



# WPS Medicare Supplement Insurance Plans

**NO WORRIES. NO HASSLES.**

Rates effective Jan. 1, 2024

Plans A, G, and N

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

1-800-236-8809 ▪ [mywpsmedicare.com](https://mywpsmedicare.com)

**WPS**

**HEALTH  
INSURANCE**

Wisconsin Physicians Service  
Insurance Corporation

1717 W. Broadway | Madison, WI 53713



“I get the privilege of helping seniors through every part of their Medicare journey.”

—Jordan  
Sales Representative



## Get to know us

Wisconsin Physicians Service Insurance Corporation (WPS) was founded in 1946 by Wisconsin's State Medical Society. Based in Madison, Wis., WPS is committed to making health care easier for our customers. As a not-for-profit company with a stable rate history<sup>2</sup>, WPS Medicare supplement insurance plans offer great value and peace of mind!

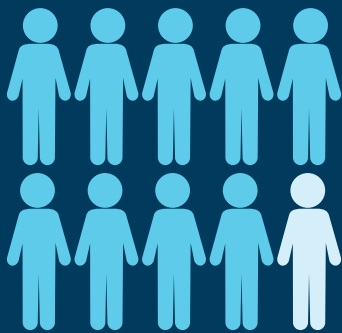
## Choose freedom

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

## WPS gives you a healthy edge

Our customers get special programs and services included at no additional cost.

- Vision care program<sup>3</sup>
- Hearing care program<sup>3</sup>
- 2% discount when you use automatic bank withdrawal
- 7% household discount<sup>4</sup>



9 out of 10

customers surveyed say they would recommend WPS to their friends and family<sup>1</sup>

<sup>1</sup>Based on customer support survey response data, 2022. <sup>2</sup>Based on historical Wisconsin plan rate increases filed with Wisconsin Commissioner of Insurance. <sup>3</sup>Vision 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. <sup>4</sup>Household: 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.



# WPS Health Insurance by the numbers

# 75+

Years making health care easier for our customers

# 60+

Years serving seniors

Providing  
**Medicare supplement insurance**  
across the U.S.



## 16 million beneficiaries<sup>5</sup>

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



## 214.5 million claims paid<sup>5</sup>

across all lines of business



## Over 65,000 policies<sup>5</sup>

Issued and administered by WPS for Medicare supplement insurance.

<sup>5</sup>WPS Health Solutions Enterprise Fact Sheet, 2023.

**“I don't ever see wanting to change to another company. Don't go anywhere else!”**

—Dean  
Customer since 2019



# 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, U.S.-based customer support**—You'll speak with a friendly, knowledgeable, licensed representative who is trained to help get you the answers you need.

When you purchase one of our Medicare supplement insurance plans, it doesn't mean you'll never face challenges or hard times. Instead, it means you'll have more peace of mind when those times come. We've been serving seniors for more than 60 years, and we'll be there for you, too.

Medicare Supplement

**NO WORRIES.**

**NO HASSLES.**

**NO NETWORKS.**

Insurance Plans





# 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 Pen Pal Program

Writing letters can be a fun way to maintain relationships and create new social connections. Sharing stories and receiving mail from someone who cares about you can add joy to your life. Besides, who doesn't enjoy receiving a letter or card in the mail?

The WPS Pen Pal Program is another special perk available to our Medicare supplement insurance customers. We connect customers who express interest in the program to a WPS employee they can correspond with. We send new pen pals a welcome kit to help them get started. Then, participants get to know their pen pal at their own pace.



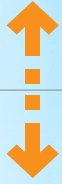
## WPS Cares Community

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.



## Part A

Inpatient/hospital insurance



## Part B

Outpatient/medical insurance

## Part C

Medicare Advantage plans replace Parts A and B and may include prescription drug coverage

## Part D

Prescription drug plans can be used with Medicare supplement insurance

Medicare supplement plans work with Part A and Part B to enhance coverage. With Original Medicare Part A and Part B, you can also add any stand-alone Medicare prescription drug plan you choose.



