

Medicare Supplement insurance plans

Enrolling in coverage that works for you



**Anthem Blue Cross
California 2021**

Anthem 

Thank you for your interest in a Medicare Supplement insurance plan from Anthem Blue Cross.

A Medicare Supplement insurance (also known as Medigap) plan can enhance your health coverage from Medicare. We offer a variety of Medicare Supplement insurance plans that vary in price and coverage to fit your needs and budget.



Why choose a Medicare Supplement insurance plan?

- **Coverage:** Medicare does not cover the cost of all the services and supplies you may need. A Medicare Supplement insurance plan allows you to fill some gaps left uncovered by Medicare coverage alone like deductibles, co-insurance and co-payments.
- **Freedom:** Go to any provider or facility that is accepting new Medicare patients. No referrals needed. No claim forms to fill out and coverage travels with you throughout the U.S. Some plans even offer benefits for foreign emergency medical care.
- **Dependability:** Once you enroll, you have guaranteed coverage for life.[‡] Your coverage cannot be canceled and you don't need to worry about re-enrolling.
- **Portability:** If you move, your Medicare Supplement insurance plan moves with you.
- **Flexibility:** You can add optional Dental or Vision coverage through Anthem Extras Packages.

[‡] Your policy cannot be terminated for any reason other than non-payment of premium or material misrepresentation in the application for insurance.

Why choose Anthem Blue Cross?

- **Affordability:** Our size and commitment to innovation allows us to offer you competitive rates.
- **Premium Rate Guarantee:** Concerned your Medicare Supplement premium will increase within the first six months of membership? Not with us. Anthem will hold any premium rate increase for six months, making it easier for you to budget your premium costs. After the initial six month rate guarantee period ends, premiums are subject to change in accordance with the terms of your policy.
- **Service:** We believe your coverage shouldn't be hard to figure out. We deliver clear, easy-to-read communications and a dedicated customer service team that will help answer all your health plan questions.
- **Dependability:** As one of the nation's largest health coverage providers, we're here with a focus on stability – of your coverage, and your rates – so you can plan for the future.
- **Convenience:** We offer a variety of health and separate prescription drug coverages so you have the convenience of all your plans coming from one company.
- **Overall health:** We offer special member-only programs, discounts and offers that can help you get and stay your healthiest.



How can you save on your monthly premium?



Pay by annual payment or Automatic Bank Draft

- Save up to \$48 by paying your premium for the entire year
- Save \$2 per month by paying by Auto Bank Draft or Electronic Funds Transfer (EFT)

Household Discount Program

- Share the savings with household members: save 5% when more than one member in your household is enrolled in one of our Medicare Supplement insurance plans.[‡]

New to Medicare Discount Program[◇]

For those individuals new to Medicare, the plans below offer an enrollment discount, applied to the first 12 months of coverage:

- Enroll in Plan G and save \$25 per month
- Plan F or Innovative F offer a savings of \$20 per month

Which Medicare Supplement insurance plan is right for you?

Medicare Supplement insurance plans vary in coverage and cost, so you'll want to think about the level of coverage you want and your health needs. The enclosed Outline of Coverage shows which Medicare Supplement insurance plans we offer and how much they cost. Things to consider:

- **Plan G** is our most popular plan. *Plan G covers all of the out-of-pocket costs not covered by Medicare for Medicare-approved services, with the exception of the Medicare Part B deductible (\$203 for 2021).*
- **Plan N** is a good option for those looking to save on the monthly premiums in exchange for sharing the cost. As a Plan N member, you pay a set co-payment for covered doctor and emergency room visits.
- **Plan F** is only available if you first became eligible for Medicare prior to January 1, 2020.

[◇] To qualify you must be 65 or older and within six months of your Medicare Part B effective date. Plan G is for coverage effective as of 3/1/2021.

[‡] Available on coverage effective dates June 1, 2010 or after. Members must occupy the same housing unit.

SilverSneakers® fitness program

All the plans help you get connected to like-minded people and events, at no extra charge to you.



SilverSneakers fitness program:

- Access to thousands of participating fitness locations across the country, including exercise equipment, pools and SilverSneakers fitness classes.



