

Rates effective Jan. 1, 2025

Medicare Supplement Insurance from WPS

There's a better way.

NO WORRIES.
NO HASSLES.
NO NETWORKS.



Choose peace-of-mind coverage
with caring customer support.

1-800-236-1448 | wpsmedicareolutions.com

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**#1
CHOICE**

**FOR MEDICARE
SUPPLEMENT INSURANCE
IN WISCONSIN¹**



customers surveyed
say they would
recommend WPS to their
friends and family²



Get to know WPS

A good reputation is earned. With 60+ years providing superior service to seniors, WPS Medicare supplement insurance is chosen by more Wisconsinites than any other company.¹ WPS Medicare supplement insurance plans offer great value and peace of mind!

Choose freedom

With WPS, you can visit any doctor in the United States who accepts Medicare supplement insurance. There are no networks, no worries, and no hassles.

WPS gives you a healthy edge

WPS customers get special programs and services with their plan, including:

- Vision care program³
- Hearing care program³
- Additional preventive care coverage⁴
- Optional \$100,000 foreign travel emergency rider⁵
- 2% discount when you use automatic bank withdrawal
- 7% household discount⁶
- Option to purchase dental coverage⁷

¹Based on enrollment data submitted to NAIC, 2023. ²Based on customer support survey response data, 2023. ³Vision and hearing programs are not insurance, are not part of the insurance policy, and can be changed or discontinued at any time. Limitations, member fees, and restrictions may apply. ⁴Plans include coverage for preventive services covered by Medicare Part B, and preventive services not covered by Part B (charges are payable up to 100% of the Medicare allowed amounts.) ⁵Requires purchase of an additional rider. ⁶Household: Two or more individuals who reside together in the same dwelling. Dwelling is defined as a single home, condominium unit, or apartment unit within an apartment complex. ⁷WPS has partnered with Delta Dental to provide dental coverage. Dental policies are underwritten by Delta Dental of Wisconsin.

WPS by the numbers

75+

Years as a not-for-profit company serving the health care needs of Wisconsinites

60+

Years serving seniors



16 million beneficiaries⁸

Served across all lines of business, including WPS Government Health Administrators' Medicare administrative contracts and WPS Military and Veterans Health



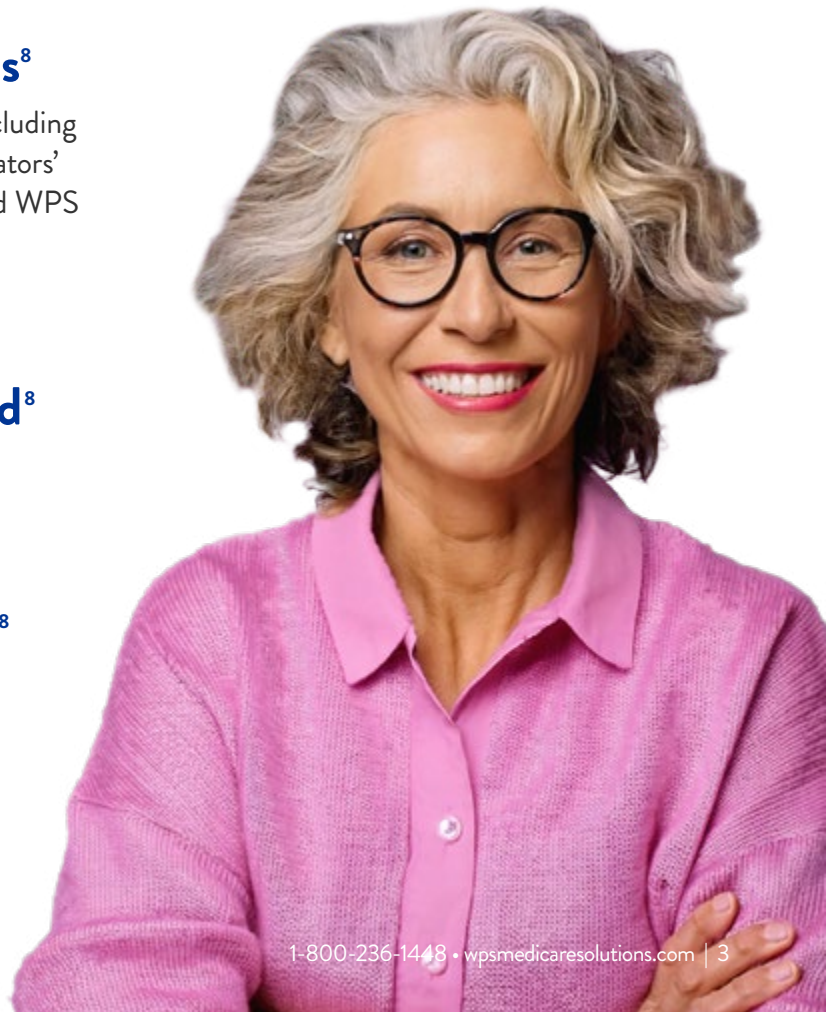
214.5 million claims paid⁸

across all lines of business



Over 65,000 policies⁸

Issued and administered by WPS for Medicare supplement insurance.



