





# Session Objectives

This session will help you

- § Explain what Medigap policies are
- § Understand key Medigap terms
- § Relate steps needed to buy a Medigap policy
- § Define the best time to buy a Medigap policy
- § Explain guaranteed issue rights
- § Know where to get information on Medigap rights and protections



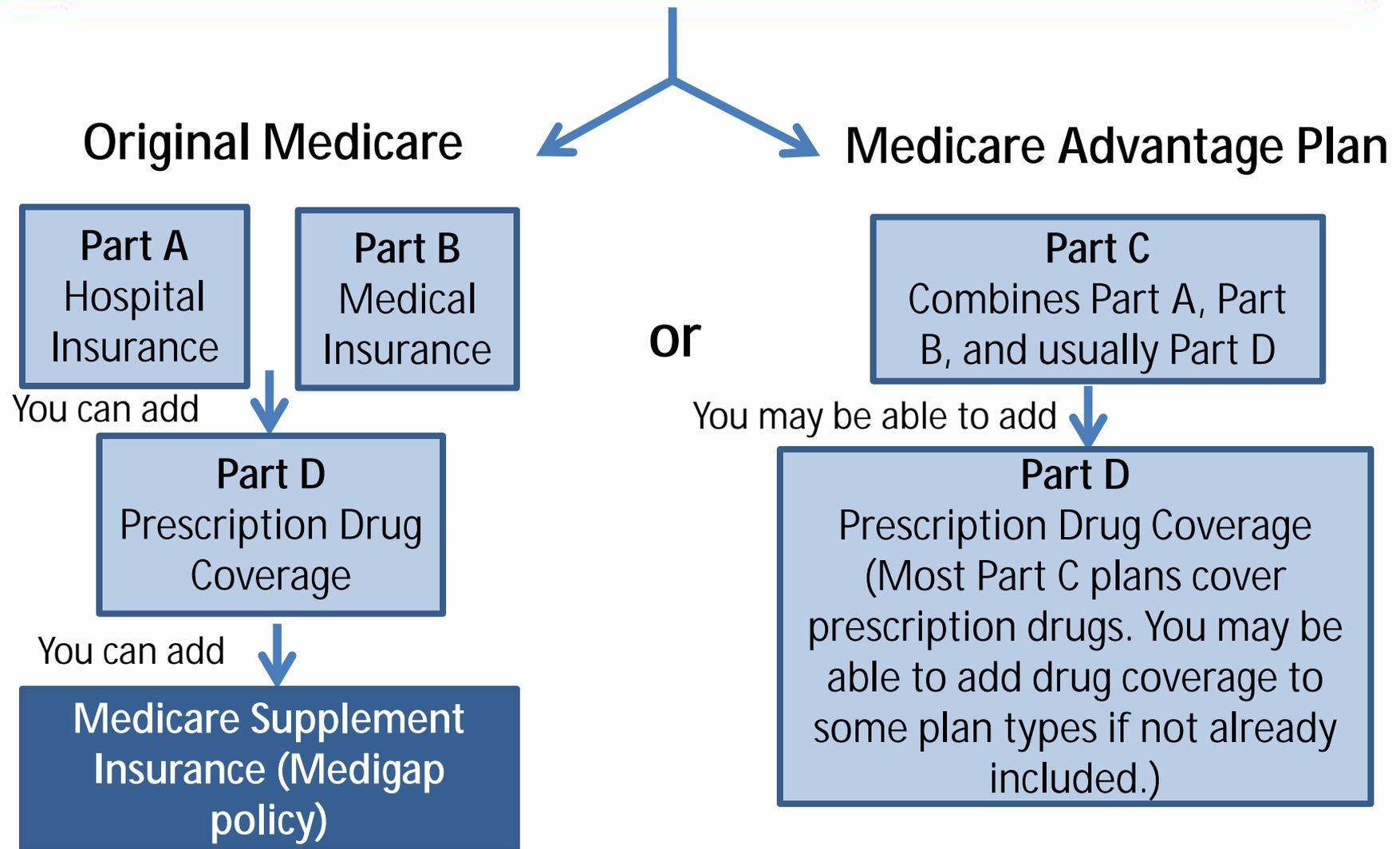
# Lesson 1—Introduction to Medigap

## Introduction to Medigap Policies

§ Medicare Program Overview

§ Medigap Overview

# Your Medicare Coverage Choices





# Medigap Policies

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- § Medicare Supplement Insurance policy (also called Medigap)
- Private health insurance
  - Supplements Original Medicare
    - ◻ Helps pay some health care costs that Original Medicare doesn't cover (coverage "gaps")
    - ◻ Medicare will pay its share of the Medicare-approved amounts for covered health care costs
    - ◻ Then your Medigap policy pays its share



# Gaps in Original Medicare Coverage

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## § Original Medicare doesn't cover everything

- Original Medicare pays a share
- You pay a share
  - q Deductibles
  - q Coinsurance/Copayments
  - q Monthly premiums

## § Medigap policies

- Pay all or part of your share
- Coverage depends on which Medigap plan you buy

# Part A – What You Pay in Original Medicare - 2014

|                                      |  |
|--------------------------------------|--|
| <p>Hospital Inpatient Stay</p>       | <ul style="list-style-type: none"> <li>§ \$1,216 deductible and no coinsurance for days 1–60 each benefit period</li> <li>§ \$304 per day for days 61–90 each benefit period</li> <li>§ \$608 per “lifetime reserve day” after day 90 of each benefit period (up to 60 days over your lifetime)</li> <li>§ All costs for each day after the lifetime reserve days</li> <li>§ Inpatient mental health care in a psychiatric hospital limited to 190 days in a lifetime</li> </ul> |
