



Blue Cross Group Medicare Advantage Open Access (PPO)SM

The advantage is yours.

Look inside for:

- How a HCSC retiree Medicare plan saves you money
- Details about your Open Access plan
- Getting started
- What happens next



live your
Blue lifeSM

Pay Less with a HCSC Retiree Medicare Plan

A retiree group Medicare plan is one of your retirement benefits. HCSC has made sure to provide you with flexible options for your health care coverage. This Open Access Medicare Advantage plan is different from an individual Medicare plan you could buy on your own. The benefits are richer and you can seek care across the country. And because it's a group plan your costs will be lower.

As communicated over the last few years, beginning in 2021 if you enroll or are enrolled in a traditional plan (PPO, HMO or HSA) but are qualified for the Medicare-based plan, you will pay the full cost difference between the traditional plan and the HCSC retiree Medicare plan. These increases may be significant.

Now is the time to switch to a custom-designed HCSC retiree Medicare plan.

Let's get started.

1. If you haven't signed up for Original Medicare Part A and Part B yet, contact your local Social Security office or go to www.ssa.gov to enroll online.
2. Review this brochure and the enclosed Summary of Benefits for details about your plan.
3. **It's time to enroll!** Follow the enrollment instructions provided by your HCSC benefit administrator.
4. Watch your mailbox for your acknowledgement letter, Medicare enrollment confirmation, and new member ID card.



Medicare coverage made easy

Blue Cross Group Medicare Advantage is your all-in-one plan.

HCSC offers Blue Cross Group Medicare Advantage Open Access (PPO) for your Medicare coverage. This plan bundles prescription drug coverage and supplemental benefits with Original Medicare. It's your one-stop shop for all your health insurance needs. It covers most commonly used services such as provider visits, inpatient and outpatient hospital services, emergency care and prescription medicines. Your Medicare paperwork, claims and benefits are managed so you have only one convenient call to make when you have questions.

Here's how your Open Access PPO plan works.

- **This Open Access PPO plan gives you the freedom to seek care across the country.**
While we encourage you to use network providers, you have the flexibility to go outside the network for the same cost. No referral is needed. Review the Summary of Benefits for details. The providers you choose must **1)** accept Medicare; **2)** agree to see you as a patient; and **3)** agree to bill the plan. Find providers at www.bcbsil.com/retiree-medicare-tools.
- Some high-cost medical services that have more cost-effective alternatives need prior authorization from the plan before your provider can proceed.
- Before you enroll, you can search for your medicines online at www.myprime.com.
 - Select 'Medicines,' then
 - 'Find a Medicine,' followed by
 - 'Continue without sign in.'
 - Follow the prompts to search your medicines.
- You may be able to save money by choosing generic drugs, so ask your provider or pharmacy if this is an option for you.
- Prescription drugs are placed into tiers. The costs for drugs in each tier may differ.

MyPrime.com is a pharmacy benefit website owned and operated by Prime Therapeutics LLC, a separate company providing pharmacy benefit management services for your plan.

Benefits for your total health



Wellness Solutions

Track your health and keep learning with our wellness and education tools. You can set and track progress towards your health care goals. You can also learn about:

You can also learn about:

- diabetes self-care.
- managing blood pressure.
- eating well and healthy weight.
- stopping tobacco use.
- stress management and mental health.
- safety concerns.

Rewards Program

Put up to \$100 worth of gift cards in your pocket for choosing healthy activities. Earn gift cards for completing Healthy Actions throughout the year, like having your Annual Wellness Visit, getting your flu shot or taking a Fall Risk Assessment.*

Gift card options include retailers like Amazon, Barnes and Noble, iTunes, Starbucks, Walgreens and Walmart. Retailers may offer physical and/or eCards. The maximum annual rewards you can earn is \$100 worth of gift cards. *Please note: Healthy Actions are subject to change.*

Fitness Designed for You

The SilverSneakers®⁺ Fitness Program is included in your plan. It helps you achieve your health and fitness goals with access to more than 17,000 fitness locations and online classes led by certified instructors.

Over the Counter Benefit

Save money and make healthy choices with your easy over-the-counter (OTC) benefit. Order OTC products from the convenience of your home. You will receive an OTC catalog with hundreds of products from which to choose. Your unused balance rolls over to the next month.

