

2026 Florida Blue Medicare Benefits Preview



MEDICARE

BlueMedicare Patriot PPO

Available statewide

BlueMedicare Premier / **Preferred HMO**

- Lake, Marion & Sumter
- Hillsborough & Polk
- Palm Beach
- Charlotte, Collier, Lee, Manatee & Sarasota

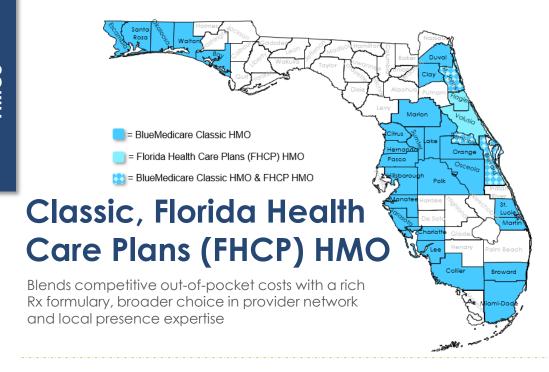
BlueMedicare Value PPO

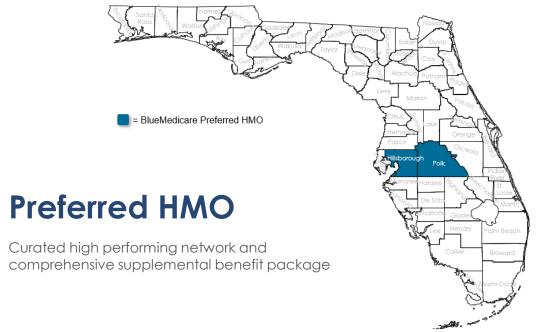
- Lake, Marion & Sumter
- Hillsborough & Polk
- Charlotte & Lee

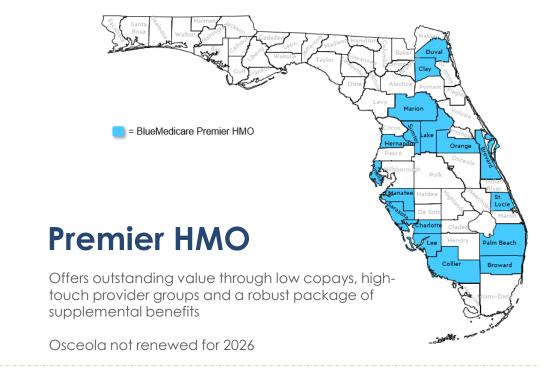
Medicare Supplement

Available statewide

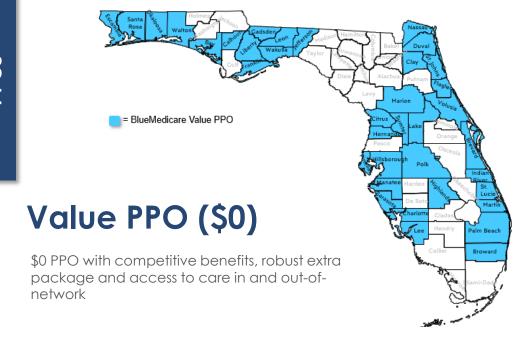


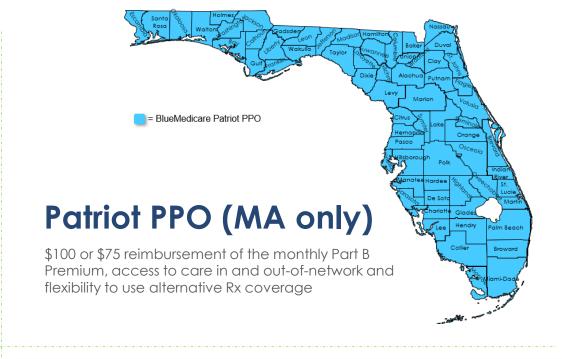


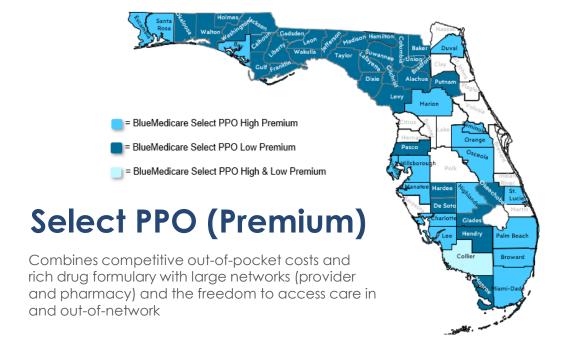




- High performing network participants delivering Medicare-centric care
- Primary physician, preventive visits covered at no cost
- \$0 for generic drugs on most plans
- No cost for covered, embedded dental services
- Many plans with quarterly OTC allowance
- All plans with Hearing Aid and Vision coverage
- Embedded fitness programs included on all plans







