**[REMOVE PRIOR TO SENDING: Tab I]**

**What You Should Know About Medigap- Wisconsin**

A Medigap policy (also called Medicare Supplement Insurance) is private health insurance that supplements Original Medicare. This means it helps pay some of the costs (“gaps”) that Original Medicare doesn’t cover (like copayments, coinsurance, and deductibles). If you have Original Medicare and a Medigap policy, Medicare will pay its share for covered health care costs then your Medigap policy pays its share.

Medigap coverage is different from your <plan name> coverage. Medigap policies only help pay if you are in Original Medicare. You don’t need a Medigap policy if you’re in a Medicare health plan.

In Wisconsin, there are five Medigap policies: a Basic Medicare Supplement Plan (with optional riders\*), two cost-sharing plans (Plans K and L), a Medicare Select Plan and a high-deductible plan. Insurance companies can charge different premiums for the same policies, so be sure to compare.

**Your Right to Buy a Medigap Policy**

You’re losing coverage under <Plan Name>, so you have special rights to buy a Medigap policy. These rights are called “Medigap protections” or “guaranteed issue rights.” When you have guaranteed issue rights, the insurance company must sell you a policy, must cover pre-existing conditions, and can’t charge you more because of any health problems.

**Make sure you keep a copy of the letter that says your coverage is ending. Because your coverage under our plan ends December 31, 2024, you must buy a Medigap policy no later than March 4, 2025. If you leave our plan before December 31, 2024, you have 63 calendar days from the day your coverage ends to buy a Medigap policy.**

You may buy a Basic Medicare Supplement Plan with optional riders, Plan K or Plan L, a Medicare Select Plan, or the high-deductible plan. You may also have the right to buy a Medigap policy in these situations:

* If you first got Medicare Part B in the last 6 months.
* If you were initially enrolled in Part B based on disability before turning 65, and you turned 65 within the past 6 months.
* You joined a Medicare Advantage plan or Medicare Cost Plan for the first time, or Programs of All-Inclusive Care for the Elderly (PACE) when you were first eligible for Medicare Part A at 65, and within the first 12 months (in some cases 24 months) of joining, you decide you want to switch to Original Medicare.
* You dropped a Medigap policy to join a Medicare Advantage plan (or to switch to a Medicare SELECT policy) for the first time, you have been in the plan less than a year, and you want to switch back.

**You Can Buy a Medigap Policy Now**

If you want to buy a Medigap policy, follow these steps:

1. Call <Name of SHIP> to learn more about which policies are available.
2. Contact the company that sells the Medigap policy and ask for an application.
3. Fill out the application and make a copy of the letter that came with this mailing. It will prove that you have special rights to buy a Medigap policy.
4. Mail the application and a copy of the letter to the Medigap insurance company.

**Get Help Comparing Your Options**

<*plans opting to notify enrollees of alternative enrollment options through outbound calls should include the following language:* <Plan Name> will call you to explain how you can get help comparing plans. You can also:>

* **Call <Name of SHIP> at <SHIP Phone> or TTY: <TTY number>, <days and hours of operation>.** Counselors are available to answer your questions, discuss your needs, and give you information about your options and Medigap policies. All counseling is **free**.
* **Visit** [**Medicare.gov**](http://www.medicare.gov)**.** Click on “Find a Medicare Supplement Insurance (Medigap) policy” for information on Medigap policies and tools that can help you find plans available in your area. **Call 1-800-MEDICARE (1-800-633-4227).** This toll-free help line is available 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

<*plans opting to notify enrollees of alternative enrollment options through written description should include the following language:* You may also refer to the attached list of all Medicare health and prescription drug plans in your area.> If you want to join one of these plans, call the plan to get information about their costs, rules, and coverage.

You can get this information for free in other formats, such as large print, braille, or audio. Call <toll free number>. The call is free.

“ATTENTION: If you speak [insert language], language assistance services, free of charge, are available to you. Call 1-XXX-XXX-XXXX (TTY: 1-XXX-XXX-XXXX).”

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