	(1) \$166.08	N/A	N/A	N/A	(1) \$134.08
	(2) \$133.50	N/A	(2) \$212.42	N/A	(2) \$202.33	N/A	(2) \$158.17	N/A	N/A	N/A	(2) \$127.67
(1) Price for Central States Indemnity policies sold in Newark Zip Codes starting with 071; (2) Price for this plan outside Newark											
<b>Colonial Penn Life</b>	\$140.85	\$170.22	\$187.39	N/A	\$195.34	\$45.99	\$172.25	\$74.34	\$119.19	\$150.30	\$104.57
<b>Combined Ins. Co. of America</b>	(1) \$143.61	N/A	(1) \$196.07	N/A	(1) \$172.38	N/A	(1) \$146.11	N/A	N/A	N/A	(1) \$147.29
	(2) \$150.79	N/A	(2) \$205.87	N/A	(2) \$181.00	N/A	(2) \$153.42	N/A	N/A	N/A	(2) \$154.65
	(3) \$136.43	N/A	(3) \$186.27	N/A	(3) \$163.76	N/A	(3) \$138.80	N/A	N/A	N/A	(3) \$144.12
(1) Price in Zip Codes starting with 070-073, 079, 086, 088, 089; (2) Zip Codes starting with 074-076, 078, 085; (3) Zip Codes starting with 077, 080-084, 087											
<b>Genworth Life &amp; Annuity</b>	\$130.45	\$164.63	\$184.93	N/A	\$191.12	\$75.07	\$167.33	N/A	N/A	N/A	\$132.75
<b>Gerber Life</b>	\$152.76	N/A	\$207.33	N/A	\$209.34	N/A	\$171.94	N/A	N/A	N/A	N/A
<b>Greek Catholic Union of the U.S.A.</b>	\$133.48	N/A	\$172.18	N/A	\$163.98	N/A	\$138.67	N/A	N/A	N/A	\$112.50
<b>Horizon Blue Cross Blue Shield of N.J.</b>	\$144.02	N/A	\$239.01	N/A	\$200.77	N/A	\$190.02	\$101.43	N/A	N/A	\$119.66
<b>Humana</b>	\$159.25	\$173.32	\$205.43	N/A	\$195.65	\$62.19	N/A	\$116.23	\$148.85	N/A	\$125.71
<b>Individual Assurance Co.</b>	\$149.43	N/A	\$185.03	N/A	\$176.22	N/A	\$137.76	N/A	N/A	N/A	\$116.46
<b>Loyal American Life</b>	\$125.57	N/A	\$185.69	N/A	\$154.75	N/A	\$133.16	N/A	N/A	N/A	\$106.04
<b>Manhattan Life</b>	\$121.00	N/A	\$170.00	N/A	\$160.00	N/A	\$140.00	N/A	N/A	N/A	\$111.00
<b>Massachusetts Mutual Life</b>	\$142.87	N/A	\$182.55	N/A	\$173.81	N/A	\$139.10	N/A	N/A	N/A	\$120.06
<b>Philadelphia American Life</b>	(1) \$126.28	N/A	(1) \$193.43	N/A	(1) \$189.57	(1) \$53.37	(1) \$154.10	N/A	N/A	N/A	(1) \$129.82
	(2) \$114.80	N/A	(2) \$175.84	N/A	(2) \$172.33	(2) \$48.52	(2) \$140.09	N/A	N/A	N/A	(2) \$118.02
(1) Price in Zip Codes in Newark 07101-07108, 07112, 07114, 07175, 07184, 07188, 07189, 07191-07193, 07195, 07198, 07199; (2) Price in all other Zip Codes											
<b>Renaissance Life &amp; Health Ins. Co. of America</b>	\$127.77	N/A	\$170.91	N/A	\$162.77	N/A	\$136.86	N/A	N/A	N/A	\$109.87
<b>Shenandoah Life Ins. Co.</b>	\$130.75	N/A	\$169.26	N/A	\$161.20	N/A	\$133.62	N/A	N/A	N/A	\$105.93
<b>United American</b>	\$137.00	N/A	\$208.00	N/A	\$209.00	\$51.00	N/A	N/A	N/A	N/A	N/A
<b>United of Omaha Life</b>	\$151.40	N/A	\$202.59	N/A	\$178.91	\$53.55	\$144.96	N/A	N/A	\$160.06	\$113.10
<b>United of Omaha Life (Unisex)</b>	\$154.03	N/A	\$206.11	N/A	\$182.03	\$59.00	\$147.48	N/A	N/A	\$162.85	\$115.25

\* If older than age 65, contact company for rate quotes. Unisex - see attached. NOTE: If applying for policy after your first six-months of Part B, the company may turn you down for coverage, or charge higher rates based on your health.

