

Blue Medicare SupplementSM

Supplemental health care coverage for
Medicare beneficiaries enrolled in Part B



WHO
IT'S
FOR

**MEDICARE BENEFICIARIES
WHO WANT ...**

- + A wide selection of plans
- + Locked in entry-age rates¹
- + No waiting periods for pre-existing conditions²
- + Guaranteed acceptance with early enrollment[†]
- + Choice of doctors with virtually no claims to file



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Quality supplemental coverage

offers freedom and peace of mind

	Blue Medicare Supplement
1 Wide selection of plans	We offer nine Blue Medicare Supplement plans to fit individual health care needs and budgets. Blue Medicare Supplement may help take care of costs that Original Medicare doesn't cover, so members won't have to worry about their health-related expenses.
2 Locked in entry-age rates¹	When members enroll in a Blue Medicare Supplement plan within the first six months of enrolling in Medicare Part B, they lock in their entry-age rate forever. ¹ Rate adjustments will be made only due to medical inflation or overall claims experience.
3 No waiting periods for pre-existing conditions²	Members who enroll early may be eligible for a Blue Medicare Supplement plan without medical underwriting and waiting periods for pre-existing conditions. ²
4 Guaranteed acceptance with early enrollment[†]	Members can't be turned down for Blue Medicare Supplement coverage when they enroll early and meet certain requirements. (See back page for more details. [†])
5 Choice of doctors with virtually no claims to file	Members have the freedom to choose their own doctor without a referral and can visit any Medicare-participating hospital. And in most cases, we handle Part A and Part B Medicare claims and supplemental claims automatically.

How it works

When members need to see a provider, they just follow these simple steps:

- 1. Call to schedule an appointment with their provider.**
- 2. Present their member ID card.**

Members are covered in case of emergencies, and they should seek care from the closest emergency room. They don't need to contact us first.

Why Blue?

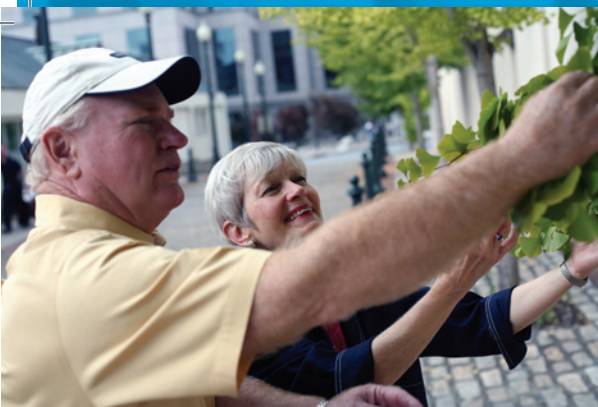
- + The #1 health care brand in America³
- + We're a local company you can trust, serving North Carolina for 75 years
- + We provide coverage to more than 120,000⁴ seniors and Medicare beneficiaries
- + Members get value-added programs and discounts on eyeglasses, hearing aids and much more!⁵



Compare Blue Medicare Supplement plans

Determine which benefits listed in the first column are most important. Then see which plans include those benefits by looking at the columns for Plans A through J. Premiums for each plan are listed at the bottom of the chart.

Benefits covered by Blue Medicare Supplement (Original Medicare does not cover the following benefits ⁶)	PLAN A PAYS <small>Form K-74A 2/04</small>	PLAN B PAYS <small>Form K-74B 2/04</small>	PLAN C PAYS <small>Form K-74C 2/04</small>	PLAN D PAYS <small>Form K-74D 2/04</small>	PLAN E PAYS <small>Form K-74E 2/04</small>	PLAN F PAYS <small>Form K-74F 2/04</small>	PLAN H PAYS <small>Form K-74H 8/05</small>	PLAN I PAYS <small>Form K-74I 8/05</small>	PLAN J PAYS <small>Form K-74J 8/05</small>
Part A (Hospitalization)									
\$1,024 Inpatient hospital deductible each benefit period		•	•	•	•	•	•	•	•
\$256 a day copayment for days 61-90 in a hospital	•	•	•	•	•	•	•	•	•
\$512 a day copayment for days 91-150 (lifetime reserve ⁷)	•	•	•	•	•	•	•	•	•
100% of Medicare allowable expenses for additional 365 days after Medicare hospital benefits stop completely	•	•	•	•	•	•	•	•	•
First 3 pints of blood per calendar year ⁸	•	•	•	•	•	•	•	•	•
\$128 per day for days 21-100 in a skilled nursing facility ⁹			•	•	•	•	•	•	•
Part B (Physician and medical services)									
\$135 Part B deductible			•			•			•
Generally, 20% of Medicare-approved amount (Part B coinsurance) after Part B deductible is met ¹⁰	•	•	•	•	•	•	•	•	•
100% of Medicare Part B excess charges						•		•	•
Additional benefits not covered by Medicare									
At-home recovery benefits ¹¹ (up to \$1,600 per calendar year)				•				•	•
Benefits for medically necessary emergency care received in a foreign country ¹²			•	•	•	•	•	•	•
Preventive care benefits ¹³					•				•
Blue Medicare Supplement monthly rates¹⁴									
Age Under 65	\$243.50 ¹⁵	\$280.00 ¹⁶	\$342.25 ¹⁵						\$397.50 ¹⁵
Age 65	\$107.50	\$131.00	\$167.25	\$137.25	\$138.50	\$136.00	\$153.50	\$154.50	\$185.50
66-69	\$111.00	\$136.50	\$181.25	\$151.25	\$152.50	\$169.50	\$169.00	\$170.00	\$196.75
70-74	\$112.00	\$142.25	\$199.00	\$163.25	\$164.50	\$195.00	\$187.00	\$188.50	\$209.25
75 and over	\$112.50	\$150.25	\$236.75	\$201.75	\$202.50	\$233.00	\$220.75	\$222.50	\$248.50



