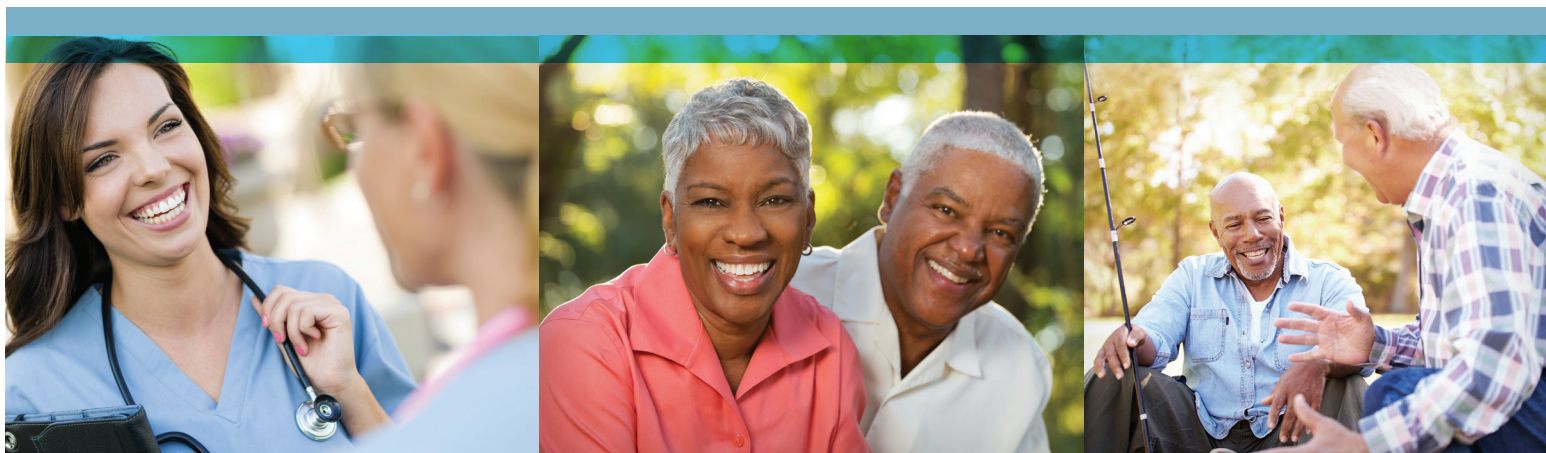


# GROUP PLAN 65 PLAN N HIGHLIGHTS



## Plan65

Medicare Supplement

With the Skilled Nursing Benefit

Effective July 2018 through December 2018



Group Plan 65 Plan N 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 N 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 N, you pay:
<b>Part A Services</b>		
Hospitalization (Includes substance abuse, mental health, rehabilitation, and inpatient surgery facility services)		
• First 60 days	\$1,340 per benefit period	
• Days 61 - 90	\$335 per day	
• Days 91 and after while using 60 lifetime reserve days	\$670 per day	\$0
• 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	
• Days 101 and after	All costs	All costs
<b>Part B Services</b>		
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)		
• Bone mass measurement (For people with Medicare who are at risk)		
• Colorectal screening exams <sup>1</sup>		
• Diabetes screening (For people with Medicare who are at risk)	\$0	\$0
• 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 N, you pay:
<b>Part B Services (continued)</b>		
Hospice care	Medicare copayment/coinsurance	\$0
Office visits <ul style="list-style-type: none"> <li>• Doctor visits</li> <li>• Non-routine hearing services</li> <li>• Non-routine vision care</li> <li>• Non-routine podiatry services</li> <li>• Chiropractic services (limited)</li> </ul>	20% of Medicare-approved amounts after \$183 annual deductible	Up to \$20 copay per visit after \$183 annual deductible
Emergency room		Up to \$50 copay per visit after \$183 annual deductible
Outpatient surgery		\$183 annual deductible
Diagnostic tests and X-rays		
Durable medical equipment and prosthetic devices		
Urgently needed care		
Ambulance services	20% after \$250 annual deductible. There is a \$50,000 lifetime maximum.	
Foreign travel care		All costs

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.

<sup>1</sup> 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 with 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.



**Blue Cross  
Blue Shield**  
of Rhode Island

[www.bcbsri.com](http://www.bcbsri.com)

500 Exchange Street • Providence, RI 02903-2699

Blue Cross & Blue Shield of Rhode Island is an independent licensee  
of the Blue Cross and Blue Shield Association.