| <p>Skilled Nursing Facility Care</p> | <ul style="list-style-type: none"> <li>§ \$0 for the first 20 days of each benefit period</li> <li>§ \$152 per day for days 21–100 of each benefit period</li> <li>§ All costs for each day after day 100 in a benefit period</li> </ul>   |
| <p>Home Health Care Services</p>     | <ul style="list-style-type: none"> <li>§ \$0 for home health care services</li> <li>§ 20 percent of the Medicare-approved amount for durable medical equipment</li> </ul>  |

# Part B – What you Pay in Original Medicare - 2014

|                                 |   |
|---------------------------------|---|
| Monthly Premium                 | \$104.90 in 2014*   |
| Yearly Deductible               | \$147.00  |
| Coinsurance for Part B Services | <p>§ 20 percent coinsurance for most covered services, like doctor's services and some preventive services, if provider accepts assignment</p> <p>§ \$0 for some preventive services</p> <p>§ 20 percent coinsurance for outpatient mental health services, and copayments for hospital outpatient services</p> |

\*May be higher based on income.



# Check Your Knowledge – Question 1

Medigap policies are sold by

- a. The Centers for Medicare & Medicaid Services
- b. Private insurance companies
- c. State governments
- d. None of the above



# Check Your Knowledge - Question 2

Medigap plans work with all types of Medicare plans.

a. True

**b. False**



# Lesson 2—Medigap Plans

## § Medigap Plan Types

- Standardized Plans
- Waiver States

## § Benefits by Plan

## § Medigap Costs



# Medigap Plans

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§ Standardized plans identified by a letter

- Plans A, B, C, D, F, G, K, L, M, and N are currently sold
- Companies don't have to sell all plans
- Plans E, H, I, and J exist but are no longer sold
- Plans with the same letter must offer the same basic benefits
  - Only the policy cost will vary between companies

§ Waiver states (Massachusetts, Minnesota, and Wisconsin) standardize in a different way