Enroll after you turn 65

If you have reached the 65-year milestone and are already signed up for Medicare, you can apply for a WPS Medicare supplement insurance plan at any time during the year. There is no Annual Enrollment Period as with Medicare Advantage plans. After your Open Enrollment Period ends, you may be required to answer health questions to enroll.

If you have other coverage that's terminating or changing, you may be eligible for guaranteed acceptance of a WPS Medicare supplement insurance plan.



Your Medicare Journey

Don't wait until you turn 65 to start reading up on Medicare. It's a complicated program with many options to consider. You'll want to begin researching and asking questions shortly after you turn 64, or earlier. This guide makes it easy to get started.

12 months before you turn 65

You should begin preparing for your transition to Medicare.

3 months before you turn 65

Medicare's Initial Enrollment Period begins, and you can determine if you will apply for Medicare Part A and Part B to be in effect when you are 65.

Turn 65 and enroll in Part B

If you apply for a Medicare supplement plan during your Initial Enrollment Period, you won't need to answer any health questions.

3 months after you turn 65

Medicare's one-time Initial Enrollment Period ends.

6 months after you turn 65

Medicare supplement (Medigap) Open Enrollment Period ends.



Understand your Original A/B Medicare out-of-pocket costs with no max out-of-pocket.

Parts of Medicare



Part A Hospital Insurance (Original Medicare)

Part A helps cover inpatient care in hospitals, skilled nursing facility care, hospice care, and home health care.



Part B Medical Insurance (Original Medicare)

Part B helps cover services from health care providers, outpatient care, home health care, durable medical equipment and many preventive services.



Part D Drug coverage

Part D helps cover the cost of prescription drugs (including many recommended shots or vaccines).



Medicare Supplemental Insurance (Medigap)

Extra insurance you can buy that helps pay your share of costs in Original Medicare.

Your Medicare Options

Original Medicare

Part A and Part B

- + Optional Medicare drug coverage (Part D sold separately).
- + Optional Medicare supplement insurance (Medigap) to help pay your out-of-pocket costs in Original Medicare (like your 20% coinsurance). This is an insurance policy you can buy to help lower your share of certain costs for Part A and Part B services (Original Medicare).

OR coverage from a former employer or union, or Medicaid.

Medicare Advantage

Part C

Replacement of Federal A & B original Medicare from a private Health Insurance Company.

OR

Private company that offers an alternative to Original Medicare for your health and/or drug coverage.

In many cases, you can only use doctors who are in the plan's network, and you will need approval from your plan before it covers certain services.

Plans may have higher out-of-pocket costs than Original Medicare, and an additional premium.

You cannot purchase Medicare Supplement to cover your additional expenses if you have a Medicare Advantage plan.

Confused?



That's ok, give your local agent or WPS a call!

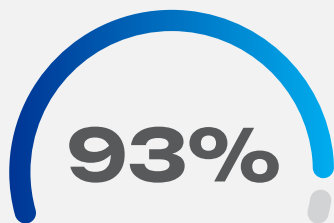
800-236-1448

WPS Medicare supplement insurance provides freedom of choice and freedom to roam

If I choose one of these insurance plans, will I still be covered by Original Medicare?	Yes. You pay your Part B premium and keep your Original Medicare coverage, which is enhanced by this type of plan.
Do I need a referral to see a specialist?	No. Referrals are not needed.
What if I don't like the plan? Can I drop it whenever I choose?	Yes. There is no period where you are locked in to your coverage. You may need to go through underwriting to switch to another Medicare supplement policy.
Can my plan have its benefits reduced or even be terminated by the insurer?	No. As long as you continue to pay the plan premium, your policy is guaranteed renewable for life. Benefits will only change when Medicare benefits or federal/state law changes.
What if I find out my doctor is out-of-network?	There is no network. You can see any health care provider in the U.S. that accepts Medicare.
Who oversees the plan?	Wisconsin Office of the Commissioner of Insurance.
What if I move out of state? Can I take my plan with me?	No problem! The plan moves with you wherever you live in the U.S.



Scan the code to learn about the differences between Medicare Advantage and Medicare supplement insurance.



said their Medicare supplement plan **makes it easier** to handle medical bills and paperwork.¹

¹Seniors' Satisfaction with their Medicare Supplemental Insurance Coverage, conducted by Global Strategy Group on behalf of America's Health Insurance Plans (AHIP), 2023.

