


UCT's Medicare Supplement INSURANCE



**Live the life
you've planned...
even if you
encounter
unexpected
medical costs!**

Medicare pays a portion of your hospital and doctors bills, but Medicare is not designed to cover all of your expenses. A Medicare supplement insurance plan from UCT can help lower your share of the costs. Plus it may pay for additional benefits that Medicare doesn't cover at all.

For **2023**

UCT United
Commercial
Travelers

Protecting You from Bills Medicare Won't Pay

Your Medicare Supplement Benefits

Every plan includes these basic benefits:

Hospitalization: Medicare Part A coinsurance and coverage for 365 additional days after Medicare benefits end

Medical Expenses: Medicare Part B coinsurance (generally 20% of Medicare eligible expenses)

Blood Benefit: Three pints of blood each year

Hospice: Part A coinsurance

Medicare Part A Hospital Coverage

Deductible – Plans F and G pay the \$1,600 inpatient hospital deductible for each benefit period.

First 60 Days – After the Medicare Part A deductible, Medicare pays all eligible expenses for services from your first through 60th day of hospital confinement. Services include semiprivate room and board, general nursing, and miscellaneous hospital services and supplies.

Coinsurance – Plans A, F and G pay \$400 a day when you are hospitalized from the 61st through the 90th day. And, when you are in the hospital from the 91st day through the 150th day, you receive \$800 a day for each Lifetime Reserve day used.

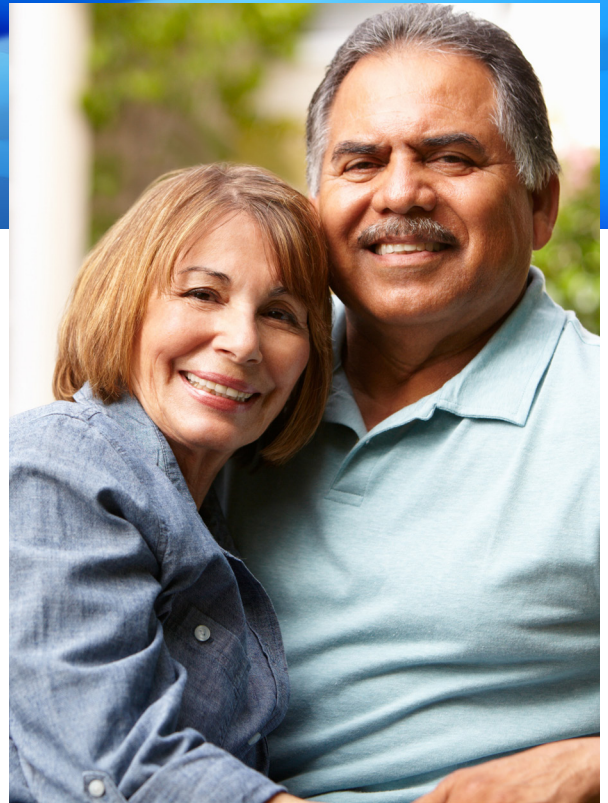
Extended Hospital Coverage – When you are in the hospital longer than 150 days during a benefit period, and you have exhausted your 60 days of Medicare Lifetime Reserve, Plans A, F and G pay the Medicare Part A eligible expenses for hospitalization, paid at the rate Medicare would have paid, subject to a lifetime maximum benefit of an additional 365 days.

Blood Benefit – Medicare has one calendar-year deductible for blood that is the cost of the first three pints needed. Plans A, F and G pay this deductible.

Skilled Nursing Facility Care

First 20 Days – Medicare pays all eligible expenses.

Coinsurance – Plans F and G pay up to \$200 a day from the 21st through the 100th day during which you receive skilled nursing care. You must enter a Medicare-approved skilled nursing facility within 30 days of being hospitalized for at least three days.



Medicare Part B Physician's Services and Supplies

Deductible – Plan F pays the \$226 calendar-year deductible and is only available to those eligible before 2020.

Coinsurance – After the Medicare Part B deductible, Plans A, F and G pay 20% of eligible expenses for physician's services, and supplies, physical and speech therapy, and ambulance service.

Excess Benefits – Your bill for Medicare Part B services and supplies may exceed the Medicare eligible expense. When that occurs, Plans F and G pay 100% of the difference, up to the charge limitation established by Medicare.

Blood Benefit – Medicare has one calendar-year deductible for blood that is the cost of the first three pints needed. Plans A, F and G pay this deductible.

Additional Benefits

Emergency Care Received Outside the U.S. – After you pay a \$250 calendar-year deductible, Plans F and G pay you 80% of eligible expenses incurred during the first 60 days of a trip up to a lifetime maximum of \$50,000. Benefits are payable for health care you need because of a covered injury or illness.

