



This Guide:

- Describes when and how to apply for Medicare
- Describes the prescription drug benefit
- Explains options for health plans used with Medicare
- Includes sample premiums
- Lists Medicare Advantage plans
- Lists company names and phone numbers

Medicare Supplement Insurance, Medicare Options and Part D



Ohio Department of Insurance

Ted Strickland, Governor
Mary Jo Hudson, Director



Governor Ted Strickland
Department of Insurance
Director Mary Jo Hudson

The Ohio Department of Insurance has produced this consumer guide to help you learn more about Medicare and health insurance options in Ohio for people with Medicare.

Inside, you will find an overview of Medicare as well as detailed information on the various choices available to Ohioans under this federal health insurance program for seniors and people with disabilities. Topics addressed include Medicare's original plan, Medicare supplement insurance, Medicare Advantage plans and Part D for prescription drug coverage.

Choosing the right insurance plan is an important decision. If you have questions after reading this guide, the Ohio Department of Insurance is ready to help. Please call our representatives in the Department's Ohio Senior Health Insurance Information Program (OSHIIP) at 1-800-686-1578 or email to oshiipmail@ins.state.oh.us.

Best wishes,

A handwritten signature in black ink that reads "Ted Strickland".

Ted Strickland
Governor

A handwritten signature in black ink that reads "Mary Jo Hudson".

Mary Jo Hudson
Director, Ohio Department of Insurance

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Alerts

We use the umbrella as a symbol for Medicare coverage and an **!** to highlight areas where coverage gaps can occur. While Medicare provides many benefits, most people probably need a separate health plan to fill the gaps in Medicare coverage.

This guide is about your options for a health care plan to work with Medicare in your effort to stay healthy both physically and financially.

Disclaimer notice:

The information included in this publication is meant to serve as a guide and is not a substitute for legal or professional advice. Please be certain to check with a professional if you have questions.


Published in February 2008. May change without notice.



Medicare basics

Medicare is federal health insurance for people age 65 and older, under age 65 with certain disabilities, and any age with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant).


Most people get their Medicare health coverage in one of two ways. Your costs vary depending on your plan, coverage and the services you use.

Original Medicare	
Part A (Hospital)	Part B (Medical)
Medicare provides this coverage. Part B is optional. You have your choice of doctors. See page 3 for costs you could pay with Original Medicare only. 	



Medicare Supplement Insurance (Medigap) Policy
You can choose to buy this private coverage — or an employer / union may offer similar coverage — to fill gaps in part A and Part B coverage. Costs vary by policy and company. See page 4.



Part D (Prescription Drug Coverage)
You can choose this coverage. Private companies approved by Medicare run these plans. Plans have different costs and cover different drugs. See page 4. 


OR

Medicare Advantage Plans like HMOs and PPOs

Called “Part C,” this option combines your Part A (Hospital) and Part B (Medical)

Private insurance companies approved by Medicare provide these options. Generally, you must see doctors in the plan. You may get extra benefits. See page 4.



Part D (Prescription Drug Coverage)
<u>Most</u> Part C plans cover prescription drugs. If they don't, you may be able to choose this coverage. Plans have different costs and cover different drugs. See page 4. 

Medicare basics (continued)

For many years, Medicare had two major parts: **A** for hospital insurance and **B** for medical insurance. These parts are known as the **Original Medicare Plan**. In recent years, two additional parts were added to Medicare. Here are the four parts of the program.

Part A (Hospital Insurance) - Covers inpatient care in hospitals, skilled nursing facilities, some home health and hospice care. Part A does not cover long-term care.

Part B (Medical Insurance) - Covers doctors' services and outpatient care, other medical services that Part A doesn't cover (like physical and occupational therapists), and some home health.

Part C (Medicare Advantage Plans) - Private companies such as Health Maintenance Organizations, Preferred Provider Organizations and Private Fee-for-Service Plans provide both Part A and Part B benefits to eligible people who enroll. Many plans cover prescription drugs as well. See page 37 for a list of companies by plan type.

Part D (Medicare Prescription Drug Coverage) - Private companies contract with Medicare to provide this coverage.

What you pay in 2008 with Original Medicare only

Service	Amount
Part A → Hospital stay	\$1,024 deductible per benefit period
	\$ 256 daily copay for days 61-90
	\$ 512 daily copay for days 91-150 (lifetime reserve days)
	All charges beyond 150 days
Skilled nursing	\$ 128 daily copay for days 21-100
Part B → Doctor visit.....	\$ 135 annual deductible
	Generally, 20 percent for all medical services

ALSO: Most people with Medicare pay a monthly Part B premium of \$96.40 (2008). Those with higher incomes may pay more.

Basics of Medicare supplement insurance

Medicare supplement insurance, also called Medigap, is private health insurance. You must have both Medicare Part A and Part B before you apply for this insurance.

Medicare supplement (MedSup) policies help pay amounts not covered by the Original Medicare Plan. Only you can decide which policy will best meet your needs.

MedSup policies are “standardized” — the plans are identified by letters A through L. Two plans with the same letter are identical, no matter which companies sell them. The

only difference is the cost. See page 22 for a chart describing the benefits of each standardized plan and pages 24-31 for sample premiums from companies.

A Medicare supplement policy covers only one person. If you and your spouse both want MedSup coverage, you must buy two separate policies.

No MedSup policy covers: long-term care (such as care in a nursing home), vision or dental care, eyeglasses, prescription drugs, private-duty nursing or hearing aids.

Basics of Medicare Advantage

Medicare Advantage plans provide an option to Original Medicare with MedSup insurance. Private companies offer these plans to work with Medicare. You must have both Part A and Part B to enroll.

In general, Advantage plans require you to live in a service area to qualify. See page 37 for a list of companies serving Ohio.

Normally, the plan pays its full share only if you use doctors, health care facilities and

other providers that contract with the plan. One company may offer several different plans in your county.

Choose a plan based on your needs. Many plans include Part D drug coverage. Plans that offer Part D benefits may have a gap in coverage when costs reach a certain point.

If you choose an Advantage plan you remain in the Medicare program. You do not need a Medicare supplement policy.

Basics of Part D (prescription drug coverage)

If you have either Part A or Part B, you can buy coverage that helps pay prescription costs. Medicare-approved drug plans are offered by private insurance companies.

You can delay enrolling in Part D. If you have equal or better coverage from another source — such as a retirement plan — you could enroll in Part D later with no penalty.

MedSup insurance sold today does not include prescription coverage. If you buy a

Medicare supplement policy, you may need to consider a “stand-alone” drug plan in addition. See the list on pages 34-35.

If you choose a Medicare Advantage plan, coverage for prescription drugs may be included. Ask the plan for details.

Coverage gap: You may owe the full cost for prescriptions in the “**doughnut hole.**”
Read more about this possible gap in coverage at the top of the next page.



Basics of Part D — continued


What is the “doughnut hole” in Part D?

Depending on your prescriptions, you can enter a coverage gap called the doughnut hole. In 2008, this gap starts when your prescriptions’ **total cost** reaches \$2,510. You then pay the prescriptions’ full price until the **total cost** reaches \$5,726.25. Then catastrophic coverage starts and you pay 5 percent of your drug costs until year end. People covered by Medicaid will not have a doughnut hole (see pages 18- 19).

How do I avoid the doughnut hole?

Some Part D and Advantage plans cover this gap. Typically, such plans have higher premiums than plans that do not cover the gap. See pages 34-35 for a list of stand-alone Ohio Medicare Part D plans.

Other ways to avoid, delay or lessen the effect of the doughnut hole:

- Ask your doctor if a generic drug is available. Generics cost less than brand-name drugs. When you use generics, you lower your total prescription costs and delay entering the doughnut hole. 
- If the drug is new, ask your doctor if a less expensive, older drug is appropriate for your situation.
- Ask your doctor for free samples.
- Buy your prescriptions in bulk or through mail order.
- Call OSHIIP at 1-800-686-1578 for help finding discount prescription cards.

Shopping tips

Use the tips below to help identify plans that will best cover you and fill the gaps in Medicare.



MedSup/Medigap

- Plan benefits are shown on page 22. Other than price, each plan is identical from company to company.
- Pick the plan that best meets your medical needs and budget. Then shop companies for price and service.
- You have a 30-day “free look” period after the policy arrives during which you can decide to cancel the policy for a full refund.

Medicare Advantage

- Many plans require you to use network providers. Ask your health care providers about plans in which they participate.
- Plans are available by service area only. See page 37 for a company list.

Prescription drug plans

- Plans vary. Run a comparison report at www.medicare.gov or call OSHIIP for your report: 1-800-686-1578. See pages 34-35.

• On Medicaid or eligible? You likely don’t need a Medicare supplement policy or an Advantage plan. See pages 18-19.

When and how to enroll in Original Medicare

For most people, the time to enroll is when their 65th birthday is approaching. Letting this milestone pass without action on your part can have consequences. At any rate, you cannot enroll in a MedSup plan or a Medicare Advantage plan until you have first enrolled in Medicare Part A and Part B — Original Medicare.

To apply for Medicare:

Contact your local Social Security Administration (SSA) office or call SSA's national number:
1-800-772-1213.



Remember these things about enrolling in Medicare:

- It's not automatic (for most people).
- If you don't apply, you won't get it.
- If you apply late, you'll pay a penalty.
- You apply at your local Social Security office.



Seven-month enrollment period

You have a total of seven months to enroll in Medicare without a financial penalty.

When Medicare enrollment starts

Your Medicare enrollment period starts **three months before** the month of your 65th birthday.

When Medicare enrollment ends

Your enrollment period ends **three months after** the month of your 65th birthday.

When Medicare coverage starts

If you apply **before** your birth month, your Medicare coverage should start on the first day of your birth month.

Sooner beats later!

If you apply during your birth month or the next three months, coverage may be delayed for as long as six months.

If you miss your enrollment

If you don't enroll in Medicare during your initial seven-month enrollment period...

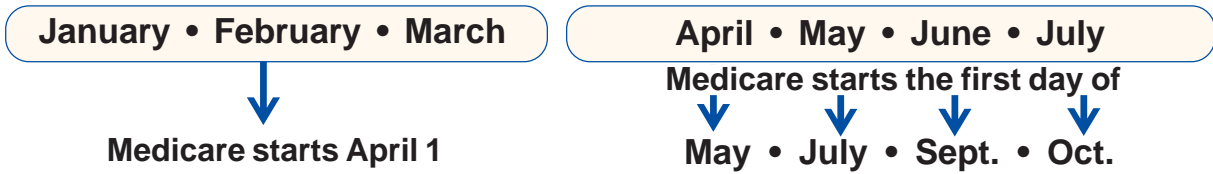
- You must wait to apply until the next General Enrollment Period (January - March each year)
- Once enrolled you won't be covered until the following July
- For each year you delay, you'll pay an extra 10 percent for the Part B premium

Medicare may work differently

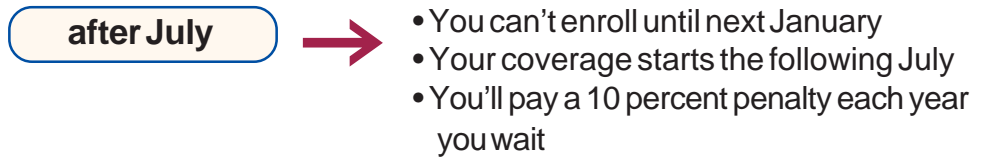
- If you have employer / union retirement benefits (see pages 10-11) or,
- If you still work and have employer health coverage (see pages 12-13).

Medicare enrollment examples:

- If your 65th birthday is 4/10/2008 and you apply for Medicare in...



- However, if you miss your enrollment period and apply...



Now you try

My Medicare enrollment dates:

The month I turn age 65 is _____.

My Medicare enrollment starts three months BEFORE my birth month.
That means I can enroll starting in _____.

My Medicare enrollment ends three months AFTER my birth month.
That means I must enroll by _____.

What's your situation?

Find your Medicare situation below then turn to the pages shown to read helpful general information.

I am...

