

Section 5:

Medicare Supplement Insurance (Medigap)

How does Medigap work?

Original Medicare doesn't pay all of the cost for covered health care services and supplies. Medicare Supplement Insurance (**Medigap**) policies sold by private insurance companies can help pay some of the remaining health care costs for covered services and supplies, like **copayments**, **coinsurance**, and **deductibles**.

Some Medigap policies also cover services that Original Medicare doesn't cover, like medical care when you travel outside the U.S. Generally, Medigap doesn't cover long-term care (like care in a nursing home), vision or dental services, hearing aids, eyeglasses, or private-duty nursing.

Medigap policies are standardized

Medigap must follow federal and state laws designed to protect you, and they must be clearly identified as "Medicare Supplement Insurance." Insurance companies can sell you only "standardized" plans, which are named in most states by letters A–D, F, G, and K–N. All plans with the same letter offer the same basic benefits, no matter where you live or which insurance company you buy the policy from. Some offer additional benefits. Compare the benefits of each lettered plan to find one that meets your needs. In Massachusetts, Minnesota, and Wisconsin, Medigap policies are standardized in a different way. Get information and find Medigap policies in your area:



[Medicare.gov/medigap-supplemental-insurance-plans](https://www.medicare.gov/medigap-supplemental-insurance-plans)

You can also visit [Medicare.gov/publications](https://www.medicare.gov/publications) to review the booklet, "Choosing a Medigap Policy: A Guide to Health Insurance for People with Medicare."

Important! Medigap plans sold to people who are new to Medicare on or after January 1, 2020 aren't allowed to cover the Part B deductible. Because of this, Plans C and F are 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 haven't yet enrolled, you may be able to buy Plan C or Plan F. While people new to Medicare on or after January 1, 2020, can't buy Plans C and F, they have the right to buy Plans D and G (instead of Plans C and F), which provide the same benefits with the exception of coverage for the Part B deductible.



Note: Go to pages 119–122 for definitions of **blue** words.

How do I compare Medigap plans?

The chart below shows basic information about the different benefits covered by Medicare Supplement Insurance (**Medigap**) in 2025. If a percentage appears, the Medigap plan covers that percentage of the benefit, and you're responsible for the rest.

Benefits	Medigap plans									
	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%***
Blood benefit (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%
Part A deductible		100%	100%	100%	100%	100%	50%	75%	50%	100%
Part B deductible			100%		100%					
Part B excess charges					100%	100%				
Foreign travel emergency (up to plan limits)			80%	80%	80%	80%			80%	80%
							Out-of-pocket limit in 2025**			
							\$7,220	\$3,610		

*Plans F and G also offer a high-deductible plan in some states. You must pay Medicare-covered costs (coinsurance, copayments, and deductibles) up to the deductible amount of \$2,870 in 2025 before your policy pays anything. (You can't buy Plans C and F if you were new to Medicare on or after January 1, 2020. Go to page 75.)

**For Plans K and L, after you meet your out-of-pocket yearly limit and your yearly Part B deductible (\$257 in 2025), the Medigap plan pays 100% of covered services for the rest of the calendar year.

***Plan N pays 100% of the Part B coinsurance. You must pay 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.

What else should I know about Medigap?

Before you can buy Medicare Supplement Insurance (**Medigap**), you must generally have Part A and Part B. With Medigap, you pay a monthly **premium** to a private insurance company in addition to the monthly Part B premium you pay to Medicare. **If you're thinking about buying Medigap, be sure to compare plans. The costs can vary between plans offered by different companies for exactly the same coverage, and may go up as you get older. Some states limit Medigap premium costs.** A Medigap policy only covers one person. Spouses must buy separate coverage.

Note: In some states, you may be able to buy another type of Medigap policy called Medicare SELECT. It requires you to use hospitals and, in some cases, doctors within its network to be eligible for full insurance benefits (except in an emergency). If you buy Medicare SELECT, you have rights to change your mind within 12 months and switch to standard Medigap.

