

2023 BlueMedicareSM

Supplement
Insurance
Policies



Welcome to the new age of health care



All things being equal, how do you choose a Medicare health plan? We've been here in Florida for over 65 years, and we're here for you now...with BlueMedicare Supplement policies that make sense.

Why BlueMedicare Supplement and SelectSM Insurance Policies are a Great Choices

While Medicare pays for many health care services, it doesn't pay all health care costs in full. Our BlueMedicare Supplement insurance policies* help cover most of these costs for you. Whether you're looking for a basic policy or one with more extensive coverage, we have plenty of options for you. And, there are no doctor or hospital** networks so you may choose any doctor, specialist or hospital that accepts Medicare.

The benefits provided and the premium amount you are required to pay depend on the plan you choose, your age, tobacco use and county of primary residence. For premium information for your area, please refer to the Outline of Coverage, available online at Floridablue.com/Medicare or see page 11 for contact information and hours of operation.

When you enroll in any of our BlueMedicare Supplement or BlueMedicare Supplement Select insurance policies, you'll automatically receive the following at NO extra cost:



Age lock-in rating advantage

Most Medicare Supplement insurance premiums are based on your age. However, when you enroll in one of our plans, we will always base your rate on the age that you were when you initially enrolled, as long as you maintain continuous coverage in any of our Medicare Supplement policies. For example, if you enroll at age 65, you'll always pay the rates charged for individuals age 65, regardless of your current age. However, medical cost increases and inflation could increase our premiums.



Automatic claims filing

Simply present your red, white and blue Medicare card AND your BlueMedicare Supplement ID card when you go to the hospital or doctor and we'll handle the rest.



Discounted products and services

When you enroll in one of our BlueMedicare Supplement insurance policies, you'll automatically have access to our member discount programs. See page 10 for more information.



30-day money-back guarantee

If for any reason you're not completely satisfied, simply return your contract to us within 30 days of the policy delivery to receive a full refund of any premiums paid—with no questions asked.

*Not connected with or endorsed by the U.S. Government or the Federal Medicare Program. These policies have limitations and exclusions which work in conjunction with Medicare.

**BlueMedicare Supplement Select policies do require you to use in-network hospitals. See page 5 for additional details.

Policy Availability and Eligibility

If you want...	...These may be good policy options	Availability
The freedom to choose any doctor or hospital nationwide.*	BlueMedicare Supplement Insurance A, B, C**, D, F**, G	Statewide
Policies that offer a lower premium, but include a higher member cost-sharing than our other Medicare Supplement insurance policies. You still have the freedom to choose any doctor or hospital nationwide.*	BlueMedicare Supplement Insurance K, L, M, N	Statewide
All the benefits of a traditional Medicare Supplement insurance policy with your choice of doctors. You are only required to use an in-network hospital.	BlueMedicare Supplement Select Insurance B, C**, D, M	Counties: Alachua Columbia Indian River Osceola Seminole Bay Miami-Dade Lee Palm Beach St Johns Bradford Duval Leon Pasco St. Lucie Broward Escambia Manatee Pinellas Sumter Charlotte Hamilton Marion Polk Suwannee Citrus Hernando Okaloosa Putnam Volusia Clay Highlands Okeechobee Santa Rosa Collier Hillsborough Orange Sarasota

See next page for more information.

*Medicare acceptance required.

**Only applicants first eligible for Medicare before January 1, 2020 may purchase Plans C and F



BlueMedicare Supplement Insurance Policies A, B, C, D, F, G, K, L, M and N

Our suite of BlueMedicare Supplement insurance policies* follow you wherever you go. If you enjoy traveling or visiting family and friends across the country, these policies provide flexibility and help give you peace of mind. We have 10 different policies to choose from, including several lower premium policy options.

Additionally, there are no doctor or hospital networks, so you can choose any doctor, specialist or hospital that accepts Medicare. Plans K, L, M and N provide lower premium alternatives. You are responsible for a higher cost-sharing amount when services are rendered, but these policies help protect you from catastrophic expenses.

BlueMedicare Supplement Select Insurance Policies B, C, D and M

BlueMedicare Supplement Select insurance policies* are available in most of Florida's larger counties and offer ideal combinations of choice and value. Should you wish to purchase any one of our Select policies, it is necessary that you be a resident in a county where these policies are sold. You'll enjoy all the benefits and privileges of traditional Medicare Supplement insurance policies, including your choice of doctors.

While there are no physician network requirements, you are required to choose from among our extensive list of statewide network hospitals** for

non-emergency inpatient and outpatient hospital services. Network hospitals have agreed to work with us to lower costs, and in turn, we're able to offer you lower monthly insurance premiums. For non-emergency services received at non-Select network hospitals, you'll receive Medicare benefits only. Medicare-approved services for emergencies that occur anywhere in the United States are covered regardless of which hospital provides treatment. Since there is no physician network requirement for any of these policies, you'll want to be sure that your doctor has privileges at one of our network hospitals should non-emergency hospitalization be required.

