



Alliance Medicare Supplement
Alliance Health and Life Insurance Company



Alliance Medicare Supplement Brochure

Giving you extra benefits for an extraordinary life

Plans with benefits to meet your unique needs

HAP Alliance Medicare Supplement, or Medigap, offers a choice of plans – Plan A, Plan C, Plan D, Plan F, Plan G and Plan N. The benefits of each of these plans are standardized by the federal government. Plan A provides basic benefits. Plans C, D, F, G and N provide coverage over and above the basic benefits.

Explore the chart in the Outline of Coverage and choose the plan that best meets your needs.

The basic benefits include

- **HOSPITALIZATION:** Coverage for Medicare Part A daily copays, plus 365 additional days (lifetime) after Medicare benefits end
 - **MEDICAL EXPENSES:** Coverage for Medicare Part B coinsurance (20% of Medicare-approved costs) or copays for doctors' services, hospital outpatient services and other medical services
 - **BLOOD:** First three pints of blood each year
 - **HOSPICE:** Coinsurance for inpatient respite care and copays for hospice outpatient prescription drugs
- Note:** Plans do not include Medicare Part D prescription drug benefits.

Take a closer look at HAP's Alliance Medicare Supplement plans

HAP Alliance Medicare Supplement plan is not connected with or endorsed by the United States government or the federal Medicare program. Neither HAP Alliance Medicare Supplement nor its agents are connected with Medicare. The Outline of Coverage in the back of this brochure is thorough, but it does not cover every detail. Contact your local Social Security office or consult the booklet "Medicare & You" for more details.





Filling the gaps in Original Medicare

With Original Medicare, you're covered for many hospital and medical expenses, but there are some gaps in that coverage you may have to pay – such as deductibles, coinsurance and copays:

- Medicare Part A has an upfront deductible for hospitalization – a deductible you pay each benefit period before your Medicare coverage begins.
- If you stay in the hospital more than 60 days, you begin paying a copay per day.
- After 90 days in the hospital, your copay increases.
- You pay 20% coinsurance for most doctors' services after you pay your Part B deductible each year.
- All plans except Plan A have 80% coverage for foreign travel emergency services.

HAP also offers Medicare Advantage Part D plans that have additional coverage and can help with some of the gaps in the coverage in Original Medicare.

Protect your health with HAP Alliance Medicare Supplement

With HAP Alliance Medicare Supplement (Medigap) plans, you can fill the coverage gaps listed above and know that you're protected with a plan from Alliance Health and Life Insurance Company (Alliance). With HAP Alliance Medicare Supplement, you can receive care any place in the U.S. that accepts Medicare, and with some plans, you have emergency care anywhere in the world.

A dependable, Michigan-based partner

Medicare beneficiaries have relied on us and our Medicare plans for more than 35 years. By listening carefully to our members, we've been able to make our health plans and services more responsive. With Alliance, you'll have the comfort that comes from knowing you have a partner in Michigan that is dedicated to delivering inspired customer service. Alliance is a wholly owned subsidiary of Health Alliance Plan (HAP), a Michigan-based company that has been serving the community for more than 60 years.

More convenient coverage

Freedom and choice

With a HAP Alliance Medicare Supplement plan, you're covered wherever you go.

- You can visit any doctor, specialist or hospital that participates in Medicare, anywhere in the U.S.
- No referrals are necessary or required to see a specialist.
- Your benefits start on day one – there is no waiting period for coverage to begin.*
- Michigan-based members get emergency travel assistance whenever traveling 100 miles or more away from home or outside the U.S. for no longer than 90 days in a row, thanks to HAP's partnership with Assist America.**
- **Available for 2025** - optional dental and vision packages can be purchased with any HAP Alliance Medicare Supplement plan. Dental services must be provided by a Delta Dental PPO™ dentist or Delta dental Premier® Dentist. You must use a Delta Dental participating provider in Michigan, Indiana or Ohio to maximize your benefits. Vision services must be provided by an Eyemed Insight network provider. Please see Eyemed's online provider locator to find an Insight network provider.***
- SilverSneakers™ Fitness program provides a basic fitness membership at thousands of locations nationwide, with access to amenities and fitness classes including SilverSneakers classes, unlimited access to virtual physical activity, wellness focused classes and workshops that can be accessed online or via the SilverSneakers mobile app.

Easy to use

When you enroll in a HAP Alliance Medicare Supplement plan:

- There is virtually no paperwork for you with our automatic claims processing.
- Your health claims are processed quickly.
- Your benefits through HAP Alliance Medicare Supplement change automatically when Original Medicare deductibles, coinsurance or copays change, so you know you're covered.
- Your coverage renews automatically every year, as long as you continue to pay your premiums.

* If you delay enrollment into a Medicare Supplement or Medicare Advantage plan and have a health problem that is diagnosed before your Medigap policy starts, the insurance company can refuse to cover that health problem for up to six months. However, you will still be covered under Original Medicare.

** Assist America does not replace your HAP coverage. You are covered for urgent and emergency care based on your member contract.

*** Eyemed members may be required to pay the full retail cost for services received out-of-network. Services received from a nonparticipating dentist may result in higher out-of-pocket costs. You will be responsible for the difference between Delta Dental's payment and the amount charged by the nonparticipating dentist.



A dedicated team of customer service specialists

Customer service is deeply rooted in the HAP culture. In fact, it's what employees strive for each day. Our Medicare customer service representatives specialize in Medicare work right here in Michigan, and can access your plan records immediately to help provide assistance, answer questions and explain plan details.



