

MEDICARE
SUPPLEMENT

2024 MEDICARE SUPPLEMENT INSURANCE PLANS

Select a plan with confidence.

You have a 30-day free look. If you're not satisfied with your policy, send it back to us within 30 days after receiving it, and we'll refund your premium. Then, this policy will be considered as though it were never issued.



Underwritten by
Mutual of Omaha Insurance Company

Selecting the right Medicare supplement insurance plan can be confusing. We're here to give you the confidence boost you need. We'll start by getting to know you. We'll uncover your needs and talk about what you want out of life. And together, we'll find the Medicare supplement insurance plan that's perfect for you.



MEDICARE SUPPLEMENT

What a Medicare Supplement Can Do for You

With a Medicare supplement insurance policy, even unexpected medical events aren't likely to impact your financial wellbeing. While Medicare covers a good portion of your health care expenses, you still have out-of-pocket costs, like deductibles, copayments and coinsurance. See how a Medicare supplement insurance policy can help to pay these costs.



Medicare Part A

Hospital Insurance

Medicare Part A provides coverage for hospital inpatient care, recovery care in a skilled nursing facility, hospice care and limited home health care.

Your out-of-pocket costs include the Medicare Part A benefit-period deductible and coinsurance for the services you receive.



Medicare Part B

Medical Insurance

Medicare Part B covers medically necessary and preventive services provided by doctors and other health care providers.

Your out-of-pocket costs include the Medicare Part B calendar-year deductible, coinsurance for services you receive and any charges that exceed the Medicare-approved amount.



Medicare Supplement Insurance

Pays What Medicare Doesn't

Adding a Medicare supplement insurance policy can help by paying some of the out-of-pocket expenses not paid by Medicare Part A and Medicare Part B. And you can be confident that as these costs adjust, your Medicare supplement insurance policy benefits also adjust to help you pay your share of Medicare approved expenses.

How Your Medicare Supplement Works

Your Medicare supplement insurance policy works with Medicare Parts A and B to minimize your share of health care costs. When you receive a covered service, your health care provider bills Medicare. After Medicare pays its share, your Medicare supplement insurance policy pays based on the plan you select. The entire process is electronic, so your claims are paid quickly.



Your Plan Choices

With a variety of Medicare supplement insurance plans that offer varying levels of coverage, you're able to select the one that best meets your needs and fits your budget.

Determining Which Plan is Right for You

When determining which plan is right for you, think about what you would like your plan to cover. Remember there may be charges above what Medicare and your Medicare supplement insurance policy pay, so be sure to consider how much you can comfortably afford to pay for any remaining out-of-pocket expenses.

Plan A

Provides the most basic coverage of all Medicare supplement plans.

Plan G

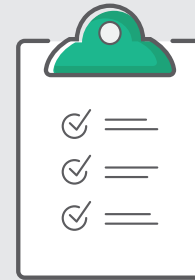
Covers all Medicare-eligible expenses except the Medicare Part B deductible.

High Deductible Plan G

Provides the same coverage as Plan G, but requires payment of deductibles, coinsurance and copayments up to the policy's deductible amount.

Plan N

Offers low premiums in return for copayments for some doctor and emergency room visits that don't result in an inpatient admission.



Plan Highlights

Our Medicare supplement insurance plans offer these features:

- No Waiting Period*
- Your Choice of Doctor That Accepts Medicare Patients
- Cost-Saving Options
- Caring Customer Service
- No Claims to File or Surprise Bills to Pay
- Automatic Renewal
- Coast-to-Coast Coverage
- Worldwide Emergency Care – Only on Plans G, HDG, N

*These policies do not have a pre-existing condition exclusion.

If Medicare pays for a claim, a Medicare supplement policy will also pay. Likewise, if Medicare doesn't pay, the Medicare supplement policy will not pay either.

Plan Details

See how our Medicare supplement insurance policies work with Medicare to cover most of your out-of-pocket expenses. Compare plans to determine which is the best fit for you. Refer to the Outline of Coverage for more information.

