

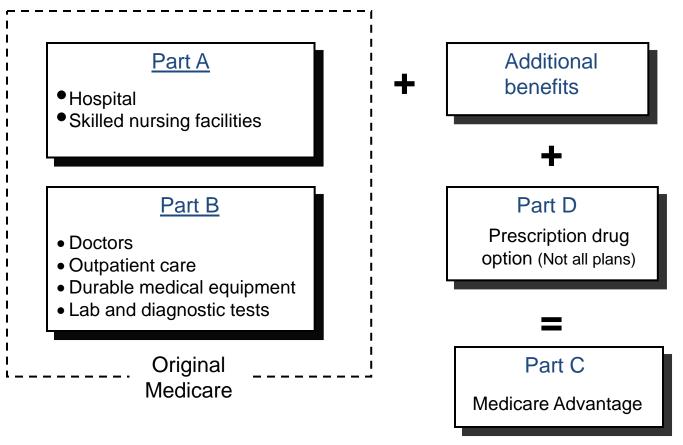
Welcome! City of Berkley Medicare Advantage members Medicare Plus BlueSM Group PPO

Blue Cross Blue Shield of Michigan is a nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association. Medicare Plus Blue is a PPO plan with a Medicare contract. Enrollment in Medicare Plus Blue depends on contract renewal.

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Medicare Advantage: Beyond Original Medicare





Who is eligible for Medicare Advantage?

To be eligible for Medicare Advantage, you must be:

- Entitled to Medicare Part A
- Enrolled in Medicare Part B
 - You must continue to pay your Part B premium
- Residing within the U.S.
- Age 65 or older, or disabled

The advantage in Medicare Advantage plans

 Also known as Medicare Part C, Medicare Advantage plans from the Blues significantly reduce your health care costs compared to Original Medicare alone.

Your Medicare Advantage plan gives you affordable coverage that is simple to understand, with added value for your health care dollar!



Medicare Plus Blue Group PPO

Member advantages:

- **One** ID card for health and prescription coverage
- **One** Summary of Benefits, a description of coverage for all of your medical and prescription drug benefits
- One Explanation of Benefits
- One Customer Service center
- No provider referrals required

The only card you need

Your Medicare Plus Blue Group PPO ID card:

Blue Cross Blue Shield		Members: bcbsm.com/medicare	Providers: bcbsm.c	om/provider/ma
Enrollee Name VALUED CUSTOMER Enrollee ID XYL918888888 Issuer (80840) 9101003777	Plan H9572_801 RxBIN 610014 RxPCN MEDDPRIME RxGrp BCBSMAN	Blue Cross Blue Shield of Michigan is a nonprofit corporation and independent licensee of the Blue Use of this card is subject to terms of applicable contracts, conditions and user agreements. BCBSM assumes no financial risk on ASC claims. Medicare limiting charges apply, Out-of-state providers. file with your local plan. Michigan health providers bill:		366-684-8216 711 888-650-8136 800-810-2583 800-676-BLUE
	ISSUED: 11/2013 MedicareR Prescripting Drug Coverage X	BCBSM - P.O. Box 32593 Detroit, MI 48232-0593 Mail pharmacy claims to: P.O. Box 14712 Lexington, KY 40512	Facility Prenotification: Rx Prior Authorization: Pharmacists/Rx Claims:	800-572-3413 800-437-3803 800-922-1557

- Allows your Medicare card to be put safely away
- Is the only card you'll need for health and prescription drug services
- Additional benefits, such as dental, may be included or may require a separate card



Types of out-of-pocket costs

- **Deductible**: The amount you pay for medical services before the plan begins to pay its share
- **Coinsurance**: The percentage you pay of the total approved amount of certain medical services
- **Copayment**: A fixed amount paid each time you receive certain medical services

Check your *Evidence of Coverage* for all covered services and any related coinsurance or copay.

