

**We've reimagined our Medicare Advantage plans so that you get more with Arkansas Blue Medicare.**

 Healthy Blue Rewards	You take care of your health, and we take care of you. When you complete select healthcare activities like getting your annual wellness visit or a flu shot, we'll send you gift card rewards. You can earn up to \$235 in rewards in 2021.
 Comprehensive hearing benefits	You'll receive expanded hearing benefits in addition to the standard, preventive hearing benefits covered by Original Medicare. See the Summary of Benefits to learn more.
 Comprehensive dental benefits	You get comprehensive dental benefits that go far beyond the standard, preventive dental benefits covered by Original Medicare. See the Summary of Benefits to learn more.
 Comprehensive vision benefits	You'll also get expanded vision benefits in addition to the standard, preventive vision benefits covered by Original Medicare. See the Summary of Benefits to learn more.
 Nurse24	Arkansas Blue Medicare members get access to the Nurse24 nurse line, which gives you access to a registered nurse 24 hours a day, 7 days a week, 365 days a year. Nurses can provide information on home treatment of minor illnesses and injuries, how to prepare for doctor visits, understanding your prescription drugs and much more.
 Meal benefit	We offer a meal benefit following an inpatient stay at a hospital or nursing facility.
 SilverSneakers® fitness program	You get a basic fitness center membership, including fitness classes, with no additional cost to you.
 My Blueprint	As an Arkansas Blue Medicare member, you get access to My Blueprint, our digital member portal. With My Blueprint you can view claims information, find a doctor, view policy information, find a pharmacy or check prescription drug costs and access your SilverSneakers account.
 The Wire	Sign up for the Wire, and we'll send you text messages that link you to your own personalized member feed. We'll tell you about cost-saving methods, preventive reminders, way to maximize your benefits and much more. It's secure, HIPAA-compliant and there's nothing to download.

Available in these Arkansas counties:

**Benton | Carroll | Crawford | Madison | Sebastian | Washington**

Not available in all counties. Arkansas Blue Medicare is an affiliate of Arkansas Blue Cross and Blue Shield. Arkansas Blue Medicare offers PPO plans with Medicare contracts. Enrollment in Arkansas Blue Medicare depends on contract renewal. SilverSneakers® is a registered trademark of Tivity Health. Tivity Health is an independent company contracted with Arkansas Blue Medicare to provide a fitness benefit to our members. Arkansas Blue Cross and Blue Shield is the trade name of USABLE Mutual Insurance Company, an Independent Licensee of the Blue Cross and Blue Shield Association. © 2020 USABLE Mutual Insurance Company. All rights reserved.



**2021 Benefits at a Glance**  
BlueMedicare Advantage PPO Plans



**SALES KIT A**



H3554\_2021\_BAAG\_SKA\_M

- ✓ Low copays and no annual deductible
- ✓ No referrals to see in-network doctors
- ✓ In-network coverage that travels with you
- ✓ Comprehensive dental, vision, hearing and prescription drug coverage
- ✓ Quarterly allowance for Medicare-approved over-the-counter products
- ✓ Receive select insulin at a stable, predictable copay of \$35 for a 30 day supply

Plan Benefits	BlueMedicare Value Choice PPO	BlueMedicare Premier Choice PPO	00N Costs
Monthly premium	\$29	\$49	Not applicable
Annual medical deductible	\$0	\$0	Not applicable
Out-of-pocket maximum	\$6,700	\$6,500	\$11,300
Primary care provider visits	\$10 copay	\$5 copay	\$20-\$25 copay
Specialist visits	\$45 copay	\$40 copay	40% of the cost
Virtual health	\$0 copay for PCP and urgent care visits	\$0 copay for PCP and urgent care visits	Not covered
Inpatient hospital daily copay	Days 1-5: \$360; days 6-90: \$0	Days 1-5: \$340; days 6-90: \$0	40% of the cost
Worldwide emergency care	20% of the cost; \$15,000 annual limit	20% of the cost; \$15,000 annual limit	20% of the cost; \$15,000 annual limit
Eye exam	\$0 - \$40 copay, depending on service	\$0 - \$40 copay, depending on service	40-50% of the cost
Eyewear	Coverage for lenses and frames (up to \$150 allowance every other year); for more information, see the Summary of Benefits	Coverage for lenses and frames (up to \$200 allowance every other year); for more information, see the Summary of Benefits	50% of the cost
Dental services	\$45 copay	\$45 copay	40% of the cost
Comprehensive dental services	Coverage for basic (fillings and extractions) and major (root canals, crowns and oral surgery) dental services; for more information, see the Summary of Benefits	Coverage for basic (fillings and extractions) and major (root canals, crowns and oral surgery) dental services; for more information, see the Summary of Benefits	50% of the cost
Hearing exam	\$40 copay for Medicare-covered services	\$40 copay for Medicare-covered services	40% of the cost
Hearing aids	Up to \$1,000 allowance for the cost of 2 non-implantable hearing aids every 3 years; for more information, see the Summary of Benefits	Up to \$1,500 allowance for the cost of 2 non-implantable hearing aids every 3 years; for more information, see the Summary of Benefits	Not covered
Fitness membership	\$0 SilverSneakers® fitness program membership	\$0 SilverSneakers® fitness program membership	Not covered
Over-the-counter benefit	\$25 allowance per quarter	\$25 allowance per quarter	Not covered

Prescription Drug Coverage				
BlueMedicare Value Choice PPO	Annual pharmacy deductible \$250 for Tiers 3, 4 and 5			
	Retail		Mail order	
	30-day supply	Up to 100-day supply	30-day supply	Up to 100-day supply
Tier 1: Preferred generic	\$3	\$6	\$3	\$0
Tier 2: Generic	\$13	\$26	\$13	\$0
Tier 3: Preferred brand	\$47	\$94	\$47	\$94
Tier 4: Non-Preferred drug	50%	50%	50%	50%
Tier 5: Specialty tier	28%	28%	28%	28%
Tier 6: Select care drugs tier	\$0	\$0	\$0	\$0
BlueMedicare Premier Choice PPO	Annual pharmacy deductible \$195 for Tiers 3, 4 and 5			
	Retail		Mail order	
	30-day supply	Up to 100-day supply	30-day supply	Up to 100-day supply
Tier 1: Preferred generic	\$3	\$6	\$3	\$0
Tier 2: Generic	\$10	\$20	\$10	\$0
Tier 3: Preferred brand	\$47	\$141	\$47	\$141
Tier 4: Non-Preferred drug	\$100	\$300	\$100	\$300
Tier 5: Specialty tier	29%	29%	29%	29%
Tier 6: Select care drugs tier	\$0	\$0	\$0	\$0
<b>Coverage periods</b>				
Initial coverage stage	You remain in this stage until your total yearly drug costs (total drug costs paid by you and our plan) reach \$4,130			
Coverage gap stage	Tier 6: you pay the same copays in the initial coverage stage All other Tiers: you pay 25% of the cost			
Catastrophic coverage stage	After your yearly out-of-pocket drug costs reach \$6,550, you pay the greater of: 5% of the cost, or \$3.70 copay for generic drugs and \$9.20 copay for all other drugs			

**Want to learn more?**

Call 855-591-9794 | Visit [arkbluemedicare.com](https://arkbluemedicare.com)