At SilverSneakers.com, you'll find participating locations and see SilverSneakers class descriptions with sample videos. SilverSneakers blog articles cover exercise, health, nutrition, community and living well. And if you can't go to one of the SilverSneakers locations, you can work out at home with SilverSneakers On-Demand™ videos, and sign up for the SilverSneakers GO™ app.

To take part in the program, visit www.SilverSneakers.com/Check or call 1-888-423-4632 (TTY: 711).

Always consult your physician before engaging in an exercise program.

Plan comparison and opportunities to save

Let's take a look at some potential savings of having a Medicare Supplement insurance plan vs. having Medicare coverage only.

Medical Care	Your costs with only Medicare	Your costs with Medicare Supplement Plan F[◇]	Your costs with Medicare Supplement Plan G[◇]	Your costs with Medicare Supplement Plan N[◇]
\$4,000 in physician costs and tests (such as MRI) ¹	\$1,003	\$0	\$203	\$223
15 days in the hospital, 22 days in a Skilled Nursing Facility and \$12,000 for physicians, surgeons, and tests ²	\$4,458	\$0	\$203	\$223
75 days in the hospital, 60 days in a Skilled Nursing Facility, \$100,000 for physicians, surgeons and tests ³ and \$600 for a provider that does not accept Medicare's payment in full (excess charges)	\$34,116	\$0	\$203	\$823

◇ These estimates are based on 2021 Medicare cost-sharing amounts. Your cost will vary with other Medicare Supplement insurance plans.

- 1 Cost represents \$203 Part B Deductible and 20% of the Medicare covered services (Plan N = lessor of 20% or \$20 copay)
- 2 Cost represents \$1,484 Part A Deductible, \$203 Part B Deductible, 2-days of Skilled Nursing at \$185.50 per day and 20% of the Medicare covered services (Plan N = lessor of 20% or \$20 copay)
- 3 Cost represents \$1,484 Part A Deductible, \$203 Part B Deductible, 14-days of hospitalization over covered days \$371 per days, 39-days of Skilled Nursing over covered days at \$185.50 per day and 20% of the Medicare covered services (Plan N = lessor of 20% or \$20 copay)

Member value-added perks



ScriptSave[®] pharmacy and vitamin savings:

- Save up to 80% on all your prescription medications at more than 65,000 participating pharmacies nationwide. And there is no limit to how many times the card can be used to receive a discount. Savings average 60%, and in some cases can be 80% or more — based on 2019 national program savings data.



With your Medicare Supplement insurance plan enrollment, we have partnered with Medical Security Card Co. to offer a Prescription Savings Card. You can get instant savings at the pharmacy register on brand and generic prescription medications for anyone in your household — even your pets. Simply present the pharmacy with the Prescription Savings Card — it is that easy. And even if you enroll into Part D for your drug benefits, you can still take advantage of this card to get discounts on drugs not covered under your Part D plan.

Once you enroll into one of our Medicare Supplement insurance plans, a Prescription Savings Card will be sent to you and as long as the program is in place, the savings card won't expire.

DISCOUNT ONLY - NOT INSURANCE. Discounts are available exclusively through participating pharmacies. The range of the discounts will vary depending on the prescription and the pharmacy chosen. This program does not make payments directly to pharmacies. Members are required to pay for all prescription purchases. Members may cancel their registration at any time or file a complaint by contacting Customer Care. This program is administered by Medical Security Card Company, LLC of Tucson, AZ. Based on 2019 national program savings.

Member value-added perks *(continued)*



Vision discounts

- **Glasses.com:** \$20 off when you spend \$100 or more. Free shipping, and
- **Premier LASIK:** \$800 off when you choose any “featured” Premier LASIK Network provider. 15% off all other in-network providers.



Hearing discounts

- **Amplifon:** 25% off – plus an extra \$50 off one Amplifon hearing aid; \$125 off two.
- **NationsHearing:** Call 877-391-8625 to schedule an exam at no cost and SAVE THOUSANDS on hearing aids. 60-day, 100% money-back guarantee, and
- **Hearing Care Solutions:** Discounted hearing aids and free hearing exam. 3 year warranty, 2 years of batteries, unlimited visits for 1 year.



