

2021

GROUP MEDICARE ADVANTAGE

Plus

A Medicare Advantage plan that offers coverage and peace of mind.

Group Medicare Advantage plans from Blue Cross and Blue Shield of Minnesota offers coverage and cost sharing options that meet your needs.

COVERAGE YOU CAN RELY ON

Enjoy these plan features:

- **Preventive care** – Includes coverage for various routine services and screenings
- **Travel benefits** – Travel nationwide and get in-network benefits when using participating providers
- **Annual limits** – You're protected from high costs with an annual out-of-pocket maximum

BUILDING HEALTHY HABITS

Our Group Medicare Advantage plans include tools and resources to help members create healthier habits, stay well and keep fit.

- **Nurse line** – A nurse is available 24 hours a day, seven days a week to answer health-related questions
- **Quitting tobacco** – A wellness coach is available to help you develop and maintain a plan to quit

- **Online member center** – Search for a doctor in your network, track the status of claims, view, print or order member ID cards and more when you log in at bluecrossmnonline.com

- **Fitness membership** – Stay active with the SilverSneakers® fitness program, which includes 16,000+ fitness locations, 50+ fitness classes and on-demand workout videos — all at no additional cost



SilverSneakers® is a registered trademark of Tivity Health, Inc., an independent company that provides health and fitness programs.

FEEL CONFIDENT CHOOSING BLUE CROSS

Blue Cross has been involved with Medicare since it first began. We look forward to making a healthy difference in your life for years to come.

2021 GROUP MEDICARE ADVANTAGE PLUS

This chart highlights the medical and prescription drug benefits of Group Medicare Advantage. For information about Original Medicare benefits and additional details (including coverage limits that may apply), refer to the Summary of Benefits. **Benefits shown are the amount you pay for Medicare-eligible services and supplies.**

BENEFIT CATEGORY	
Deductible Amount you pay before coverage begins	\$0
Annual out-of-pocket maximum	\$3,000 in-network \$3,000 combined in and out-of-network
Doctor office visits Primary care Specialists Chiropractic Podiatry services	\$0 \$0 \$0 \$0
Diagnostic tests, X-rays and radiology services Lab services	\$0 \$0
Preventive services Including "Welcome to Medicare" and annual wellness visits, routine physical, hearing tests and eye exams	\$0
Cancer screenings	\$0
Emergency care Within the United States and worldwide	\$0
Urgently needed care Within the United States Worldwide	\$0 \$0
Inpatient hospital care Per benefit period	\$0
Skilled nursing facility care Up to 100 days each benefit period	\$0
Outpatient care Outpatient hospital surgery Outpatient observation stay Ambulatory surgical center	\$0 \$0 \$0
Hearing aid	\$499 copay per aid (Advanced Aid); \$799 copay per aid (Premium Aid)
Vision	Eyewear up to \$150 allowance for contacts, lenses and frames
Diabetes programs and supplies	\$0
Durable medical equipment, prosthetics	\$0

For information about the premium you will pay for this coverage, contact your group benefit plan administrator.



Group Medicare Advantage is a PPO plan with a Medicare contract. Enrollment in these Blue Cross plans depends on contract renewal. This information is not a complete description of benefits. Call **1-855-579-7658/TTY 711** for more information.

NOTICE OF NONDISCRIMINATION PRACTICES
Effective July 18, 2016

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or gender. Blue Cross does not exclude people or treat them differently because of race, color, national origin, age, disability, or gender.

Blue Cross provides resources to access information in alternative formats and languages:

- Auxiliary aids and services, such as qualified interpreters and written information available in other formats, are available free of charge to people with disabilities to assist in communicating with us.
- Language services, such as qualified interpreters and information written in other languages, are available free of charge to people whose primary language is not English.

If you need these services, contact us at 1-800-382-2000 or by using the telephone number on the back of your member identification card. TTY users call 711.