- Statewide coverage at \$0 monthly premium (MA-PD+MA only)
- Primary physician, preventive visits covered at no cost
- \$0 for generic drugs on all plans
- Out-of State coverage at In-Network cost shares (BCBS Association Visitor/Traveler networks)
- No cost for covered, embedded dental services
- Many plans with quarterly OTC allowance
- All plans with Hearing Aid and Vision coverage
- Embedded fitness programs included on all plans

2026 Service Area / Plan Changes

Florida Blue Vour Health Solutions Partner

Non-Renewal

BlueMedicare Premier HMO H1035-026



- 620 Members
- Receive a Non-Renewal Letter on 10/2
- No ANOC
- Must choose another plan by 12/31/25

2 Consolidation

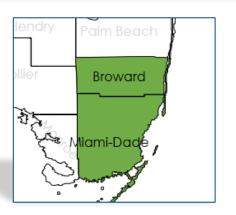
FHCP Medicare Rx H1035-014 into FHCP Classic HMO



- 1,300 Members
- Crosswalked by CMS to FHCP Classic HMO H1035-040
- ANOC outlines plan differences
- Same Network

Expansion

Broward, Miami-Dade added into Patriot PPO

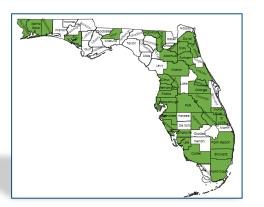


- \$100 per month Part B
 Premium Refund
- Added to current plan in Brevard, Flagler, Indian River, Martin, Orange, Osceola, Palm Beach, Seminole, St. Lucie, Volusia

4

No New Sales

BlueMedicare Select Plans B,C,D,M



- Last day for new
 Sales is November
 30 for December 1
 eff. date
- Current members can stay on plan but no changes within Select family

Supplemental Adjustments – Optimizing Coverage

Plans	Dental	Over-the-Counter	P Hearing Aids	Vision
Growth Focus				
All Plans	*	Removal from 4 of 8 Premier HMOs; 5 of 9 Value PPOs		✓

^{*} Except FHCP Medicare Rx Plus H1035-002

Caregiver Benefit	Transportation	● ● ● Special Supplemental Benefits for the Chronically III (SSBCI)
Benefit Removal	Benefit Removal: moving to partnership with our high performing Network groups	Benefit Removal: Meals, Extra OTC, Food Card allowance

HealthyBlue Rewards



Rewards program for Florida Blue Medicare Advantage (Part C) members

- Rewards are earned for completing certain preventative screenings and healthy activities between Jan 1-Dec 31
- To participate, members must opt-in through their online member account at <u>FloridaBlue.com/Medicare</u>
- For assistance or additional questions, members can call 1-800-926-6565 (TTY: 1-800-955-8770)
- Unredeemed rewards do not carry over into the next benefit year

Earned rewards dollars can be used to purchase OTC items or healthy foods in-store at select retailers.

2026 Rewardable Activities	
Annual Wellness Visit / Welcome to Medicare Exam	\$40
In-Home Health Visit / Telehealth Visit	\$15
Breast Cancer Screening	\$10
Colon Cancer Screening (Choose one option below to receive one \$10 reward.) Option 1: Fecal Immunochemical Test (FIT) Option 2: FIT-DNA (also known as Cologuard or flexible sigmoidoscopy or CT colonography)	\$10
Option 3: Colonoscopy	0.4.5
Diabetic Eye Screening	\$15
Osteoporosis Screening	\$10
2026 Maximum Reward	\$100













Classic HMO; Value, Select, Patriot

PPO (members must opt. into program to receive card; one-time opt. in)