*Not connected with or endorsed by the U.S. Government or the Federal Medicare Program. These policies have limitations and exclusions which work in conjunction with Medicare.

**Networks are made up of independent contracted health care providers.

Coverage Summary

What BlueMedicare Supplement Insurance policies pay:

MEDICARE DOES NOT PAY:

	A	B and Select B†	C* and Select C†*	D and Select D†	F*	G	K	L	M and Select M†	N
Medicare Part A: Hospital Services										
\$1,600 initial hospital deductible (Part A deductible) each benefit period		✓	✓	✓	✓	✓	✓ ¹	✓ ²	✓ ¹	✓
\$400 per day coinsurance for days 61-90 in a hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
\$800 per day coinsurance for days 91-150 in a hospital††	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
100% of Medicare-allowable expenses for additional 365 days after Medicare hospital benefits stop completely	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
\$200 per day coinsurance for days 21-100 in a Skilled Nursing Facility†††			✓	✓	✓	✓	✓ ³	✓ ⁴	✓	✓
Calendar year blood deductible (first three pints of blood) if the deductible is not met by you replacing the blood (also includes any Part B charges)	✓	✓	✓	✓	✓	✓	✓ ³	✓ ⁴	✓	✓
100% coverage of Hospice Care (also includes any Part B charges)	✓	✓	✓	✓	✓	✓	✓ ³	✓ ⁴	✓	✓
Medicare Part B: Physician Care and Medical Services										
\$226 calendar year Part B deductible			✓		✓					
Generally, 20% of the Medicare-approved amount (Part B coinsurance) or, in the case of hospital outpatient department services under a prospective payment system, the applicable copay	✓	✓	✓	✓	✓	✓	✓ ⁵	✓ ⁶	✓	✓ ⁷
Excess charges (100% of excess charges for Medicare-approved Part B charges)††††					✓	✓				
Additional Benefits Not Covered by Medicare										
Benefits for medically necessary care received in a foreign country (after a \$250 deductible is met)			✓	✓	✓	✓			✓	✓
Out-of-pocket limit—Member is responsible for cost-sharing of some covered services until the annual out-of-pocket limit is met. Once reached, BlueMedicare Supplement pays 100% of Medicare copays and coinsurance for the rest of the calendar year							✓ ⁸	✓ ⁹		

† Under the BlueMedicare Supplement Select insurance policies, you are required to use a participating BlueMedicare Supplement Select hospital. Be sure to use physicians that have admitting privileges at a Select network hospital to guarantee full benefits from the policy. Emergency services are covered at any hospital as long as Medicare approves the services.

†† After 90 days of hospitalization during a benefit period, Medicare benefits are paid from a one-time lifetime reserve of 60 additional days (Days 91–150), which are not renewable.

††† A skilled nursing facility is a facility that provides skilled nursing care, among other services, and is approved for payment by Medicare. Note: This facility is not the same as a nursing home.

†††† Excess charges: The difference between the Medicare-approved amount and what a doctor who does not accept Medicare assignment actually charges you for the service. You or your insurer must pay the charges. By law, however, your doctor cannot charge you more than 15 percent above what Medicare allows for payment of the service.

¹ 50% of Part A deductible (You pay 50%)

² 75% of Part A deductible (You pay 25%)

³ 50% of Part A coinsurance (You pay 50%)

⁴ 75% of Part A coinsurance (You pay 25%)

⁵ 50% of Part B coinsurance (You pay 50%)

⁵ 75% of Part B coinsurance (You pay 25%)