- Almost age 65 and new to Medicare pages 8-9
- At least 65 and in a retirement health plan pages 10-11
- At least 65 and in an employer health plan pages 12-13
- At least 65 with MedSup or an Advantage plan & want to switch pages 14-15
- Under age 65 and covered by Medicare page 16
- Any age with ESRD (permanent kidney failure) page 17
- At least 65 with limited finances pages 18-19

Almost age 65 and new to Medicare

Before your 65th birthday, you must decide whether to enroll in Medicare Part B. Your Medicare enrollment period begins three months before the month you turn 65 and ends three months after your birthday month.

How do I get started?

Read pages 6-7 of this guide.

Call your local Social Security Administration (SSA) office to apply for Medicare. If you miss your seven-month enrollment window, you may have to wait more than a year before you are covered. To find an office near you, call SSA: 1-800-772-1213.

My 65th birthday is at the end of the month. When am I eligible for Medicare?

Medicare says you turn 65 on the first day of the month of your 65th birthday, no matter what day your birthday really is. So, if you apply the month before you turn 65, you are covered as of the first day of your birthday month.

However, if your birthday is the first day of the month, you “turn 65” a month early. (**Example:** your birthday is July 1, and if you apply in May, you’re covered as of June 1.)

What happens if I miss my Medicare enrollment period?

You would have to wait to apply until the next General Enrollment Period (January - March each year). Your coverage will start the following July. Plus, you may pay a penalty for your Part B premium. See pages 6-7 for details.

If you and your spouse are ready to retire and will no longer have health coverage through a current employer, you must enroll in Part B during your seven-month enrollment period to avoid penalty.

How will my retirement benefits work with Medicare?

If you have retirement benefits through an employer or union, see pages 10-11.

I’m 65, still work and have coverage through my employer. What should I do?

If you still work (or your spouse does) and have group health coverage through a current employer, you can delay Part B without penalty. See pages 12-13.

When you enroll in Part B, you automatically begin your open enrollment period for coverage that supplements Medicare. These plans are sold by private companies and pay most of your Medicare deductibles and coinsurance.

When should I buy a Medicare supplement insurance policy?

Your Medicare supplement open enrollment period is the best time to apply for and buy a MedSup policy (Medigap). This period lasts six months, starting the first day of the month in which you are age 65 and enrolled in Medicare Part B.

Almost age 65 and new to Medicare (continued)

Why is this the best time?

During your initial enrollment period, an insurance company cannot deny you coverage because of your health, make you wait for coverage to start or charge you more for a policy because of health problems.

If you (or your spouse) still work at age 65, you may want to wait to enroll in Medicare Part B. MedSup open enrollment will begin when you enroll in Part B. See pages 12-13.

What if I cannot afford to buy Medicare supplement insurance?

First, enroll in Medicare Part A and B through your local Social Security office. People on Medicare with limited incomes can apply for help to pay health care costs. Apply through your county's Department of Job and Family Services. See pages 18-19 of this guide for more information.

What should I know about Part D prescription drug coverage?

All people with Medicare are eligible to enroll in Part D, which helps pay prescription costs. Your initial enrollment period lasts seven months and matches your Part B enrollment period (starts three months before and ends three months after your birthday month).

As with Part B, you can decide to opt out of Part D during your initial enrollment period. If you enroll at a later date you'll owe a penalty on the premium.

People with retiree benefits (see pages 10-11) or an employer health plan (see pages 12-13) should ask about "creditable coverage" relating to Medicare Part D.

Part D is available in stand-alone plans (used with Original Medicare) or as part of a Medicare Advantage plan. Many plans are available. The Department's Ohio Senior Health Insurance Information Program (OSHIIP) can give you the information on available plans.

What should I know about the doughnut hole?

If your prescriptions are expensive or many, you may enter a coverage gap known as the **doughnut hole**. See page 5 for more information.



Consider cost, convenience and coverage before selecting a prescription plan. Once you select a plan, you typically must stay with that plan for the calendar year. Penalties for late enrollment may apply.

People with limited incomes may receive help paying the costs of Part D coverage by contacting the Social Security Administration.

To find a Social Security office near you, call 1-800-772-1213.

Helpful contacts



Medicare	1-800-633-4227
Social Security	1-800-772-1213
OSHIIP	1-800-686-1578

At least 65 and in a retirement health plan

If you have benefits from a retirement plan offered by your employer (or your spouse's employer) the best way to decide what you should do about Medicare is to discuss your situation with the employer's Human Resources experts or the union office. How the retirement plan works and whether it's continued is the employer's decision.

How and when should I sign up for Medicare?

Talk with your retirement plan to decide what you should do. If you retire before age 65, the retirement plan will likely cover health services at some set level and you will be responsible for the rest. Ask the people who run your plan how the coverage works.

At age 65 you will be entitled to Medicare. You must enroll during your enrollment period. This begins three months before the month you turn 65 and ends three months after your birthday month. See pages 6-7 for more information.

Must I enroll in Medicare even though I already get Social Security payments?

If you are already receiving Social Security income prior to age 65, you should receive your Medicare card from Social Security automatically.

Will my former employer continue to cover my health care?

Retiree health benefits vary with every employer. Some plans offer no health benefits while others act as a supplement to Medicare. To find out if your former employer (or your spouse's former employer) will continue to cover health care, contact the company's Human Resources office or the union office.

Here are some sample questions you might ask:

- Will health insurance be offered to me when I am eligible for Medicare?
- Should I enroll in Medicare? (Many plans require you to enroll in Medicare and the plan acts as a secondary payer.)
- How will the insurance coordinate with Medicare?
- What will be my out-of-pocket costs? Premium? Deductible? Copayment? Coverage limits? Maximum out-of-pocket?
- Are additional benefits available? What about vision, dental, prescription and preventive?

At least 65 and in a retirement plan (continued)

What if my former employer does not continue to cover my health care?

If you are not eligible for group health coverage from a former employer, consider the options shown below.

- Option One: Enroll in Medicare with no additional insurance. See pages 2-3 to learn about your out-of-pocket expenses.
- Option Two: Enroll in Medicare and shop for a Medicare supplement policy (Medigap).
- Option Three: Enroll in a Medicare Advantage Plan. See page 37 for companies serving Ohio.

What about prescription drug coverage?

If your former employer's retirement plan includes prescription coverage that is at least as good as Medicare's Part D plans, you can keep the employer's coverage. This is known as "creditable" coverage.

Each year the employer must notify you in writing to tell you if your drug coverage is creditable. Having creditable coverage allows you to enroll in Part D without penalty at some later date, if necessary.

If your retirement plan offers health care without prescription drug coverage — or drug coverage that is not as good as Medicare Part D — you can choose a stand-alone drug plan. Consider all of your out-of-pocket costs, including the monthly premium, deductible, copays and the coverage gap known as the **doughnut hole** (see page 5 for details). See pages 34-35 for a list of stand-alone Part D plans.

Helpful contacts



Medicare	1-800-633-4227
U.S. Dept. of Labor	1-866-487-2365
OSHIIP	1-800-686-1578

At least 65 and in an employer health plan

If you still work or your spouse still works you might be covered by an employer health plan. Talk to the employer's Human Resources office and ask about the coverage. Find out how the plan works with Medicare to pay health costs.

Am I entitled to Medicare even though I'm still working?

Yes. At age 65, you qualify for Medicare benefits. The Medicare Part A premium is free for most people who have worked and contributed to Social Security; others may purchase Part A coverage. If you have current employer group coverage, you can delay enrolling in Part B.

Should I enroll in Medicare even if I'm still employed at 65?

Talk to a health benefits specialist in the employer's Human Resources office to decide.

In general:


If you're not covered by an employer's group health plan, it's a good idea to enroll. You will owe a monthly premium for Part B. Once you have Part B, consider buying a MedSup policy (Medigap) to help with the gaps in Medicare coverage. MedSup enrollment starts as soon as you have Part B; this enrollment period cannot be changed or restarted.

If you are covered by the employer's health plan, you have a choice. You can either enroll in Part B now or delay enrollment with no penalty.

Delaying Part B will save you money because you won't owe the monthly Part B premium. You can't buy a MedSup policy until you're enrolled in Part B.

When you decide to retire, you will have a special Part B enrollment period of eight months. Consider a MedSup policy once you're enrolled in Part B.

Who pays first?

If you have health insurance through a current employer, your group health plan will usually pay first. In this case Medicare will pay second, and if you have a MedSup policy, it will pay last. 

Always check with your employer's Human Resources office to find out how the health plan works with Medicare.

At least 65 and in an employer health plan (continued)

What if I lose my group health plan?

If your employer decides to end group health insurance, you would want to enroll in Part B, if you haven't done so already. You have eight months after your coverage ends to enroll in Part B without a penalty.

You would have 63 days to buy a MedSup Plan A, Plan B, Plan C or Plan F with no regard to your health status. If you wait longer than 63 days, companies can ask you health questions and may decide not to offer you coverage.


If you are in good health, you can likely get any MedSup plan from any company.

Do I need Part D for prescriptions?

If the employer plan doesn't have a prescription benefit, consider buying a Part D prescription drug plan. Many plans are available. The Department's Ohio Senior Health Insurance Information Program (OSHIIP) can help you find a plan to pay some of your costs.

OSHIIP can run a computer report to compare all the available prescription drug plans and their costs. Go to www.medicare.gov to run your own report or call OSHIIP at 1-800-686-1578 to have a report done for you.

Prescription drug coverage may be included in your employer health plan. If so, your employer must let you know in writing by Nov. 15 each year if the plan's drug coverage is at least as good as the Medicare plans. If it is, you have "creditable" coverage and can delay enrolling in a Part D plan without penalty.

If your employer informs you the plan's prescription coverage is **not** as good as Medicare's Part D plans, consider buying a Part D plan. Consider all of your out-of-pocket costs, including the monthly premium, deductible, copays and the coverage gap known as the **doughnut hole**. See page 5 for details on the doughnut hole; see pages 34-35 for a list of plans. 

Helpful contacts



Medicare	1-800-633-4227
U.S. Dept. of Labor	1-866-487-2365
OSHIIP	1-800-686-1578

At least 65 with MedSup or an Advantage plan and want to switch

If Medicare has covered you for some time and you want to switch health plans, it's a good idea to follow Medicare's rules for switching. Consider all the factors that may affect your health care when you switch.

Can I switch from one MedSup plan to another?

If you stay with the same company, you may be able to switch to a different plan. If you decide to switch to a new company, you may be asked health questions on the application. It is important to be honest and complete in your answers. The new company will decide whether to offer you coverage.

If you allowed your old MedSup policy to lapse, you may find it more difficult to find coverage. The company could make you wait before it covers a pre-existing condition.

Shop carefully to be sure the new plan meets your needs.

Can I switch from one Medicare Advantage plan to another?

Yes. However, changing plans is limited to certain time frames, as follows.

- Annual Coordinated Election Period, Nov. 15 - Dec. 31. All people on Medicare can change plans during this time. Coverage under the new plan starts Jan. 1.
- Medicare Advantage Enrollment Period, Jan. 1 - March 31. People on Medicare can make one plan change (either into an Advantage plan or out of an Advantage plan) during this time. The new coverage starts the first day of the next month.
- Special Enrollment Periods. You may be allowed to change plans at different times during the year, depending on your situation. Call OSHIIP (1-800-686-1578) for details.

How can I be sure I won't have a gap in coverage when I switch plans?

Keep your old plan in place until the new coverage starts. You might pay two premiums for a short time but you won't have a break in coverage and won't risk large out-of-pocket health care expenses.

At least 65 with MedSup or an Advantage plan and want to switch (continued)

How do I switch from a MedSup policy to a Medicare Advantage plan?

You generally must wait until the annual enrollment period (Nov. 15 - Dec. 31) or the Medicare Advantage Enrollment Period (Jan. 1 - March 31). Contact the Advantage plan directly to enroll.

Find out from the Advantage plan whether prescription drug coverage (Part D) is included. If it is, this benefit will take the place of any Medicare stand-alone drug plan you have.

Keep the MedSup policy and the old drug plan in place until your new coverage begins.

Cancel the old plans once your new coverage is in effect. If you don't cancel, you could continue getting premium bills.

How do I switch from a Medicare Advantage plan to a MedSup policy?