Self help offers

- **FitBit:** Get fit your way with Fitbit trackers and smartwatches that fit with your lifestyle, budget and goals. Save up to 22% on select Fitbit devices.
- **Jenny Craig®:** Take advantage of a free, three-month program (food not included) plus \$120 in food savings (purchase required), or save 50% off premium programs (food cost separate).
- **ChooseHealthy™:** Discounts on acupuncture, chiropractic, massage and fitness clubs.

Vendors and offers are subject to change without prior notice. Anthem Blue Cross does not endorse and is not responsible for the products, services or information offered by the vendors or providers. We negotiated the arrangements and discounts with each independent vendor or provider in order to assist our members. **These discounts are not insurance and are not part of the Medicare Supplement insurance plans.**

Complement your Medicare Supplement insurance plan with an Anthem Blue Cross Prescription Drug Plan



Add a Part D Prescription Drug plan

Save on the high costs of prescription drugs. You can get a separate Part D plan that includes coverage for a wide range of brand name and generic medications for a separate premium, for added peace of mind. Ask your agent or broker for Anthem Blue Cross Part D prescription drug plan enrollment information.



Complement your Medicare Supplement insurance plan with an Anthem Extras Package

Dental and Vision benefits that add to your Medicare Supplement plan:



Anthem Extras Packages – Covering the *whole* you

- Low monthly premiums
- Freedom to choose the plan that's best for you
- See any dentist or eye doctor you choose and save even more when you choose one in our plan

Here's what you get with Anthem Extras Packages:

Dental

- \$0 to \$50 deductible
- Covers diagnostic & preventive care
- Choice of more than 80,000 dentists nationwide¹
- Emergency dental care when traveling

Vision

- \$10 to \$20 copay for eye exams
- \$100 to \$130 allowance for eyeglass frames
- 15% to 40% savings on non-covered items like extra glasses
- Plus online and national retail locations

¹ Internal data, 2019

Call today!

Member Services:

1-877-391-3897, (TTY: **711**)

Monday – Friday,

8 a.m. – 5 p.m., local time

Visit:

To see if your dentist or vision provider is in our network, visit **www.anthem.com/ca**.

Anthem Extras Packages – Your coverage options:

CALIFORNIA	Standard	Premium	Premium Plus	Senior Premium Plus Dental
▼ Dental				
Network	Dental Blue 100	Dental Blue 100	Dental Blue 100	Dental Blue 100
Annual Maximum	\$500	\$1,000	\$1,250	\$1,250
Deductible	No deductible	\$50	\$50	\$50
Diagnostic & Preventive Services (routine cleanings, exams and X-rays)	100%	100%	100%	100%
Minor Restorative Services (fillings)	Not covered	80% [◇]	80% [◇]	80% [◇]
Periodontal Services (scaling and root planing)	Not covered	50% [*]	50% [*]	50% [*]
Endodontics (root canals) & Oral Surgery (tooth extractions)	Not covered	50% [*]	50% [*]	50% [*]
Prosthodontics (crown, dentures, bridges)	Not covered	Not covered	50% [*]	50% [*]
▼ Vision				
Network	Blue View Vision	Blue View Vision	Blue View Vision	Not available
Exam (once every 12 months)	\$20 copay	\$20 copay	\$10 copay	Not available
Frames (once every 24 months)	\$100 allowance	\$100 allowance	\$130 allowance	Not available
Eyeglass Lenses (once every 24 months)	\$20 copay	\$20 copay	\$10 copay	Not available
Contact Lenses	\$80 allowance	\$80 allowance	\$80 allowance	Not available
▼ Additional Programs				
Member Assistance Program	Not available	Not available	Not available	Not available
Travel Assistance	Not available	Yes	Yes	Not available
Monthly Premium	\$25.00	\$38.00	\$56.00	\$46.66

◇ After a 6-month waiting period. Waiting period may be waived or reduced with prior coverage.

* After a 12-month waiting period. Waiting period may be waived or reduced with prior coverage.

Anthem Dental Plan – Your coverage options



Enrolling in our Innovative F* Medicare Supplement plan?

Our Innovative F plan includes hearing and vision benefits. You will also be able to enjoy as a value-added program access to SilverSneakers. But don't forget about your dental health! We offer three dental only options to complement your Medicare Supplement plan to help ensure you keep a healthy smile!

