



Medicare Plus Blue Group PPOSM

St. Clair County Retirees

***Working with Medicare
to simplify your health coverage***



Today's Agenda

Medicare Advantage

- What is Medicare Advantage?
- Who is eligible?

Medicare Plus Blue Group

- What is Medicare Plus Blue Group PPO?
- Enrollment
- Benefits at a glance
- How to contact us
- Questions



What is Medicare Advantage?

- Plans offered by private insurance companies that contract with the federal government.
- Offers the benefits, rights and protection of Original Medicare.
- Are not Medicare supplemental or Medigap plans.
- Medicare Advantage plans pay instead of Original Medicare.



Who is eligible for Medicare Advantage?

Those who are:

- Entitled to Medicare Part A
- Enrolled in Part B (members must continue to pay the Part B Premium)
- Age 65 or Medicare certified as disabled
- Residing in the USA





**Medicare Plus Blue Group PPO is a
Medicare Advantage group plan offered by
Blue Cross Blue Shield of Michigan**

Medicare Part A

hospital, institutional coverage

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Medicare Part B

doctor, supplies, outpatient, professional coverage

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Medicare Part D

Prescription Drug Coverage

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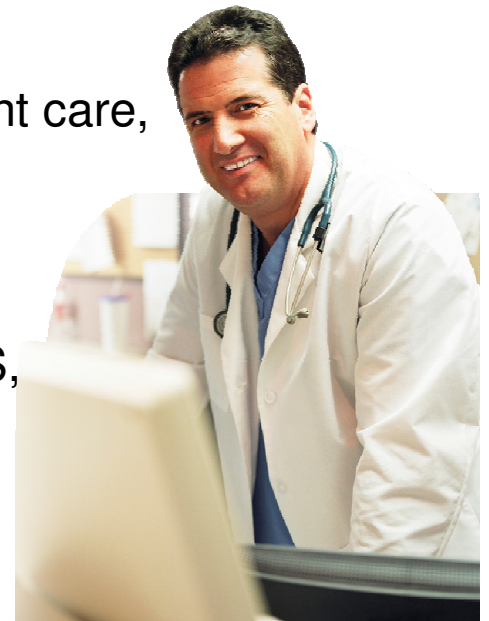
**One comprehensive health care plan
a single claim process**





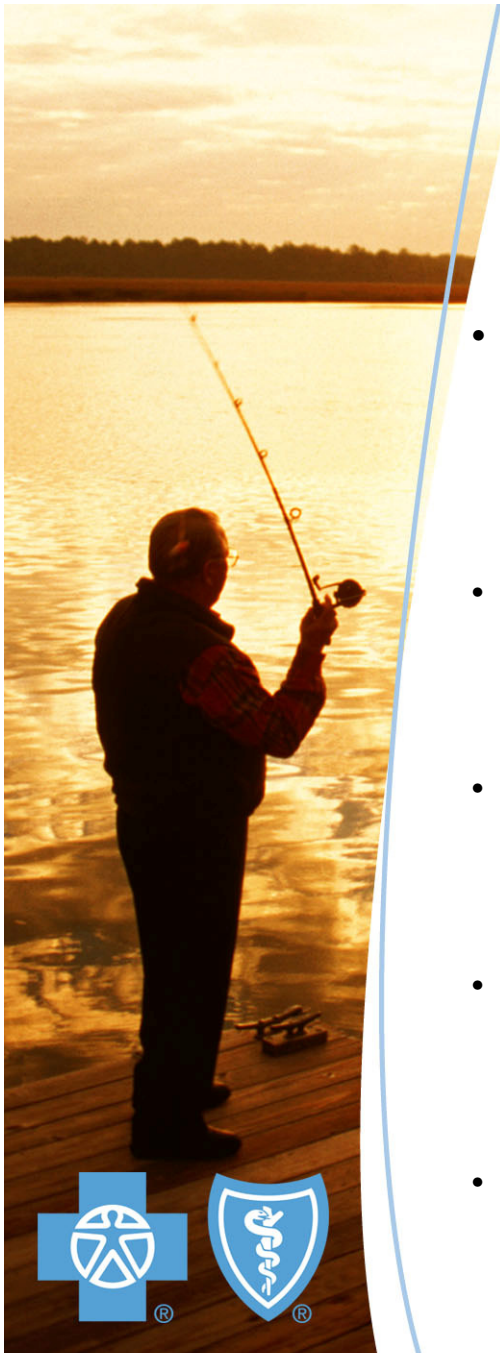
Medicare Plus Blue Group PPO Providers

- **PPO** (Preferred Provider Organization)
In network or out-of-network
- Freedom to choose any doctor, specialist or hospital without referrals
- Your out of pocket costs are less when medical care is provided in-network PPO provider
- With the exception of emergency or urgent care, all covered benefits will cost you more if you go out-of-network.
- Outside of Michigan but still within the US, doctors are paid at in-network level.



