

2016

Decision Guide

Regence Medicare Advantage PPO Plans

for Bonner, Kootenai, Latah and Nez Perce counties in Idaho, and Asotin County in Washington



Regence BlueShield of Idaho

is an Independent Licensee of the Blue Cross and Blue Shield Association

STEP-BY-STEP



READ.

Learn about all the programs and benefits you can enjoy as a Regence BlueShield of Idaho member. This booklet provides the tools you need to make an informed decision in choosing a Regence Medicare Advantage Plan.



SEARCH.

Use our online provider search tool and view our formulary at **regence.com/medicare**. Or call us toll-free at **1-844-REGENCE (1-844-734-3623)** (TTY: 711). Our Medicare plan advisors are happy to answer your questions, find a doctor or look up your medication for you.



ATTEND.

We offer free informational meetings where you can learn more about our Medicare Advantage plans. Call us or visit our website to find a meeting in your area.



ENROLL.

Call us or visit our website and follow the instructions for applying online. Or complete and sign the enclosed application and return in the postage-paid return envelope. Be sure you:

- Verify your Medicare card information is listed correctly on the application (or attach a copy of your card).
- Sign your application.
- Lost or damaged return envelope? Mail your application to: P.O. Box 1827, B32M, Medford, OR 97501. Please make sure you have sufficient postage. Applications can also be faxed to 1-888-335-2988.
- Do not send any payment with your application.

OR CALL YOUR INSURANCE AGENT.

Either way, there's plenty of help available if you have questions.



CONVENIENCE AND SIMPLICITY

A Regence Medicare Advantage Plan combines all of the benefits of Original Medicare Parts A (hospital) and B (physician), and in some cases, Part D prescription drug coverage into one easy-to-use plan. You also get extra benefits and programs beyond what Original Medicare has to offer. You access all your benefits with one member identification card and virtually no paperwork.



Flexibility and freedom of choice

With a Regence Medicare Advantage PPO plan, you have the freedom to see any provider across the United States with no referrals. Having the flexibility to access care when and where you need it is one of the many advantages of being a member of Regence BlueShield of Idaho.

Our plans have the benefits you need to keep yourself healthy with no medical deductible and low copays. Looking for great value? **Regence MedAdvantage + Rx Classic**, our most popular plan, gives you the most important benefits of our PPO plans for one low monthly premium.

Regence MedAdvantage + Rx CLASSIC (PPO)

Good choice if you...

...want important plan benefits for a low monthly premium Regence MedAdvantage + Rx **ENHANCED** (PPO)

Good choice if you...

...want richer plan benefits for a higher monthly premium Regence MedAdvantage BASIC (PPO) (no Rx)

Good choice if you...

...want the convenience of a Medicare Advantage plan but don't need prescription drug coverage

Plan benefits that are right for you

- No medical deductible
- Low primary care copay
- Drug copays as low as \$0 on plans with Rx
- Freedom to see any provider across the United States
- No referrals needed to see a provider of your choice
- Worldwide coverage for urgent and emergency care

- Large national PPO provider network through the Blue Medicare Advantage PPO Network Sharing Program
- ▶ SilverSneakers® Fitness program
- Annual physical exam
- Annual routine eye exam
- Routine vision hardware
- Preventive dental



WE HAVE YOU COVERED

across the country and around the world!

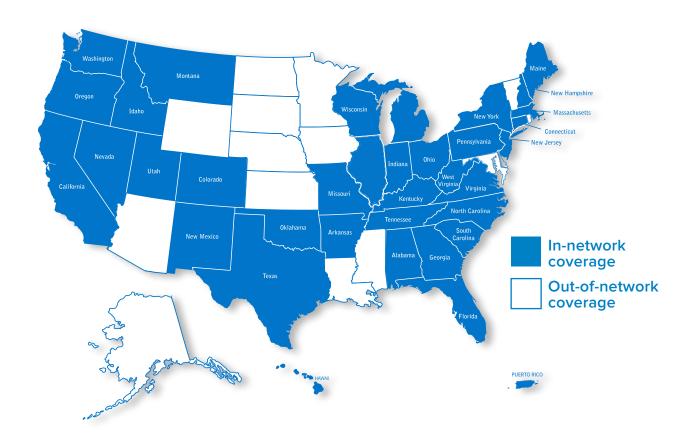
Travel the world with complete peace of mind.

