The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent or insurance company.

Medicare information you can count on





Learn about your options

You'll be eligible for Medicare before you know it. Getting the health benefits you need shouldn't be complicated. And we'll make sure it isn't. We can guide you through your options before you enroll — so you can make an informed, confident decision.

Did you know ...

- Original Medicare has two essential parts:
 - Part A is hospital insurance that covers hospital stays, skilled nursing care and more
 - Part B is medical insurance that covers doctor visits, outpatient care and more
- You only have three months before and after your 65th birthday to enroll in Medicare without paying a penalty
- Enrollment is not automatic you must sign up to assure you get the coverage you've earned
- Original Medicare was never meant to cover all your medical expenses
- You can get Medicare coverage from a private insurance company like us
- Your insurance company can help you manage your Medicare benefits

Your Medicare checklist

6 months before you turn 65

- Learn about your Medicare coverage options
- If you're employed, ask your employer about maintaining your company-sponsored health benefits

3 months before you turn 65

- □ Enroll in Original Medicare
- Consider your insurance company's reputation and experience
- Arrange for Medicare coverage to help fill the gaps in Original Medicare

Your 65th birthday month

 It's not too late ... sign up for Medicare coverage, even if you're already enrolled in Original Medicare

3 months after you turn 65

- You should be enrolled in Original Medicare by now
- □ Be sure to have Medicare coverage in place



Medicare doesn't cover everything

Original Medicare (Parts A and B) was designed to provide basic medical coverage. But if you rely on Medicare alone, you could come up short.

		What you'll pay with Original Medicare
PART A	First 60 days in the hospital	\$1,316 deductible each benefit period ¹
	Days 61-90 in the hospital	\$329 a day ¹
	Days 91-150 ² in the hospital	\$658 a day ¹
	Days 21-100 in a nursing facility	\$164.50 a day ¹
PART B	Routine dental, vision and hearing care	100% of total cost
	Doctor visit/care ³	20% of total cost
	X-rays and cancer screenings	20% of total cost
	Occupational, physical and speech therapy	20% of total cost (\$1,980 limit)

¹This is the 2017 deductible and copay for Medicare Part A (Hospital and Skilled Nursing Facility care) and may change on January 1, 2018.

coinsurance for most services.

²After 90 consecutive days of hospitalization, Medicare benefits are paid from a one time lifetime reserve of 60 days that are not renewable each benefit period.

³Physicians agree to accept Medicare's predetermined fee as payment in full; patients are responsible for 20% of



You deserve <u>more</u> from your Medicare plan

High medical costs from an unexpected illness or injury can impact your retirement savings. And Original Medicare doesn't cover all out-of-pocket costs. Adding private Medicare insurance coverage can help protect you and your nest egg.

Three ways you can get additional coverage

When you become eligible for Medicare Parts A and B, you can choose added coverage from a private insurance company approved by Medicare.

- Medicare Advantage plans (also known as Part C) combine Parts A and B with added benefits
- Medicare Supplement plans cover some of the expenses not covered by Parts A and B
- Prescription drug coverage (also known as Part D) helps pay for the medications prescribed by your doctor

Turn the page for details about each of these types of coverage.



Enhance Original Medicare by selecting a plan with extra benefits that make life better.

Maximize value with an all-in-one Medicare Advantage plan

- Medicare Advantage (Part C) includes Part A hospital coverage and Part B medical coverage, all in one plan.
- Most Medicare Advantage plans also include prescription drug coverage (Part D).
- You get the convenience of dealing with just one insurance provider for all your claims.
- And you get valuable extra benefits, like extra days in the hospital. Some plans even offer dental, vision and hearing coverage.
- You can choose from a wide range of Medicare Advantage plans to fit your needs and budget.

