

2025 Medigap plan benefits For plans sold on or after June 1, 2010

	Α	В	С	D	F*	G*	K**	L**	м	N
Hospital coinsurance Coinsurance for days 61-90 (\$419) and days 91-150 (\$838) in hospital; Pay- ment in full for 365 additional lifetime days	•	•	•	•	•	•	•	•	•	•
Part B coinsurance Coinsurance for Part B services, such as doctors' services, laboratory and x-ray services, durable medical equipment, and hospital outpatient services	•	•	•	•	•	•	50%	75%	•	Except \$20 for doctors visits and \$50 for emergency visits
First three pints of blood	•	•	•	•	•	•	50%	75%	•	•
Hospital deductible Covers \$1,676 in each benefit period		•	•	•	•	•	50%	75%	50%	•
Skilled nursing facility (SNF) daily coinsurance Covers \$209.50 a day for days 21-100 each benefit period			•	•	•	•	50%	75%	•	•
Part B annual deductible Covers \$257 (Part B deductible)			•		•					
Part B excess charges benefits 100% of Part B excess charges. (Under federal law, the excess limit is 15% more than Medicare's approved charge when provider does not take assignment; under New York State law, the excess limit is 5% for most services)					•	•				
Emergency care outside the U.S. 80% of emergency care costs during the first 60 days of each trip, after an annual deductible of \$250, up to a maximum lifetime benefit of \$50,000.			•	•	•	•			•	•
100% of coinsurance for Part B- covered preventive care services after the Part B deductible has been paid	•	•	•	•	•	•	•	•	•	•
Hospice care Coinsurance for respite care and other Part A-covered services	•	•	•	•	•	•	50%	75%	•	

Note: Plans C and F are only available to you if you became eligible for Medicare before January 1, 2020.

* Plans F & G also offer a high-deductible option. You pay a \$2,870 deductible in 2025 before Medigap coverage starts. ** Plans K and L pay 100% of your Part A and Part B copays after you spend a certain amount out of pocket. The 2025 out-of-pocket maximum is \$7,220 for Plan K and \$3,610 for Plan L.

Plans E, H, I, and J stopped being sold June 1, 2010. If you bought a Medigap between July 31, 1992 and June 1, 2010, you can keep it even if it's not being sold anymore. Your benefits are different from what's on the chart above.

This chart doesn't apply to Massachusetts, Minnesota and Wisconsin. Those states have their own Medigap systems.

Helpline: 800-333-4114

GO TO: hpps://myportal.dfs.ny.gov/web/guest-applications/medicare-monthly-premiums (July, 1, 2025) All of Westchester County localities will come out the same. Check for changes each month. The amounts in the chart are PER MONTH and of course, PER PERSON.

Careful: these prices might not match the audio discussion, as prices may Enter your zipcode. change from month to month. Use the link above for today's prices. (This is Ardsley's) 10502 Zip Code: Search County: Westchester Plan Plan Insurer Plan A Plan B Plan C Plan D Plan F Plan G Plan K Plan L Plan M HDF HDG Aetna Life \$318.21 \$362.44 \$422.90 \$406.26 Insurance Bankers \$897.73 \$413.53 \$664.86 \$75.69 \$826.24 \$75.69 \$137.69 \$322.45 \$446.64 Conseco EmblemHealth \$213.79 \$355.60 \$303.93 \$636.35 \$74.00 \$362.40 \$67.69 Plan Globe Life \$267.00 \$358.00 \$391.00 \$453.00 \$366.00 \$139.00 \$248.00 \$397.00 \$109.00 \$72.00 Insurance \$528.79 \$539.53 \$118.44 \$647.27 Humana \$348.00 \$392.90 \$111.19 \$226.75 \$323.93 Mutual of \$351.72 \$512.25 \$512.82 \$539.03 \$516.15 \$511.36 \$526.10 Omaha Transamerica \$276.61 \$333.52 \$432.10 \$397.06 \$434.61 \$364.62 \$199.01 \$295.41 \$363.76 Financial United Healthcare \$209.00 \$303.00 \$415.50 \$394.00 \$326.75 \$106.75 \$216.25 (AARP Program)

Plan N

\$514.82

\$264.00

\$359.00

\$430.95

\$342.06

\$262.25

★ Plans HDF and HDG: With these options, you must pay for Medicare-covered costs (coinsurance, copayments, and deductibles) up to the deductible amount of \$2,870 in 2025 before your policy pays anything. Plans C and F are not available to people who became newly eligible for Medicare on or after January 1, 2020.