

SERFF Tracking Number: SFCM-126497085 State: Arkansas  
Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 44858  
Company Tracking Number: SMH-60002.1  
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
Product Name: Medicare Supplement Rewrite-Bundle 1.1  
Project Name/Number: Medicare Supplement Rewrite-Bundle 1.1/SMH-60002.1

## Filing at a Glance

Company: State Farm Mutual Automobile Insurance Company

Product Name: Medicare Supplement Rewrite- SERFF Tr Num: SFCM-126497085 State: Arkansas  
Bundle 1.1

TOI: MS06 Medicare Supplement - Other SERFF Status: Closed-Filed State Tr Num: 44858  
Sub-TOI: MS06.000 Medicare Supplement - Other Co Tr Num: SMH-60002.1 State Status: Filed-Closed

Filing Type: Advertisement

Author: Tammie Mills

Reviewer(s): Stephanie Fowler

Date Submitted: 02/15/2010

Disposition Date: 03/16/2010

Disposition Status: Filed

Implementation Date Requested:

Implementation Date:

State Filing Description:

## General Information

Project Name: Medicare Supplement Rewrite-Bundle 1.1

Status of Filing in Domicile: Pending

Project Number: SMH-60002.1

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 03/16/2010

Explanation for Other Group Market Type:

State Status Changed: 03/16/2010

Deemer Date:

Created By: Tammie Mills

Submitted By: Tammie Mills

Corresponding Filing Tracking Number:

Filing Description:

Re: State Farm Mutual Automobile Insurance Company

Individual Health

NAIC #: 176-25178

Filing #: SMH-60002.1

Long Term Care, Medicare Supplement, Disability Income, Mortgage Disability Income, Individual Credit  
Disability Income and Hospital Income/Hospital Indemnity

Forms:

SERFF Tracking Number: SFCM-126497085 State: Arkansas  
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SMH-60002.1 Health Shopper's Guide  
SMH-60003 ASSU.1 Health General Overview Pivot Sheet – Assurant  
SMH-60003 HUM.1 Health General Overview Pivot Sheet – Humana  
SMH-60004.1 Medicare Information  
SMH-60005.1 Medicare Supplement Doesn't Include all LTC Pivot Sheet  
SMH-60006.1 First Time Buyers of Medicare Supplement Pivot Sheet  
SMH-60015.1 Medicare Supplement Pivot Sheet  
SMH-60033 Timeline for Action

Enclosed for filing on behalf of the State Farm Mutual Automobile Insurance Company of Bloomington, Illinois are the above referenced advertising forms. These forms are being filed for use in your state and contain information regarding Long Term Care, Medicare Supplement, Disability Income, Individual Credit Disability Income and Hospital Income/Hospital Indemnity.

These pieces will be used in the State Farm Agent's office.

We originally filed a majority of these pieces under SERFF #: SFCM-125325845. They were approved on March 4, 2008. We have made updates, in regards to the benefits to comply with the changes in the Medicare Supplement NAIC Model Regulations. We have also updated all of the statistics to make them current.

These pieces are currently pending in the domiciliary state, Illinois.

## Company and Contact

### Filing Contact Information

Tammie Mills, Analyst tammie.mills.csag@statefarm.com  
One State Farm Plaza 309-994-0300 [Phone]  
Bloomington, IL 61710-0001

### Filing Company Information

State Farm Mutual Automobile Insurance Company CoCode: 25178 State of Domicile: Illinois  
One State Farm Plaza Group Code: 176 Company Type:  
Laura Walters / Marketing D-3 Group Name: State ID Number:  
Bloomington, IL 61710 FEIN Number: 37-0533100  
(309) 763-8104 ext. [Phone]

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## Filing Fees

Fee Required? Yes  
Fee Amount: \$400.00  
Retaliatory? No  
Fee Explanation: We are filing 8 forms at this time  
  
8 x \$50.00 (fee per form) = \$400.00  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
State Farm Mutual Automobile Insurance Company	\$400.00	02/15/2010	34193901

SERFF Tracking Number: SFCM-126497085 State: Arkansas  
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	03/16/2010	03/16/2010

*SERFF Tracking Number:* SFCM-126497085      *State:* Arkansas  
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## **Disposition**

Disposition Date: 03/16/2010

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Form	Health Shopper's Guide	Filed-Closed	Yes
Form	Health General Overview Pivot Sheet – Assurant	Filed-Closed	Yes
Form	Health General Overview Pivot Sheet – Humana	Filed-Closed	Yes
Form	Medicare Information	Filed-Closed	Yes
Form	Medicare Supplement Doesn't Include all LTC Pivot Sheet	Filed-Closed	Yes
Form	First Time Buyers of Medicare Supplement Pivot Sheet	Filed-Closed	Yes
Form	Medicare Supplement Pivot Sheet	Filed-Closed	Yes
Form	Timeline for Action	Filed-Closed	Yes