Your group plan includes a **maximum out-of-pocket amount**. This caps how much you'll have to pay each year for covered services. Deductible, coinsurance and copays all contribute to the MOOP.



Your cost share If you are currently in the Traditional Plan

Cost-share application	Member responsibility	
Deductible (includes in- and outpatient services)	\$0	
Coinsurance (includes in- and outpatient services)	0%	
Out-of-pocket maximum (MOOP)	\$2,500	
Office visit copay	\$10	
Emergency room copay	\$50	
Ambulance	\$0	
Durable medical equipment, prosthetics, orthotics, medical supplies	\$0	
Additional Benefits:	Foreign travel Home Infusion Therapy Human Organ Transplant Private Duty Nursing	

Prescription drug Benefits-at-a-Glance

	31-day supply	32- to 90-day retail and mail-order prescription drugs	
	Retail pharmacy	Preferred network pharmacy	Standard network pharmacy
Tier 1 – Preferred generic drugs	\$5	\$10	\$10
Tier 2 – Non-preferred generic drugs	\$5	\$10	\$10
Tier 3 – Preferred brand-name drugs	\$40	\$80	\$80
Tier 4 – Non-preferred brand- name drugs	\$80	\$160	\$160
Tier 5 – Specialty drugs	\$80	Supplies greater than 31 days are not covered.	



Your cost share If you are currently in the Community Blue Plan

Cost-share application	Member responsibility		
Deductible (includes in- and outpatient services)	\$500		
Coinsurance (includes in- and outpatient services)	In-network Out-of-network	20% 40%	
Out-of-pocket maximum (MOOP)	In-network Out-of-network	\$1,000 \$3,500	
Office visit copay	Primary/Specialist Chiropractic	\$30 \$20	
Emergency room copay	In & Out of Network	\$50	
Ambulance	In-network Out-of-network	20% 40%	
Durable medical equipment, prosthetics, orthotics, medical supplies	In-network Out-of-network	20% 40%	
Additional Benefits:	Home Infusion Therapy Silver Sneakers		

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98 percent of all Michigan pharmacies* are in our network

- More than 2,400 pharmacies*
- A cost-saving 90-day supply of prescription drugs available through our retail network or mail-order pharmacies
- Home delivery through Walgreens and Express Scripts
- Access to an extensive retail pharmacy network outside of Michigan, including most chain pharmacies

Access PPO and PDP formularies online at: www.bcbsm.com/medicare/formulary.shtml

*January 2014 NCPDP/BCBSM-BCN Pharmacy Network database



Medication Therapy Management program – more protection for you

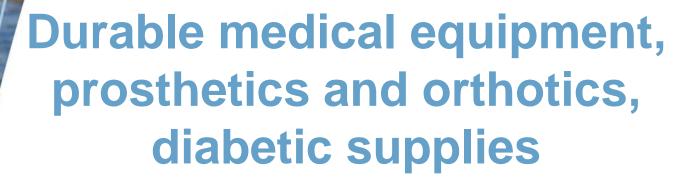
It's free, it's voluntary, and it goes a long way to make sure the drugs that help you don't hurt you.

- A comprehensive medication review with a pharmacist
- Improved medication use
- Less chance of adverse drug interactions
- Qualified members:
 - Run a high risk of adverse drug reactions
 - Have multiple medical conditions
 - Take multiple prescription drugs
 - Expect high prescription costs



- Welcome to Medicare visit setting your baseline
- Bone mass measurement
- Colorectal screening
- Glaucoma screening
- Diabetes screening
- Immunizations
- Pap smears and pelvic exams
- Prostate cancer screening
- Mammogram
- Annual Medicare-covered wellness visit
- Annual routine physical exam

*These preventive services must be performed by a participating provider. If other services are provided during your visit, you may be responsible for a copay.