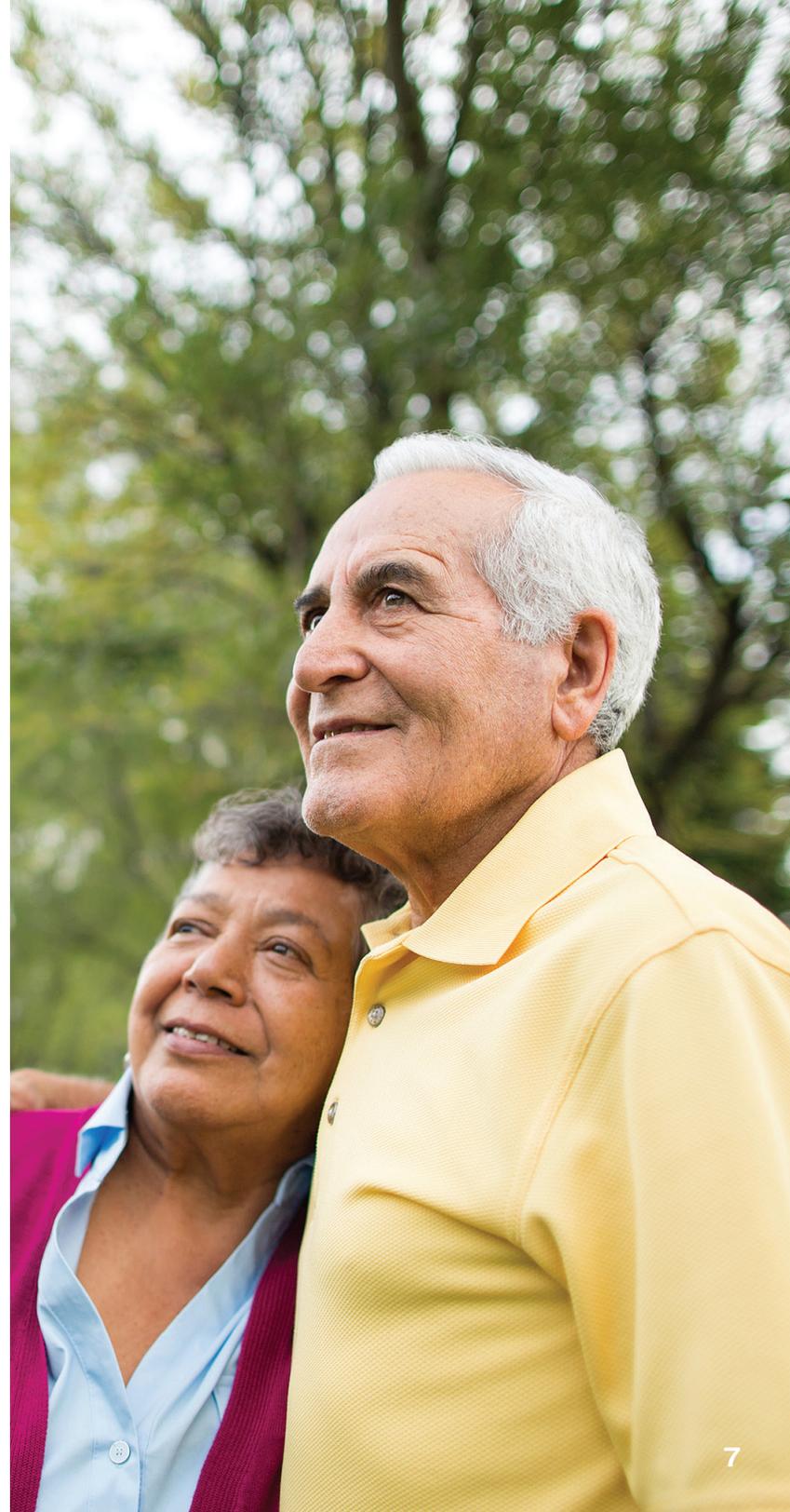
⁷ You pay \$20 per office visit and \$50 per emergency room visit

⁸ \$6,940 – this is the amount you pay before the plan pays 100%

⁹ \$3,470 – this is the amount you pay before the plan pays 100%

Medicare deductible and copay amounts shown are for 2023.

The benefits provided and the premium amount you are required to pay depend on the plan you choose, your age, tobacco use and county of primary residence. For premium information for your area, please refer to the Outline of Coverage, available online at floridablue.com/medicare or see page 11 for contact information and hours of operation.



Guaranteed Acceptance Situations and Corresponding Policies

Who is eligible?

In addition to the specific eligibility situations defined below, it is necessary that you be a Florida resident and be enrolled in Medicare Parts A & B. If a BlueMedicare Supplement Select insurance policy is desired, you must be a resident in a county where it is offered.

If your circumstances include any of the following situations you may be eligible for guaranteed acceptance in BlueMedicare Supplement insurance policies A, B, C, F, K, L or BlueMedicare Supplement Select policies B and C.

- You are a retiree in an employer-sponsored plan (retiree group coverage) that was terminated.
- You were enrolled in a Medicare Advantage plan or another Medicare Select policy and you decided to subsequently disenroll within the first 12 months.
- You were previously enrolled in a Medicare Supplement policy and dropped that policy to enroll for the first time in a Medicare Advantage plan or Medicare Select policy and you decided to disenroll within the first 12 months.

