

MEDICARE  
SUPPLEMENT

# 2024 MEDICARE SUPPLEMENT INSURANCE PLANS

Select a plan with confidence.



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.

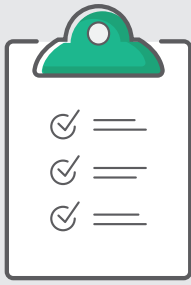
Your out-of-pocket costs include the Medicare Part B calendar-year deductible, coinsurance for services you receive and any charges that exceed the Medicare-approved amount.



## 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.



- No Waiting Period
- Your Choice of Doctor That Accepts Medicare Patients
- Caring Customer Service
- No Claims to File or Bills to Pay
- Automatic Renewal
- Coast-to-Coast Coverage
- Worldwide Emergency Care – Only on 2020 High Deductible Plans

## Plan Highlights

**Our Medicare supplement insurance plans offer these features:**

## 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	Basic	\$0	\$0	\$1,632
	2020 High Deductible	\$0	\$1,632*	\$0 - Once deductible is met*
First 60 Days	Basic	All but \$1,632	\$0	\$1,632
	2020 High Deductible	All but \$1,632	\$1,632*	\$0
Coinsurance 61-90 Days	Basic	All but \$408/day	\$408/day	\$0
	2020 High Deductible	All but \$408/day	\$408/day*	\$0

\* Pays after the calendar-year deductible \$2,800 is met. Out-of-pocket expenses for this deductible are expenses that ordinarily would be paid by the policy. This includes the Medicare Parts A and B deductibles but does not include the foreign travel emergency deductible.

<b>Benefits</b>	<b>Plan</b>	<b>Medicare Pays</b>	<b>Plan Pays</b>	<b>You Pay</b>
<b>Coinsurance 91-150 Days</b>	<b>Basic</b>	All but \$816/day	\$816/day	\$0
	<b>2020 High Deductible</b>	All but \$816/day	\$816/day*	\$0
<b>Extended Hospital Coverage (up to an additional 365 days in your lifetime)</b>	<b>Basic</b>	\$0	100% of Medicare eligible expenses	\$0
	<b>2020 High Deductible</b>	\$0	100% of Medicare eligible expenses	\$0
<b>Beyond the additional 365 days</b>	<b>Basic</b>	\$0	\$0	All costs
	<b>2020 High Deductible</b>	\$0	\$0	All costs
<b>Blood - First 3 Pints</b>	<b>Basic</b>	\$0	3 pints	\$0
	<b>2020 High Deductible</b>	\$0	3 pints	\$0
<b>Skilled Nursing Facility (first 20 days)</b>	<b>Basic</b>	All approved amounts	\$0	\$0
	<b>2020 High Deductible</b>	All approved amounts	\$0	\$0
<b>Skilled Nursing Facility (21-100 days)</b>	<b>Basic</b>	All but \$204/day	Up to \$204/day	\$0
	<b>2020 High Deductible</b>	All but \$204/day	Up to \$204/day*	\$0
<b>Skilled Nursing Facility (101st day and after)</b>	<b>Basic</b>	\$0	\$0	All costs
	<b>2020 High Deductible</b>	\$0	\$0	All costs

\* Pays after the calendar-year deductible \$2,800 is met. Out-of-pocket expenses for this deductible are expenses that ordinarily would be paid by the policy. This includes the Medicare Parts A and B deductibles but does not include the foreign travel emergency deductible.

## Medicare Part B Medical Insurance

Benefits	Plan	Medicare Pays	Plan Pays	You Pay
Deductible	Basic	\$0	\$0	\$240
	2020 High Deductible	\$0	\$0	\$240
Coinsurance	Basic	Generally 80%	Generally 20%	Expenses incurred above the Medicare-approved charges
	2020 High Deductible	Generally 80%	Generally 20%	Expenses incurred above the Medicare-approved charges
Benefit for Blood - First Three Pints	Basic	\$0	All Costs	\$0
	2020 High Deductible	\$0	All Costs	\$0

## Foreign Travel

Benefits	Plan	Medicare Pays	Plan Pays	You Pay
First \$250 each calendar year	2020 High Deductible	\$0	\$0	\$250
Remainder of charges	2020 High Deductible	\$0	80% to a lifetime maximum benefits of \$50,000***	20% and amounts over the \$50,000 lifetime maximum benefit

\*Pays after both the foreign travel emergency benefit and calendar-year deductibles are met.

