

Medicare Supplement (Medigap) Plans Massachusetts 2012

Medigap Carriers (Please note that rates may change in 2012)	Medicare Supplement Core	Medicare Supplement 1
Blue Cross & Blue Shield of MA (Medex™) 1-800-678-2265 sales/apps 1-800-258-2226 member services 1-800-522-1254 (TDD) http://www.bluecrossma.com	\$95.69 \$99.48 on 1/1/12	<i>Medex Bronze</i> \$181.76 \$186.47 on 1/1/12
Fallon Health & Life Assurance Company 1-866-330-6380 sales/apps 1-800-868-5200 member services 1-877-608-7677 (TDD) http://www.fchp.org/medicare-choices	\$125.00 \$103.00 on 1/1/12	\$199.00 \$187.00 on 1/1/12
Harvard Pilgrim HC Insurance Company, Inc. 1-800-782-0334 sales / apps 1-877-907-4742 member services 1-888-259-8276 (TDD) http://www.harvardpilgrim.org	\$97.50 \$98.50 on 1/1/12	\$183.50 \$185.50 on 1/1/12
Humana Insurance Company 1-800-872-7294 sales/apps 1-800-866-0581 member services 1-800-833-3301 (TDD) http://www.humana-medicare.com	\$137.18 Effective 1/1/11	\$214.41 Effective 1/1/11
Tufts Insurance Company 1-800-714-3000 sales/apps 1-800-701-9000 member services 1-800-208-9562 (TDD) http://www.tuftsmedicarepreferred.org	\$89.87 ? on 1/1/12	\$174.72 ? on 1/1/12
United HealthCare™ Insurance Company Only for members of AARP (American Association of Retired Persons) 1-800-523-5800 http://www.aarphealthcare.com	\$129.25 Effective 6/1/11	\$211.50 Effective on 6/1/11

All plans listed above will have a continuous open enrollment in 2012

As of February 1, 2010 Bankers Life and Casualty Company's Core and Supplement plans are no longer sold in Massachusetts. Current members may remain in plan.

In compliance with Medicare regulations, Medicare Supplement 2 cannot be sold after December 31, 2005 but existing members may remain enrolled. **Medex™ Gold – \$689.19 effective 1/1/12**

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Benefit	Costs for Beneficiary under Original Medicare	Costs for Beneficiary with Supplement Core	Costs for Beneficiary with Supplement 1
Medicare Part A			
Inpatient Hospital Care			
Days 1-60	\$1,132	\$1,132	\$0
Days 61-90	\$283 / day	\$0	\$0
Days 91-150 (Lifetime Reserve)	\$566 / day	\$0	\$0
All Additional Days	full cost	\$0 for an additional 365 lifetime hospital days	\$0 for an additional 365 lifetime hospital days
Inpatient Days in Mental Health Hospital	190 lifetime days	an additional 60 days per year	an additional 120 days per benefit period
Skilled Nursing Facility Care			
Days 1-20	\$0	\$0	\$0
Days 21-100	\$141.50 / day	\$141.50 / day	\$0
All additional days	full cost	full cost	full cost
Blood - First 3 Pints	full cost	\$0	\$0
Medicare Part B			
Annual Deductible	\$162	\$162	\$0
Coinsurance for Part B after deductible	20%	\$0	\$0
Medicare-covered services needed while traveling abroad	full cost	full cost	\$0