## NJ Medicare Supplement Coverage for People Between Ages 50 and 65 on Medicare Due to Disability *January 2017*

Company	Plan	Female Preferred Rates	Male Preferred Rates
<b>Aetna Health &amp; Life Ins. Company</b>	C	\$180.09	\$207.08
<b>Aetna Life</b>	C	\$204.24	\$217.07
<b>AARP United Healthcare</b>	C	\$184.27	\$184.27
<b>American Progressive Life &amp; Health</b>	C	\$322.52	\$354.81
<b>Americo Financial Life &amp; Annuity</b>	C	\$168.88	\$194.22
<b>AmeriHealth Ins. Company of N.J.</b>	C	\$171.24	\$171.24
<b>Banker's Fidelity Life Insurance Company</b>	C	\$171.65	\$192.25
<b>Central States Indemnity Company of Omaha</b>	C	(1) \$223.00	(1) \$256.50
	C	(2) \$212.42	(2) \$244.25
(1) Price for Central States Indemnity policies sold in Newark Zip Codes starting with 071 ; (2) Price for this plan outside Newark			
<b>Colonial Penn Life</b>	C	\$187.39	\$208.11
<b>Combined Ins. Company of America</b>	C	(1) \$196.07	(1) \$225.48
	C	(2) \$205.87	(2) \$236.76
	C	(3) \$186.27	(3) \$214.21
	(1) Price in Zip Codes starting with 070-073, 079, 086, 088, 089; (2) Zip Codes starting with 074-076, 078, 085; (3) Zip Codes starting with 077, 080-084, 087		
<b>Genworth Life &amp; Annuity</b>	C	\$184.93	\$212.81
<b>Gerber Life</b>	C	\$207.33	\$238.31
<b>Greek Catholic Union of the U.S.A.</b>	C	\$172.18	\$198.01
<b>Horizon Blue Cross Blue Shield of N.J.</b>	C	\$239.01	\$239.01
<b>Humana</b>	C	\$205.43	\$205.96
<b>Individual Assurance Company, Life, Health &amp; Accident</b>	C	\$185.03	\$212.79
<b>Loyal American Life</b>	C	\$185.69	\$213.55
<b>Manhattan Life</b>	C	\$170.00	\$188.00
<b>Massachusetts Mutual Life Ins. Co.</b>	C	\$182.55	\$209.93
<b>Philadelphia American Life</b>	C	(1) \$193.43	(1) \$208.92
	C	(2) \$175.84	(2) \$189.91
(1) Price for Philadelphia American in Newark Zip Codes 07101-07108, 07112, 07114, 07175, 07184, 07188, 07189, 07191-07193, 07195, 07198, 07199; (2) Price for this plan outside Newark			
<b>Renaissance Life &amp; Health Ins. Co. of America</b>	C	\$179.91	\$196.45
<b>Shenandoah Life Ins. Company</b>	C	\$169.26	\$194.63
<b>United American</b>	C	\$208.00	\$240.00
<b>United of Omaha Life</b>	C	\$202.59	\$210.80
<b>United of Omaha Life - Unisex Rate</b>	C	\$206.11	\$206.11
<p>Premium increases can occur at any time during the calendar year with authorization from the N.J. Dept. of Banking and Insurance. Some companies may offer premium discounts. Some companies may charge a one time application fee (e.g.\$20/\$25). Questions about premiums, discounts, application fees, benefit packages, and eligibility for enrollment should be directed to the company.</p> <p>Applicants applying during the first 6-months of Medicare Part B or in guaranteed issue situations will pay the preferred rates (shown above).</p> <p>If applying for policy after your first six-months of Part B, the company may turn you down for coverage, or charge higher rates based on your health.</p>			

# Medigap Plan Benefits

For Plans Sold On or After June 2010

2017	Plan A	Plan B	Plan C	Plan D	Plan F	High Deduct F*	Plan G	Plan K**	Plan L**	Plan M	Plan N
<b>MEDICARE PART A COSTS</b>											
<b>Hospital Deductible:</b> Covers \$1,316 in each benefit period.		★	★	★	★	★	★	50%	75%	50%	★
<b>Hospital Copayment:</b> Copoly for days 61-90 (\$329) and days 91-150 (\$658) in hospital; also provides payment in full for 365 additional lifetime days.	★	★	★	★	★	★	★	★	★	★	★
<b>Skilled Nursing Facility Copay:</b> Covers \$164.50 a day for days 21-100 each benefit period.			★	★	★	★	★	50%	75%	★	★
<b>Hospice Care:</b> Coinsurance for respite care and other Part A-covered services.	★	★	★	★	★	★	★	50%	75%	★	★
<b>MEDICARE PART B COSTS</b>											
<b>Part B Annual Deductible:</b> Covers \$183 deductible in 2017.			★		★	★					
<b>Part B Coinsurance:</b> Covers 20% coinsurance for Part B services, such as doctors services, laboratory and x-rays, durable medical equipment. Also covers coinsurance for hospital outpatient services.	★	★	★	★	★	★	★	50%	75%	★	Except up to \$20 for office visits and up to \$50 for ER visits (not charged if admitted to hospital)
<b>Part B Excess/Limiting Charges:</b> Part B excess charges of 15% more than Medicare's approved charge when provider does not take assignment.					★	★	★				
<b>OTHER</b>											
First three pints of <b>blood.</b>	★	★	★	★	★	★	★	50%	75%	★	★
<b>Foreign Travel Emergency:</b> Covers 80% of emergency care costs when outside the U.S., after annual \$250 deductible, up to maximum lifetime benefit of \$50,000.			★	★	★	★	★			★	★

\*Plan F offers a high-deductible option in which you pay a \$2,200 deductible in 2017 before Medigap coverage starts.

\*\*Plans K and L pay 100% of the Part A and Part B copays after you spend a certain amount out-of-pocket. The 2017 out-of-pocket maximum is \$5,120 for Plan K and \$2,560 for Plan L.

**NOTE:** For people in New Jersey under age 65 on Medicare due to disability, only Medigap Plan C available.