## Optional Riders- Applies to Basic Plans Only

Benefits	Plan	Medicare Pays	Plan Pays	You Pay
Part A Deductible	Basic Plan	\$0	\$1,632	\$0
Part B Deductible	Basic Plan	\$0	\$240**	\$0
Part B Copayment/Coinsurance	Basic Plan	\$0	Up to \$20/office visit and up to \$50/ER visit that doesn't result in an inpatient admission	\$0
Part B Excess Charges	Basic Plan	\$0	The difference between what Medicare pays and the amount charged by the provider which may be no greater than the actual charges or limiting charges allowed by Medicare, whichever is less	\$0
Foreign Travel Emergency Care Received Outside the U.S. (Subject to \$250 deductible)	Basic Plan	\$0	80% to a lifetime maximum benefits of \$50,000***	20% and amounts over the \$50,000 lifetime maximum benefit
Additional Home Health Care	Basic Plan	\$0	An aggregate of 365 visits per year including those covered by Medicare	\$0

\*\*Coverage of the Part B deductible is no longer available to people new to Medicare on or after January 1, 2020. However, if you were eligible for Medicare before January 1, 2020 but not yet enrolled, you may be able to get this benefit.

\*\*\*Pays after both the foreign travel emergency benefit and calendar-year deductibles are met.

Part B deductible coverage is only available to those who became Medicare-eligible prior to January 1, 2020.



## Policy Benefits Explained

### Medicare Part A – Hospital Insurance

#### 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 100% of Part A coinsurance for the first 60 days of inpatient hospital care plus a portion of the coinsurance for days 61 through 150. Your plan pays 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, your plan 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. Your plan pays the cost for the first 3 pints.

## Skilled Nursing Facility Care

Medicare pays 100 percent 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.



## Medicare Part B – Medical Insurance

### **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 80% of eligible expenses. Plan only pays 20% of remaining amount.

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.

### **Benefit for Blood**

Medicare pays for blood, excluding a calendar-year deductible equal to the cost of the first 3 pints. Your plan pays the cost for the first 3 pints.

## Optional Riders

*Available only with the Basic policy.*

### **Part A Deductible Rider (OPN8F)**

Pays the \$1,632 inpatient hospital deductible for each benefit period.

### **Part B Deductible Rider (OPP1F)**

Pays the \$240 calendar-year deductible. Available only to those who were first Medicare-eligible before 2020.

### **Part B Copayment/Coinsurance Rider (OPP3F)**

Pays your 20% portion of the Part B coinsurance, except for a copayment of up to \$20 for some office visits and up to a \$50 copayment for emergency room visits that don't result in an inpatient admission.

### **Part B Excess Charges Rider (OPP2F)**

Your bill for Medicare Part B services and supplies may exceed the Medicare eligible expense. When that occurs. This rider pays 100% of the difference between the actual charge and the limiting charge established by Medicare.

### **Foreign Travel Emergency Rider (OPP4F)**

After you pay the \$250 deductible, Medicare supplement insurance pays you 80% of eligible expenses incurred during the first 60 days of a trip up to a lifetime maximum of \$50,000. Benefits are payable for health care you need because of a covered injury or an illness of sudden and unexpected onset.

### **Additional Home Care Rider (OPN9F)**

Extends your home care visits to 365 visits per policy year including those covered by Medicare.



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

**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 as you age on the renewal date coinciding with or following the anniversary of your policy date; 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 state. Your policy contains details about your household discount eligibility.

**This Medicare supplement insurance does not pay for:**

- Any expense incurred while your policy is not in force
- Hospital or skilled nursing facility confinement incurred during a Medicare Part A benefit period that begins while this policy is not in force
- Expense paid for by Medicare
- Expense payable under any other insurance plan, policy, or certificate, or any employee benefit plan, which pays benefits on an expense-incurred basis
- Services for non-Medicare eligible expenses
- Services for which no charge is made when there is no insurance
- Loss or expense that is payable under any other Medicare supplement insurance policy or certificate
- Skilled nursing facility costs beyond what is covered by Medicare and the 30 days covered under the Medicare Part A Skilled Nursing Facility Benefit provision of your policy
- Home care above the number of visits covered by Medicare and the 40 visits per year covered under the Home Care Benefit provision of your policy
- Physician charges above Medicare's approved charge
- Outpatient prescription drugs
- Most care received outside of the United States
- Routine dental care, dentures, cosmetic surgery, routine foot care, the cost of eyeglasses, and the cost of hearing aids, unless eligible under Medicare
- Emergency care anywhere or for care received outside the service area if this care is treated differently from other covered benefits
- Anything beyond usual, customary, and reasonable limitations

**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 NM39-26022 - Basic Plan,  
NM38-26023 - 2020 High Deductible Plan;  
Rider Forms OPN8F, OPN9F, OPP1F,  
OPP2F, OPP3F, OPP4F