With our Medicare supplement insurance, peace of mind is part of the plan

Only the luckiest of us get to age without ever worrying about our health, medical costs, and the stress of managing it all. No one knows what the future holds. Preparing for life on a fixed income can be challenging, much less trying to predict and budget for your future health care needs.

It's important to know that Original Medicare doesn't pay for everything. With Original Medicare, there is no out-of-pocket maximum for deductibles, copays, and coinsurance. If you need health care, those costs can add up quickly. Medicare supplement insurance helps cover the costs Original Medicare leaves behind.

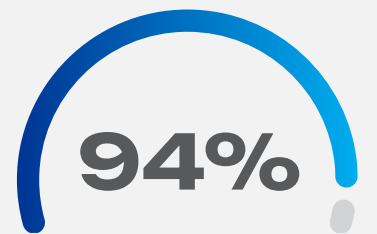
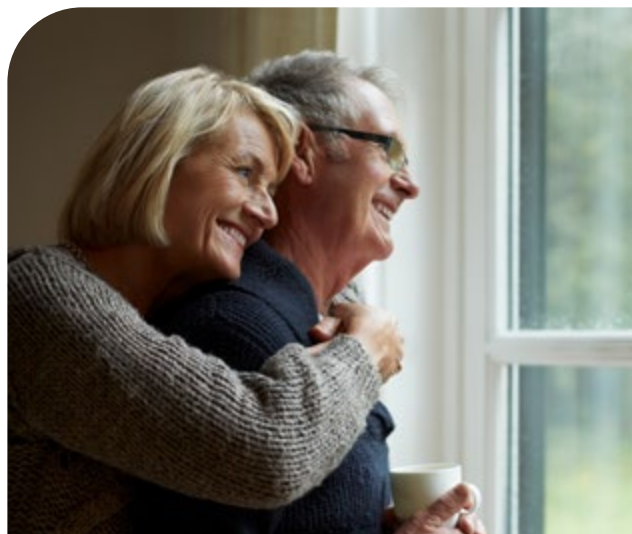
Our Medicare supplement insurance plans:

- **Work with Medicare**—If Medicare pays for a service, we cover it.
- **Are guaranteed renewable**—Keep your policy for life, as long as premiums are paid.
- **Have no networks**—You're free to see any provider, anywhere in the U.S., that accepts Medicare.
- **Offer live, Wisconsin-based customer support**—You'll speak with a friendly, knowledgeable representative who is trained to help get you the answers you need.
- **Special programs and services**—Hearing and vision programs that offer substantial savings on hearing aids and eyewear.
- **Additional preventive care coverage for those routine services not covered by Medicare**—Routine physical exams, eye exams (including refractions), hearing exams, and related diagnostic x-rays and lab tests.²

When you purchase one of our Medicare supplement insurance plans you'll have the financial and medical protection you need for your future. We've been serving seniors for more than 60 years, and we'll be there for you, too.



Give us a call now at **800-236-1448** to speak to a WPS representative or call your local agent.



of customers said their Medicare supplement coverage allows them to receive **high-quality care**³

²Coverage is for the actual charges up to 100% of the Medicare approved amount for each service, as if Medicare were to cover the service. There is no coverage for services covered by Medicare. If your provider does not accept the Medicare approved amount, you may be responsible for the difference. ³Seniors' Satisfaction with their Medicare Supplemental Insurance Coverage, conducted by Global Strategy Group on behalf of America's Health Insurance Plans (AHIP), 2023. Comments from our customers are a result of our questions regarding their thoughts about our services. No customers are directly or indirectly compensated for making a testimonial or endorsement. Please contact us for reports related to the statistical information.

Programs for a healthier you

Being able to hear and see well can help make it easier to enjoy your favorite activities and time with your favorite people. Unfortunately, routine hearing, vision, and dental care are not currently covered by Original Medicare. Hearing aids, eyeglasses, and dental care can be expensive as well. We offer programs that can help make hearing, vision, and dental care more affordable. The Hearing Care Solutions and EyeMed programs are available to all our Medicare supplement insurance customers.¹ There is also the option to purchase dental coverage through Delta Dental.²



¹Vision and hearing programs are not insurance, are not part of the insurance policy, and can be changed or discontinued at any time. Vision program is administered by EyeMed Vision Care, LLC. Hearing program is administered by Hearing Care Solutions, Inc. ²WPS has partnered with Delta Dental to provide dental coverage. Dental policies are underwritten by Delta Dental of Wisconsin.