CALIFORNIA	Senior Standard Dental	Senior Premium Dental	Senior Premium Plus Dental
▼ Dental			
Network	Dental Blue 100	Dental Blue 100	Dental Blue 100
Annual maximum	\$500	\$1,000	\$1,250
Deductible	No deductible	\$50	\$50
Diagnostic & Preventive Services (routine cleanings, exams and X-rays)†	100%	100%	100%
Minor Restorative Services (fillings)	Not covered	80%◇	80%◇
Periodontal Services (scaling and root planing)	Not covered	50%‡	50%‡
Endodontics (root canals) & Oral Surgery (tooth extractions)	Not covered	50%‡	50%‡
Prosthodontics (crown, dentures, bridges)	Not covered	Not covered	50%‡
Monthly Premium	\$18.48	\$31.48	\$46.66

* Innovative F is only available if you first became eligible for Medicare prior to January 1, 2020.

† Routine exams, cleanings and x-rays include 2 exams, 2 cleanings and 1 bitewing x-ray series every year; and 1 complete x-ray series every 5 years.

◇ After a 6-month waiting period. Waiting period may be waived or reduced with prior coverage.

‡ After a 12-month waiting period. Waiting period may be waived or reduced with prior coverage.

When to enroll

You are turning 65:

and covered by Medicare Part A & Part B.

Your acceptance is guaranteed into a Medicare Supplement insurance plan during the six months after you enroll into Medicare Part B at age 65 or older. In some states, a plan(s) may be available to persons under age 65 who are eligible for Medicare by reason of disability.

Pre-existing Conditions:

If you have had at least six months of prior creditable coverage or are in a guaranteed issue situation, you don't have to wait for coverage to start for a pre-existing condition. Many types of health care coverage count as creditable coverage, but they only count if you did not have a break for more than 63 days. This prior coverage can be used to eliminate or shorten waiting periods for pre-existing conditions. A pre-existing condition is a condition either treated or diagnosed six months prior to the effective date of your policy. Remember, for Medicare-covered services, Original Medicare will still cover the condition, even if you are responsible for out-of-pocket costs during the pre-existing condition waiting period.

Already 65?

You are welcome to apply at any time.◇

If you want to learn more about Medicare Supplement insurance (Medigap) policies, please refer to the *Choosing a Medigap Policy* guide included with your kit.

◇ Medical underwriting for current health status and tobacco usage may apply.



Ready to enroll?

Go to the Application section of this booklet.

How to reach us

TTY lines are available for those with hearing or speech loss.



Sales Department:†

1-888-211-9813 (TTY: 711)

8 a.m. to 8 p.m., seven days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday to Friday (except holidays) from April 1 through September 30

Customer Service:

1-800-333-3883 (TTY: 711)

8 a.m. to 6 p.m. PT, Monday - Friday



Online benefits, discounts and health resources:

www.anthem.com/ca

General information about Medicare:

www.medicare.gov



In case of emergency, call 911.

† By calling this number, you will reach an authorized licensed insurance agent who can answer questions about our plans and enrollment.



This brochure is intended to be a brief summary of coverage and is not intended to be a legal contract. The entire provisions of benefits and exclusions are contained in the Policy. In the event of a conflict between the Policy and this description, the terms of the Policy will prevail.

SilverSneakers participating locations ("PL") are not owned or operated by Tivity Health, Inc. or its affiliates. Use of PL facilities and amenities are limited to terms and conditions of PL basic membership. Facilities and amenities vary by PL. Membership includes SilverSneakers instructor-led group fitness classes. Some locations offer Members additional classes. Classes vary by location. **SilverSneakers is a value-added program. It is not insurance and not part of the Medicare Supplement insurance plans.** It can be changed or withdrawn at any time. SilverSneakers and the SilverSneakers shoe logotype are registered trademarks of Tivity Health, Inc. SilverSneakers On-Demand and SilverSneakers GO are trademarks of Tivity Health, Inc. © 2020 Tivity Health, Inc. All rights reserved.

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This policy has exclusions, limitations, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, please contact your agent or the health plan.

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