In general you must wait until the annual enrollment period (Nov. 15 - Dec. 31) or the Medicare Advantage Enrollment Period (Jan. 1 - March 31) to leave Medicare Advantage. Contact the Social Security Administration to return to Original Medicare.

Start shopping for a MedSup policy and be ready to buy during one of the enrollment periods described above. Request an appropriate start date to avoid a gap in your coverage.

If the Advantage plan you're leaving included drug coverage, you may wish to look for a stand-alone prescription plan.

Helpful contacts



Medicare	1-800-633-4227
Social Security	1-800-772-1213
Ohio Medicaid	1-800-324-8680
Dept. of Aging	1-800-282-1206
OSHIIP	1-800-686-1578

Under age 65 and covered by Medicare



If you are under age 65 and covered by Medicare due to a disability, your choices may be limited. Once you're 65, you'll have full options.

Do any companies sell Medicare supplement insurance to people who are under age 65?

Yes. Some companies make policies available to Ohioans who are covered by Medicare due to a disability. See the premium chart at the bottom of this page.

A limited number of plans may be offered. Also, because the company will medically underwrite the policy, you might not be accepted for coverage.

Why don't more companies sell to those under age 65?

Ohio allows Medicare supplement (MedSup) companies to decide whether to include this group for coverage.

Premiums for these plans can be more expensive than MedSup policies for people age 65 and older.

When I reach age 65, will I have more MedSup policy choices?

You'll have a six-month open enrollment to choose any regular MedSup plan. Companies cannot reject your application or medically underwrite the policy at that time.

Beside MedSup, what other options do I have before I turn 65?

You can enroll in any Medicare Advantage plan serving your county. You must be accepted. See the list of Advantage plans on pages 34-35.

What can I do if I can't afford any plan available to me?

One option may be Medicaid. If you qualify, Medicaid pays costs not covered by Medicare. See pages 18-19 for general details. Contact your county Department of Job and Family Services to find out if you're eligible.

Company	Phone	Internet Address	M	Zip	Age	X?	Pr-x	A	B	E	F	F*	L
Menonite Mutual Aid Assoc. #	800-348-7468	mma-online.org	A	Z	AI	Y	0	\$177		\$249	\$292		\$180
Sterling Life	800-688-0010	sterlingplans.com	A	Z	AA	Y	0	\$475					
United American	800-331-2512	unitedamerican.com	A	A	AI	Y	6	\$305	\$379			\$184	

-- Indicates a fraternal benefit organization. Policies are available only to those eligible for membership.

Please note: No company reported under age 65 premiums for Plans C, D, G, H, I, J, K or high-deductible Plan J.

Monthly premiums were reported in Feb. 2008 and can change at any time.

See page 23 for details on using the premium charts.

Any age with ESRD (kidney failure)

People with End-Stage Renal Disease (kidney failure, also known as ESRD) have very limited options for health coverage to fill Medicare's gaps.

Can I get a Medicare supplement policy or a Medicare Advantage plan to cover my health costs not paid by Medicare?

Unless your situation qualifies you for a Guaranteed Issue Opportunity, you cannot get coverage.

Without some other type of assistance, you will be responsible for paying Medicare deductibles, coinsurance and other medical costs not paid by Medicare. These amounts can be quite large.

How can I qualify for a Guaranteed Issue Opportunity?

You have a Guaranteed Issue Opportunity when:

- You have both Medicare Part A and Part B along with insurance that is secondary to Medicare — such as employer coverage through your spouse — and
- You lose the secondary insurance.

Within 63 days after losing the secondary coverage, you can apply for MedSup Plan A, Plan B, Plan C or Plan F. Companies cannot reject your application or underwrite the policy if you apply within the time limit.

What are my other options?

One option could be Medicaid. If you qualify, Medicaid pays costs not covered by Medicare. See pages 18-19 for general details. Contact your county Department of Job and Family Services to find out if you're eligible.

The National Kidney Foundation (1-800-622-9010) may also provide assistance.

Are there any other alternatives?

The National Council on Aging offers Benefits CheckUp, a computer program that matches your specific needs with available financial assistance and other programs.

Visit www.benefitscheckup.org for more information.

Helpful contacts



Medicare	1-800-633-4227
Ohio Medicaid...	1-800-324-8680
Dept. of Aging ...	1-800-282-1206
Kidney Found. ..	1-800-622-9010
OSHIIP	1-800-686-1578

At least 65 with limited finances

People with Medicare who have limited finances may get help paying medical costs through Medicaid. Check the eligibility chart shown below. Your county Department of Job and Family Services can determine if you qualify.

What is the difference between Medicare and Medicaid?

Medicare is federal health insurance for people age 65 or older, under 65 with certain disabilities and any age with End Stage Renal Disease (permanent kidney failure) requiring dialysis or kidney transplants.

Medicaid is a program that helps pay medical costs for people with limited incomes and resources. Medicaid programs vary from state to state, but most health care costs are covered if you qualify for both Medicare and Medicaid.

If I qualify for Medicaid, do I need Medicare supplement insurance?

No. Medicaid pays costs that the Medicare supplement (MedSup) policy would pay. With full Medicaid coverage, you will not have to pay Medicare's deductibles or copays. Medicaid covers these expenses and the cost of health services not covered by Medicare.

To qualify, you must meet the specific income and resource limits shown below. These figures may change each year.

As of Jan. 1, 2008

Medicaid eligibility	Monthly income	Total resources
Single	\$576	\$1,500
Married	\$976	\$2,250

What is Medicaid spend down? Can it help me?

Spend down helps if you have out-of-pocket medical costs you can use to reduce your income to or below current Medicaid income limits.

- Example: Jane is single with a monthly income of \$750. She pays \$150 / month for health insurance. Her net income is still \$24 above the Medicaid limit, but Jane can qualify for spend down. She becomes eligible each month by spending \$24 for medical expenses like doctor visits or dental work.

At least 65 with limited finances (continued)

What if I don't meet the Medicaid requirements for eligibility even though my finances are limited?

You may be able to get help with your out-of-pocket medical costs if you qualify as a Qualified Medicare Beneficiary (QMB), Specified Low Income Medicare Beneficiary (SLMB) or Qualified Individual (QI).

Qualified Medicare Beneficiary:

You do not need a MedSup if you're eligible for QMB because the program is like having a free MedSup policy. QMB pays:

- Your deductibles and coinsurance that are not paid by Medicare
- Your Medicare Part B premium

Specified Low Income Medicare Beneficiary and Qualified

Individual: SLMB and QI offer fewer benefits than QMB because the income limits are higher.

Both programs pay:

- Your Medicare Part B premium
- Retroactive Part B premiums for each of the past three months

Call your county Department of Job and Family Services for eligibility information. Or call the Ohio Medicaid hotline: 1-800-324-8680.

Do I need Part D prescription coverage if I have Medicaid?

Having a Part D plan will save you money. You will qualify for extra help paying the monthly premium and out-of-pocket costs. Your monthly Part D plan premium will be reduced or fully covered; you may have a copay at the drug store.

With a slightly higher income (not Medicaid-eligible) you may still qualify for extra help with drug costs. People who qualify for this extra help do not have to go through the coverage gap built into many plans.

The Social Security Administration (SSA) determines eligibility for extra help. Call SSA at 1-800-722-1213.

Helpful contacts



Medicare	1-800-633-4227
Ohio Medicaid...	1-800-324-8680
Social Security ..	1-800-772-1213
OSHIIP	1-800-686-1578

MedSup Policy comparison worksheet

As each insurance company the questions below and write the answers in the space provided.

Which MedSup policies do you sell?
(Make sure they sell the plan you want.)

What will the MedSup policy I am interested in cost this year?
What has been the cost of this MedSup policy for the past few years?

How is the price decided?

- What type of pricing does this insurance company use?
- Does it make a difference if I am male or female?
- Does it make a difference if I smoke or don't smoke?
- Does it make a difference if I am married or single?

Are there any additional benefits or discounts included in this policy?

If you aren't in your MedSup open enrollment period or in another situation where you have a guaranteed issue right, ask:

- Will you accept my application?
- Do you review my health records or application to decide how much to charge me for a MedSup policy?
- Will I have to wait for my pre-existing conditions to be covered if I already have a health problem?

Insurance Company 1

Insurance Company 2

Insurance Company 3

Choosing a MedSup plan

Use this page to help understand the benefits chart on page 22. Every company that sells MedSup must offer Plan A. All of the other standard plans must include Plan A's basic benefits.

Plan A: bargain basic

Plan A is very basic. It has the fewest benefits and the lowest prices. While it won't patch all the holes, Plan A fills some of the biggest gaps in coverage by Medicare. Its benefits are described below.

Hospitalization (Medicare Part A)

You pay the deductible (\$1,024 in 2008), then Plan A combines with Medicare to cover all Medicare-approved hospital charges for at least 515 continuous days in a hospital. And if you were in and out of the hospital you'd be covered for more than 515 days, because 90 of the Medicare days are "renewable."

Medical bills (Medicare Part B)

You pay the annual deductible (\$135 in 2008), then you're covered for 100% of Medicare-approved medical expenses (Medicare pays 80%, Plan A pays 20%). Because of Ohio's law on balance billing, that's your full bill if you are treated by an Ohio practitioner.

Blood

Plan A combines with Medicare to cover all blood expenses, except the annual Part B deductible (\$135 in 2008), both in and out of the hospital.

Adding benefits: Plans B - L

The **basic** benefits are identical in each of the standard MedSup policies. So when shopping, you can focus on the **extra** benefits that help fill the rest of the gaps in Medicare coverage, such as deductibles, copayments and medical expenses that Medicare does not cover.

Plans B thru L combine these extra benefits in different ways

- **Part A deductible** (\$1,024 per benefit period in 2008)
- **Part B deductible** (\$135 per calendar year in 2008)
- **Skilled Nursing Care:** starts paying after Medicare has paid for your first 20 days in a skilled nursing facility. MedSup pays your coinsurance for the next 80 days (\$128 per day in 2008). It pays for those 80 days only.
- **Excess charges under Part B:** pays either 80 percent or 100 percent of the amount a doctor can legally add to a Medicare approved charge.
Note: Most Ohio residents do not need excess charges coverage because of the state's balance bill ban. Call OSHIIP for details: **1-800-686-1578**.
- **At-home recovery:** pays up to \$1,600 per year with "activities of daily living" (called ADLs) while you recover at home from an illness. You must qualify for Medicare home health care to collect on this benefit.
- **Preventive care:** annual limit of \$120 for physical exam, cancer screening, etc.
- **Foreign travel emergency:** emergency care when traveling outside the U.S. You pay a \$250 deductible; coverage pays 80 percent up to \$50,000 lifetime limit.

Use the chart on page 22

The company's sales material must include a similar chart. Pick the plan that best meets your needs, then shop for price and service.

MedSup benefits chart — Plans A through L

Plan A	Plan B	Plan C	Plan D	Plan E	Plan F *	Plan G	Plan H	Plan I	Plan J *	Plan K ^	Plan L ^^
Basic benefits	Basic benefits	Basic benefits	Basic benefits	Basic benefits	Basic benefits	Basic benefits	Basic benefits	Basic benefits	Basic benefits	Basic benefits 50%	Basic benefits 75%
		Skilled nursing copay	Skilled nursing copay	Skilled nursing copay	Skilled nursing copay	Skilled nursing copay	Skilled nursing copay	Skilled nursing copay	Skilled nursing copay	Skilled nursing copay 50%	Skilled nursing copay 75%
	Part A deductible	Part A deductible	Part A deductible	Part A deductible	Part A deductible	Part A deductible	Part A deductible	Part A deductible	Part A deductible	Part A deductible 50%	Part A deductible 75%
		Part B deductible			Part B deductible				Part B deductible		
					Part B excess 100%	Part B excess 80%		Part B excess 100%	Part B excess 100%		
		Foreign travel emergency	Foreign travel emergency	Foreign travel emergency	Foreign travel emergency	Foreign travel emergency	Foreign travel emergency	Foreign travel emergency	Foreign travel emergency		
			At home recovery			At home recovery		At home recovery	At home recovery		
				Preventive care					Preventive care		

- Only the plans shown here can be sold
- Every company must have a chart like this in its sales material
- Every company must offer Plan A
- The basic benefits listed below must be part of every plan
 - Hospitalization: Part A copayments plus coverage for 365 additional days after Medicare benefits end
 - Medical expenses: Part B copayments (usually 20 percent of Medicare-approved expenses)
 - Blood: the first three pints of blood each year

* Separate versions of Plan F and Plan J are available with a \$1,900 deductible (2008).

^ Plan K has an out-of-pocket limit of \$4,440 (2008) for Medicare-covered services.

^^ Plan L has an out-of-pocket limit of \$2,220 (2008) for Medicare-covered services.

How to use the premium charts on pages 24-33

Use this page to understand the insurance company and policy information contained in our premium charts. The premiums were reported in February 2008 and can change at any time. Use them as a shopping tool, not as current information.

Using the premium charts

Look at the premium charts from left to right to find these details about the company and the policies it offers.

- **Company** — Due to space limitations words like Insurance, Company and Corporation are not used
- **Phone** — The number to call for new sales
- **Internet Address** — How to reach the company online
- **M (Marketing)** — How the company markets its policies:
 - **M** = Policies sold by mail
 - **A** = Policies sold by agents
 - **I** = Policies sold on the Internet
- **Zip** — Costs for policies marked with a “Z” may vary by zip code
- **Age** — How the company prices its policies based on age:
 - **AI** = Age at issue (how old you were when you bought the policy)
 - **AA** = Attained age (how old you are now)
 - **S** = Same premium, any age (age is not considered)
- **X?** — Will the policy “crossover?” After processing your claim, will Medicare send any unpaid charges directly to the company?
 - **Y** = Yes
 - **N** = No
- **Pr-x** — The number of months before the policy will pay for your pre-existing conditions, if pre-ex applies to you
- **A through L** — The monthly premium amount a new customer would pay for a policy (separate versions of Plans F and J with a \$1,900 deductible are noted with an *)
 - **GI** = The policy is Guaranteed Issue; you cannot be turned down for coverage because of poor health.

MedSup plan monthly premiums for age 65

Company	Phone	Internet Address	M	Zip	Age	X?	Pr-x	A
AARP / United Healthcare *G*	800-523-5800	aarphealthcare.com	A/M	A	S	Y	3	\$70 GI
Admiral Life	800-232-0102		A	Z	AA	Y	0	\$68
American Continental	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$72
American Family Mutual	888-428-5433	amfam.com	A	Z	AA	Y	0	\$480
American Pioneer Life	800-538-1053	amerpion.com	A	Z	AA	Y	6	\$139
American Republic	888-755-3065	americanenterprise.com	A	Z	AA	Y	0	\$94
Anthem BC/BS	888 641-5224	anthem.com	A	A	AA	Y	0	\$89
Anthem BC/BS *G*	888 641-5224	anthem.com	A	A	AI	Y	0	\$89
Bankers Fidelity Life	866-458-7500	bflic.com	A	Z	AI	Y	0	\$214
Bankers Life & Casualty	800-621-3724	bankerslife.com	A	A	AA	N	0	\$226
Central Reserve Life	877-291-5434	centralreserve.com	A	Z	AA	Y	6	\$175
Combined of America	800-544-5531	combinedinsurance.com	A/M/I	Z	AI/AA	N	0	\$164
Conseco	800-5412254	conseco.com	A	Z	AA	Y	0	\$94
Constitution Life	800-789-6364	constitutionlife.com	A	Z	AA	Y	6	\$122
Continental General	877-291-5434	continentalgeneral.com	A	Z	AA	Y	0	\$200
Continental Life	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$78
Equitable Life & Casualty	888-352-5124	equilife.com	A	Z	AA	Y	0	\$130
Genworth Life	877-436-9678	genworth.com	A	Z	AA	Y	0	\$87
Globe Life & Accident	800-801-6831	globecaremedsupp.com	M	A	AA	Y	2	\$73
Golden Rule	800-474-4467	goldenrule.com	A	Z	AA	N	6	\$85
Great American Life	800-880-2745	gafri.com	A	Z	AA	Y	6	\$77
Guarantee Trust Life	800-338-7452	gtlic.com	A	Z	AA	N	0	\$175
Loyal American Life	800-633-6752	gafri.com	A	Z	AA	Y	6	\$84
Marquette National Life	800-934-8203	marquettenationallife.com	A	Z	AA	Y	6	\$91
Medical Mutual	800-722-7331	medicalmutual.com	A/M	A	AA	Y	0	\$88
Menonite Mutual Aid Assoc. #	800-348-7468	mma-online.org	A	Z	AI	Y	0	\$88
Mutual of Omaha	800-316-0842	mutualofomaha.com	A/M	Z	AA	Y	0	\$100
National States	800-868-6788		A	A/Z	AI/AA	N	0	\$193
Pennsylvania Life	800-275-7366	pennlife.com	A	Z	AA	Y	6	\$99
Philadelphia American Life	877-368-4692	neweralife.com	A	Z	AA	N	6	\$73
Physicians Life	800-228-9100	physiciansmutual.com	A/M	Z	AI/AA	Y	0	\$104
Provident American L & H	877-291-5434	palhic.com	A	Z	AA	Y	6	\$123
Pyramid Life	800-777-1126	pyramidlife.com	A	Z	AA	Y	6	\$184
Royal Neighbors of America #	866-845-6665	royalneighbors.org	A	Z	AA	Y	0	\$77
Shenandoah Life	800-848-5433	shenlife.com	A	Z	AA	Y	0	\$79
Standard Life & Accident	888-350-1488	slaico.com	A	Z	AA	Y	0	\$95
State Farm Mutual Auto	Call a local agent	statefarm.com	A	Z	AA	Y	0	\$95
State Mutual	800-232-0102		A	Z	AA	Y	0	\$257
Sterling Investors Life	800-232-0102	sterlinginvestors.com	A	Z	AA	Y	0	\$81
Sterling Life	800-688-0010	sterlingplans.com	A	Z	AA	Y	0	\$288
The Health Plan	877-236-2290	healthplan.org	A/M	A	AA	Y	0	\$148
Thrivent Fin. for Lutherans #	800-847-4836	thrivent.com	A	Z	AI/AA	Y	0	\$90
United American	800-331-2512	unitedamerican.com	A	A	AI	Y	2	\$133
United Commercial Travelers	800-848-0123	uct.org	A	Z	AA	Y	0	\$126
United Teachers Assocs.	800-880-8824	gafri.com	A	Z	AA	Y	6	\$135
United World	877-845-0892	mutualofomaha.com	A/M	Z	AA	Y	0	\$84
USAA Life	800-531-8772	usaa.com	M	A	AA	Y	0	\$94
World Corp	800-822-9993		A	Z	AA	Y	0	\$88

Please note:

G after a company name means this is a group policy (not available for individual purchase)

indicates a fraternal benefit organization; policies are available only to those eligible for membership

B	C	D	E	F	F*	G	H	I	J	J*	K	L
\$97 GI	\$118 GI	\$110 GI	\$110 GI	\$119 GI		\$110 GI	\$114 GI	\$114 GI	\$129 GI		\$56 GI	\$78 GI
\$86	\$98	\$87	\$88	\$102		\$87						
\$90		\$91		\$105					\$106			
	\$785	\$125		\$692		\$133						
\$197	\$243	\$206		\$252	\$79	\$140						
	\$144		\$125	\$149	\$47				\$119		\$67	\$90
\$121	\$123	\$133	\$133	\$128		\$134	\$210	\$224				
	\$134			\$140				\$256				
\$283	\$327	\$132		\$334	\$200	\$115						
\$203	\$219	\$166	\$219	\$192	\$37	\$161			\$156		\$71	\$101
	\$218	\$171	\$127	\$212	\$61	\$172	\$104	\$124	\$130			
\$198	\$247	\$170		\$250		\$150						
		\$111		\$132		\$98						
\$168	\$197	\$183		\$222								
\$184	\$189	\$180	\$143	\$190	\$38	\$175	\$104		\$130			
\$102	\$130	\$97	\$114	\$130		\$94						
\$158	\$182	\$164	\$171	\$198	\$89	\$176	\$136	\$165	\$169	\$76		\$110
\$105	\$126	\$105	\$105	\$130	\$51	\$108						
\$110	\$126			\$127								
	\$120			\$114		\$95						
\$92	\$115	\$95		\$116		\$97						
\$239	\$353	\$244		\$378	\$37	\$302						
\$95	\$106	\$100		\$111		\$99						
		\$99		\$123		\$104			\$114			
	\$122			\$126								
			\$125	\$146								\$90
	\$183	\$169		\$191								
\$293	\$418	\$83		\$245								
\$134	\$151	\$140		\$163	\$70	\$143						
\$101	\$109	\$94		\$113		\$85						
\$119				\$153		\$153						
		\$135		\$150	\$45	\$119	\$104	\$124	\$130			
		\$186	\$127	\$223	\$62	\$192						
\$86	\$102	\$83	\$87	\$105		\$86						
\$99	\$112	\$101	\$101	\$116		\$103						
\$119	\$136	\$135	\$128	\$137	\$16	\$136						
	\$144			\$145								
\$277	\$339	\$306		\$335								
\$88	\$121	\$90	\$89	\$109	\$44	\$86						
\$358	\$459				\$67						\$79	
\$107	\$138	\$116		\$139			\$189	\$193				\$85
				\$228		\$270						
\$163	\$195	\$179		\$200								
\$151	\$155	\$143		\$153		\$138	\$104	\$105	\$122			
\$111	\$123	\$117		\$124		\$118						
		\$128		\$124		\$122						
				\$119	\$45							\$60

**Monthly premiums were reported in Feb. 2008 and can change at any time.
See page 23 for details on using the premium charts.**

MedSup plan monthly premiums for age 70

Company	Phone	Internet Address	M	Zip	Age	X?	Pr-x	A
AARP / United Healthcare *G*	800-523-5800	aarphealthcare.com	A/M	A	S	Y	3	\$100 GI
Admiral Life	800-232-0102		A	Z	AA	Y	0	\$85
American Continental	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$81
American Family Mutual	888-428-5433	amfam.com	A	Z	AA	Y	0	\$504
American Pioneer Life	800-538-1053	amerpion.com	A	Z	AA	Y	6	\$162
American Republic	888-755-3065	americanenterprise.com	A	Z	AA	Y	0	\$115
Anthem BC/BS	888 641-5224	anthem.com	A	A	AA	Y	0	\$106
Anthem BC/BS *G*	888 641-5224	anthem.com	A	A	AI	Y	0	\$109
Bankers Fidelity Life	866-458-7500	bflic.com	A	Z	AI	Y	0	\$240
Bankers Life & Casualty	800-621-3724	bankerslife.com	A	A	AA	N	0	\$256
Central Reserve Life	877-291-5434	centralreserve.com	A	Z	AA	Y	6	\$196
Combined of America	800-544-5531	combinedinsurance.com	A/M/I	Z	AI/AA	N	0	\$173
Conseco	800-5412254	conseco.com	A	Z	AA	Y	0	\$101
Constitution Life	800-789-6364	constitutionlife.com	A	Z	AA	Y	6	\$138
Continental General	877-291-5434	continentalgeneral.com	A	Z	AA	Y	0	\$242
Continental Life	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$88
Equitable Life & Casualty	888-352-5124	equilife.com	A	Z	AA	Y	0	\$159
Genworth Life	877-436-9678	genworth.com	A	Z	AA	Y	0	\$103
Globe Life & Accident	800-801-6831	globecaremedsupp.com	M	A	AA	Y	2	\$97
Golden Rule	800-474-4467	goldenrule.com	A	Z	AA	N	6	\$96
Great American Life	800-880-2745	gafri.com	A	Z	AA	Y	6	\$109
Guarantee Trust Life	800-338-7452	gtlic.com	A	Z	AA	N	0	\$207
Loyal American Life	800-633-6752	gafri.com	A	Z	AA	Y	6	\$95
Marquette National Life	800-934-8203	marquettenationallife.com	A	Z	AA	Y	6	\$102
Medical Mutual	800-722-7331	medicalmutual.com	A/M	A	AA	Y	0	\$105
Menonite Mutual Aid Assoc. #	800-348-7468	mma-online.org	A	Z	AI	Y	0	\$99
Mutual of Omaha	800-316-0842	mutualofomaha.com	A/M	Z	AA	Y	0	\$118
National States	800-868-6788		A	A/Z	AI/AA	N	0	\$215
Pennsylvania Life	800-275-7366	pennlife.com	A	Z	AA	Y	6	\$116
Philadelphia American Life	877-368-4692	neweralife.com	A	Z	AA	N	6	\$76
Physicians Life	800-228-9100	physiciansmutual.com	A/M	Z	AI/AA	Y	0	\$120
Provident American L & H	877-291-5434	palhic.com	A	Z	AA	Y	6	\$149
Pyramid Life	800-777-1126	pyramidlife.com	A	Z	AA	Y	6	\$230
Royal Neighbors of America #	866-845-6665	royalneighbors.org	A	Z	AA	Y	0	\$86
Shenandoah Life	800-848-5433	shenlife.com	A	Z	AA	Y	0	\$89
Standard Life & Accident	888-350-1488	slaico.com	A	Z	AA	Y	0	\$97
State Farm Mutual Auto	Call a local agent	statefarm.com	A	Z	AA	Y	0	\$120
State Mutual	800-232-0102		A	Z	AA	Y	0	\$302
Sterling Investors Life	800-232-0102	sterlinginvestors.com	A	Z	AA	Y	0	\$90
Sterling Life	800-688-0010	sterlingplans.com	A	Z	AA	Y	0	\$333
The Health Plan	877-236-2290	healthplan.org	A/M	A	AA	Y	0	\$187
Thrivent Fin. for Lutherans #	800-847-4836	thrivent.com	A	Z	AI/AA	Y	0	\$103
United American	800-331-2512	unitedamerican.com	A	A	AI	Y	2	\$160
United Commercial Travelers	800-848-0123	uct.org	A	Z	AA	Y	0	\$156
United Teachers Assocs.	800-880-8824	gafri.com	A	Z	AA	Y	6	\$153
United World	877-845-0892	mutualofomaha.com	A/M	Z	AA	Y	0	\$96
USAA Life	800-531-8772	usaa.com	M	A	AA	Y	0	\$104
World Corp	800-822-9993		A	Z	AA	Y	0	\$106