# Medigap Plan Types

|  | Medicare Supplement Insurance (Medigap) Plans |      |      |      |      |      |      |      |      |             |
|--|---|------|------|------|------|------|------|------|------|-------------|
| Benefits   | A   | B    | C    | D    | F*   | G    | K**  | L**  | M    | N           |
| Medicare Part A coinsurance and hospital costs (up to an additional 365 days after Medicare benefits are used) | 100%  | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100%        |
| Medicare Part B coinsurance or copayment   | 100%  | 100% | 100% | 100% | 100% | 100% | 50%  | 75%  | 100% | 100%<br>*** |
| Blood (first 3 pints)  | 100%  | 100% | 100% | 100% | 100% | 100% | 50%  | 75%  | 100% | 100%        |
| Part A hospice care coinsurance or copayment   | 100%  | 100% | 100% | 100% | 100% | 100% | 50%  | 75%  | 100% | 100%        |
| Skilled nursing facility care coinsurance  |   |      | 100% | 100% | 100% | 100% | 50%  | 75%  | 100% | 100%        |
| Medicare Part A deductible   |   | 100% | 100% | 100% | 100% | 100% | 50%  | 75%  | 50%  | 100%        |
| Medicare Part B deductible   |   |      | 100% |      | 100% |      |      |      |      |             |
| Medicare Part B excess charges   |   |      |      |      | 100% | 100% |      |      |      |             |
| Foreign travel emergency (up to plan limits)   |   |      | 100% | 100% | 100% | 100% |      |      | 100% | 100%        |

\* Plan F also offers a high-deductible plan in some states. If you choose this option, this means you must pay for Medicare-covered costs (coinsurance, copayments, deductibles) up to the deductible amount of \$2,140 in 2014 before your policy pays anything.

\*\*For Plans K and L, after you meet your out-of-pocket yearly limit and your yearly Part B deductible (\$147 in 2014), the Medigap plan pays 100% of covered services for the rest of the calendar year.

\*\*\* Plan N pays 100% 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.

|                             |
|-----------------------------|
| Out-of-pocket limit in 2014 |
| \$4,940                     |
| \$2,470                     |



# Special Types of Medigap Plans

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- § Massachusetts, Minnesota, and Wisconsin (waiver states)
- § Medicare SELECT (network plans)



# Massachusetts, Minnesota, Wisconsin

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- § Waiver states
- § Different kinds of Medigap policies
- § NOT labeled with letters
- § Benefits comparable to standardized plans
  - Basic and optional benefits
- § For information
  - Call your State Health Insurance Assistance Program or State Insurance Department



# Medicare SELECT Policies

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- § A type of Medigap policy with a network
- § To get full benefits (except in emergency)
  - Must use specific hospitals and
  - May have to see specific doctors
- § Can be any of the standardized plans
- § Generally cost less than non-network plans
- § Can switch to plan with equal or lesser value
- § Not available in all states



# Medigap Costs

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§ Cost (monthly premium) depends on

- Your age (in some states)
- Where you live (e.g., urban, rural, or ZIP Code)
- Company selling the policy
- Discounts (women, non-smokers, married couples)
- Medical underwriting
  - Process insurance companies use to decide, based on your medical history, whether to accept your application for insurance, whether to add a waiting period for pre-existing conditions, and how much to charge you

§ Premiums may vary greatly for same Medigap plan

# Medigap Pricing Based on Age

Not all states allow all three types of rating

|                                   |   |
|-----------------------------------|---|
| No-age-rated<br>(community-rated) | § Everyone pays same regardless of age if 65 or older<br>§ Generally least expensive over lifetime          |
| Issue-age-rated                   | § Based on age when purchased<br>§ Doesn't go up automatically as you get older                             |
| Attained-age-rated                | § Premium based on current age<br>§ Costs less when you are 65<br>§ Cost goes up each year as you get older |

Premiums may go up due to inflation and other factors.



# Check Your Knowledge – Question 3

Standardized plans are only available in three states.

a. True

b. False

# Check Your Knowledge – Question 4

Which words make the following statement true?

“Each Medigap plan with the same letter must offer the same \_\_\_\_\_ may vary between insurance companies.”