Virtual Visits

Virtual Visits allows you to consult an independently contracted, board-certified doctor or therapist for non-emergency situations by phone, mobile app or online video anytime, anywhere. Speak to a doctor or schedule an appointment at a time that works best for you.

24/7 Nurseline

Your call is taken by a registered nurse who can help if you are sick or hurt and not sure what to do.

Hearing Care

Routine hearing exams are available through TruHearing® and you can save 30–50% on hearing aids. Your plan also includes a hearing aid allowance.

Vision Care

Vision exams and eyewear are available through EyeMed Vision Care[‡]. Your plan covers routine eye exams.

Refer to the Summary of Benefits for details about the specific benefits included in your HCSC retiree group plan.

TruHearing® is a registered trademark of TruHearing, Inc., which is an independent company providing discounts on hearing aids.

What happens after you enroll?

1. Medicare Approval

Medicare must approve your enrollment before you are officially a member. This generally takes about 10 business days.

2. Acknowledgment and Confirmation Letters, Member ID Card

Within 10–14 days of receiving your enrollment, we'll send you an acknowledgment letter. After your enrollment is approved by Medicare, you'll get a confirmation letter, followed by your member ID card. Share your new ID card with your providers and your pharmacy so they have your correct information.

3. Welcome Kit

This arrives after your member ID card and contains a welcome guide, formulary, evidence of coverage and information to help you get the most from your plan.

4. Personal Phone Call

We will call to welcome you to the plan. Feel free to ask questions about your benefits and tell us if you have special needs we should know about. We might also ask you a few basic health questions, help you schedule your Annual Wellness Visit, and share more about the Rewards Program.

5. Ongoing Communication

Once you are a member, your plan becomes your partner in health. We'll send helpful reminders and health tips throughout the year. If you have a special medical condition, you may receive even more personalized communication from our medical professionals who can help you manage your health and find resources just for you.

6. Blue Access for MembersSM (BAMSM)

Be sure to register for BAM at www.bluememberil.com right away. It is your online portal for benefit and claims information, as well as links to your formulary, pharmacy locator, and provider finder tool.

It's time to live your Blue Life!SM



Questions about your plan?

Talk to the HCSC Corporate Benefits Team or refer to the Summary of Benefits for details. Or you can call the Medicare Help Center at **1-866-468-9636** TTY 711. We are available to discuss 2021 benefits on November 1.

We are open September 1 – January 31 - daily, 8:00 a.m. to 9:00 p.m. CT

February 1 – August 30 - Monday through Friday, 8:00 a.m. to 8:00 p.m. local time.

Alternate technologies (for example, voicemail) will be used on weekends and holidays.

This information is not a complete description of benefits.

Blue Cross[®], Blue Shield[®] and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

The Healthy Activity Portal is a website owned and operated by HealthMine, Inc., an independent company that provides digital health and personal clinical engagement tools and services for Blue Cross and Blue Shield of Illinois members.

* Registration is required to participate. Visit www.BlueRewardsIL.com to register and see what Healthy Actions earn rewards. If you do not have internet access, call customer service using the phone number on the back of your insurance card. Maximum annual rewards of \$100 in gift cards. One reward per Healthy Action per year. Healthy Action dates of service must be in the current plan year. Healthy Actions that earn rewards are subject to change.

† Classes and amenities vary by location.

SilverSneakers[®] is a wellness program owned and operated by Tivity Health, Inc., an independent company.

Tivity Health and SilverSneakers[®] are registered trademarks or trademarks of Tivity Health, Inc., and/or its subsidiaries and/or affiliates in the USA and/or other countries.

‡ EyeMed Vision Care, LLC, an independent company, provides customer service and network administration services for BCBSIL. BCBSIL has contracted with First American Administrators (FAA), an independent company, to provide claims administration. The relationship between BCBSIL, FAA, and EyeMed is that of independent contractors.

PPO plans provided by Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC), an Independent Licensee of the Blue Cross and Blue Shield Association. HCSC is a Medicare Advantage organization with a Medicare contract. Enrollment in HCSC's plans depends on contract renewal.