- You enrolled in a Medicare Supplement policy or Medicare Supplement Select insurance policy and your enrollment ceased because the insurer became insolvent, other involuntary termination of coverage or enrollment, the issuer violated a material provision of the policy or the insurer/agent misrepresented the policy when it was sold.
- You were enrolled in a Medicare Advantage plan or Medicare Select policy that has terminated or discontinued providing benefits in your service area, you move out of the service area, the Medicare Advantage plan or Medicare Select policy subsequently violated a material provision, the plan or agent misrepresented the policy, or other reasons specified by Health and Human Services.
- You were enrolled in a Medicare Advantage plan that has discontinued providing benefits to a service area or has reduced the service area and you enrolled within 63 days of:
 - the date of your final notification letter from the Medicare Advantage plan; or

- the Medicare Advantage plan termination on December 31.

You may enroll in ANY BlueMedicare Supplement or BlueMedicare Supplement Select insurance policy with guaranteed acceptance if you meet either of the below situations:

- If you are applying for this policy within the 2-month period directly following termination of coverage under a group health insurance policy (non-retiree).
- If you enrolled in a Medicare Advantage plan or the Program of All-Inclusive Care for the Elderly (PACE) when you were first eligible for Medicare Part A, you disenrolled within the first 12 months and are applying within 63 days of your disenrollment.

Our BlueMedicare Supplement and BlueMedicare Supplement Select insurance policies meet all Federal and State regulations for Medicare Supplement insurance. Once enrolled, you'll receive a contract listing any additional exclusions or non-Medicare benefits, as well as complete details of coverage.

Dental Plans



Taking good care of your health includes caring for your teeth, too. In fact, your dental health can have a direct impact on your overall health and well-being, and may have an influence on the development of conditions like diabetes and heart disease. With our dental plans, you can save money on the dental care you need. Our plans offer coverage for preventive care and specialist procedures, so you get value and peace of mind in one simple plan.

Coverage that meets your family's needs

When you choose one of our dental plans, you can select the level of benefits that meet your needs and fit your budget. You'll enjoy a combination of affordability and comprehensive coverage no matter which plan you select.

Your plan. Your choice.

Easy access to affordable dental care is one of the most important things we can provide. That's why, with our plans, you'll never need a referral or pre-authorization to visit a dentist or specialist in our approved group of providers. You'll have less to worry about, and more to smile about.

Covering the basics, and so much more

Real peace of mind means not having to worry about costly dental procedures. Our dental plans give you the coverage you need for comprehensive preventive care, plus discounts and coverage for specialty visits.



More value for you

As a member of Florida Blue, you get valuable tools, resources, discount programs and services all at no extra cost!

Blue365® Member Discount Program

With our free member discount program, you can stretch your dollars with savings on health-related products and services, including:¹

Weight Management Programs

Whether you're looking to lose weight or just improve your overall health, there are weight management products that are right for you. Enjoy discounts through national companies.

Apparel & Gear

Training equipment, workout apparel, gear and more.

Healthy Getaways

Discounts and deals for hotels and resorts at healthy vacation destinations.

LASIK Surgery

Many of today's common vision problems can be treated with laser vision correction. You can take advantage of discounts and take the first step toward transforming your vision.

Information and support for you, for your family

From coordinating care to assisting caregivers, you can connect to the

programs and services you need most. Personal, professional advice about your eldercare and caregiver options is available.

floridablue.com/medicare

- Access plan documents
- Learn more about the Medicare Program
- Search available plans
- Find a doctor in your area
- Enroll in a plan
- See if your prescriptions are covered
- Find a seminar or event in your area
- And much more!

When you enroll in one of our policies, you'll have access to your health and prescription drug information online.

You'll be able to:

- View your claims status and history;
- View your policy benefits;
- Access the the forms you need—such as medical and prescription drug claim forms; and
- Find helpful information such as frequently asked questions and information about member discounts available to you!



How to apply



Apply online at our website designed just for Medicare beneficiaries—floridablue.com/medicare.



Visit a Florida Blue Center where you can meet face-to-face with a product consultant to find the policy that's right for you. For Center locations near you, log on to floridablue.com.



Call licensed agents at **1-800-876-2227** or customer service at **1-855-601-9465**, TTY users dial 1-800-955-8770. You will be able to speak to someone from 8:00 a.m. to 8:00 p.m. local time, Monday - Friday. On federal holidays and weekends please leave a message and we will return your call within one business day. Member Services also has free language interpreter services available for non-English speakers.



Call your **local Florida Blue agent**.

¹Blue365 offers access to savings on items that members may purchase directly from independent vendors. Blue365 does not include items covered under your policies with Florida Blue or any applicable federal health care program. To find out what is covered under your policies, call Florida Blue. Blue Cross and Blue Shield Association (BCBSA) may receive payments from Blue365 vendors. Neither BCBSA nor any local Blue company recommends, endorses, warrants or guarantees any specific Blue365 vendor or item. For more information about Blue365, go to www.floridablue.com/medicare.



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