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## Form Schedule

### Lead Form Number:

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed-Closed 03/16/2010	SMH-60002.1	Advertising	Health Shopper's Guide	Revised	Replaced Form #: HLTH-07-003 Previous Filing #: SFCM-125325845		SMH-60002.1_ShopperGuideInfo_03_2010.pdf
Filed-Closed 03/16/2010	SMH-60003 ASSU.1	Advertising	Health General Overview Pivot Sheet – Assurant	Initial			SMH-60003_ASSU.1_HealthPivot_03_2010.pdf
Filed-Closed 03/16/2010	SMH-60003 HUM.1	Advertising	Health General Overview Pivot Sheet – Humana	Revised	Replaced Form #: HLTH-07-029 Previous Filing #: SFCM-125325845		SMH-60003_HUM.1_HealthPivot_03_2010.pdf
Filed-Closed 03/16/2010	SMH-60004.1	Advertising	Medicare Information	Revised	Replaced Form #: HLTH-07-011 Previous Filing #: SFCM-125325845		SMH-60004.1_MedicareSubProd_03_2010.pdf
Filed-Closed 03/16/2010	SMH-60005.1	Advertising	Medicare Supplement Doesn't Include all LTC Pivot Sheet	Revised	Replaced Form #: HLTH-07-005 Previous Filing #: SFCM-125325845		SMH-60005.1_MedSupPivot_03_2010.pdf
Filed-Closed 03/16/2010	SMH-60006.1	Advertising	First Time Buyers of Medicare Supplement Pivot Sheet	Revised	Replaced Form #: HLTH-07-006 Previous Filing #: SFCM-125325845		SMH-60006.1_MedRelatedOptUnder65Pivot_03_2010.pdf
Filed-Closed 03/16/2010	SMH-60015.1	Advertising	Medicare Supplement Pivot Sheet	Revised	Replaced Form #: HLTH-07-004 Previous Filing #: SFCM-125325845		SMH-60015.1_MedicareSupProd_03_2010.pdf

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Product Name: Medicare Supplement Rewrite-Bundle 1.1  
Project Name/Number: Medicare Supplement Rewrite-Bundle 1.1/SMH-60002.1  
Filed- SMH- Advertising Timeline for Action Initial SMH-  
Closed 60033  
03/16/2010 SMH-60033\_Timeli  
neForAction\_  
02\_2010.pdf

# HEALTH SHOPPER'S GUIDE

*The purpose of this communication is the solicitation of insurance.  
Contact will be made by an insurance agent or insurance company.*

## The ABCs of health coverage

Health insurance can seem like a muddled alphabet soup of HMOs, PPOs, and POSs. If you need a little help finding the right health coverage for you and your family—or you're thinking about changing your coverage—this handy shopper's guide will spell it all out for you. Once you've looked it over, your **State Farm Mutual Automobile Insurance Company** (State Farm®) agent will be happy to walk you through your options.

### Before you choose ...

Take a minute to think about your health care needs, and the health coverage you have now. The following questions are a great place to start. Once you've identified your needs, you'll have a better idea of what kind of coverage to look for. Then you can start reviewing the different coverages available. Your agent can help you if you need more information.

### Think about the coverage you need ...

- Do I want to make sure I have coverage for specialists and outpatient therapy?
- Do I place a high priority on choosing my own health care providers?
- Do I travel a lot and need coverage wherever I am?
- How much do I have saved to cover the out-of-pocket expenses and deductibles?
- How much can I afford to pay in premiums monthly?
- Is it important that prescriptions are fully covered?
- Do I have children who need coverage?

Now you're ready to look at the coverages, which include basic coverages, additional coverages, and Medicare-related options.

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## Basic Coverages

These policies cover your basic health care needs. If you have health insurance through your employer, it's probably through one of these plans. You can also purchase this coverage on your own if you're self-employed, or you just need more coverage. These plans include fee-for-service plans (which offer you the freedom to choose any health care provider you wish) and network plans (which offer a network of health care providers for you to choose from).

### Fee-For-Service/Traditional

- You get your choice of health care providers and facilities. However, this type of coverage might not cover services such as check-ups, office visits and vaccinations, so your out-of-pocket expenses could be higher compared to plans that do offer these services.
- You pay a monthly premium and an annual deductible.
- After the deductible is met, the plan pays a percentage of the services, usually 80%. You pay the remaining 20%.
- "Usual and Customary" amounts are covered by the plan. If your physician charges more, you would pay the amount above usual and customary.

### Why you may need this plan:

- Offers great flexibility, since you can have your choice of health care providers.
- If you aren't often in need of medical care, this is a low-cost plan.

### HMO (Health Maintenance Organization)

- You'll be given a list of physicians and hospitals participating in the HMO network.
- From this list, you choose a primary care physician (PCP), who will provide your general medical care.
- Your PCP must approve and arrange all referrals to specialists, who must also be in the HMO network.
- No coverage for care received outside the network.
- Usually no deductibles and limited out-of-pocket expenses.
- Minimal copayments for medical care.
- Manageable fixed monthly premiums.

### Why you may need this plan:

- Total costs are generally reasonable, as long as you only use physicians in the HMO network.
- If you're young and healthy, and not in need of specialized care, the limited choice of providers shouldn't be a problem.

## POS (Point Of Service)

- You choose a primary care physician (your *point of service*) from the POS network of providers.
- Low copayments and no deductibles for health care services within the POS network.
- Your primary care physician may make referrals outside the network, but you'll pay deductibles, coinsurance, and higher copayments.
- For care outside the network, you must complete paperwork and send in bills for payment.

### Why you may need this plan:

- Costs slightly more than an HMO, but offers a wider variety of health care providers.

## PPO (Preferred Provider Organization)

- You'll be given a list of physicians and hospitals participating in the PPO network.
- Medical care outside the network is covered, but higher copayments will apply.
- Self-referrals allowed to specialists inside or outside the network.
- Limited out-of-pocket costs per year.
- You may need to pay an annual deductible.

### Why you may need this plan:

- Greater flexibility. You'll receive coverage for the physician and hospital of your choice.
- Faster access to specialized care, since no referrals are necessary.

## Additional Coverages

These plans supplement your basic health care coverage, minimizing the need to use your savings to pay for uncovered additional medical expenses. These coverages can help you avoid financial strain so you will be able to concentrate on your recovery.

### Supplemental Medical

- Offers a predetermined cash payment to help pay for expenses that arise during a hospital stay or if you are accidentally injured.
- You don't have to use the policy payment for medical-related expenses. You can spend it on anything you like.

#### Why you may need this plan:

- Helps you avoid using your savings to pay for expenses associated with a hospital stay, such as transportation and hotel costs, family meals, etc.

