



Underwritten by

Omaha Insurance Company

A Mutual of Omaha Company

420266_MN_B Minnesota

Selecting the right Medicare supplement plan can be confusing. We're here to give you the confidence boost you need. We'll start by getting to know you. We'll uncover your needs and talk about what you want out of life. And together, we'll create the Medicare supplement coverage that's perfect for you.

What a Medicare Supplement Can Do for You

With a Medicare supplement insurance policy, even unexpected medical events aren't likely to impact your financial wellbeing. While Medicare covers a good portion of your health care expenses, you still have out-of-pocket costs, like deductibles, copayments and coinsurance. See how a Medicare supplement insurance policy can help to pay these costs.

Medicare Part A



Medicare Part A provides coverage for hospital inpatient care, recovery care in a skilled nursing facility, hospice care and limited home health care.

Your out-of-pocket costs include the Medicare Part A benefit-period deductible and coinsurance for the services you receive.



Medicare Part B

Medical Insurance

Medicare Part B covers medically necessary and preventive services provided by doctors and other health care providers.

Your out-of-pocket costs include the Medicare Part B calendar-year deductible, coinsurance for services you receive and any charges that exceed the Medicare-approved amount.



Medicare Supplement Insurance

Pays What Medicare Doesn't



Adding a Medicare supplement insurance policy can help by paying some of the out-of-pocket expenses not paid by Medicare Part A and Medicare Part B. And, you can be confident that as these costs increase, your Medicare supplement insurance policy benefits also increase to help you pay your share of Medicare expenses.

How Your Medicare Supplement Works

Your Medicare supplement insurance policy works with Medicare Parts A and B to minimize your share of health care costs. When you receive a covered service, your health care provider bills Medicare. After Medicare pays its share, your Medicare supplement insurance policy pays based on the coverage you select. The entire process is electronic, so your claims are paid quickly.

Your Choices

A Minnesota Basic Medicare Supplement Plan offers you optional benefit riders to help pay additional costs. You have the flexibility to choose the best coverage for your needs and budget.

Medicare Part A Hospital Deductible

Rider ONR3F

Medicare Part B Medical Deductible

Rider ONR4F

This rider is only available to individuals who become eligible for Medicare prior to January 1, 2020.

Part B Medical Excess Charges

Rider ONR6F

Preventive Medical Care

Rider ONR5F

See page 6 for complete benefit information.





Plan Highlights

Our Medicare supplement plan offers these features:

No Waiting Period

You're covered immediately – no waiting period for pre-existing conditions*. You're eligible to receive benefits as soon as your policy becomes effective.

Your Choice of Doctor

Any health care provider who accepts Medicare patients accepts our Medicare supplement insurance. You won't have to find a network provider or get referrals to see specialists.

Caring Customer Service

Our service sets us apart. You always receive friendly, knowledgeable assistance from our U.S.-based customer care team.

No Claims to File or Bills to Pay

Your health care provider bills Medicare, so there are no claims for you to file. And payment is seamless so you rarely see a bill.

Automatic Renewal

You're covered as long as you pay your premiums on time. What's more, the annual Medicare Open Enrollment Period and the Affordable Care Act Open Enrollment Period don't affect your Medicare supplement insurance.

Coast-to-Coast Coverage

Just like Medicare, your Medicare supplement insurance goes with you anywhere in the United States. So, you're free to visit family and friends or live wherever you choose.

Worldwide Emergency Care

Our Medicare supplement plan provides limited medically necessary emergency care outside the United States.

^{*}A pre-existing condition is a condition for which medical advice or treatment was recommended by or received from a health care services provider within six months before your coverage effective date.

Plan Details

See how our Medicare supplement policy works with Medicare to cover most of your out-of-pocket expenses. Consider adding optional riders to create the coverage which is the best fit for you. Refer to page 6 and the Outline of Coverage for more information.

	Medicare Pays	Basic Medicare Supplement Insurance Pays
Medicare Part A Hospital Insurance		
Deductible	\$0	\$O
First 60 days	100%	\$0
Coinsurance 61-90 days	All but \$371 a day	\$371 a day
Coinsurance 91-150 days	All but \$742 a day	\$742 a day
Extended Hospital Coverage (up to an additional 365 days in your lifetime)	\$0	Eligible expenses
Benefit for Blood	All but 3 pints	3 pints
Skilled Nursing Facility First 20 Days	100%	\$O
Skilled Nursing Facility 21-100 days	All but \$185.50 a day	Up to \$185.50 a day
Hospice Outpatient Prescription Drugs	All but \$5	\$5
Hospice Inpatient Respite Care	All but 5%	5% of Medicare's approved amount
Medicare Part B Medical Insurance		
Deductible	\$0	\$0
Coinsurance	80%	Generally 20%
Benefit for Blood	All but 3 pints	3 pints
Medicare Supplement Insurance Optional Benefit Riders		
Part A Deductible Rider ONR3F	\$0	\$1,484
Part B Deductible Rider ONR4F	\$0	\$203 This rider is only available to individuals who become eligible for Medicare prior to January 1, 2020.
Part B Excess Charges Rider ONR6F	\$0	100% of the difference between the actual charge and the limiting charge
Preventive Medical Care Rider ONR5F	\$0	Up to \$120 a year
Your Premium		\$

Policy Benefits Explained

Medicare Part A - Hospital Insurance

Coinsurance

This is the amount you may be required to pay as your share of the cost for hospital services after you have paid your Part A deductible. Medicare pays 100 percent of Part A coinsurance for the first 60 days of inpatient hospital care plus a portion of the coinsurance for days 61 through 150. Your plan pays the remaining Part A coinsurance amount.