Premier HMO (<u>except</u> Lake, Marion, Sumter)







Premier HMO – Lake Marion, Sumter









Preferred HMO – Hillsborough, Polk







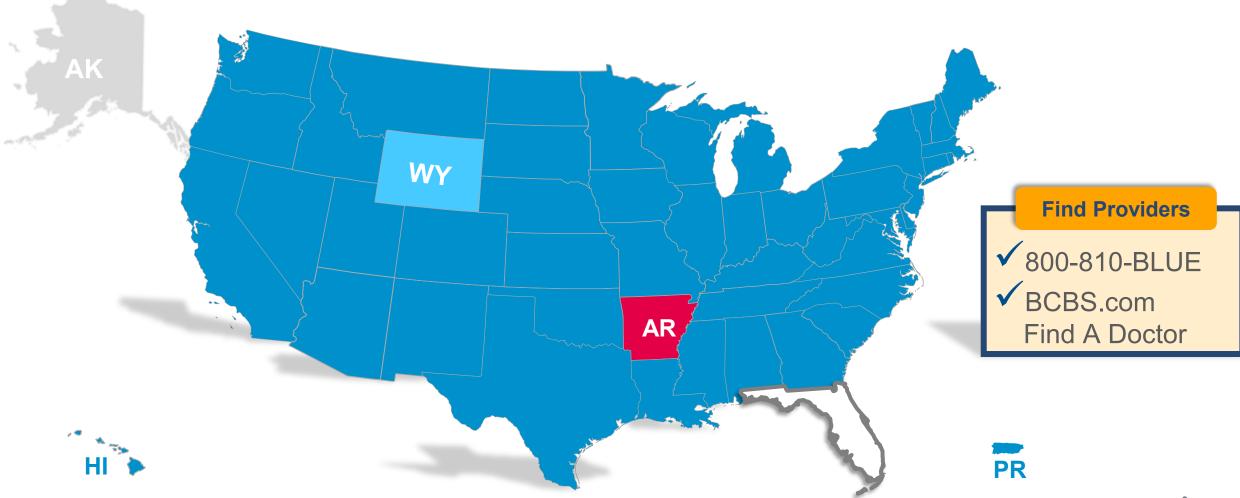


2026 Blue Cross and Blue Shield PPOs Network Sharing



MEDICARE

Under the Visitor/Traveler benefits, members pay In-Network cost shares when utilizing a participating provider with the local BCBS Medicare Advantage PPO plan.



Focus Points & Growth Initiatives

Expansion of growth area and plan options: Five new counties have been added to priority/focus list for plan year 2026!



Polk, Hillsborough

 Competitive benefits, tailored network of high-performing providers



Palm Beach, Lake, Marion, Sumter, Charlotte, Collier, Lee, Manatee, Sarasota

 Competitive benefits, tailored network of high-performing providers, value of dental coverage, etc.

Classic HMO

Select Counties

- Focus on growth of plan switchers only
- Commissionable for switchers and renewals only



Statewide

 Increasing give-back amount, OTC, flexibility of PPO network, etc.



Charlotte, Lee, Hillsborough, Polk, Lake, Marion, Sumter

 Competitive benefits, flexibility of PPO network, dental coverage



Statewide

 Focus on growth in rating areas 2 and 3, FBM value prop (same age forever, ability to change plans monthly, etc.)





Key Benefits to Members & Agents

Additional Benefits:

- Silver Sneaker program available on all core plans.
- Retail OTC and Flex dental and hearing benefits available on Premier HMO (LMS), Preferred HMO Hillsborough, and Polk

Enhanced Member Experience:

- Retail centers offering face-to-face support
- Personalized health solutions
- Health and wellness informational sessions and classes

Event Support:

 Event support in focus counties, with access to our RV for product showcases and specialized events

2026 Benefits by Market



Southeast Florida (Palm Beach)