### Disability Income Insurance

- Helps replace lost income if a disabling illness or injury prevents you from working.

#### Why you may need this plan:

- A 20-year-old worker has a 3-in-10 chance of becoming disabled before retirement age.<sup>1</sup>

### Long-Term Care Insurance

- Helps pay for the care you need when you are not able to care for yourself, such as home health care, assisted living or nursing home expenses.

#### Why you may need this plan:

- Over 40 percent of those who receive long-term care services are under age 65.<sup>2</sup>
- Just as you don't wait until you're retired to plan for retirement, you shouldn't wait until you need long-term care to plan for it.

<sup>1</sup>Social Security Administration. Social Security Disability Benefits. SSA Publication No. 05-10029. August 2009.

<sup>2</sup>Kaiser Commission on Medicaid and the Uninsured. Medicaid and Long-Term Care Services and Supports. February 2009.

## Medicare-related options

If you're retired and depend on Medicare for your health coverage, you'll find that Part A and Part B won't pay for everything. So you may be interested in these policies, which work along with Original Medicare to reduce your out-of-pocket health care costs.

### Medicare Supplement

- Covers your share of the costs of Medicare-approved services, such as Part A and Part B deductibles and copayment amounts.

#### Why you may need this plan:

- Because Original Medicare does not cover all your health care expenses, you may have significant out-of-pocket expenses without Medicare Supplement coverage.

### Medicare Part D

- Available to those eligible for Medicare, this coverage may help you save money on your prescriptions and help protect against higher costs in the future.

#### Why you may need this plan:

- Over half of all personal bankruptcies are due to medical costs. With nearly 20 percent of these cases, prescription drug costs were the largest single out-of-pocket expense.<sup>3</sup>

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Not connected with or endorsed by the U.S. Government or the federal Medicare program.

<sup>3</sup>Himmelstein, D.; Warren, E.; Thorne, D.; Woolhandler, S. Medical Bankruptcy in the United States, 2007: Results of a National Study. *American Journal of Medicine*, Vol. 122, Issue 8, August 2009.

## Medicare alternative

The following type of policy is actually a substitute for Original Medicare, and offers you extra coverage besides.

### Medicare Advantage

- Combines your Medicare Part A and Part B coverage. Many of these plans offer extra benefits (such as lower copayments, along with vision, hearing and dental coverage and prescription drug coverage).
- Available in Fee-For-Service, HMO, or PPO plans.

### Why you may need this plan:

- Gives you the convenience of having all your Medicare coverages under one plan.

## State Farm is here for your health

Choosing the right health care coverage is an important decision. Fortunately, your State Farm agent is here to help. For more details about any of these coverages, be sure to ask your agent.

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Please Note: This is a marketing tool intended for use in the sale of insurance and potential contact may be made by a State Farm agent. This guide is intended to assist in learning more about the health insurance coverage you might need, it is not a specific recommendation. The actual health plan needed to meet individual or family needs might be significantly different. State Farm does not guarantee the health plan selected will meet the health coverage needs of you or your family. You retain ultimate responsibility for selecting coverage.

State Farm Mutual Automobile Insurance Company  
Bloomington, IL

[statefarm.com](http://statefarm.com)<sup>®</sup>

# HEALTH

*The purpose of this communication is the solicitation of insurance.  
Contact will be made by an insurance agent or insurance company.*

## Coverage for your most important asset—your health

Today, it's more important than ever to have the right health coverage. Think about it:

- If you were disabled and couldn't work, would your existing coverage replace your lost earnings?
- If you needed specialized medical care, would a possibly time-consuming referral be required first?
- If your medical expenses exceeded your current coverage limits, how would you pay?
- Do you have supplemental coverage for copayments, deductibles and coinsurance expenses?

With health care costs rising eight percent per year<sup>1</sup>—much faster than the rate of inflation—you don't want to be caught without enough coverage. Fortunately, finding the coverage you and your family need is as easy as talking to your **State Farm Mutual Automobile Insurance Company** (State Farm<sup>®</sup>) agent. You may be surprised to learn they offer a variety of basic and supplemental health coverages. Your agent can assess your needs and help you choose just the right coverage.



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Time Insurance Company (Assurant Health<sup>®</sup>) offered through your State Farm agent.



<sup>1</sup>12th Annual National Business Group on Health/Watson Wyatt Survey Report 2007.

## Health Insurance product overview

### Basic health coverage

Start here. These plans offer basic health coverage. They're for people who aren't covered by their employer or any other group, or are simply looking for more choices. Through an alliance with Time Insurance Company, marketing health products under the Assurant Health® Plan, State Farm agents can offer you two kinds of individual coverage.<sup>2</sup>

#### **Individual Medical (Not available in HI, MA, ME, NJ, NY, RI, VT, WA)**

- Individual Medical allows you to choose and pay for a plan that's right for you including high deductible health plans that can be used with or without a Health Savings Account. Optional coverages are available which allow for even greater plan customization.

#### **Short Term Medical (Not available in CT, MA, NJ, NY, RI, VT)**

- A temporary health plan designed for people who are between permanent health plans. Coverage can be purchased for as few as 30 days or as many as 365 days (varies by state).

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Assurant Health is the brand name for products underwritten and issued by Time Insurance Company, Milwaukee, WI, which is financially responsible for these products. No member of the State Farm Family of companies is financially responsible for these products. Assurant, Assurant Health, and Time Insurance Company are not affiliates of State Farm.

<sup>2</sup>Coverage availability varies by state.

## **Additional coverages through State Farm**

Once you have basic health coverage, you may want to consider the following types of coverage. They help pay for certain expenses that a basic plan doesn't cover.