Please note:

G after a company name means this is a group policy (not available for individual purchase)

indicates a fraternal benefit organization; policies are available only to those eligible for membership

B	C	D	E	F	F*	G	H	I	J	J*	K	L
\$139 GI	\$169 GI	\$157 GI	\$157 GI	\$170 GI		\$158 GI	\$162 GI	\$163 GI	\$185 GI		\$81 GI	\$112 GI
\$107	\$120	\$109	\$110	\$124		\$109						
\$102		\$102		\$118					\$118			
	\$872	\$142		\$768		\$151						
\$232	\$281	\$244		\$291	\$93	\$172						
	\$173		\$151	\$179	\$57				\$143		\$81	\$108
\$147	\$167	\$163	\$163	\$173		\$164	\$252	\$274				
	\$183			\$190				\$313				
\$317	\$360	\$148		\$360	\$216	\$124						
\$239	\$258	\$199	\$260	\$232	\$44	\$198			\$192		\$87	\$124
	\$244	\$191	\$142	\$238	\$68	\$193	\$116	\$139	\$146			
\$209	\$260	\$170		\$263		\$190						
		\$118		\$139		\$104						
\$189	\$224	\$209		\$251								
\$223	\$229	\$218	\$173	\$230	\$45	\$212	\$116		\$146			
\$116	\$146	\$114	\$129	\$145		\$110						
\$188	\$220	\$201	\$208	\$239	\$107	\$215	\$166	\$203	\$205	\$93		\$134
\$124	\$147	\$125	\$125	\$152	\$60	\$128						
\$137	\$154			\$155								
	\$135			\$128		\$107						
\$131	\$161	\$134		\$162		\$137						
\$281	\$415	\$287		\$445	\$44	\$355						
\$108	\$121	\$114		\$126		\$113						
		\$112		\$134		\$118			\$131			
	\$165			\$172								
			\$144	\$166								\$103
	\$217	\$201		\$226								
\$326	\$464	\$100		\$273								
\$160	\$177	\$167		\$191	\$81	\$169						
\$104	\$111	\$96		\$115		\$89						
\$141				\$183		\$172						
		\$163		\$181	\$54	\$134	\$116	\$139	\$146			
		\$232	\$162	\$278	\$71	\$239						
\$96	\$113	\$93	\$97	\$116		\$95						
\$113	\$126	\$114	\$115	\$130		\$116						
\$121	\$140	\$139	\$131	\$140	\$17	\$139						
	\$181			\$183								
\$329	\$393	\$364		\$389								
\$99	\$134	\$102	\$100	\$121	\$49	\$97						
\$419	\$542				\$84						\$92	
\$122	\$158	\$132		\$159			\$208	\$212				\$98
				\$250		\$296						
\$204	\$240	\$224		\$247								
\$171	\$177	\$163		\$175		\$157	\$118	\$124	\$145			
\$126	\$140	\$133		\$141		\$134						
		\$141		\$137		\$135						
				\$142	\$54							\$72

**Monthly premiums were reported in Feb. 2008 and can change at any time.
See page 23 for details on using the premium charts.**

MedSup plan monthly premiums for age 75

Company	Phone	Internet Address	M	Zip	Age	X?	Pr-x	A
AARP / United Healthcare *G*	800-523-5800	aarphealthcare.com	A/M	A	S	Y	3	\$110 GI
Admiral Life	800-232-0102		A	Z	AA	Y	0	\$100
American Continental	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$95
American Family Mutual	888-428-5433	amfam.com	A	Z	AA	Y	0	\$611
American Pioneer Life	800-538-1053	amerpion.com	A	Z	AA	Y	6	\$187
American Republic	888-755-3065	americanenterprise.com	A	Z	AA	Y	0	\$135
Anthem BC/BS	888 641-5224	anthem.com	A	A	AA	Y	0	\$127
Anthem BC/BS *G*	888 641-5224	anthem.com	A	A	AI	Y	0	\$119
Bankers Fidelity Life	866-458-7500	bflic.com	A	Z	AI	Y	0	\$261
Bankers Life & Casualty	800-621-3724	bankerslife.com	A	A	AA	N	0	\$299
Central Reserve Life	877-291-5434	centralreserve.com	A	Z	AA	Y	6	\$226
Combined of America	800-544-5531	combinedinsurance.com	A/M/I	Z	AI/AA	N	0	\$206
Conseco	800-5412254	conseco.com	A	Z	AA	Y	0	\$117
Constitution Life	800-789-6364	constitutionlife.com	A	Z	AA	Y	6	\$158
Continental General	877-291-5434	continentalgeneral.com	A	Z	AA	Y	0	\$280
Continental Life	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$103
Equitable Life & Casualty	888-352-5124	equilife.com	A	Z	AA	Y	0	\$186
Genworth Life	877-436-9678	genworth.com	A	Z	AA	Y	0	\$119
Globe Life & Accident	800-801-6831	globecaremedsupp.com	M	A	AA	Y	2	\$103
Golden Rule	800-474-4467	goldenrule.com	A	Z	AA	N	6	\$111
Great American Life	800-880-2745	gafri.com	A	Z	AA	Y	6	\$127
Guarantee Trust Life	800-338-7452	gtlic.com	A	Z	AA	N	0	\$238
Loyal American Life	800-633-6752	gafri.com	A	Z	AA	Y	6	\$108
Marquette National Life	800-934-8203	marquettenationallife.com	A	Z	AA	Y	6	\$115
Medical Mutual	800-722-7331	medicalmutual.com	A/M	A	AA	Y	0	\$126
Menonite Mutual Aid Assoc. #	800-348-7468	mma-online.org	A	Z	AI	Y	0	\$104
Mutual of Omaha	800-316-0842	mutualofomaha.com	A/M	Z	AA	Y	0	\$137
National States	800-868-6788		A	A/Z	AI/AA	N	0	\$224
Pennsylvania Life	800-275-7366	pennlife.com	A	Z	AA	Y	6	\$135
Philadelphia American Life	877-368-4692	neweralife.com	A	Z	AA	N	6	\$83
Physicians Life	800-228-9100	physiciansmutual.com	A/M	Z	AI/AA	Y	0	\$130
Provident American L & H	877-291-5434	palhic.com	A	Z	AA	Y	6	\$172
Pyramid Life	800-777-1126	pyramidlife.com	A	Z	AA	Y	6	\$253
Royal Neighbors of America #	866-845-6665	royalneighbors.org	A	Z	AA	Y	0	\$96
Shenandoah Life	800-848-5433	shenlife.com	A	Z	AA	Y	0	\$104
Standard Life & Accident	888-350-1488	slaico.com	A	Z	AA	Y	0	\$111
State Farm Mutual Auto	Call a local agent	statefarm.com	A	Z	AA	Y	0	\$139
State Mutual	800-232-0102		A	Z	AA	Y	0	\$351
Sterling Investors Life	800-232-0102	sterlinginvestors.com	A	Z	AA	Y	0	\$107
Sterling Life	800-688-0010	sterlingplans.com	A	Z	AA	Y	0	\$363
The Health Plan	877-236-2290	healthplan.org	A/M	A	AA	Y	0	\$198
Thrivent Fin. for Lutherans #	800-847-4836	thrivent.com	A	Z	AI/AA	Y	0	\$118
United American	800-331-2512	unitedamerican.com	A	A	AI	Y	2	\$160
United Commercial Travelers	800-848-0123	uct.org	A	Z	AA	Y	0	\$182
United Teachers Assocs.	800-880-8824	gafri.com	A	Z	AA	Y	6	\$181
United World	877-845-0892	mutualofomaha.com	A/M	Z	AA	Y	0	\$111
USAA Life	800-531-8772	usaa.com	M	A	AA	Y	0	\$112
World Corp	800-822-9993		A	Z	AA	Y	0	\$123

Please note:

G after a company name means this is a group policy (not available for individual purchase)

indicates a fraternal benefit organization; policies are available only to those eligible for membership

B	C	D	E	F	F*	G	H	I	J	J*	K	L
\$153 GI	\$186 GI	\$172 GI	\$172 GI	\$187 GI		\$173 GI	\$178 GI	\$180 GI	\$203 GI		\$89 GI	\$123 GI
\$126	\$139	\$127	\$128	\$142		\$128						
\$120		\$121		\$135					\$136			
	\$1,023	\$170		\$899		\$181						
\$271	\$324	\$286		\$336	\$108	\$203						
	\$200		\$174	\$207	\$66				\$165		\$93	\$125
\$177	\$201	\$196	\$196	\$209		\$197	\$303	\$330				
	\$199			\$207				\$342				
\$360	\$410	\$168		\$401	\$240	\$143						
\$289	\$312	\$244	\$316	\$283	\$52	\$245			\$236		\$107	\$153
	\$281	\$220	\$163	\$274	\$79	\$222	\$133	\$160	\$168			
\$248	\$310	\$222		\$313		\$234						
		\$138		\$157		\$121						
\$222	\$264	\$250		\$295								
\$256	\$264	\$251	\$200	\$265	\$52	\$244	\$133		\$168			
\$137	\$170	\$134	\$153	\$169		\$131						
\$215	\$258	\$242	\$245	\$281	\$126	\$257	\$195	\$243	\$241	\$108		\$157
\$147	\$172	\$147	\$148	\$177	\$70	\$151						
\$157	\$182			\$183								
	\$157			\$149		\$124						
\$154	\$182	\$156		\$184		\$160						
\$322	\$475	\$329		\$511	\$50	\$407						
\$125	\$141	\$133		\$147		\$131						
		\$134		\$158		\$141			\$154			
	\$199			\$206								
			\$156	\$179								\$110
	\$252	\$234		\$263								
\$339	\$483	\$114		\$284								
\$188	\$206	\$197		\$223	\$95	\$198						
\$111	\$123	\$104		\$126		\$102						
\$157				\$210		\$194						
		\$188		\$209	\$63	\$154	\$133	\$160	\$168			
		\$188		\$209	\$63	\$154	\$133	\$160	\$168			
\$109	\$127	\$106	\$111	\$130		\$109						
\$132	\$146	\$133	\$134	\$149		\$136						
\$139	\$160	\$159	\$150	\$161	\$19	\$160						
	\$210			\$212								
\$389	\$459	\$432		\$453								
\$116	\$156	\$120	\$118	\$141	\$57	\$115						
\$463	\$612				\$95						\$105	
\$139	\$180	\$151		\$181			\$225	\$229				\$112
				\$260		\$308						
\$241	\$282	\$267		\$290								
\$205	\$213	\$197		\$210		\$189	\$142	\$145	\$169			
\$146	\$163	\$155		\$164		\$156						
		\$153		\$148		\$145						
				\$164	\$63							\$84

Monthly premiums were reported in Feb. 2008 and can change at any time.