Extended Hospital Coverage

Should you need to be hospitalized longer than 150 days during a benefit period, and you've exhausted your 60 Medicare Lifetime Reserve Days, your plan will pay eligible expenses at the rate Medicare would have paid, subject to a lifetime maximum benefit of an additional 365 days.

Benefit for Blood

Medicare pays for blood, excluding a calendar-year deductible equal to the cost of the first 3 pints. Your plan pays the cost for the first 3 pints.

Skilled Nursing Facility Care

Medicare pays 100 percent for the first 20 days in a skilled nursing facility that follow a hospitalization of at least 3 days and all but a portion of the cost or days 21-100. Your plan pays the remaining coinsurance amount.

Hospice Care

Medicare pays all but \$5 of the cost for each outpatient prescription drug used in a hospice setting for pain and symptom management. In addition, Medicare pays all but 5 percent of the cost for short-term hospice care given by another caregiver to provide a break for the usual caregiver. Your plan pays the rest.

Medicare Part B - Medical Insurance

Coinsurance

This is the amount you may be required to pay as your share of the cost for doctor visits after you have paid your Part B deductible. Medicare pays 80 percent of eligible expenses. Your plan pays the remaining coinsurance amount.

For hospital outpatient services, the copayment amount will be paid under a prospective payment system. If this system is not used, then 20 percent of eligible expenses will be paid.

Benefit for Blood

Medicare pays for blood, excluding a calendar-year deductible equal to the cost of the first 3 pints. Your plan pays the cost for the first 3 pints.

Additional Benefits

Your Medicare supplement insurance policy – Pays some expenses not paid for by Medicare, or paid under any other part of this policy, for home health care services, medical emergency care outside the U.S., alcoholism, chemical dependency or drug addiction treatment, scalp hair prostheses, phenylketonuria, diabetes equipment and supplies not covered under Medicare Part D, routine prostate cancer screening, routine screening procedures for cancer, temporomandibular join disorder and craniomandibular disorder, reconstructive surgery, surgical center services and immunizations. See your outline of coverage for specific benefits and limitations.

Optional Benefits

Part A Deductible Rider (ONR3F)

Pays the inpatient hospital deductible for each benefit period.

Part B Deductible Rider (ONR4F)

Pays the Medicare Part B medical annual deductible. This rider is only available to individuals who become eligible for Medicare prior to January 1, 2020.

Part B Excess Charges Rider (ONR6F)

Your bill for Medicare Part B services and supplies may exceed the Medicare eligible expense. When that occurs, the rider pays 100% of the difference, up to the charge limitation established by Medicare.

Preventive Medical Care Rider (ONR5F)

Pays up to \$120 a year for covered preventive screening tests and services and an annual physical examination.

Why Mutual of Omaha

For more than a century, Mutual of Omaha has been committed to listening to our customers and helping them through life's transitions by providing an array of insurance and financial products.

MutualofOmaha.com

Medicare supplement insurance is underwritten by Omaha Insurance Company, 3300 Mutual of Omaha Plaza, Omaha, NE 68175.

This is a Basic Medicare supplement insurance policy as defined by the State of Minnesota.

You have 31 days from your renewal date to pay your premium, otherwise your policy will lapse. Your policy will stay in force during this 31-day grace period.

You can't be singled out for a rate increase, no matter how many times you receive benefits. Your premium changes when the same premium change is made on all in-force Medicare supplement insurance policies of the same form issued to persons of your classification in the same geographic area of your state.

This Medicare supplement insurance does not pay for:

- Any expense incurred before your policy date
- Expenses paid by Medicare
- Non-Medicare-eligible expenses, including, but not limited to, routine exams, take-home drugs, and eye refractions, this does not include any state mandated benefits for routine exams as state in the policy
- Services for which no charge is made when there is no insurance

This is a brief description of coverage. The outline of coverage must accompany this brochure. For complete information on benefits, exceptions and limitations, please read your outline of coverage and your policy. You also may contact your agent or call toll-free 800-228-7104.

This is a solicitation of insurance and an insurance agent will contact you by telephone.

Not connected with or endorsed by the U.S. government or the federal Medicare program.

In some states, Medicare supplement policies are available to those eligible for Medicare due to a disability, regardless of age.