### **Supplemental Medical Insurance<sup>3</sup>**

- Offers a predetermined cash payment to help pay for expenses that arise during a hospital stay or if you are accidentally injured. You don't have to use the policy payment for medical-related expenses. You can spend it on expenses such as transportation and hotel costs, family meals, etc.

### **Disability Insurance<sup>4</sup>**

- Helps replace lost income if a disabling illness or injury prevents you from working.

### **Long-Term Care Insurance**

- Enables you to pay for your own care, so you can maintain your financial independence and choose where you want to live while you are cared for.

## **Medicare-related option**

If you're retired and depend on Medicare for your health coverage, you'll find that Part A and Part B won't pay for everything. So you may be interested in supplemental coverage.

### **Medicare Supplement Insurance**

- Covers your share of the costs of Medicare-approved services, such as Part A and Part B deductibles and copayment amounts.

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Not connected with or endorsed by the U.S. Government or the federal Medicare program.

<sup>3</sup>Supplemental Medical is the marketing name for the Hospital Income, Hospital Confinement Indemnity Policy, Hospital Indemnity, Daily Hospital Confinement Indemnity, Supplemental Hospital Indemnity, Hospital Confinement Indemnity Coverage policy.

<sup>4</sup>Disability Insurance may include Disability Income, Mortgage Disability Income, or Individual Credit Disability Income.

## State Farm is here for your health

Choosing the right health care coverage is an important decision. Fortunately, your State Farm agent is here to help. For more details about any of these coverages, be sure to ask your agent.

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Please Note: This is a Marketing tool intended for use in the sale of insurance. Completion of an application for a State Farm insurance policy will require contact with a State Farm insurance agent.

State Farm Medicare Supplement Plans are available to qualified applicants under the age of 65 who meet applicable eligibility requirements in states where it is mandated to issue to under age 65 applicants. Not connected with or endorsed by the U.S. Government or the federal Medicare program.

This brochure provides a brief, general description of the coverage provided by this policy. It is not a contract and certain exclusions and limitations apply. A complete statement of the coverage provided is found only in the policy itself. Policy coverages, exclusions and limitations may vary in some states. For exact terms and conditions see:

Disability Income Insurance policy series 97053 or 97054, 97052 (in VT)

Mortgage Disability Income Insurance policy series 97055, 97044 (in VT)

Individual Credit Disability Income Insurance policy series 97021

Hospital Income, Hospital Confinement Indemnity Policy, Hospital Indemnity, Daily Hospital Confinement Indemnity, Supplemental Hospital Indemnity, Hospital Confinement Indemnity Coverage policy series 97024

Long Term Care Insurance policy series 97058 (available in CA, CT, IN), 97059, 97060, and 97061

Medicare Supplement Insurance Policy series 97037 H, 97038 H, 97039 H, 97041 H (in DE, NY, PA), 97049 H (in WI), 97049 H/97050 H (in MN).

Contact your agent for additional details and cost.

State Farm Mutual Automobile Insurance Company  
Bloomington, IL

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# HEALTH

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- If you were disabled and couldn't work, would your existing coverage replace your lost earnings?
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- If your medical expenses exceeded your current coverage limits, how would you pay?
- Do you have supplemental coverage for copayments, deductibles and coinsurance expenses?

With health care costs rising eight percent per year<sup>1</sup>—much faster than the rate of inflation—you don't want to be caught without enough coverage. Fortunately, finding the coverage you and your family need is as easy as talking to your **State Farm Mutual Automobile Insurance Company** (State Farm®) agent. You may be surprised to learn they offer a variety of basic and supplemental health coverages. Your agent can assess your needs and help you choose just the right coverage.



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Humana offered through your State Farm agent.

**HUMANA**  
Guidance when you need it most



<sup>1</sup>12th Annual National Business Group on Health/Watson Wyatt Survey Report 2007.

## Health Insurance product overview

### Coverages through State Farm

You may want to consider the following types of coverage available through State Farm.

#### Supplemental Medical Insurance<sup>2</sup>

- Offers a predetermined cash payment to help pay for expenses that arise during a hospital stay or if you are accidentally injured. You don't have to use the policy payment for medical related expenses. You can spend it on expenses such as transportation and hotel costs, family meals, etc.

#### Disability Insurance<sup>3</sup>

- Helps replace lost income if a disabling illness or injury prevents you from working.

#### Long-Term Care Insurance

- Enables you to pay for your own care, so you can maintain your financial independence and choose where you want to live while you are cared for.

### Medicare-related options

If you're retired and depend on Medicare for your health coverage, you'll find that Part A and Part B won't pay for everything. So you may be interested in these policies, which work along with Original Medicare to reduce your out-of-pocket health care costs.

#### Medicare Supplement Insurance

- Covers your share of the costs of Medicare-approved services, such as Part A and Part B deductibles and copayment amounts.

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<sup>2</sup>Supplemental Medical is the marketing name for the Hospital Income, Hospital Confinement Indemnity Policy, Hospital Indemnity, Daily Hospital Confinement Indemnity, Supplemental Hospital Indemnity, Hospital Confinement Indemnity Coverage policy.

<sup>3</sup>Disability Insurance may include Disability Income, Mortgage Disability Income, or Individual Credit Disability Income.

## Medicare product alternatives

Through an alliance with Humana®, a health insurer, State Farm agents can offer Medicare Part D prescription drug coverage and Medicare Advantage.<sup>4</sup>

### Medicare Part D Coverage

- Medicare prescription drug coverage is known as Medicare Part D, yet it isn't provided by the government. It's available through insurers approved by Medicare. This coverage can help pay for your prescriptions, and even get you extra help with your prescription drug costs if you have a limited income.

