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| **Standard Medicare Supplement Benefits**  Medicare Supplement insurance can be sold in only ten standard plans. The chart below shows the benefits included in each plan.  **Basic Benefits** are included in all plans. They include:   * **Hospitalization**, Part A coinsurance plus coverage for 365 additional days during your lifetime after Medicare benefits end. * **Medical Expenses**, Part B coinsurance generally (20% of Medicare approved expenses). * **Blood**, first three pints of blood each year. * **Hospice Care**, Covers Part A Coinsurance year.  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **A** | **B** | **C** | **D** | **F\*** | **G** | **K** | **L** | **M** | **N** | | Basic Benefits | Basic Benefits | Basic Benefits | Basic Benefits | Basic Benefits | Basic Benefits | Basic Benefits | Basic Benefits | Basic Benefits | Basic Benefits\*\*\* | |  |  | Skilled Nursing Coinsurance (100%) | Skilled Nursing Coinsurance (100%) | Skilled Nursing Coinsurance (100%) | Skilled Nursing Coinsurance (100%) | Skilled Nursing Coinsurance (50%) | Skilled Nursing Coinsurance (75%) | Skilled Nursing Coinsurance (100%) | Skilled Nursing Coinsurance (100%) | |  | Part A Deductible (100%) | Part A Deductible (100%) | Part A Deductible (100%) | Part A Deductible (100%) | Part A Deductible (100%) | Part A Deductible (50%) | Part A Deductible (75%) | Part A Deductible (50%) | Part A Deductible (100%) | |  |  | Part B Deductible |  | Part B Deductible |  |  |  |  |  | |  |  |  |  | Part B Excess | Part B Excess |  |  |  |  | |  |  | Foreign Travel Emergency | Foreign Travel Emergency | Foreign Travel Emergency | Foreign Travel Emergency |  |  | Foreign Travel Emergency | Foreign Travel Emergency | |  |  |  |  |  |  | $4,640 Out-of-Pocket Limit\*\* | $2,320 Out-of-Pocket Limit\*\* |  |  |   *\* Plan F also has a high deductible option; some companies may offer this option.*  *\*\* Plans K & L pay 100% of covered services for the rest of the calendar year after you meet your out-of-pocket yearly limit.*  *\*\*\* Plan N pays 100% of the Part B coinsurance, except for a copayment of up to $20 for some office visits and up to a $50 copayment for emergency room visits that don't result in an inpatient admission.* |