## Quick look at your plan options

Coverage of	Plan A	Plan G	Plan N
Part A coinsurance	✓	✓	✓
Part A hospice care coinsurance or copayment	✓	✓	✓
Blood (first three pints)	✓	✓	✓
Part B coinsurance	✓	✓	✓ <sup>1</sup>
Part A deductible		✓	✓
Skilled nursing facility coinsurance		✓	✓
Foreign travel emergency <sup>2</sup>		✓	✓
Part B excess charges		✓	

**If you were eligible for Medicare prior to Jan. 1, 2020, please call us for more plan options**

<sup>1</sup>Plan N pays 100% of the Medicare Part B coinsurance, except for copayments of up to \$20 for some office visits and up to \$50 copayments for emergency room visits that do not result in inpatient admissions. <sup>2</sup>Foreign travel coverage for emergency care that is not covered by Medicare is subject to a \$250 calendar year deductible. Benefits are payable at 80% up to a lifetime maximum of \$50,000 for services beginning during the first 60 days of each trip outside of the USA. The level of benefits under the plan directly corresponds to the premium amount.

**Find out more about how Medicare works**

1-800-236-8809  
mywpsmedicare.com

**“WPS makes you feel good, they make you feel relaxed, they make you feel special. That’s what service is all about.”**

—Ike  
Customer since 2016





# WPS Medicare supplement insurance plan overview

Medicare supplement insurance plans are designed to work with Original Medicare to pay some of the out-of-pocket costs that Original Medicare (Part A and Part B) doesn't pay, such as coinsurance, copayments, and deductibles. This overview will get you started. Take a moment to learn about the coverage available through our plans. The plan you choose may include the options below. See the chart on the previous page.

**Part A coinsurance:** Plan pays Part A coinsurance for hospitalization plus 365 days after Medicare ends.

**Part A hospice care coinsurance or copayment:** Plan pays Part A coinsurance for hospice.

**Blood:** Plan pays first three pints each year.

**Part B coinsurance:** Plan pays medical expenses—Part B coinsurance (generally 20% of Medicare-approved expenses) for hospital outpatient services. When selecting Plan N, individual copayments may apply up to a \$20 office visit copayment or \$50 ER visit copayment.

**Part A deductible:** Plan pays Medicare Part A hospital deductible.

**Skilled nursing facility coinsurance:** Plan pays Medicare copayments for 21st through 100th day of stay in a Medicare-approved facility.

**Foreign travel emergency:** After a \$250 calendar year deductible, plan covers 80% of expenses for emergency medical care received outside the United States, beginning during the first 60 consecutive days of a trip, up to a lifetime maximum of \$50,000.

**Part B excess charges:** Plan pays the difference between the Medicare-eligible charge and the amount charged by the provider (no greater than the limiting charge allowed by Medicare), whichever is less.

## Determine your rate area

WPS Medicare supplement insurance plan rate areas Effective Jan. 1, 2024.

Determine your rate area using your ZIP code:



### Area 1

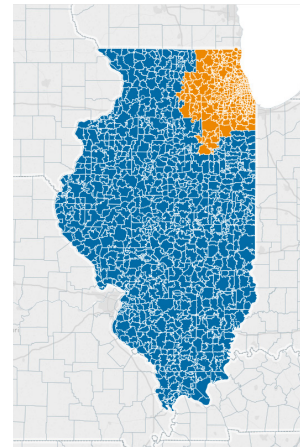
Chicagoland and northeast Illinois

- 600\_\_: All ZIPs that begin with these 3 numbers
- 601\_\_: All ZIPs that begin with these 3 numbers
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- 608\_\_: All ZIPs that begin with these 3 numbers



### Area 2

All other Illinois ZIP codes



Area 1 Area 2

## Relocation

If, in the future, you permanently relocate to another state, Area 1 rates will apply. If you relocate to another Illinois ZIP code, you will pay the rate for the area to which you move.



said their Medicare supplement plan makes it easier to handle medical bills and paperwork.<sup>3</sup>

<sup>3</sup>Seniors' Satisfaction with their Medicare Supplemental Insurance Coverage, conducted by Global Strategy Group on behalf of America's Health Insurance Plans (AHIP), 2023.

