

	PLAN A	PLAN B	PLAN C	PLAN D	PLAN F	PLAN G	PLAN K <sup>1</sup>	PLAN L <sup>2</sup>	PLAN M	PLAN N
<b>Part A Coinsurance</b>	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
<b>Part A Blood Benefit</b>	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
<b>Hospice</b>	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
<b>Part B Coinsurance</b>	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓ <sup>3</sup>
<b>Part A Deductible</b>		✓	✓	✓	✓	✓	50%	75%	50%	✓
<b>Skilled Nursing Coinsurance</b>			✓	✓	✓	✓	50%	75%	✓	✓
<b>Part B Deductible</b>			✓		✓					
<b>Part B Excess</b>					✓	✓				
<b>Foreign Travel Emergency</b>			✓	✓	✓	✓			✓	✓
<b>Best Idaho Rates<sup>4</sup></b>	\$87	\$122	\$147	\$136	\$145	\$116	\$53	\$90	\$174	\$100

<sup>1</sup> Out-of-Pocket maximum for Plan K of \$4,940 per year. This amount does not include "Excess Charges" and will increase each year for inflation.

<sup>2</sup> Out-of-Pocket maximum for Plan L of \$2,470 per year. This amount does not include "Excess Charges" and will increase each year for inflation.

<sup>3</sup> Part B coinsurance paid in full except: 1) up to a \$20 copay for an office visit, and 2) up to a \$50 copay for an emergency room visit.

<sup>4</sup> Rates shown are for 65 year old female with no tobacco usage. Rates may vary based on tobacco use, age, gender, and modal pay.