SOUTH	CENTRAL	west Growth Focus Northwest			
Plan Name		BlueMedicare Premier (HMO)			
Medicare Plan Number		H1035-022			
Service Area		Palm Beach			
Why You Should Sell This Plan	Offe	Offers outstanding value through low copays, high-touch provider groups and a robust package of supplemental benefi			
Plan Premium		\$0			
Maximum Out-of-Pocket		\$4,200			
Primary Care Physician (PCP)		\$0			
Physician Specialist		\$15			
Inpatient Hospital Acute		\$225 per day, days 1-6			
Outpatient Hospital Services		\$140			
Rx Deductible		\$615 for Tiers 3,4,5 only			
Rx Cost Share: Tier 1 / Tier 2 / Tier 3 / T	ier 4 / Tier 5 / Tier 6	\$0 / \$0 / 21 % / 30 % / 25 % / \$0			
Supplemental Benefits	> He	ntal (Comprehensive, \$3,000 annual allowance) aring Aids (\$350-\$1,825 copays) ion (exam + \$225 allowance)			

> OTC (\$50 per quarter allowance)

> Member Rewards Program

SilverSneakersTelehealth Services

The Villages (Lake, Marion, Sumter)



MEDICARE

CENTRAL Growth Focus



	- Turr ocus	an i ocus
Plan Name	BlueMedicare Value (PPO)	BlueMedicare Premier (HMO)
Medicare Plan Number	H5434-036	H1035-043
Service Area	Lake, Marion, Sumter	Lake, Marion, Sumter
Why You Should Sell This Plan	\$0 PPO with competitive benefits, robust extra package and access to care in and out-of-network	Offers outstanding value through low copays, high-touch provider groups and a robust package of supplemental benefits
Plan Premium	\$0	\$0
Maximum Out-of-Pocket	\$5,900 IN / \$10,100 IN & OUT	\$2,700
Primary Care Physician (PCP)	\$0	\$0
Physician Specialist	\$35	\$30
Inpatient Hospital Acute	\$320 per day, days 1-7	\$175 per day, days 1-7
Outpatient Hospital Services	\$275	\$125
Rx Deductible	\$615 for Tiers 3,4,5 only	\$615 for Tiers 3,4,5 only
Rx Cost Share: Tier 1 / Tier 2 / Tier 3 / Tier 4 / Tier 5 / Tier 6	\$0 / \$0 / 21 % / 30 % / 25 % / \$0	\$0 / \$0 / 21 % / 30 % / 25 % / \$0
Supplemental Benefits	 Dental (Comprehensive) Hearing Aids (\$350-\$1,825 copays) Vision (exam + \$200 allowance) OTC (\$35 per quarter allowance) SilverSneakers Telehealth Services Member Rewards Program 	 Dental (Comprehensive, \$3,500 annual allowance) Hearing Aids (\$2,000 allowance) Vision (exam + \$225 allowance) OTC (\$85 per quarter allowance) SilverSneakers Telehealth Services Member Rewards Program Flexible Benefit: \$300 to be used for additional dental or hearing costs after initial annual benefit is exhausted
		2026 Change

West Florida (Hillsborough, Polk)





•		1 7 7			
SOUTH	Growth Focus WEST	NORT Growth Focus			
Plan Name	BlueMedicare Value (PPO)	BlueMedicare Preferred (HMO)			
Medicare Plan Number	H5434-034	H1035-052			
Service Area	Hillsborough, Polk	Hillsborough, Polk			
Why You Should Sell This Plan	\$0 PPO with competitive benefits, robust extra package and access to care in and out-of-network	Curated high performing network and comprehensive supplemental benefit package			
Plan Premium	\$0	\$0			
Maximum Out-of-Pocket	\$6,750 IN / \$10,100 IN & OUT	\$3,300			
Primary Care Physician (PCP)	\$0	\$0			
Physician Specialist	\$55	\$20			
Inpatient Hospital Acute	\$385 per day, days 1-7	\$210 per day, days 1-7			
Outpatient Hospital Services	\$350	\$190			
Rx Deductible	\$615 for Tiers 3,4,5 only	\$615 for Tiers 3,4,5 only			
Rx Cost Share: Tier 1 / Tier 2 / Tier 3 / Tier 4 / Tier 5 / Tier 6	\$0 / \$0 / 21 % / 30 % / 25 % / \$0	\$0 / \$0 / 21 % / 30 % / 25 % / \$0			
Supplemental Benefits	 Dental (Comprehensive) Hearing Aids (\$350-\$1,825 copays) Vision (exam + \$200 allowance) OTC (\$30 per quarter allowance) SilverSneakers Telehealth Services Member Rewards Program 	 Dental (Comprehensive, \$3,000 annual allowance) Hearing Aids (\$350-\$1,825 copays) Vision (exam + \$225 allowance) OTC (\$75 per quarter allowance) SilverSneakers Telehealth Services Member Rewards Program Flexible Benefit: \$300 to be used for additional dental or hearing costs after initial annual benefit is exhausted 			