# Design your plan

## 1. Determine your rate area (see previous page)

**Area 1**  
See rates on page 9

**Area 2**  
See rates on page 10

## 2. Select your plan (choose one)

**Plan A**  
**Basic benefits:** Hospitalization—Part A coinsurance plus 365 days after Medicare ends; Hospice—Part A coinsurance; and Blood—first three pints each year.

**Part B coinsurance:** Medical Expenses—Part B coinsurance (generally 20% of Medicare-approved expenses) for hospital outpatient services.

**Plan G**  
**Basic benefits:** Hospitalization—Part A coinsurance plus 365 days after Medicare ends; Hospice—Part A coinsurance; and Blood—first three pints each year.

**Part B coinsurance:** Medical Expenses—Part B coinsurance (generally 20% of Medicare-approved expenses) for hospital outpatient services.

**Part A deductible:** Plan pays 100% of Medicare Part A hospital deductible.

**Skilled nursing facility coinsurance:** Plan pays Medicare copayments for 21st through 100th day of stay in a Medicare-approved facility.

**Foreign travel emergency:** After a \$250 calendar year deductible, plan covers 80% of expenses for emergency medical care received outside the United States, beginning during the first 60 consecutive days of a trip, up to a lifetime maximum of \$50,000.

**Part B excess charges:** Plan pays the difference between the Medicare-eligible charge and the amount charged by the provider (no greater than the limiting charge allowed by Medicare, and whichever is less).

**Plan N**  
**Basic benefits:** Hospitalization—Part A coinsurance plus 365 days after Medicare ends; Hospice—Part A coinsurance; and Blood—first three pints each year.

**Part A deductible:** Plan pays 100% of Medicare Part A hospital deductible.

**Part B coinsurance:** Medical Expenses—Part B coinsurance (generally 20% of Medicare-approved expenses) or copayments for hospital outpatient services; copayments of up to \$20 for office visits or up to \$50 for ER visits may apply.

**Skilled nursing facility coinsurance:** Plan pays Medicare copayments for 21st through 100th day of stay in a Medicare-approved facility.

**Foreign travel emergency:** After a \$250 calendar year deductible, plan covers 80% of expenses for emergency medical care received outside the United States, beginning during the first 60 consecutive days of a trip, up to a lifetime maximum of \$50,000.

## 3. 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	Plan A Male	Plan A Female	Plan G Male	Plan G Female	Plan N Male	Plan N Female
65	122.95	111.77	148.33	134.86	128.34	116.67
66	127.33	115.77	153.63	139.67	132.93	120.84
67	131.72	119.75	158.92	144.47	137.52	125.01
68	136.97	124.51	165.25	150.23	142.98	129.98
69	142.20	129.28	171.58	155.98	148.46	134.96
70	147.45	134.05	177.90	161.73	153.92	139.92
71	152.70	138.81	184.23	167.49	159.39	144.90
72	157.93	143.58	190.56	173.23	164.86	149.88
73	163.32	148.47	197.05	179.13	170.48	154.98
74	168.70	153.35	203.53	185.03	176.09	160.09
75	174.06	158.24	210.02	190.93	181.71	165.20
76	179.44	163.13	216.51	196.82	187.33	170.29
77	184.82	168.02	223.00	202.72	192.94	175.39
78	190.12	172.84	229.40	208.54	198.47	180.42
79	195.43	177.66	235.80	214.36	204.00	185.46
80	200.73	182.48	242.19	220.17	209.54	190.49
81	206.03	187.30	248.59	225.99	215.08	195.52
82	211.33	192.13	254.99	231.81	220.62	200.56
83	221.84	201.68	267.67	243.33	231.58	210.52
84	232.37	211.26	280.39	254.89	242.59	220.53
85+	242.89	220.81	293.07	266.43	253.55	230.50
under 65	242.89	220.81	293.07	266.43	253.55	230.50

## Calculate your plan cost—Area 1

Please refer to page 6 for descriptions of benefit options.

1. **Select your plan (choose one)** and add the premium from the chart above to the line labeled **Total** at right.