Whenever you need help,
your Alliance Medicare customer
service representative is always
just a phone call away.

Answers to your questions



How do I know if I'm eligible for enrollment in HAP Alliance Medicare Supplement?

Generally, if you are a Michigan resident enrolled in both Medicare Parts A and B, you are eligible for HAP Alliance Medicare Supplement. You will have to continue to pay the monthly Medicare Part B premium. In addition, you will have to pay a premium for your HAP Alliance Medicare Supplement policy.



When can I sign up for HAP Alliance Medicare Supplement?

You can purchase HAP Alliance Medicare Supplement at any time. The best time to purchase your policy is when you become eligible for Medicare and enroll in Medicare Part B.



Am I covered when I travel?

Yes. Your coverage goes with you anywhere in the United States. With Plan C, Plan D, Plan F, Plan G and Plan N, you also have worldwide emergency coverage, with limitations.



Do I need a referral to see a specialist?

No. Referrals are not required. You can see any doctor or specialist who participates in Medicare.

Can my coverage be denied?

When you turn 65, participate in Medicare Part A and enroll in Medicare Part B, you have a guaranteed right to buy a HAP Alliance Medicare Supplement plan for six months. You cannot be refused if you sign up during this open enrollment period.

Plans C and F will no longer be available to people who are new to Medicare on or after January 1, 2020. However, if you were eligible for Medicare before January 1, 2020 but not yet enrolled, you may be able to buy Plan C or Plan F. People eligible for Medicare on or after January 1, 2020 have the right to buy Plans D, G and N instead of Plans C and F.

If you try to enroll in a Medicare Supplement plan after your first six months of guarantee issue eligibility, an insurance company can refuse to sell you a policy or charge you higher premiums based on certain health conditions.

In some cases, if you have a health problem that was diagnosed before your Medicare Supplement policy starts, the insurance company can refuse to cover that health problem for up to six months. The insurance company can only use this kind of waiting period if your health problem was diagnosed or treated during the six months before the policy started and you had no other coverage in place. If you had other health insurance beyond Original Medicare, you will not be subject to a pre-existing condition waiting period.

Once you are enrolled in a Medicare Supplement plan, your coverage will continue to be renewed as long as you pay the premium.

Do HAP Alliance Medicare Supplement plans include prescription drug coverage?

No. Medicare Supplement plans do not offer prescription drug coverage. If you are interested in a type of plan that may also cover prescription drugs, just give us a call at **(833) 923-1797 (TTY: 711)**. We will be happy to discuss your options with you.*

Or, you may call your State Health Insurance Assistance Program.

Does my plan include dental and vision?

No, dental and vision are not automatically included. Optional dental and vision plans can be purchased with any HAP Alliance Medicare Supplement plan. Dental services must be provided by a Delta Dental PPO™ Dentist or Delta Dental Premier® dentist. You must use a Delta Dental participating provider in Michigan, Indiana or Ohio to maximize your benefits. Vision services must be provided by an Eyemed Insight network provider.

** See enclosed flyer for coverage details.

*These plans are subject to CMS enrollment period restrictions.

**Eyemed members may be required to pay the full retail cost for services received out-of-network. Services received from a nonparticipating dentist may result in higher out-of-pocket costs. You will be responsible for the difference between Delta Dental's payment and the amount charged by the nonparticipating dentist.



Ready to enroll? Here's how.

To enroll in one of our **HAP** Alliance Medicare Supplement plans, you can:

- 1.** Enroll online at **HAP.org/medigap**.
- 2.** Call a licensed HAP Medicare sales representative at **(833) 923-1797 (TTY: 711)**.
Oct. 1 – March 31: 8 a.m. to 8 p.m., seven days a week
April 1 – Sept. 30: 8 a.m. to 8 p.m., Monday through Friday
- 3.** Complete and mail your enrollment form to:
Health Alliance Plan
Attention: Medicare Sales
1414 E. Maple Road
Troy, MI 48083

Prospective Members:

If you have questions, or if you are looking for more information about our benefits or enrollment periods, just call a licensed, Michigan-based HAP Medicare sales representative at:

(833) 923-1797 (TTY: 711)

April 1 – Sept. 30: Monday – Friday, 8 a.m. to 8 p.m.

Oct. 1 – March 31: seven days a week, 8 a.m. to 8 p.m.

Current Members:

If you have questions, contact Customer Service at:

(800) 873-7526 (TTY: 711).

For your convenience, our customer service office hours are:

April 1 – Sept. 30: Monday – Friday, 8 a.m. to 8 p.m.

Oct. 1 – March 31: seven days a week, 8 a.m. to 8 p.m.

Outside of those business hours, you may access our Interactive Voice Recording system at the same number and leave your name and phone number. A HAP Medicare customer service representative will return your phone call the next business day.

You can also mail your questions to:

Health Alliance Plan
Attention: Medicare Sales
1414 E. Maple Road
Troy, MI 48083

Or visit us on the web at **hap.org/medigap**.





This is a solicitation of HAP Alliance Medicare Supplement insurance and you may be contacted by a licensed, authorized HAP Medicare salesperson.



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Want more from your health plan?

(833) 923-1797 (TTY: 711)

**Talk to us about the Medicare option
that makes the most sense for you.**

**For more information, visit
HAP.org/medigap.**



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