Southwest Florida (Citrus, Charlotte, Collier, Lee, Manatee,





SOUTH

Sarasota)

☐ Growth Focus w

WEST

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NORTH		Prowth	Focus

		- Jours
Plan Name	BlueMedicare Value (PPO)	BlueMedicare Premier (HMO)
Medicare Plan Number	H5434-030	H1035-045
Service Area	Charlotte, Lee	Charlotte, Collier, Lee, Manatee, Sarasota
Why You Should Sell This Plan	\$0 PPO with competitive benefits, robust extra package and access to care in and out-of-network	Offers outstanding value through low copays, high-touch provider groups and a robust package of supplemental benefits
Plan Premium	\$0	\$0
Maximum Out-of-Pocket	\$6,750 IN / \$10,100 IN & OUT	\$3,400
Primary Care Physician (PCP)	\$0	\$0
Physician Specialist	\$55	\$40
Inpatient Hospital Acute	\$385 per day, days 1-7	\$310 per day, days 1-7
Outpatient Hospital Services	\$350	\$235
Rx Deductible	\$615 for Tiers 3,4,5 only	\$615 for Tiers 3,4,5 only
Rx Cost Share: Tier 1 / Tier 2 / Tier 3 / Tier 4 / Tier 5 / Tier 6	\$0 / \$0 / 21 % / 30 % / 25 % / \$0	\$0 / \$0 / 21 % / 30 % / 25 % / \$0
Supplemental Benefits	 Dental (Comprehensive) Hearing Aids (\$350-\$1,825 copays) Vision (exam + \$200 allowance) SilverSneakers Telehealth Services Member Rewards Program 	 Dental (Comprehensive) Hearing Aids (\$350-\$1,825 copays) Vision (exam + \$225 allowance) OTC (\$45 per quarter allowance) SilverSneakers Telehealth Services Member Rewards Program

MA Only PPO (Statewide)





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	CENTRAL		Grov	vth	Focus	
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SOUTH	CENTRAL ELLE GIOWIN FOCUS	NORTH LILLI GIOWIN FOCUS			
Plan Name	BlueMedicare Patriot (PPO)	BlueMedicare Patriot (PPO)			
Medicare Plan Number	Varies by County	Varies by County			
Service Area	Select Counties	Select Counties			
Why You Should Sell This Plan	Provides partial reimbursement of the monthly Part B Premium, accessovers	,			
Plan Premium	\$0 / \$100 Monthly Part B Refund	\$0 / \$75 Monthly Part B Refund			
Maximum Out-of-Pocket	\$6,750 IN / \$10,100 IN & OUT	\$6,750 IN / \$10,100 IN & OUT			
Primary Care Physician (PCP)	\$0	\$0			
Physician Specialist	\$55	\$55			
Inpatient Hospital Acute	\$385 per day, days 1-7	\$385 per day, days 1-7			
Outpatient Hospital Services	\$350	\$350			
Rx Deductible	N/A	N/A			
Rx Cost Share	N/A	N/A			
Supplemental Benefits	 Dental (Comprehensive) Hearing Aids (\$350-\$1,825 copays) Vision (exam + \$200 allowance) OTC (\$50 per quarter allowance) SilverSneakers Telehealth Services Member Rewards Program 	 Dental (Comprehensive) Hearing Aids (\$350-\$1,825 copays) Vision (exam + \$200 allowance) OTC (\$50 per quarter allowance) SilverSneakers Telehealth Services Member Rewards Program 			

