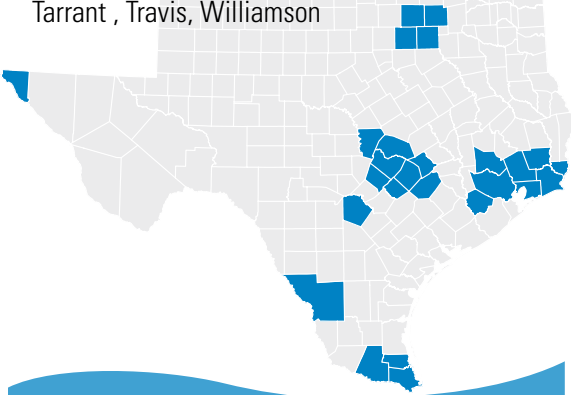


MEDICARE ADVANTAGE 2018

Texas Blue Cross Medicare AdvantageSM Area

County List

- **HMO:** Atascosa, Bandera, Bastrop, Bexar, Burnet, Caldwell, Cameron, Chambers, Comal, El Paso, Fort Bend, Hardin, Harris, Hays, Hidalgo, Jefferson, Lee, Liberty, Kendall, Medina, Montgomery, Orange, Webb, Willacy, Williamson, Wilson
- **PPO:** Bastrop, Bexar, Burnet, Caldwell, Chambers, Collin, Dallas, Denton, Fayette, Fort Bend, Hardin, Harris, Hays, Jefferson, Lee, Liberty, Montgomery, Tarrant, Travis, Williamson



Additional Benefits for 2018

- Prescription drugs in Tiers 1 and 2 covered through the gap*



BlueCross BlueShield
of Texas

Key Product Benefits

Affordable

- \$0 monthly premium HMO plan
- Low out-of-pocket costs
- Prescription drugs in Tiers 1 and 2 covered through the gap
- \$0 Tier 1 prescription drug copay at preferred pharmacies*

Flexible

- Choice of plans to suit any need, including some that let you see doctors out of network
- Strong network of doctors and hospitals that are experts in serving Medicare patients
- Travel coverage that you take wherever you go
- Worldwide emergency coverage
- Extensive pharmacy network including Walgreens, Kroger, H-E-B and local pharmacies

Valuable

- Unique OTC allowance loaded onto a card that members can use at a variety of retailers*
- Preventive and comprehensive dental coverage*
- Automatic enrollment in SilverSneakers^{®†} fitness for no additional premium
- Vision and hearing*
- Transportation*

* Applies to select plans

† SilverSneakers[®] is a wellness program owned and operated by Tivity Health, Inc., an independent company. Tivity Health and SilverSneakers[®] are registered trademarks or trademarks of Tivity Health, Inc., and/or its subsidiaries and/or affiliates in the USA and/or other countries.

A Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

Plan Summary

Blue Cross Medicare Advantage Choice Premier (PPO)SM

- \$83 Premium
- Preventive dental and vision
- \$15 PCP copay

Blue Cross Medicare Advantage Choice Plus (PPO)SM

- Premium varies by area: Austin Area: \$50 per month; Dallas Area: \$42 per month; Houston Area: \$42 per month; San Antonio Area: \$50 per month
- Includes vision

Blue Cross Medicare Advantage Basic (HMO)SM

- \$0 premium
- \$0 PCP copay
- Routine vision allowance
- \$8-\$45 monthly OTC benefit

Blue Cross Medicare Advantage Premier (HMO)SM

- \$47 premium
- \$0 PCP copay
- Routine vision allowance
- \$8-\$55 monthly OTC benefit