Medicare Plus Blue Group PPO Providers

- Always verify the providers you select participate in the Medicare Plus Blue Group PPO network to receive benefits in-network. Hard copy provider directories can be requested however, the most up-to-date provider listings are available on our website:
- Use our online provider directory search to search for a provider: <http://www.bcbsm.com/index.shtml>. Under *Looking for Insurance?*, click on *Medicare*.
- Under 2013 Group Plans, click on [Learn more about your plan offered through your group or employer](#), then click on *Medicare Plus Blue Group PPOSM*.
- **Note:** A link to the Blue Cross Blue Shield Association website is also provided for members who reside or travel outside the state of Michigan and need to locate a provider in that area.
- **Contact our Member Services Department at 1-866-684-8216**
Monday through Friday 8:30 am to 5:00 pm EST





Medicare Plus Blue Group PPO Member Cost Share

- Deductible – your cost share for select services before the plan’s cost share begins
- Coinsurance – your cost share after deductible has been met for select services - percentage of claim
- Copay – your cost share that is not subject to deductible or coinsurance, usually visits – fixed dollar
- Out of Pocket Maximum – your total share of deductible, coinsurance and copay for the plan year

Benefits at a Glance

Deductible

Your plan has a Annual Deductible

- **In-Network and Out of Network**

\$500

Services subject to Annual Deductible

- Inpatient Hospital
- Skilled Nursing Facility
- Inpatient Mental Health Care
- Outpatient Services
- Diagnostic Tests, X-rays, Lab and Radiology Services
- Ambulance Services

Deductible applies to the Out of Pocket Maximum



Benefits at a Glance

Coinsurance

Your plan has a coinsurance, after the deductible is met

- **In-Network – 5%**
- **Out of Network – 15%**

Services subject to coinsurance

- Inpatient Hospital, unlimited days
- Skilled Nursing Facility
- Inpatient Mental Health Care
- Outpatient Services
- Diagnostic Tests, X-rays, Lab & Radiology Services
- Ambulance Services

Coinsurance applies to the Out of Pocket Maximum



Benefits at a Glance

- Durable Medical Equipment
Prosthetic & Orthotic Devices
 - **In-Network, subject to \$500 deductible and 5% coinsurance**
 - **Out-of-Network, subject to \$500 deductible and 15% coinsurance**
- Home Health Care
 - Services covered at 100%
- Hospice
 - Must receive care from a Medicare certified hospice



Benefits at a Glance

Diabetes Programs and Supplies

Services are covered at 100%

- Screenings
- Glucose Monitors
- Test Strips/Lancets
- Self-Management Training



A photograph of a woman and a young girl smiling and hugging. The woman is wearing a light blue turtleneck sweater and a gold ring. The girl is wearing a dark jacket. They are standing in front of a brick wall.

Benefits at a Glance

Copays

- **Unlimited visits with \$20 copay per in-network and 15% coinsurance after deductible for out of network visit for the following services:**
 - Doctor office visits/Specialist office visit
 - Podiatry visits
 - Chiropractic visits
 - Urgent Care visits
 - Annual Physical Exams
 - Outpatient Mental Health and Substance Abuse visits
- **Emergency Room Copay is \$50**
 - Waived if admitted within 3 days
- **Copays apply toward your out of pocket dollar maximum and are not subject to deductible**