If you believe that Blue Cross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or gender, you can file a grievance with the Nondiscrimination Civil Rights Coordinator

- by email at: Civil.Rights.Coord@bluecrossmn.com
- by mail at: Nondiscrimination Civil Rights Coordinator
Blue Cross and Blue Shield of Minnesota and Blue Plus
M495
PO Box 64560
Eagan, MN 55164-0560
- or by phone at: 1-800-509-5312

Grievance forms are available by contacting us at the contacts listed above, by calling 1-800-382-2000 or by using the telephone number on the back of your member identification card. TTY users call 711. If you need help filing a grievance, assistance is available by contacting us at the numbers listed above.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights

- electronically through the Office for Civil Rights Complaint Portal, available at: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
- by phone at:
1-800-368-1019 or 1-800-537-7697 (TDD)
- or by mail at:
U.S. Department of Health and Human Services
200 Independence Avenue SW
Room 509F
HHH Building
Washington, DC 20201

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

This information is available in other languages. Free language assistance services are available by calling the toll free number below. For TTY, call 711.

Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al 1-855-903-2583. Para TTY, llame al 711.

Yog tias koj hais lus Hmoob, muaj kev pab txhais lus pub dawb rau koj. Hu rau 1-800-793-6931. Rau TTY, hu rau 711.

Haddii aad ku hadasho Soomaali, adigu waxaad heli kartaa caawimo luqad lacag la'aan ah. Wac 1-866-251-6736. Markay tahay dad maqalku ku adag yahay (TTY), wac 711.

နမ့်ကတိကညိကျိန်ဒီး, တၢ်ကဟ့ၣ်နၢကျိၣ်တၢ်မၤစၢၤကလိတဖၣ်န့ၣ်လီၤ. ကိး 1-866-251-6744 လၢ TTY
အဂီၢ်, ကိး 711 တက့ၢ်.

إذا كنت تتحدث العربية، تتوفر لك خدمات المساعدة اللغوية المجانية. اتصل بالرقم 1-866-569-9123. للهاتف النصي
اتصل بالرقم 711.

Nếu quý vị nói Tiếng Việt, có sẵn các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Gọi số 1-855-315-4015. Người dùng TTY xin gọi 711.

Afaan Oromoo dubbattu yoo ta'e, tajaajila gargaarsa afaan hiikuu kaffaltii malee. Argachuuf 1-855-315-4016 bilbilaa. TTY dhaaf, 711 bilbilaa.

如果您說中文，我們可以為您提供免費的語言協助服務。請撥打 1-855-315-4017。聽語障專 (TTY)，請撥打 711。

Если Вы говорите по-русски, Вы можете воспользоваться бесплатными услугами переводчика. Звоните 1-855-315-4028. Для использования телефонного аппарата с текстовым выходом звоните 711.

Si vous parlez français, des services d'assistance linguistique sont disponibles gratuitement. Appelez le +1-855-315-4029. Pour les personnes malentendantes, appelez le 711.

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한국어를 사용하시는 경우, 무료 언어 지원 서비스가 제공됩니다. 1-855-904-2583 으로 전화하십시오. TTY 사용자는 711 로 전화하십시오.

ຖ້າເຈົ້າເວົ້າພາສາລາວໄດ້, ມີການບໍລິການຊ່ວຍເຫຼືອພາສາໃຫ້ເຈົ້າພຣີ. ໃຫ້ໂທຫາ 1-866-356-2423 ສໍາລັບ. TTY, ໃຫ້ໂທຫາ 711.

Kung nagsasalita kayo ng Tagalog, mayroon kayong magagamit na libreng tulong na mga serbisyo sa wika. Tumawag sa 1-866-537-7720. Para sa TTY, tumawag sa 711.

Wenn Sie Deutsch sprechen, steht Ihnen fremdsprachliche Unterstützung zur Verfügung. Wählen Sie 1-866-289-7402. Für TTY wählen Sie 711.

ប្រសិនបើអ្នកនិយាយភាសាខ្មែរមិន អ្នកអាចរកបានសេវាជំនួយភាសាឥតគិតថ្លៃ។ ទូរស័ព្ទមកលេខ 1-855-906-2583។ សម្រាប់ TTY សូមទូរស័ព្ទមកលេខ 711។

Diné k'ehjí yáníłt'i'go saad bee yát'i' éí t'áájíík'e bee níká'a'doowołgo éí ná'ahoot'i'. Kojí éí béesh bee hodíílnih 1-855-902-2583. TTY biniiyégo éí 711 jí' béesh bee hodíílnih.