- a. deductibles, but the policy costs
- b. policy benefits, but the coverage options
- c. benefit costs, but the coverage options
- d. basic benefits, but the policy costs



# Lesson 3—Buying a Medigap Policy

- § The Best Time to Buy a Medigap Policy
- § Switching Medigap Policies
- § Steps to Buy a Medigap Policy



# The Best Time to Buy a Medigap Policy

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## § Medigap open enrollment period (OEP)

- Six months when insurance company must sell
- Guaranteed issue period without medical underwriting
- Your one OEP begins when you are 65 or older and enrolled in Part B
  - Can't be changed or replaced
- Some states have more generous rules

§ May be able to buy a Medigap policy any time an insurance company will sell you one



# Delayed Medigap Open Enrollment Period (OEP)

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- § If you delay enrolling in Medicare Part B
  - Because you or your spouse is **still** working, **and**
  - You have group health coverage
- § Medigap OEP is delayed
  - Until you are 65 **and** are enrolled in Part B
  - No late enrollment penalty
- § Notify Social Security to delay Part B



# Pre-Existing Conditions and Medigap

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- § Health problem you had before the new insurance policy starts
  - Treated or diagnosed 6 months before coverage start date
- § Pre-Existing Condition Waiting Period
  - Insurance companies can refuse to cover out-of-pocket costs for excluded condition for up to 6 months (“look back period”)
    - Without 6 months of prior creditable coverage
      - With no break in coverage more than 63 days

The Affordable Care Act doesn't impact the pre-existing condition waiting period for Medigap coverage.



# Medigap for People With a Disability or End-Stage Renal Disease (ESRD)

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- § People with a disability or ESRD may not be able to buy a policy until they turn 65
  - Some states require insurers to sell Medigap policies to people with a disability or ESRD
- § Companies may voluntarily sell Medigap policies
  - May cost more than policies sold to people over 65
  - Can use medical underwriting
- § Get a Medigap open enrollment period at 65



# Steps to Buy a Medigap Policy

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- STEP 1:** Decide which benefits you want, then decide which of the standardized Medigap Plans meets your needs
- STEP 2:** Find out which insurance companies sell Medigap policies in your state
- STEP 3:** Call the insurance companies that sell the Medigap policies you're interested in and compare costs
- STEP 4:** Buy the Medigap policy



# Why Switch Medigap Policies?

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§ You might switch policies if

- You're paying for benefits you don't need
- You need more benefits now
- You want to change your insurance company
- You find a cheaper policy

§ If not in your Medigap open enrollment period

- You may pay more for the new policy
- There might be medical underwriting
- Could have delay in coverage for pre-existing condition



# When Can You Switch Medigap Policies?

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- § A right under federal law to switch **only**
  - During your Medigap open enrollment period
  - If you have a guaranteed issue right
  - If your state has more generous requirements
- § 30-day *free-look* period – pay both premiums
- § Anytime insurance company will sell you one



# Check Your Knowledge – Question 5

The best place for a person who has Medicare due to a disability or End-stage Renal Disease to learn about rights to purchase a Medigap policy in their state is

- a. Medicare.gov
- b. Insurance companies that offer Medigap policies
- c. State Insurance Department
- d. The Internet



# Check Your Knowledge – Question 6

The best time to buy a Medigap policy is

- a. When your Medicare expenses increase substantially
- b. Whenever it's convenient for you
- c. During the Medicare annual enrollment period
- d. During your Medigap open enrollment period



# Lesson 4—Medigap Rights and Protections

- § Medigap Guaranteed Issue Rights
- § Guaranteed Renewable Plans
- § Right to Suspend a Medigap Policy



# Guaranteed Issue Rights

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## § Federal protections in certain situations

- You have the right to buy a Medigap policy
- Companies must sell you a Medigap policy
- All pre-existing conditions must be covered
- Can't be charged more
- Must apply within 63 days of date other coverage ends

## § See Appendix C for all situations

# Examples of Guaranteed Issue Rights

§ John is in a **Medicare Advantage Plan**. He will have a Medigap guaranteed issue right if...

He joined when first eligible for Part A at 65, and in the first year wants to change to Original Medicare (Trial Right)

or

His plan leaves Medicare

or

His plan stops giving care in his area

or

He moves out of the plan's service area

# Examples of Guaranteed Issue Rights

§ Mary is in **Original Medicare**. She will have a Medigap guaranteed issue right if...