Medicare Part A Hospital Insurance

| Benefits | Plan | Medicare Pays | Plan Pays | You Pay |
|--|---------------------|--|--------------------------------|-----------|
| Deductible | Plan A | \$0 | \$0 | \$1,632 |
| | Plans G, HDG*, N | \$0 | \$1,632 | \$0 |
| First 60 Days | Plan A | All but \$1,632 | \$0 | \$1,632** |
| | Plans G, HDG*, N | All but \$1,632 | \$1,632** | \$0 |
| Coinsurance 61-90 Days | Plans A, G, HDG*, N | All but \$408/day | \$408/day | \$0 |
| Coinsurance 91-150 Days | Plans A, G, HDG*, N | All but \$816/day | \$816/day | \$0 |
| Extended Hospital Coverage (up to an additional 365 days in your lifetime) | Plans A, G, HDG*, N | \$0 | 100% of Eligible Expenses | \$0 |
| Benefit for Blood | Plans A, G, HDG*, N | All but 3 pints | 3 pints | \$0 |
| Skilled Nursing Facility (first 20 days) | Plans A, G, HDG*, N | All approved amounts | \$0 | \$0 |
| Skilled Nursing Facility (21-100 days) | Plan A | All but \$204/day | \$0 | \$204/day |
| | Plans G, HDG*, N | All but \$204/day | Up to \$204/day | \$0 |
| Hospice Outpatient Prescription Drugs | Plans A, G, HDG*, N | All but very limited copayment/coinsurance | Medicare copayment/coinsurance | \$0 |
| Hospice Inpatient Respite Care | Plans A, G, HDG*, N | All but very limited copayment/coinsurance | Medicare copayment/coinsurance | \$0 |

*Before High Deductible Plan G pays benefits, you pay your Medicare-covered costs (deductibles, coinsurance and copayments) up to the policy's deductible amount of \$2,800 in 2024.

**Part A deductible

Those applying outside their open enrollment period are subject to underwriting and possible premium rating.



Medicare Part B Medical Insurance

| Benefits | Plan | Medicare Pays | Plan Pays | You Pay |
|-------------------|-----------------------|--|-----------------------------|-----------|
| Deductible | Plans A, G, HDG, N | \$0 | \$0 | \$240* |
| Coinsurance | Plans A, G, HDG, N*** | Generally, 80% after member pays the initial \$240 for the calendar year | Generally, 20% | \$0 |
| Excess Benefits | Plan A, N | \$0 | \$0 | All Costs |
| | Plans G, HDG | \$0 | 100% up to Medicare's limit | \$0 |
| Benefit for Blood | Plans A, G, HDG, N | \$0 for the first 3 pints | 3 pints | \$0 |

Additional Benefit

| Benefits | Plan | Medicare Pays | Plan Pays | You Pay |
|--|--|---------------|--|--|
| Emergency Care Received Outside the U.S. (You'll have emergency coverage for the first 60 days of travel outside of the country) | Plan A | \$0 | \$0 | All Costs |
| | Plans G, HDG, N (Coverage amount after the \$250 deductible) | \$0 | Generally, 80% to the lifetime max of \$50,000 | 20% and amounts over the \$50,000 lifetime Maximum Benefit |

*Part B deductible

***Plan N requires up to a \$20 copayment for some office visits and up to a \$50 copayment for emergency room visits.



Policy Benefits Explained

Medicare Part A – Hospital Insurance

Inpatient Hospital Deductible

This is the amount you must pay before you are eligible to receive Part A benefits under your Medicare supplement insurance policy. You're responsible for paying the Part A deductible for each benefit period, which begins the first full day you're hospitalized and ends when you haven't been in a hospital or skilled nursing facility for 60 consecutive days. Medicare supplement Plans G, High Deductible G and N cover this cost.

Coinsurance

This is the amount you may be required to pay as your share of the cost for hospital services after you have paid your Part A deductible. Medicare pays all approved amounts of Part A coinsurance for the first 60 days of inpatient hospital care plus a portion of the coinsurance for days 61 through 150. All Medicare supplement insurance plans pay the remaining Part A coinsurance amount.

Extended Hospital Coverage

Should you need to be hospitalized longer than 150 days during a benefit period, and you've exhausted your 60 Medicare Lifetime Reserve Days, all Medicare supplement insurance plans will pay eligible expenses at the rate Medicare would have paid, subject to a lifetime maximum benefit of an additional 365 days.



Benefit for Blood

Medicare pays for blood, excluding a calendar-year deductible equal to the cost of the first 3 pints. All Medicare supplement insurance plans pay the cost for the first 3 pints.



Skilled Nursing Facility Care

Medicare pays all approved amounts for the first 20 days in a skilled nursing facility that follow a hospitalization of at least 3 days and all but a portion of the cost for days 21-100.



Hospice Care

All Medicare supplement insurance plans pay the copayment/coinsurance amount for all Part A Medicare-eligible expenses you incur for hospice care and respite care.



