

Life Is All About The Choices You Make

We make choosing your 2015 Medicare plan easy.



What is Medicare Advantage?

A Medicare Advantage Plan (like an HMO or PPO)* is a plan choice you may have as part of Medicare. These plans, sometimes called "Part C" or "MA Plans," are offered by private insurance companies approved by Medicare.

Medicare Advantage Plans are all-in-one plans. They are easy to use and budget-friendly.

Basics

Medicare Advantage Plans include all:

- · Part A (Hospital Insurance) benefits
- · Part B (Medical Insurance) benefits
- Medically needed care covered by Original Medicare

Manage Costs

To help keep costs down, most plans have a:

- Prescription drug formulary
- Pharmacy network
- Provider network

Extras

Some plans may offer:

- Vision benefits
- Hearing benefits
- Health and wellness programs

Your Costs

You may need to pay:

- Premiums
- Copays
- Coinsurance
- Deductibles

Medicare Advantage Plans are not the same as Medicare Supplement insurance plans.

	Medicare Advantage Plan	Medicare Supplement Insurance
Part B Premium	Must be paid; is separate from the Medicare Advantage plan premium.	Must be paid; is separate from the Medicare Supplement insurance premium.
Monthly Premium	Must be paid; is separate from the Part B premium.	Must be paid; is separate from the Part B premium.
Number of Plans	Determined by health plan.	Standardized plans set by Medicare.
Benefits	Medicare Parts A & B combined, plus services added by the Medicare Advantage plan.	Must already have Parts A & B; Medicare Supplement helps to pay health care costs that Medicare doesn't cover, such as copayments, coinsurance and deductibles.
Doctors & Hospitals	Members may be required to use doctors or hospitals from within the plan's network.	Members can use any provider or hospital that accepts Medicare.
Prescription Drug Coverage	Prescription drug coverage may be built into the plan.	Does not include prescription drug coverage. Enrollment in a separate Part D plan is recommended.

Why Choose a Medicare Advantage Plan from Blue Cross and Blue Shield of Oklahoma?

Blue Cross and Blue Shield of Oklahoma (BCBSOK) offers three Medicare Advantage Plans from which to choose: Blue Cross Medicare Advantage (HMO)SM, Blue Cross Medicare Advantage (HMO-POS)SM, and Blue Cross Medicare Advantage (PPO)SM. Each of these plans cover the same things as Original Medicare. Plus, they have benefits not included in Medicare or most Medicare Supplement insurance plans. Think of them as all-in-one plans. Choose which one works best for you.

Your Plan May Include:



\$0 premium plans



Dental benefits



Ability to see providers out of the network



Monthly over-the-counter purchase allowance[‡]



Some generic drugs in the coverage gap



Formulary with the most common drugs



Over 64,000 pharmacies nationwide[†]





Vision and hearing

- *HMO Health Maintenance Organization. You must use the providers in the plan's network. The HMO may require you to get a referral from your primary care physician.
- **PPO** Preferred Provider Organization. You pay less when you use providers in the plan's network. You can use providers from outside of the network, but may have to pay more.

†Per Geo Access analysis conducted in July 2014

[‡]Not available in all plans

How Does Blue Cross Medicare Advantage Meet Your Needs?

With both HMO and PPO options, you have many plans to choose from. Both types of plans may include these benefits and more. Read the Summary of Benefits to learn all the details.

More Ways to Save

- Low copay for a visit to your primary care doctor
- Generic prescription drug copays are low
- Discounts for health care products and services

Local Provider Network

To get the most from your benefits, use providers in our large network. There are local primary care providers and a wide range of specialists. Look for the providers you have now online at www.getblueok.com/mapd.

Built-in Prescription Drug Coverage

Our formulary has thousands of drugs on it. You'll find five tiers of coverage including Preferred Generic, Non-Preferred Generic, Preferred Brand, Non-Preferred Brand and Specialty. Copays for generics are as low as \$0 – that can mean big savings.

Dental Care

Preventive and Comprehensive dental available on some plans.

Vision Care

\$0 copay for a Vision Specialist Exam. Allowance towards frames and contacts available on some plans.

Hearing Care

Supplemental routine hearing exams and hearing aid allowance available on some plans.

Diabetes Supplies and Training

- 0%-20% copay for Medicare-covered
 - Self-management training
 - Monitoring supplies
 - Therapeutic shoes or inserts

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.

Blue365®

Save on fitness gear, family activities, healthy eating options and much more from top national and local retailers.

Travel Benefits

Do you like to travel? Do you live part of the year in another part of the country? If so you may like the plan's prescription coverage benefit. You pay the same for your prescription drugs at an in-network pharmacy when you are traveling outside of the plan's service area as you would at home.

SilverSneakers®* Fitness Program

SilverSneakers helps you to get fit the way you want, when you want. And it's free!

^{*} SilverSneakers® is a registered mark of Healthways, Inc. Healthways SilverSneakers® Fitness Program is a wellness program owned and operated by Healthways, Inc, an independent company. ®Registered Service Marks of the Blue Cross and Blue Shield Association, an Association of Independent Blue Cross and Blue Shield Plans.

Formulary and Pharmacy Facts

Blue Cross Medicare Advantage covers a broad range of prescription drugs, and offers a large network of pharmacies.

Formulary: Your List of Covered Drugs

- You can save money by switching to a generic.
 Ask your doctor/pharmacist if this is an option for you.
- Save time by using our easy-to-use mail-order service.
- View the formulary online at www.getblueok.com/mapd/druglist.



Pharmacies: You Save Nationwide

- Blue Cross Medicare Advantage has pharmacies across the country. This means you can have peace of mind when you are away from home.
- To get the most from your plan, use our network pharmacies or mail-order service, except in an emergency.
- Blue Cross Medicare Advantage Preferred Network Pharmacies include:

CVS/pharmacy

Walgreens

Walmart > '<

Other pharmacies are available in our network. Visit www.getblueok.com/mapd/pharmacies for a current pharmacy listing.

Let's Get Started

Are you new to Medicare? Or are you thinking about switching plans? Here are some important items to know before choosing your plan.

Be sure you are eligible for Medicare.
Our HMO and HMO-POS plans are
available in Canadian, Cleveland, Creek,
Grady, Lincoln, Logan, Mayes, McClain,
Muskogee, Oklahoma, Okmulgee, Payne,
Pottawatomie, Rogers, and Tulsa counties.
Our PPO plans are available in Canadian,
Cleveland, Comanche, Garfield, Grady,
Lincoln, Logan, McClain, Oklahoma, and
Pottawatomie counties. Your primary
residence must be in one of these counties
to enroll.

_	planning to retire, talk to your benefits administrator about your options.
	Look at the 2015 Blue Cross Medicare Advantage plans.
	Look for your local doctors in the Provider Directory.
	Check the Formulary to be sure your drugs are included.
	Enroll in Blue Cross Medicare Advantage

Enrollment occurs only during specific times of the year. Contact us to learn more.

Are you still working? If so and you're

Choose Your Blue Cross Medicare Advantage Plan

	Blue Cross Medicare Advantage Basic (HMO) ^{sм}			
	Oklahoma City	Tulsa		
Premium*	\$0	\$0		
Annual Physical Exam	\$0 copay	\$0 copay		
Doctors Office Visits Primary Care Physician Specialist	\$5 copay \$40 copay	\$20 copay \$45 copay		
Chiropractic Services	\$20 copay	\$20 copay		
Over-the-Counter Monthly Purchase Allowance [†]	\$	10		
Diabetes Self-management training, supplies and services	Diabetic Test Strips: 0% coins manufacturers when pur	Training: \$0 coinsurance Diabetic Test Strips: 0% coinsurance for items from certain manufacturers when purchased at the pharmacy Other supplies and services: 0% - 20% coinsurance		
Eye Exams Specialist eye exam	\$0 copay	\$0 copay		
Dental Services Preventive Comprehensive	covered not covered	covered not covered		
Emergency Care	\$65 0	copay		
Inpatient Hospital	\$295/day copay (days 1-5) \$300/day copay (days 1 - 3) \$900 annual maximur			
	\$0 copay for additional days			
Outpatient Services/Surgery	\$250 copay	\$300 copay		
Skilled Nursing Facilities	\$0/day copay (days 1-20) \$150/day copay	\$0/day copay (days 1-20) \$125/day copay		
	(days 21-100)	(days 21-100)		
Maximum Out-of-Pocket	\$4,500 \$4,900			
Travel Out of Service Area	Plan covers you when you travel in the U.S. or its territories.			
Prescription Drug Utilization Benefit Management Programs	Prior Authorization/Step Therapy Requirements: Before receiving coverage for some medications, your doctor will need to receive authorization from BCBSOK and you may first need to try more clinically appropriate or cost effective drugs.			

The benefits listed here are a partial description only. Please see the enclosed Summary of Benefits, which includes important plan information.

Blue Cross	Medicare Advantag	Blue Cross Medicare Advantage Choice (PPO) SM			
Oklahoma City		Tulsa		Oklahoma City	
In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
\$39		\$41		\$55	
\$0 copay	not covered	\$0 copay	not covered	\$0 copay	30% coinsurance
\$10 copay \$45 copay	\$50 copay \$50 copay	\$20 copay \$45 copay	\$40 copay \$65 copay	\$20 copay \$40 copay	30% coinsurance
\$20 copay	40% coinsurance	\$20 copay	40% coinsurance	\$20 copay	30% coinsurance
\$20		not available		not available	

Training: \$0 coinsurance

Diabetic Test Strips: 0% coinsurance for items from certain manufacturers when purchased at the pharmacy Other supplies and services: 0% - 20% coinsurance

\$0 copay	not covered	\$0 copay	not covered	\$0 copay	30% coinsurance
covered covered	not covered not covered	covered not covered	not covered not covered	covered not covered	covered not covered
		\$65 c	copay		
\$250/day copay (days 1-5)	\$400/day copay	\$225/day copay (days 1 - 7)	\$400/day copay	\$295/day copay (days 1-7)	\$325/day copay (days 1-7)
\$0 copay for additional days		\$0 copay for additional days		\$0 copay for additional days	
\$250 copay	40% coinsurance	\$300 copay	40% coinsurance	\$250 copay	30% coinsurance
\$0/day copay (days 1-20) \$150/day copay (days 21-100)	40% coinsurance	\$0/day copay (days 1-20) \$125/day copay (days 21-100)	40% coinsurance	\$0/day copay (days 1-10) \$40/day copay (days 11-20) \$125/day copay (days 21-100)	30% coinsurance
4,900	No maximum	\$4,900	\$6,700	\$3,400	\$5,000

Plan covers you when you travel in the U.S. or its territories.

Prior Authorization/Step Therapy Requirements: Before receiving coverage for some medications, your doctor will need to receive authorization from BCBSOK and you may first need to try more clinically appropriate or cost effective drugs.

Your Prescription Drugs Are Covered in the Plan

		Blue Cross Medicare Advantage Basic (HMO) ^{sм}				
			Oklahoma City		Tulsa	
Annual Prescription Deductible Amount you pay before Blue Cross Medicare Advantage begins to pay		\$0		\$0		
	Tiers	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy	
Initial Coverage	Tier 1	\$0 copay	\$5 copay	\$0 copay	\$5 copay	
Period Copays Annual drug costs	Tier 2	\$6 copay	\$11 copay	\$6 copay	\$11 copay	
up to \$2,960 (30-day supply)	Tier 3	\$39 copay	\$44 copay	\$39 copay	\$44 copay	
	Tier 4	\$85 copay	\$95 copay	\$85 copay	\$95 copay	
	Tier 5	33% coinsurance	33% coinsurance	33% coinsurance	33% coinsurance	
Gap Coverage Annual drug costs exceeding \$2,960 (up to a total of \$4,700 out-of-pocket costs)		You'll pay \$0 / \$5 for drugs in Tier 1 and \$6 / \$11 for drugs in Tier 2. Otherwise, you'll pay 45% of the cost of Brand Name drugs and 65% of the cost of Generic drugs on Tiers 3, 4 and 5.				
After the Gap Copays After your total out-of-pocket costs exceed \$4,700		You pay whichever is greater: Tiers 1 & 2 - \$2.65 copay or 5% coinsurance for your drug Tiers 3 & 4 - \$6.60 copay or 5% coinsurance for your drug Tier 5 - 5% coinsurance for your drug				

Tier 1 - Preferred Generic Drugs

Tier 2 - Non-Preferred Generic Drugs

Tier 3 - Preferred Brand Drugs

Tier 4 - Non-Preferred Brand Drugs

Tier 5 - Specialty Drugs

The ease of having your prescription drugs covered is another great reason to choose all-in-one Blue Cross Medicare Advantage.

Blue Cross Medicare Advantage Premier Plus (HMO-POS) SM				Blue Cross Medicare Advantage Choice (PPO) [™]	
Oklaho	ma City	Tulsa		Oklahoma City	
\$0		\$0		\$0	
Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy
\$0 copay	\$5 copay	\$0 copay	\$5 copay	\$0 copay	\$5 copay
\$6 copay	\$11 copay	\$6 copay	\$11 copay	\$6 copay	\$11 copay
\$39 copay	\$44 copay	\$39 copay \$44 copay		\$39 copay	\$44 copay
\$85 copay	\$95 copay	\$85 copay	\$95 copay	\$85 copay	\$95 copay
33% coinsurance 33% coinsurance		33% coinsurance	33% coinsurance	33% coinsurance	33% coinsurance

You'll pay \$0 / \$5 for drugs in Tier 1 and \$6 / \$11 for drugs in Tier 2. Otherwise, you'll pay 45% of the cost of Brand Name drugs and 65% of the cost of Generic drugs on Tiers 3, 4 and 5.

You pay whichever is greater:

Tiers 1 & 2 - \$2.65 copay or 5% coinsurance for your drug Tiers 3 & 4 - \$6.60 copay or 5% coinsurance for your drug Tier 5 - 5% coinsurance for your drug

You must continue to pay your Medicare Part B premium.

The benefit information provided is a brief summary, not a complete description of benefits. For more information contact the plan.

Limitations, copayments, and restrictions may apply.

Benefits, formulary, pharmacy network, provider network, premium and/or co-payments/co-insurance may change on January 1 of each year.

After You Enroll

Look for These Communications:

Acknowledgement Letter

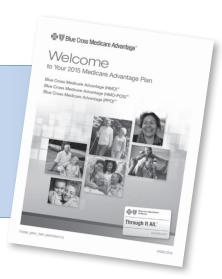
We will send you a letter within 10 days of receiving your enrollment form.

Confirmation Letter/ID Card

After your enrollment has been approved, we'll send you a confirmation letter. It will include your Blue Cross Medicare Plan card and the date your coverage will be effective.

Welcome Kit

About two weeks after you get your ID card, you'll receive your Welcome Kit. It includes your Evidence of Coverage. And it tells you what you need to know about being a member of Blue Cross Medicare Advantage.

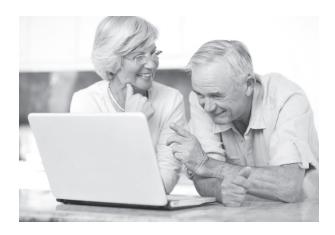


LifeTimes®: News You Can Use

LifeTimes is our quarterly newsletter filled with articles you're sure to enjoy. Sign up at www.bcbsok.com/lifetimes to receive LifeTimes via email or read it online.

Blue Access for MembersSM (BAM)

BAM is your one-stop online source. Check it for information about your plan, claim status and benefits. You also will find it has health and wellness tools. Visit www.bluememberok.com.



Important Information

Limitations and Exclusions

There are items and services not covered by Blue Cross Medicare Advantage. These are called limitations and exclusions. A full list can be found in the Evidence of Coverage. Here is a limited list. Blue Cross Medicare Advantage cannot cover a drug purchased outside the U.S. and its territories. Blue Cross Medicare Advantage does not cover:

- Over-the-counter (OTC) drugs, unless designated by a specific plan.
- Drugs when used to aid fertility
- · Drugs when used to ease signs of cough or cold
- Drugs when used for cosmetic purposes or to aid hair growth
- Vitamins and mineral products ordered by a doctor, except vitamins for pregnant women and fluoride preparations
- Drugs when used for the care of sexual or erectile dysfunction, such as Viagra, Cialis, Levitra, and Caverject
- Drugs when used for care of anorexia, weight loss, or weight gain
- Outpatient drugs for which the manufacturer calls for tests or monitoring services to be bought only from the drug maker as a term of sale
- Barbiturates and Benzodiazepines (starting January 1, 2013 a limited number of these products will be covered for specific indications)

Quantity limits, step therapy, and prior authorization may apply. Look in the Comprehensive Formulary for more information.

Contacting Medicare

Contact Medicare for more information about Medicare benefits and services, including general information regarding health benefits or Medicare Advantage Prescription Drug coverage.

Call 1-800-MEDICARE (1-800-633-4227) TTY 1-877-486-2048 24 hours a day, 7 days a week

Web www.medicare.gov

What Are My Protections Under Blue Cross Medicare Advantage?

Blue Cross Medicare Advantage agrees to stay in the program for a full year at a time. Each year, the plan decides whether to carry on for another year. Even if Blue Cross Medicare Advantage leaves the program, you will not lose Medicare coverage.

Grievances and Appeals

If you have a problem with our plan, there are two formal processes in place to address your issue: appeal and grievance. An appeal is something you do if you disagree with a decision to deny a request for prescription drugs or payment for services or drugs you already received. You may also make an appeal if you disagree with a decision to stop services that you are receiving. For example, you may ask for an appeal if our plan doesn't pay for a drug, item, or service you think you should be able to receive. A grievance is a type of complaint you make about us or one of our network pharmacies, including a complaint concerning the quality of your care. This type of complaint does not involve coverage or payment disputes. For more information, please call us.

PLEASE NOTE:

This information is available for free in other languages. Please call our Customer Service number at 1-866-883-5618. (TTY/TDD users should call 711). We are open between 8 a.m. and 8 p.m., local time, 7 days a week. If you are calling from February 15 through September 30, alternate technologies (for example, voicemail) will be used on the weekends and holidays.

Esta información está disponible en otros idiomas de forma gratuita. Comuníquese a nuestro número de Servicio al Cliente llamando al 1-866-883-5618. (Los usuarios de TTY/TDD deberán llamar al 711). Nuestro horario es de 8 a.m. a 8 p.m., hora local, los 7 días de la semana. Si usted llama del 15 de febrero al 30 de septiembre, durante los fines de semana y feriados, se usarán tecnologías alternas (por ejemplo, correo de voz).



Make the Right Choice for Your Health. Enroll Today.



Call

Your licensed independent agent or our product specialist will walk you through enrolling in Blue Cross Medicare Advantage. Call your licensed independent agent or: 1-866-883-5618 • TTY/TDD 711

We are open between 8 a.m. and 8 p.m., local time, 7 days a week. If you are calling from February 15 through September 30, alternate technologies (for example, voicemail) will be used on the weekends and holidays.



Locate a Licensed Agent

Find a licensed independent Blue Cross and Blue Shield of Oklahoma agent in your area: www.bcbsok.com/medicareagents



Web

Our safe online form is clear and takes you through enrolling step-by-step. It's easy. Go to: www.getblueok.com/mapd/enroll

Medicare beneficiaries may also enroll in Blue Cross Medicare Advantage through the CMS Medicare Online Enrollment Center located at http://www.medicare.gov.



Mail

Fill out the enclosed enrollment form. To avoid processing delays, check that you:

- ☐ Select your choice of Blue Cross Medicare Advantage plan.
- Opy your Medicare number exactly as printed on your Medicare ID card.
- Sign the form.
- Mail the white copy in the postage-paid envelope. The blue copy is for your records.



Attend a Free Seminar www.bcbsok.com/seminars

HMO and HMO-POS plans available in Canadian, Cleveland, Creek, Grady, Lincoln, Logan, Mayes, McClain, Muskogee, Oklahoma, Okmulgee, Payne, Pottawatomie, Rogers, and Tulsa counties.

PPO plans available in Canadian, Cleveland, Comanche, Garfield, Grady, Lincoln, Logan, McClain, Oklahoma, and Pottawatomie counties.

Plans provided by Blue Cross and Blue Shield of Oklahoma, which refers to a Division of Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC) (PPO plans), and also to GHS Health Maintenance Organization, Inc. d/b/a BlueLincs HMO (BlueLincs) (HMO and HMO-POS plans) and GHS Managed Health Care Plans Inc. (GHS-MHC) (HMO and HMO-POS plans). HCSC, GHS-MHC, and BlueLincs are Independent Licensees of the Blue Cross and Blue Shield Association. HCSC, GHS-MHC and BlueLincs are Medicare Advantage organizations with a Medicare contract. Enrollment in HCSC's, GHS-MHC's and BlueLincs' plans depends on contract renewal.