Her employer group health plan or union coverage that pays after Medicare pays is ending

or

She has a Medicare SELECT policy and moves out of her Medicare SELECT policy's service area



# Guaranteed Renewable Plans

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§ Medigap policies purchased after 1992 are guaranteed renewable

§ Your insurance company can't drop you unless one of the following happens

- You stop paying your premium
- You weren't truthful on the Medigap policy application
- The insurance company becomes bankrupt or insolvent



# Right to Suspend Medigap for People With Medicaid

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- § If you have both Medicare and Medicaid
  - You generally can't buy a Medigap policy
- § You can suspend your Medigap policy
  - Within 90 days of getting Medicaid
    - For up to 2 years
- § You can start it up again
  - No new medical underwriting or waiting periods



# Right to Suspend Medigap

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§ If you suspend your Medigap policy

- You don't pay Medigap premiums
- The Medigap policy won't pay benefits

§ You may not want to suspend your policy

- To see doctors who don't accept Medicaid

§ Call your state Medicaid office or State Health Insurance Program for help



# Right to Suspend Medigap for People Under Age 65

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- § Can suspend Medigap policy if under 65
  - While enrolled in your or spouse's employer group health plan
- § Get your Medigap policy back at any time
  - Must notify insurer within 90 days of losing employer plan
  - No waiting period



# Check Your Knowledge – Question 7

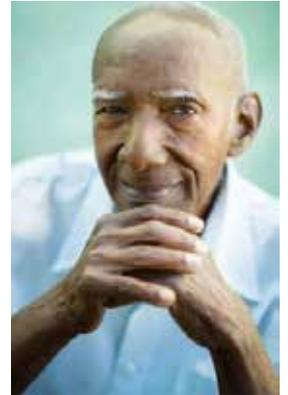
If you get your Medigap policy when you have a guaranteed issue right, you aren't covered for up to 6 months for pre-existing conditions.

a. True

b. False

# Review Scenario 1

Ted is 64 years old and has had Medicare for 4 years due to a disability. He lives in a state that requires insurance companies to offer a Medigap policy to people with Medicare who are under age 65. He currently has a Medigap policy.



What might change when Ted turns 65 next year?

# Review Scenario 1 Considerations



Cost



Enrollment



Plan Choices

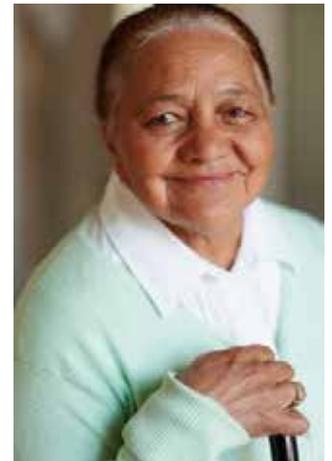


Pre-existing Condition Waiting Period

# Review Scenario 2

Sophie is 67 and healthy. She retired last month and ended her employer-sponsored health coverage. She is enrolled in Original Medicare. She's interested in purchasing a Medigap policy to help her with her out-of-pocket costs.

What does Sophie need to consider?



# Review Scenario 2 Considerations



Best Time to Buy



Finding the Right Policy/Plan



Enrollment



Pre-existing Condition Waiting Period?



# Key Points

- ü You must have both Medicare Parts A and B to get a Medigap policy
- ü You pay a monthly premium for Medigap
- ü You still pay the Medicare Part B premium
- ü Medigap policies cover one person
- ü Benefits are standardized
- ü Costs vary by plan and by company
- ü Can only cover costs associated with services covered by Original Medicare