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† Early enrollment means **guaranteed acceptance**

Enrollees cannot be turned down for Blue Medicare Supplement coverage with BCBSNC if they meet all of the following requirements:

- + They are age 65 or older and eligible for Medicare or under age 65 and are eligible for Medicare by reason of disability (Plans A, C, and J)
- + They enroll within 6 months of enrolling in Medicare Part B
- + They are not covered by certain Medicaid programs
- + They are a resident of North Carolina

This coverage is guaranteed renewable and may not be canceled or non-renewed for any reason other than failure to pay premiums or misstatements in or omissions of information from your application.

Limitations & Exclusions

Like most health plans, Blue Medicare Supplement plans have some limitations and exclusions. Blue Cross and Blue Shield of North Carolina does not provide benefits for services, supplies, or charges that are: not Medicare eligible expenses under the Medicare program unless otherwise noted; incurred prior to the effective date of coverage, including any expenses when a subscriber is an inpatient on the effective date of coverage; payable under Medicare.

This brochure contains a summary of benefits only describing our policies' most important features. It is not an insurance policy. A member's policy is their insurance policy. If there is any difference between this brochure and the policy, the provisions of the policy will control. These Blue Medicare Supplement policies may not fully cover all of your medical costs. These Blue Medicare Supplement policies contain provisions that limit benefits to those approved for payment by Medicare. Neither Blue Cross and Blue Shield of North Carolina nor its agents are affiliated with Medicare.

Once members enroll in a plan, they will receive a Member Guide that will contain detailed information about plan benefits, exclusions and limitations. Members will be notified 30 days in advance of any change in coverage, which is guaranteed for 12 months.

CAUTION: POLICY BENEFITS ARE LIMITED TO THOSE APPROVED BY MEDICARE FOR PAYMENT.

Monthly premiums (rates) are effective until April 1, 2009 for Plans A-J.

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- 1 When members enroll, they will lock in their entry age forever as long as they stay in the Medicare supplement plan that they initially chose. Any rate adjustments will only be due to medical inflation or overall claims experience. Any change in their rate will be preceded by a 30-day notice and is guaranteed for 12 months. Rates are subject to change but members alone will not be singled out for premium increases based on their health or age.
- 2 Pre-existing conditions are conditions for which medical advice was given or treatment was recommended by or received from a physician within six months before the effective date of coverage. If enrollees wait until after the deadline to enroll, they may have a waiting period for pre-existing conditions and may have to complete a medical questionnaire.
- 3 Brand Strength Measure Survey, Synovate, Inc. (2004-2006); Harris Interactive^{®1} Brand and Reputation Practice – EquiTrend^{®1} Brand Study, June 2004, "Financial Services/Insurance Brands," Table 4: www.harrisinteractive.com/news/allnewsbydate.asp?NewsID=818. (December 2007).
- 4 Based on BCBSNC enrollment data, 2007.
- 5 The Blue ValuesSM program may change or be discontinued at any time. BCBSNC does not profit from this program. BCBSNC provides this program for member convenience and is not liable in any way for the goods and services received. These programs are not part of a member's policy or benefits, but are value-added discounts available for their use.
- 6 This is only a summary of benefits describing the policies' most important features. The policy is the insurance contract. Members must read the policy itself to understand all the rights and duties of both the member and their insurance company. These policies may not fully cover all of their medical costs. Neither Blue Cross and Blue Shield of North Carolina nor its agents are affiliated with Medicare.
- 7 After 90 days of hospitalization, Medicare benefits are paid from a one-time, lifetime reserve of 60 additional days, which are not renewable each benefit period.
- 8 If blood is donated to replace what the member uses, there is no charge.
- 9 Members must have been in a hospital for at least three days and enter a Medicare-approved facility generally within 30 days after hospital discharge, no benefits after 100 days.
- 10 On all plans offered except PLANS F, I and J, members may be responsible for charges higher than the amount approved by Medicare unless the provider agrees to accept Medicare's approved amount as full payment. Plans F, I and J are covered at 100% for these charges.
- 11 Pays up to \$40 a visit for home care certified by a physician as necessary for personal care during recovery from an injury or sickness for which Medicare approved a treatment plan for home health care. Treatment must be received within 8 weeks of the last Medicare approved home health care visit and is limited to 7 visits a week up to \$1,600 annually.
- 12 80% of medically necessary emergency care services beginning during the first sixty days of trip outside of USA, after \$250 annual deductible, up to \$50,000 lifetime maximum.
- 13 Preventive care benefits are limited to \$120 per year.
- 14 Rates are effective until April 1, 2009 for Plans A-J.
- 15 Medicare supplement rates are for individuals who are on Medicare due to disability.
- 16 Plan B under 65 rate is only available to current Blue Cross and Blue Shield of North Carolina subscribers who qualify for Medicare due to disability.



Contact your local BCBSNC agent today!

Whether you have a specific question or you're just looking for a better health care solution, we're here to help. Call your local agent today!

