

Medicare Supplement for Disabled Under 65: Where You Can Get Them and How Do They Work

Description

If you are under 65 and on Medicare due to a disability, you may already know that finding a **Medicare supplement for disabled under 65** can be more challenging than it is for those who qualify by age. While Medicare supplement plans (also called [Medigap](#)) provide essential coverage for gaps in Original Medicare, not every state requires insurance companies to offer them to people under 65. This article will break down where you can get these plans, how they work, and what you should know before enrolling.

What Is a Medicare Supplement Plan?

A Medicare supplement plan (Medigap) helps pay for expenses not covered by Original Medicare, such as:

- Medicare [Part A](#) and [Part B](#) deductibles
- Coinsurance and copayments
- Certain out-of-pocket costs for hospital stays and skilled nursing care



These plans are standardized ([Plan G](#), [Plan N](#), [Plan F](#), etc.) and offered by private insurance companies. The **Medicare supplement for disabled under 65** works the same as it does for someone

over 65 the difference lies in **availability and cost**.

Availability of Medicare Supplement for Disabled Under 65

Federal law does not require insurance companies to sell Medigap plans to people under 65. Instead, it's left up to each state to set its own rules. Currently, most states require companies to offer at least one Medigap option to those under 65 who are on Medicare due to disability, but the type of plan, enrollment timing, and premium costs can vary widely.

States That Require Medicare Supplement for Disabled Under 65

Here is a state-by-state breakdown of where people under 65 can get Medigap coverage (and any notable rules):

States Requiring at Least One Medigap Plan for Disabled Under 65:

Alabama, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, New Hampshire, New Jersey, New York, North Carolina, North Dakota, Oklahoma, Oregon, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming.

Note: The available plan may be **Plan A only** in some states. Others require access to multiple plan types.

States Without Required Medigap Access for Disabled Under 65

If you live in a state without such requirements, companies may still voluntarily offer coverage, but you are not guaranteed a right to buy it outside of the age-65 open enrollment.

Examples: Arizona, Nevada, Alaska.

How Premiums Differ for Disabled Under 65

One of the biggest surprises for many people is that the **Medicare supplement for disabled under 65** often costs much more than it does for those over 65. Insurance companies base their rates partly on claims risk, and people on Medicare due to disability tend to have higher healthcare usage. As a result, it's common for under-65 premiums to be **double or even triple** the over-65 rate in some states.

Alternative Options if Medigap Is Too Expensive

If Medigap coverage is available but unaffordable, you might consider:

CONCERNS OF SENIORS	MEDICARE SUPPLEMENT
Restrictive Network of Doctors and Hospitals	NO
Co-Payments to Providers	NO
Up to \$6,700 Yearly Out-of-Pocket Costs	NO
Health Plan Decides Which Procedures are Approved for You	NO
Can Your Plan Be Cancelled?	NO <small>Can't be cancelled as long as premiums are paid</small>
Ability to Travel the Country and Use Your Doctor or Hospital	YES
Is Pre-Certification Required for Some Treatments?	NO
MAYO Clinic Included?	YES

- **Medicare Advantage (Part C):** Often lower monthly premiums, but with provider networks and different cost-sharing.
- **State Medicaid programs:** If you meet income and asset limits, Medicaid can coordinate with Medicare to reduce out-of-pocket costs.
- **Special Needs Plans (SNPs):** Tailored Medicare Advantage plans for people with certain chronic conditions or Medicaid eligibility.

Why Enrollment Timing Matters

If your state offers Medigap to people under 65, you typically have a **six-month open enrollment window** starting with your Medicare Part B effective date. If you miss it, you might be denied coverage or charged higher premiums later.

When you turn 65, you get a **new open enrollment period**, even if you already had Medicare due to disability. This is often the best time to shop again — rates are frequently significantly lower for a 65-year-old than they are for someone on Medicare disability under the age of 65. [Get Medigap quotes by email.](#)

Key Takeaways

- The **Medicare supplements for someone under 65** are not available in every state, and rules vary widely.
- Premiums are often higher for those under 65 due to higher claims risk.
- Alternatives like Medicare Advantage or Medicaid may be worth exploring if costs are prohibitive.
- Turning 65 resets your Medigap open enrollment window and usually brings more affordable options.

Next Steps

If you're under 65 and on Medicare due to disability, your best first step is to check your **state's Medigap rules** and compare costs with Medicare Advantage. Any independent [Medicare insurance agent](#) can help you understand your options and find the most cost-effective coverage for your specific situation.



[65Medicare.org](#) is a leading, independent Medicare insurance agency for people turning 65 and going on Medicare. If you have any questions about this information, you can [contact us online](#) or call us at 877.506.3378.

- [Medicare's Hidden Costs \(2026\): The Bill You Never Saw Coming](#)
- [Pennsylvania Medigap Plans: A Complete Guide to Medicare Supplement Coverage in PA](#)
- [Wisconsin Plan G: Why Doesn't It Exist?](#)
- [The Issue-Age Medigap Myth: Why Age Doesn't Matter • Isn't the Whole Story](#)
- [Medigap Premium Increase Letter: How to Understand It and What To Do Next](#)

Category

1. Going on Medicare
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