



South Carolina

2025 BlueCare[®] Plans

Medicare Supplement



Most comprehensive coverage available!



12-Month Rate Guarantee

Award-Winning Customer Service

Option to Add Dental Coverage

It's Time for Medicare

Medicare offers important coverage for medical services and hospitalization. Medicare only covers approximately 80 percent of your medical costs, leaving you to cover the rest. Many choose a Medicare Supplement plan to help fill the financial gaps that Medicare doesn't cover.

Five things you should know about Medicare Supplement plans:

1

They work with Medicare Part A and Part B.



Hospital Insurance
Part A



Medical Insurance
Part B

2

They help pay most of the out-of-pocket expenses Medicare alone doesn't pay.

3

Once you have Medicare Part A and Part B, you can apply for a Medicare Supplement plan.

The best time to apply is during your initial enrollment period (IEP) *with no health questions*.



3 Months Before

65th Birthday Month

3 Months After

Plan to retire after 65?

Don't worry: You can qualify for a special election period and can get coverage if you have Medicare Part A and Part B.

4

These plans go with you when you travel within the United States.
Some plans even cover emergencies that occur overseas.

5

For prescription drug coverage, you can add a Medicare prescription drug plan, also known as Medicare Part D.

Premium Savings & Plan Flexibility

Save up to 41% on what you spend per month:

We offer special discounts on what you pay for your health insurance each month:

- **Age-In Discount** — When you turn 65 or retire and are new to Medicare
- **Non-Tobacco Discount**
- **Household Discount** — Available when a Medicare Supplement member lives at the same address as another BlueCross member (in South Carolina or out of state) or a BlueChoice® HealthPlan of South Carolina member
- **Monthly Bank Draft Discount** — Savings of time and money when you sign up to have your premium drafted automatically from your bank account

You're not locked in with Blue. Special Offer for BlueCross Medicare Supplement Members!

You can choose any plan now and switch to another BlueCross Medicare Supplement plan later with no health questions asked! This gives you flexibility to change your plan if your health care needs change in the future. Many insurance companies require you to pass health questions if you move to a plan that offers more coverage after you first become Medicare eligible.

New to Blue Discount - available to consumers making the switch to a BlueCross Medicare Supplement plan from another carrier.



FitOn Health

FitOn health gives members access to digital fitness content, fitness studios and gyms. This benefit is for BlueCross medicare supplement members at no additional cost.



How it works:

At the beginning of each month, 30 credits are added to your FitOn Health account.

What are credits?

Credits are tokens you can use for gym memberships, fitness classes or other services offered by FitOn Health. Credits are paid for by BlueCross at no additional cost to you.

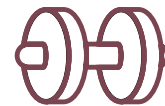
For example:



One class at your local yoga studio might cost 8 credits.



One monthly membership at your local gym with unlimited visits might cost 24 credits



One Fitkit might cost 20 credits

And you get so much more

Your account includes unlimited access to the FitOn digital platform. This includes access to fitness and wellness classes, personalized programs, meal plans with recipes, and expert-led health courses.



FitOn Health is an independent company that offers fitness and wellness services on behalf of BlueCross BlueShield of South Carolina.

2025 BlueCare Medicare Supplement Plans

We can help you find the best plan for you. Please answer the questions below to find your plan.



Are you willing to pay a percentage of your hospital bills for a lower health insurance premium if your maximum out of pocket is limited to no more than \$2,870 per year?

Yes

High-Deductible Plan G (HD G)

is the most affordable supplement option.

HD G offers doctor and hospital choice nationwide. If your hospital and medical bills reach a maximum out of pocket of \$2,870 in a calendar year, BlueCross and Medicare will pay the rest.

No

I want BlueCross to pay 100% of my Part A hospital deductibles and copays.

Plan G, D or N



Would you be willing to pay \$20 copays at the doctor and \$50 copays at the emergency room (ER) for a lower premium?

Yes

Plan N

Plan N offers affordable copays at the doctor and ER. BlueCross will pay 100% of hospital deductibles and copays. BlueCross will also cover 100% of Part B coinsurance for expensive Part B drugs, like chemotherapy.

No

I like the comfort of having an insurance plan that minimizes my medical costs and gives me \$0 copays at doctors and hospitals.

Plan G, D



Most doctors and clinics accept Medicare allowed amounts as full payment. There are a few doctors (approximately 3% in South Carolina) who bill medical charges in excess of the Medicare allowed amount. Are you willing to pay a higher premium for the peace of mind of knowing that BlueCross would pay these excess charges?

Yes

Plan G

Yes, I would like the peace of mind that Plan G gives me. I like knowing that I have the most comprehensive Medicare Supplement plan.

No

Plan D

Plan D is a comprehensive Medicare Supplement plan. I know that it excludes the Part B excess charge, but that is not a coverage I value enough to pay extra for having.

Get more plan details on the next page.

2025 BlueCare Medicare Supplement Plans

the plans shown are the most popular plans for our members.
Speak to your agent about additional plan options.

Lowest-Cost Plan

Plan HD G* Pays

You must meet the \$2,870 out-of-pocket maximum before the plan begins to pay.

