

GROUP PLAN 65 PLAN C HIGHLIGHTS



Plan65

Medicare Supplement

Without the Skilled Nursing Benefit

Effective July 2018 through December 2018



Group Plan 65 Plan C is a Medicare supplement plan, also known as “Medigap,” that picks up where Medicare leaves off, making it easier for you to budget for your healthcare expenses. Group Plan 65 Plan C provides flexibility, options, and added discounts — all from a trusted, local company.

Benefit Features	With Original Medicare, you pay:	With Medicare and Group Plan 65 C, you pay:
Part A Services		
Hospitalization (Includes substance abuse, mental health, rehabilitation, and inpatient surgery facility services)		
• First 60 days	\$1,340 per benefit period	\$0
• Days 61 - 90	\$335 per day	
• Days 91 and after while using 60 lifetime reserve days	\$670 per day	
• Once lifetime reserve days are used, an additional 365 days	All costs	
Skilled nursing facility care		
• First 20 days	\$0	
• Days 21 - 100	\$167.50 per day	Up to \$167.50 per day
• Days 101 and after	All costs	All costs
Part B Services		
Part B excess charges	All costs	All costs
Immunizations & Screenings		
• Immunizations (Flu shots, pneumonia vaccine, and for people with Medicare who are at high risk: hepatitis B vaccine)	\$0	\$0
• Bone mass measurement (For people with Medicare who are at risk)		
• Colorectal screening exams ¹		
• Diabetes screening (For people with Medicare who are at risk)		
• Annual mammography screening (For women with Medicare)		
• Pap tests and pelvic exams (For women with Medicare)		
• Prostate cancer screening exams (Prostate specific antigen (PSA) test for men with Medicare)		
Lab services (Medicare-covered)		
Home health care (Medicare-covered)		

You're free to seek care from the Original Medicare-participating providers of your choice, anywhere in the country. Plan 65 pays for Original Medicare's cost-sharing, such as deductibles and coinsurance. If Original Medicare does not cover a service, your supplemental plan will also not cover that service, unless otherwise noted.

Benefit Features	With Original Medicare, you pay:	With Medicare and Group Plan 65 C, you pay:
Part B Services (continued)		
Hospice care	Medicare copayment/coinsurance	
Office visits • Doctor visits	20% of Medicare-approved amounts after \$183 annual deductible	\$0
• Non-routine hearing services		
• Non-routine vision care		
• Non-routine podiatry services		
• Chiropractic services (limited)		
Emergency room		
Outpatient surgery		
Diagnostic tests and X-rays		
Durable medical equipment and prosthetic devices		
Urgently needed care		
Ambulance services		
Foreign travel care	All costs	20% after \$250 annual deductible. There is a \$50,000 lifetime maximum.

To be eligible for Group Plan 65, you must be enrolled in both Part A and Part B of the Original Medicare Program.

All services should be received from an Original Medicare-participating provider, except in emergencies.

2018 Part A Deductible = \$1,340 per benefit period. 2018 Part B Deductible = \$183 per calendar year. Medicare amounts are current for 2018 and may change on an annual basis.

¹ Part B deductible may apply to Medicare approved doctor's visits.

This is a summary of benefits. It is not a contract. For details about coverage, including any limitations or exclusions not noted here, please refer to the subscriber agreement or contact the Medicare Sales team at (401) 351-2583 or 1-800-505-2583.

Questions?

To enroll or learn more about our Group Plan 65 Medicare Supplement plan without the skilled nursing benefit, Contact the Medicare sales team at 1-800-505-BLUE (2583) (TTY: 711).

Hours: Monday through Friday, 8:00 a.m. to 8:00 p.m. (Open seven days a week, 8:00 a.m. to 8:00 p.m., from October 1 – February 14) You can use our automated answering system outside of these hours.

Already a Group Plan 65 member? Call the Medicare Concierge Team at (401) 277-2958 or 1-800-267-0439 (TTY: 711).

Hours: October 1 - February 14, seven days a week, 8:00 a.m. to 8:00 p.m. February 15 - September 30, Monday through Friday, 8:00 a.m. to 8:00 p.m.; Saturday & Sunday, 8:00 a.m. to noon. You can use our automated answering system outside of these hours.

Not connected with or endorsed by the U.S. Government or the federal Medicare program. Insured by Blue Cross & Blue Shield of Rhode Island. The purpose of this communication is the solicitation of insurance. You may be contacted by a licensed insurance producer or insurance company. These policies have exclusions and limitations. Please call the Medicare Sales team at (401) 351-2583 or 1-800-505-2583 for complete details of coverage and costs.



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