2026 Embedded Dental

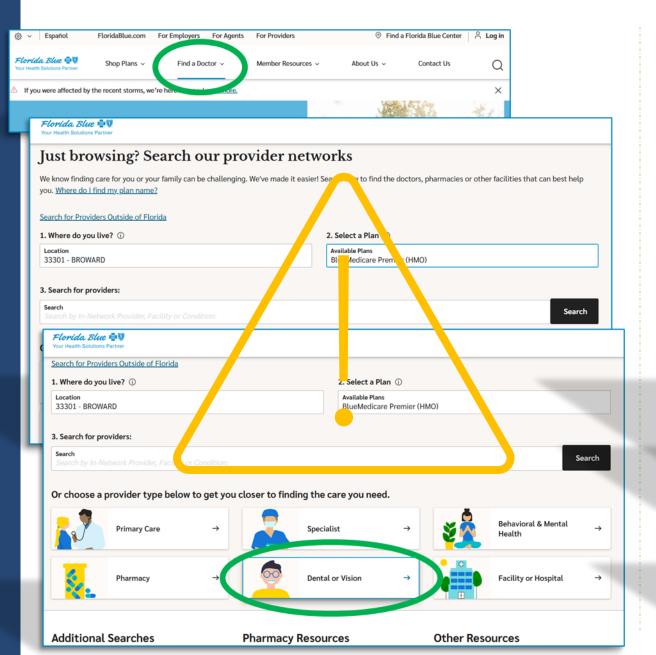


		2026	Dental Plans			
	HMO & PPO Plan 10	Plan 74	Plan 67	Allowance Plans		
Product *	Classic HMO: All FHCP Medicare: Classic Patriot PPO: All Select PPO: All Value PPO: Bay, Calhoun, Escambia, Franklin, Gadsden, Jefferson, Leon, Liberty, Okaloosa, Santa Rosa, Wakulla, Walton Value PPO: Brevard, Broward, Charlotte, Citrus, Clay, Duval, Flagler, Hernando, Hillsborough, Indian River, Lake, Lee, Manatee, Marion, Martin, Nassau, Pinellas, Highlands, Palm Beach, Polk, Sarasota, St. Johns, St. Lucie, Sumter, Volusia		\$3,000: Premier HMO - Palm Beach (61S) \$3,500: Premier HMO* - Lake, Marion, Sumter (61V) \$3,000: Preferred HMO* - Hillsborough, Polk (61T)			
Member Cost			\$0			
			reventive			
Exam		2 per calendar year				
Cleaning		2 per calendar year		All Preventive services covered up to the annual allowance		
X-Ray		1 set per calendar year				
			prehensive			
Fluoride Treatment		1 per calendar year	1 per calendar year			
Extraction	1 per calendar year Simple Only	1 per calendar year Simple & Surgical	2 per calendar year Simple & Surgical			
Crown		*	1 per calendar year (only in conjunction w/ a covered root canal procedure)	All Comprehensive services covered up to the annual allowance except:		
Filling		1 per calendar year	2 per calendar year	-allowarice except.		
Root Canal		*	1 per calendar year	Implants, cosmetic dentistry (including orthodontia (braces		
Denture (complete or partial)		1 set per 60-month period	1 set per 60-month period	and Invisalign®), veneers, and teeth whitening		
Denture Adjustment	1 per calendar year	1 per calendar year	1 per calendar year	-		
Denture Repair		1 per calendar year	1 per calendar year			
Deep Cleaning / Root Planing		*	1 per quadrant per 36-month period			
Full Mouth Debridement			1 per 36-month period			
		Oral Health for Overall HealthSM - Additional Dent	al Benefits for Members with a Chronic Medical D	liagnosis		
Qualifying diagnoses: Diabetes, CAD, Stroke, Sjögren's Syndrome, Pregnancy, Oral and Head & Neck Cancers, ESRD, COPD, MetS Provides additional dental cleanings and access to full mouth debridement at 24 months vs. 36. For plans that do not cover these services as a standard benefit, member will have access to the benefits through enrollment into program. Program removes any associated member cost share and benefits are paid at 100% when seeing a participating provider.						
Qualifying diagnoses: Diabetes,	CAD, Stroke, Pregnancy, ESRD, COPD, MetS	Provides access to deep cleanings once per qua	drant every 24 months even if plan does not provid	e as standard benefit.		
Qualifying diagnoses: Oral and h	Head & Neck Cancers, Sjögren's Syndrome		moves any associated member cost share and benefi	vices as a standard benefit, member will have access to the ts are paid at 100% when seeing a participating provider.		

