

- Local agents you know and trust represent the Sanford SELECT plan
- Local customer service and claims processing at our office in Sioux Falls, SD
- Free membership to a discount card that gives you prescription drug, vision and hearing discounts at participating local pharmacies and providers

How important is the “excess charges” coverage?

It depends on what doctors you use. If your doctor “accepts assignment,” that means the doctor will not charge you any more than Medicare approves. However, many doctors do not accept assignment, which means they can then charge you up to 15% more than the Medicare approved charge. That is the “excess charge.” Providers are not obligated to inform each patient of their assignment status before providing services. If you have Plan F, your Sanford Health Plan will pay that amount. **For Minnesota residents only:** Please note that Minnesota law does not allow doctors to charge more than the Medicare reimbursement rate. You do not need to purchase this rider unless you

travel or seek care outside of Minnesota. Both the SELECT Plans and the Standard Extended Plan include this benefit, however, it must be purchased as a rider in the Basic Standard Plan.

When is the best time to buy a Medicare Supplement policy?

The best time to buy a Medigap policy is during your Medigap open enrollment period which lasts for 6 months. It starts on the first day of the month in which you are enrolled in Medicare Part B. Outside of your open enrollment period, a company must sell you a policy only if you have what is called guaranteed issue rights. If you are not in your open enrollment period and you do not have a guaranteed issue right, an insurance company can refuse to sell you a Medigap policy because of any health conditions you may have.

Who can join the Sanford SELECT Plan?

If you have both Medicare Parts A and B and live in our service area of eastern South Dakota, northwest Iowa or Southwest Minnesota, you can apply for coverage with the Sanford SELECT Plan.

Sanford SELECT

MEDICARE SELECT
SUPPLEMENT INSURANCE



HEALTHCARE BUILT FOR YOU

Neither Sanford Health Plan nor its agents are affiliated with Medicare or the State/Federal Government.



Why do I need a Medicare Supplement Policy?

A Medicare supplement policy, also known as Medigap, is a health insurance policy that fills the “gaps” for your original Medicare plan coverage. If you do not have Medicare supplement coverage, you must pay the deductible and coinsurance amounts out of your own pocket. Without a Medicare supplement plan, your out of pocket expenses might add up.

What is a Medicare deductible?

A deductible is the amount you must pay each year before Medicare begins paying its portion of your medical bill. There are deductibles for both the Part A (Hospital Insurance) and Part B (Doctor Services) portions of Medicare. Medicare will not start paying on your claims until you have met your annual deductible. See a Sanford Health Plan Outline of Coverage for deductible amounts.

What is a benefit period and how does the Medicare Part A deductible work?

Medicare hospital benefits are paid on the basis of benefit periods which measure your use of hospital and skilled nursing facility services. A benefit period starts the day you go into the hospital or skilled nursing facility and

ends when you have not received hospital or skilled nursing care for 60 days in a row.

If a person with Medicare goes to the hospital again after 60 days, a new benefit period begins. A person with Medicare must pay the Part A deductible for each benefit period. There is no limit to the number of benefit periods a person with Medicare can have for hospital or skilled nursing facility care.

How do Medicare Supplement plans work with Medicare?

When you have both Medicare and a supplement plan, you have two payers for your health care services. In most cases, Medicare pays first (or is the primary payer) and your supplement plan pays second (or is the secondary payer). When Medicare gets a claim from your doctors, Medicare will automatically send it to Sanford Health Plan to pay your share of the bill. This means no claim filing and less paperwork for you!

What is a Medicare SELECT Plan?

A Medicare SELECT plan is a standard Medicare supplement plan that requires you to use a “Network” of providers for your care. Any standardized policy may be sold as a “Medicare SELECT” policy. Medicare SELECT policies have the same benefits as the twelve standard Medigap Plans, but they cost less.

When you enroll in Sanford SELECT Plan, you agree to use Network facilities for all of your non-emergency inpatient admissions and outpatient surgical procedures.

Why should I choose the Sanford SELECT Plan over a Standard Medicare Supplement Plan?

The Sanford SELECT Plans have the same benefits as the standard supplement plans and Members enjoy lower premiums as a result of using our Network of hospitals and outpatient surgical centers.



What coverage do I have when traveling outside the Sanford SELECT service area?

Snowbirds are covered for Medicare Part B services in addition to coverage for emergency and urgent care services while traveling outside of the Sanford SELECT service area. You must use Network facilities for elective inpatient hospitalizations and outpatient surgery.

If I join the Sanford SELECT Plan, can I continue to see my doctor?

Yes, there are no Network requirements on doctors or clinics, including specialists. However, if you need to be hospitalized, your doctor will need to have admitting privileges at a Network hospital or surgical center.

Is there a waiting period for pre-existing health conditions?

No, with Sanford SELECT, there is no waiting period. Some insurance companies will place a waiting period of up to 6 months on your policy before your Medicare supplement plan covers pre-existing health conditions. However your Sanford Medicare SELECT coverage will cover you immediately, beginning on your first day of coverage.

What are the benefits of becoming a Sanford SELECT Member?

- No Network limit on doctors and clinics, including specialists
- Coverage for emergency and urgent care while you travel (Network requirements don't apply)
- Snowbird coverage for Medicare Part B services
- No waiting period for pre-existing health conditions
- Affordable premiums
- No copays
- Automatic claims filing and prompt payment
- No prior authorization or precertifications required

For more information call
1-888-605-9277
sanfordhealthplan.com

