

	Blue Cross Medicare Advantage Basic (HMO) SM		Blue Cross Medicare Advantage Premier Plus (HMO-POS) SM				Blue Cross Medicare Advantage Choice (PPO) SM	
	Oklahoma City	Tulsa	Oklahoma City		Tulsa		Oklahoma City	
			In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Premium*	\$0	\$0	\$39		\$41		\$55	
Annual Physical Exam	\$0 copay	\$0 copay	\$0 copay	not covered	\$0 copay	not covered	\$0 copay	30% coinsurance
Doctors Office Visits Primary Care Physician Specialist	\$5 copay \$40 copay	\$20 copay \$45 copay	\$10 copay \$45 copay	\$50 copay \$50 copay	\$20 copay \$45 copay	\$40 copay \$65 copay	\$20 copay \$40 copay	30% coinsurance
Chiropractic Services	\$20 copay	\$20 copay	\$20 copay	40% coinsurance	\$20 copay	40% coinsurance	\$20 copay	30% coinsurance
Over-the-Counter Monthly Purchase Allowance[†]	\$10		\$20		not available		not available	
Diabetes Self-management training, supplies and services	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	\$0 copay	not covered	\$0 copay	not covered	\$0 copay	30% coinsurance
Dental Services Preventive Comprehensive	covered not covered	covered not covered	covered covered	not covered not covered	covered not covered	not covered not covered	covered not covered	covered not covered
Emergency Care	\$65 copay							
Inpatient Hospital	\$295/day copay (days 1-5)	\$300/day copay (days 1 - 3) \$900 annual maximum	\$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		\$0 copay for additional days	
Outpatient Services/Surgery	\$250 copay	\$300 copay	\$250 copay	40% coinsurance	\$300 copay	40% coinsurance	\$250 copay	30% coinsurance
Skilled Nursing Facilities	\$0/day copay (days 1-20) \$150/day copay (days 21-100)	\$0/day copay (days 1-20) \$125/day copay (days 21-100)	\$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
Maximum Out-of-Pocket	\$4,500	\$4,900	4,900	No maximum	\$4,900	\$6,700	\$3,400	\$5,000
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 added convenience of having your prescription drugs covered is another great reason to choose all-in-one Blue Cross Medicare Advantage.

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		Oklahoma City		Tulsa		Oklahoma City		Tulsa		Oklahoma City	
Annual Prescription Deductible Amount you pay before Blue Cross Medicare Advantage begins to pay		\$0		\$0		\$0		\$0		\$0	
	Tiers	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy
Initial Coverage Period Copays Annual drug costs up to \$2,960 (30-day supply)	Tier 1	\$0 copay	\$5 copay	\$0 copay	\$5 copay	\$0 copay	\$5 copay	\$0 copay	\$5 copay	\$0 copay	\$5 copay
	Tier 2	\$6 copay	\$11 copay	\$6 copay	\$11 copay	\$6 copay	\$11 copay	\$6 copay	\$11 copay	\$6 copay	\$11 copay
	Tier 3	\$39 copay	\$44 copay	\$39 copay	\$44 copay	\$39 copay	\$44 copay	\$39 copay	\$44 copay	\$39 copay	\$44 copay
	Tier 4	\$85 copay	\$95 copay	\$85 copay	\$95 copay	\$85 copay	\$95 copay	\$85 copay	\$95 copay	\$85 copay	\$95 copay
	Tier 5	33% coinsurance	33% coinsurance	33% coinsurance	33% coinsurance	33% coinsurance	33% coinsurance	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

Blue Cross Medicare Advantage Preferred Network Pharmacies and their affiliates include:
Other network pharmacies are available in our network.



All Blue Cross Medicare Advantage plans provide coverage for preventive services. Please see your Summary of Benefits or visit www.getblueok.com/mapd for more specific information.

* 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. Benefits, formulary, pharmacy network, premium and/or copayments/coinsurance may change on January 1 of each year. Limitations, copayments, and restrictions may apply.

† Over the counter purchase allowance may not be available in all plans. This is not a mail order card.

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.

Blue Cross Medicare Advantage plans are provided by Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC) (PPO plans), and 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), 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.