Can I buy Medigap and a separate Medicare drug plan from the same company?

Yes. But you may need to make 2 separate premium payments. Contact the company to find out how to pay your premiums.

Can I have drug coverage in both Medigap and my Medicare drug plan?

No. Go to page 89 for more information.

When does a Medigap policy start?

Generally, your Medigap policy will begin the first of the month after you apply, but you can decide when you want it to start.

When's the best time to buy a Medigap policy?

- The best time to buy a Medigap policy is during your Medigap Open Enrollment Period. This 6-month period begins the first month you have Medicare Part B (Medical Insurance), **and** you're 65 or older. (Some states have additional Open Enrollment Periods.) **After this enrollment period, you may not be able to buy a Medigap policy or it may cost more.** In certain situations, you may have rights to buy a Medigap policy (guaranteed issue rights) outside of your Medigap Open Enrollment Period.
- If you delay signing up for Part B because you have group health coverage based on your (or your spouse's) current employment, your Medigap Open Enrollment Period won't start until you get Part B.
- Federal law generally doesn't require insurance companies to sell Medigap to people under 65. If you're under 65, you might not be able to buy the policy you want, or any policy, until you turn 65. However, some states require Medigap insurance companies to sell Medigap policies to people under 65. If you're able to buy one, it may cost more.

Call your State Health Insurance Assistance Program (SHIP) (go to pages 114-117 for the phone number of your local SHIP), or your State Insurance Department to learn more about your rights to buy a Medigap policy. A trusted agent or broker may also be able to help.

Can I have Medigap and a Medicare Advantage Plan?

- If you're in a [Medicare Advantage Plan](#), it's illegal for anyone to sell you a [Medigap](#) policy unless you're switching back to [Original Medicare](#). If you aren't planning to drop your Medicare Advantage Plan, and someone tries to sell you a Medigap policy, report it to your State Insurance Department.
- If you have Medigap and join a Medicare Advantage Plan, you may want to drop Medigap. You can't use Medigap to pay your Medicare Advantage Plan [copayments](#), [deductibles](#), and [premiums](#).

Important! If you want to cancel your Medigap policy, contact your insurance company. In most cases, if you drop your Medigap policy to join a Medicare Advantage Plan, **you may not be able to get the same policy back, or in some cases, any Medigap policy** unless you leave your Medicare Advantage Plan during your trial right period.

- If you drop a Medigap policy to join a Medicare Advantage Plan for the first time, you'll have a single 12-month period (your trial right period) to get your Medigap policy back **if the same insurance company still sells it** once you return to Original Medicare. If it isn't available, you can buy a Medigap policy you qualify for that's sold by an insurance company in your state (except for Plans M or N). You may also have an opportunity to join a Medicare drug plan at this time.
- If you joined a Medicare Advantage Plan when you were first eligible for Medicare Part A at 65, you can choose from any Medigap policy that's sold by an insurance company in your state if you switch to Original Medicare within the first year of joining the Medicare Advantage Plan. You may also have an opportunity to join a Medicare drug plan at this time.
- Some states provide additional special rights to buy a Medigap policy.

Where can I get more information?

- Call your State Insurance Department. Call 1-800-MEDICARE (1-800-633-4227) to get the phone number. TTY users can call 1-877-486-2048.
- Visit [Medicare.gov/medigap-supplemental-insurance-plans](https://www.Medicare.gov/medigap-supplemental-insurance-plans) to find policies and pricing in your area.
- Visit [Medicare.gov/publications](https://www.Medicare.gov/publications) to review the booklet, "Choosing a Medigap Policy: A Guide to Health Insurance for People with Medicare."
- Call your State Health Insurance Assistance Program (SHIP). Go to pages 114–117 for the phone number of your local SHIP. A trusted agent or broker in your area may also be able to help.

★ Go to pages 10–14 for an overview of your Medicare options.