# Medigap Resource Guide

| Information Resources   |   | Medicare Products   |
|---|---|---|
| <p>Centers for Medicare &amp; Medicaid Services (CMS)<br/>1-800-MEDICARE<br/>(1-800-633-4227)<br/>(TTY 1-877-486-2048)</p> <p>Beneficiary Information<br/><a href="http://medicare.gov">medicare.gov</a></p> <p>Compare Medigap policies<br/><a href="http://medicare.gov/find-a-plan/questions/medigap-home.aspx">medicare.gov/find-a-plan/questions/medigap-home.aspx</a></p> <p>Partner Information<br/><a href="http://cms.gov/medigap/">cms.gov/medigap/</a></p> | <p>State Health Insurance Assistance Programs *</p> <p>State Insurance Department*</p> <p>*For telephone numbers call CMS<br/>1-800-MEDICARE (1-800-633-4227)<br/>1-877-486-2048 for TTY users<br/><a href="http://Medicare.gov/contacts">Medicare.gov/contacts</a></p> <p>National Association of Insurance Commissioners<br/><a href="http://naic.org/">naic.org/</a></p> | <p>“Choosing a Medigap Policy: A Guide to Health Insurance for People With Medicare”<br/>CMS Product No. 02110</p> <p>“Your Medicare Benefits”<br/>CMS Product No. 10116</p> <p>To access these products:<br/>View and order single copies at <a href="http://Medicare.gov">Medicare.gov</a>.</p> <p>Order multiple copies (partners only) at <a href="http://productordering.cms.hhs.gov">productordering.cms.hhs.gov</a>.</p> <p>You must register your organization.</p> |



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# Appendix A

|  | Medicare Supplement Insurance (Medigap) Plans |      |      |      |      |      |                             |         |      |             |
|--|---|------|------|------|------|------|-----------------------------|---------|------|-------------|
| Benefits   | A   | B    | C    | D    | F*   | G    | K**                         | L**     | M    | N           |
| Medicare Part A coinsurance and hospital costs (up to an additional 365 days after Medicare benefits are used)   | 100%  | 100% | 100% | 100% | 100% | 100% | 100%                        | 100%    | 100% | 100%        |
| Medicare Part B coinsurance or copayment   | 100%  | 100% | 100% | 100% | 100% | 100% | 50%                         | 75%     | 100% | 100%<br>*** |
| Blood (first 3 pints)  | 100%  | 100% | 100% | 100% | 100% | 100% | 50%                         | 75%     | 100% | 100%        |
| Part A hospice care coinsurance or copayment   | 100%  | 100% | 100% | 100% | 100% | 100% | 50%                         | 75%     | 100% | 100%        |
| Skilled nursing facility care coinsurance  |   |      | 100% | 100% | 100% | 100% | 50%                         | 75%     | 100% | 100%        |
| Medicare Part A deductible   |   | 100% | 100% | 100% | 100% | 100% | 50%                         | 75%     | 50%  | 100%        |
| Medicare Part B deductible   |   |      | 100% |      | 100% |      |                             |         |      |             |
| Medicare Part B excess charges   |   |      |      |      | 100% | 100% |                             |         |      |             |
| Foreign travel emergency (up to plan limits)   |   |      | 100% | 100% | 100% | 100% |                             |         | 100% | 100%        |
| * Plan F also offers a high-deductible plan in some states. If you choose this option, this means you must pay for Medicare-covered costs (coinsurance, copayments, deductibles) up to the deductible amount of \$2,140 in 2014 before your policy pays anything.<br>**For Plans K and L, after you meet your out-of-pocket yearly limit and your yearly Part B deductible (\$147 in 2014), the Medigap plan pays 100% of covered services for the rest of the calendar year.<br>*** Plan N pays 100% 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. |   |      |      |      |      |      | Out-of-pocket limit in 2014 |         |      |             |
|  |   |      |      |      |      |      | \$4,940                     | \$2,470 |      |             |

