PLEASE NOTE THAT THE BENEFITS LISTED IN THE TABLE BELOW ARE FOR 2025. AN UPDATE WILL BE PROVIDED WHEN THE 2026 BENEFITS ARE AVAILABLE

Comparison of Plans	Core	Supplement 1*	Supplement 1A	
Basic Benefits Included In All Plans:				
Hospitalization Part A Co-payments Days 61 - 90: \$408 per day Days 91-150: \$816 per day 365 Additional Lifetime Hospital days - Paid in full	X X X	X X X	X X X	
Part B Coinsurance				
Coverage of coinsurance, in most cases, 20% of approved amount	X	X	X	
Parts A and B Blood First 3 pints	X	X	X	
Additional Benefits				
Part A Deductible for Hospital Days 1 - 60 \$1,676 per benefit period		X	X	
Skilled Nursing Facility Coinsurance Days 21-100 - \$209.50 per day		X	X	
Part B Annual Deductible - \$257		X		
Foreign Travel - For Medicare-covered services needed while traveling abroad.		X	X	
Inpatient Days in Mental Health Hospitals In addition to Medicare's coverage of 190 lifetime days and less any days previously covered by plan in same benefit period	60 days per calendar year	120 days per benefit period	120 days per benefit period	

PLEASE NOTE THAT THE BENEFITS LISTED IN THE TABLE ABOVE ARE FOR 2025. AN UPDATE WILL BE PROVIDED WHEN THE 2026 BENEFITS ARE AVAILABLE

IMPORTANT NOTICE:

Medicare Supplement premium rates are required to be in effect for not less than 12 months. Effective dates shown for each Carrier are based on the most recent filing on record with the Division of Insurance.

*Only available if eligible for Medicare prior to 1/1/2020. Moving from Supplement 1 to Supplement 1A may be subject to restrictions.

Medigap Carriers Please note that some rates may change during 2026	Medicare	Medicare	Medicare
	Supplement Core	Supplement 1*	Supplement 1A
Blue Cross & Blue Shield of MA (Medex TM) ^{1,2} 1-800-678-2265 sales/apps 1-800-258-2226 member services 711 (TDD) www.bluecrossma.com (continuous open enrollment)	\$129.81	\$269.49	\$212.23
	Through 12/31/2025	Through 12/31/2025	Through 12/31/2025
	\$142.64	\$288.55	\$233.24
	Effective 01/01/2026	Effective 01/01/2026	Effective 01/01/2026
Blue Cross Optional Preventive Care Benefits Rider	\$2.62 Through 12/31/2025 \$ 2.88 Effective 01/01/2026	\$2.62 Through 12/31/2025 \$ 2.88 Effective 01/01/2026	\$2.62 Through 12/31/2025 \$ 2.88 Effective 01/01/2026
Fallon Health & Life Assurance Company 1-866-330-6380 sales/apps 1-800-868-5200 member services TRS 711 www.fallonhealth.org/medsupp (continuous open enrollment)	\$178.00 Through 12/31/2025 \$195.50 Effective 01/01/2026	298.00 Through 12/31/2025 \$327.25 Effective 01/01/2026	\$218.70 Through 12/31/2025 \$240.35 Effective 01/01/2026
HNE Insurance Company 1-877-443-3314 711 (TTY) www.healthnewengland.org (continuous open enrollment)	\$158.00	\$273.00	\$231.00
	Through 12/31/2025	Through 12/31/2025	Through 12/31/2025
	\$173.00	\$300.00	\$254.00
	Effective 01/01/2026	Effective 01/01/2026	Effective 01/01/2026
HNE Insurance Company If you received communication that your former employer has a contracted relationship with below marketplaces please call: • AON Hewitt: 800-350-1470 or visit retiree.aon.com • Towers Watson: 866-322-2824 or visit my.viabenefits.com (continuous open enrollment)	\$158.00	\$273.00	\$231.00
	Through 12/31/2025	Through 12/31/2025	Through 12/31/2025
	\$173.00	\$300.00	\$254.00
	Effective 01/01/2026	Effective 01/01/2026	Effective 01/01/2026