See page 23 for details on using the premium charts.

MedSup plan monthly premiums for age 80

Company	Phone	Internet Address	M	Zip	Age	X?	Pr-x	A
AARP / United Healthcare *G*	800-523-5800	aarphealthcare.com	A/M	A	S	Y	3	\$110 GI
Admiral Life	800-232-0102		A	Z	AA	Y	0	\$110
American Continental	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$105
American Family Mutual	888-428-5433	amfam.com	A	Z	AA	Y	0	\$711
American Pioneer Life	800-538-1053	amerpion.com	A	Z	AA	Y	6	\$202
American Republic	888-755-3065	americanenterprise.com	A	Z	AA	Y	0	\$153
Anthem BC/BS	888 641-5224	anthem.com	A	A	AA	Y	0	\$146
Anthem BC/BS *G*	888 641-5224	anthem.com	A	A	AI	Y	0	\$129
Bankers Fidelity Life	866-458-7500	bflic.com	A	Z	AI	Y	0	\$274
Bankers Life & Casualty	800-621-3724	bankerslife.com	A	A	AA	N	0	\$354
Central Reserve Life	877-291-5434	centralreserve.com	A	Z	AA	Y	6	\$308
Combined of America	800-544-5531	combinedinsurance.com	A/M/I	Z	AI/AA	N	0	\$233
Conseco	800-5412254	conseco.com	A	Z	AA	Y	0	\$131
Constitution Life	800-789-6364	constitutionlife.com	A	Z	AA	Y	6	\$169
Continental General	877-291-5434	continentalgeneral.com	A	Z	AA	Y	0	\$306
Continental Life	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$113
Equitable Life & Casualty	888-352-5124	equilife.com	A	Z	AA	Y	0	\$205
Genworth Life	877-436-9678	genworth.com	A	Z	AA	Y	0	\$131
Globe Life & Accident	800-801-6831	globecaremedsupp.com	M	A	AA	Y	2	\$103
Golden Rule	800-474-4467	goldenrule.com	A	Z	AA	N	6	\$129
Great American Life	800-880-2745	gafri.com	A	Z	AA	Y	6	\$142
Guarantee Trust Life	800-338-7452	gtlic.com	A	Z	AA	N	0	\$266
Loyal American Life	800-633-6752	gafri.com	A	Z	AA	Y	6	\$111
Marquette National Life	800-934-8203	marquettenationallife.com	A	Z	AA	Y	6	\$120
Medical Mutual	800-722-7331	medicalmutual.com	A/M	A	AA	Y	0	\$145
Menonite Mutual Aid Assoc. #	800-348-7468	mma-online.org	A	Z	AI	Y	0	\$105
Mutual of Omaha	800-316-0842	mutualofomaha.com	A/M	Z	AA	Y	0	\$158
National States	800-868-6788		A	A/Z	AI/AA	N	0	\$251
Pennsylvania Life	800-275-7366	pennlife.com	A	Z	AA	Y	6	\$148
Philadelphia American Life	877-368-4692	neweralife.com	A	Z	AA	N	6	\$97
Physicians Life	800-228-9100	physiciansmutual.com	A/M	Z	AI/AA	Y	0	\$138
Provident American L & H	877-291-5434	palhic.com	A	Z	AA	Y	6	\$206
Pyramid Life	800-777-1126	pyramidlife.com	A	Z	AA	Y	6	\$268
Royal Neighbors of America #	866-845-6665	royalneighbors.org	A	Z	AA	Y	0	\$103
Shenandoah Life	800-848-5433	shenlife.com	A	Z	AA	Y	0	\$115
Standard Life & Accident	888-350-1488	slaico.com	A	Z	AA	Y	0	\$132
State Farm Mutual Auto	Call a local agent	statefarm.com	A	Z	AA	Y	0	\$156
State Mutual	800-232-0102		A	Z	AA	Y	0	\$386
Sterling Investors Life	800-232-0102	sterlinginvestors.com	A	Z	AA	Y	0	\$119
Sterling Life	800-688-0010	sterlingplans.com	A	Z	AA	Y	0	\$384
The Health Plan	877-236-2290	healthplan.org	A/M	A	AA	Y	0	\$203
Thrivent Fin. for Lutherans #	800-847-4836	thrivent.com	A	Z	AI/AA	Y	0	\$131
United American	800-331-2512	unitedamerican.com	A	A	AI	Y	2	\$160
United Commercial Travelers	800-848-0123	uct.org	A	Z	AA	Y	0	\$200
United Teachers Assocs.	800-880-8824	gafri.com	A	Z	AA	Y	6	\$200
United World	877-845-0892	mutualofomaha.com	A/M	Z	AA	Y	0	\$121
USAA Life	800-531-8772	usaa.com	M	A	AA	Y	0	\$119
World Corp	800-822-9993		A	Z	AA	Y	0	\$137

Please note:

G after a company name means this is a group policy (not available for individual purchase)

indicates a fraternal benefit organization; policies are available only to those eligible for membership

B	C	D	E	F	F*	G	H	I	J	J*	K	L
\$153 GI	\$186 GI	\$172 GI	\$172 GI	\$187 GI		\$173 GI	\$178 GI	\$180 GI	\$203 GI		\$89 GI	\$123 GI
\$138	\$152	\$140	\$141	\$154		\$141						
\$132		\$133		\$146					\$147			
	\$1,187	\$201		\$1,009		\$215						
\$298	\$353	\$314		\$367	\$120	\$227						
	\$224		\$195	\$232	\$74				\$185		\$104	\$140
\$204	\$231	\$225	\$225	\$240		\$226	\$349	\$379				
	\$216			\$224				\$370				
\$379	\$439	\$177		\$423	\$254	\$154						
\$353	\$384	\$305	\$389	\$346	\$62	\$304			\$295		\$134	\$191
\$241	\$178	\$300	\$86	\$243	\$146	\$176	\$184	\$160	\$168			
\$280	\$350	\$252		\$354		\$274						
		\$154		\$173		\$136						
\$243	\$291	\$284		\$326								
\$281	\$289	\$275	\$219	\$291	\$57	\$268	\$146		\$184			
\$153	\$189	\$154	\$171	\$188		\$150						
\$229	\$285	\$271	\$268	\$305	\$137	\$290	\$215	\$273	\$266	\$120		\$174
\$163	\$191	\$165	\$166	\$197	\$77	\$169						
\$159	\$195			\$196								
	\$182			\$172		\$144						
\$176	\$200	\$200		\$202		\$178						
\$360	\$531	\$368		\$572	\$56	\$455						
\$137	\$153	\$145		\$160		\$143						
		\$152		\$178		\$160			\$174			
	\$228			\$237								
			\$165	\$188								\$116
	\$290	\$269		\$303								
\$381	\$542	\$126		\$318								
\$209	\$229	\$220		\$247	\$105	\$219						
\$127	\$149	\$118		\$153		\$116						
\$175				\$239		\$219						
		\$69		\$146	\$176	\$184	\$133	\$160	\$168			
		\$280	\$219	\$333	\$95	\$290						
\$119	\$137	\$116	\$121	\$141		\$118						
\$145	\$159	\$146	\$148	\$161		\$150						
\$166	\$191	\$189	\$179	\$192	\$23	\$190						
	\$236			\$234								
\$435	\$510	\$483		\$503								
\$130	\$173	\$134	\$132	\$156	\$64	\$128						
\$501	\$694				\$109						\$126	
\$155	\$200	\$167		\$201			\$238	\$243				\$123
				\$266		\$317						
\$269	\$315	\$300		\$324								
\$229	\$240	\$222		\$236		\$214	\$161	\$167	\$194			
\$159	\$177	\$169		\$179		\$170						
		\$162		\$157		\$154						
				\$180	\$71							\$94

Monthly premiums were reported in Feb. 2008 and can change at any time.

See page 23 for details on using the premium charts.

Medicare Select plan monthly premiums

MedSelect / age 65

Company	Phone	Internet Address	M	Zip	Age	X?	Pr-x	A	B	C	D	E	F	F*	G	K	L
AARP / United Healthcare *G*	800 523-5800	aarphealthcare.com	A/M	A	S	Y	3			\$90 GI							
American Pioneer Life	800-538-1053	amerpion.com	A	Z	AA	Y	6		\$139	\$181	\$149		\$194		\$111		
Anthem BC/BS *G*	888 641-5224	anthem.com	A	A	AA	Y	0			\$94			\$99				
Bankers Life & Casualty	800-621-3724	bankerslife.com	A	A	AA	N	0	\$109	\$128	\$178	\$167		\$186				
Constitution Life	800-789-6364	constitutionlife.com	A	Z	AA	Y	6		\$99	\$124	\$108		\$128				
Continental Life	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$64	\$70	\$93	\$68		\$96				
Marquette National Life	800-934-8203	marquettenationallife.com	A	Z	AA	Y	6				\$85		\$106		\$90		
Mutual of Omaha	800-316-0842	mutualofomaha.com	A/M	Z	AA	Y	0	\$100	\$140	\$148	\$143	\$161	\$147		\$125		
Pennsylvania Life	800-275-7366	pennlife.com	A	Z	AA	Y	6		\$112	\$132	\$113		\$144		\$129		
Pyramid Life	800-777-1126	pyramidlife.com	A	Z	AA	Y	6				\$116	\$96	\$155		\$125		
Standard Life & Accident	888-350-1488	slaico.com	A	Z	AA	Y	3			\$104	\$93		\$105		\$94		
State Mutual	877-872-5500		A	Z	AA	Y	0		\$194	\$242	\$213		\$239				
Sterling Life	800-688-0010	sterlingplans.com	A	Z	AA	Y	0	\$225	\$229	\$271						\$62	
The Health Plan	877-236-2290	healthplan,.org	A/M	A	AA	Y	0	\$145		\$201	\$189		\$200				
United American	800-331-2512	unitedamerican.com	A	A/Z	AA	Y	2		\$175	\$211	\$201			\$66		\$90	\$126
United World	877-845-0892	mutualofomaha.com	A/M	Z	AA	Y	0	\$84	\$96	\$105	\$99		\$110		\$103		

MedSelect / age 70

AARP / United Healthcare *G*	800 523-5800	aarphealthcare.com	M	A	S	Y	3			\$129 GI							
American Pioneer Life	800-538-1053	amerpion.com	A	Z	AA	Y	6		\$164	\$208	\$175		\$223		\$136		
Anthem BC/BS *G*	888 641-5224	anthem.com	A	A	AA	Y	0			\$130			\$137				
Bankers Life & Casualty	800-621-3724	bankerslife.com	A	A	AA	N	0	\$124	\$149	\$207	\$197		\$224				
Constitution Life	800-789-6364	constitutionlife.com	A	Z	AA	Y	6		\$118	\$145	\$129		\$150				
Continental Life	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$75	\$81	\$108	\$77		\$111				
Marquette National Life	800-934-8203	marquettenationallife.com	A	Z	AA	Y	6				\$96		\$115		\$101		
Mutual of Omaha	800-316-0842	mutualofomaha.com	A/M	Z	AA	Y	0	\$118	\$168	\$173	\$172	\$187	\$173		\$151		
Pennsylvania Life	800-275-7366	pennlife.com	A	Z	AA	Y	6		\$133	\$154	\$134		\$167		\$151		
Pyramid Life	800-777-1126	pyramidlife.com	A	Z	AA	Y	6				\$144	\$123	\$193		\$148		
Standard Life & Accident	888-350-1488	slaico.com	A	Z	AA	Y	3			\$107	\$95		\$108		\$96		
State Mutual	877-872-5500		A	Z	AA	Y	0		\$229	\$281	\$254		\$278				
Sterling Life	800-688-0010	sterlingplans.com	A	Z	AA	Y	0	\$260	\$266	\$317						\$70	
The Health Plan	877-236-2290	healthplan,.org	A/M	A	AA	Y	0	\$184		\$261	\$246		\$260				
United American	800-331-2512	unitedamerican.com	A	A/Z	AA	Y	2		\$231	\$279	\$267			\$87		\$120	\$169
United World	877-845-0892	mutualofomaha.com	A/M	Z	AA	Y	0	\$96	\$109	\$120	\$113		\$125		\$117		

Medicare Select (MedSelect) is a special type of Med-Sup policy which may require you to use network doctors and facilities. Call the company for details.