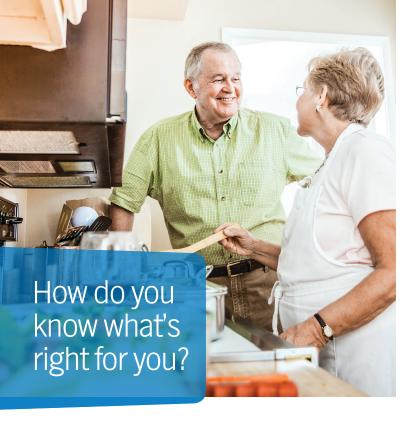
Maximize flexibility with a reliable Medicare Supplement plan

- With a Medicare Supplement insurance plan, you'll still have Original Medicare for Parts A and B coverage.
- Your supplement will cover many of the out-of-pocket expenses that Original Medicare doesn't cover.
- You'll have the flexibility to choose any Medicareapproved doctor or hospital.
- Your coverage travels with you nationwide, and it's guaranteed for life.*
- Plan benefits are standardized by the government, with several plan types that fit different needs and budgets.
- All Medicare Supplement plans are offered to Medicare qualified individuals under the age of 65.

Maximize savings with affordable prescription drug coverage

- Original Medicare doesn't include prescription drug coverage. You can add a prescription drug plan (PDP) from a private insurance company.
- You can purchase a PDP by itself or with a Medicare Supplement plan.
- Most Medicare Advantage plans include prescription coverage.
- PDP plans cover generic and brand-name drugs.

^{*}Once enrolled into your Medicare Supplement insurance plan, your coverage is guaranteed for the life of the plan with only two exceptions/ restrictions: nonpayment of premiums and material misrepresentation.



Start by completing this quick checklist

Understanding your Medicare options can be challenging. That's why we developed this simple tool to help you evaluate your needs and make an informed decision. We make it easy to get the affordable, quality coverage you deserve. Here's how:

- Complete the checklist at right
- Review your results to see which coverage type may be best for you
- 3 Call us to get answers to your questions

Check the box in each row that best describes your preference:

Medicare Advantage	Medicare Supplement
☐ I don't mind seeing doctors and specialists within a network to maximize my savings	☐ I'd like the freedom to choose any doctor or specialist
l'd like an all-in-one plan that has Original Medicare benefits plus more	l'd like the flexibility to choose from a portfolio of plans designed to supplement Original Medicare
☐ I don't mind having copayments/ coinsurance for medical services	l'm looking for a plan with no copayments
☐ I want coverage for emergency care worldwide	I'd prefer the option to choose whether or not I have coverage outside the U.S.
☐ I want a plan that includes prescription drug coverage	having separate prescription drug coverage

Let's find the best plan for you

If this brings up any questions you're not sure how to answer, call us. We can guide you through your options at no cost or obligation.

Answers to questions about Medicare

Q. Will Medicare cover all my medical expenses?

A. No. Original Medicare covers some basic medical expenses, but not all. To help you fill the gaps in coverage, you can choose among a range of plans from private insurance companies.

Q. Will Medicare cover my prescription drugs?

A. Original Medicare (Parts A and B) does not cover prescription drugs. However, private insurance companies help cover the costs of generic and brand name drugs through prescription drug plans (Part D) and some Medicare Advantage plans (Part C).

Q. Can I keep my doctor when I'm on Medicare?

A. With a Medicare Supplement plan, you can see any Medicare-approved doctor or hospital. With a Medicare Advantage plan, you can use any doctor who accepts Medicare in your plan's network.

Q. When can I enroll in Medicare?

A. You are eligible to enroll in Medicare beginning three months before your 65th birthday.

Q. When will my coverage start?

A. If you enroll as soon as you're eligible, your coverage will begin as early as the first day of your birthday month.



Anthem Blue Cross and Blue Shield is a Medicare Advantage Organization with a Medicare contract. Enrollment in Anthem Blue Cross and Blue Shield 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.

Medicare Supplement: Not connected with or endorsed by the U.S. Government or the federal Medicare program. The policy form numbers are: WPPLANAM(09)-NH; WPPLANFM(09)-NH and WPPLANNM(09)-NH. The purpose of this communication is educational.

This information is available for free in other languages. Please call our customer service number at 1-844-840-8001 (TTY: 711), 8 a.m. to 8 p.m., seven days a week (October 1 – February 14), Monday to Friday (February 15 – September 30) (except holidays).

Anthem Blue Cross and Blue Shield is the trade name of Anthem Health Plans of New Hampshire, Inc. HMO plans are administered by Anthem Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plan, Inc. Independent licensees of the Blue Cross and Blue Shield Association. ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association.

5 things to look for in your health insurance company







- **Construction**Knowledgeable Medicare experts to provide answers and guidance
- Experience you can rely on ... look for a trusted provider with many years of providing health care solutions