Hearing Care Solutions makes better hearing affordable

Available to all our Medicare supplement customers, the Hearing Care Solutions program offers fixed prices for hearing aids. Plus, you're eligible for:

- Free comprehensive hearing exam
- Free hearing aid evaluation and fitting
- Three-year manufacturer's warranty including loss, damage, and repair
- Three-year supply of batteries (up to 64 cells per aid, per year)
- One year of follow-up care at no charge
- A 60-day evaluation period for your hearing aid
- 12-month interest-free financing (to those who qualify)

Examples of how you can save

Sample Savings per hearing aid	MSRP or Average Price	You Pay ³
Three-year repair, loss, and damage warranty	\$500	\$0
Three years of hearing aid batteries	\$360	\$0
One year of office service with original provider	\$300	\$0
Basic digital hearing aid	\$1,300	\$450
Mid-level hearing aid	\$1,800	\$750
Premium digital hearing aid	\$3,000	\$1,350

³These are savings examples only. May be used in conjunction with your existing insurance coverage. Hearing program is not part of the insurance policy, is offered at no additional charge, and can be changed or discontinued at any time. Hearing program is administered by Hearing Care Solutions, Inc.



Give WPS a call today to find out more about this program
800-236-1448

EyeMed Vision Care Program

All our Medicare supplement insurance plan customers receive access to the EyeMed Vision Care program at no additional cost.¹ EyeMed offers substantial savings on eyewear at thousands of provider locations nationwide.

EyeMed offers substantial savings on eyewear at thousands of provider locations nationwide in the Access Network.



Does your vision provider accept EyeMed?

We would be happy to explain how this valuable program works and help you find a provider.



Contact your local agent or call WPS today at **800-236-1448**

Vision Care Services	Customer Benefits
Eye exam (with dilation, as necessary)	\$5 off routine exam \$5 off contact lens exam
Complete Pair Eyeglass Purchase²	
Frames	
Any available frame at provider location	35% off retail price
Standard Plastic Lenses	
Single vision	\$50 patient responsibility
Bifocal	\$70 patient responsibility
Trifocal	\$105 patient responsibility
Lens Options	
UV coating	\$15 patient responsibility
Tint (solid and gradient)	\$15 patient responsibility
Standard scratch-resistant coating	\$15 patient responsibility
Standard polycarbonate	\$40 patient responsibility
Standard anti-reflective coating	\$45 patient responsibility
Standard progressive (add-on to bifocal)	\$65 patient responsibility
Other add-ons and services	20% off retail price
Contact Lenses (discount applies to materials only)	
Conventional	15% off retail price
Laser Vision Correction	
LASIK or PRK from U.S. Laser Network	15% off retail price 5% off promotional price
Frequency of use for examination, frames, lenses, or contact lenses unlimited	



¹Vision program is not insurance and is not part of the insurance policy and can be changed or discontinued at any time. Vision program is administered by EyeMed Vision Care, LLC.
²Frame, lens, and lens option discounts apply only when purchasing a complete pair of eyeglasses. If purchased separately, customers receive 20% off the retail price. Benefits may not be combined with any discount, promotional offering, or other group benefit plans, except as indicated. Contract is effective July 1, 2024 through June 30, 2026.

Optional Delta Dental coverage

You can choose any dentist for a variety of dental services. From cleanings and X-rays to fillings and crowns, our optional dental coverage provides the essential coverage you need for a healthy smile.

Optional dental coverage includes:

- Annual maximum benefit: \$1,200 per individual.
- CheckUp Plus. Preventive not subject to the annual max.
- Annual deductible: \$50 per individual.
- Freedom to choose any licensed dentist. Seeing a dentist in the Delta Dental PPO network may result in lower out-of-pocket costs.

Monthly dental rate: \$55.31

Discounts available:

- Save 7% on your dental plan premium when you and a second household¹ member are enrolled in a WPS Medicare supplement plan
- Save 2% when you pay by automatic bank withdrawal



When You Visit a Delta Dental Dentist

Diagnostic and Preventive Care		
	This policy pays ²	Frequency
Regular cleanings and routine exams	100%	2 per year
Bitewing X-rays	80%	1 set per year
Full mouth X-rays	80%	1 every 5 years
Emergency exam	80%	N/A
Restorative Services ³		
	This policy pays ²	Waiting period
Fillings and simple extractions	50%	6 months
Oral surgery, endodontic, and periodontic ⁴ services	50%	12 months
Crowns and prosthodontics (fixed or removable)	50%	12 months ⁵

¹Household: Two or more individuals who reside together in the same dwelling. Dwelling is defined as a single home, condominium unit, or apartment unit within an apartment complex. ²After \$50 deductible is met. ³Predetermination of benefits is strongly encouraged before restorative services are scheduled. ⁴Provides additional Evidence-Based Integrated Care Plan benefits for people with specific medical conditions. ⁵Replacement of a defective existing appliance 10 years after its original placement date.

Plan underwritten by Delta Dental of Wisconsin. Waiting period waived with proof of continuous insurance coverage for at least two years. This plan summary provides only a general description of benefits and limitations. A detailed description of coverage is in the applicable policy. Coverage is subject to all terms and conditions of the policy and any endorsements. The policy is your contract of insurance. If there's ever a discrepancy between the policy and this plan summary, the policy has final authority. Visit DeltaDentalWI.com to find a Delta Dental PPO dentist.



Opportunities for connection

It's important to maintain social connections, especially as we age. We offer our Medicare supplement insurance customers options for connecting with us and each other. Our groups and programs educate, inform, offer the chance to provide feedback and drive change, and foster a sense of connection and well-being.



WPS Medicare Solutions Group on Facebook

Our private Facebook group offers ways for seniors to connect with each other, learn more about Medicare options, and find tips for healthy living.

Members can also explore helpful tools like enrollment checklists and “how-to” videos. We curate all the content ourselves and don't allow any sales pitches or spam posts.

This group is open to anyone approaching or at Medicare age. **You don't need to be a current customer to join.** To find the group, search “WPS Medicare Solutions” on Facebook and click the “Join group” button.



WPS Cares Community

At WPS, we want to know what everyone thinks. That includes current customers, non-customers, and future customers. That's why we created the Cares Community. Members of the Cares Community share their insights and opinions by completing online surveys and polls. They can also connect with other community members in the private Cares Community Member Hub, play word games, and more! By joining the Cares Community, you become an active part of the conversations that help us enhance our products and services, while getting a look behind the scenes of WPS.

How to choose a Medicare supplement insurance plan

Start by determining your rate area and choosing your base plan. Then, choose optional riders for more coverage at an additional cost. Finally, apply any discounts that may be applicable.

1

Determine your rate area

2

Select your base plan option

3

Choose optional riders

4

Apply discounts for which you qualify

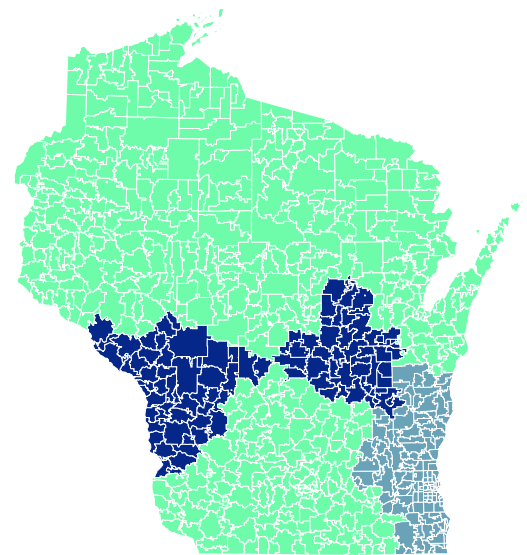
1 Determine your rate area

Determine your rate area. Check the box below for your rate area.

- Area 1** See rates on page 15
Milwaukee area and southeastern Wisconsin
Moving out of state
530__All ZIPs that begin with these 3 numbers
531__01-13, 16-19, 22-24, 26, 27, 29-36, 39-46,
49-55, 58-75, 77, 79-83, 85-89, 92-94, 96-99
532__All ZIPs that begin with these 3 numbers
533__All ZIPs that begin with these 3 numbers
534__All ZIPs that begin with these 3 numbers

- Area 2** See rates on page 16
Central and western Wisconsin
546__All ZIPs that begin with these 3 numbers
549__All ZIPs that begin with these 3 numbers

- Area 3** See rates on page 17
All other Wisconsin ZIP codes



■ Area 1 ■ Area 2 ■ Area 3

2 Select your base plan (choose one)

<input type="checkbox"/> Base Plan—highest coverage option	<input checked="" type="radio"/> OR	<input type="checkbox"/> Base Plan with Medicare Part B copayment or coinsurance rider
Covers your Medicare Part A and Part B copayments and coinsurance—costs you would otherwise pay out of pocket. This plan offers additional preventive benefits.*		After you pay the Medicare Part B deductible, you pay a \$20 copayment for office visits and either up to a \$50 copayment for emergency room visits or the Medicare Part B coinsurance, whichever is less. This plan offers additional preventive benefits.*

*Base plans include Medicare Part B preventive services.

3 Choose optional riders

Enhance your base plan with optional benefit riders, each at an additional cost.