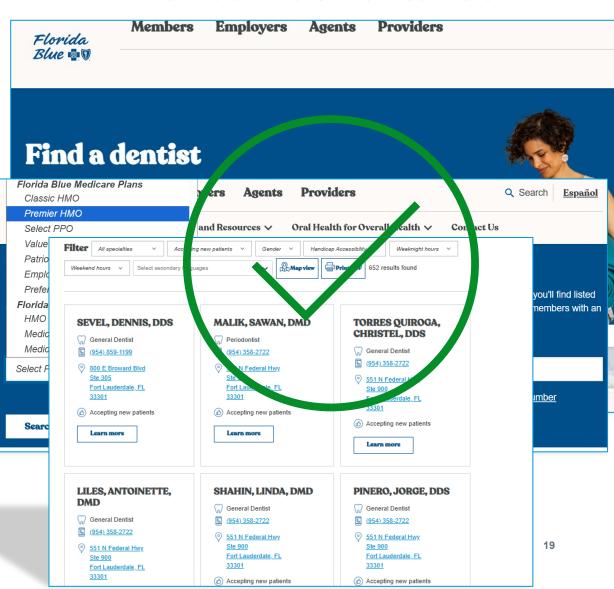




Dentist Look-Up



FloridaBlueDental.com





Medicare Supplement

Actively Sold Supplement Plans



Excluded from Guaranteed Issue

MEDICARE

Ten standard plans are currently available for sale.

Standard Plans Growth Focus

A B C D F G K L M N

No new sales for beneficiaries not already eligible on 12/31/2019

Select Plans

Select B, D and M are no longer offered for new sales effective December 1, 2025 and beyond. Current members can remain enrolled.

B

C

D

M

No new sales for beneficiaries not already eligible on 12/31/2019

Select Supplements





New Sales

- Will cease for January 2026
- Last month to buy will be for December 2025



Rates have been under adjusted over the last few years

- Majority of 2026 rates will be higher than Standard plan rates in each of the three rating areas
- High profile hospital systems have dropped out of the network









Activity

- Sales: 2024 30 ; 2025 YTD 29
- **Terminations**: **2024** 254 ; **2025 YTD** 125

Current Select Supplement Membership

- Can stay as long as they wish; FL law
- Plan will still have rate adjustments like frozen pre-2010 plans
- Effective 1/1: No transfers within Select plans or leave and then return (with FBM or Competitor)
- All Select members can change to any Standard plan

Ratings, Eligibility, and Discounts

Rating

- 3 In-state areas, Out-of-state, Smoking & Non-Smoking rates
- Age Bands: <65, 65, 66, 67, 68, 69, 70-71, 72-74, 75-79, 80+

Rating Area

Pasco
Pasco
Polk

Eligibility

- Underwriting required outside of the following circumstances: IEP, disability, notice of guaranteed issue from prior insurer
 - Ineligible Conditions: ESRD, pending surgery, frequent hospitalizations, heart disease, diabetes, cancer, COPD, on oxygen, HIV

Discounts

- 1.5% discount for automatic premium payments bank drafts
- "Same Age Forever": member pays entry-age rate if no break in coverage (member's costs do increase over time but not due to age)



Medicare Supplement Coverage Summary

What BlueMedicare Supplement Insurance policies pay:

							P	- pj.		
MEDICARE DOES NOT PAY:	A	В	C	D	F	G	K	L	M	N
Medicare Part A: Hospital Services (Core Benefits) \$1,676 initial hospital deductible (Part A deductible) each benefit period		√	√	√	√	√	50%	75%	50%	√
\$419 per day coinsurance for days 61-90 in a hospital	√	√	√	√						
\$838 per day coinsurance for days 91-150 in a hospital	\checkmark	√	√	√						
100% of Medicare-allowable expenses for additional 365 days after Medicare hospital benefits stop completely	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
\$209.50 per day coinsurance for days 21-100 in a Skilled Nursing Facility			✓	√	✓	✓	50%	75%	✓	√
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)	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
100% coverage of Hospice Care (also includes any Part B charges)	\checkmark	√	√	√	√	\checkmark	50%	75%	√	\checkmark
Medicare Part B: Physician Care and Medical Services (Core Benefits)										
\$257 calendar year Part B deductible			\checkmark		\checkmark					
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	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%**
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							✓	✓		