# Appendix B – page 1

## State Health Insurance Assistance Program and State Insurance Department Contact Information

| State          | State Health Insurance Assistance Program | State Insurance Department |
|----------------|---|----------------------------|
| Alabama        | 1-800-243-5463                            | 1-800-433-3966             |
| Alaska         | 1-800-478-6065                            | 1-800-467-8725             |
| American Samoa | Not Available                             | 1-684-633-4116             |
| Arizona        | 1-800-432-4040                            | 1-800-325-2548             |
| Arkansas       | 1-800-224-6330                            | 1-800-224-6330             |
| California     | 1-800-434-0222                            | 1-800-927-4357             |
| Colorado       | 1-888-696-7213                            | 1-800-930-3745             |
| Connecticut    | 1-800-994-9422                            | 1-800-203-3447             |
| Delaware       | 1-800-336-9500                            | 1-800-282-8611             |
| Florida        | 1-800-963-5337                            | 1-877-693-5236             |
| Georgia        | 1-800-669-8387                            | 1-800-656-2298             |
| Guam           | 1-671-735-7388                            | 1-671-635-1835             |
| Hawaii         | 1-888-875-9229                            | 1-808-586-2790             |
| Idaho          | 1-800-247-4422                            | 1-800-721-3272             |
| Illinois       | 1-800-548-9034                            | 1-866-445-5364             |
| Indiana        | 1-800-452-4800                            | 1-800-622-4461             |
| Iowa           | 1-800-351-4664                            | 1-877-955-1212             |
| Kansas         | 1-800-860-5260                            | 1-800-432-2484             |
| Kentucky       | 1-877-293-7447                            | 1-800-595-6053             |

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## State Health Insurance Assistance Program and State Insurance Department Contact Information

| State                    | State Health Insurance Assistance Program | State Insurance Department |
|--------------------------|---|----------------------------|
| Louisiana                | 1-800-259-5301                            | 1-800-259-5300             |
| Maine                    | 1-877-353-3771                            | 1-800-300-5000             |
| Maryland                 | 1-800-243-3425                            | 1-800-492-6116             |
| Massachusetts            | 1-800-243-4636                            | 1-877-563-4467             |
| Michigan                 | 1-800-803-7174                            | 1-877-999-6442             |
| Minnesota                | 1-800-333-2433                            | 1-800-657-3602             |
| Mississippi              | 1-800-948-3090                            | 1-800-562-2957             |
| Missouri                 | 1-800-390-3330                            | 1-800-726-7390             |
| Montana                  | 1-800-551-3191                            | 1-800-332-6148             |
| Nebraska                 | 1-800-234-7119                            | 1-800-234-7119             |
| Nevada                   | 1-800-307-4444                            | 1-888-872-3234             |
| New Hampshire            | 1-866-634-9412                            | 1-800-852-3416             |
| New Jersey               | 1-800-792-8820                            | 1-800-446-7467             |
| New Mexico               | 1-800-432-2080                            | 1-800-947-4722             |
| New York                 | 1-800-701-0501                            | 1-800-342-3736             |
| North Carolina           | 1-800-443-9354                            | 1-800-546-5664             |
| North Dakota             | 1-800-247-0560                            | 1-800-247-0560             |
| Northern Mariana Islands | Not Available                             | 1-670-664-3064             |
| Ohio                     | 1-800-686-1578                            | 1-800-686-1526             |

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## State Health Insurance Assistance Program and State Insurance Department Contact Information

| State          | State Health Insurance Assistance Program     | State Insurance Department |
|----------------|---|----------------------------|
| Oklahoma       | 1-800-763-2828                                | 1-800-522-0071             |
| Oregon         | 1-800-722-4134                                | 1-888-877-4894             |
| Pennsylvania   | 1-800-783-7067                                | 1-877-881-6388             |
| Puerto Rico    | 1-877-725-4300                                | 1-888-722-8686             |
| Rhode Island   | 1-401-462-0530                                | 1-401-462-9520             |
| South Carolina | 1-800-868-9095                                | 1-803-737-6160             |
| South Dakota   | 1-877-331-4834                                | 1-605-773-3563             |
| Tennessee      | 1-877-801-0044                                | 1-800-342-4029             |
| Texas          | 1-800-252-9240                                | 1-800-252-3439             |
| Utah           | 1-877-424-4640                                | 1-800-439-3805             |
| Vermont        | 1-800-642-5119                                | 1-800-631-7788             |
| Virgin Islands | 1-340-772-7368<br>1-340-714-4354 (St. Thomas) | 1-340-774-7166             |
| Virginia       | 1-800-552-3402                                | 1-877-310-6560             |
| Washington     | 1-800-562-6900                                | 1-800-562-6900             |
| Washington, DC | 1-202-994-6272                                | 1-202-727-8000             |
| West Virginia  | 1-877-987-4463                                | 1-888-879-9842             |
| Wisconsin      | 1-800-242-1060                                | 1-800-236-8517             |
| Wyoming        | 1-800-856-4398                                | 1-800-438-5768             |