The BlueCard Worldwide® program gives you access to urgent and emergency medical services in more than 200 countries and territories around the world. When you arrange cashless access with a participating provider or hospital through the BlueCard Worldwide Service Center, you'll only pay the out-of-pocket expenses (copays and coinsurance) that you would normally pay for urgent and emergency care under your PPO plan. Part D prescription drug coverage is not available outside the United States and its territories.

Get in-network benefits across the country—with the Blue Medicare Advantage PPO Network Program.

Regence PPO plan members can see any Medicare-contracted provider anywhere in the United States. When traveling outside your local service area, you can still get in-network benefits by seeing contracted Medicare Advantage PPO Blue Cross® and/or Blue Shield® providers through the Blue Medicare Advantage PPO Network Program.

Finding a Blue Medicare Advantage PPO provider is easy. Download the Blue National Doctor & Hospital Finder App at **bcbs.com/mobile**, or use the National Doctor and Hospital Finder at **provider.bcbs.com**.







Get fit, have fun and make friends by using your SilverSneakers membership. You'll have access to more than 13,000 participating fitness facility locations across the country where on-site staff members can help you meet your wellness goals. Locations offer exercise equipment, amenities and fitness classes that are designed specifically for active

older adults and are taught by certified instructors (amenities and classes vary by location). Don't have access to a participating fitness location? SilverSneakers will send you a home fitness kit that contains tools to achieve a healthier lifestyle at home or on the go.

Comprehensive dental available for PPO plan members.

Regence PPO members can receive restorative dental services such as oral surgery, extractions and implants with no deductible and no waiting period. The Regence PPO Dental Option is optional and available for an additional premium. See page 5 or the Summary of Benefits for more information.

Save time and money on your maintenance medication prescriptions.

Take advantage of greater savings and convenience for your ongoing prescription needs when you order a three-month supply of your maintenance medications from a network retail or mail-order pharmacy. You pay only two times your monthly copay for a three-month supply of drugs on Tiers 1, 2 and 6; drugs on Tiers 3 and 4 are only two and a half times your monthly copay.

\$0 Select Care drug copay.

Tier 6—Select Care drugs—are medicines that provide the best value for the treatment or prevention of many conditions. These generic drugs have been shown to be clinically effective and low-cost. They are available with no copay and no deductible.



PPO BENEFIT HIGHLIGHTS

Medical Benefits	Rege MedAdvai CLASSI	nage + Rx	Rege MedAdvar ENHANC	ntage + Rx	Rege MedAdv BASIC (PP	/antage
Service area	Bonner, Kootenai, Latah, Nez Perce, Asotin (WA)					
Monthly premium	\$116		\$201		\$76	
Annual medical deductible	\$0		\$ 0		\$0	
Out-of-pocket maximum ¹	\$6,700 in-network \$10,000 combined in- and out-of-network		\$5,000 in-network \$8,300 combined in- and out-of-network		\$6,700 in-network \$10,000 combined in- and out-of-network	
Network	In	Out	In	Out	ln	Out
Medicare-covered preventive services (including an Annual Wellness Visit)	\$0	30%	\$0	30%	\$0	30%
Primary care office visit	\$15	30%	\$10	30%	\$15	30%
Specialist office visit	\$35	30%	\$30	30%	\$40	30%
Chiropractic services	\$20	30%	\$20	30%	\$20	30%
X-rays	\$10	30%	\$0	30%	\$10	30%
Lab services – primary care/specialist office or independent lab	\$10	30%	\$0	30%	\$10	30%
Lab services – ambulatory surgical center/hospital	\$25	30%	\$15	30%	\$25	30%
Inpatient hospital	Days 1-4: \$310 per day	30%	Days 1-5: \$280 per day	30%	Days 1-4: \$340 per day	30%
Outpatient surgery – ambulatory surgery center	\$150	30%	\$150	30%	\$200	30%
Outpatient surgery – hospital	\$275	30%	\$275	30%	\$325	30%
Emergency room (waived if admitted within 48 hours)	\$75	\$75	\$75	\$75	\$75	\$75
Urgent care	\$50	\$50	\$50	\$50	\$50	\$50
Ambulance	\$300	\$300	\$250	\$250	\$300	\$300
Durable medical equipment	20%	30%	20%	30%	20%	30%

¹All cost-sharing amounts for covered medical services accumulate toward the out-of-pocket maximum except for preventive and comprehensive dental services, routine vision services, hearing aids and prescription drugs.

PPO BENEFIT HIGHLIGHTS

Medical Benefits	Regence MedAdvantage + Rx CLASSIC (PPO)		Regence MedAdvantage + Rx ENHANCED (PPO)		Regence MedAdvantage BASIC (PPO) (no Rx)	
Additional Benefits and Programs						
Network	ln	Out	In	Out	In	Out
SilverSneakers Fitness program	\$0					
Annual physical exam	\$0	30%	\$0	30%	\$0	30%
Preventive dental	50% coinsurance, up to \$500 allowed per year, in or out of network					
Routine vision exam ¹	\$35	\$35	\$30	\$30	\$40	\$40
Routine vision hardware ¹	Lenses covered 100%, up to \$100 allowed for frames or contacts per calendar year		Lenses covered 100%, up to \$150 allowed for frames or contacts per calendar year		Lenses covered 100%, up to \$100 allowed for frames or contacts per calendar year	
Hearing aid ²	No coverage		Covered, see Summary of Benefits for details		No coverage	
Part D prescription drugs	Included; see page 6 for details			No coverage		

Optional Benefit	Regence PPO Dental Option			
Monthly premium	\$27			
Comprehensive dental	50% coinsurance, up to \$1,000 allowed per year, in or out of network			

¹Routine vision exam and hardware must be received from a Vision Service Plan (VSP) provider to be eligible for in-network cost sharing. Coverage limitations apply. Your out-of-pocket costs could be higher with an out-of-network provider. Visit **vsp.com** to search for a provider in your area.

²Hearing aids must be obtained from the TruHearing hearing aid savings program to be eligible for in-network coverage. Coverage limitations apply.





PRESCRIPTION DRUGS

Benefit information

Prescription Drug Coverage	Regence MedAdvantage + Rx CLASSIC (PPO)	Regence MedAdvantage + Rx ENHANCED (PPO)					
Annual Rx deductible	\$360	\$ 0					
Stage 1: Initial Coverage Stage							
1-Month supply (in-network retail pharmacy)							
Tier 1: Preferred generics	\$10	\$5					
Tier 2: Generics	\$17	\$12					
Tier 3: Preferred brands	\$47	\$47					
Tier 4: Non-preferred brands	\$100	\$100					
Tier 5: Specialty drugs	25%	33%					
Tier 6: Select Care drugs (deductible does not apply)	\$0	\$0					
3-Month supply (in-network retail or mail-order pharmacy)							
Tier 1: Preferred generics	\$20	\$10					
Tier 2: Generics	\$34	\$24					
Tier 3: Preferred brands	\$117.50	\$117.50					
Tier 4: Non-preferred brands	\$250	\$250					
Tier 5: Specialty drugs	Not applicable; limited to a 30-day supply	Not applicable; limited to a 30-day supply					
Tier 6: Select Care drugs (deductible does not apply)	\$0	\$0					
Stage 2: Coverage Gap St	age (after prescription costs re	each \$3,310)					
Generic drugs	You pay 58%						
Brand drugs	You pay 45%						
Stage 3: Catastrophic Coverage Stage (after you have paid \$4,850 out of pocket)							
Generic drugs	You pay the greater of \$2.95 or 5%						
Brand drugs	You pay the greater of \$7.40 or 5%						



PRESCRIPTION DRUGS

focused on savings and effectiveness

How your drug coverage works

Stage 1: Initial Coverage

Stage 2: Coverage Gap

Stage 3: Catastrophic Coverage







After you pay your annual deductible (if applicable), you pay a copay or coinsurance for each prescription you fill.

Your plan pays the rest until the total that you and the plan pay reaches \$3,310.

After your total drug costs reach \$3,310, you pay 58% of the cost of generic prescription drugs and 45% of the cost of most brand-name prescription drugs until your total out-of-pocket prescription drug costs reach \$4,850.

Total out-of-pocket costs are the amounts paid by you in the first stage plus any applicable drug manufacturer discounts applied in the Coverage Gap stage. After your total out-of-pocket drug costs reach \$4,850, you pay the greater of 5% coinsurance or \$2.95 copay for generic drugs, and the greater of 5% coinsurance or \$7.40 copay for brandname drugs.