Standard plan benefits apply. See pages 21-22.

MedSelect / age 75

Company	Phone	Internet Address	M	Zip	Age	X?	Pr-x	A	B	C	D	E	F	F*	G	K	L
AARP / United Healthcare *G*	800 523-5800	aarphealthcare.com	A/M	A	S	Y	3			\$143 Gl							
American Pioneer Life	800-538-1053	amerpion.com	A	Z	AA	Y	6		\$191	\$239	\$227		\$256		\$161		
Anthem BC/BS *G*	888 641-5224	anthem.com	A	A	AA	Y	0			\$154			\$162				
Bankers Life & Casualty	800-621-3724	bankerslife.com	A	A	AA	N	0	\$144	\$177	\$248	\$239		\$270				
Constitution Life	800-789-6364	constitutionlife.com	A	Z	AA	Y	6		\$139	\$169	\$152		\$175				
Continental Life	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$88	\$96	\$126	\$90		\$130				
Marquette National Life	800-934-8203	marquettenationallife.com	A	Z	AA	Y	6				\$112		\$133		\$119		
Mutual of Omaha	800-316-0842	mutualofomaha.com	A/M	Z	AA	Y	0	\$137	\$197	\$199	\$201	\$214	\$198		\$176		
Pennsylvania Life	800-275-7366	pennlife.com	A	Z	AA	Y	6		\$155	\$178	\$157		\$193		\$175		
Pyramid Life	800-777-1126	pyramidlife.com	A	Z	AA	Y	6				\$171	\$144	\$215		\$174		
Standard Life & Accident	888-350-1488	slaico.com	A	Z	AA	Y	3			\$122	\$109		\$124		\$110		
State Mutual	877-872-5500		A	Z	AA	Y	0		\$271	\$329	\$301		\$324				
Sterling Life	800-688-0010	sterlingplans.com	A	Z	AA	Y	0	\$283	\$291	\$354						\$62	
The Health Plan	877-236-2290	healthplan,.org	A/M	A	AA	Y	0	\$195		\$294	\$278		\$292				
United American	800-331-2512	unitedamerican.com	A	A/Z	AA	Y	2		\$251	\$307	\$296			\$97		\$134	\$189
United World	877-845-0892	mutualofomaha.com	A/M	Z	AA	Y	0	\$111	\$127	\$139	\$131		\$146		\$137		

Monthly premiums were reported in Feb. 2008 and can change at any time.

See page 23 for details on using the premium charts.

MedSelect / age 80

AARP / United Healthcare *G*	800 523-5800	aarphealthcare.com	M	A	S	Y	3			\$143 Gl							
American Pioneer Life	800-538-1053	amerpion.com	A	Z	AA	Y	6		\$210	\$261	\$227		\$280		\$180		
Anthem BC/BS *G*	888 641-5224	anthem.com	A	A	AA	Y	0			\$178			\$186				
Bankers Life & Casualty	800-621-3724	bankerslife.com	A	A	AA	N	0	\$171	\$214	\$303	\$296		\$328				
Constitution Life	800-789-6364	constitutionlife.com	A	Z	AA	Y	6		\$155	\$187	\$170		\$194				
Continental Life	800-264-4000	cont-life.com	A	Z	AA	Y	3	\$103	\$113	\$148	\$105		\$152				
Marquette National Life	800-934-8203	marquettenationallife.com	A	Z	AA	Y	6				\$125		\$147		\$132		
Mutual of Omaha	800-316-0842	mutualofomaha.com	A/M	Z	AA	Y	0	\$158	\$227	\$225	\$232	\$242	\$225		\$203		
Pennsylvania Life	800-275-7366	pennlife.com	A	Z	AA	Y	6		\$170	\$195	\$174		\$212		\$191		
Pyramid Life	800-777-1126	pyramidlife.com	A	Z	AA	Y	6				\$188	\$161	\$231		\$192		
Standard Life & Accident	888-350-1488	slaico.com	A	Z	AA	Y	3	\$146	\$130		\$147		\$131		\$96		
State Mutual	877-872-5500		A	Z	AA	Y	0		\$303	\$365	\$336		\$360				
Sterling Life	800-688-0010	sterlingplans.com	A	Z	AA	Y	0	\$298	\$310	\$396						\$70	
The Health Plan	877-236-2290	healthplan,.org	A/M	A	AA	Y	0	\$200		\$326	\$310		\$325				
United American	800-331-2512	unitedamerican.com	A	A/Z	AA	Y	2		\$253	\$328	\$316			\$105		\$144	\$202
United World	877-845-0892	mutualofomaha.com	A/M	Z	AA	Y	0	\$121	\$138	\$152	\$143		\$159		\$149		

G after a company name means this is a group policy — it may not be available for individual purchase. Please note: No company reported MedSelect premiums for Plans H, I, J or high-deductible Plan J.

Medicare Part D stand-alone prescription drug plans for 2008

If you have a MedSup policy or a Medicare Advantage plan with no prescription drug coverage, you can choose from this list for prescription benefits.

Company Name Company Phone	Part D Plan Names Offered by the Company	Benefit Type	\$0 Prem. w/LIS?	Monthly Prem.	Annual Deduct.	Type of Coverage in the Gap
Advantage Plans from Medical Mutual of OH 1-800-613-2583	Advantage Plan Standard Rx	Basic		\$35.10	\$275	No Gap Coverage
	Advantage Plan Premium Rx	Enhanced		\$47.30	\$0	All Generics
Aetna Medicare 1-800-213-4599	Aetna Medicare Rx Essentials	Basic		\$39.20	\$275	No Gap Coverage
	Aetna Medicare Rx Plus	Enhanced		\$42.30	\$0	No Gap Coverage
	Aetna Medicare Rx Premier	Enhanced		\$77.60	\$0	All Generics
Anthem BC/BS 1-800-243-3363	Blue MedicareRx Value	Basic	•	\$26.00	\$275	No Gap Coverage
	Blue MedicareRx Plus	Enhanced		\$37.50	\$0	No Gap Coverage
	Blue MedicareRx Premier	Enhanced		\$71.00	\$0	Some Generics
Bravo Health 1-800-723-9209	BravoRx	Basic	•	\$22.60	\$275	No Gap Coverage
CIGNA Medicare Rx 1-800-735-1459	CIGNA Medicare Rx Plan 1	Basic	•	\$25.90	\$275	No Gap Coverage
	CIGNA Medicare Rx Plan 2	Basic		\$38.60	\$0	No Gap Coverage
	CIGNA Medicare Rx Plan 3	Enhanced		\$60.40	\$0	Some Generics
Coventry AdvantraRx 1-800-882-3822	AdvantraRx Value	Enhanced		\$23.00	\$0	No Gap Coverage
	AdvantraRx Premier	Basic		\$37.50	\$0	No Gap Coverage
	AdvantraRx Premier Plus	Enhanced		\$50.70	\$0	All Preferred Generics
EnvisionRx Plus 1-866-250-2005	EnvisionRxPlus Standard	Basic		\$61.00	\$275	No Gap Coverage
	EnvisionRxPlus Gold	Enhanced		\$98.00	\$0	All Preferred Generics
First Health Part D 1-800-588-3322	First Health Part D-Secure	Enhanced		\$16.60	\$175	No Gap Coverage
	First Health Part D-Premier	Basic	•	\$27.30	\$0	No Gap Coverage
	First Health Part D-Select	Enhanced		\$45.40	\$0	All Preferred Generics
HealthSpring Prescription Drug Plan 1-800-331-6293	HealthSpring PDP Reg 14	Basic	•	\$20.70	\$275	No Gap Coverage
Humana 1-800-706-0872	Humana PDP Enhanced	Enhanced		\$27.10	\$0	No Gap Coverage
	Humana PDP Standard	Basic		\$33.60	\$275	No Gap Coverage
	Humana PDP Complete	Enhanced		\$90.40	\$0	All Preferred Generics
Medco 1-800-758-3605	Medco Value Plan	Basic	•	\$25.70	\$275	No Gap Coverage
	Medco Choice Plan	Enhanced		\$35.00	\$0	No Gap Coverage
	Medco Access Plan	Enhanced		\$64.10	\$0	All Generics

Company Name Company Phone	Part D Plan Names Offered by the Company	Benefit Type	\$0Prem. w/LIS?	Monthly Prem.	Annual Deduct.	Type of Coverage in the Gap
MEMBERHEALTH 1-866-684-5353	Community CCRx Basic Community CCRx Choice Community CCRx Gold	Basic Enhanced Enhanced	•	\$24.40 \$44.10 \$46.20	\$275 \$0 \$0	No Gap Coverage No Gap Coverage All Generics
Paramount 1-800-462-3589	Paramount Basic Paramount Enhanced	Basic Enhanced	•	\$21.30 \$40.10	\$275 \$0	No Gap Coverage All Generics
Pennsylvania Life 1-800-978-9500	Bronze Plan Gold Plan Platinum Plan	Basic Enhanced Enhanced	•	\$23.70 \$28.60 \$60.50	\$275 \$0 \$0	No Gap Coverage No Gap Coverage All Generics
RxAmerica 1-800-429-6686	Advantage Star Plan Advantage Freedom Advantage Allegiance	Basic Enhanced Enhanced	•	\$22.30 \$27.50 \$42.20	\$275 \$0 \$0	No Gap Coverage No Gap Coverage All Preferred Generics
SierraRx 1-866-789-0565	SierraRx Basic	Basic		\$39.50	\$275	No Gap Coverage
SilverScript 1-866-552-6106	SilverScript SilverScript Plus SilverScript Complete	Basic Enhanced Enhanced	•	\$19.60 \$42.60 \$48.50	\$275 \$0 \$0	No Gap Coverage All Generics All Generics
Sterling Life 1-888-909-1713	Sterling Rx Sterling Rx Plus	Basic Enhanced		\$31.60 \$79.90	\$275 \$100	No Gap Coverage All Generics
UniCare 1-866-892-5334	MedicareRx Rewards Standard MedicareRx Rewards Value	Basic Basic	• •	\$23.00 \$26.50	\$275 \$0	No Gap Coverage No Gap Coverage
United American 1-866-524-4169	UA Rx - Silver Plan UA Part D PDP	Basic Enhanced		\$38.80 \$43.40	\$130 \$0	No Gap Coverage No Gap Coverage
UnitedHealthcare 1-888-867-5564	UnitedHealth Rx Value AARP MedicareRx Saver AARP MedicareRx Preferred UnitedHealth Rx Basic AARP MedicareRx Enhanced	Enhanced Basic Basic Basic Enhanced		\$23.80 \$30.00 \$33.70 \$43.30 \$62.90	\$275 \$275 \$0 \$0 \$0	No Gap Coverage No Gap Coverage No Gap Coverage No Gap Coverage All Preferred Generics
UPMC Health Plan 1-877-381-3765	UPMC for Life PDP	Basic		\$34.00	\$0	No Gap Coverage
WellCare 1-888-423-5252	WellCare Classic WellCare Signature	Basic Basic	•	\$27.30 \$30.60	\$250 \$0	No Gap Coverage No Gap Coverage

Medicare Advantage plan comparison worksheet

Use this worksheet to help compare available Medicare Advantage plans. Page 37 lists contact information for Ohio-authorized plans. **1)** Go to www.medicare.gov or call OSHIIP (1-800-686-1578) to identify the plans serving your county. **2)** Call the plans for benefit information. Find out if your preferred doctors and hospitals are in the plan’s network and circle yes or no on the worksheet. Ask the plan about your financial responsibilities. Write these out-of-pocket costs on the worksheet. **3)** Choose which plan (f any) is right for you.

