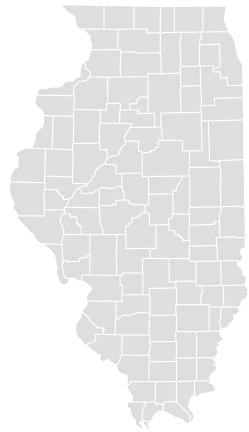


# 2024 Blue Cross and Blue Shield of Illinois Sizzle Sheet



## Saving with Medicare Select

Medicare Select is a money-saving option for members who live within 30 miles of a contracting hospital. It has all of the same benefits as a standard option, but it costs less. With Medicare Select, the Medicare Part A deductible is covered for non-emergency care at contracting hospitals.

- Medicare Select can save members in premium costs for certain plans
- Over 100 hospitals in the Medicare Select network
- Availability based on ZIP code

## Key Benefits

### NEW Plan F Plus & Plan N Plus

- Plan F Plus and Plan N Plus provide members responsible for office visit and outpatient copays with these additional benefits:
  - Dental benefits including 2 cleanings, 2 exams and 1 X-ray per year, and expanded restorative and preventive services
  - Vision benefits including a \$0 annual exam and \$130 allowance for glasses or contact lenses
  - FREE Enrollment into the SilverSneakers® Fitness Program

### NEW Medicare Supplement Secure Plans

- Four new Medicare Supplement Secure plans for 2024: Plan F Plus Secure, Plan N Plus Secure, Plan G Secure Select and Plan G Plus Secure Select
- These plans offer the same benefits and features as other standard Medicare Supplement plans from BCBSIL but offer lower rates for members who pass underwriting
- Members turning 65 or who have a qualified event are guaranteed issue and will be accepted into a Secure Plan without having to go through underwriting

### True Blue Producer Program

- Producers that have sold 25 or more Medicare Supplement paid policies in the previous calendar year will receive 2.5% more compensation in the first year on new paid sales
- Refer to the Medicare Supplement Compensation Schedule for more details

### NEW Blue Family Discount<sup>SM</sup>

- You may be eligible for a discount if you enrolled in a BCBSIL Medicare Supplement policy issued with an effective date on or after April 1, 2024 and you meet the criteria for both the Household Discount AND the Continue with Blue Discount. The discount is 12%.

### NEW Expanded Continue with Blue Discount<sup>SM</sup>

- You may be eligible for a discount if you enrolled in a BCBSIL Medicare Supplement policy issued with an effective date on or after April 1, 2022 and you were enrolled in a Blue Cross and Blue Shield commercial group or individual health insurance coverage plan and that coverage was within one year of your BCBSIL Medicare Supplement policy becoming effective. The discount is 7%.
- Member can only qualify for one discount (Household discount or Continue with Blue discount)
- Lasts as long as Medicare Supplement membership is active
- Member must provide previous member ID during enrollment to qualify

### Household Discount

- You may be eligible for a discount if you reside with a spouse or civil union/domestic partner or have resided with as many as three adults age 60 or older for the last 12 months. Applies to BCBSIL Medicare Supplement policies issued with an effective date on or after May 1, 2019. The discount is 10%.

## Medicare Supplement Product Offerings

- Plan A
- Plan A Secure
- Plan F
- Plan F Select
- Plan F High Deductible
- Plan F Plus
- Plan F Secure
- Plan F Plus Secure
- Plan G
- Plan G Select
- Plan G High Deductible
- Plan G Plus
- Plan G Plus Select
- Plan G Plus High Deductible
- Plan G Secure
- Plan G Secure Select
- Plan G Plus Secure
- Plan G Plus Secure Select
- Plan N
- Plan N Select
- Plan N Plus
- Plan N Secure
- Plan N Plus Secure

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# Medicare Supplement Products - **Guaranteed Issue**

**Effective  
04/01/2024**

	Plan A	Plan F <sup>4</sup>	Plan F Plus	Plan G	Plan G Plus	Plan N	Plan N Plus
Medicare Select Option Available <sup>7</sup> (eligibility based on ZIP code)		✓		✓	✓	✓	
High Deductible Option Available <sup>3</sup>		✓		✓	✓		
Basic Benefits	✓	✓	✓	✓	✓	✓ Copay Applies <sup>1</sup>	✓ Copay Applies <sup>2</sup>
Skilled Nursing Coinsurance		✓	✓	✓	✓	✓	✓
Part A Deductible		✓	✓	✓	✓	✓	✓
Part B Excess <sup>5</sup>		✓	✓	✓	✓		
Foreign Travel Emergency Care <sup>6</sup>		✓	✓	✓	✓	✓	✓
SilverSneakers® Fitness Program			✓		✓		✓
24/7 Nurseline	✓	✓	✓	✓	✓	✓	✓
Dental Benefits			✓		✓		✓
Hearing Benefits	✓	✓	✓	✓	✓	✓	✓
Vision Benefits			✓		✓		✓

<sup>1</sup> Plan N requires a copayment of up to \$20 for office visits and a copayment of up to \$50 for Emergency Room visits.

<sup>2</sup> Plan N Plus requires a copayment of up to \$20 for office visits and a copayment of up to \$50 for Emergency Room visits.

<sup>3</sup> This high deductible option requires a member to pay a deductible of \$2,800 before the plan begins to pay. Once the plan deductible is met, the plan pays 100% of covered services for the rest of the calendar year. High Deductible Plan G and Plan G Plus does not cover the Medicare Part B deductible.

<sup>4</sup> Plan F, Plan F Select and High Deductible F are only available if you are Medicare-eligible prior to 2020.

<sup>5</sup> Not to exceed any charge limitation by the Medicare program or state law.

<sup>6</sup> Plans cover care needed immediately because of an illness of sudden and unexpected onset, which care began during the first 60 consecutive days of travel outside the United States.

<sup>7</sup> Medicare Select Plans require that you use Blue Cross and Blue Shield of Illinois contracting Medicare Select hospitals for non-emergency admissions to receive coverage for the Medicare Part A deductible. In an emergency, the \$1,632 deductible is covered at any hospital from which you receive care.

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# Medicare Supplement Products - **Secure Plans**

**Effective  
04/01/2024**

	Plan A Secure	Plan F Secure <sup>3</sup>	Plan F Plus Secure <sup>4</sup>	Plan G Secure	Plan G Plus Secure	Plan N Secure	Plan N Plus Secure
<b>Medicare Select Option Available<sup>7</sup></b> (eligibility based on ZIP code)				✓	✓		
<b>Basic Benefits</b>	✓	✓	✓	✓	✓	✓ Copay Applies <sup>1</sup>	✓ Copay Applies <sup>2</sup>
<b>Skilled Nursing Coinsurance</b>		✓	✓	✓	✓	✓	✓
<b>Part A Deductible</b>		✓	✓	✓	✓	✓	✓
<b>Part B Excess<sup>5</sup></b>		✓	✓	✓	✓		
<b>Foreign Travel Emergency Care<sup>6</sup></b>		✓	✓	✓	✓	✓	✓
<b>SilverSneakers<sup>®</sup> Fitness Program</b>			✓		✓		✓
<b>24/7 Nurseline</b>	✓	✓	✓	✓	✓	✓	✓
<b>Dental Benefits</b>			✓		✓		✓
<b>Hearing Benefits</b>	✓	✓	✓	✓	✓	✓	✓
<b>Vision Benefits</b>			✓		✓		✓

<sup>1</sup> Plan N requires a copayment of up to \$20 for office visits and a copayment of up to \$50 for Emergency Room visits.

<sup>2</sup> Plan N Plus requires a copayment of up to \$20 for office visits and a copayment of up to \$50 for Emergency Room visits.

<sup>3</sup> Plan F Secure is only available if you are Medicare-eligible prior to 2020.

<sup>4</sup> Plan F Plus Secure is only available if you are Medicare-eligible prior to 2020.

<sup>5</sup> Not to exceed any charge limitation by the Medicare program or state law.

<sup>6</sup> Plans cover care needed immediately because of an illness of sudden and unexpected onset, which care began during the first 60 consecutive days of travel outside the United States.

<sup>7</sup> Medicare Select Plans require that you use Blue Cross and Blue Shield of Illinois contracting Medicare Select hospitals for non-emergency admissions to receive coverage for the Medicare Part A deductible. In an emergency, the \$1,632 deductible is covered at any hospital from which you receive care.

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