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	Х	
Parts A and B Blood First 3 pints	X	X	Х	
Additional Benefits				
Part A Deductible for Hospital Days 1 - 60		Х	Х	
\$1,676 per benefit period				
Skilled Nursing Facility Coinsurance Days 21-100 - \$209.50 per day		Х	Х	
Part B Annual Deductible - \$257		Х		
Foreign Travel - For Medicare-covered services needed while traveling abroad.		Х	Х	
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	

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.

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Medigap Carriers Please note that some rates may change during 2024	Medicare Supplement Core	Medicare Supplement 1*	Medicare Supplement 1A
Blue Cross & Blue Shield of MA (Medex [™]) ^{1,2} 1-800-678-2265 sales/apps 1-800-258-2226 member services 711 (TDD) www.bluecrossma.com (continuous open enrollment)	\$129.93 Effective 01/01/2025	\$262.49 Effective 01/01/2025	\$211.21 Effective 01/01/2025
Blue Cross Optional Preventive	\$ 2.62	\$ 2.62	\$ 2.62
Care Benefits Rider	Effective 01/01/2025	Effective 01/01/2025	Effective 01/01/2025
Fallon Health & Life AssuranceCompany1-866-330-6380 sales/apps1-800-868-5200 member servicesTRS 711www.fallonhealth.org/medsupp(continuous open enrollment)	\$178.00	\$298.00	\$218.70
	Effective 01/01/2025	Effective 01/01/2025	Effective 01/01/2025
HNE Insurance Company 1-877-443-3314 711 (TTY) www.healthnewengland.org (continuous open enrollment)	\$158.00 Effective 01/01/2025	\$273.00 Effective 01/01/2025	\$231.00 Effective 01/01/2025
 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
	Effective 01/01/2025	Effective 01/01/2025	Effective 01/01/2025

Medigap Carriers Please note that some rates may change during 2023	Medicare Supplement Core	Medicare Supplement 1*	Medicare Supplement 1A
HPHC Insurance Company, Inc. ³ 1-877-909-4742 sales/apps 1-877-907-4742 member services 711 (TTY) www.hpforlife.org (continuous open enrollment)	\$161.00 Effective 01/01/2025	\$286.50 Effective 01/01/2025	\$231.00 Effective 01/01/2025
Humana Benefit of Illinois, Inc. 1-800-872-7294 sales/apps 1-800-866-0581 member services 1-800-833-3301 (TDD) www.humana.com (continuous open enrollment)	\$165.14 Effective 06/01/2025	\$283.03 Effective 06/01/2025	\$235.91 Effective 06/01/2025
Transamerica Life InsuranceCompany1-800-458-5736(Group Medicare Supplement insurancesponsored exclusively for eligible members ofthe American Medical Association.)www.amainsure.com(continuous open enrollment)1-800-247-1771(Group Medicare Supplement insurancesponsored exclusively for eligible members ofthe American Institute of Certified PublicAccountants (AICPA))https://forms.cpai.com/personal-insurance/medicare-supp/(continuous open enrollment)	\$135.63 Effective 09/01/2024	\$247.96 Effective 09/01/2024	\$222.17 Effective 09/01/2024

Medigap Carriers Please note that some rates may change during 2024	Medicare Supplement Core	Medicare Supplement 1*	Medicare Supplement 1A
Tufts Insurance CompanySales: 1-888-508-1401Customer Relations:1-800-701-9000711 (TTY)www.thpmp.org/medsupp(continuous open enrollment)	\$152.50	\$269.50	\$230.50
	Effective 01/01/2025	Effective 01/01/2025	Effective 01/01/2025
Tufts Optional Dental Rider	\$35.00	\$35.00	\$35.00
	Effective 01/01/2025	Effective 01/01/2025	Effective 01/01/2025
UnitedHealthcare Insurance Company Only for members of AARP www.aarpmedicaresupplement.com 1-800-523-5800 (continuous open enrollment)	\$176.75 Effective 06/01/2025	\$317.50 Effective 06/01/2025	\$247.25 Effective 06/01/2025

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

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

¹Medex Choice is no longer available to new customers, but existing members may remain enrolled. The premium is \$193.88/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 \$1,008.16/month in 2025.

³HPHC Insurance Company Medigap plans will continue to be offered in 2025, <u>but enrollment</u> must be done by calling the plan directly.

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: <u>https://www.medicare.gov/find-a-plan/questions/home.aspx</u>