

Why choose an AARP Medicare Supplement Plan?



Plan variety.

The wide variety of plans means you may choose the one that best fits your needs.



Value-Added Services.

Access to health and wellness resources, discounts, and support services available to plan holders, at no additional cost to you.*



Highly recommended.

9 out of 10 plan holders surveyed would recommend their plan to a friend or family member.⁷



AARP endorsement.

The only Medicare Supplement plans endorsed by AARP.

***These are additional insured member services apart from the AARP Medicare Supplement Plan benefits, are not insurance programs, are subject to geographical availability, and may be discontinued at any time.**

Learn more today.

Joe Fracchia
901-488-8150

Licensed Insurance Agent
Contracted with UnitedHealthcare
Insurance Company

Find the AARP Medicare Supplement Plan that's right for you.

Description of service	G	N	L	K	B	A	F ¹	C ¹
Medicare Part A Coinsurance and Hospital Costs (up to an additional 365 days after Medicare benefits are used)	✓	✓	✓	✓	✓	✓	✓	✓
Medicare Part A Deductible	✓	✓	75%	50%	✓		✓	✓
Medicare Part B Coinsurance or Copayment	✓	Copay ²	75% ³	50% ³	✓	✓	✓	✓
Medicare Part B Deductible							✓	✓
Medicare Part B Excess Charges ⁴	✓						✓	
Blood (first three pints)	✓	✓	75%	50%	✓	✓	✓	✓
Foreign Travel Emergency (up to plan limit) ⁵	80%	80%					80%	80%
Hospice Care Coinsurance or Copayment	✓	✓	75%	50%	✓	✓	✓	✓
Skilled Nursing Facility Coinsurance	✓	✓	75%	50%			✓	✓
2019 Out-of-Pocket Limit (Plans L and K only) ⁶			\$2,780	\$5,560				

Benefits and costs vary depending on the plan chosen.

¹NOTE: IMPORTANT: Plans C and F are only available to eligible Applicants (a) with a 65th birthday prior to 1/1/2020 or (b) with a Medicare Part A effective date prior to 1/1/2020. Please call a licensed insurance agent if you have any questions.

²Plan 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.

³EXCEPTION: Plans K and L will pay 100% of Part B co-insurance for preventive services covered by Medicare.

⁴NOTE: Under Ohio and Pennsylvania law, a physician may not charge or collect fees from Medicare patients which exceed the Medicare-approved Part B charge. Plans F and G pay benefits for excess charges when services are rendered in a jurisdiction not having a balance billing law.

⁵Beneficiaries must pay a separate deductible for a foreign travel emergency (\$250 per year). Benefit is 80% and beneficiaries are responsible for 20% after the \$250 annual deductible with a \$50,000 lifetime maximum for medically necessary emergency care received outside the U.S. during the first 60 days of each trip.

⁶The plan pays 100% of covered services for the rest of the calendar year once beneficiaries have paid the out-of-pocket annual limit and annual Part B deductible (\$185 in 2019).

⁷From a report prepared for UnitedHealthcare Insurance Company by GfK Custom Research NA "Medicare Supplement Plan Satisfaction Posted Questionnaire," March 2017, www.uhcmcdsupstats.com or call 1-800-523-5800 to request a copy of the full report.

Plans vary by state; Medicare Select plans are available in some states.

Chart reflects 2019 data.