## **Summary of High Option Benefits**

## Medicare Supplement Part A Benefits - High Option Monthly Premium \$235.67

Benefit Amount Payable

Hospital Confinement Day of Confinement

1<sup>st</sup> to 60<sup>th</sup> day Medicare Part A Deductible

61<sup>st</sup> to 90<sup>th</sup> day

Lifetime Reserve Period

After Lifetime Reserve Period

Daily Coinsurance Charge (25% of Part A Deductible per day)

Daily Coinsurance Charge (50% of Part A Deductible per day)

100% of Hospital Expenses for an additional 365 days per

person per Lifetime

Skilled Nursing Facility
<a href="Day of Confinement">Day of Confinement</a>

1<sup>st</sup> to 20<sup>th</sup> Day Nothing

21<sup>st</sup> to 100<sup>th</sup> Day Daily Coinsurance Charge (12 ½ % of Part A Deductible per day)

101st to 365th Day Room and Board Charges up to \$75 a day

## **Medicare Supplement Part B Benefits – High Option**

Benefit Amount Payable

Medical Care 20% of Medicare Eligible Expenses

Expenses That Are More Than Medicare Considers

Reasonable The difference between the Usual and Customary Charge and the

Medicare Eligible Expense after the Out-Of-Pocket Expense Amount

Out-Of-Pocket Expense Amount - \$500.00

Additional Medicare Supplement Benefits – High Option – See Back of Form

## Additional Medicare Supplement Benefits - High Option

Benefit Amount Payable

Hospice Care Medicare Coinsurance Charges for prescription drugs and in-patient

respite care

Medicare Part B Deductible Medicare Part B Deductible

Blood Deductible First 3 pints of blood under Medicare Part A and Medicare Part B

Foreign Medical Treatment 100% of Foreign Medical Treatment expenses up to 90 days; first

expense must be Incurred within first 180 days of Covered Person's

Traveling Outside the United States per Calendar Year

In-Hospital Private Duty Nursing Maximum Benefit Amount: Costs up to \$30 per 8-hour shift

Maximum Number of Shifts: 60 Shifts per Calendar Year