Your plan pays the rest of the cost of your prescription drugs for the rest of the calendar year (through December 31, 2016).



How we cover medications

We organize covered prescription medications into six tiers, and a copay or coinsurance is assigned to each tier. What you pay depends on which tier your medication falls into.



The formulary

Our list of covered brand-name and generic prescription medications is selected and regularly reviewed by a committee of doctors and pharmacists. Formulary medications are chosen for effectiveness, value and safety—not just price.



Save with generics

Generics typically cost a lot less than brand-name medications—and work just as well. So ask your doctor if a generic version of your medication is right for you.



Prior authorization

Some brand-name medications require prior authorization. Generics typically don't require prior authorization, so switching to a generic can eliminate the need for review. If you need to obtain prior authorization, your doctor or pharmacist can call or fax in the request.

Visit regence.com/medicare to:

- Find a network pharmacy near you
- ▶ Learn about your medication choices
- ▶ See if your medication needs prior authorization or has limitations or restrictions



FEEL BETTER AND HEALTHIER

tools and resources for your good health

► Regence Advice24 nurse line

Make a toll-free and confidential call if you can't decide between going to the ER or calling your doctor. Registered nurses are ready 24/7 to answer questions and assess symptoms or injuries.

▶ Case management

We can help if you face a difficult medical situation. Case managers—experienced registered nurses and social workers—will answer questions and work closely with you and your doctor on a personal treatment plan. They also work with disease and behavioral specialists to help with chemical dependency, depression and other chronic conditions.

▶ Disease management

If you're dealing with a chronic illness, like diabetes or heart disease, managing your condition is a good way to maintain or improve your quality of life. Our registered nurses help you understand your condition, create a personalized care plan and communicate with your doctor as a part of your health care team.

▶ regence.com

You'll find 24-hour access to your coverage and claims, and you can find a doctor near home or work in minutes. Our providers are even reviewed by other Regence members. Our library of articles, videos and interactive tools help you brush up on nutrition and get current information on medications and other health topics.

▶ Utilization management

Some medical services and procedures require prior authorization from Regence before you receive treatment. This process helps you:

- Understand your treatment options and any related risks
- Ensure coverage of a specific procedure, treatment, or service that is supported by best available evidence
- Avoid inappropriate or unnecessary medical treatment and costs

For additional information about prior authorization, you can talk with your provider, or visit **regence.com/medicare**.

▶ Annual in-home health evaluation

This service from a licensed health practitioner is designed to support and complement your regular doctor's care to help you maintain or improve your health.

▶ My Advocate

Find out if you qualify for, but are not receiving, assistance with medical costs, heating bills, meal programs or other programs and social services.



SilverSneakers is a registered trademark of Healthways, Inc. and/or its subsidiaries.

Privacy policy: View the annual notice of member rights regarding privacy practices and how we protect your information at **regence.com/medicare**.

Need extra help with prescription drug costs? To determine if you qualify for extra help from Medicare to pay for your prescription drug premiums and costs, call the Social Security Office at 1-800-772-1213 between 7 a.m. and 7 p.m., Monday through Friday (TTY users should call 1-800-325-0778); or your State Medicaid Office.

Mail-order pharmacy: You can get prescription drugs shipped to your home through our network mail-order delivery service. To refill your mail-order prescriptions, please contact us 14 days before you think the drugs you have on hand will run out to make sure your next order is shipped to you in time. Typically, you should expect to receive your prescription drugs within 14 days from the time that the mail-order pharmacy receives the order. If you do not receive your prescription drug(s) within this time, please contact us at **1-800-541-8981** (TTY: 711), from 8 a.m. to 8 p.m. Monday through Friday (from October 1 through February 14, our telephone hours are 8 a.m. to 8 p.m., seven days a week) or visit **regence.com/medicare**.

Regence BlueShield of Idaho is a Medicare Advantage plan with a Medicare contract. Enrollment in Regence BlueShield of Idaho depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums and/or copayments/coinsurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium.

For more information, call one of our Medicare plan advisors, 8 a.m. to 5 p.m., Monday through Friday toll-free: 1-844-PEGENCE

toll-free: 1-844-REGENCE (1-844-734-3623) (TTY: 711)



P.O. Box 1106 Lewiston, ID 83501

regence.com/medicare