	Plan 1	Plan 2	Plan 3
Plan name	_____	_____	_____
Phone	_____	_____	_____
My doctors and hospitals are in the plan’s network	Yes / No	Yes / No	Yes / No
Monthly Premium	_____	_____	_____
Copays			
Hospital	_____	_____	_____
Emergency	_____	_____	_____
Urgent care	_____	_____	_____
Office visit			
Primary care	_____	_____	_____
Specialist	_____	_____	_____
Physical exam	_____	_____	_____
Preventive care	_____	_____	_____
Therapy	_____	_____	_____
Ambulance	_____	_____	_____
Additional benefits			
Drugs	_____	_____	_____
Vision	_____	_____	_____
Hearing	_____	_____	_____
Dental	_____	_____	_____
Additional plan information			
Do I need referrals?	_____	_____	_____
Wellness programs?	_____	_____	_____
Disease management?	_____	_____	_____
Other benefits?	_____	_____	_____

Medicare Advantage plans in 2008

Medicare Advantage plans serve geographic areas, offering comprehensive health benefits that can include prescription drug coverage. Companies are listed here by plan type; each company may have multiple plans. Go to www.medicare.gov or call OSHIIP at 1-800-686-1578 for the plans serving your county. Call the company for plan information.

Health Maintenance Organization (HMO)

AARP MedicareComplete / SecureHorizons by UnitedHealthcare: 1-800-547-5514

Advantage Plans from Medical Mutual of Ohio: 1-800-613-2583

Aetna Golden Medicare: 1-800-832-2640

Anthem Senior Advantage: 1-866-803-5153

Health Plan SecureCare: 1--877-847-7915

Kaiser Permanente Medicare Plus: 1-800-551-5353

MediGold: 1-800-964-4525

Paramount Elite: 1-800-462-3589

PrimeTime Health: 1-800-577-5084

SummaCare Secure: 1-888-464-8440

Wellcare: 1-866-360-8153

Medical Savings Account (MSA)

Advantra Savings: 1-800-474-5993

Anthem Smart Saver: 1-800-652-6387

Preferred Provider Organization (PPO)

Advantra: 1-888-271-7647

Aetna Golden Choice: 1-800-832-2640

Anthem Medicare Preferred and Blue Medicare Access: 1-866-803-5153

HumanaChoice: 1-800-833-2364

PrimeTime Health: 1-800-577-5084

SecureChoice: 1-877-847-7915

WellCare: 1-866-360-8153

Private Fee-for-Service (PFFS)

Advantage PFFS: 1-800-613-2583

Advantra Freedom: 1-800-711-1607

Aetna Medicare Open: 1-800-832-2640

Humana Gold Choice: 1-800-833-2312

PrimeTime Health Plan: 1-800-577-5084

SecureFreedom: 1-877-847-7915

SecureHorizons Medicare Direct: 1-800-555-5757

Sterling Option: 1-888-858-8572

Team Care Advantage (Mennonite Mutual Aid Association): 1-800-348-7468

The Care Assured: 1-800-892-3351

Today's Options: 1-800-996-8867

UMPC For Life: 1-877-381-3765

Wellcare: 1-866-238-9898

Special Needs Plan (SNP)

Buckeye Community Health: 1-866-246-4356

CareSource Advantage: 1-800-708-8729

DaVita VillageHealth: 1-866-838-1962

Evercare: 1-888-834-3721

Gateway Health: 1-877-428-3929

HumanaChoice: 1-800-833-2364

Paramount Elite Plus: 1-800-462-3589

Unison Advantage: 1-800-290-4009

Wellcare: 1-866-360-8153

Glossary of terms

Assignment: A doctor agrees to accept the Medicare-approved amount as full payment for a patient's treatment under Original Medicare. Ohio law prohibits medical practitioners and their employers from charging more than Medicare approves. Most Ohio doctors accept Medicare assignment.

Benefit period: Medicare measures your use of hospital and skilled nursing facility services by benefit periods. A benefit period begins the day you are admitted and ends when you've received no skilled services at a hospital or skilled nursing facility for 60 days in a row. A new benefit period begins with a new admission. You pay the Part A deductible for each benefit period. There's no limit to benefit periods.

Copayment (coinsurance): A cost you pay for services or treatments you receive. Usually, coinsurance is a percentage; copayments are set dollar amounts. For ease of reading, this guide uses *copayment* (or *copay*) when referring to costs of this type — no matter what Medicare or other insurance calls such payments.

Crossover: A provision in many MedSup policies that allows Medicare to send claims directly to the MedSup insurance company. Without crossover, Medicare mails you the claims and you must send them to the insurer.

Deductible: An amount you pay for Medicare-covered services before Medicare begins to pay. The Part A deductible is paid per benefit period; the Part B deductible is paid annually. Deductible amounts can change every year.

Doughnut hole: A coverage gap allowed in Part D (prescription drug) plans. See page 5 for more information.

Durable Medical Equipment (DME): Medical equipment ordered by a doctor for home use. These items must be reusable (examples: walkers, wheelchairs, hospital beds).

End-Stage Renal Disease (ESRD): Permanent kidney failure. Treatment may be lifetime dialysis or a kidney transplant.

Excess charges: Any amount the doctor or supplier charges you that is more than Medicare approves. Ohio law prohibits this, but other states may allow these charges.

Guaranteed issue rights: In certain situations, rights you have that require an insurance company to sell or offer you a MedSup policy. The company cannot deny you coverage or place conditions on a policy, it must cover your pre-existing conditions and it cannot charge more for a policy because of your past or present health problems.

Guaranteed renewable: Your MedSup policy must be automatically renewed or continued unless you commit fraud or don't pay premiums.

Home health care: Skilled nursing care and certain other health care you get in your home when ordered by your doctor.

Hospice care: A special way of caring for people who are terminally ill and their families. Hospice includes physical care and counseling and is covered by Medicare under Part A.

Lifetime reserve days: The 60 days Medicare pays for when you already have been in a hospital for more than 90 days. These 60 days can be used only once during your lifetime. For each lifetime reserve day, Medicare pays all covered costs except for your daily copay.

Long-term care: A variety of services that help people who have chronic conditions. The care can be received at home, in the community, in a nursing home or an assisted living facility. Most long-term care is custodial; Medicare does not cover custodial care.

Low-income subsidy (extra help): Financial assistance that helps people who qualify pay costs associated with Part D coverage.

Glossary of terms (continued)

Medicaid: A program funded by federal and state money that helps pay medical costs for some people with low incomes and limited resources. Medicaid programs vary from state to state, but most health care costs are covered if you qualify for both Medicare and Medicaid.

Medical underwriting: An insurance company process that looks at your health history to decide whether to accept your application for insurance and how much to charge you for that insurance.

Medically necessary: Services or supplies that meet the conditions below.

- Proper and needed for the diagnosis or treatment of your medical condition
- Provided for the diagnosis, direct care and treatment of your medical condition
- Meet the standards of good medical practice in the local area and are not mainly for the convenience of you or your doctor.

Medicare Advantage: Medicare health plans that must include all benefits Medicare offers and may carry extra benefits as well. Medicare contracts annually with private companies to offer these plans. They are available based on the county where you live.

Medicare-approved amount: In Original Medicare, an amount Medicare sets as reasonable for a covered medical service. Between you (or your MedSup insurance) and Medicare, this is the amount paid to a doctor or other provider for a service or supply. Ohio law prohibits medical practitioners and their employees from charging more than Medicare approves.

Medicare carrier: A private company that contracts with Medicare.

Medicare Select: A type of MedSup policy that may require you to use hospitals and doctors in a network for the plan to pay its full share.

MedSup open enrollment period: A one-time-only six month period when you can buy any MedSup policy offered in Ohio. It starts when you sign up for Medicare Part B at age 65 or older. You cannot be denied coverage or charged more due to past or present health problems when you apply during this period.

MedSup policy: Medicare supplement insurance. MedSup is sold by private insurance companies to fill coverage gaps in Original Medicare. The 12 standardized plans, named Plan A through Plan L, work only with the Original Medicare Plan.

Original Medicare: A fee-for-service health plan that lets you go to any doctor, hospital or other provider accepting Medicare. You may first owe a deductible for services under Part A (hospital insurance) or Part B (medical insurance). Medicare pays most of its approved amount for your services; you are responsible for your portion (usually 20 percent).

Pre-existing condition: A health problem for which you received treatment within six months before the date a new insurance policy starts.

Premium: A periodic payment you make to Medicare, an insurance company or a health care plan for coverage.

Skilled nursing care: A level of care given by Registered Nurses. Examples include giving intravenous injections, tube feeding, supplying oxygen to help you breathe and changing sterile dressings on a wound. Any service that could be done safely by an average non-medical person — or one's self — and without the supervision of a Registered Nurse is not considered skilled care.

Skilled Nursing Facility: A facility with the staff and equipment to give skilled nursing care and / or skilled rehabilitation services and other related health services.

Helpful phone numbers and web sites

As you make your way through Medicare you may find it useful to keep handy this contact information for the various government agencies and other organizations that can assist people covered by Medicare.



Organization	Phone	Web site
Ohio Senior Health Insurance Information Program (OSHIIP)	1-800-686-1578	www.ohioinsurance.gov
Ohio Department of Insurance Consumer Services	1-800-686-1526	www.ohioinsurance.gov
Medicare	1-800-MEDICARE (1-800-633-4227)	www.medicare.gov
Social Security Administration	1-800-772-1213	www.ssa.gov
Ohio Department of Aging	1-800-282-1206	www.goldenbuckeye.com
Ohio Medicaid	1-800-324-8680	www.jfs.ohio.gov
Ohio KePRO	1-800-589-7337	www.ohiokepro.com
Pro-Seniors	1-800-488-6070	www.proseniors.org
U.S. Dept. of Labor	1-866-487-2365	www.dol.gov
Ohio's Best Rx	1-866-923-7879	www.ohiobestrx.org
Veterans Administration	1-877-222-8387	www.va.gov
TRICARE	1-800-941-4501	www.tricare.mil
National Council on Aging	1-202-479-1200	www.ncoa.org
Benefits Check Up	_____	www.benefitscheckup.org
National Kidney Foundation	1-800-622-9010	www.kidney.org

Ohio Senior Health Insurance Information Program

OSHIIP

Since 1992, the Ohio Senior Health Insurance Information Program (OSHIIP) has provided people on Medicare with free and objective health insurance information and one-on-one insurance counseling. A program of the Ohio Department of Insurance, OSHIIP is funded by the state and a grant from the federal Centers for Medicare and Medicaid Services (CMS).

OSHIIP staff — along with approximately 600 trained volunteers who live in all parts of our state — educate consumers about Medicare, Medicare supplement insurance policies, Medicare Advantage plans, Medicare prescription drug plans, certain Medicaid issues, long-term care insurance and other health insurance matters.

OSHIIP Counselors can help you:

- Understand how various Medicare plans work
- Make sense of doctor and hospital bills
- Translate confusing statements from Medicare and insurance companies
- Determine if you are getting the benefits you are entitled to, and what to do if you are not
- Better understand how to deal with Medicare and insurance in the future



Want to be an OSHIIP Counselor?

- New volunteers are always needed and welcome
- OSHIIP has sites in most Ohio counties — call us about training classes
- Contact us if you want OSHIIP in your area... you may know of an organization that could serve as a sponsor

Toll-free 1-800-686-1578 (7:30 a.m. - 5:00 p.m. Monday - Friday)

Fax (614) 752-0740

Internet: www.ohioinsurance.gov

Email: oshiipmail@ins.state.oh.us

To request consumer publications
or ask questions about insurance, please call the
Ohio Department of Insurance consumer lines:

Medicare issues... 1-800-686-1578

Other types of insurance...1- 800-686-1526

Fax (614) 752-0740

TDD Phone (614) 644-3745

**For many Department services and
publication updates, please visit our web site...**

www.ohioinsurance.gov

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