Medicare Part B – Medical Insurance

Deductible

This is the amount you must pay before you are eligible to receive Part B benefits under your Medicare supplement insurance policy. Medicare does not cover the Part B calendar-year deductible.

Coinsurance

This is the amount you may be required to pay as your share of the cost for doctor visits after you have paid your Part B deductible. Medicare pays generally 80% of eligible expenses. All Medicare supplement insurance plans pay the remaining coinsurance amount. With Plan N, you pay up to a \$20 copayment for some office visits and up to a \$50 copayment for emergency room visits.

For hospital outpatient services, the copayment amount will be paid under a prospective payment system. If this system is not used, then 20% of eligible expenses will be paid.

Excess Benefits

If your bill for Medicare Part B services and supplies exceeds the Medicare-approved amount, Medicare supplement Plans G and High Deductible Plan G pay the resulting excess charges up to the charge limitation established by Medicare.

Benefit for Blood

Medicare pays for blood, excluding a calendar-year deductible equal to the cost of the first 3 pints. All Medicare supplement plans pay the cost for the first 3 pints.

Additional Benefit

Emergency Care Received Outside the U.S.

After you pay a \$250 calendar-year deductible, most Medicare supplement plans, with the exception of Plan A, generally pay 80% of eligible expenses for health care you need because of a covered injury or illness that begins during the first 60 days of each trip. Pays up to a lifetime maximum of \$50,000.



Medicare supplement insurance is underwritten by Mutual of Omaha Insurance Company, 3300 Mutual of Omaha Plaza, Omaha, NE 68175.

In TX, benefits and premiums under this policy may be suspended for up to 24 months if you become entitled to benefits under Medicaid. You must request that your policy be suspended within 90 days of becoming entitled to Medicaid. If you lose (are no longer entitled to) benefits from Medicaid, this policy can be reinstated if you request reinstatement within 90 days of the loss of such benefits and pay the required premium. Plans A and F are also available.

No individual can be denied any Medicare supplement policy sold by any Medicare supplement issuer if the application is submitted during the six month period beginning with the first day of the first month in which an individual first enrolls for benefits under Medicare Part B; or if one was previously enrolled in Medicare Parts A and B and applies within six months of turning age 65; or if you are under age 65, have Medicare Part A and are within the six months following enrollment for Medicare Part B.

Open enrollment is the six-month period beginning on the first day of the month in which you are enrolled in Medicare Part B. If you are on Medicare under age 65, you will also have a six-month open enrollment period when you reach age 65.

Medicare beneficiaries under age 65 have two open enrollment periods, one when they first enroll in Part B and a second one when they turn age 65.

You have 31 days from your renewal date to pay your premium, otherwise your policy will lapse. Your policy will stay in force during this 31-day grace period.

You can't be singled out for a rate increase, no matter how many times you receive benefits. Your premium changes: (a) each year on the renewal date coinciding with or following the anniversary of your policy date until you reach age 99; and (b) when the same premium change is made on all in-force Medicare supplement insurance policies of the same form issued to persons of your classification in the same geographic area of your state. Your policy contains details about your household discount eligibility.

This Medicare supplement insurance does not pay for:

- Expenses you incur while your policy is not in force; except as provided in the EXTENSION OF BENEFITS section
- Hospital or skilled nursing facility charges incurred prior to the coverage effective date of this policy
- Any expense you incur which is paid for by Medicare
- Any expense that is payable under any other insurance plan, policy, or certificate, or any employee benefit plan, which pays benefits on an expense-incurred basis
- Non-Medicare eligible expenses, including, but not limited to, routine exams, take-home drugs, and eye refractions
- Services for which a charge is not normally made in the absence of insurance
- Loss or expense that is payable under another Medicare supplement insurance policy or certificate

This is a brief description of coverage. The outline of coverage must accompany this brochure. For complete information on benefits, exceptions and limitations, please read your outline of coverage and your policy. You also may contact your agent or call toll-free 800-228-7104.

This is a solicitation of insurance and an insurance agent will contact you by telephone.

Not connected with or endorsed by the U.S. government or the federal Medicare program.

In some states, if you receive Medicare benefits because of a disability, you may apply for a Medicare supplement insurance policy regardless of your age.

Policy Forms MM20-50000 – Plan A, MM25-50002 – Plan G, MM36-50003 – High Deductible Plan G, MM35-50004 – Plan N

