**Getting started with Medicare: Medicare supplement flow chart**

* Medicare supplement plans cover services approved by Original Medicare. Supplements will cover some or all of the unpaid costs from Medicare. There is no need to fill out or submit any type of claim forms and the process is automatic.
* Medicare Supplements, regardless of the company, do NOT have networks. You can go to any doctor, hospital or other medical provider that participates with Original Medicare.
* Medicare supplement plans are standardized in all but 4 states. This means if a company is offering a plan N supplement, they must have the same benefits as every other company offering a plan N supplement. Benefits must be the same. The only difference is the price.
* If you have a service that is not approved by Medicare, the Medicare Supplement will not approve it or pay anything towards it either.
* Keep in mind that Medicare services are negotiated. When you pay a 20% cost share with Medicare, you are paying 20% of the negotiated rate. The negotiated rate is substantially less than the provider charges.
* Medicare Supplements are also called Medigap plans. They do not provide Rx coverage.
* There are a number of supplements from A through plan N. We are not going to outline all of them here but will show the ones we feel are the best values for consumers.
* Medicare supplement Plan F- Plan F covers 100% of charges approved by not covered in full by Medicare. The plan F is one of the most expensive plans but you have not out of pocket costs for medical services. New members will no longer be able to enroll in Plan F after 1-1-2020. Those in the plan F already may stay in it.
* Medicare supplement Plan G- Plan G covers 100% like a plan F with one exception. It does not cover the first $183 of Medical Care. This is called a Deductible. Once the annual deductible is met the plan is the same as a plan F
* Medicare supplement plan N- Plan N covers like a plan F but with 3 exceptions.
	+ They do not cover the annual $183 part D deductible
	+ You pay $50 for an Emergency room visit
	+ Any doctor (primary or specialist) can bill you up to $20
* Medicare supplement plan L- Plan L is not as easy to explain but is a very good plan if the monthly price point is right. A plan L does not cover foreign travel emergency like the plans F, G and N do. Like plans G and N you will pay the part B deductible. All other charges will be covered at 75%. This would leave you paying about $335 of the inpatient hospital deductible and 5% of the cost of outpatient visits and services. You would be paying 5% of the Medicare rate which will leave you paying very small amounts for services. The 2018 out of pocket max for plan L is $2,620
* Medicare Supplement Plan K- Plan K is the same as plan L but it costs less per month and it covers 50% instead of 75%. This means you pay a 10% cost share for outpatient services and half of the inpatient hospital deductible which would be $670. The out of pocket max for Plan K is $5,240 for 2018
* Medicare Supplement high deductible F- High F is a very good plan but difficult to understand. With this plan you pay the 20% Medicare cost share. As we have outlined, after the price discounting the 20% does not usually add up to much. Anyway, you pay the 20% and any other cost shares with Medicare A and B until you hit a max out of pocket of $2,240 for 2018. After that you are covered in full just like a normal plan F. Most people will not meet the deductible in a given year. The high F plan also has very low monthly premiums and can be a great choice for those that understand how it works.