

Medigap Policies



Medigaps are health insurance policies that offer standardized benefits to work with Original Medicare. They don't work with Medicare Advantage plans. Medigaps are sold by private insurance companies. If you have a Medigap, it pays part or all of the costs after Original Medicare pays first. Medigaps may also cover health care costs that Medicare does not cover at all—for example, care when traveling abroad.

Choosing a Medigap

Insurance companies may offer up to 10 different Medigap policies to choose from: A, B, C, D, F, G, K, L, M, and N. Each lettered policy is standardized. This means that all policies labeled with the same letter have the same benefits. Companies may sell the same Medigap for different prices, even though they have the same coverage. Note: Massachusetts, Minnesota, and Wisconsin have different Medigap plans.

Listed below are things you should consider when choosing a Medigap plan. Make sure to review the Medigap chart on the next page for more information.

- Plan A offers the most basic coverage. It's often the least expensive.
- Plans F, C, and G are the most comprehensive Medigaps. They generally cost the most.
- Plans F and C are only available if you were eligible for Medicare before January 1, 2020.
- Medigap plans are guaranteed renewable. That means that as long as you pay the premium, you can keep your plan. However, premiums may change yearly.
- Shop around. Different insurance companies charge different premiums for the exact same policy.



Contact your State Health Insurance Assistance Program (SHIP) to learn when you can purchase a Medigap in your state.

Call 877-839-2675 or visit www.shiphelp.org to contact your local SHIP.

Medigap policy benefits

For policies sold on or after June 1, 2010

	A	B	C	D	F*	G*	K**	L**	M	N
Hospital copayment Copays for days 61-90 (\$419) and days 91-150 (\$838) in hospital. Payment in full for 365 additional lifetime days.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part B coinsurance For services such as doctors' services, laboratory and x-ray services, durable medical equipment, and hospital outpatient services.	✓	✓	✓	✓	✓	✓	50%	75%	✓	Except \$20 for doctors' visits and \$50 for emergency visits
First three pints of blood	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Hospice care Coinsurance for respite care and other Part A-covered services.	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Skilled nursing facility (SNF) copay Covers \$209.50 a day for days 21-100 each benefit period.			✓	✓	✓	✓	50%	75%	✓	✓
Hospital deductible Covers \$1,676 in each benefit period.		✓	✓	✓	✓	✓	50%	75%	50%	✓
Part B annual deductible Covers \$257 (Part B deductible)			✓		✓					
Part B excess charges 100% of Part B excess charges (Under federal law, the excess limit is 15% more than Medicare's approved charge when provider does not take assignment)					✓	✓				
Preventive care 100% of coinsurance for Part B-covered preventive care services after you meet the Part B deductible.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Emergency care outside the U.S. 80% of emergency care costs during the first 60 days of each trip, after an annual deductible of \$250, up to a maximum lifetime benefit of \$50,000.			✓	✓	✓	✓			✓	✓

Note: Plans C and F are only available to you if you became newly eligible for Medicare before January 1, 2020.

*Plans F & G also offer a high-deductible option. You pay a \$2,870 deductible in 2025 before Medigap coverage starts.

**Plans K and L pay 100% of your Part A and Part B copays after you spend a certain amount out of pocket. The 2025 out-of-pocket maximum is \$7,220 for Plan K and \$3,610 for Plan L.

This chart doesn't apply to Massachusetts, Minnesota, and Wisconsin. Those states have their own Medigap system.

Read your Medicare statements

It is very important to understand and read your Medicare statements:

- If you have Original Medicare, with or without a Medigap, you should receive Medicare Summary Notices (MSNs).
 - Note: You receive MSNs every four months or you can also see them online at your Medicare.gov account.
- If you have a Medicare Advantage plan or Part D (prescription drug) plan, you should receive an Explanation of Benefits (EOB).



Your Medicare statements explain what services and items were billed, the Medicare-approved amount for each line item, and the amount that you may owe. Remember that MSNs and EOBs are not bills.



Reading your MSNs and EOBs is an important strategy for detecting potential Medicare fraud, errors, or abuse.

Keep the following tips in mind:

- Review your or your loved one's Medicare statements as soon as they arrive.
- Confirm that everything listed on your statement is accurate—in other words, that you actually received and requested all listed services or items.
- Keep notes of your medical appointments and compare them to your statements to ensure that your MSN or EOB is accurate.
- Contact your health care provider or plan if you have any questions or notice any errors on your MSNs or EOBs. Your health care provider should be able to correct any billing mistakes that they have made.
- Contact the SMP for a printed My Health Care Tracker (which helps you keep track of your appointments) or to receive assistance on how to read your Medicare statements.



NEW! SMP Medicare Tracker Mobile Application

The app includes a digital My Health Care Tracker, the ability to report fraud, the SMP Fraud Busters game, scam alerts, fraud schemes, and news. To learn more, go to smpresource.org/app and download from the [Apple](#) or [Google](#) stores.



Apple app store

Medigap Policies

Google app store



Who to contact for help:

- **Call your State Health Insurance Assistance Program (SHIP)** to learn about Medigap enrollment rules in your state and to get help comparing plan options.
- **Go to the Medicare.gov website** for online help comparing Medigaps in your area.
- If you decide to purchase a Medigap, **call the plan directly to purchase the policy.**
- **Call your Senior Medicare Patrol (SMP)** if you find any errors on your statements and your provider will not fix them. SMPs help Medicare beneficiaries, their families, and caregivers prevent, detect, and report potential Medicare fraud, errors, and abuse.

Local SHIP contact information	Local SMP contact information
SHIP toll-free: 908-475-6591	SMP toll-free: 1-877-767-4359
SHIP email: seniorservices@co.warren.nj.us	SMP email:
SHIP website: https://www.warrencountynj.gov	SMP website: seniormedicarepatrolnj.org
To find a SHIP in another state: Call 877-839-2675 (and say “Medicare” when prompted) or visit www.shiphelp.org	To find an SMP in another state: Call 877-808-2468 or visit www.smpresource.org

SHIP Technical Assistance Center: 877-839-2675 | www.shiphelp.org | info@shiphelp.org
SMP Resource Center: 877-808-2468 | www.smpresource.org | info@smpresource.org
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