





Your health. Our mission.

Call 888.532.5324 (TTY:771) to discuss your options

Care management provided by WellSpan Health Capital Blue Cross is an Independent Licensee of the Blue Cross Blue Shield Association Capital Blue Cross and WellSpan Health are collaborating to provide Medicare options that deliver better affordability, ease of use, quality of care, and patient experience. After years of work we are prepared to show additional commitment to our community—to your community—as well as our shared commitment to the future of health care delivery, and your health.

When two trusted names in Pennsylvania healthcare work together, you get Medicare coverage and care that work better for you. **With Capital Blue Cross and WellSpan Health, your health is our mission.**

How do Medicare Advantage plans work?

Also known as Medicare Part C, Medicare Advantage plans like ours provide members with their Medicare Part A and Part B coverage, plus extra benefits that Original Medicare does not provide.

Unlike Original Medicare, with a Capital Blue Cross | WellSpan Health plan, all of your coverage — medical, hospital, prescription drug — is included. Instead of relying on Medicare Parts A and B to cover hospital and medical expenses, and a separate Part D plan for prescription drugs, they are conveniently covered by one simple, comprehensive plan.

How do HMO and PPO plans differ?

With a health maintenance organization (HMO) plan, your Primary Care Physician (PCP) acts as a gatekeeper and advocate for your care, **no referrals required**. With a preferred provider organization (PPO) plan, you have the freedom to see the doctors you want to see, without the need for referrals. Plus, you have access to one of the largest networks of hospitals, physicians, and medical professionals in Central Pennsylvania and the Lehigh Valley, and a national network that has you covered when you are away from home.

Part D prescription drug coverage included

Forget about the expense and hassle of purchasing a separate drug plan. With our plan, your Part D prescription drug coverage is included and there is no Part D deductible to satisfy before your benefits begin.

Extra Benefits to Help You Stay Healthy

What advantages does a Capital Blue Cross | WellSpan Health plan provide?

With affordable monthly premiums, you have the peace of mind, convenience, and value that comes from knowing that you're covered by one comprehensive plan. When you enroll in our plan, you can get:

- No Referrals!
- Flexible debit card with \$25 monthly allowance for over-the-counter drugs and supplies (OTC) to use at participating retailers
- Access to the Visitor Travel/BlueCard[®] Program
- Affordable monthly premiums as low as \$0*
- \$0 PCP and wellness visit copays
- Prescription drug copays as low as \$0
- \$0 prescription drug deductible
- \$0 copay for Virtual Care visits
- Routine hearing exams and up to \$800 hearing aid allowance*
- Routine vision exams with \$125 eyewear allowance every year

- Routine dental coverage and an annual allowance of up to \$2,000 for comprehensive dental services including dentures
- SilverSneakers[®] fitness membership at no additional cost
- Nonemergent routine transportation, up to 24 round trips – plan approved*
- Health education sessions with a certified coach
- \$0 nutritional/dietary benefits up to 24 visits/year
- Medical nutritional counseling at no cost to you
- Member rewards and incentives for completing exams

Easy access to online tools and resources

Get the information you need, when you need it, on **www.CapitalBlueMedicare.com**.

- **Find network providers.** Search for medical, dental, and vision providers and locate SilverSneakers fitness centers.
- Search for network pharmacies and view formularies. Look up prescription costs and learn how to obtain medications, request formulary exceptions, and enroll in our free medication therapy management program for members with chronic diseases.

* Not available with all plans.

BlueCard® and BlueCard Worldwide® are trademarks of the Blue Cross Blue Shield Association.

SilverSneakers[®] is a program of Tivity Health. On behalf of Capital Blue Cross, Tivity Health assists in the administration of this fitness program. Tivity Health is an independent company.

Capital Blue Cross Network Sharing Travel Benefit

Members are covered in-network when traveling outside of the Capital Blue Cross 21-county service area.

In addition to standard network and out-of-network benefits, all Capital Blue Cross | WellSpan Health PPO members have access to the Blue Cross Blue Shield Association Visitor and Travel Program also known as the BlueCard Program. When traveling outside of Capital Blue Cross' 21 county provider network, our PPO members may visit any participating Blue Cross and/or Blue Shield Medicare Advantage PPO provider in any geographic area where the Visitor and Travel Program is offered. Members will pay the same in network cost-share amount for services received from BlueCard provider outside our 21-county service area.



Does not participate in the Visitor / Travel Network Sharing program



SilverSneakers

17,000+ fitness locations

This fitness benefit includes fitness facility membership or home-based programs, as well as web services and quarterly newsletters. The fitness facility membership includes orientation to the facility and equipment.

From gyms to community centers, there are more participating fitness locations available in the U.S. to our members than there are Starbucks.

Fitness classes designed for those 65+ in age

Whether indoors or outdoors, beginner or experienced, we have classes fit for everyone. All SilverSneakers classes are led by our supportive instructors.

On-demand workouts

Prefer exercising at home? Use your SilverSneakers membership to login to our on-demand video library of classes, workouts, and how-to videos.

No additional cost to you*

As a member, you get all of the location access, SilverSneakers classes, on-demand videos, and perks of membership at no additional cost.

SilverSneakers® is a health and fitness program designed for adults 65+.

The SilverSneakers Experience

	A fitness benefit with access to thousands of fitness locations nationwide with various amenities	Guidance from dedicated fitness staff
\bigcirc	The ability to enroll at multiple locations at any time	50+ types of group activities and classes offered outside the traditional gym setting
	Online resources (fitness location directory, health and nutrition tips, SilverSneakers On-Demand [™] video workouts and more)	Social connections through events such as shared meals, holiday celebrations and class socials
\sum	Signature SilverSneakers classes designed for all fitness levels	SilverSneakers GO [™] mobile app that gives members adjustable workout plans, location finder and more





Getting active just got easier with SilverSneakers® GO, the first fitness app designed just for you.



Over-the-Counter Drugs and Pharmacy Supplies

Save time and money with over-the-counter (OTC) supplies

All Capital Blue Cross | WellSpan Health members receive a flexible debit card that has \$25 towards OTC drugs and supplies replenished every month. That's a savings of at least \$300 over the course of a year![†] And Capital Blue Cross takes the hassle out by giving you multiple ways to get your OTC drugs and supplies. You can go to a participating retail store* or use mail order and have the items shipped directly to your home at no additional cost!

The OTC Program offers a convenient way to get over-the-counter (OTC) health and wellness products, up \$25 every month – from your favorite retail location or delivered straight to your home each month all with the convenience of one checkout!

Advantages of Using the Capital Blue Cross | WellSpan Health OTC Program!

- Save money Members can save \$25 each month on over-the-counter drugs and supplies
- Easy access OTC items can be purchased at participating retailers, or orders are delivered straight to our member's homes
- Flexibility Swipe your card during checkout and your funds will only apply to the applicable OTC items, or choose mail order and have items delivered straight to your door
- * Qualifying retailers: Walmart, Rite Aid, CVS, and Walgreens.
- † Based on a 12-month enrollment.
- Ability to submit one mail order per month. Any unused balance does not roll over to the next month.



Members can use their OTC benefit allowance to purchase OTC health and wellness products including:

- Pain Relief
- First-aid supplies
- Aspirin
- Dental supplies
- Vitamins and supplements
- Cough, cold, and allergy medicine
- Incontinence products

- Leg and Foot care products
- Mobility support
- Bath and Safety products
- Digestion/Laxatives/Antacids
- Medication Management Items
- Ear and Eye Care
- Miscellaneous items such as toothbrushes, cotton swabs, and lotions

Note: Please check with your doctor or medical provider before taking any OTC medicine.

Capital Blue Cross Virtual Care

See a doctor anytime, anywhere, with Capital Blue Cross Virtual Care.

With Capital Blue Cross Virtual Care, doctors can diagnose common illnesses and send prescriptions straight to your pharmacy. Capital Blue Cross Virtual Care is a covered benefit on most health plans from Capital Blue Cross and it even includes behavioral health services and nutrition counseling.

Convenient Care — Everywhere. Unlimited \$0 Visits.

	Medical	Counseling	Psychiatry	Nutrition Counseling
Doctors and counselors	Capital Blue Cross Virtual Care providers are licensed doctors that have an average of 15 years of experience.	Capital Blue Cross Virtual Care counseling services are provided by licensed psychologists and master's level counselors.	Capital Blue Cross Virtual Care psychiatry services are provided by board-certified psychiatrists and neurologists, who provide a thorough assessment and follow-up visits for medication management.	Capital Blue Cross Virtual Care nutrition counseling services are provided by dietitians certified in telehealth, who provide nutrition advice and diet plans based on personal health needs.
Treatment for conditions, such as:	 Abdominal pain Bronchitis and other respiratory infections Flu Pink eye Strep throat 	 Anxiety Bereavement and grief Depression LGBTQ counseling Trauma 	 Anxiety disorders Anorexia/ bulimia Bipolar disorder Obsessive compulsive disorder Post traumatic stress disorder 	 Diabetes Digestive disorders Food allergies High cholesterol Meal planning Pregnancy diets Weight loss
Availability	24/7 (including weekends and holidays) through the mobile app or website. No appointment necessary.	7 a.m. – 11 p.m. ET, 7 days a week, by appointment only (same day appointment is possible).	Patients can typically get appointments within 14 days, and a psychiatrist will schedule follow-up visits as needed.	Patients can schedule an appointment with their provider of choice. Appointments are available 7 days a week, including evenings. Follow-up appointments are available as necessary.

Three ways to sign up:

1. Download the free Capital Blue Cross Virtual Care app

2. Visit virtualcarecbc.com

3. Call the Virtual Care Member Services number.

WellSpan Health Video Visits

Connect with your WellSpan Health doctor's office to get the care you need. This convenient Video Visit service lets you speak live with a local doctor for non-emergency conditions via your computer, tablet or smart phone.

Enjoy \$0 PCP visits without ever leaving your home!

Treatment available for acute and routine care needs, such as:

- Anxiety/depression/mental health
- Arthritis
- Bug bites/rash/skin conditions
- Cough/Sore Throat
- Erectile Dysfunction
- Fatigue
- GERD/reflux
- Headache
- High blood pressure, cholesterol, or diabetes follow-up
- Medication management
- Test and lab result review
- Sinus Pressure/Pain
- Seasonal Allergies
- Smoking Cessation
- Urinary Tract Infections

How To Schedule a Video Visit

- 1. Log-in to your MyWellSpan Account at **MyWellSpan.org** from your computer, tablet, or smart phone. If you don't have an account, visit **MyWellSpan.org** to sign up in 3 easy steps!
- 2. Follow the easy step-by-step instructions at **WellSpan.org/VideoVisits** to schedule and prepare for your Video Visit appointment with eCheckin.
- 3. Launch your Video Visit from **MyWellSpan.org** or the WellSpan Health mobile app.

Due to state regulations, patients must participate in the Video Visit from a location within the State of Pennsylvania.





Transportation Services

Capital Blue Cross understands members may need assistance getting to the doctor or other medical appointments. Our plan provides round-trip transportation services for medically necessary services^{*}. Covered transportation may include car services such as Uber and Lyft, ambulance or other means of medical transport, depending on your medical needs.

Our plan provides transportation services for up to 24 round trips to plan-approved medical locations every year at \$0 cost to you[†].

Plan approved locations include:

- Doctor's offices
- Outpatient facilities/centers
- Clinics
- Other healthcare related locations

Extra Dental Benefits Provided Just for You

Our plans offer convenient, affordable, and reliable dental benefits. Plans include two routine dental visit each calendar year that covers:

- Bitewing X-rays (set of two)
- Cleaning
- Oral Exams

Additionally, we provide a \$2,000 annual allowance for Comprehensive Dental services that covers[‡]:

- Palliative Emergency Treatment
- Periapical X-rays
- Amalgam and Composite Fillings
- Simple (Non Surgical) Extractions[§]
- Endodontics

- Major Restorative (Crowns, Inlays, Onlays)
- Prosthodontics
- Adjustments and Repairs of Prosthetics

* Transportation services must be approved two days in advance and arranged by the plan utilizing plan contracted transportation vendor.

- † Not available on all plans.
- \$50% coinsurance. \$2,000 annual allowance is a combined in- and out-of-network maximum.
- § Coverage for simple extractions (Non surgical extractions) are typically performed by a general dentist. Surgical extractions are typically performed by an oral surgeon and are not covered by our plan.