Srowth Focus

Best Value



Medicare Part D Plans

Statewide Part D Plans



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Plan Name	Premier Rx (Part D)	Complete Rx (Part D)	
Medicare Plan Number	\$5904-001	\$5904-002	
Service Area	Statewide	Statewide	
Why You Should Sell This Plan	Offers essential Part D coverage for beneficiaries to meet their prescription drug needs	Offers complete Part D coverage for beneficiaries to meet their prescription drug needs	
Plan Premium	TBD	TBD	
Rx Deductible	\$615 for Tiers 1,2,3,4,5 only	\$615 for Tiers 3,4,5 only	
Tier 1	\$3	\$0	
Tier 2	\$14	\$3	
Tier 3	20%	18%	
Tier 4	40%	29%	
Tier 5	25%	25%	
Tier 6	\$3	\$0 2026 Change	

ANOC Chase Member Messaging

Enabling transparent, relevant, and consistent messaging to all members.

Chase to Reinforce Value

Low to Moderate Impacts

- Low to moderate MOOP impact
- Low to moderate medical benefit impacts YOY
- Low to moderate PCP & Specialist curation impact
- Plans that will have OTC benefit in 2026



Impacted members receive letters outlining benefit changes, while assuring the plan is still a good fit.

Chase to Reinforce Change

Moderate to High Impacts

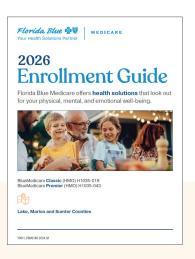
- High MOOP impact
- PCP & Specialist curation impact
- Transportation utilization (3+ rides taken)
- OTC benefit utilization
- SSBCI benefit utilization



Highly impacted members receive letters encouraging them to review plan materials in preparation for AEP.

Agent Marketing Portfolio

We'll continue to develop and distribute a robust portfolio of compliant sales materials to support your marketing efforts.













Enrollment Guides

Full plan details for those enrolling in an MA plan. Includes benefits-at-a-glance, summary of benefits, enrollment form, enrollment checklist

Shopper Guides

A detailed sales tool that features the value proposition of each plan paired with the benefits-ata-glance

Sales Brochures

A trifold sales brochure

is available to compares
plan benefits in specific
service areas.

It's a more cost-effective
piece to leave behind
with shoppers or have
available at events

Customized Materials

Suite of templates in ODS agents can customize and download for their marketing efforts

Product Collateral

Flyers that go into more detail about specific benefits (e.g., dental, OTC, Blue Dollars, etc.)

Sales Presentation

Medicare introduction and sales presentation and teams to use in the field for sales events

BlueMedicare Patriot PPO

Available statewide

BlueMedicare Premier / **Preferred HMO**

- Lake, Marion & Sumter
- Hillsborough & Polk
- Palm Beach
- Charlotte, Collier, Lee, Manatee & Sarasota

BlueMedicare Value PPO

- Lake, Marion & Sumter
- Hillsborough & Polk
- Charlotte & Lee

Medicare Supplement

Available statewide



Upcoming Virtual Vendor Deep Dives



Part D &
Medicare
Prescription
Payment Plan
(M3P)

September 23rd 10:00 AM - 11:00 AM



Florida Combined Life (FCL)

October 1st 10:00 AM -11:00 AM



Vision with Premier Eye Care

October 1st 2:00 PM - 3:00 PM







Hearing, OTC, Blue Dollars, & HealthyBlue Rewards with Nations

October 2nd 10:00 AM -11:00 AM

FMO Medicare Sales Regional Map

Alexandra Nguyen
Senior Leader – FMO & Employed Sales
Alexandra.Nguyen@bcbsfl.com

C: 305-978-7799

NORTH REGION Ivan Cajic Ivan.Cajic@bcbsfl.com

C: 904-742-0651

CENTRAL/CENTRAL EAST REGION Heidi Sierra Heidi.Sierra@bcbsfl.com

C: 407-201-1788

CENTRAL/WEST REGION

Quawn.Green@bcbsfl.com

C: 813-455-5953

SOUTH/SOUTHWEST REGION Stacie O'Block Stacie.O'Block@bcbsfl.com

C: 847-852-0622



