

# Wisconsin



# Wisconsin Market Highlights



Our *HMO and DSNP plans are expanding into 25 new counties*, and will be offered in most major Wisconsin markets (43 out of 72 counties). HMO and DSNP plans have improvements on key benefits for 2019. Additionally, *LPPO is expanding into 15 additional counties* (43 out of 72 counties).



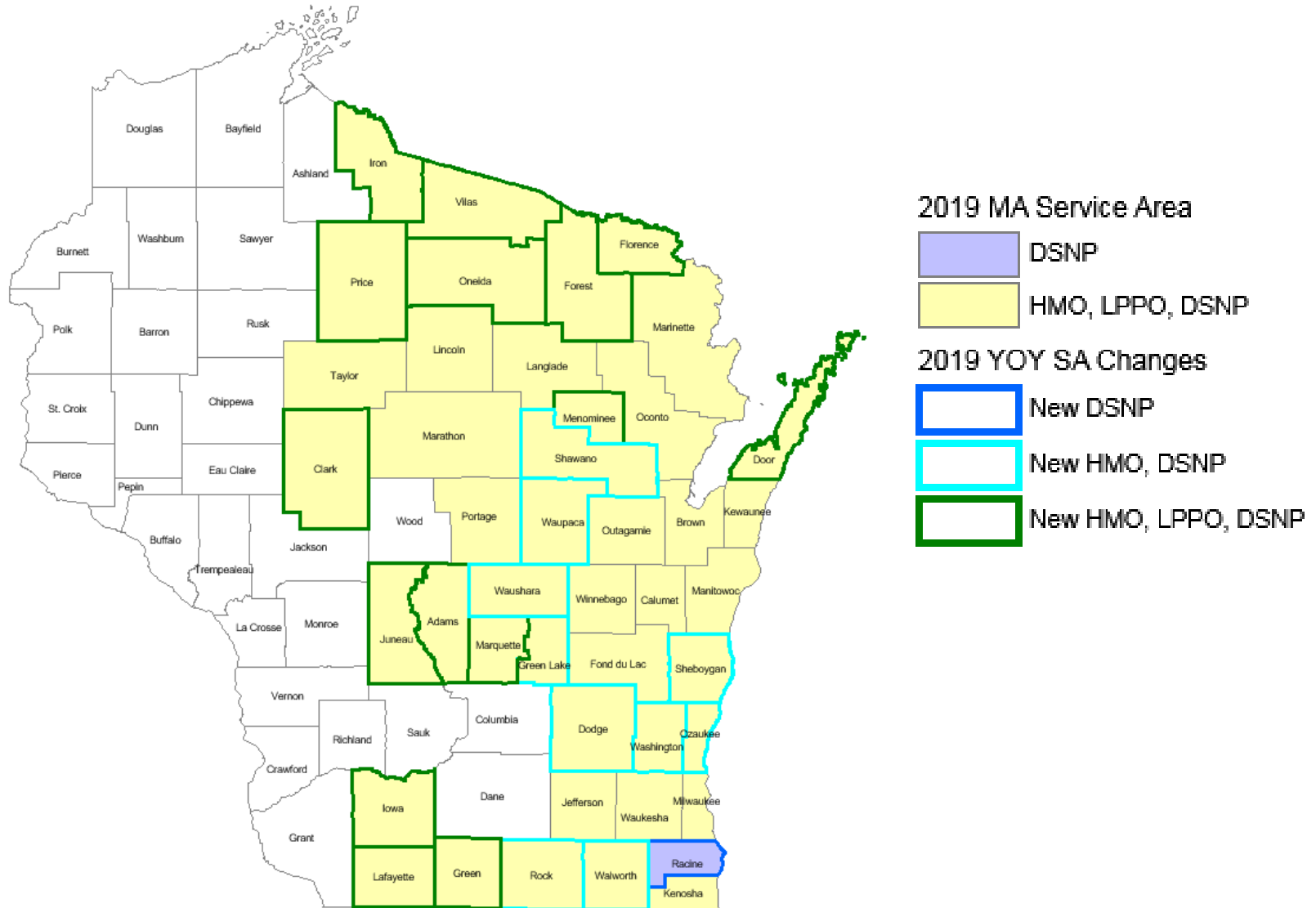
*Adding a new Flexible Benefit package*, where members may chose one of seven options



On ALL plans except DSNP, *adding 90 day coverage at 2x the 30 supply for Tiers 1-4* through both retail pharmacies and by mail order.