Medigap Carriers Please note that some rates may change during 2026	Medicare	Medicare	Medicare
	Supplement Core	Supplement 1*	Supplement 1A
HPHC Insurance Company, Inc. 1-877-906-4742 sales/apps 1-877-907-4742 member services 711 (TTY) www.hpforlife.org (continuous open enrollment)	\$161.00	\$286.50	\$231.00
	Through 12/31/2025	Through 12/31/2025	Through 12/31/2025
	\$177.00	\$315.15	\$254.00
	Effective 01/01/2026	Effective 01/01/2026	Effective 01/01/2026
Humana Benefit of Illinois, Inc. ³ 1-800-872-7294 sales/apps 1-800-866-0581 member services 1-800-833-3301 (TDD) www.humana.com (continuous open enrollment through March 31, 2026)	\$165.14 Effective 06/01/2025 See important footnote below ³	\$283.03 Effective 06/01/2025 See important footnote below ³	\$235.91 Effective 06/01/2025 See important footnote below ³
Transamerica Life Insurance Company 1-800-458-5736 (Group Medicare Supplement insurance sponsored exclusively for eligible members of the American Medical Association.) www.amainsure.com (continuous open enrollment)	\$142.92	\$247.21	\$221.50
	Through 11/30/2025	Through 11/30/2025	Through 11/30/2025
1-800-247-1771 (Group Medicare Supplement insurance sponsored exclusively for eligible members of the American Institute of Certified Public Accountants (AICPA)) https://forms.cpai.com/personal-insurance/medicare-supp/ (continuous open enrollment)	\$157.07 Effective 12/01/2025 (Note: the same rate applies for both AMA and AICPA coverage)	\$271.68 Effective 12/01/2025 (Note: the same rate applies for both AMA and AICPA coverage)	\$243.43 Effective 12/01/2025 (Note: the same rate applies for both AMA and AICPA coverage)

Medigap Carriers Please note that some rates may change during 2026	Medicare	Medicare	Medicare
	Supplement Core	Supplement 1*	Supplement 1A
Tufts Insurance Company Sales: 1-888-508-1401 Customer Relations: 1-800-701-9000 711 (TTY) www.thpmp.org/medsupp (continuous open enrollment)	\$152.50	\$269.50	\$230.50
	Through 12/31/2025	Through 12/31/2025	Through 12/31/2025
	\$167.75	\$296.45	\$253.55
	Effective 01/01/2026	Effective 01/01/2026	Effective 01/01/2026
Tufts Optional Dental Rider	\$35.00	\$35.00	\$35.00
	Through 12/31/2025	Through 12/31/2025	Through 12/31/2025
	\$38.00	\$38.00	\$38.00
	Effective 01/01/2026	Effective 01/01/2026	Effective 01/01/2026
UnitedHealthcare Insurance Company Only for members of AARP www.aarpmedicaresupplement.com 1-800-523-5800 (continuous open enrollment)	\$164.50	\$295.25	\$230.00
	Through 05/31/2025	Through 05/31/2025	Through 05/31/2025
	\$176.75	\$317.50	\$247.25
	Effective 06/01/2025	Effective 06/01/2025	Effective 06/01/2025

Updated 09/24/2025

NOTE: If new to Medicare, check with each plan to see what discounts they may offer.

In addition to the above-noted Medicare Supplemental plans, Massachusetts residents may enroll in Medicare Advantage Plans as well as Part D Prescription Drug Plans with the Centers for Medicare and Medicaid Services ("CMS"). For further information regarding these plans please visit the following website: https://www.medicare.gov/find-a-plan/questions/home.aspx

^{*}Only available if eligible for Medicare prior to 1/1/2020. Moving from Supplement 1 to Supplement 1A may be subject to restrictions.

¹Medex Choice is no longer available to new customers, but existing members may remain enrolled. The premium is \$213.03/month in 2025.

²Medigap 2 cannot be sold to new customers after December 31, 2005, but existing members may remain enrolled. Medex Gold premium is \$1,107.54/month in 2026.

³Humana Benefit of Illinois, Inc. has notified the Division that it will stop selling all of its Medicare Supplement products beginning April 1, 2026, at which time these products will no longer be available to new customers. All existing members may remain enrolled.