

Your partner
for a
healthier you.



bcbsks.com/medicare



**We're glad you're
a part of the
Blue Cross family.**

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We're excited to serve your Medicare Supplement insurance needs and appreciate the opportunity to be a part of your family. Every day, we work to empower our members and help them live healthy, active and rewarding lives.



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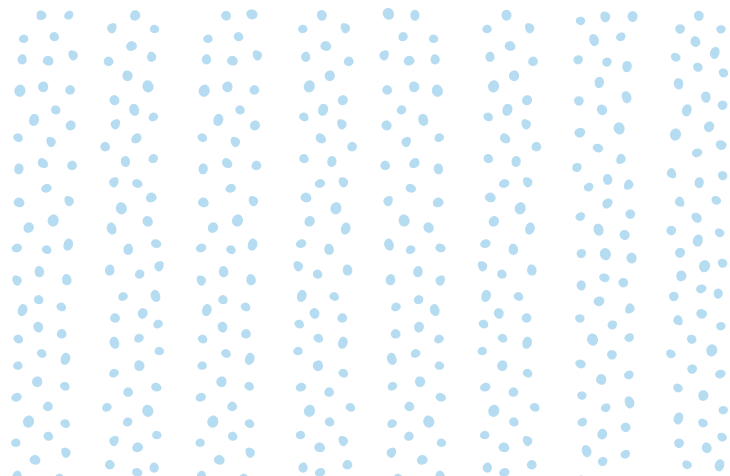
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Your ID card

Your card has information about you and your health coverage. Keep it with you so you have it when you need it.

1 Member information

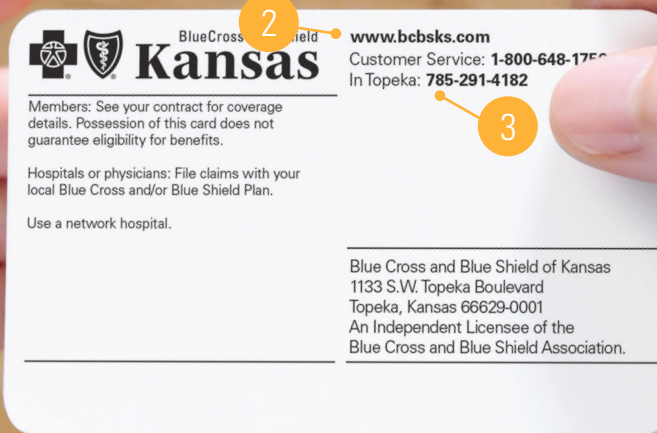
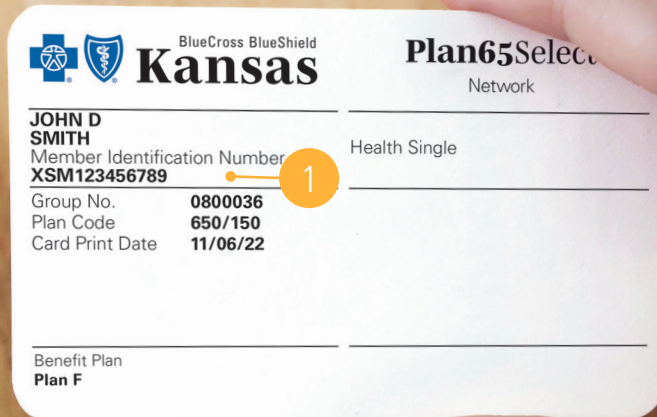
Your name will appear on the ID card. The identification number will be used at the doctor's office, medical center and when calling Blue Cross and Blue Shield of Kansas with a question.

2 Your member website

Use bcbsks.com/medicare for information about Blue Cross, your plan, wellness information and more.

3 Contacting customer service

We are available to receive your call from 7 a.m. – 4:30 p.m. CST, Monday through Friday.



**Important! Stay informed and maximize your health benefits when you go paperless.
Go to bcbsks.com/medicare to get started.**

BlueAccess®

Our secure online member portal allows you to:

- View your benefits, including eligibility
- Check your claims
- View, download and monitor medical expenses through your Explanation of Benefits (EOBs)
- View, download or print your digital ID card

Registration is quick and simple

If you already have a BlueAccess account, log in to view your health plan information. If you don't have an account, registration is easy.

1. Go to bcbsks.com/medicare
2. Click *BlueAccess Login*



- 1 **Manage My Account** | Edit and manage your preferences.
- 2 **Forms** | Order a new ID card, find authorization forms and other forms related to your health insurance coverage.
- 3 **Health Assessment** | Use this tool to generate a customized health plan to live a healthy life (page 7).
- 4 **Blue365** | Exclusive health and fitness deals and discounts (page 6).



Find a doctor or hospital

Your Medicare Supplement insurance plan works where your Medicare card works.

Medicare Supplement Select insurance network

Members who have a Select plan agree to use a Select network of hospitals for non-emergency services. In an emergency, your services are covered at any hospital. To see the network visit bcbsks.com/select.

Medicare Supplement benefits

As part of your Blue Cross and Blue Shield of Kansas membership, two new benefits are offered through your Medicare Supplement plan.

TruHearing

As a Blue Cross and Blue Shield of Kansas member, you have access to hearing care through TruHearing. Your benefit covers up to two hearing aids per year.

Call TruHearing at **888-929-6346** to schedule a hearing exam with a provider near you.

Over the counter

Medicare Supplement members will receive a card to buy a variety of over-the-counter (OTC) pharmacy items. The OTC card can be used at numerous retailers, such as Walmart, CVS, Walgreens or Dollar General. To see a full list of retailers, visit [OTCNetwork.com](https://www.otcnetwork.com).

Your OTC card gets loaded each quarter (or four times a year) with new funds to use for health and wellness products. Be sure to use all your funds every quarter as any remaining funds to not carry over.

Approved products you can buy with your OTC card include:

- COVID-19 products (face masks, hand sanitizer and disinfectant sprays)
- Allergy, sinus and combo liquids or tablets
- Vitamins and minerals
- Oral care
- Digestive aids (probiotics or prebiotics)

To activate your OTC card, visit [OTCNetwork.com](https://www.otcnetwork.com).

If you have any questions, didn't receive or misplaced your card, please call **800-432-3990**.

Your OTC benefit follows CMS guidance to determine which products are eligible. Be sure to call the number on the back of your card and speak to Customer Service or access the OTC Network portal to view eligible items and retailers. Items can be purchased through Medline by calling directly at **833-569-2330** (TTY:711) or visiting athome.medline.com/card.



Blue365[®]

As a Blue Cross member, you have access to exclusive deals and discounts. Blue365 helps make living a healthier lifestyle more fun and affordable.

Get exclusive deals and discounts for things like:

- Gym memberships
- Healthy eating and meal delivery
- Fitness products
- Personal care: Hearing and vision

Start saving today!

After logging in to your BlueAccess account, navigate to the wellness section and select Blue365 to sign up.

HealthyOptionsSM

As a Blue Cross member, you have access to our HealthyOptions program – a powerful set of services, tools and one-on-one support to live a healthy life at **no extra cost to you.**

Programs available include:

- A free health assessment tool with reports and guidance.
- Strive, powered by WebMD ONE, an online interactive, simple and credible health information access.
- Exclusive discounts through Blue365[®] including vision, hearing and meal delivery (see page 6).
- Webinars, videos and articles on managing your health and wellness.
- Newsletters with the latest health trends, recipes and more.

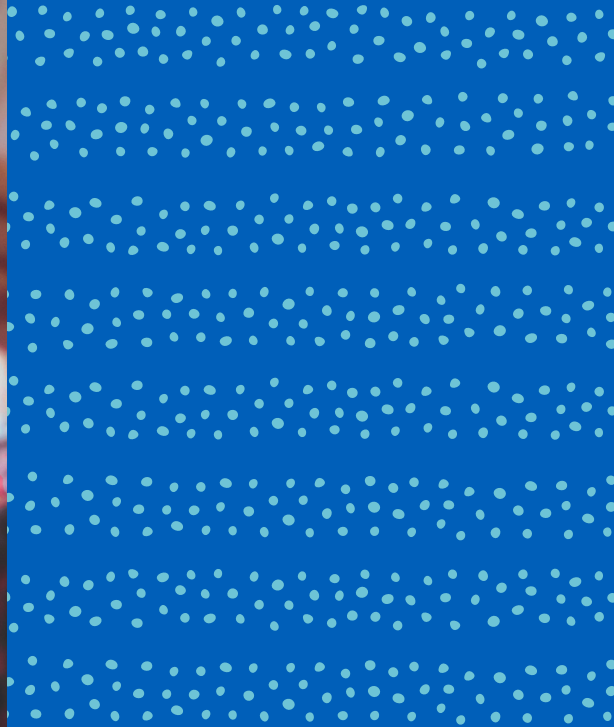
Explore your options to living a healthier life by visiting your member welcome page at bcbsks.com/medicare.





Where to get care

Knowing where to go for medical care can save you time and money. It can also help get you the best care for your situation. See the chart on page 9 for assistance in making the right decision for your healthcare needs.



	Doctor's office	Urgent care	Emergency room
When to go	When you have any medical concern, your primary doctor knows you best and has your medical records. Your doctor oversees your care and can provide routine services and preventive exams. Your doctor can help you manage your medication and refer you to a specialist, if needed.	When you need care quickly, but it is not an emergency and your primary doctor may not be available. Urgent care centers offer treatment for non-life-threatening injuries or illnesses.	When you need immediate treatment of a very serious or critical condition. The ER is for the treatment of life-threatening or very serious conditions that require immediate medical attention.
Type of care¹	<ul style="list-style-type: none"> • Routine checkups • Immunizations • Preventive services • Manage your overall health 	<ul style="list-style-type: none"> • Common infections (e.g., strep throat) • Minor skin conditions (e.g., poison ivy) • Flu and fever (below 104°) • Earache/sore throat 	<ul style="list-style-type: none"> • Heavy bleeding • Large open wounds • Chest pain • Major burns • Severe head injury • Broken bones • Shortness of breath
Wait times²	<ul style="list-style-type: none"> • Normally requires an appointment • Little wait time with a scheduled appointment 	<ul style="list-style-type: none"> • Walk-in patients are welcome, but waiting periods may be longer as patients with more urgent needs will be treated first 	<ul style="list-style-type: none"> • Open 24/7, but waiting periods may be longer because patients with life-threatening emergencies will be treated first

¹ This is a sample list of services and may not be all-inclusive.

² Wait time information represents averages only and are not tied to a specific condition, level of coverage or treatment. Check to ensure the provider accepts Medicare.



How your Medicare Supplement plan works

With a Medicare Supplement policy, Medicare will first pay its share of your medical expenses, and then your policy steps in to pay its share based on the supplement plan you select.

With Medicare Parts A & B Harry pays \$2,143 out of pocket.

Hospital charge: \$4,000.00 Medicare pays: \$2,444	Harry pays: Medicare deductible and coinsurance \$1,556	Doctor charge: \$2,000.00 Medicare pays: \$1,413	Harry pays: \$233 ded. and 20% of all other charges \$587	Total Harry pays: \$2,143
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With Medicare Parts A & B and Medicare Supplement Plan G Harry pays \$233 out of pocket.

Hospital charge: \$4,000.00 Medicare pays: \$2,444 MedSupp pays: \$1,556	Harry pays: \$0	Doctor charge: \$2,000.00 Medicare pays: \$1,413 MedSupp pays: \$354	Harry pays: \$233 deductible \$233	Total Harry pays: \$233
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*2022 Medicare deductible

Understanding your Explanation of Benefits (EOB)

EOBs are an easy-to-read record of your claims, providing you a complete view of your out-of-pocket healthcare expenses.

An EOB is created each time you have a medical expense like a doctor's visit or medical procedure. All EOBs can be viewed through your BlueAccess account (see page 3).

- 1 **Provider Contractual Write-off** | This is the savings you receive by going to an in-network provider.
- 2 **Amount Paid** | This is the amount Blue Cross paid for the visit or procedure.
- 3 **Your Responsibility** | This is categorized by the amount applied to your deductible, coinsurance or copay. Total Patient Responsibility is the amount you will be billed by your doctor depending on your Medicare Supplement plan.

EXPLANATION OF BENEFITS
THIS IS NOT A BILL
 PLEASE KEEP FOR INCOME TAX PURPOSES

BlueCross BlueShield Kansas
 An Independent licensee of the Blue Cross Blue Shield Association

1133 SW TOPEKA BLVD
 TOPEKA KS 66629-0001

NW00123456
 Page # 01 of 01
 02/28/18

Member ID: XSB123456789
 Group Name: XYZ CORP EMPLOYEE GROUP
 Group Number: 12345

Patient Name: Arthur
 Place of Service: Office
 Date Received: 02/23/18

Claim Number: 251711011917
 Type of Service: Surgeon
 Date Processed: 02/28/18

Provider: Topeka Ear Nose & Throat
 Billing Provider: Topeka Ear Nose & Throat

of	Total	Other	Provider	Amount	See Note Below	Non-covered	Applied to	Patient's	Copy	Total
ice	Charges	Insurance	Contractual	Paid		Charges	Deductible	Share		Patient
		Payment	Write-off					(Co-ins)		Responsibility
3/18	390.00		65.20	122.80			171.31	30.69		202.00
Total	390.00		65.20	122.80			171.31	30.69		202.00

Credited to Medical Deductible
 Credited to Medical Deductible
 Credited to Medical Deductible

YOUR RESPONSIBILITY*

Applied to	Patient's	Copy	Total
Deductible	Share		Patient
	(Co-ins)		Responsibility
\$500.00			
\$500.00			
\$30.69			
\$30.69			

Time Period 01-01-2018 Arthur
 Time Period 01-01-2018 Family
 Time Period 01-01-2018 Arthur
 Time Period 01-01-2018 Family

* Any amounts shown in these columns are your responsibility according to your contractual provisions when we are your primary insurance carrier. Our contracting provider has agreed to accept our payment allowance and should not bill the patient for the provider write-off. Refer to the Allowable Charges section of the patient's contract.

NOTE H - Our contracting provider has agreed to accept our payment allowance and should not bill the patient for the provider write-off. Refer to the Allowable Charges section of the patient's contract.

obtain a description of the procedure and/or diagnosis code billed by your provider, please contact customer service.

earn more about Health Care Reform and access your Explanation of Benefits on our web site.

or claim information
 www.bcbsks.com

For customer service call 1-800-432-7000
 Please see... EBY...

Glossary

As you've read through this handbook, you may have come across an unfamiliar word or term. These terms are frequently used within your health plan information and usage documents, and may be mentioned to you when at the doctor's office or hospital.

Assignment

An agreement by your provider or other supplier to be paid directly by Medicare, to accept the payment amount Medicare approves for the service, and not bill you for any more than the Medicare deductible and coinsurance.

Coinsurance

An amount you may be required to pay as your share of the cost for services after you pay any deductibles. Coinsurance is usually a percentage.

Copayment or Copay

An amount you may be required to pay as your share of the cost for a medical service or supply, like a doctor's visit. A copayment is usually a set amount, rather than a percentage.

Deductible

The amount you must pay for healthcare before Original Medicare, your Medicare health plan or your other insurance begins to pay. These amounts can change every year.

High Deductible Medicare Supplement Policy

A type of Medicare Supplement policy that has a high deductible but a lower monthly premium. You must pay the deductible before the Medicare Supplement policy pays anything. The deductible can change each year.

Medicare Supplement Select Network

A Select plan requires you to use a Select network hospital for any non-emergency inpatient admissions. For emergencies, you can use ANY hospital. Blue Cross Select plans are offered in 29 Kansas counties.

You + Blue

We're happy you are a part of the Blue Cross family. Thank you for joining us, and welcome to healthcare the Kansas way.

We care about your health and well-being and are proud to be your partner for a healthier you.

Stay informed, connected and join the conversation. Follow us!





bcbsks.com/medicare



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