# Appendix C – page 1

An insurance company can't refuse to sell you a Medigap policy in the following situations:

| You have a guaranteed issue right if...  | You have the right to buy...  | You can/must apply for a Medigap policy...   |
|--|---|--|
| You're in a Medicare Advantage Plan, and your plan is leaving Medicare or stops giving care in your area, or you move out of the plan's service area.  | Medigap Plan A, B, C, F, K, or L that's sold in your state by any insurance company.<br><br>You only have this right if you switch to Original Medicare rather than join another Medicare Advantage Plan.     | As early as 60 calendar days before the date your health care coverage will end, but no later than 63 calendar days after your health care coverage ends. Medigap coverage can't start until your Medicare Advantage Plan coverage ends.   |
| You have Original Medicare and an employer group health plan (including retiree or COBRA coverage) or union coverage that pays after Medicare pays and that plan is ending.<br><br><b>Note:</b> In this situation, you may have additional rights under state law. | Medigap Plan A, B, C, F, K, or L that's sold in your state by any insurance company.<br><br>If you have COBRA coverage, you can either buy a Medigap policy right away or wait until the COBRA coverage ends. | No later than 63 calendar days after the latest of these 3 dates:<br><ol style="list-style-type: none"><li>1. Date the coverage ends</li><li>2. Date on the notice you get telling you that coverage is ending (if you get one)</li><li>3. Date on a claim denial, if this is the only way you know that your coverage ended</li></ol> |
| You have Original Medicare and a Medicare SELECT policy. You move out of the Medicare SELECT policy's service area.<br><br>Call the Medicare SELECT insurer for more information about your options.   | Medigap Plan A, B, C, F, K, or L that's sold by any insurance company in your state or the state you're moving to.  | As early as 60 calendar days before the date your Medicare SELECT coverage will end, but no later than 63 calendar days after your Medicare SELECT coverage ends.  |

Source: 2014  
*Choosing a Medigap Policy: A Guide to Health Insurance for People With Medicare*

# Appendix C – page 2

## An insurance company can't refuse to sell you a Medigap policy in the following situations: (continued)

| You have a guaranteed issue right if...  | You have the right to buy...   | You can/must apply for a Medigap policy...   |
|--|--|--|
| <b>(Trial Right)</b> You joined a Medicare Advantage Plan or Programs of All-inclusive Care for the Elderly (PACE) when you were first eligible for Medicare Part A at 65, and within the first year of joining, you decide you want to switch to Original Medicare. | Any Medigap policy that's sold in your state by any insurance company.   | As early as 60 calendar days before the date your coverage will end, but no later than 63 calendar days after your coverage ends.<br><br><b>Note:</b> Your rights may last for an extra 12 months under certain circumstances. |
| <b>(Trial Right)</b> You dropped a Medigap policy to join a Medicare Advantage Plan (or to switch to a Medicare SELECT policy) for the first time, you have been in the plan less than a year, and you want to switch back.  | The Medigap policy you had before you joined the Medicare Advantage Plan or Medicare SELECT policy, if the same insurance company you had before still sells it.<br><br>If your former Medigap policy <b>isn't</b> available, you can buy Medigap Plan A, B, C, F, K, or L that's sold in your state by any insurance company. | As early as 60 calendar days before the date your coverage will end, but no later than 63 calendar days after your coverage ends.<br><br><b>Note:</b> Your rights may last for an extra 12 months under certain circumstances. |
| Your Medigap insurance company goes bankrupt and you lose your coverage, or your Medigap policy coverage otherwise ends through no fault of your own.  | Medigap Plan A, B, C, F, K, or L that's sold in your state by any insurance company.   | No later than 63 calendar days from the date your coverage ends.   |
| You leave a Medicare Advantage Plan or drop a Medigap policy because the company hasn't followed the rules, or it misled you.  | Medigap Plan A, B, C, F, K, or L that's sold in your state by any insurance company.   | No later than 63 calendar days from the date your coverage ends.   |

Source: 2014  
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