	Medicare Pays	Plan G Pays	Plan N † Pays	Plan HD G* Pays
Part A Hospital Insurance — Covered Services				
Hospitalization				
First 60 days for network hospitals	All but \$1,676 deductible and first three pints of blood	Deductible and first three pints of blood	Deductible and first three pints of blood	Deductible and first three pints of blood
61st to 90th day	All but \$419 a day	\$419 a day	\$419 a day	\$419 a day
91st to 150th day	All but \$838 a day	\$838 a day	\$838 a day	\$838 a day
Beyond 150 days	No coverage	100% for 365 days	100% for 365 days	100% for 365 days
Skilled Nursing Care				
First 20 days	100%	0%	0%	0%
21st to 100th day	All but \$209.50 a day	All but \$209.50 a day	All but \$209.50 a day	All but \$209.50 a day
Beyond 100 days	\$0	\$0	\$0	\$0
Hospice Care	100% for hospice care	\$0 for hospice care	\$0 for hospice care	\$0 for hospice care
PART B MEDICAL INSURANCE — COVERED SERVICES				
Medical Expenses	80% of eligible expenses after a \$257 deductible each calendar year	20% after \$257 Part B deductible is met	All after \$257 Part B deductible, with copays	20% after \$257 Part B deductible is met
Medical Charges in Excess of Medicare Allowable Expenses	No coverage	100% of the difference in charges	No coverage	100% of the difference in charges
Emergency Expenses You Incur in a Foreign Country Within the First 60 Days of Travel	No coverage	After \$250 each calendar year, 80% to a lifetime maximum benefit of \$50,000	After \$250 each calendar year, 80% to a lifetime maximum benefit of \$50,000	After \$250 each calendar year, 80% to a lifetime maximum benefit of \$50,000
PARTS A AND B — COVERED SERVICES				
Preventive Care Part B Coinsurance	Generally 80% of Medicare-covered expenses	Covered (20%)	Covered (20%)	Covered (20%)
Out-of-Pocket Maximum	N/A	\$257	\$257 plus \$20 doctor copay and \$50 ER copay	\$2,870
		<i>Best choice if you want the maximum coverage available at any doctor nationwide and \$0 hospital costs</i>	<i>Best choice if you want a lower-cost plan with \$20 doctor copays and \$50 ER copays</i>	<i>Best choice if you want the lowest monthly premium in exchange for having a low yearly plan deductible</i>

† Plan N pays 100 percent of the Part B coinsurance except up to a \$20 copay for office visits and up to \$50 for emergency department visits. If you are admitted to the hospital, the \$50 is waived. *HD G requires a deductible of \$2,870 be met before the plan begins to pay. Once the deductible is met, the plan pays 100 percent for the rest of the calendar year. HD G does not cover the Medicare Part B deductible. However, the payment of the Medicare Part B deductible counts toward meeting the plan deductible.

** If the doctor does not accept the Medicare allowed amount, the member is responsible for the Part B excess costs.

How HD G Works

Part A Deductible = \$1,676
Member pays 100% = \$1,676



Part B Deductible = \$257
Member pays 100% = \$257



Part B Medical Expenses
Original Medicare pays 80%
Member pays 20%



Once the maximum out of pocket of \$2,870 has been met,
HD G pays 100% of coverage services.



Quality Benefit From Truhearing®

Hearing is essential to your health, and you shouldn't have to sacrifice quality for price. With Truhearing* through BlueCross, you don't have to.



- \$0 hearing exam copay
- Member copay of \$699 per aid — a retail savings of up to \$2,000 per hearing aid
- 80 free batteries per aid (9- to 12-month supply), except in rechargeable models



- Unlimited in-person follow-up fittings and adjustment visits in the first year



- Quality hearing aids
- Three-year warranty for loss and damage
- 60-day trial period with no restocking fees



* Members can call TruHearing's customer service team at 855-696-8200 to schedule an appointment with a provider Monday through Friday from 8 a.m. to 8 p.m. They will need to provide their BlueCross ID card number when calling

Plus Endorsement

For only \$20 a month, members get deep savings on glasses, hearing aids and health care essentials.

Vision Services



- \$0 copay for annual eye exam
- \$150 allowance for frames or contacts every 24 months
- FREE lenses included with any frame selection — even progressive, no-line bifocals and trifocals
- Access to VSP** Choice Network
- No waiting periods

Health Care Essentials

Get a \$100 credit to use toward thousands of over-the-counter products, such as these:



- Vitamins and supplements
- Skin care and hair care products, like lotion, aloe and sunscreen
- Allergy, cold and pain relievers
- Oral care, like toothpaste, floss and denture care
- Incontinence care, like briefs and liners
- First-aid items, like bandages
- Home and bathroom safety items

You can order up to \$25 in health care items each quarter from a catalog that's mailed to you.

Hearing Aid Discounts







- \$0 hearing exam
- \$399 copay per aid, compared to \$2,500 without this benefit
- One year of follow-up visits for readjustments
- 80 batteries per aid

**VSP® is an independent company that administers vision benefits on behalf of BlueCross.

You've Enrolled. What Happens Next?

After you enroll, use this checklist to keep track of your new plan.

