

Medigap Plan N



2021 Benefit Details

Basic Costs	
Part A Inpatient Hospital Deductible	\$0
Annual Part B Deductible	\$203
Out of Pocket Maximum	N/A
Part B Excess Charges	Not Covered

Doctor Visits	
Primary Care Visits	Up to \$20 Copay
Specialist Visits	Up to \$20 Copay
Referral to Specialist Required?	No
Provider Network Required?	No
Preventive Services	\$0 for Medicare covered services

Urgent/Emergency Care	
Urgent Care	\$0
Emergency Care	Up to \$50 Copay
Ground Ambulance Services	\$0
Air Ambulance Services	\$0
Foreign Travel Emergency	\$250 Annual Deductible then 20% (\$50,000 Lifetime Max)

Hospitalization & Skilled Nursing Facility Care	
Inpatient Hospital Care+	For Days 1-60: \$0; For Days 61-90: \$0; For Days 91+: Varies**
Skilled Nursing Facility+	For Days 1-100: \$0 For Days 101+: All Costs

Outpatient Care	
Ambulatory Surgical Center	\$0
Outpatient Hospital Services	\$0
Mental Health - Outpatient	\$0

X-Ray Services	
Lab Services	\$0
Diagnostic Radiology Services	\$0
Outpatient X-Rays	\$0
Durable Medical Equipment	\$0

** You pay \$0 until you exhaust your 60 hospitalization reserve days from your Medicare Part B coverage; your Medigap insurance then steps in to cover the next 365 days; after this, you pay all costs.

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