Choose the Medicare Supplement Plan that's right for you ¹			Plans available to all applicants		Medicare first eligible before 2020
	Medicare Pays	Medicare Supplement Plans Pay	A	G	F
Part A: Inpatient Hospital Care					
First 60 days	All but \$1,600	\$1,600 Part A deductible		✓	✓
Coinsurance 61-90 days	All but \$400 a day	\$400 a day	✓	✓	✓
Coinsurance 91-150 days	All but \$800 a day	\$800 a day	✓	✓	✓
After day 150 up to an additional 365 days in your lifetime	Nothing	100% of eligible expenses	✓	✓	✓
Blood benefit	All but 3 pints	First 3 pints	✓	✓	✓
Skilled Nursing Facility Care					
First 20 days	100%	Nothing			
Coinsurance 21-100 days	All but \$200 a day	\$200 a day		✓	✓
Part B: Physician's Services and Supplies					
Yearly deductible	Nothing	\$226			✓
Coinsurance	Generally 80%	Generally 20%	✓	✓	✓
Blood benefit	All but 3 pints	First 3 pints	✓	✓	✓
Excess benefits	Nothing	100% of eligible expenses		✓	✓
Additional Benefits Emergency Care Outside the U.S.	Nothing	80% of eligible expenses up to a lifetime maximum of \$50,000 after a \$250 yearly deductible		✓	✓

¹ Some plans may not be available in your state.

The Facts About Your Plan

- **Your policy is guaranteed renewable.** Your policy cannot be canceled. It will be renewed as long as the premiums are paid on time and your application is correct.
- **Your benefits will automatically increase** as Medicare deductibles and coinsurance increase. Benefits are not paid for any expenses paid by Medicare.
- **Benefits are paid to you** or to your hospital or doctor.
- **You have 31 days from your renewal date to pay your premium.** Your policy will stay in force during this 31-day grace period.
- **You cannot be singled out for a rate increase,** no matter how many times you receive benefits. Your premium changes: (a) each year on the renewal date coinciding with or following the anniversary of your Policy Date; or (b) when the same premium change is made on all in-force Medicare supplement policies of the same form issued to persons of your classification in the same geographic area of your state.
- **You are covered immediately.** There is no waiting period for pre-existing conditions. Benefits will be paid from the time your policy is in force.
- **Satisfaction Guaranteed.** If you are not completely happy with your policy, send it back to us or your agent within 30 days after you receive it and we'll refund your premium.
- **A 7% Cohabitation discount is available to married applicants residing in the same location.**

- **Easy Payment Options.** For your convenience, we have several payment options, including our Electronic Funds Transfer (EFT) program, with payments coming out of your bank account automatically. With this payment plan, you'll never have to worry about making late premium payments – even away from home!
- **Medicare Supplement plans will not pay for:**
 - Any expense incurred before your Policy Effective Date
 - Services for which no charge is made
 - Expenses paid by Medicare

Definitions

Medicare Part A eligible expenses for hospital/skilled nursing facility care include expenses for semiprivate room and board, general nursing, and miscellaneous services and supplies.

Medicare Part B eligible expenses for medical services include expenses for physicians' services, hospital outpatient services and supplies, physical and speech therapy, and ambulance service.

Medicare eligible expenses means expenses of the kinds covered by Medicare Parts A and B, to the extent recognized as reasonable and medically necessary by Medicare.

A benefit period begins the first full day you are hospitalized and ends when you have not been in a hospital or skilled nursing facility for 60 days in a row.

Coinsurance is the portion of the eligible expense not paid by Medicare and paid by UCT.

ABOUT UCT

Give Back

UCT is a way of life. We're a fraternal benefit society driven by our members and their dedication to community service. Our charitable efforts across North America are made possible through the sales of our insurance products.

For more than 130 years, we've protected our members and their families, and supported them in improving their communities.



Get Involved

As a UCT member you automatically join tens of thousands of other members in the United States and Canada who strive to make a difference in their local communities. Members can get involved with a UCT local council in their area or join with others to form their own. You choose which causes and charities you want to support.

Get Covered

UCT offers a number of affordable insurance and financial protection products. Whether it's accident and life products, dental & vision coverage, or Medicare supplement plans, we offer quality protection for your insurance needs.

THIS IS A BRIEF DESCRIPTION OF YOUR COVERAGE. The outline of coverage must accompany this brochure. For complete information on benefits, exceptions, reductions and limitations, **PLEASE READ YOUR OUTLINE OF COVERAGE AND YOUR POLICY CAREFULLY.**

Note: Be detailed and complete when applying for coverage.

When you fill out your new policy application, make sure to answer all questions truthfully and completely. UCT may cancel your policy and refuse to pay any claims if you leave out information or falsify important information. Review your application carefully before you sign it to make sure all information has been recorded properly.

This brochure is for the solicitation of insurance and contact will be made by an insurance agent.

Neither The Order of United Commercial Travelers of America, its agents, nor its Medicare supplement policies are connected or endorsed by the U.S. government or the federal Medicare program.