Products	Plan-PBP #	Premium	Counties	Comments
HMO	H9525-004	\$0	24	Chicago, Janesville, Madison, Milwaukee, and Wausau
HMO	H9525-006	\$0	19	Appleton, Fond du Lac, Green Bay, Milwaukee, Oshkosh, and Sheboygan
DSNP	H9525-003	\$0	44	Duals plan
LPPO	H4036-008	\$27	27	Appleton, Chicago, Fond du Lac, Green Bay, Janesville, Madison, Milwaukee, Oshkosh, and Sheboygan
LPPO	H4036-009	\$37	16	Green Bay and Wausau
LPPO	H4036-016	\$0	43	MA-Only plan

# Wisconsin 2019 Service Area



# Wisconsin 2019 Plan Highlights

	Anthem MediBlue Plus (HMO) H9525-004	Anthem MediBlue Plus (HMO) H9525-006
Service Area	Adams, Clark, Florence, Forest, Green, Iowa, Iron, Jefferson, Juneau, Kenosha, Lafayette, Langlade, Lincoln, Marathon, Marinette, Milwaukee, Oneida, Portage, Price, Rock, Taylor, Vilas, Walworth, Waukesha	Brown, Calumet, Dodge, Door, Fond Du Lac, Green Lake, Kewaunee, Manitowoc, Marquette, Menominee, Oconto, Outagamie, Ozaukee, Shawano, Sheboygan, Washington, Waupaca, Waushara, Winnebago
Monthly Premium		\$0
Max Out-of-Pocket	\$4,900	\$4,300
Primary Care Physician		\$0
Specialist		\$35
Inpatient Hospital	\$295 (6 days)	\$290 (6 days)
Rx Copays (preferred cost shares) T1 / T2 / T3 / T4 / T5 / T6	\$2 / \$9 / \$42 / \$95 / 30% / \$0 90 day mail-order savings on certain tiers	\$2 / \$9 / \$42 / \$95 / 31% / \$0 90 day mail-order savings on certain tiers
Rx Deductible	\$140 (Tiers 3-5)	\$80 (Tiers 3-5)



# Wisconsin 2019 Plan Highlights

	Anthem MediBlue Plus (HMO) H9525-004	Anthem MediBlue Plus (HMO) H9525-006
Skilled Nursing Facility (Preferred / INN)	Days 1 - 20: \$0 per day / Days 21 - 100: <b>\$142</b> per day (Preferred) Days 1 - 20: \$0 per day / Days 21 - 100: <b>\$172</b> per day (INN)	
Outpatient Surgery Hospital		<b>\$285 copay</b>
Ambulatory Surgical Center	\$215 copay	\$225 copay
Emergency Room		<b>\$90 copay</b>
Ambulance	<b>\$265 copay</b> (Air Ambulance – 20% coinsurance)	<b>\$275 copay</b> (Air Ambulance – 20% coinsurance)
Urgent Care		<b>\$30 copay</b>
Diagnostic Radiologic Procedures		\$150 copay (doctor office) \$170 copay (outpatient facility)
Diagnostic Procedures/Tests	\$90 copay (doctor office) \$170 copay (outpatient facility)	\$85 copay (doctor office) \$170 copay (outpatient facility)
X-rays		<b>\$50 copay</b> (doctor office) \$130 copay (outpatient facility)
Outpatient Lab	\$0 - \$10 copay	\$0 - \$15 copay