Plan A     Plan G     Plan N

Your total per month

Total = \$ \_\_\_\_\_

2. **Apply discounts** for which you qualify.<sup>1</sup>

2% Automatic Bank Withdrawal Discount

Total x 0.98 = \$ \_\_\_\_\_

OR, 7% Household Discount

Total x 0.93 = \$ \_\_\_\_\_

OR, BOTH Discounts

Total x 0.9114 = \$ \_\_\_\_\_

<sup>1</sup>Discounts are approximate; actual discount amount will be determined when your application is approved.

# Area 2 Monthly Rates

Age at Time of Enrollment	Plan A Male	Plan A Female	Plan G Male	Plan G Female	Plan N Male	Plan N Female
65	109.76	99.78	132.44	120.39	114.59	104.17
66	113.69	103.35	137.17	124.70	118.68	107.89
67	117.60	106.91	141.89	128.98	122.77	111.60
68	122.29	111.16	147.54	134.13	127.66	116.05
69	126.96	115.43	153.19	139.26	132.54	120.48
70	131.64	119.67	158.84	144.39	137.42	124.92
71	136.33	123.93	164.48	149.53	142.31	129.37
72	141.00	128.19	170.13	154.66	147.20	133.81
73	145.80	132.56	175.92	159.94	152.20	138.38
74	150.61	136.91	181.71	165.20	157.22	142.93
75	155.41	141.29	187.50	170.46	162.23	147.48
76	160.21	145.65	193.30	175.73	167.25	152.04
77	165.01	150.01	199.10	181.00	172.26	156.60
78	169.75	154.32	204.81	186.19	177.20	161.09
79	174.48	158.62	210.51	191.38	182.14	165.59
80	179.22	162.93	216.23	196.57	187.08	170.07
81	183.96	167.23	221.94	201.78	192.02	174.57
82	188.69	171.53	227.66	206.96	196.97	179.06
83	198.07	180.07	238.97	217.24	206.76	187.96
84	207.48	188.61	250.33	227.58	216.59	196.89
85+	216.86	197.14	261.65	237.86	226.38	205.79
under 65	216.86	197.14	261.65	237.86	226.38	205.79

## Calculate your plan cost—Area 2

Please refer to page 6 for descriptions of benefit options.

1. **Select your plan (choose one)** and add the premium from the chart above to the line labeled **Total** at right.

Plan A     Plan G     Plan N

Your total per month

Total = \$ \_\_\_\_\_

2. **Apply discounts** for which you qualify.<sup>1</sup>

2% Automatic Bank Withdrawal Discount

Total x 0.98 = \$ \_\_\_\_\_

OR, 7% Household Discount

Total x 0.93 = \$ \_\_\_\_\_

OR, BOTH Discounts

Total x 0.9114 = \$ \_\_\_\_\_

<sup>1</sup>Discounts 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. Treatment, services, or supplies Medicare doesn't cover, unless this policy specifically provides for them.
- B. Treatment, services, or supplies which neither you nor a party on your behalf has a legal obligation to pay in the absence of insurance.
- C. Treatment, services, or supplies to the extent that they are paid for by Medicare, or would have been paid for by Medicare if you were enrolled in Medicare Parts A and B; or treatment, services, or supplies to the extent that they are paid for by another government entity or program, directly or indirectly. This doesn't apply, though, to health benefits or insurance plans for employees of such entities.
- D. Treatment, services, or supplies you need as a result of war or an act of war occurring on or after the effective date of this policy.
- E. Personal comfort items.
- F. Routine physical exams, eye exams, hearing exams and directly related tests, eyeglasses, or the preparation or fitting of devices such as eyeglasses or hearing aids, except for those services covered by Medicare.
- G. Orthopedic shoes or other supporting devices for the feet, or routine foot care not covered by Medicare.
- H. Custodial care, including maintenance care and supportive care.
- I. Cosmetic surgery unless it's for repairing an accidental injury or for improving the functioning of a malformed body part.
- J. Services provided by members of your immediate family or anyone else living in your household.
- K. Care, treatment, filling, removal, or replacement of teeth; dental x-rays; root canal therapy; surgery for impacted teeth; or other surgical procedures involving the teeth or structures directly supporting them.
- L. Treatment, services, or supplies to the extent that a workers' compensation law or other U.S. or state plan covers them.
- M. Drugs and medicines you buy with or without a physician's prescription.
- N. Treatment, services, or supplies for confinement, surgery, or care before your insurance becomes effective or after coverage ends, except as stated in the policy.
- O. Professional services not provided by a physician.
- P. Treatment, services, or supplies that are deemed unreasonable and unnecessary by Medicare. This includes, but is not limited to, the following: drugs or devices that have not been approved by the Food and Drug Administration (FDA); medical procedures and services performed using drugs or devices not approved by the FDA; and services including drugs or devices not considered safe and effective because they are experimental or investigational.
- Q. Physician charges exceeding the Medicare-eligible expense for treatment, services, or supplies.
- R. Routine immunizations, except if eligible under Medicare.
- S. Treatment, services, or supplies for any preexisting conditions provided during the applicable waiting period.
- T. Treatment of service-related conditions for current or former members of the armed forces by any military or veterans hospital, soldiers home, or any hospital contracted for or operated by any national government or agency.
- U. Medicare Part B deductible.
- V. Home health care services, except for those covered by Medicare.



**“You want an insurer that’s going to be there, somebody that’s been around for a while, has a track record. And that’s what WPS has been for us.”**

**—Brende**  
Customer since 2014



## Vision and hearing programs for a healthy edge

Being able to see and hear well can help make it easier to enjoy your favorite activities and time with your favorite people. Unfortunately, routine hearing and vision care is not currently covered by Original Medicare, and hearing aids and eyeglasses can be expensive. We offer programs that can help make hearing and vision care more affordable. The Hearing Care Solutions and EyeMed programs are available to all our Medicare supplement insurance customers.<sup>1</sup>

<sup>1</sup>Vision 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.





# EyeMed Vision Care Program

All our Medicare supplement insurance plan customers receive



access to the EyeMed Vision Care program at no additional cost.<sup>2</sup> EyeMed offers substantial savings on eyewear at thousands of provider locations nationwide.

EyeMed's provider network includes many familiar national optical retailers.

**Find out more  
about this program**  
**Call 1-800-236-8809**

**Does your vision provider  
accept EyeMed?**

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

Vision Care Services	Customer Benefits
Eye exam (with dilation, as necessary)	\$5 off routine exam \$5 off contact lens exam
<b>Complete Pair Eyeglass Purchase<sup>3</sup></b>	
<b>Frames</b>	
Any available frame at provider location	35% off retail price
<b>Standard Plastic Lenses</b>	
Single vision	\$50 patient responsibility
Bifocal	\$70 patient responsibility
Trifocal	\$105 patient responsibility
<b>Lens Options</b>	
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
<b>Contact Lenses</b> (discount applies to materials only)	
Conventional	15% off retail price
<b>Laser Vision Correction</b>	
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	



Contact your local agent or call WPS today at 1-800-236-8809.

<sup>2</sup>Vision 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. <sup>3</sup>Frame, 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, 2022 through June 30, 2024.



## 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	MSRP or Average Price	You Pay <sup>1</sup>
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

<sup>1</sup>These 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.



**“It’s just incredible, the peace of mind you get from knowing that you’re covered.”**

**Rick** | Customer since 2020

**Find out more about this program**  
**Call 1-800-236-8809 today!**

Medicare Supplement  
**NO WORRIES.**  
**NO HASSLES.**  
**NO NETWORKS.**  
 Insurance Plans<sup>®</sup>















## Medicare supplement insurance plans help give you peace of mind.

Original Medicare covers a lot—about 80% of your approved health care costs. But covering even just the 20% that Medicare leaves behind can be an inconvenience. WPS Medicare supplement insurance plans help reduce these out-of-pocket costs when you need medical care. Join our WPS Medicare supplement insurance plan family today and get worry-free peace of mind you'll enjoy for years to come!

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

1-800-236-8809 ■ [mywpsmedicare.com](https://www.mywpsmedicare.com)

**WPS** | HEALTH  
INSURANCE

**Medicare supplement insurance**

Wisconsin Physicians Service Insurance Corporation (WPS), 1717 W. Broadway, P.O. Box 8190, Madison, WI 53708-8190

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