

Group Plan65[®] Plan G with SNF



Our Group Plan65 Plan G is a Medicare Supplement "Medigap" plan that picks up where Medicare leaves off, making it easier for you to budget your healthcare expenses. You can get care from Original Medicare-participating providers of your choice nationwide. This plan pays for Original Medicare's cost-sharing deductibles and coinsurance. It does not cover services beyond what Original Medicare provides, unless otherwise noted.

Benefit Features	With Original Medicare, you pay:	With Medicare and Group Plan65 Plan G, you pay:	
Part A Services			
Hospitalization		\$0	
• First 60 days	\$1,632 per benefit period		
• Days 61 - 90	\$408 per day		
• Days 91 and after while using 60 lifetime reserve days	\$816 per day		
• Once lifetime reserve days are used, an additional 365 days	All costs		
Skilled nursing facility care			
• First 20 days	\$0		
• Days 21 - 100	\$204.00 per day		
• Days 101 and after	All costs		All costs
Part B Services			
Part B excess charges	All costs	\$0	
Immunizations & screenings	\$0		
• Immunizations			
• Bone mass measurement			
• Colorectal screening exams			
• Diabetes screening			
• Annual mammography screening			
• Pap tests and pelvic exams			
• Prostate cancer screening exams			
Lab services (Medicare-covered)			
Home health care (Medicare-covered)			
Hospice care	Medicare copay/coinsurance		
Office visits	20% of Medicare-approved amounts after \$240 annual deductible	\$240 annual deductible	
• Doctor visits			
• Non-routine hearing services			
• Non-routine vision care			
• Non-routine podiatry services			
• Chiropractic services (limited)			
Emergency room			
Outpatient surgery			
Diagnostic tests and X-rays			
Durable medical equipment and prosthetics			
Urgently needed care			
Ambulance services			
Foreign travel care	All costs	20% after \$250 deductible ¹	

1. \$250 deductible is annual. There is a \$50,000 lifetime maximum for the foreign travel care benefit.

Enrolling in Group Plan65[®] Plan G?

**Contact Mark Thomas, Group Medicare Account Executive,
at (401) 459-2409 for more information.**

Already a Group Plan65[®] Plan G Member?

**Contact the Medicare Concierge team at
1-800-267-0439 (TTY: 711) for more information.**

Hours: Monday through Friday, 8:00 a.m. to 8:00 p.m.; Saturday, 8:00 a.m. to noon.

(Open seven days a week, 8:00 a.m. to 8:00 p.m., October 1 - March 31.)

You can use our automated answering system outside of these hours.

This is a summary of benefits. It is not a contract. For details about cost and coverage, including any limits and exclusions not noted here, please call the Group Medicare Account Executive at the number listed above or refer to the plan's subscriber agreement online at bcbsri.com. To be eligible for Group Plan 65, you must be enrolled in both Part A and Part B of the Original Medicare Program. All services should be received from an Original Medicare-participating provider, except in emergencies. 2024 Part A Deductible = \$1,632 per benefit period. 2024 Part B Deductible = \$240 per calendar year. Medicare amounts are current for 2024 and may change on an annual basis. Part B deductible may apply to Medicare approved doctor's visits. Not contracted with or endorsed by the U.S. Government or the federal Medicare program. Insured by Blue Cross & Blue Shield of Rhode Island. The purpose of this communication is the solicitation of insurance. You may be contacted by a licensed insurance producer or insurance company. These policies have exclusions or limitations. Blue Cross & Blue Shield of Rhode Island is an independent licensee of the Blue Cross and Blue Shield Association.