Excludes coverage for Cosmetic Procedures (such as veneers, bleaching, and teeth straightening), Dental Implants, Periodontics, Other Oral/Maxillofacial Surgery and any other services not listed as covered.

Vision Benefits

Medicare Part B will pay for a yearly eye exam for diabetic retinopathy. It will also help pay for corrective lenses following certain cataract surgeries. Generally, it doesn't cover routine vision care or glasses.

Our plans offer the same coverage as Original Medicare, and additional benefits that cover innetwork vision care like eye exams, glasses, and contacts at no additional cost to you!

Our plans offer affordable vision benefits that include:

- Routine eye examination once every calendar year
- \$0 Cost for Standard Prescription Eyeglass lenses!
 - ✓ Single vision lenses
 ✓ Bifocals

Trifocals

- \$125 annual plan allowance for contact lenses every year
 - ✓ Conventional✓ Disposable

• \$125 annual plan allowance for eyeglass frames every year

As a PPO member, you can pick any vision provider. If you choose an out-of-network doctor, you may pay more for your services. Our HMO members must choose a vision provider from our broad network.

Extra options for lenses such as but not limited to Polycarbonate, transitions, no line progressive bifocals and trifocals are not covered. **Note:** Payment will be made for either frames or contact lenses within a benefit period. Payment will not be made for both.

Worried About Hearing Loss?

You're not alone. We got you covered! In fact, hearing loss is pretty common as we age. About onethird of people between the ages of 65 and 74 experience it; for those 75 and over, about half have difficulty hearing.

Hearing changes as we age and has a profound impact on our quality of life. It's important to protect your hearing and even more important to know when it is time to seek help for hearing loss.

Our plan wants to ensure you have the hearing coverage you need. With our plans, you'll receive an annual^{*} Routine Hearing Exam at \$0 cost to you and up to an \$800 allowance[†] for hearing aids every three years.

Program features

- \$0 hearing aid fitting and evaluations*
- Annual hearing test with no out-ofpocket cost
- Access to a nationwide network of 4,000+ trusted providers
- Brand-name hearing aids available
 from all major manufacturers
- Concierge services by dedicated
 Member Services
- Experience Advisors

- Three follow-up visits at \$0 cost for in-network*
- Three year manufacturer's repair warranty
- Three years of batteries included
- One-time replacement coverage for lost, stolen, or damaged hearing aids
- 12- and 18-month financing options available through contracted vendor
- Available with 0% APR, no money down

* 50% out-of-network costs will apply.

†Combined for in- and out-of-network costs. Not available on all plans.

Health Education and Coaching

Health coaches provide personalized expert advice and coaching to support members. Our health coaches have backgrounds in a variety of health fields and are trained and certified in health coaching. **Three 30-minute sessions are provided at \$0 cost**.

From reducing stress to eating better and exercising regularly, our health coaches can help you reach your health goals.

Medical Nutritional Therapy

The prevalence of chronic, inactivity-related diseases is on the rise. According to the Centers for Disease Control and Prevention, approximately one in two people in the U.S. has at least one chronic health condition-such as heart disease, cancer, hypertension, diabetes or obesity—and one in four adults has two or more chronic health conditions.

Capital Blue Cross is committed to empowering our members to adopt and sustain healthy lifestyle behaviors that prevent, mitigate and even reverse chronic diseases.

Medical Nutrition Therapy (MNT) can help you better manage certain conditions through dietary counseling and changes to your eating habits.

Our plan provides you with an opportunity to see registered dietitians or other nutrition specialists at no additional costs to you or visit maximum for the following conditions:

Conditions include but are not limited to: diabetes, renal disease, or individuals who have received a kidney transplant in the last three years, digestive disorders, food allergies, high cholesterol. Meal-planning and weight loss consultations are also provided as an option.

Counseling services are also available through Capital Blue Cross Virtual Care by phone or web.

Nutritional/Dietary Benefits

Nutritional/Dietary Benefits are available to those who want to learn how to eat healthier, decrease the risk of heart disease, cancer, other chronic diseases and help with weight loss and weight management.

Nutritional/dietary benefits are provided by a registered dietitian and can help with the following:

- Getting control of emotional eating.
- Balance mood and feelings of well-being.
- Manage overweight/obesity issues and eating disorders
- Lower body weight, which reduces the risk for many chronic diseases associated with obesity.
- Diabetes Education improve blood glucose levels and control high blood pressure.

Our plan provides you with an opportunity to have 24 visits **at \$0 cost to you*** to see a registered dietitian.

Counseling services are also available through Capital Blue Cross Virtual Care by phone or web.

Your Rewards

Capital Blue Cross offers a rewards program that provides a gift card for the completion of any of the services listed below. Members can receive between a \$5–\$50 gift card per activity for:

- Breast cancer screening^{*}
- Colorectal cancer screening*
- Bone density testing^{*}
- Diabetes eye exam^{*}
- Diabetes A1c testing (two per year)*
- Reducing the risk of falling

- Receiving a flu shot
- Monitoring physical activity
- Annual wellness visit
- Bladder Control
- Statin Medications^{*}

Members can earn up to \$255 annually for completing the services above.

Predictable Out-Of-Pocket Cost for Most Out-Of-Network Medical Services

PPO members can travel with peace of mind knowing their medical cost are predictable and affordable. Members will pay in-network cost sharing for most out-of-network services making out-of-network cost predictable no matter which provider you see.



*Activity may have restrictions or require a prior authorization.

† Within the United States and Puerto Rico.

Choose from Three Plan Options for 2022

For more details, refer to the Capital Blue Cross | WellSpan Health Summary of Benefits or visit CapitalBlueMedicare.com.

	Advantage PPO		Advantage Plus PPO		Inspire HMO
	In Network	Out of Network	In Network	Out of Network	In Network
Monthly Premium	\$	0	\$	19	\$0
Deductible	\$0		\$0		NA
Primary Care Physician Office Visits - in person and telehealth	\$0	\$5	\$0	\$5	\$0
Specialty Office Visit - in person and telehealth	\$40	\$40	\$30	\$30	\$30
Urgent Care	\$50	\$50	\$50	\$50	\$35
Inpatient Hospital Stay	\$300 copay per stay	\$300 copay per stay	\$275 copay per stay	\$275 copay per stay	\$190 copay per stay
Ambulatory Surgical Center (ASC)	\$300 copay for surgery	\$300 copay for surgery	\$225 copay for surgery	\$225 copay for surgery	\$250 copay for surgery
Outpatient Surgery	\$315 copay for surgery	\$315 copay for surgery	\$275 copay for surgery	\$275 copay for surgery	\$300 copay for surgery
Emergency Care - copayment waived if admitted	\$90 copay	\$90 copay	\$90 copay	\$90 copay	\$90 copay
Labs	\$0 routine monitoring \$25 all other	20% coinsurance	\$0 routine monitoring \$25 all other	20% coinsurance	\$0 routine monitoring \$25 all other
X-rays	\$25 copay	20% coinsurance	\$50 copay	20% coinsurance	\$50 copay
Diagnostic Radiology - not including x-rays	\$250 copay	20% coinsurance	\$205 copay	20% coinsurance	\$250 copay
Diabetes Self-Monitoring Training and Supplies	\$0 copay	20% coinsurance	\$0 copay	20% coinsurance	\$0 copay
	\$0 copay	50% coinsurance	\$0 copay	50% coinsurance	\$0 copay
Hearing Services	For 1 routine hearing exam/year, 1 fitting every 3 years				
Hearing Services	\$400 hearing aid allowance both ears combined every 3 years		\$800 hearing aid allowance both ears combined every 3 years		\$800 hearing aid allowance both ears combined every 3 years
	\$0 copay	50% coinsurance	\$0 copay	50% coinsurance	\$0 copay
Routine Vision Services	1 routine examper year				
Eyewear (eyeglass lens, eyeglass frame, or contacts)*	\$125 max allowance every year for eyeglasses frames or contact lenses				
	\$0 copay	50% coinsurance	\$0 copay	50% coinsurance	\$0 copay
Routine Dental Services	Includes oral exam, and set bitewing x-rays - 2 visits per year				
	\$2,000 maximum allowance/year				
Comprehensive Dental Services	50% coinsurance includes: teeth fillings - amalgam and composite, simple extractions only restorative services: endodontics (crowns, inlays, onlays), prosthodontics (dentures, bridges, partials), palliative emergency treatment, adjustments and repairs of prosthetics				
SilverSneakers® Fitness Benefit ⁺	\$0 copay				
Durable Medical Equipment	20% coinsurance				
Over-the-counter ^{tt}	\$30 OTC allowance per month Retail or Mail-order				
Transportation Benefit	\$0 copay Limit 8 trips per calendar year Limit 24 trips per calendar year Limit 12 trips per calendar year				
Medical Nutritional Therapy		50% coinsurance	\$0 copay	50% coinsurance	Limit 12 trips per calendar year \$0 copay
Nutritional/Dietary Benefit	\$0 copay	50% coinsurance	. ,	50% coinsurance	
Virtual Care	\$0 copay		\$0 copay		\$0 copay
VIILUAI UALE		ຈັບ copay, un	limited visits with Cap	ILAI DIUE CIOSS VII (UAI	Udie