What you'll receive	Details	How will you receive it?
<p>New Member Welcome Packet</p>	<p>In this packet, you will find helpful tools, cost-saving resources, and important tips and information about your new plan. Think of it as your one-stop source for all you need to know about your plan.</p>	
<p>Member ID Card</p>	<p>Show your plan member ID card along with your red, white and blue Medicare card every time you visit the doctor or hospital.</p> <p>Your red, white and blue card will be mailed from the U.S. government, Centers for Medicare & Medicaid Services.</p>	
<p>Schedule of Benefits</p>	<p>This is your complete description of your coverage and member rights under your new Medicare Supplement plan. This schedule of benefits is included in the New Member Welcome Packet.</p>	
<p>Your Bill</p>	<p>We'll mail you a monthly statement — simply send it back with your monthly premium.</p> <p>If you signed up for monthly electronic fund transfers (EFT) when you enrolled, you won't receive a monthly statement. Instead, we'll automatically deduct your premium from your bank account each month. Another option is recurring debit card payments. The process would be the same as the EFT; however, it will be charged to your debit card and you will not be eligible for the monthly bank draft discount.</p>	

My Health Toolkit[®]

Tools To Manage Members Health

Making the right health care decisions is easy using My Health Toolkit[®]. An online information and customer service center, My Health Toolkit gives members access to important information about plan benefits.

With My Health Toolkit, members get access to:

- Claims, eligibility and benefit information.
- Contact preferences.
- Authorization status.
- ID card — members can save a digital version of their ID card for faster access.
- A treatment cost estimator.
- Set up recurring premium payments.



Members can start making informed health care decisions now by visiting www.SouthCarolinaBlues.com or downloading the free mobile app in the App Store or Google Play.



Scan to watch

Helpful Resources for You

We get it. Medicare is confusing.

There are resources that can help answer your questions or let you know of the services available to you. We are also here to help you, or you can contact your agent or broker for assistance.

Centers for Medicare & Medicaid Services

The official U.S. government site for Medicare provides up-to-date information and resources about Medicare.

Visit www.Medicare.gov or call 800-MEDICARE (800-633-4227) to learn more.

Social Security Administration (SSA)

The SSA is an independent agency of the U.S. federal government that administers Social Security. To find out if you're eligible for Part A and learn how to enroll in Part B and other services, visit www.SSA.gov or call 800-772-1213 (TTY: 800-325-0778).

South Carolina Department on Aging (SCDOA)

The SCDOA provides support and resources for aging citizens and adults with disabilities by working with local and regional organizations to deliver services that help South Carolina's older adults remain independent. Call (toll free) 800-868-9095 or visit www.GetCareSC.com to search for services and providers in your area.



How Much Will Medicare Cost Me?

- **Part A (hospital stays)** does not have a cost for most people. You automatically get this when you turn 65 and sign up for it.
- **Part B (doctor visits)** has a monthly cost that is based on the gross income from your 2023 tax return.

File individual tax return	File joint tax return	File married and separate tax return	You pay each month in 2025
\$106,000 or less	\$212,000 or less	\$106,000 or less	\$185.00
More than \$106,000 up to \$133,000	More than \$212,000 up to \$266,000	Not applicable	\$259.00
More than \$133,000 up to \$167,000	More than \$258,000 up to \$322,000	Not applicable	\$370.00
More than \$167,000 up to \$200,000	More than \$334,000 up to \$400,000	Not applicable	\$480.90
More than \$200,000 and less than \$500,000	More than \$400,000 and less than \$750,000	More than \$106,000 and less than \$394,000	\$559.00
More than \$500,000	More than \$750,000	More than \$394,000	\$628.90

My Medicare Costs

Part A cost	\$0
Part B cost	\$_____ per month (from chart above)
Medicare Supplement cost	\$_____ per month (from your agent)
Prescription drug plan (or Medicare Part D) cost	\$_____ per month (from your agent)

If You Turned 65 on or Before Dec. 31, 2019,

You Can Still Enroll in This Plan.

	Medicare Pays	Plan F* Pays
Part A Hospital Insurance — Covered Services		
Hospitalization		
First 60 days for network hospitals	All but \$1,676 deductible and all but first three pints of blood	Deductible and first three pints of blood
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Emergency Expenses You Incur in a Foreign Country Within the First 60 Days of Travel	No coverage	After \$250 each calendar year, 80% to a lifetime maximum benefit of \$50,000
Part A and B — Covered Services		
Preventive Care Part B Coinsurance	Generally 80% of Medicare covered expenses	Covered (20%)
Out-of-Pocket Maximum	N/A	\$0

*Plan F also has an option called High-Deductible Plan F. The high-deductible plan pays the same benefits as Plan F after you have paid a calendar-year \$2,870 in expenses that would ordinarily be paid by the policy. These expenses include the Medicare deductibles for Part A and Part B but do not include the plan's separate foreign travel emergency deductible.



New for 2025 **Dental Blue**

*Don't forget to add
dental coverage to
your BlueCare Plan!*

*Ask your agent for
more information.*





BCBSSC



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Visit www.SouthCarolinaBlues.com