- Durable medical equipment (DME), such as canes, walkers, wheelchairs, braces, artificial limbs, is provided through the BCBSM DME network: 1-877-241-2583. Authorization rules may apply.
- Diabetic supplies, including insulin pumps, blood glucose monitors, test strips and lancets, are provided through **J&B Medical Supply**. Your physician will write a prescription for the diabetic supplies you need. To locate a J&B provider near you, call **1-888-896-6233**.



Care management services

A host of care management programs are available at no charge to Medicare Plus Blue Group PPO members to help you stay healthy, aid you in recovery or improve your quality of life.

- A registered nurse* will develop a personal plan of care for you and provide education on your condition, nutrition, medication and preventive care.
- Your care management nurse will work with you, your family and/or caretaker, and your doctor to coordinate your health care needs.

*The care management nurse will be from Blue Cross Blue Shield or a contracted external company.



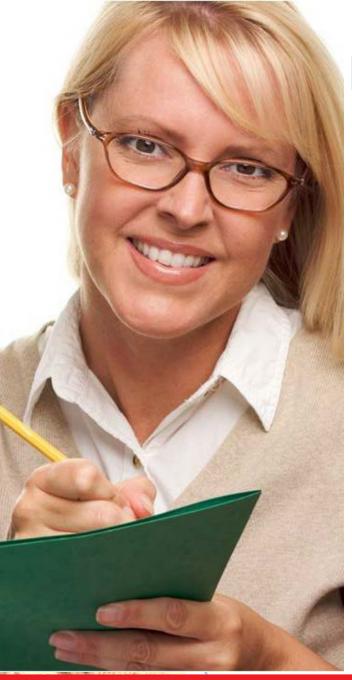


Care management

Care management programs are often focused on specific medical conditions, including:

- Asthma
- Chronic obstructive pulmonary disease (COPD)
- Complex conditions
- Depression
- Diabetes
- Heart disease
- Heart failure
- Kidney health issues
- Solid organ or bone marrow transplants





Behavioral health services

- These services are available for emotional or mental distress, including depression and substance abuse issues.
- Medicare Plus Blue behavioral health case managers evaluate your needs and arrange for the right services.
- Your behavioral health case manager will work with you and your doctor to coordinate your care.
- Behavioral health case management services are part of your benefits – there is NO COST to you.



Value-added discount programs

- Healthy Blue Xtras[™] and Blue365[®]: Special member discounts from local and national retailers and trusted health and wellness resources.
- MyBlue MedicareSM magazine: Great articles and useful information help keep you healthy, happy, safe and fit.
- Dental and vision care services: Dentists and vision care providers in our network will give you discounts on noncovered services. Just show your card.



Exceptional customer service

- A designated Medicare Advantage Service Center
- Complete issue resolution on first contact for 90
 percent of all calls
- Personal concierge servicing
- Proactive member outreach
- Disease and case management support
- Your specialized service team is:
 - Knowledgeable and accurate
 - Courteous, friendly, respectful and empathetic
 - Honest and sincere



Find it on the Web

- Useful health and wellness information and programs
- Drug lists specific to your group
- National Find-a-Doctor look-up mechanism
- Current discount offerings
- Benefit information
- Individual Explanation of Benefits statements*
- Other important websites and contact information

www.bcbsm.com

*Individual *Explanation of Benefits* statements can be found in the secured member portal.



How to reach us...

Medicare Plus Blue Group Customer Service Call Center 1-866-684-8216

Servicing hours: 8:30 a.m. to 5 p.m. Monday through Friday

(TTY users call 711)

Or visit:

www.bcbsm.com/medicare

and/or www.medicare.gov*

*Blue Cross Blue Shield of Michigan does not control this website and is not responsible for its content.



Important information

- The benefit information provided is a brief summary, not a complete description of benefits. For more information, contact the plan.
- Benefits, formulary, provider and pharmacy network, premium and/or copayments/coinsurance may change on Jan. 1 of each year.
- You must continue to pay your Part B premium.
- Limitations, copayments and restrictions may apply.



Questions?

We're here to help.



Notes: