



Plan A, C, F, and G — Comparison Chart

Compare all your choices:

Original Medicare Benefit	Original Medicare You Pay:	Plan A You Pay:	Plan C You Pay:	Plan F* You Pay:	Plan G You Pay:
Part A hospital deductible (first 60 days per benefit period)	\$ 1,068 deductible	\$ 1,068 deductible	\$0	\$0	\$0
Part A hospital coinsurance (days 61-90)	\$267 per day	\$0	\$0	\$0	\$0
Part A hospital expenses after your 60 days lifetime maximum	100% after 60 lifetime days (no additional 365 days)	\$0 for 365 additional covered days	\$0 for 365 additional covered days	\$0 for 365 additional covered days	\$0 for 365 additional covered days
Part B annual deductible	\$135 deductible	\$135 deductible	\$0	\$0	\$135 deductible
Part B coinsurance after deductible	20%	\$0	\$0	\$0	\$0
Part B excess charges above the Medicare-approved amount	100%	100%	100%	\$0	20%
Skilled Nursing Facility coinsurance (days 1-20)	\$0	\$0	\$0	\$0	\$0
Skilled Nursing Facility coinsurance (days 21-100)	\$133.50 per day	\$133.50 per day	\$0	\$0	\$0
First three pints of blood each year	100%	\$0	\$0	\$0	\$0
World wide travel emergency care	100%	100%	\$250 deductible, 20% and amounts over the \$50,000 lifetime maximum	\$250 deductible, 20% and amounts over the \$50,000 lifetime maximum	\$250 deductible, 20% and amounts over the \$50,000 lifetime maximum

*Top Plan Choice among Medicare Beneficiaries



Leah Rae Hunter — Rocky Mountain Health Plans Member since 2006

“There were a few big reasons I switched from another plan to Rocky Mountain. Now I can pick up the phone and call someone for help right away.”