* Members pay the balance of charges after a \$125 routine vision allowance is applied.

Prescription Drug Benefits (Initial Coverage)

Prescription Drug Benefits	\$0 Deductible			
Tier 1 - Preferred Generic Drugs	30 day - Prf \$8 / Stnd \$15 60 day - Prf \$16 / Stnd \$30 90 day - Prf \$24 / Stnd \$45	30 day - Prf \$0 / Stnd \$15 60 day - Prf \$0 / Stnd \$30 90 day - Prf \$0 / Stnd \$45	30 day - Prf \$0 / Stnd \$7 60 day - Prf \$0 / Stnd \$14 90 day - Prf \$0 / Stnd \$21	
Tier 2 - Generic Drugs	30 day - Prf \$12 / Stnd \$20 60 day - Prf \$24 / Stnd \$40 90 day - Prf \$36 / Stnd \$60	30 day - Prf \$0 / Stnd \$20 60 day - Prf \$0 / Stnd \$40 90 day - Prf \$0/ Stnd \$60	30 day - Prf \$5 / Stnd \$15 60 day - Prf \$10 / Stnd \$30 90 day - Prf \$15 / Stnd \$45	
Tier 3 - Preferred Brand Drugs	30 day - Prf \$40 / Stnd \$47, 60 day - Prf \$80 / Stnd \$94, 90 day - Prf \$120 / Stnd \$141			
Tier 4 - Non-Preferred Drugs	30 day - Prf \$93 / Stnd \$100, 60 day - Prf \$186 / Stnd \$200, 90 day - Prf \$279 / Stnd \$300			
Tier 5 - Specialty Drugs	30 day ONLY - 33% coins			
Tier 6 - Select Care Drugs	30 day - Prf \$0 / Stnd \$7, 60 day - Prf \$0 / Stnd \$14, 90 day - Prf \$0 / Stnd \$21			
Part D Senior Savings Model - Insulin	30 day - Prf \$5 / Stnd \$5, 60 day - Prf \$10 / Stnd \$10, 90 day - Prf \$15 / Stnd \$15			
Initial Coverage Limit	\$4,430			
Coverage Gap (Donut Hole)				
Generics	25% coinsurance			
Brand Drugs	25% coinsurance			
True Out-of-Pocket (TrOOP)	\$7,050			
Catastrophic Coverage	Greater of: \$3.95 - generic/multi source, \$9.85 - all other drugs, 5% coinsurance			

Copays above are for a 30-, 60-, and 90-day supply of drugs purchased from a Preferred and Standard Retail Pharmacy. Cost share is always lower when utilizing a Preferred Retail Pharmacy.

Capital Blue Cross | WellSpan Health plans offer additional coverage for select insulins

Members will be able to obtain select insulins for a \$5 copay for a 30-day supply. This coverage is available in the Initial Coverage Limit (ICL), and Coverage Gap stages.

To find out which drugs are select insulins, review the most recent drug list on our website at **CapitalBlueMedicare.com**. If you have questions about the drug list, you can also call Member Services.

Insulins that are listed on our drug list (formulary) qualify for the select insulin program. If the insulin is not on the drug list it is not covered by the plan or included as a select insulin.

- * Payment will be made for either frames or contact lenses within a benefit period. Payment will not be made for both.
- [†] Must use a SilverSneakers facility.
- ^{††} At qualifying retailers: Walmart, Rite Aid, CVS, and Walgreens.

How to Enroll

You may enroll in Capital Blue Cross | WellSpan Health Medicare Advantage only during certain times of the year. Please contact us for details.

There are four ways to enroll:

- 1. Complete the enclosed enrollment form and mail in the included reply envelope. Do not send money with your form.
- 2. Call a sales person toll-free at 888.532.5324 (TTY: 711) 8 a.m. to 6 p.m., Monday through Friday (with extended hours October 1 through December 7).
- 3. Enroll at CapitalBlueMedicare.com.
- 4. Visit a Capital Blue Cross Connect health and wellness center. See page 19 or go to **CapitalBlueCrossConnect.com** for locations.

You will receive a letter acknowledging receipt of your enrollment form. Upon acceptance, you will receive separate mailings with your membership card, new member information, and first premium bill.* **Note:** HMO enrollees must choose a PCP from the Capital Blue Cross Medicare HMO Provider Directory, at **CapitalBlueMedicare.com**.

Important Enrollment Information You Need to Know

Who is eligible:

There are two basic requirements to be eligible to enroll in a Capital Blue Cross | WellSpan Health Medicare plan:

- You must permanently reside in Adams, Cumberland, Franklin, Lancaster, Lebanon, or York county.
- You must be enrolled in Medicare Part B (Medical Insurance) and be entitled to Medicare Part A (Hospital Insurance). If you have Medicare Part B only, you must purchase Part A through Social Security. You must continue to pay your Part B premium.

Additional Information:

Click to view Star Ratings.

Capital Blue Cross Connect health and wellness centers



Find Your Healthy Place

At our Capital Blue Cross Connect health and wellness centers, you can get in-person service to help answer your health plan questions and so much more!

- Fitness classes for all ages
- · Wellness workshops, health fairs, and art receptions
- · Senior social events with crafts, bingo, and other fun activities
- Healthy food and beverages at the in-store café*
- A fun Kids Zone great for the grandkids that encourages healthy habits

Locations

Hampden Marketplace Enola, PA **The Promenade Shops at Saucon Valley** Center Valley, PA WellSpan Health Campus Chambersburg, PA

*The Healthy You Café is brought to you by the HeITHe⁻ U Café, LLC, an independent company.

Capital Blue Cross Connect is brought to you by Capital Blue Cross, an Independent Licensee of the Blue Cross Blue Shield Association, serving 21 counties in Central Pennsylvania and the Lehigh Valley.





TogetherForYouMedicare.com

Capital Blue Cross | Wellspan Health PPO is offered by Capital Advantage Insurance Company[®], a Medicare Advantage organization with a Medicare contract. Capital Blue Cross | Wellspan Health HMO is offered by Keystone Health Plan[®] Central, a Medicare Advantage organization with a Medicare contract. Enrollment in Capital Blue Cross | WellSpan Health PPO and Capital Blue Cross | Wellspan Health HMO depends on contract renewal. Care management services are provided by WellSpan Health. Other providers are available in the network.

Capital Blue Cross and its subsidiaries Capital Advantage Insurance Company and Keystone Health Plan Central are independent licensees of the Blue Cross Blue Shield Association. Communications issued by Capital Blue Cross in its capacity as administrator of programs and provider relations for all companies.

This information is not a complete description of benefits. Call 1-866-987-4213 (TTY: 711) for more information on Capital Blue Cross | WellSpan Health PPO. Call 1-800-779-6962 (TTY:711) for more information on Capital Blue Cross | WellSpan Heath HMO. Customer Service is available 8 a.m. – 8 p.m., Monday – Friday (with extended hours October 1 – March 31).

Out-of-network/non-contracted providers are under no obligation to treat Capital Blue Cross | WellSpan Health PPO/HMO members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost- sharing that applies to out-of-network services.

Other Physicians and Providers are available in our network.

Every year, Medicare evaluates plans based on a 5-Star rating System.

Language assistance

To talk to an interpreter in your language at no cost, call 1-866-987-4213 (TTY: 711). Para hablar con un intérprete de forma gratuita, llame al 1-866-987-4213 (TTY: 711).

欲免费用本国语言洽询传译员,请拨电话1-866-987-4213 (TTY: 711).

