

Medigap Benefits	Medigap Plans										
	A	B	C	D	F*	G	K	L		M	N
Part A coinsurance and hospital costs up to an additional 365 days after Medicare benefits are used up	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes		Yes	Yes
Part B coinsurance or copayment	Yes	Yes	Yes	Yes	Yes	Yes	50%	75%		Yes	Yes***
Blood (first 3 pints)	Yes	Yes	Yes	Yes	Yes	Yes	50%	75%		Yes	Yes
Part A hospice care coinsurance or copayment	Yes	Yes	Yes	Yes	Yes	Yes	50%	75%		Yes	Yes
Skilled nursing facility care coinsurance	No	No	Yes	Yes	Yes	Yes	50%	75%		Yes	Yes
Part A deductible	No	Yes	Yes	Yes	Yes	Yes	50%	75%		50%	Yes
Part B deductible	No	No	Yes	No	Yes	No	No	No		No	No
Part B <u>excess charge</u>	No	No	No	No	Yes	Yes	No	No		No	No
Foreign travel exchange (up to plan limits)	No	No	80%	80%	80%	80%	No	No		80%	80%
Out-of-pocket limit**	N/A	N/A	N/A	N/A	N/A	N/A	\$5,120	\$2,560		N/A	N/A