Medicare Plus Blue Group Member Out of Pocket Maximum

- Your plan has an Annual Out of Pocket Maximum for member cost share

Your Deductible, Coinsurance and Copays all add up to meet maximums

In Network Maximum – \$2,000

Out-of-Network Maximum – \$5,000





Prescription Coverage Non-Hardship Plan

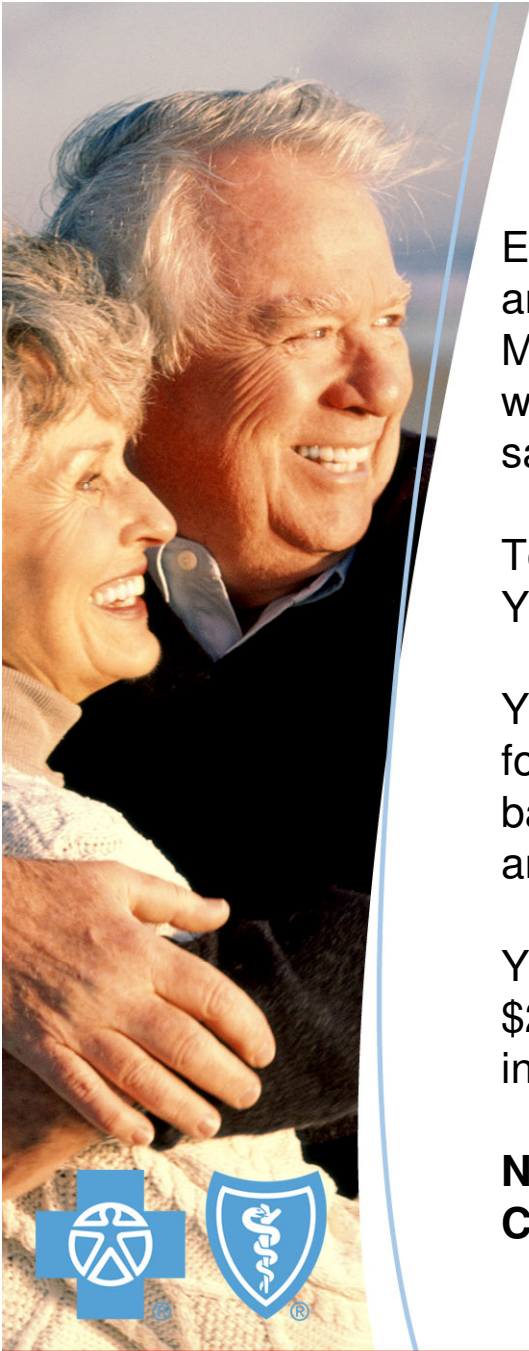
Formulary Drug – Generic (Tier 1 and 2)	Covered - \$10 copay
Formulary Drug – Preferred Brands (Tier 3)	Covered - \$40 copay
Formulary Drug Non Preferred Brands and Specialty Drugs (Tiers 4-5)	Covered - \$80 copay
Mail Order Prescription Drugs	Covered – 2.0 times the applicable copay for up to a 90-day supply



Prescription Coverage Hardship Plan

Formulary Drug – Generic (Tier 1 and 2)	Covered - \$10 copay
Formulary Drug – Preferred Brands (Tier 3)	Covered - \$20 copay
Formulary Drug Non Preferred Brands and Specialty Drugs (Tiers 4-5)	Covered - \$40 copay
Mail Order Prescription Drugs	Covered – 2.0 times the applicable copay for up to a 90-day supply





Low Income Subsidy (LIS)

Extra Help to pay for the prescription drug costs—monthly premiums, annual deductibles, and prescription co-payments—related to a Medicare prescription drug plan. The Extra Help is estimated to be worth about \$4,000 per year. Many people qualify for these big savings and don't even know it.

To qualify for Extra Help:

You must reside in one of the 50 States or the District of Columbia;

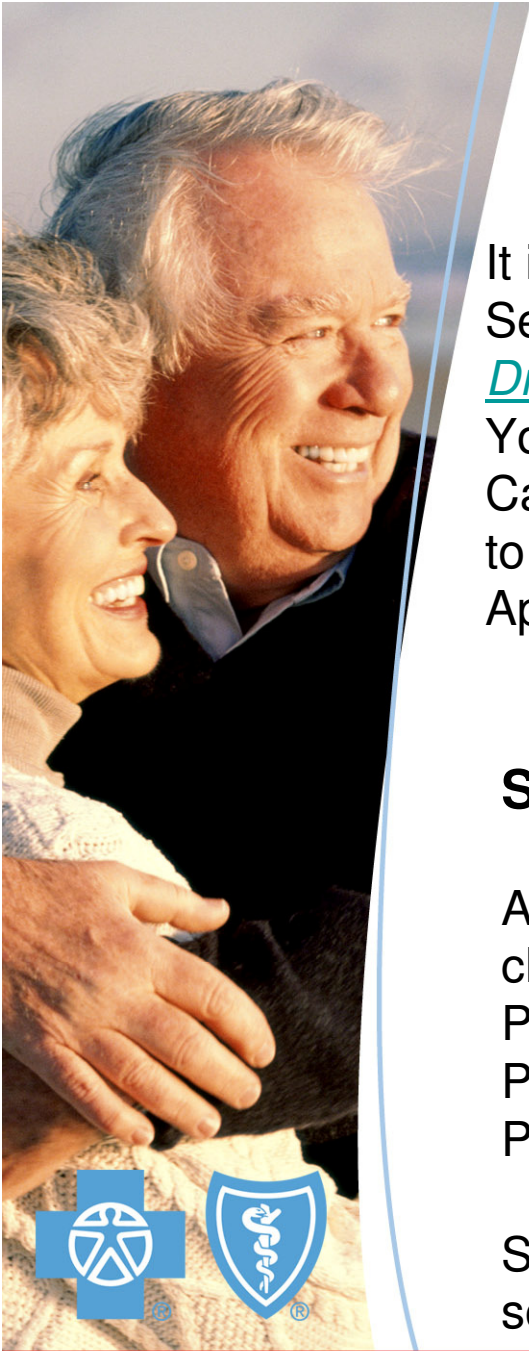
Your resources must be limited to \$13,070 for an individual or \$26,120 for a married couple living together. Resources include such things as bank accounts, stocks, and bonds. We **do not** count your home, car, and any life insurance policy as resources; **and**

Your annual income must be limited to \$16,755 for an individual or \$22,695 for a married couple living together. Even if your annual income is higher, you still may be able to get some help.

Note: You may qualify for both Low Income Subsidy (LIS) and the County's Hardship Plan.

www.socialsecurity.gov

Medicare Advantage Group Product



How do you apply?

It is easy to apply for Extra Help. Just complete Social Security's [Application for Extra Help with Medicare Prescription Drug Plan Costs](#) (SSA-1020). Here's how:

You can apply online at www.socialsecurity.gov/extrahelp;
Call Social Security at **1-800-772-1213** (TTY **1-800-325-0778**)
to apply over the phone or to request an application; or
Apply at your local Social Security office.

Social Service Coordinators®

A private company that provides education and assistance free of charge to our members for enrolling into Medicare Savings Programs [MSP] which pay the member's Medicare Part B Premium (\$96.40/per month or more depending on Part B Premium in 2011).

SSC also provides assistance with Part D Extra Help and other social programs.

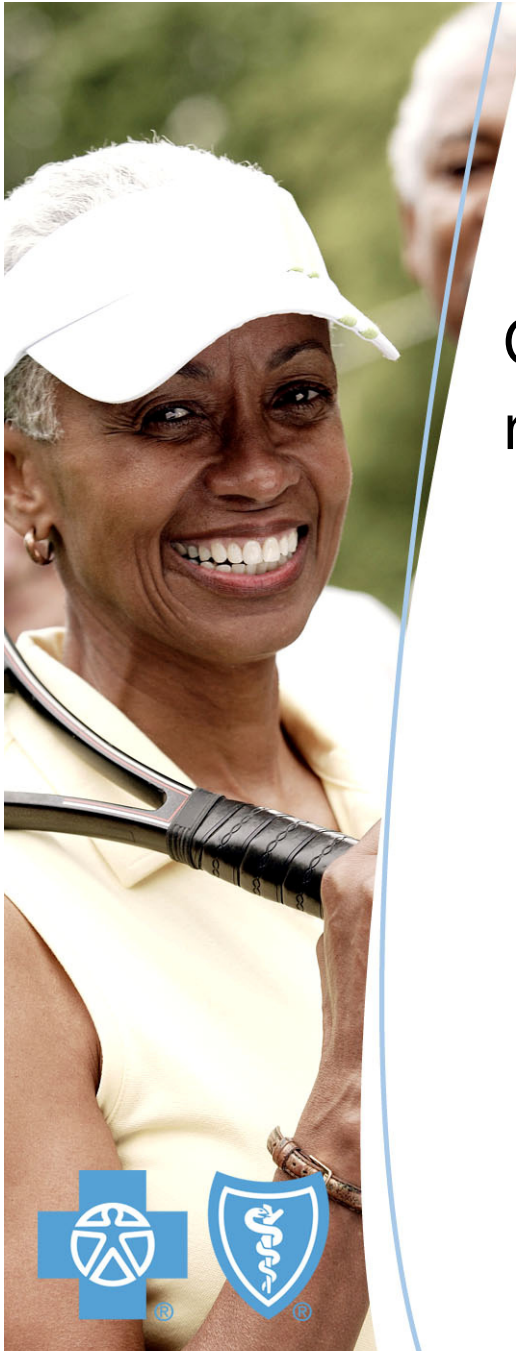




Medicare Plus Blue Group PPO includes ongoing access to Healthy Blue Extras:

- **Blue Health Connection[®]**
 - Registered nurses are available 24/7 to help you manage chronic illnesses and get better and stay healthy
- **Blue 365** – access to a variety of additional discount programs
- **BlueSafe[®]** discounts on
 - Safety items at participating stores
 - Non-covered durable medical equipment at participating providers

Medicare Plus Blue PPO Group members, go to <http://www.bcbsm.com/medicare/member-extras.shtml>.



Medicare Plus Blue Group PPO includes ongoing access to Healthy Blue Extras:

Our **Healthy Advantage Rewards** program recognizes your efforts to stay healthy.

- Valuable coupons when you complete health services like glaucoma screening, mammograms, cholesterol test or flu vaccine
- Discounts on restaurants, entertainment, travel, shopping, healthy lifestyle products and more

Medicare Plus Blue PPO Group members, go to <http://www.bcbsm.com/medicare/member-extras.shtml>.



Silver Sneakers Fitness Program

Membership in a network of health clubs and exercise classes, FREE!

Use any of more than 11,000 participating U.S. locations, with no restrictions on days and times

Program AdvisorsSM at each location

SilverSneakers classes at many locations, appropriate for all fitness levels

Learn how exercise can improve your body, mind and spirit

Exercise at your own pace

Have fun with people in your age group





MA PPO Plan Enrollment – How it works:

- Complete the Medicare Plus Blue Group PPO enrollment application (including signature and date)
- Remember that Medicare eligible spouses and/or dependents must complete a separate enrollment form
- Return completed forms to your HR benefit office



Medicare Advantage – How it works:

Your Medicare Plus Blue Group PPO ID card:



- Allows your Medicare card to be put safely away
- Is the only card you will need for health care services

When will the plan change be effective?

All Medicare eligible members who enroll into
Medicare Plus Blue PPO
Will have an effective date of:

1-1-13





Important dates and what to expect

Pre- Enrollment Kits mailed to members –
Mid November

Member Meetings – November 28th and 30th

Welcome Kits and ID cards mailed to
member – Mid December

Members are encouraged to contact our
service center with any future questions



Medicare Plus Blue Group PPO includes The Welcome Call

Occurs shortly after enrollment in Medicare Plus Blue PPO
For many members this is your first contact with BCBSM

Covers topics like

- Ensuring ID card receipt
- Ensuring receipt of the evidence of coverage
- Ensuring you understand your benefits
- Defining and selecting a primary care physician
- Making you aware of extra benefits, like:

Smoking cessation programs

Case management programs

100% coverage on preventive services

Flu and pneumonia shots

Members are encouraged to contact our service center with any future questions

MA PPO Plan Cost Share

Cost-share Type / Benefits Application	In-Network	Out-of-Network
Deductible (Includes in and out of network)	Combined \$500	
Coinsurance (includes in and outpatient services)	5%	15%
OOP Max (OOP=Out of Pocket)	\$2,000	\$5,000
Office Visit Copays (PCP/Specialist) (includes chiropractic, podiatry, out patient mental health)	\$20	15%
Emergency Room	\$50	\$50
Ambulance	In Network Deductible and Coinsurance apply	Out of Network Deductible and Coinsurance apply
DME/P&O and Medical Supplies (administered by DMEnsions)	In Network Deductible and Coinsurance apply	Out of Network Deductible and Coinsurance apply





For More Information...

BCBSM Pre-Enrollment Call Center

1-866-684-8216

8:30 a.m. to 5 p.m., seven days a week.

(TTY users call **800-579-0235**)

Or visit:

www.bcbsm.com/medicare

and/or

www.medicare.gov

