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# BlueSenior Classic

## GROUP MEDICARE PLAN

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2008 OUTLINE OF COVERAGE



**BlueCross BlueShield  
of Nebraska**

An Independent Licensee of the Blue Cross and Blue Shield Association.

## More Than Half a Century of Experience

For nearly 70 years, Blue Cross and Blue Shield of Nebraska has been an important part of many Nebraskans' lives. Our highest priority when we first began in 1939 — providing quality health care coverage at the most affordable price possible — is still our highest priority today. That hasn't changed.

But some things *have* changed. The health care industry of today is vastly different from the health care industry of half a century ago. The good news is that medical and technological advancements have cured previously fatal conditions, and allowed people to live longer, healthier lives.

But the news isn't all positive, unfortunately. No one has to tell you about the high cost that comes along with medical care today. Medical expenses for even a minor illness can be overwhelming. And a major illness can wipe out years of hard work and planning.

## Now That You're Eligible For Medicare

Your group plan has provided you with valuable protection against the high cost of medical care. Now that you're turning age 65, you need a different kind of protection.

The federal Medicare program pays benefits for a wide variety of services. It's divided into two parts: Part A, which pays for covered hospital services, and Part B, which pays for covered doctor and other medical services.

Medicare only pays a portion of your medical bill, however, and that can result in significant out-of-pocket costs for you. For example, if you need to be hospitalized, Part A benefits are subject to an inpatient deductible. In 2008, that amount is \$1,024. That's a lot of money, and unfortunately, it isn't the only gap left by Medicare.

## Your BlueSenior Classic Plan

Your new **BlueSenior Classic** plan is designed to fill the majority of the gaps Medicare leaves behind. Remember that Part A inpatient deductible that Medicare doesn't pay? Your **BlueSenior Classic** plan will. It will also pay Part A daily coinsurance amounts, and will provide you with up to 365 days of additional Part A hospital coverage after Medicare benefits end.

Medicare Part B services are also covered under your **BlueSenior Classic** plan. It will pay your Part B deductible and coinsurance. It even will pay the difference between what Medicare pays and what your doctor may lawfully collect. This means you will owe nothing on Part B eligible expenses!

This certificate is not a Medicare Supplemental contract. If you are eligible for Medicare, review the *Guide to Health Insurance for People with Medicare*, available from the company.

If you should require skilled nursing facility care, **BlueSenior Classic** will pay the daily coinsurance amounts not paid by Medicare. It also provides benefits for home health care and hospice services, and pays for emergency medical care you might require while traveling outside the United States.

The charts in this brochure provide more details about what Medicare pays, what **BlueSenior Classic** pays, and what you're responsible for. Please review them carefully.

## Conversion Coverage

If this group Medicare contract is terminated by your employer, we will automatically offer you coverage under one of our individual Medicare Supplemental plans. You will not be subject to medical underwriting if we receive your application for conversion coverage within 31 days of the end of your group coverage. Please note: The benefits provided under the conversion coverage may not be the same as those provided under this plan.

## What BlueSenior Classic Does Not Cover

- Services which are not considered a Medicare-eligible expense; or are not covered by Medicare.
- Prescription drugs. (**Note: separate MedicareBlueRx prescription drug coverage is available upon request.**)
- Benefits which would duplicate those provided by Medicare.
- Services which are not specifically listed as covered under your **BlueSenior Classic** plan.
- Services provided prior to the effective date of coverage, or after your contract has been canceled or terminated.
- Services for which you have no obligation to pay. This contract does not pay for charges which are in excess of the amount a doctor can lawfully collect under Medicare.
- Services for an illness or injury for which benefits are provided or are available under any worker's compensation, employer's liability or similar law, or motor vehicle no-fault plan, unless prohibited by law.

## *BlueSenior Classic*

### MEDICARE (PART A) -- HOSPITAL SERVICES -- PER BENEFIT PERIOD

SERVICES	MEDICARE PAYS	BlueSenior Classic PAYS	YOU PAY
<b>HOSPITALIZATION*</b>			
<b>Semiprivate room and board, general nursing, miscellaneous services and supplies.</b>			
First 60 days	All but \$1,024	\$1,024 (Part A deductible)	\$0
61st through 90th day	All but \$256 a day	\$256 a day	\$0
91st day and after: While using 60 lifetime reserve days	All but \$512 a day	\$512 a day	\$0
Once lifetime reserve days are used: 365 additional days	\$0	100% of Medicare-eligible expenses	\$0
Beyond the additional 365 days	\$0	\$0	All costs
<b>SKILLED NURSING FACILITY CARE*</b>			
<b>You must meet Medicare's requirements, including having been in a hospital for at least three days and entered a Medicare-approved facility within 30 days after leaving the hospital.</b>			
First 20 days	All approved amounts	\$0	\$0
21st through 100th day	All but \$128 a day	Up to \$128 a day	\$0
101st day and after	\$0	\$0	All costs
<b>BLOOD</b>			
First 3 pints	\$0	3 pints	\$0
Additional amounts	100%	\$0	\$0
<b>HOSPICE CARE</b>			
<b>Available as long as your doctor certifies you are terminally ill and you elect to receive these services.</b>			
	All but very limited coinsurance for outpatient drugs and inpatient respite care	\$0	Balance

\* A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

# *BlueSenior Classic*

## MEDICARE (PART B) -- MEDICAL SERVICES -- PER CALENDAR YEAR

SERVICES	MEDICARE PAYS	BlueSenior Classic PAYS	YOU PAY
<b>MEDICAL EXPENSES IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TREATMENT</b> such as physician's services, inpatient and outpatient medical and surgical services and supplies, physical and speech therapy, diagnostic tests and durable medical equipment.			
First \$135 of Medicare-approved amounts*	\$0	\$135 (Part B deductible)	\$0
Remainder of Medicare-approved amounts	Generally 80%	20%	\$0
Part B excess charges (above Medicare-approved amounts)	\$0	100%	\$0
<b>BLOOD</b>			
First 3 pints	\$0	All costs	\$0
Next \$135 of Medicare-approved amounts*	\$0	\$135 (Part B deductible)	\$0
Remainder of Medicare-approved amounts	Generally 80%	20%	\$0
<b>CLINICAL LABORATORY SERVICES -- TESTS FOR DIAGNOSTIC SERVICES</b>			
	100%	\$0	\$0
<b>PARTS A AND B HOME HEALTH CARE -- MEDICARE-APPROVED SERVICES</b>			
Medically-necessary skilled care services and medical supplies	100%	\$0	\$0
Durable medical equipment: First \$135 of Medicare-approved amounts*	\$0	\$135 (Part B deductible)	\$0
Remainder of Medicare-approved amounts	Generally 80%	20%	\$0

\* Once you have been billed \$135 of Medicare-approved amounts for covered services (which are noted with an asterisk), your Part B deductible will have been met for the calendar year.

# *BlueSenior Classic*

## OTHER BENEFITS -- NOT COVERED BY MEDICARE

SERVICES	MEDICARE PAYS	BlueSenior Classic PAYS	YOU PAY
<b>FOREIGN TRAVEL -- NOT COVERED BY MEDICARE</b>			
<b>Medically necessary emergency care services beginning during the first 60 days of each trip outside the U.S.A.</b>			
First \$250 each calendar year	\$0	\$135 (Part B deductible)	\$250
Remainder of charges	\$0	80% to a lifetime maximum benefit of \$50,000	20% and amounts over the \$50,000 lifetime maximum

# Questions?

**If you have any questions about your coverage, please call our Customer Service Center.  
A representative will be happy to help you. Our hours are 7:30 a.m. to 6 p.m. Monday through Friday.**

Blue Cross and Blue Shield of Nebraska  
7261 Mercy Road  
P.O. Box 3248  
Omaha, NE 68180-0001  
(402) 390-1820 (Omaha)  
1-800-642-8980 (toll free)  
E-mail: [www.bcbsne.com/contactus](http://www.bcbsne.com/contactus)



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