

Anthem IU Blue Retiree Plan Summary

This is a summary description of Medicare and IU Anthem Blue Retiree Plan coverage. For additional details and the most up-to-date information regarding Medicare coverage, visit www.medicare.gov or call 1-800-MEDICARE (1-800-633-4227).

2022 Monthly Premiums

One Participant (Retiree or surviving spouse)	\$195.67
Retiree and Spouse	\$390.06

Medicare Complement Benefits

When Medicare pays a portion of the cost of a medical service, the Blue Retiree plan coordinates with Medicare to pay all or most of what Medicare does not pay, up to the Medicare-approved amount. Providers who participate with Medicare accept assignment, meaning they agree to accept the Medicare-approved amount as full payment for Medicare-covered services. When other providers are used, the Medicare recipient may have additional costs.

Covered Services	Medicare Pays	Blue Retiree Pays	Member Pays
Medicare Part A			
Inpatient Hospital Facility			
First 60 days	Pays all but the deductible	\$1,556	\$0
61 st to 90 th day	Pays all but coinsurance	\$389	\$0
60 day lifetime reserve days	Pays all but coinsurance	\$778	\$0
Continuous inpatient care after the Medicare lifetime reserve has been exhausted up to an additional 365 days	\$0	90%	10%
Skilled Nursing Facility			
First 20 days of skilled care	100%	\$0	\$0
21 st to 100 th day of continued skilled care	Pays all but coinsurance	\$194.50	\$0
Home Health			
Non-custodial medical and nursing care	Pays 100%	\$0	\$0
Hospice care (room and board is not covered)	Pays 100%	\$0	\$0
Medicare Part B			
Annual deductible	Plan pays after the deductible	\$233	\$0
Doctors' care including visits in the office or while inpatient	80%	20%	\$0
Outpatient services (includes surgeries, diagnostic services, physical therapy, x-rays)	80%	20%	\$0
Clinical laboratory services	100%	\$0	\$0
Durable medical equipment such as wheelchairs, walkers, and hospital beds	80%	20%	\$0
Mental health counseling	80%	20%	\$0
Ambulance	80%	20%	\$0
Medicare designated preventive services* received from providers who accept Medicare assignment	100%	\$0	\$0

*Medicare-covered preventive services are based on your age, gender, and risk factors. Examples include bone mass measurements, breast cancer screening (mammograms), cervical and vaginal cancer screening, colorectal cancer screening, PSA prostate cancer screening, preventive shots (flu, pneumococcal, Hepatitis B), tobacco cessation counseling, and yearly well visits. See Medicare's [Your Guide to Medicare's Preventive Services](#).

Major Medical Benefits

Medicare does not cover some medical services. The Major Medical Benefit pays some of the costs not covered by Medicare. Also, when services are provided by doctors, facilities, or suppliers that do not accept Medicare assignment (non-participating providers), the provider can bill for excess charges above what Medicare allows. The Major Medical Benefit covers some of those costs.

These benefits have a \$100 deductible per person each year and a maximum annual out-of-pocket expense of \$600 per person that includes both deductible and coinsurance. There is a \$1,000,000 lifetime limit on Major Medical benefits. Since these are not Medicare benefits, Anthem will use its own standards for determining medical necessity and allowed amounts, not Medicare's.

Covered Services	Medicare Pays	Blue Retiree Pays	Member Pays
Continuous inpatient days beyond an additional 365	\$0	80%	20%
Skilled nursing facility after the 100th day	\$0	80%	20%
Services outside the U.S.	\$0	100%	0%
Excess charges for providers that don't accept Medicare assignment ¹	\$0	Up to the limiting charge ² of 115% of the Medicare-allowable Amount	\$0 for services with a limiting charge ²
Out-of-hospital skilled private duty nursing, and visiting nurse's association	\$0	80% up to \$5,000 maximum per year	20% and all costs above the maximum benefit
Accidental dental	\$0	80%	20%
Morbid obesity	\$0	80%	20%
Doctors' care including visits in the office or while inpatient	80%	20%	\$0

¹ Providers who haven't signed a contract with Medicare to accept assignment can charge you for amounts in excess of Medicare's Allowed Amount. Most doctors, providers, and suppliers accept assignment, but you should always check to make sure.

² There is a limiting charge on what non-participating providers can bill Medicare enrollees—15 percent over what Medicare pays the nonparticipating provider. The limiting charge does not apply to all Medicare-covered services, like some durable medical equipment.

Wellness Benefits

Covered Services	Medicare Pays	Blue Retiree Pays	Member Pays
Routine dental exam	\$0	\$125	Amounts above \$125
Hearing exam	\$0	\$50	Amounts above \$50

Anthem Blue View Vision

Services	In-Network Provider—Member Pays	Out-of-Network Provider—Member Pays
Annual comprehensive eye exam and refraction ¹	\$5 copayment, no deductible	Costs above a \$42 allowance
Vision Wear (Contacts, frames, and lenses ¹)	Optional savings available from Blue View Vision In-Network Providers only.	

Visit hr.iu.edu/benefits/retireeblue.html for a full summary of vision benefits.

¹ Medicare does not generally cover routine routine eye exams for eyeglasses or contact lenses. However, Medicare Part B will cover an annual eye exam if you have diabetes or are at high risk for glaucoma.

Silver Sneakers

IU Blue Retiree benefits include SilverSneakers for all plan participants. SilverSneakers is a no-cost fitness benefit with access to 15,000+ fitness locations nationwide.¹ The program also includes online workouts, guidance from fitness staff, fitness classes designed for seniors, access to healthy living discounts, a fitness app, and more. 88% of participants say SilverSneakers has improved their quality of life! To get started visit silversneakers.com/starthere to get your SilverSneakers member ID.



¹ Membership includes SilverSneakers instructor-led group fitness classes. Some locations offer members additional classes. Classes vary by location.