Để nói chuyện với thông dịch viên bằng ngôn ngữ của quý vị không phải mất phí, xin gọi 1-866-987-4213 (TTY: 711). Для бесплатного разговора с переводчиком на своем языке, позвоните по тел.: 1-866-987-4213 (TTY: 711). Fa koschdefrei schwetze mit me dolmetscher in deinre Schrooch, ruf 1-866-987-4213 uff (TTY: 711).

무료 전화 통역 서비스 1-866-987-4213 (TTY: 711).

Per parlare con un interpete nella vostra lingua gratis, chiami 1-866-987-4213 (TTY: 711).

للتحدث مجانًا إلى مترجم للغتك، يرجى الأتصال ب 4213-986-986-1-866

(الهاتف النصي :711(

Pour parler à un interpréter dans votre langue sans charges, téléphoner à 1-866-987-4213 (TTY: 711). Um in Ihrer Sprache gebührenfrei mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 1-866-987-4213 an (TTY: 711).

દુભાષીયા જોડે વાત કરવા, 1-866-987-4213 (TTY: 711) પર ફોન કરો.

Aby porozmawiac z tlumaczem w jezyku polskim, prosze zadzwonic na numer darmowy telefonu 1-866-987-4213 (TTY: 711).

Pou pale avèk yon entèprèt nan lang ou grastis, rele nan 1-866-987-4213 (TTY: 711).

ឌ ើម្បីនិយាយជាមុួយអ្នកបកប្របផ្ទាល់មាត់ជាភាសារបស់អ្នកដោយមុិនគិតថ្លៃ សូម្ដៅដៅកាន់ 1-866-987-4213 (TTY: 711).

Para falar com um intérprete em seu idioma de graça, ligue para 1-866-987-4213 (TTY: 711).

Scope of Sales Appointment Confirmation Form

The Centers for Medicare and Medicaid Services (CMS) requires agents to document the scope of a marketing appointment prior to any face-to-face sales meeting to ensure understanding of what will be discussed between the agent and the Medicare beneficiary (or their authorized representative). All information provided on this form is confidential and should be completed by each person with Medicare or his/her authorized representative.

Please mark beside the type of product(s) you want the agent to discuss.

Medicare Advantage Prescription Drug Plans (Part C) and Cost Plans

Medicare Preferred Provider Organization (PPO) Plan — A Medicare Advantage Plan that provides all Original Medicare Part A and Part B health coverage and includes Part D prescription drug coverage. PPOs have network doctors and hospitals but you can also use out-of-network providers, usually at a higher cost.

Medicare Health Maintenance Organization (HMO) Plan — A Medicare Advantage Plan that provides all Original Medicare Part A and Part B health coverage and includes Part D prescription drug coverage. With most HMOs, you can only get your care from doctors or hospitals in the plan's network (except in emergencies).

Stand-alone Medicare Prescription Drug Plans (Part D)

Medicare Prescription Drug Plan (PDP) — A stand-alone drug plan that adds prescription drug coverage to Original Medicare, some Medicare Cost Plans, some Medicare Private-Fee-for-Service Plans, and Medicare Medical Savings Account Plans.

Additional Products

Dental/Vision

Medicare Supplement (Medigap) Products

By signing this form, you agree to a meeting with a sales agent to discuss the types of products you initialed above. Please note, the person who will discuss the products is either employed or contracted by a Medicare plan. They <u>do not</u> work directly for the Federal government. This individual may also be paid based on your enrollment in a plan.

Signing this form does NOT obligate you to enroll in a plan, affect your current enrollment, or enroll you in a Medicare plan.

Beneficiary or Authorized Representative Signature and Signature Date:			
Please Print:			
Name:	Phone:		
Address:			
Signature:	Signature Date:		
If you are the authorized representative, please sign above and print below:			
Representative's Name:			
Your Relationship to the Beneficiary:			
To Be Completed By Agent:			

Agent Name:	Agent Phone:	
Initial Method of Contact: (Indicate here if beneficiary was a walk-in.)		
Agent's Signature:		
Plan(s) the agent represented during this meeting:		
Date Appointment Completed:		
[Plan Use Only:]		

Scope of Appointment (SOA) documentation is subject to CMS record retention requirements

Agent, if the form was signed by the beneficiary at time of appointment, provide explanation why SOA was not documented prior to meeting: