



2008 Medicare plans

Compare coverage options to find the best solution for you





Blue Cross has a Medicare solution for you

When it comes to Medicare, it is important to know what options for coverage are available to you. Blue Cross and Blue Shield of Minnesota has been providing health coverage to Minnesotans since 1933 and helping people with Medicare since the program began in 1965. Blue Cross is a nonprofit Minnesota company with thousands of knowledgeable independent agents throughout the state to help you make the decision that's best for you.

This brochure contains information to help you understand your options and choose the Blue Cross plan that's right for your health care needs and your budget.

Where to get your questions answered

Your Blue Cross agent

We have thousands of knowledgeable, independent agents throughout Minnesota who are certified to sell Blue Cross Medicare plans.

Blue Cross

For more information about MedicareBlueSM PPO, Senior GoldSM or MedicareBlue Rx plans:

(651) 662-2583 or toll free **1-877-662-2583**

TTY/TDD for the hearing-impaired **1-866-582-1158**

8 a.m. to 8 p.m. Central Time, daily

www.bluecrossmn.com/medicare

Medicare information

For information about Part A (hospital insurance), Part B (medical insurance) or Part D (prescription drug coverage):

Toll free **1-800-MEDICARE (1-800-633-4227)**

TTY/TDD for the hearing-impaired **1-877-486-2048**

24 hours a day, 7 days a week

www.medicare.gov

When it comes to Medicare, you can count on Blue Cross for the knowledge and experience to help you understand your options.

Why choose a Medicare plan from Blue Cross?

Your out-of-pocket expenses for hospital, medical and prescription drugs not covered by Original Medicare can quickly add up. That's why many people with Original Medicare enroll in health plans, like those offered by Blue Cross, to help pay for these coverage gaps.

When you choose a Medicare plan from Blue Cross, you get protection from expenses that Original Medicare does not cover. You also get the peace of mind knowing that you can see any doctor in our extensive provider network, with no referrals needed. Plus you're covered for medical emergencies when you travel.

What is Original Medicare?

Original Medicare is a national health insurance program for people age 65 and older and people with certain disabilities, including permanent kidney failure. Established in 1965, Medicare is administered by the Centers for Medicare & Medicaid Services, an agency of the U.S. federal government.

Original Medicare has two parts:

Medicare Part A is hospital insurance that helps pay for inpatient care in hospitals and skilled nursing facilities.

Medicare Part B is medical insurance that helps pay for doctor visits, physicians' services, lab tests, durable medical equipment and outpatient hospital treatment.

But Original Medicare does not cover everything. There are deductibles and coinsurance you must pay when you receive health care services.

Blue Cross has coverage to fit your needs

Whether you're looking for one plan that covers both medical and prescription drug needs, a combination of plans, or you just want stand-alone drug or medical coverage, we've got a plan for you. Blue Cross offers flexible Medicare solutions with various premiums to choose from. These plans help pay for coverage gaps in Original Medicare and more.

<p>Solution 1: Both medical and drug benefits in one easy plan</p>	<p>Medical and prescription drug coverage</p>	
<p>Solution 2: Combine Minnesota's top Medicare supplement plan with a Medicare prescription drug plan</p>	<p>Medical coverage</p> <p>Senior Gold A Medicare Select plan</p> <ul style="list-style-type: none"> Covers Original Medicare Part A and Part B coinsurance and deductibles Broad network that lets you see any participating provider nationwide Emergency and urgent care covered worldwide Optional preventive care coverage 	<p>Prescription drug coverage</p> <p>MedicareBlue Rx A Part D prescription drug plan</p> <ul style="list-style-type: none"> Accepted at 60,000 participating pharmacies nationwide Helps pay for generic, brand-name and specialty drugs Three plan options to choose from
<p>Solution 3: Just add prescription drug coverage to medical coverage you already have</p>	<p>Medical coverage</p> <p>Original Medicare Part A and/or Part B or other medical coverage</p>	<p>Prescription drug coverage</p> <p>MedicareBlue Rx A Part D prescription drug plan</p> <ul style="list-style-type: none"> Great for people who want to add prescription drug coverage to their Original Medicare or a stand-alone medical plan Accepted at 60,000 participating pharmacies nationwide Helps pay for generic, brand-name and specialty drugs Three plan options to choose from

Benefits, premiums, copayments and coinsurance may change January 1, 2009.

When you enroll in Senior Gold, MedicareBlue PPO or MedicareBlue Rx, you must continue to pay your Medicare Part B premium if not otherwise paid for under Medicaid or by another third party.

Other health plans are available. Talk to your agent or call Blue Cross to learn more.

Find the right plan match for you

Asking the right questions upfront will help you identify what's most important to you in a health plan. Here are some points you may want to consider.

What premium best meets your needs?

- Senior Gold members pay more in monthly premium but do not have to pay copayments at the time of service.
- MedicareBlue PPO members have a lower monthly premium and a copayment or coinsurance when they use health care services.

Do you want a medical plan with or without a built-in drug plan?

- For all-in-one convenience, there's MedicareBlue PPO, which combines health and prescription drug coverage into a single plan.
- Senior Gold covers hospital and medical benefits, but not prescription drugs.
- If you just need a drug plan, MedicareBlue Rx fits the bill.
- You can also enroll in both Senior Gold and MedicareBlue Rx to get complete coverage.

Do you travel?

- Senior Gold members have 100 percent coverage for regular, urgent and emergency care anywhere in the United States, and 80 percent coverage for urgent and emergency care outside the country.
- For worldwide travel, MedicareBlue PPO members pay a \$50 emergency copayment or a \$10 or \$25 copayment for urgent care in the United States, depending on their plan choice. MedicareBlue PPO Enhanced members have a travel benefit and pay in-network copayments for medical care in the United States when outside of the seven-state service area.

Do you plan to relocate out of Minnesota?

- MedicareBlue PPO is not portable, so if you were to move permanently out of the plan's seven-state service area, you would have to enroll in a new plan in your new resident state.
- Senior Gold is portable, so you can stay in your plan even if you move to another state.

What about access to doctors and hospitals?

- Senior Gold members have access to our largest network, which includes nearly every doctor and hospital in Minnesota.
- The MedicareBlue PPO network includes more than 90 percent of Minnesota doctors and hospitals.

We feature a large network of health care providers. Each provider is an independent contractor and is not our agent.

Your Medicare plan options at a glance

Here are side-by-side coverage highlights for Blue Cross' Medicare plans. Compare them to coverage from Original Medicare. Note that benefits, premium amounts, copayments and coinsurance are subject to change January 1, 2009. The MedicareBlue PPO benefits reflect in-network coverage. Generally, you will pay more for services received out of the network. For complete benefit information, call your agent or Blue Cross to request a Summary of Benefits.

You'll still pay your Part B premium

To be eligible for MedicareBlue PPO or Senior Gold, you must continue to pay your monthly premium for Medicare Part B coverage. This amount is usually deducted from your Social Security check.



Benefit category	
Monthly premium	
Deductible	
Preventive services	Routine physical exams
	Cancer screenings, includes colorectal and prostate screenings, and mammograms
Doctor office visits, specialist visits and urgent care	
Emergency care	
Inpatient care	
Out-of-pocket maximum	
Worldwide coverage	
Prescription drug coverage	

Original Medicare	MedicareBlue PPO Essential	MedicareBlue PPO Enhanced	Senior Gold with preventive care
You pay the Medicare Part B premium of \$96.40 – \$238.40.	In addition to the Medicare Part B premium, you pay: Essential Plus Rx1: \$51	In addition to the Medicare Part B premium, you pay: Enhanced Plus Rx1: \$90 Enhanced Plus Rx2: \$144 Enhanced Plus Rx3: \$201	In addition to the Medicare Part B premium, you pay: Tobacco-free: \$167 Standard rate: \$219 (Includes optional preventive care: \$5)
You pay Part A deductible of \$1,024 and Part B deductible of \$135 (if enrolled in Part A and/or Part B).	No deductible for medical benefits.	No deductible for medical benefits.	No deductible for medical benefits.
You pay 20% of Medicare-approved amounts for one physical exam within the first 6 months of your new Part B coverage, not including laboratory tests. You pay 100% for any additional routine physical exams.	You pay \$25 copay.	You pay \$10 copay.	You pay \$0.
You pay 20% of Medicare-approved amounts.	You pay \$0.	You pay \$0.	You pay \$0.
You pay 20% of Medicare-approved amounts.	You pay \$25 copay.	You pay \$10 copay.	You pay \$0. Participating physicians must be used in Minnesota.
You pay 20% of the facility charge or applicable copayment for each emergency visit (unless admitted to the hospital within 3 days for the same condition). You pay 20% of doctor charges.	You pay \$50 copay.	You pay \$50 copay.	You pay \$0.
You pay for each benefit period: Days 1 – 60: \$1,024 deductible Days 61 – 90: \$256 per day Days 91 – 150: \$512 each lifetime reserve	You pay \$750 per stay for unlimited days.	You pay \$100 per stay for unlimited days.	You pay \$0 per stay for unlimited days.
N/A	Out-of-pocket maximum for medical benefits only. Does not include Rx expenses. You pay: • \$3,000 annual maximum for in-network services. • \$8,000 annual maximum for in- and out-of-network services.	Out-of-pocket maximum for medical benefits only. Does not include Rx expenses. You pay: • \$1,500 annual maximum for in-network services. • \$6,500 annual maximum for in- and out-of-network services.	No maximum for services not covered by Medicare or for medical care outside the United States.
You pay 20% of Medicare-approved amounts in the United States. Generally NOT covered outside the United States.	You pay \$25 copay for urgent care in the United States, \$50 copay for emergency care worldwide.	You pay \$10 copay for urgent care in the United States, \$50 copay for emergency care worldwide. The travel benefit gives you in-network benefits when traveling outside the seven-state service area.	You pay \$0 for all Medicare-covered services in the United States. You pay 20% for emergency or urgent care outside the United States.
N/A	Included: See next page for details.	Included: Three drug coverage options. See next page for details.	Not included: See next page for MedicareBlue Rx prescription drug plan options.

Your drug coverage options

The chart below compares the three prescription drug coverage options. All of the options provide coverage for generic, brand and specialty drugs.

MedicareBlue Rx is a stand-alone prescription drug plan. It can be purchased separately if you have Original Medicare or are enrolled in Senior Gold or another Medicare health plan. MedicareBlue Rx can help you save on your existing medications and offers protection against unexpected drug costs in the future.

MedicareBlue PPO Essential and Enhanced plans include both medical and prescription drug coverage for one monthly premium:

- MedicareBlue PPO Essential provides you with Rx1 coverage.
- MedicareBlue PPO Enhanced lets you choose any of the three options: Rx1, Rx2 or Rx3.

Benefits, premiums, copayments and coinsurance may change January 1, 2009.

Benefit category	MedicareBlue Rx Option 1 MedicareBlue PPO Plus Rx1	MedicareBlue Rx Option 2 MedicareBlue PPO Plus Rx2	MedicareBlue Rx Option 3 MedicareBlue PPO Plus Rx3
Premium Amount <i>you pay</i> each month for your coverage You must continue to pay your Part B premium	<ul style="list-style-type: none"> • MedicareBlue Rx: \$24.70 • MedicareBlue PPO Essential and MedicareBlue PPO Enhanced premiums include drug coverage. See rates on previous page. 	<ul style="list-style-type: none"> • MedicareBlue Rx: \$62.50 • MedicareBlue PPO Enhanced premium includes drug coverage. See rates on previous page. 	<ul style="list-style-type: none"> • MedicareBlue Rx: \$94 • MedicareBlue PPO Enhanced premium includes drug coverage. See rates on previous page.
Deductible Amount <i>you pay</i> before the initial coverage begins	\$275	\$0 (no deductible)	\$0 (no deductible)
Initial coverage Amount <i>you pay</i> after you have paid the deductible <ul style="list-style-type: none"> • Level 1: Generic • Level 2: Preferred brand • Level 3: Brand • Specialty drugs 	<ul style="list-style-type: none"> • 10% coinsurance • 18% coinsurance • 50% coinsurance • 25% coinsurance 	<ul style="list-style-type: none"> • \$4 copayment • \$32 copayment • 50% coinsurance • 33% coinsurance 	<ul style="list-style-type: none"> • \$4 copayment • \$37 copayment • 50% coinsurance • 33% coinsurance
Coverage gap Amount <i>you pay</i> after your total yearly covered prescription drug costs reach \$2,510*	100% for all covered drugs	100% for all covered drugs	<ul style="list-style-type: none"> • \$4 copayment for Level 1: generic drugs • 100% for all other levels of covered drugs
Catastrophic coverage Amount <i>you pay</i> after you have paid \$4,050 out of pocket for covered prescription drugs**	The greater of: <ul style="list-style-type: none"> • \$2.25 copayment for generic drugs and \$5.60 copayment for all others OR • 5% coinsurance 	The greater of: <ul style="list-style-type: none"> • \$2.25 copayment for generic drugs and \$5.60 copayment for all others OR • 5% coinsurance 	The greater of: <ul style="list-style-type: none"> • \$2.25 copayment for generic drugs and \$5.60 copayment for all others OR • 5% coinsurance

* Your “total drug costs” means the total amount you have paid plus what the plan has paid for the calendar year, not including premiums.

** Your “out-of-pocket costs” means the amount you have paid for covered drugs in that calendar year. This does not include the amount the plan has paid or the premiums you pay.

What is a drug formulary?

Every Medicare prescription drug plan has a list of drugs it covers. This list is called the drug formulary. The formulary is approved by the federal government.

When comparing drug coverage, it's important to review the formulary to make sure the prescription drugs you are currently taking are covered.

Our formulary has different "levels" of drugs that are covered. These levels are for generic, preferred brand, brand and specialty drugs. The amount you

pay for a prescription drug depends on the plan you choose and the drug's formulary level.

Certain drugs may require prior approval from MedicareBlue Rx or may have quantity limits or other restrictions. These restrictions and other information can be found in the formulary.

You can search the formulary online at **www.YourMedicareSolutions.com**.



Save with complementary services and discounts

The products and services described below are neither offered nor guaranteed under our contract with Medicare. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to your Blue Cross plan's grievance process.

All Blue Cross Medicare plan members are automatically eligible to receive special services and discounts designed to help you stretch your health care dollars. You'll enjoy:

Eye, ear and alternative health discounts. Get money-saving discounts on eye exams, eyewear, hearing exams, hearing aids, acupuncture, massage therapy and vitamins.

Stop-smoking program. Want to kick tobacco? Then take advantage of this proven, successful program. Trained phone counselors and support materials can help you quit.

Online wellness center. The online wellness center provides features such as health calculators and quizzes, exclusive articles, and information arranged by age and condition.

Members enrolled in MedicareBlue PPO or Senior Gold also receive:

24-hour nurse advice line. Friendly and knowledgeable nurses are available 24 hours a day, seven days a week.

Members who enroll in Senior Gold may also take advantage of:

Fitness discounts. Earn up to \$20 toward your monthly health club fees when you exercise at least 12 times per month at a participating fitness center.

Important information

MedicareBlue PPO and MedicareBlue Rx

Enrollment: MedicareBlue PPO or MedicareBlue Rx coverage is separately issued by only one of the following plans: Wellmark Blue Cross and Blue Shield of Iowa*, Blue Cross and Blue Shield of Minnesota*, Blue Cross and Blue Shield of Montana*, Blue Cross and Blue Shield of Nebraska*, Blue Cross Blue Shield of North Dakota*, Wellmark Blue Cross and Blue Shield of South Dakota*, and Blue Cross Blue Shield of Wyoming*. (* Independent licensees of the Blue Cross and Blue Shield Association.)

Medicare beneficiaries may enroll in MedicareBlue PPO or MedicareBlue Rx online at **www.YourMedicareSolutions.com**, or through the Centers for Medicare & Medicaid Services Online Enrollment Center located at **www.medicare.gov**. For more information, contact MedicareBlue Rx toll free at 1-866-434-2037 or MedicareBlue PPO at 1-866-434-2038, daily, 8 a.m. to 8 p.m. Central Time. TTY/TDD users may call 1-866-582-1158.

Members may enroll in Medicare Blue PPO or MedicareBlue Rx only during specific times of the year. For more information about enrollment periods, please contact MedicareBlue PPO or MedicareBlue Rx customer service (see inside front cover for telephone numbers).

Extra help: You may be able to get extra help to pay for your prescription drug premiums and costs. To see if you qualify for getting extra help, call: MedicareBlue PPO or MedicareBlue Rx customer service (see inside front cover for telephone numbers), or 1-800-MEDICARE (1-800-633-4227). TTY/TDD users should call 1-877-486-2048, 24 hours a day, seven days a week. Or contact your State Medicaid Office, or the Social Security Administration at 1-800-772-1213 between 7 a.m. and 7 p.m., Central Time, Monday through Friday. TTY/TDD users should call 1-800-325-0778.

Prescription drugs: MedicareBlue PPO and MedicareBlue Rx members must use participating network pharmacies to access their prescription drug benefit, except under non-routine circumstances when they cannot reasonably use network pharmacies. Members who use pharmacies outside the network will pay any difference in the non-network pharmacy's charge and the plan's allowable charge. Types of network pharmacies include: retail, mail order, home infusion, Long Term Care and Indian/Tribal/Urban. The pharmacies in our network can change at any time. For more information about mail order service or network pharmacies, contact 1-866-434-2037, 8 a.m. to 8 p.m. daily, Central Time. TTY/TDD users should call 1-866-582-1158.

Benefits and plan details: Benefits, formulary, network pharmacies, premium and/or copayments/coinsurance may change on January 1, 2009. Please contact MedicareBlue PPO or MedicareBlue Rx for details.

MedicareBlue PPO

Eligibility: MedicareBlue PPO is a regional Medicare Advantage Plan with a Medicare contract. You are eligible to enroll in MedicareBlue PPO if you are entitled to Medicare Part A and enrolled in Medicare Part B and live in the plan service area. You must continue to pay your Medicare Part B premiums (and Part A, if applicable) if not otherwise paid for by Medicaid or another third party. The MedicareBlue PPO prescription drug benefit is only available to members of the MedicareBlue PPO plan. If you are already enrolled in a Medicare Advantage Prescription Drug plan, you must receive your Medicare prescription drug benefit through that plan. You cannot enroll in MedicareBlue PPO Enhanced Plus Rx3 if your current or former employer helps pay for your drugs.

Network: MedicareBlue PPO has formed a network of doctors, specialists and hospitals. You can use any provider who is part of our network or you may go to doctors out of the network. However, you may have to pay more for services received out

of the network, except in emergency/urgent care situations. MedicareBlue PPO provides reimbursement for all covered benefits regardless of whether they are received in or out of network. The providers in our network can change at any time. For a current Provider Directory, contact MedicareBlue PPO customer service at the number listed on the inside front cover or visit www.YourMedicareSolutions.com.

Federal contract: MedicareBlue PPO's contract with CMS is renewed annually, so enrollment in MedicareBlue PPO after December 31, 2008 cannot be guaranteed.

MedicareBlue Rx

Eligibility: MedicareBlue Rx is a regional Medicare Prescription Drug Plan with a Medicare contract. You are eligible to enroll in MedicareBlue Rx if you are entitled to Medicare benefits under Part A or enrolled in Medicare Part B and live in the plan service area. You must continue to pay your Medicare Part B premium if not otherwise paid for under Medicaid or by another third party. You may be enrolled in only one Part D plan at a time. If you are enrolled in a Medicare Advantage plan, you may not join MedicareBlue Rx unless you are a member of a Private-Fee-For-Service MA plan (PFFS) that does not provide Medicare prescription drug coverage, a Medicare Savings Account MA plan (MSA), or an 1876 Cost plan. You cannot enroll in MedicareBlue Rx Option 3 if your current or former employer helps pay for your drugs.

If you have special needs, this document is available in other formats.



**BlueCross BlueShield
of Minnesota**

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