



Our company and agents/producers are not connected with or endorsed by the U.S. Government or the Federal Medicare program. This is a solicitation for insurance. An insurance agent/producer may contact you.

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Gain more peace of mind.

With Cigna Healthcare® Medicare Supplement Insurance, you can live more and worry less. You'll benefit from all of the standardized plan features, plus you'll enjoy the service and support from a dedicated team that's committed to your health, well-being and sense of security.

More people. More savings

You may be eligible for a discount if someone in the household has, or is enrolling in, a Medicare Supplement plan provided by Medco Containment Life Insurance Company.

Service you can count on

Our knowledgeable representatives aim to provide fast, friendly service at all times. Our claims team also works hard for you behind the scenes. Medicare Part A and Part B claims are managed electronically, which eliminates paperwork for you and your health care provider.

Access to benefit information

You can access your benefit and claims information online. Set up payments, print a temporary ID card, update your contact information – anytime, anywhere.

Medicare guarantees

Freedom to choose your doctors

You can use any provider who accepts Medicare. There are no provider networks and, typically, referrals are not required. Go to the doctors you know and trust.

Renew your policy for life²

Your policy is guaranteed to be renewed if premiums are paid on time. And you cannot be singled out for a rate increase based on your health, no matter if your health changes.

- 1. We may request additional documentation to determine eligibility.
- 2. Your policy cannot be terminated for any reason other than non-payment of premium or material misrepresentation in the application for insurance. The company reserves the right to increase premiums on a class basis. Applicants may be subject to medical underwriting and coverage may be rated or denied, or charged a higher plan premium because of any preexisting conditions. This does not apply to applicants who meet Open Enrollment or guaranteed issue requirements. You may cancel this policy at any time by notifying us. Your cancellation will be effective upon receipt of your notice or on such later date as specified in such notice. Cancellation will be without prejudice to any claim originating prior to the effective date of cancellation.

Policy benefits

Available to those Medicare eligible before 1/1/2020.

Cigna Healthcare Medicare Supplement plan coverage³ Plan A Plan G Plan N Plan F4 **Medicare Part A deductible** Inpatient hospital deductible for each benefit period.5 **Medicare Part A coinsurance (after Part A deductible)** Semi-private room and board, general nursing, and miscellaneous services and supplies (per benefit period).⁵ Includes hospital costs limited to an additional 365 days in your lifetime after Medicare benefits are used up. **Medicare Part A Hospice Care coinsurance or copay** Medicare pays for hospice care; however, this benefit covers the copay/coinsurance that is required for outpatient prescription and inpatient respite care. You must meet Medicare's requirements, including a doctor's certification of terminal illness. **Skilled Nursing Facility Care coinsurance** Care in a facility approved by Medicare (100-day limit). Must have been in a hospital for at least three days and have entered the facility within 30 days after discharge from hospital. Medicare covers all eligible expenses for the first 20 days. **Medicare Part B calendar-year deductible Medicare Part B coinsurance or copay (after Part B deductible)** Generally 20% of Medicare-approved expenses. **Medicare Part B excess charges** May exceed the eligible Medicare expense, not to exceed the charge limitation established by Medicare. **Blood** First three pints per calendar year covered at 100%. Remainder of Medicareapproved amounts (after the Part B deductible has been met) covered at 20%. Plan F⁴ Additional benefits not covered by Medicare Plan A Plan G Plan N Foreign travel emergency Medically necessary emergency care received outside of the United States, which began during the first 60 days of each trip after you pay a \$250 deductible per Pays 80% Pays 80% **Pays 80%** calendar year, not to exceed the lifetime maximum of \$50,000.

- 3. Premium and benefits vary by plan selected. Check your state's outline of coverage for availability.
- 4. Plan F has a high-deductible option, which requires first paying a plan deductible before the plan begins to pay. Once the plan deductible is met, the plan pays 100% of covered services for the rest of the calendar year.
- 5. A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.
- 6. Except for copays, not to exceed \$20 per office visit and \$50 per emergency room visit for Plan N.

To apply for a Medicare Supplement insurance policy, contact a licensed insurance agent today.

Exclusions and limitations

The benefits of this policy will not duplicate any benefits paid by Medicare. The combined benefits of this policy and the benefits paid by Medicare will not exceed 100% of the Medicare-eligible expenses incurred. These policies will not pay benefits for:

- The Medicare Part B Deductible (not applicable in plans C and F);
- Any expense which you are not legally obligated to pay; or services for which no charge is normally made in the absence of insurance;
- Any services that are not medically necessary as determined by Medicare;
- Any portion of any expense for which payment is made by Medicare or other government programs (except Medicaid); or for which payment would have been made by Medicare if you were enrolled in Parts A & B of Medicare;
- Any type of expense not a Medicare-eligible expense except as provided for in the
 policy; and
- Any deductible, coinsurance or copay not covered by Medicare, unless such coverage is listed as an additional benefit in the policy.

Preexisting condition(s) limitation provision

This policy will not cover loss due to Preexisting Condition(s) unless the expense for that loss is incurred more than six (6) months after the effective date of coverage.

This provision does not apply if, as of the date of application, You had a Continuous Period Of Creditable Coverage or had prior coverage under a Medicare Supplement policy for at least six (6) months. If, as of the date of application, You had less than six (6) months prior Creditable Coverage, the Preexisting Conditions limitation will be reduced by the aggregate amount of Creditable Coverage. If this policy is replacing another Medicare Supplement policy, credit will be given for any portion of the waiting period that has been satisfied. This provision does not apply if You applied for and were issued this policy under guaranteed issue status.

Household discount

You may be eligible for the following:

 A 11% discount when you live with someone that has a Medicare Supplement policy with Medco Containment Life Insurance Company and is 18 years or older.

The discount will be removed if the other adult or Medicare Supplement policyholder whose policy status entitles you to the discount no longer resides in the household or no longer has a Medicare Supplement policy through Medco Containment Life Insurance Company. If the other adult or the other Medicare Supplement policyholder becomes deceased, your discount will still apply. The addition or removal of the discount will occur on the billing cycle following the date we learn your eligibility has changed.



Medco Containment Life Insurance Company, PO Box 5700, Scranton, PA 18505-5700, 1-866-459-4272.

This brochure is designed as a marketing aid and is not to be construed as a contract for insurance. It provides a brief description of the important features of our Medicare Supplement Plans. Full terms and conditions of coverage are defined by and governed by an issued Medicare Supplement policy. Please refer to the policy for the full terms and conditions of coverage.

AN OUTLINE OF COVERAGE WILL BE PROVIDED TO ALL PERSONS AT THE TIME THE APPLICATION IS PRESENTED.

Premium and benefits vary by plan selected. Plan availability varies by state. These policies contain exclusions, limitations and terms under which the policies may be continued in force or discontinued. For costs and complete details of coverage, contact your agent/producer or the company.

Policy form series: Plan A: MCLIC-MS-AA-A-2020-OR; Plan F: MCLIC-MS-AA-F-2020-OR; Plan G: MCLIC-MS-AA-G-2020-OR; Plan HDF: MCLIC-MS-AA-HDF-2020-OR; Plan N: MCLIC-MS-AA-N-2020-OR.

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