Blue Cross Medicare Advantage Value (HMO)SM

- \$0 premium
- \$0 PCP copay
- Preventive dental and vision
- OTC allowance

Blue Cross Medicare Advantage Select (HMO)SM

- \$39 premium
- \$0 PCP copay
- Dental, vision and hearing
- OTC allowance

MEDICARE PRODUCTS 2018

Blue Cross and Blue Shield of Texas

Effective
1/1/2018

Plan Name	TX PLAN LANDSCAPE														
	Blue Cross Medicare Advantage Basic (HMO) Houston	Blue Cross Medicare Advantage Premier (HMO) Houston	Blue Cross Medicare Advantage Basic (HMO) Austin	Blue Cross Medicare Advantage Premier (HMO) Austin	Blue Cross Medicare Advantage Basic (HMO) Valley	Blue Cross Medicare Advantage Premier (HMO) Valley	Blue Cross Medicare Advantage Basic (HMO) El Paso	Blue Cross Medicare Advantage Premier (HMO) El Paso	Blue Cross Medicare Advantage Value (HMO)	Blue Cross Medicare Advantage Select (HMO)	Blue Cross Medicare Advantage Choice Plus (PPO)		Blue Cross Medicare Advantage Choice Premier (PPO)		
												In-Network	Out-of-Network	In-Network	Out-of-Network
Premium	\$0	\$47	\$0	\$47	\$0	\$47	\$0	\$47	\$0.00	\$39.00	\$42-\$50		\$83		
MOOP	\$2,600	\$2,400	\$5,400	\$4,600	\$2,600	\$2,400	\$2,800	\$2,800	\$4,000	\$3,400	\$6,700	\$10,000	\$5,900	\$10,000	
Hospital Inpatient	\$250 / Stay \$500 annual max	\$250 / Stay \$500 annual max	\$225/Day (days 1-7)	\$195/Day (days 1-8)	\$250 / Stay \$500 annual max	\$250 / Stay \$500 annual max	\$100/Day (days 1-8) \$800 annual max	\$100/Day (days 1-8) \$800 annual max	\$200/day (days 1-6)	\$175/day (days 1-6)	\$285/Day (days 1-7)	50%	\$265/Day (days 1-7)	50%	
Primary Care Physician	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$20	50%	\$15	50%	
Specialist	\$30	\$30	\$35	\$35	\$30	\$30	\$30	\$25	\$40	\$30	\$50	50%	\$45	50%	
Hospital Outpatient Surgery	\$175	\$250	\$350	\$350	\$175	\$250	\$275	\$200	\$225	\$225	\$325	50%	\$325	50%	
OTC Purchase Allowance	\$45 / month	\$55 / month	\$8 / month	\$8 / month	\$45 / month	\$55 / month	\$45 / month	\$55 / month	\$20/month	\$20/month	Not Covered		Not Covered		
Dental Services: Preventive	Not Covered	Covered	Not Covered	Covered	Not Covered	Covered	Not Covered	Covered	Covered	Covered	Not Covered		Covered		
Dental Services: Comprehensive	Not Covered	Covered	Not Covered	Not Covered	Not Covered	Covered	Not Covered	Covered	Not Covered	Covered	Not Covered		Not Covered		
Hearing Aid Allowance	Covered	Covered	Not Covered	Not Covered	Covered	Covered	Covered	Covered	Not Covered	Covered	Not Covered		Not Covered		
Vision Services	Covered	Covered	Covered	Covered	Covered	Covered	Covered	Covered	Covered	Covered	Covered		Covered		
Transportation	Covered	Covered	Covered	Covered	Covered	Covered	Covered	Covered	Covered	Covered	Not Covered		Not Covered		
Annual Prescription Deductible	This plan does not have a deductible										\$405 for tiers 4-5		\$405 for tiers 4-5		
Rx Copays Preferred	\$0/\$8/\$39/ \$95/33%	\$0/\$8/\$39/ \$95/33%	\$0/\$8/\$39/ \$95/33%	\$0/\$8/\$39/ \$95/33%	\$0/\$8/\$39/ \$95/33%	\$0/\$8/\$39/ \$95/33%	\$0/\$8/\$39/ \$95/33%	\$0/\$8/\$39/ \$95/33%	\$0/\$8/\$39/ \$95/33%	\$0/\$8/\$39/ \$95/33%	\$0/\$8/\$39/\$95 33%	\$0/\$14/\$42/ \$95/25%		\$0/\$14/\$42/ \$95/25%	
Gap Coverage	Prescription drugs in Tiers 1 and Tier 2 covered through the gap														

For Agent training only, not intended for marketing/sales activities. Product information subject to change.

^Varies by plan: Austin Area: \$50 per month; Dallas Area: \$42 per month; Houston Area: \$ 42* per month; San Antonio Area: \$50 per month