- Rider 1—Medicare Part A Deductible**—WPS will pay either 100% or 50% of your Medicare Part A deductible during the first 60 days of hospitalization.
- 100% Medicare Part A Deductible **OR** 50% Medicare Part A Deductible
- Rider 2—Medicare Part B Deductible** (available for Base Plan with highest coverage option only)—WPS will pay your Medicare Part B deductible each calendar year. This rider is only available to applicants who were first eligible for Medicare prior to Jan. 1, 2020.
- Rider 3—Medicare Part B Excess Charges**—If your health care provider does not accept Medicare assignment, WPS will pay the difference between what Medicare approves for payment and the amount charged by the provider. The difference shall be no more than the actual charge or the limiting charge allowed by Medicare, whichever is less.
- Rider 4—Additional Home Health Care**—WPS will pay benefits for an additional 325 home health care visits each calendar year up to a total of 365 visits per year, including those covered by Medicare.
- Rider 5—Foreign Travel Emergency**—WPS will pay 80% of the billed charges for expenses associated with medically necessary emergency medical care you receive outside the U.S. that begins in the first 60 days of a trip after you satisfy a deductible of \$250; lifetime maximum benefit of \$100,000.

4 Apply discounts for which you qualify

- 2% Automatic Bank Withdrawal Discount**—Receive a 2% discount when you pay your premium by automatic bank withdrawal each month.
- 7% Household Discount**—Receive a 7% discount when you and another member of your household enroll in a WPS Medicare supplement insurance plan. Household is defined as two or more individuals who reside together in the same dwelling. Dwelling is defined as a single home, condominium unit, or apartment unit within an apartment complex.

Area 1 monthly rates

Age at Time of Enrollment	Base Plans Choose One		Optional Riders					
	Base Plan Only	Base Plan with Copay/ Coinsurance	Rider 1 Choose One		Rider 2	Rider 3	Rider 4	Rider 5
			Part A Deductible 100%	OR Part A Deductible 50%	Part B Deductible ¹	Part B Excess Charges	Additional Home Health Care	Foreign Travel Emergency
65	155.17	134.84	31.55	15.47	21.83	7.27	2.04	1.53
66	163.79	142.33	33.54	16.47	21.83	7.53	2.04	1.53
67	172.45	149.84	35.59	17.44	21.83	7.85	2.04	1.53
68	181.09	157.37	37.61	18.43	21.83	8.14	2.04	1.53
69	189.72	164.88	39.63	19.41	21.83	8.46	2.04	1.53
70	198.37	172.38	41.65	20.39	21.83	8.73	2.04	1.53
71	206.99	179.88	43.67	21.39	21.83	9.05	2.04	1.53
72	215.64	187.40	45.69	22.41	21.83	9.33	2.04	1.53
73	224.29	194.89	47.69	23.37	21.83	9.65	2.04	1.53
74	232.92	202.41	49.73	24.36	21.83	9.97	2.04	1.53
75	241.56	209.91	51.73	25.36	21.83	10.24	2.04	1.53
76	250.22	217.41	53.79	26.34	21.83	10.54	2.04	1.53
77	258.85	224.94	55.78	27.32	21.83	10.85	2.04	1.53
78	267.47	232.44	57.80	28.30	21.83	11.16	2.04	1.53
79	276.09	239.90	59.80	29.29	21.83	11.45	2.04	1.53
80	284.75	247.45	61.86	30.32	21.83	11.76	2.04	1.53
81	290.40	252.36	63.86	31.31	21.83	12.04	2.04	1.53
82	296.15	257.36	65.90	32.29	21.83	12.35	2.04	1.53
83	301.99	262.41	67.89	33.30	21.83	12.66	2.04	1.53
84	308.02	267.67	69.93	34.28	21.83	12.95	2.04	1.53
85+	314.09	272.95	71.96	35.23	21.83	13.21	2.04	1.53
Under 65	627.44	545.22	137.66	67.43	21.83	25.31	2.04	1.53

Calculate your plan cost—Area 1

Please refer to pages 13-14 for descriptions of benefit options and see chart above for area rates.

- Base plan rate (choose one) \$ _____
- Choose optional riders
 - Rider 1—Medicare Part A Deductible \$ _____
 - Rider 2—Medicare Part B Deductible¹ \$ _____
 - Rider 3—Medicare Part B Excess Charges \$ _____
 - Rider 4—Additional Home Health Care \$ _____
 - Rider 5—Foreign Travel Emergency \$ _____
- Your total per month Total = \$ _____
- Apply discounts for which you qualify²
 - 2% Automatic Bank Withdrawal Discount Total x 0.98 = \$ _____
 - OR, 7% Household Discount Total x 0.93 = \$ _____
 - OR, BOTH Discounts Total x 0.9114 = \$ _____

¹This rider is only available to applicants who were first eligible for Medicare prior to Jan. 1, 2020, and who purchase our highest-level base plan.

²Discounts are approximate; actual discount amount will be determined when your application is approved.