### Medicare Advantage (not available in AK, CT, DC, DE, MA, MD, ME, NJ, RI)

- Medicare Advantage Plans are health plan options that are approved by Medicare and run by private companies. These plans are an alternative to original Medicare. They combine the benefits of Medicare Part A and Part B, and typically offer extra benefits (such as lower copayments; vision, hearing and dental coverage; and prescription drug coverage).

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Humana products are offered by Humana Insurance Company, Humana Insurance Company of New York, and Humana Health Plan Benefit of Louisiana, Inc., which are financially responsible for these products. No member of the State Farm family of companies is financially responsible for these products. Humana Insurance Company, Humana Insurance Company of New York, and Humana Health Plan Benefit of Louisiana, Inc., are not affiliates of State Farm.

<sup>4</sup>HMO, PPO, PDP, and PFFS plans with a Medicare contract available to anyone entitled to Part A and/or enrolled in Part B of Medicare through age or disability (for MA plans, individuals must have both Part A and Part B).

## State Farm is here for your health

Choosing the right health care coverage is an important decision. Fortunately, your State Farm agent is here to help. For more details about any of these coverages, be sure to ask your agent.

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Please Note: This is a Marketing tool intended for use in the sale of insurance. Completion of an application for a State Farm insurance policy will require contact with a State Farm insurance agent.

State Farm Medicare Supplement Plans are available to qualified applicants under the age of 65 who meet applicable eligibility requirements in states where it is mandated to issue to under age 65 applicants. Not connected with or endorsed by the U.S. Government or the federal Medicare program.

This brochure provides a brief, general description of the coverage provided by this policy. It is not a contract and certain exclusions and limitations apply. A complete statement of the coverage provided is found only in the policy itself. Policy coverages, exclusions and limitations may vary in some states. For exact terms and conditions see:

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Mortgage Disability Income Insurance policy series 97055, 97044 (in VT)

Individual Credit Disability Income Insurance policy series 97021

Hospital Income, Hospital Confinement Indemnity Policy, Hospital Indemnity, Daily Hospital Confinement Indemnity, Supplemental Hospital Indemnity, Hospital Confinement Indemnity Coverage policy series 97024

Long Term Care Insurance policy series 97058 (available in CA, CT, IN), 97059, 97060, and 97061

Medicare Supplement Insurance policy series 97037 H, 97038 H, 97039 H, 97041 H (in DE, NY, PA), 97049 H (in WI), 97049 H/97050 H (in MN).

Contact your agent for additional details and cost.

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# MEDICARE

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## What you need to know about Medicare

### Medicare Overview

Medicare is a federal health insurance program for Americans age 65 or older. This coverage is also available to adults under age 65 with qualifying disabilities, and people of any age with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant). Most people are covered through the Original Medicare Plan, which includes Medicare Part A (hospital inpatient care) and Medicare Part B (medical services). You probably won't need to pay a monthly premium to get Part A coverage, because it's considered paid for by the Medicare taxes you or your spouse paid while working. Medicare Part B is optional, and there is a monthly premium. How and when you should apply for this coverage will depend on your situation.

### Part A – Hospital Insurance

This helps cover medically necessary care, such as:

- Care received in hospitals, critical access hospitals, and mental health care facilities. Includes a semi-private room, meals, general nursing, and most hospital services and supplies.
- Skilled Nursing Facility care, after a three-day hospital stay for a related illness or injury.
- Hospice care.
- Home health care, including medically necessary part-time skilled nursing care, home health aide services, physical and occupational therapy, and medical supplies for home use.
- Pints of blood you receive during a covered stay at a hospital or skilled nursing facility.

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## **Part B – Medical Insurance**

This helps cover outpatient medical services, such as:

- Ambulance transportation, when transportation in any other vehicle would endanger your health.
- Cardiovascular screenings to prevent heart disease or stroke.
- Screenings for diabetes and some diabetic supplies.
- Exams and tests for colorectal, prostate, breast, and cervical cancer.
- Annual flu shots.
- Emergency room services.
- Doctor services (except for routine medical exams).
- Kidney dialysis services and supplies.
- Annual glaucoma tests for those at high risk for glaucoma.
- Outpatient medical and surgical services and supplies, and outpatient hospital services.
- Diagnostic tests including X-rays, MRIs, CT scans, and EKGs.

## **What doesn't Medicare pay for?**

**Some items and services that Medicare doesn't cover include (but aren't limited to):**

- Long-term care
- Routine dental care
- Dentures
- Cosmetic surgery
- Acupuncture
- Hearing aids
- Exams for fitting hearing aids

## Medicare vs. Medicaid

Both Medicare and Medicaid are health insurance programs. As mentioned previously, Medicare is the federal health insurance for people age 65 or older and those with qualifying disabilities. The eligibility and basic benefits are similar throughout the country.

Medicaid is a public health care program that serves low-income individuals. Though funded by both federal and state money, Medicaid is administered by the state. Each state's Medicaid program has different eligibility rules and benefits. It is possible for someone to enroll in both Medicare and Medicaid.

Source: U.S. Department of Health and Human Services. Medicare & You 2010. Section 3, Programs for People with Limited Income and Resources. CMS Publication No. 10050. Revised September 2009.

The following chart summarizes the differences between the two programs.

	MEDICARE	MEDICAID
Who is eligible	Medicare covers almost everyone 65 or older, certain people on Social Security disability, and some people with permanent kidney failure.	Medicaid covers low-income people and others in financial need, which may include those over 65 who are also on Medicare.
Coverage provided	<p><b>Part A</b> – Hospital Insurance provides basic coverage for hospital stays and post-hospital nursing facility care and home health care.</p> <p><b>Part B</b> – Medical insurance pays most of basic doctor and laboratory costs, and some outpatient medical services usually 80 percent, including medical equipment and supplies, home health care and physical therapy. It does not cover prescription drugs.</p>	In many states, Medicaid covers the services and costs that Medicare does not, which may include things such as prescription drugs, diagnostic and preventative care, and eyeglasses.
Costs to consumer	You must pay a deductible for both Medicare Part A and Part B. You are also responsible for the copayments for extended hospital stays. Under Part B, you must pay a monthly premium, as well as a portion of doctors' services, usually 20 percent.	Medicaid can pay Medicare deductibles and the copayment amount that Medicare does not cover. Medicaid can also pay the Medicare Part B premium.

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Source: U.S. Department of Health and Human Services. Medicare & You 2010. Section 3, Programs for People with Limited Income and Resources. CMS Publication No. 10050. Revised September 2009.

# How to get started with Medicare

## Steps you should take

Before you turn 65, there are steps you should take to help ensure your health care needs will be taken care of. These steps include:

### Step 1

- Research your health care options through the helpful information included in the Consumer Resources section on the next page.

### Step 2

- Speak to a local SHIP (Senior Health Insurance Program) advisor for more information about your health care options.

### Step 3

- Call your local State Farm agent and schedule an appointment to discuss your Medicare-related insurance options.

### Step 4

- Medicare eligibility and enrollment are handled by the Social Security Administration. You can contact Social Security at 1-800-772-1213 to enroll in Medicare or determine your eligibility. You can also go to your local Social Security office for assistance in completing the enrollment process.
  - If you're already collecting benefits from Social Security, you will automatically get Part A and Part B. If you get Part B automatically and you don't want to keep it, you must follow Medicare's directions to let Medicare know you don't want it. Otherwise, you'll be charged the Part B premium.
  - If you're age 65 or older and you aren't getting Social Security (for instance, because you're still working), you won't get Part A and Part B automatically; you need to contact Social Security to sign up for them. Some people who meet certain conditions can apply online at [socialsecurity.gov](http://socialsecurity.gov).
  - If you didn't sign up for Part A and/or Part B when you first became eligible, there are different enrollment periods when you can apply. (You may have to pay a higher premium for late enrollment.)

## Consumer resources

**Medicare Helpline** – Call toll-free 1-800-MEDICARE (1-800-633-4227)

**Social Security Administration** – 1-800-772-1213

Note: To get any Medicare Publication in Spanish, large print, Braille, or audiotape, call 1-800-633-4227.

### Helpful Web Links

- The Official U.S. Government Site for Medicare Information: [medicare.gov](https://www.medicare.gov)
- American Cancer Society: [cancer.org](https://www.cancer.org)
- American Diabetes Association: [diabetes.org](https://www.diabetes.org)
- Social Security Administration: [ssa.gov](https://www.ssa.gov)
- Senior Sites: [seniorsites.com](https://www.seniorsites.com)

## State Farm is here for your health

Choosing the right health care coverage is an important decision. Fortunately, your State Farm agent is here to help. For more details about any of these coverages, be sure to ask your agent.

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# MEDICARE SUPPLEMENT AND LONG-TERM CARE



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## Medicare Supplement covers a lot (but not all long-term care expenses)

### What if—with just one insurance policy—you could:

- Pay for thousands of dollars worth of future long-term care costs—for the price of a few nice dinners every month?
- Get the long-term care coverage that your Medicare Supplement Plan doesn't offer?
- Avoid tapping into the retirement assets that you've worked so hard to save?
- Reduce the risk of becoming a financial burden to your family?

With a **State Farm Mutual Automobile Insurance Company** (State Farm®) Long-Term Care Insurance policy, you could do all that and more.

The fact is, about two-thirds of people over age 65 will require at least some type of long-term care services during their lifetime.<sup>1</sup> So rather than using your savings to pay these bills—or burdening your family with the costs—you may want to consider a Long-Term Care insurance policy. That way, you'll be able to pay for the care you need when you're not able to care for yourself.

### Paying for long-term care: Myths and realities

MYTHS	REALITIES
My Medicare Supplement Plan or Long-Term Disability Plan will cover long-term care costs.	Actually, they won't. These policies are not designed to cover expenses for ongoing long-term care services.
I'll pay for my long-term care costs out of my own savings.	Home health aides average \$18.50 an hour, <sup>2</sup> and nursing home costs average \$203 a day. <sup>3</sup> How long could you pay for these expenses before you spend all of your savings?

<sup>1</sup>AARP Public Policy Institute. Long Term Trends. 2007.

<sup>2</sup>Genworth Financial. Genworth Financial 2009 Cost of Care Survey. Conducted by CareScout, an independent research firm. April 2009.

<sup>3</sup>Based on rates for a private nursing home room. Genworth Financial. Genworth Financial 2009 Cost of Care Survey. Conducted by CareScout, an independent research firm. April 2009.



MYTHS	REALITIES
Medicare will pay for it.	Medicare only pays for a limited amount of skilled care to help you recover from an acute condition as long as you are improving. It has limited benefits for custodial care for short periods of time.
I'll spend all of my money until I qualify for Medicaid.	When Medicaid pays your long-term care costs, the government may limit benefits for specific services or require additional criteria be satisfied before approving or paying benefits. This may mean they only pay for care in certain nursing homes or limit the type and number of home health care services you might prefer and need. Be sure to check with facilities and home care agencies in your area to learn of any requirement or limitations before securing services.
My family will take care of me.	With long-term care insurance, your family can spend quality time with you, instead of spending their money and time taking care of you.

## State Farm is here for your health

Choosing the right health care coverage is an important decision. Fortunately, your State Farm agent is here to help. For more details about any of these coverages, be sure to ask your agent.

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Please Note: This is a Marketing tool intended for use in the sale of insurance. Completion of an application for a State Farm insurance policy will require contact with a State Farm insurance agent.

State Farm Medicare Supplement Plans are available to qualified applicants under the age of 65 who meet applicable eligibility requirements in states where it is mandated to issue to under age 65 applicants. Not connected with or endorsed by the U.S. Government or the federal Medicare program.

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Long Term Care Insurance policy series 97058 (available in CA, CT, IN), 97059, 97060, and 97061  
Contact your agent for additional details and cost.

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# MEDICARE-RELATED OPTIONS-PRE-PLANNING

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## More muscle for Medicare

When you turn 65, how do you plan to pay for expenses such as:

- Annual Medicare Part A and Part B deductibles?
- Your prescriptions?
- Daily coinsurance payments for hospital stays?
- Coinsurance for outpatient services?
- Emergency medical care outside the U.S.?

These are all expenses that Medicare just doesn't cover. And these expenses can really add up. In fact, over half of all medical bankruptcies are due to medical costs.<sup>1</sup> Fortunately, your **State Farm Mutual Automobile Insurance Company** (State Farm<sup>®</sup>) agent is here to help. If you want to help strengthen your Medicare plan, ask your agent about Medicare-related insurance options.

### Medicare at a glance

Medicare is the government-managed health insurance program for people age 65 and older, and others who qualify due to disability. Medicare Part A helps cover your basic inpatient care during hospital stays, while Medicare Part B helps cover your doctors' services and outpatient care. There usually isn't a monthly payment (or premium) required to receive Part A coverage. Also, most people are enrolled automatically in Part A. However, you will need to pay a monthly premium to receive Part B coverage.



Humana offered through your State Farm agent.



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<sup>1</sup>Himmelstein, D.; Warren, E.; Thorne, D.; Woolhandler, S. Medical Bankruptcy in the United States, 2007: Results of a National Study. American Journal of Medicine, Vol. 122, Issue 8, August 2009.

SMH-60006.1

## Medicare Supplement Insurance

Medicare Supplement Plans are health insurance policies that cover your share of the costs of Medicare-approved services, such as Part A and Part B deductibles and copayment amounts. State Farm offers four different Medicare Supplement Plans:

- **Plan A:** Covers Part A hospitalization coinsurance and coverage for 365 additional days after Medicare benefits end, Part B medical expenses coinsurance, Part A cost sharing for Hospice Care, and the first three pints of blood each year.
- **Plan B:** The coverages included in Plan A plus the Part A inpatient hospital deductible and cost sharing for Hospice care. (Only available in NY, PA, DE.)
- **Plan C:** The coverages included in Plan A, plus the Part A inpatient hospital deductible, Part B deductible, skilled nursing facility coinsurance, and foreign travel emergency coverage.
- **Plan F:** The coverages included in Plan C, plus coverage for Part B excess charges. (Not available in VT.)

Your agent can help you choose the right plan for your needs.

### *To enroll in a Medicare Supplement Plan...*

- First, meet with your State Farm agent and see if a Medicare Supplement Plan is right for you.
- The best time to enroll is during your Medicare Supplement open enrollment period, which is the six month period after the start of your Part B coverage.

Even with a Medicare Supplement Plan, you won't have coverage for prescription drug costs. That's why a Medicare Part D Plan might be a good idea.

## Medicare Part D

Although these prescription drug plans are known as “Medicare Part D,” they’re only available from private insurers—not from the government. Thanks to a State Farm alliance with Humana<sup>®</sup>,<sup>2</sup> State Farm agents can offer Humana prescription drug plans that may help reduce your prescription costs. These plans feature different levels of coverage depending on your needs.

### *To enroll in a Medicare Part D Plan...*

You can join any of these plans generally during the three months prior to the month you turn 65, the month you turn 65, and the three months after you turn 65. It’s important to enroll during this time as costs may increase after this period. The earlier you join, the better off you’ll be.

You can even purchase both a Part D and a Medicare Supplement Plan, and help strengthen your coverage even more.

## Medicare Advantage Plans

Again, through a State Farm alliance with Humana, State Farm agents can offer Medicare Advantage Plans. Like prescription drug coverage, Medicare Advantage Plans are health plan options that are approved by Medicare and administered by private health insurance companies. These plans are an alternative to Original Medicare. They provide all Part A and Part B benefits and must cover at least all of the medically-necessary services that the Original Medicare Plan provides. They typically offer extra benefits which may include prescription drug coverage. Therefore, if you join a Medicare Advantage Plan you generally get all your Medicare-covered health care through that one plan.

### *To enroll in a Medicare Advantage Plan...*

As with a Medicare Part D Plan, you can join a Medicare Advantage Plan generally during the three months prior to the month you turn 65, the month you turn 65, and the three months after you turn 65. It’s important to enroll during this time as costs may increase after this period. The earlier you join, the better off you’ll be.

You can also join during the Annual Election Period (see [medicare.gov](https://www.medicare.gov) for details).

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Humana products are offered by Humana Insurance Company, Humana Insurance Company of New York, and Humana Health Plan Benefit of Louisiana, Inc., which are financially responsible for these products. No member of the State Farm family of companies is financially responsible for these products. Humana Insurance Company, Humana Insurance Company of New York, and Humana Health Plan Benefit of Louisiana, Inc., are not affiliates of State Farm.

<sup>2</sup>HMO, PPO, PDP, and PFFS plans with a Medicare contract available to anyone entitled to Part A and/or enrolled in Part B of Medicare through age or disability (for MA plans, individuals must have both Part A and Part B).

## State Farm is here for your health

Choosing the right health care coverage is an important decision. Fortunately, your State Farm agent is here to help. For more details about any of these coverages, be sure to ask your agent.

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Contact your agent for additional details and cost.

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# MEDICARE SUPPLEMENT

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## Picks up where your Medicare leaves off

Medicare Part A and Part B will cover a lot of your health expenses. But there are plenty of expenses that the Original Medicare Plan won't cover. So you may be wondering: If Medicare won't pay for something, what are my options?

You could simply:

- Pay for it yourself with your savings and retirement income.
- Spend all of your assets until you qualify for Medicaid.

Here's the problem: choosing either of these options could mean using up all of your savings.

### What is Medicare Supplement Insurance?

Medicare Supplement Plans help pay some of your share of health care costs, such as coinsurance, copayments, or deductibles, not covered by the Original Medicare Plan. Some of these plans also cover certain hospital or medical services not covered by Medicare.

Once you have a Medicare Supplement Plan, both your plan and Medicare will help pay for your covered health care, lowering your out-of-pocket costs and giving you confidence that your health insurance needs are covered.

If you can't get Medicare Supplement insurance from your former employer or union, you may want to look into a policy from a private insurance company such as **State Farm Mutual Automobile Insurance Company** (State Farm®).

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## What do Medicare Supplement Plans pay for?

State Farm offers four Medicare Supplement Plans: Plan A, Plan B (offered in NY, DE, PA), Plan C, and Plan F.

BENEFITS	PLAN A	PLAN B	PLAN C	PLAN F
<b>Hospitalization:</b> Part A coinsurance plus coverage for 365 additional days after Medicare benefits end	✓	✓	✓	✓
<b>Medical expenses:</b> Part B coinsurance	✓	✓	✓	✓
<b>Blood:</b> First three pints of blood each year	✓	✓	✓	✓
<b>Hospice care</b>	✓	✓	✓	✓
Part A Inpatient Hospital Deductible		✓	✓	✓
Part B Deductible			✓	✓
Skilled Nursing Facility Coinsurance			✓	✓
<b>Foreign Travel Emergency Coverage:</b> 80% of the cost of emergency care beginning during the first 60 days of each trip (after you pay the \$250 deductible)			✓	✓
<b>Part B Excess Charges:</b> 100% of the excess charge above Medicare's reasonable charge if medical provider does not accept Medicare assignment				✓

## What doesn't Medicare Supplement insurance pay for?

There are some medical expenses that are not covered by Medicare Supplement insurance, such as:

### Long-term care

Long-term care includes services such as assistance with walking, eating, getting in or out of bed and taking medicine—the kind of care that helps people maintain their current condition (also known as custodial care). These are services you may need as you get older. Today, about one in five Americans older than 65 need help with everyday activities.<sup>1</sup>

Neither the Original Medicare Plan, nor a Medicare Supplement Plan, will cover the cost of long-term care (a home health aide, for example, costs an average of \$18.50 an hour)<sup>2</sup> A Long-Term Care insurance policy from State Farm can help you avoid using your assets to pay for your daily care. Also, with the policy proceeds you can pay professional caregivers, rather than relying on your family to care for you. That can save your loved ones a lot of trouble, and may even help preserve their health. In fact, family caregivers suffer from higher rates of physical ailments (including acid reflux, headaches, and pain/aching) compared to non-caregivers.<sup>3</sup> Talk to your State Farm agent for details on coverage, costs, restrictions and renewability of State Farm's Long-Term Care insurance.

### Prescription drugs

If you're about to enroll in Medicare, prescription drugs are probably an important part of your overall health plan. You'll want to make sure your prescription expenses are covered. Fortunately, prescription drug coverage is available. Please go to **medicare.gov** for more information.

### Other non-covered expenses include:

- Private-duty nursing
- Vision or dental care
- Hearing aids

There are other restrictions and limitations. Ask your State Farm agent for more information, or go to **medicare.gov**.

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<sup>1</sup>Long-Term Care Insurance: Protection for Your Future. American Council of Life Insurers. Washington, DC. 2007.

<sup>2</sup>Genworth Financial. Genworth Financial 2009 Cost of Care Survey. Conducted by CareScout, an independent research firm. April 2009.

<sup>3</sup>Evercare in collaboration with National Alliance for Caregiving. Evercare® Study of Caregivers in Decline: A Close-up Look at the Health Risks of Caring for a Loved One. National Alliance for Caregiving: Bethesda, MD. Evercare: Minnetonka, MN. 2006

## How does the Medicare Supplement Claim Process work?

Here's the good news: You won't have to do much at all. Most of the time your claim will be submitted for processing automatically.<sup>4</sup> You will know whether charges were submitted to State Farm by looking at your Medicare Summary Notice (MSN). If charges were submitted to State Farm, your MSN will say the charge(s) was forwarded to State Farm or your secondary carrier. If there is no indication on the MSN that the charge has been forwarded, you should submit a copy of your MSN to us.

How your benefits are paid can vary depending on whether or not your health care provider accepts assignment (most do). Be sure to ask your providers if they accept assignment. For a full explanation of what assignment means, see **medicare.gov**.

## State Farm is here for your health

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Contact your agent for additional details and cost.

<sup>4</sup>In a limited number of claims, an authorization to release information may be needed to allow us to contact your health care providers for some additional information. Should that be the case, we will contact you.

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# TIMELINE FOR ACTION

Age/Month	Action Item
64 + 7 months	Begin researching your health care options using the enclosed materials from your <b>State Farm Mutual Automobile Insurance Company</b> (State Farm®) agent.
64 + 8 months	Speak to a local SHIP (Senior Health Insurance Program) advisor for more information about your health care options.
64 + 9 months	Call your State Farm agent and schedule an appointment to see if a Medicare Supplement plan fits your needs.
64 + 10 months	Go to your local Social Security office and meet with an advisor to determine your eligibility for Medicare & Social Security benefits, as well as assistance in completing the enrollment process.
64 + 11 months	Purchase a Medicare Supplement policy that will help you be better prepared for your future health care needs.
Congratulations! You're 65	You can feel confident that you have completed the necessary steps to help ensure that your health care needs are taken care of.

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