

Your Logo

Your Phone No.

*** Required fields**

* First Name:

* Last Name:

* Date of Birth: / / (MM/DD/YYYY)

* Gender: ☒ Male ☐ Female

* Smoker: ☐ Yes ☒ No

* Start Date for Coverage:

* Are you currently enrolled in Medicare Parts A and B? ☐ Yes ☐ No ☒ Not sure

* Address:

* City:

* State:

* Zip Code:

* Phone:

* E-mail Address:

See Plans

By clicking on 'See Plans', you consent to receive phone calls from a licensed insurance representative representing top health insurance companies regarding Medicare Advantage, Medicare Supplement and / or Medicare Drug Plans even if you are on the Do Not Call Registry.

Your Logo

Medicare Supplement Plans (15)

Medicare Advantage Plans (0)

Your Phone No.

NARROW YOUR RESULTS

Sort By:

- ☒ Price
☐ Company Name

Insurance Companies:

- ☐ Anthem Supp
☐ Genworth Life
☒ Gerber
☒ United of Omaha

Plan Type:

[Plan F Only](#) | [Clear All](#)

- ☐ Plan A
☒ Plan F
☐ Plan F High Deductible
☒ Plan G
☐ Plan N

Your Personal Info:

Coverage for:
Applicant 67 , M

State & ZIP:
CA , 92123

County:
SAN DIEGO

City:
SAN DIEGO


Coverage Start Date:
9/01/2011

Compare Checked Plans

To compare plans select the check box next to the plan name, then click the Compare Checked Plans button. **You can compare up to 4 plans.**


[View Plan Details](#)

Plan G - Medicare Supplement (SUPP)

 Gerber Life Insurance Company	Basic Benefits	Yes	Part A Deductible	Yes	Monthly Price \$129.18
	Skilled Nursing	Yes	Part B Deductible	No	
	Part B Excess	Yes	Foreign Travel Emergency	Yes	


[View Plan Details](#)

Plan G - Medicare Supplement (Supp)

 UNITED OF OMAHA LIFE INSURANCE COMPANY <small>A MUTUAL OF OMAHA COMPANY</small>	Basic Benefits	Yes	Part A Deductible	Yes	Monthly Price \$138.12
	Skilled Nursing	Yes	Part B Deductible	No	
	Part B Excess	Yes	Foreign Travel Emergency	Yes	


[View Plan Details](#)

Plan F - Medicare Supplement (SUPP)

 Gerber Life Insurance Company	Basic Benefits	Yes	Part A Deductible	Yes	Monthly Price \$150.00
	Skilled Nursing	Yes	Part B Deductible	Yes	
	Part B Excess	Yes	Foreign Travel Emergency	Yes	

[View Plan Details](#)

Plan F - Medicare Supplement (Supp)

 UNITED OF OMAHA LIFE INSURANCE COMPANY <small>A MUTUAL OF OMAHA COMPANY</small>	Basic Benefits	Yes	Part A Deductible	Yes	Monthly Price \$155.20
	Skilled Nursing	Yes	Part B Deductible	Yes	
	Part B Excess	Yes	Foreign Travel Emergency	Yes	

Click here for the U.S. government pdf guide to health insurance for people with Medicare ("Medicare & You", 2011).
Click here for the U.S. government pdf guide to choosing a Medigap policy.

Important notice regarding the use of information provided on this website.



Your Logo

Your Personal Info:

Coverage for:
Applicant 67 , M

State & ZIP:
CA , 92123

County:
SAN DIEGO

City:
SAN DIEGO



Coverage Start Date:
9/01/2011



Insurance Plan Benefit Details and Comparison

[Go Back](#) to add or remove plans, and re-select.

Insurance Plan Summary

Insurer	 UNITED OF OMAHA LIFE INSURANCE COMPANY <small>A MUTUAL OF OMAHA COMPANY</small>	 Gerber Life Insurance Company
Plan	Plan F - Medicare Supplement	Plan F - Medicare Supplement
Estimated Monthly Price	\$155.20	\$150.00
Plan Brochure	Summary Of Benefits	Summary Of Benefits
Application	Application	Application
Email Client	Not available	Not available

Benefits

<u>Basic Benefits - Hospitalization</u>	Yes	Yes
<u>Basic Benefits - All Other</u>	Yes	Yes
<u>Skilled Nursing Coinsurance</u>	Yes	Yes
<u>Medicare Part A Deductible</u>	Yes	Yes
<u>Medicare Part B Deductible</u>	Yes	Yes
<u>Medicare Part B Excess</u>	Yes	Yes
<u>Foreign Travel Emergency</u>	Yes	Yes
<u>High Deductable Plan F</u>	No	No

Enrollment Info

Underwriting Guide	Underwriting Guide	Underwriting Guide
Application Fee		\$25 one time enrollment fee
Broker Hot Line	800-995-9324	877-617-5592
RX Search	RX Lookup	RX Lookup
Household Discount	7% off of monthly premium, Missouri is 12%	No

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[Click here for the U.S. government pdf guide to choosing a Medigap policy.](#)

Important notice regarding the use of information provided on this website

This is not a complete listing of plans available in your service area. For a complete listing please contact 1-800-MEDICARE or consult www.medicare.gov.

This page directs you to information regarding the Medicare benefit plans of various independent health insurance carriers for

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Your Phone No.