Area 2 monthly rates

Age at Time of Enrollment	Base Plans Choose One		Optional Riders					
	Base Plan Only	Base Plan with Copay/ Coinsurance	Rider 1 Choose One		Rider 2	Rider 3	Rider 4	Rider 5
			Part A Deductible 100%	OR Part A Deductible 50%	Part B Deductible ¹	Part B Excess Charges	Additional Home Health Care	Foreign Travel Emergency
65	152.81	132.79	31.07	15.23	21.83	7.16	2.04	1.53
66	161.30	140.17	33.03	16.21	21.83	7.42	2.04	1.53
67	169.82	147.56	35.05	17.18	21.83	7.73	2.04	1.53
68	178.33	154.98	37.04	18.15	21.83	8.01	2.04	1.53
69	186.83	162.37	39.03	19.11	21.83	8.33	2.04	1.53
70	195.35	169.75	41.02	20.08	21.83	8.60	2.04	1.53
71	203.84	177.15	43.01	21.07	21.83	8.91	2.04	1.53
72	212.35	184.54	45.00	22.07	21.83	9.19	2.04	1.53
73	220.87	191.92	46.96	23.01	21.83	9.51	2.04	1.53
74	229.37	199.33	48.98	23.99	21.83	9.82	2.04	1.53
75	237.88	206.71	50.94	24.97	21.83	10.08	2.04	1.53
76	246.40	214.09	52.97	25.94	21.83	10.38	2.04	1.53
77	254.90	221.51	54.93	26.90	21.83	10.69	2.04	1.53
78	263.39	228.89	56.92	27.86	21.83	10.99	2.04	1.53
79	271.88	236.25	58.89	28.85	21.83	11.27	2.04	1.53
80	280.41	243.68	60.91	29.85	21.83	11.58	2.04	1.53
81	285.97	248.51	62.89	30.84	21.83	11.86	2.04	1.53
82	291.63	253.43	64.89	31.80	21.83	12.16	2.04	1.53
83	297.39	258.42	66.86	32.79	21.83	12.47	2.04	1.53
84	303.33	263.59	68.86	33.76	21.83	12.76	2.04	1.53
85+	309.31	268.80	70.86	34.70	21.83	13.01	2.04	1.53
Under 65	617.88	536.92	135.57	66.41	21.83	24.92	2.04	1.53

Calculate your plan cost—Area 2

Please refer to pages 13-14 for descriptions of benefit options and see chart above for area rates.

- Base plan rate (choose one) \$ _____
- Choose optional riders
 - Rider 1—Medicare Part A Deductible \$ _____
 - Rider 2—Medicare Part B Deductible¹ \$ _____
 - Rider 3—Medicare Part B Excess Charges \$ _____
 - Rider 4—Additional Home Health Care \$ _____
 - Rider 5—Foreign Travel Emergency \$ _____
- Your total per month Total = \$ _____
- Apply discounts for which you qualify²
 - 2% Automatic Bank Withdrawal Discount Total x 0.98 = \$ _____
 - OR, 7% Household Discount Total x 0.93 = \$ _____
 - OR, BOTH Discounts Total x 0.9114 = \$ _____

¹This rider is only available to applicants who were first eligible for Medicare prior to Jan. 1, 2020, and who purchase our highest-level base plan.

²Discounts are approximate; actual discount amount will be determined when your application is approved.

Area 3 monthly rates

Age at Time of Enrollment	Base Plans Choose One		Optional Riders					
	Base Plan Only	Base Plan with Copay/ Coinsurance	Rider 1 Choose One		Rider 2	Rider 3	Rider 4	Rider 5
			Part A Deductible 100%	OR Part A Deductible 50%	Part B Deductible ¹	Part B Excess Charges	Additional Home Health Care	Foreign Travel Emergency
65	138.25	120.14	28.11	13.78	21.83	6.48	2.04	1.53
66	145.93	126.81	29.88	14.67	21.83	6.71	2.04	1.53
67	153.64	133.50	31.71	15.54	21.83	6.99	2.04	1.53
68	161.34	140.21	33.51	16.42	21.83	7.25	2.04	1.53
69	169.03	146.90	35.31	17.29	21.83	7.54	2.04	1.53
70	176.74	153.58	37.11	18.17	21.83	7.78	2.04	1.53
71	184.42	160.27	38.91	19.06	21.83	8.06	2.04	1.53
72	192.12	166.96	40.71	19.97	21.83	8.31	2.04	1.53
73	199.83	173.64	42.49	20.82	21.83	8.60	2.04	1.53
74	207.52	180.34	44.31	21.70	21.83	8.88	2.04	1.53
75	215.22	187.02	46.09	22.59	21.83	9.12	2.04	1.53
76	222.93	193.70	47.92	23.47	21.83	9.39	2.04	1.53
77	230.62	200.41	49.70	24.34	21.83	9.67	2.04	1.53
78	238.30	207.09	51.50	25.21	21.83	9.94	2.04	1.53
79	245.98	213.74	53.28	26.10	21.83	10.20	2.04	1.53
80	253.70	220.47	55.11	27.01	21.83	10.48	2.04	1.53
81	258.73	224.84	56.90	27.90	21.83	10.73	2.04	1.53
82	263.85	229.29	58.71	28.77	21.83	11.00	2.04	1.53
83	269.06	233.80	60.49	29.67	21.83	11.28	2.04	1.53
84	274.43	238.48	62.30	30.54	21.83	11.54	2.04	1.53
85+	279.84	243.19	64.11	31.39	21.83	11.77	2.04	1.53
Under 65	559.02	485.77	122.65	60.08	21.83	22.55	2.04	1.53

Calculate your plan cost—Area 3

Please refer to pages 13-14 for descriptions of benefit options and see chart above for area rates.

- Base plan rate (choose one) \$ _____
- Choose optional riders
 - Rider 1—Medicare Part A Deductible \$ _____
 - Rider 2—Medicare Part B Deductible¹ \$ _____
 - Rider 3—Medicare Part B Excess Charges \$ _____
 - Rider 4—Additional Home Health Care \$ _____
 - Rider 5—Foreign Travel Emergency \$ _____
- Your total per month Total = \$ _____
- Apply discounts for which you qualify²
 - 2% Automatic Bank Withdrawal Discount Total x 0.98 = \$ _____
 - OR, 7% Household Discount Total x 0.93 = \$ _____
 - OR, BOTH Discounts Total x 0.9114 = \$ _____

¹This rider is only available to applicants who were first eligible for Medicare prior to Jan. 1, 2020, and who purchase our highest-level base plan.

²Discounts are approximate; actual discount amount will be determined when your application is approved.

Limitations and exclusions

No insurance policy covers everything. Here's a list of things our Medicare supplements do not cover:

- A. Personal comfort items
- B. Routine exams and any related diagnostic x-ray and laboratory tests covered in full by Medicare
- C. Eye exams and hearing exams, except as stated in the policy
- D. Orthopedic shoes or other supporting devices for the feet
- E. Routine foot care not covered by Medicare
- F. Custodial care, including maintenance care or supportive care
- G. Cosmetic surgery, except as stated in the policy
- H. Outpatient prescription drugs
- I. Professional services not provided by a physician, except as required by law
- J. Routine immunizations except if eligible under Medicare and except as stated in the policy
- K. Preparation, fitting, or purchase of eyeglasses or hearing aids, unless covered by Medicare
- L. Care, treatment, filling, removal, or replacement of teeth; dental X-rays, root canals, surgery for impacted teeth, or other surgical procedures to the teeth or supporting structures
- M. Nursing home care costs beyond what is covered by Medicare and the additional 30-day skilled nursing mandated by s. 632.895 (3), Stats
- N. If you terminate your Medicare coverage, expenses which would have been covered by Medicare
- O. Your Medicare Part A Deductible, unless you purchase the Medicare 100% Part A Deductible rider or the Medicare 50% Part A Deductible Rider
- P. Your Medicare Part B Deductible, unless you purchase the Medicare 100% Part B Deductible Rider
- Q. Physician charges above Medicare's approved charge, unless you purchase the Medicare 100% Part B Excess Charges Rider
- R. Home health care beyond 40 visits, unless you purchase the Additional Home Health Care Rider
- S. Any health care treatments, services, or supplies received outside the United States, unless you purchase the Foreign Travel Emergency Rider
- T. Any health care treatments, services, or supplies:
 - Not covered by Medicare, unless specifically stated in the policy
 - You, or anyone on your behalf, aren't legally obligated to pay for
 - Paid for by Medicare or another government entity or program
 - For any injury, occurring on or after your effective date, caused by an act of war
 - Provided by immediate family members or by anyone else who lives with you
 - To the extent covered by worker's compensation or similar laws
 - Provided before the effective date of coverage or after coverage ends
 - Determined by Medicare to be unreasonable or unnecessary
 - For a military service-related condition treated at any military or veterans hospital, or at any hospital contracted by any national government or agency



#1

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IMPORTANT INFORMATION:

In some states, all Medicare supplement insurance plans are offered to qualified individuals under the age of 65 and/or to Medicare-qualified individuals due to disability or end-stage renal disease. *Based on enrollment data submitted to NAIC, 2023. The intent of this advertisement is solicitation of insurance, and contact may be made by the insurer or a licensed agent. Neither Wisconsin Physicians Service Insurance Corporation (WPS), nor its agents, nor products are connected with the federal Medicare program. This plan summary provides only a general description of benefits and limitations. A detailed description of coverage is in the applicable policy. If there is ever a discrepancy between the policy and this document, the policy has final authority.