# Wisconsin 2019 Plan Highlights

	Anthem MediBlue Plus (HMO) H9525-004	Anthem MediBlue Plus (HMO) H9525-006
Emergency / Urgent Care Worldwide Coverage	This plan covers emergency services when traveling outside of the United States for less than six months. This benefit is limited to \$25,000 per year for worldwide emergency services. There is a \$90 copay for emergency and urgent care services.	
Routine Preventive Dental	\$0 copay for 2 oral exam(s) every year \$0 copay for 2 cleaning(s) every year 1 x-ray and 1 fluoride treatment every year Optional Supplemental Benefits are also available for an additional premium	
Routine Eye Exams	\$0 copay for 1 routine eye exam(s) every year Optional Supplemental Benefits are also available for an additional premium	
Routine Eye Wear	\$150 limit for eye glasses or contact lenses every year	
Routine Hearing Exams	\$0 copay for 1 routine hearing exam(s) every year	
Hearing Aids	\$0 copay for hearing aids \$3,000 maximum plan benefit for hearing aids every year	
Meals	10 days post-discharge meal benefit (2 per day)	
Personal Emergency Response System (PERS)	Covered	
LiveHealth Online	Covered	
Fitness	Covered (SilverSneakers®)	
Routine Podiatry	\$0 copay (unlimited visits per year)	
Over the Counter (OTC)	\$25 per quarter	
Medicare Community Resource Support	Covered	
Flex Benefits	Covered	



# Wisconsin 2019 Plan Highlights

Anthem MediBlue Dual Advantage (HMO SNP) H9525-003	
Service Area	Adams, Brown, Calumet, Clark, Dodge, Door, Florence, Fond Du Lac, Forest, Green, Green Lake, Iowa, Iron, Jefferson, Juneau, Kenosha, Kewaunee, Lafayette, Langlade, Lincoln, Manitowoc, Marathon, Marinette, Marquette, Menominee, Milwaukee, Oconto, Oneida, Outagamie, Ozaukee, Portage, Price, Racine, Rock, Shawano, Sheboygan, Taylor, Vilas, Walworth, Washington, Waukesha, Waupaca, Waushara, Winnebago
Dental	2 Exams; 2 Cleanings, 1 x-ray; 1 fluoride treatment; \$2500 Comprehensive
Vision	1 Exam; \$400 hardware limit per year
Hearing	1 hearing exam; \$3,000 hearing aid limit per year
Over the Counter (OTC)	\$200 per quarter
Transportation	36 one way trips
Routine Podiatry	\$0 copay (unlimited visits per year)
Meals	10 days post-discharge meal benefit (2 per day)
Personal Emergency Response System (PERS)	Covered
Fitness	Covered (SilverSneakers®)
LiveHealth Online	Covered
Medicare Community Resource Support	Covered
Flex Benefits	Covered



# Wisconsin 2019 Plan Highlights

	Anthem MediBlue Access (PPO) H4036-008	Anthem MediBlue Access (PPO) H4036-009
Service Area	Brown, Calumet, Door, Fond Du Lac, Green, Green Lake, Iowa, Jefferson, Kenosha, Kewaunee, Lafayette, Langlade, Lincoln, Manitowoc, Marquette, Menominee, Milwaukee, Outagamie, Ozaukee, Rock, Shawano, Sheboygan, Taylor, Walworth, Washington, Waukesha, Winnebago	Adams, Clark, Dodge, Florence, Forest, Iron, Juneau, Marathon, Marinette, Oconto, Oneida, Portage, Price, Vilas, Waupaca, Waushara
Monthly Premium	\$27	\$37
Max Out-of-Pocket	\$4,000 INN \$9,000 OON	\$5,500 INN \$10,000 OON
Primary Care Physician	\$5	\$5
Specialist	\$40	\$30
Inpatient Hospital	\$295 (5 days)	\$295 (5 days)
Rx Copays (preferred cost shares) T1 / T2 / T3 / T4 / T5 / T6	\$5 / \$15 / \$42 / \$95 / 33% / 0 90 day mail-order savings on certain tiers	\$4 / \$15 / \$42 / \$95 / 32% / \$0 90 day mail-order savings on certain tiers
Rx Deductible	\$0	\$25 (Tiers 3-5)



# Wisconsin 2019 Plan Highlights

	Anthem MediBlue Access (PPO) H4036-008	Anthem MediBlue Access (PPO) H4036-009
Skilled Nursing Facility (Preferred / INN)	Days 1 - 20: \$0 per day / Days 21 - 100: <b>\$142</b> per day (Preferred) Days 1 - 20: \$0 per day / Days 21 - 100: <b>\$172</b> per day (INN)	
Outpatient Surgery Hospital	<b>\$285 copay</b>	<b>\$275 copay</b>
Ambulatory Surgical Center	\$225 copay	\$245 copay
Emergency Room	\$90 copay	
Ambulance	\$295 copay (Air Ambulance – 20% coinsurance)	
Urgent Care	\$35 copay	\$25 copay
Diagnostic Radiologic Procedures	\$130 copay (doctor office) \$150 copay (outpatient facility)	
Diagnostic Procedures/Tests	\$75 copay (doctor office) \$150 copay (outpatient facility)	
X-rays	<b>\$50</b> copay (doctor office) \$110 copay (outpatient facility)	
Outpatient Lab	\$0 - \$10 copay	



# Wisconsin 2019 Plan Highlights

	Anthem MediBlue Access (PPO) H4036-008	Anthem MediBlue Access (PPO) H4036-009
Emergency / Urgent Care Worldwide Coverage	This plan covers emergency services when traveling outside of the United States for less than six months. This benefit is limited to \$25,000 per year for worldwide emergency services. There is a <b>\$90</b> copay for emergency and urgent care services.	
Routine Preventive Dental	\$0 copay for 2 oral exam(s) every year \$0 copay for 2 cleaning(s) every year 1 x-ray and 1 fluoride treatment every year Optional Supplemental Benefits are also available for an additional premium	
Routine Eye Exams	\$0 copay for 1 routine eye exam(s) every year Optional Supplemental Benefits are also available for an additional premium	
Routine Eye Wear	N/A	
Routine Hearing Exams	\$0 copay for 1 routine hearing exam(s) every year \$59.00 maximum plan benefit every year	
Hearing Aids	\$0 copay for hearing aids \$3,000 maximum plan benefit for hearing aids every year	
LiveHealth Online	Covered	
Fitness	Covered (SilverSneakers®)	
Routine Podiatry	\$0 copay (unlimited visits per year)	

# Wisconsin 2019 Plan Highlights

Anthem MediBlue Access Core (PPO) H4036-016	
Service Area	<a href="#">Adams</a> , <a href="#">Brown</a> , <a href="#">Calumet</a> , <a href="#">Clark</a> , <a href="#">Dodge</a> , <a href="#">Door</a> , <a href="#">Florence</a> , <a href="#">Fond Du Lac</a> , <a href="#">Forest</a> , <a href="#">Green</a> , <a href="#">Green Lake</a> , <a href="#">Iowa</a> , <a href="#">Iron</a> , <a href="#">Jefferson</a> , <a href="#">Juneau</a> , <a href="#">Kenosha</a> , <a href="#">Kewaunee</a> , <a href="#">Lafayette</a> , <a href="#">Langlade</a> , <a href="#">Lincoln</a> , <a href="#">Manitowoc</a> , <a href="#">Marathon</a> , <a href="#">Marinette</a> , <a href="#">Marquette</a> , <a href="#">Menominee</a> , <a href="#">Milwaukee</a> , <a href="#">Oconto</a> , <a href="#">Oneida</a> , <a href="#">Outagamie</a> , <a href="#">Ozaukee</a> , <a href="#">Portage</a> , <a href="#">Price</a> , <a href="#">Rock</a> , <a href="#">Shawano</a> , <a href="#">Sheboygan</a> , <a href="#">Taylor</a> , <a href="#">Vilas</a> , <a href="#">Walworth</a> , <a href="#">Washington</a> , <a href="#">Waukesha</a> , <a href="#">Waupaca</a> , <a href="#">Waushara</a> , <a href="#">Winnebago</a>
Monthly Premium	\$0
Max Out-of-Pocket	\$5,900 INN \$10,000 OON
Primary Care Physician	\$10
Specialist	\$40
Inpatient Hospital	\$295 (6 days)
Rx Copays (preferred cost shares) T1 / T2 / T3 / T4 / T5 / T6	N/A (MA-only plan)
Rx Deductible	N/A



# Wisconsin 2019 Plan Highlights

Anthem MediBlue Access Core (PPO) H4036-016	
Skilled Nursing Facility (Preferred / INN)	Days 1 - 20: \$0 per day / Days 21 - 100: <b>\$142</b> per day (Preferred) Days 1 - 20: \$0 per day / Days 21 - 100: <b>\$172</b> per day (INN)
Outpatient Surgery Hospital	\$280 copay
Ambulatory Surgical Center	\$230 copay
Emergency Room	<b>\$90</b> copay
Ambulance	<b>\$265</b> copay (Air Ambulance – 20% coinsurance)
Urgent Care	\$35 copay
Diagnostic Outpatient Radiologic Procedures	\$130 - \$150 copay
Diagnostic Outpatient Procedures/Tests	\$0 - \$150 copay
X-rays	<b>\$50</b> - \$110 copay
Outpatient Lab	\$0 - \$10 copay

# Wisconsin 2019 Plan Highlights

Anthem MediBlue Access Core (PPO) H4036-016	
Emergency / Urgent Care Worldwide Coverage	<p>This plan covers emergency services when traveling outside of the United States for less than six months. This benefit is limited to \$25,000 per year for worldwide emergency services.</p> <p>There is a <span style="color: red;">\$90</span> copay for emergency and urgent care services.</p>
Routine Preventive Dental	<p>\$0 copay for 2 oral exam(s) every year            \$0 copay for 2 cleaning(s) every year  <span style="color: blue;">1 x-ray and 1 fluoride treatment every year</span></p> <p>Optional Supplemental Benefits are also available for an additional premium</p>
Routine Eye Exams	<p>\$0 copay for 1 routine eye exam(s) every year            \$69 maximum eye exam coverage amount</p> <p>Optional Supplemental Benefits are also available for an additional premium</p>
Routine Eye Wear	<p>\$0 copay for eye glasses (lenses and frames) or contact lenses every year            \$150 limit for eye glasses or contact lenses every year</p>
Routine Hearing Exams	<p>\$0 copay for 1 routine hearing exam(s) every year            \$59 maximum plan benefit every year</p>
Hearing Aids	<p>\$0 copay for hearing aids            \$3,000 maximum plan benefit for hearing aids every year</p>
LiveHealth Online	Covered
Fitness	Covered (SilverSneakers®)
Routine Podiatry	\$0 copay ( <span style="color: green;">unlimited visits per year</span> )

# Wisconsin 2019 OSB Premiums

	Optional Supplemental Benefits (OSB) HMO	Optional Supplemental Benefits (OSB) PPO
Preventative Dental	\$12	\$15
Dental and Vision	\$23	\$28
Enhanced Dental and Vision	\$37	\$45

# Wisconsin Medicare Supplement Plans

MEDICARE SUPPLEMENT RATING FACTORS					
	Plan Choices	Area	Age	Gender	Tobacco Use
WI	Basic Plan  <u>Rider Options</u> Part A Deductible Part B Deductible OR Part B Copayment/Coinsurance Medicare Part B Excess Charge Home Health Care Visits Foreign Travel Emergency	Yes	Attained	Yes	Yes

- Anthem BCBS offers a New to Medicare Discount on the Basic Plan (\$15 monthly premium savings during the first 12 months of enrollment. Discount applies for Applicant 65+ and within 6 months of Part B effective date as of coverage effective date.)
- New 12-month premium rate guarantee applies to new members enrolling in Plans A, F, G, and N with an effective date of 3/1/2017 or later. Annual premium rate changes will occur on the member's enrollment anniversary month instead of January 1 each year
- SilverSneakers® is included with Wisconsin Modernized Open Marketed Medicare Supplement Plans
- SpecialOffers@ Anthem: Discounts help members save money from various vendors for things like:
  - Vision, Hearing, Eldercare Support, Health and Wellness, Weight Loss Programs and Rx Drug Discounts through Medical Security Card