This guide helps you understand how Medicare’s different parts work – and gives you the information you need to weigh your options.

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Questions? We’re Here to Help.

Visit bcbstmedicare.com

Call 1-800-292-5146 (TTY: 711)

Or call your local agent
Medicare Part A is hospital insurance from the government. You usually don’t have to pay for Part A. You earned these benefits because you or your spouse paid Medicare taxes while working. Part A helps to cover:

+ Inpatient hospital stays
+ Limited stays in a skilled nursing facility
+ Some home health-care
+ Hospice care

Medicare Part B is medical insurance from the government. You have to pay a monthly premium (payment) for Part B. Your income determines how much you have to pay every month for Part B. It helps to cover:

+ Doctor and other healthcare services
+ Some outpatient care
+ Home health-care
+ Durable medical equipment
+ Certain preventive services

Your Part B Premium Explained

This year, your Part B monthly premium will be $135.50 if you file income taxes for $85,000 or less (or if you and your spouse file for $170,000 or less). If you made more money, your monthly premium will be higher. Check Medicare.gov to determine your monthly premium for Part B.
Medicare Coverage Gaps

Medicare Parts A and B don’t cover all of your costs, and some services are not covered at all.

How does that affect you? It means you will pay for those services out of your pocket if you don’t have other coverage in place.

With Original Medicare, your out-of-pocket costs include:

+ Some prescription drugs
+ Deductibles and copays for hospital stays
+ Routine dental
+ Routine vision care and eyewear
+ Routine hearing exams
+ Visits to your doctor or surgeon
+ Fitness memberships

Don’t Forget Coinsurance and Coverage Limits

Usually, you will be responsible for coinsurance after you meet your deductible, meaning Original Medicare will pay for 80 percent, while you pay for 20 percent of the costs for services.

Original Medicare usually has coverage limits, too. For example, the number of days Medicare will pay for a hospital or nursing home stay.

Enrolling in Original Medicare:
Meet Mary

Mary is excited to celebrate turning 65 on June 15. She wants to get ready for retirement by enrolling in Original Medicare.

Mary can enroll in Medicare Part A and/or Part B between three months before and three months after her birth month. This means she can apply between March and September. Her coverage can begin on June 1 – the first day of her birth month – depending on when she applies.
Medicare Part D
Prescription Coverage

Because Original Medicare doesn’t cover most prescriptions, some people purchase a Medicare Part D plan. Private insurance companies administer Part D plans. These plans vary in cost and covered drugs from company to company and year to year.

Medicare Supplement Plans

**Medicare Supplement plans do just that – “supplement” Original Medicare. They cover some of the gaps. Here’s what you should know about them:**

- They are sold by private insurance companies.
- There are 10 standardized plan types regulated by state and federal laws.
- They may have a waiting period for pre-existing conditions.
- You may have to answer health questions to qualify.

Many people who choose a Medicare Supplement Plan do it because they like the higher level of coverage. These plans don’t have networks, so Medicare Supplement members can go to any doctor or hospital that accepts Original Medicare.

Plus, some of your plan options have very low - or no - copays or coinsurance for a visit to the doctor or a stay in the hospital.

**But they don’t have prescription coverage.**

If you decide a Medicare Supplement plan is right for you and you want prescription drug coverage, you’ll need to purchase a separate Part D plan.

We’re right here. 1-800-292-5146 (TTY: 711)
Enrolling in a Medicare Supplement and Medicare Part D plan: Mary Considers Her Options

Remember Mary? She’s turning 65 on June 15. Mary knows she needs more than Original Medicare. She considers a Medicare Supplement and a Part D plan.

+ You can buy a Medicare Supplement plan without answering health questions during your Medicare Open Enrollment Period. This 6-month period begins on the first day of the month in which you’re 65 or older and enrolled in Part B. This means she can apply between June 1 and December 1.

+ Mary can enroll in Medicare Part D between three months before and three months after her birth month. This means she can apply between March and September. Her coverage can begin on June 1 – the first day of her birth month – depending on when she applies.

Save Money with Part D Coverage

If you don’t enroll in prescription drug coverage when you’re first eligible, you must wait until the annual Open Enrollment Period (Oct. 15 – Dec. 7) unless you qualify for a special enrollment period. If you enroll later, you may have to pay a permanent late enrollment penalty.
Medicare Advantage Plans

Medicare Advantage Plans (Part C)
These plans pull together the services covered under Parts A and B, and may also include Part D under a single all-in-one plan – meaning you get all your Medicare health-care through that plan.

Here’s what you need to know about Medicare Advantage plans:

+ They are administered by private insurance companies approved for participation in the Medicare program.
+ Medicare Advantage plans are not Medicare Supplement plans.
+ They can be different types of plans, such as Health Maintenance Organization (HMO) and Preferred Provider Organization (PPO) plans.

When you enroll in a Medicare Advantage plan, you still have all the same rights and protections you have under Medicare. You also still need to pay your monthly payment for Medicare Part B coverage.

Do You Have Medicaid Coverage?
If you are entitled to medical assistance from Medicaid (TennCare), you might be eligible for a Medicare Advantage Dual-Eligible Special Needs Plan (DSNP). These plans combine Medicare and Medicaid to give you extra benefits.

If you have questions about the DSNP option, you can talk with a trusted agent about your eligibility.

Enrolling in Medicare Advantage:
Mary Ponders a Plan
Mary is researching Medicare Advantage plans because she likes the additional benefits they can provide.

+ Mary can enroll in a Medicare Advantage Plan between three months before and three months after her birth month.
+ This means she can apply between March and September. Her coverage can begin on June 1 – the first day of her birth month – depending on when she applies.
Your Plan Checklist

Are you considering a Medicare Advantage, Medicare Supplement or Part D plan? This checklist can help. You can talk through it with a trusted agent, friend or family member before you enroll.

- Are your doctors covered?
- Is your pharmacy covered?
- Will the plan cover your prescriptions?
- Do the plan’s costs (like premiums or deductibles) fit into your budget?
- Does the plan offer extra benefits? They might include:
  - Preventive care for a $0 copay
  - Dental, vision and hearing aid coverage
  - Free fitness membership
  - Wide network of doctors and hospitals
  - No referrals to see specialists
  - Affordable prescription drug coverage
  - Low premiums
  - Programs for maintaining and improving your health

Notes:

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Nondiscrimination Notice

BlueCross BlueShield of Tennessee (BlueCross), including its subsidiaries Security Care, Inc. and Volunteer State Health Plan, Inc. also doing business as BlueCare Tennessee, complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

+ Provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified interpreters and (2) written information in other formats, such as large print, audio and accessible electronic formats.

+ Provides free language services to people whose primary language is not English, such as: (1) qualified interpreters and (2) written information in other languages.

If you need these services, contact Member Service at the number on the back of your Member ID card or call 1-800-831-2583 (TTY: 711). From Oct. 1 to March 31, you can call us 7 days a week from 8 a.m. to 9 p.m. ET. From April 1 to Sept. 30, you can call us Monday through Friday from 8 a.m. to 9 p.m. ET. Our automated phone system may answer your call outside of these hours and during holidays.

If you believe that BlueCross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance (“Nondiscrimination Grievance”). For help with preparing and submitting your Nondiscrimination Grievance, contact Member Service at the number on the back of your Member ID card or call 1-800-831-2583 (TTY: 711). They can provide you with the appropriate form to use in submitting a Nondiscrimination Grievance. You can file a Nondiscrimination Grievance in person or by mail, fax or email. Address your Nondiscrimination Grievance to: Nondiscrimination Compliance Coordinator; c/o Manager, Operations, Member Benefits Administration; 1 Cameron Hill Circle, Suite 0019, Chattanooga, TN 37402-0019; (423) 591-9208 (fax); Nondiscrimination_OfficeGM@bcbst.com (email).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 1-800-537-7697 (TDD), 8:30 a.m. to 8 p.m. ET. Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.
Multi Language Services

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.
Llame al 1-800-831-2583 (TTY: 711).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.
Gọi số 1-800-831-2583 (TTY: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.
1-800-831-2583 (TTY: 711) 번으로 전화해 주십시오.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-831-2583 (ATS : 711).

주의: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية تتوفر لك بالمجان.
اتصل برقم 1-800-831-2583 (TTY:711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-831-2583 (TTY:711)。

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。
800-831-2583 (TTY:711) まで、お電話にてご連絡ください。

PAUNAWA: Kung nagasaalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-831-2583 (TTY:711).

नोंद: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं।
1-800-831-2583 (TTY:711) पर कॉल करें।

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-831-2583 (телетайп: 711).

توجه: إذا كنت تتحدث فارسی صحیحت، می کنید خدمات زبان و ترجمه به صورت رایگان برایتان فراهم می گردد. با (771) 800-831-2583-1 تماس بگیرید.

ATANSYON: Si w pa kalon Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou.
Rele 1-800-831-2583 (TTY: 711).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej.
Zadzwoń pod numer 1-800-831-2583 (TTY: 711).

ATENÇÃO: se fala português, encontram-se disponíveis serviços linguísticos grátis.
Ligue para 1-800-831-2583 (TTY: 711).

ATTENZIONE: In caso la lingua parlata sia l’italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-831-2583 (TTY: 711).

Dii baa akó ninizín: Dii saad bee yáníti’go Diné Bizaad, saad bee áká’áníída’áwo’déé’, t’áá jíik’eh, éí ná hóló, kojí’ hódííínih 1-800-831-2583 (TTY: 711).
You May Need More than Original Medicare

You can learn more about Medicare by visiting our website at bcbstmedicare.com or by calling us at 1-800-292-5146, (TTY: 711).

From Oct. 1 to March 31, you can call us from 8 a.m. to 9 p.m. ET, 7 days a week. From April 1 to Sept. 30, we’re available from 8 a.m. to 9 p.m., ET Monday-Friday. If you call us outside these hours or on a holiday, our automated system will answer your call. You can leave a message for us, and we will call you back the next business day.