



# Medicare Supplement Rates

Plans A, F & N

## Anthem Blue Cross and Blue Shield Kentucky 2016

This booklet includes premium rates.

Call toll-free 1-866-848-1057 with questions.

Administrative Office: P.O. Box 659806, San Antonio, TX 78265-9106

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## Premium Information

Plans A, F & N | Effective January 1, 2016

Premiums are subject to change.

### Here's some important information, before we get started:

We, Anthem, can only raise your premium if we raise the premium for all plans like yours in this State. We will recalculate your age each year and adjust your premium based on the new age band in January of each year up to the age cap. Premiums will be based on your gender and age during Open Enrollment and Guaranteed Issue periods. Outside Open Enrollment and Guaranteed Issue periods, premiums will be based on your gender, age and whether or not you use tobacco. Your premium may increase annually at your renewal based upon your new attained age and your gender.

Premiums are subject to change on or after the Renewal Date in accordance with the terms of the Policy. Renewal Date is defined as January 1, subject to state approval. The selected billing preference does not guarantee your premium for any specific period. Approved premium changes are effective as of the Renewal Date.

If you select a billing method other than Monthly EFT (Electronic Fund Transfer), the billing frequency takes effect on the first day of the payment period that immediately follows your coverage effective date. Based on your selected billing method and your coverage effective date, we will prorate the initial premium to align you with the quarterly or annual billing. For example, if you select quarterly billing and your coverage effective date is September 1, your quarterly billing will start on October 1. We base annual billing on a calendar year (January-December).

### Find Your Premium

Premiums (and future changes to premiums) are determined by several factors, including whether you are applying during your **Open Enrollment Period**, are eligible for **Guaranteed Issue** coverage, your tobacco use, age, gender, plan, and the costs of medical services and supplies.

- Your **Open Enrollment period** is the best time to buy a Medicare Supplement plan. The Open Enrollment period automatically starts the month you turn age 65 and enroll in Medicare Part B — this period only occurs once and allows you to enroll in any plan offered. During this period, you do not go through medical underwriting and are **guaranteed** acceptance into the Plan of your choice!
- When outside your Open Enrollment period you may experience a **Guaranteed Issue\*** right. These rights generally occur when you have other health coverage that changes. During this period, your Medicare Supplement plan options may be limited.

\* The most common reason you could qualify for guaranteed issue coverage is, 1) Your coverage will start 3 months before or after your 65th birthday, or 2) Your coverage will start when you are age 65 or older and within 6 months of your Medicare Part B coverage effective date. Other reasons are shown in "Choosing a Medigap Policy: A Guide to Health Insurance for People with Medicare" available on the Medicare.gov website.

# Finding the Right Plan for You

Plans A, F & N | Effective January 1, 2016

Premiums are subject to change.

Here's how to find your premium, step-by-step:

## Determine Which Premium Table Applies to You

- Tobacco / Non-Tobacco
- Male / Female



## Find Your Premium

NOW ... You Are Ready to Compare Plan Premiums

## Compare Plans

After locating the monthly premium, you are ready to review the individual plan pages. These pages provide details of the covered services and what each plan pays. Based on your individual needs, these pages will help you determine the plan that is best for you. You are now ready to **ENROLL!**

## Don't miss out on a chance to SAVE!

These optional discounts are offered.

### SAVE \$2 on your monthly premium!

Enroll in our Automatic Bank Draft or Electronic Fund Transfer (EFT) program and you will save \$2 on your monthly premium. (To enroll, simply complete the Premium Payment Form.)

OR

### SAVE \$48 by paying your premium for the entire year!

(Note: Based on the policy effective date, the discount may be pro-rated the first year.)

**SAVE 5%** when more than one member in the household enrolls in a Medicare Supplement plan with us. The discount is for policies with effective dates of June 1, 2010 or after and available to those members who occupy the same housing unit. (The discount will remain in effect for the life of the policy.)

## Ways to Enroll

### Sales Department\*

Call 1-866-803-5169  
(TTY/TDD: 711)  
8 a.m. to 8 p.m.  
seven days a week

### Customer Service

Call 1-866-848-1057  
(TTY/TDD: 711)  
8 a.m. to 6 p.m.  
seven days a week

### Visit us Online

[www.anthem.com](http://www.anthem.com)  
- Enroll online  
- Find a doctor  
- Find a pharmacy  
- List of covered drugs

\* By calling this number, you will reach an authorized licensed insurance agent who can answer questions about our plans and enrollment.

**Let's Begin**

# Finding Your Monthly Premium

**Plans A, F & N | Effective January 1, 2016**

Premiums are subject to change. Premium is based upon your tobacco usage, age, gender and plan.

## Find Your Premium

**Table 1 | Non-Tobacco Users, Open Enrollment or Guaranteed Issue**

Use this table if: 1. You are in your Open Enrollment Period, or are eligible for Guaranteed Issue; OR, 2. You do not use tobacco products. (Tobacco users should use Table 2.)

### Plans

Use your attained age at the time of enrollment.

Age	Male			Female		
	Plan A	Plan F	Plan N	Plan A	Plan F	Plan N
65	\$155.77	\$196.13	\$147.10	\$148.35	\$186.79	\$140.09
66	161.38	203.19	152.39	153.69	193.52	145.14
67	167.19	210.51	157.88	159.23	200.48	150.36
68	173.21	218.09	163.56	164.96	207.70	155.78
69	179.44	225.94	169.45	170.90	215.18	161.38
70	185.90	234.07	175.55	177.05	222.92	167.19
71	192.59	242.50	181.87	183.42	230.95	173.21
72	199.53	251.23	188.42	190.03	239.26	179.45
73	206.71	260.27	195.20	196.87	247.88	185.91
74	214.15	269.64	202.23	203.95	256.80	192.60
75	221.86	279.35	209.51	211.30	266.04	199.53
76	229.85	289.40	217.05	218.90	275.62	206.72
77	238.12	299.82	224.87	226.78	285.54	214.16
78+	246.70	310.62	232.96	234.95	295.82	221.87

### Under Age 65 Premiums

For those qualified for Medicare by reason other than age.

Male		Female	
Plan A	Plan F	Plan A	Plan F
\$392.35	\$494.01	\$373.67	\$470.49

### Select Plans

(must use a network hospital.)

Use your attained age at the time of enrollment.

Age	Male		Female	
	Plan F	Plan N	Plan F	Plan N
65	\$125.98	\$94.48	\$119.98	\$89.99
66	130.51	97.89	124.30	93.22
67	135.21	101.41	128.77	96.58
68	140.08	105.06	133.41	100.06
69	145.12	108.84	138.21	103.66
70	150.35	112.76	143.19	107.39
71	155.76	116.82	148.34	111.26
72	161.37	121.03	153.68	115.26
73	167.18	125.38	159.22	119.41
74	173.20	129.90	164.95	123.71
75	179.43	134.57	170.89	128.16
76	185.89	139.42	177.04	132.78
77	192.58	144.44	183.41	137.56
78+	199.51	149.64	190.01	142.51

### Under Age 65 Select Premiums

(must use a network hospital.)

For those qualified for Medicare by reason other than age.

Male	Female
Plan F	Plan F
\$277.15	\$263.96

(see next page for Table 2) ➔

# Finding Your Monthly Premium

Plans A, F & N | Effective January 1, 2016

Premiums are subject to change. Premium is based upon your tobacco usage, age, gender and plan.

Find Your Premium

(continued)

**Table 2 | For Tobacco Users**

If you have used tobacco products in the past 12 months, use this table —**or**— if you are not a tobacco user, are in your Open Enrollment Period, or are eligible for Guaranteed Issue, see Table 1.

## Plans

Use your attained age at the time of enrollment.

Age	Male			Female		
	Plan A	Plan F	Plan N	Plan A	Plan F	Plan N
65	\$174.46	\$219.67	\$164.75	\$166.15	\$209.21	\$156.90
66	180.74	227.57	170.68	172.14	216.74	162.55
67	187.25	235.77	176.83	178.33	224.54	168.41
68	193.99	244.26	183.19	184.75	232.62	174.47
69	200.97	253.05	189.79	191.40	241.00	180.75
70	208.21	262.16	196.62	198.30	249.67	187.26
71	215.71	271.60	203.70	205.43	258.66	194.00
72	223.47	281.37	211.03	212.83	267.97	200.98
73	231.52	291.50	218.63	220.49	277.62	208.22
74	239.85	302.00	226.50	228.43	287.62	215.71
75	248.48	312.87	234.65	236.65	297.97	223.48
76	257.43	324.13	243.10	245.17	308.70	231.52
77	266.70	335.80	251.85	254.00	319.81	239.86
78+	276.30	347.89	260.92	263.14	331.32	248.49

## Under Age 65 Premiums

For those qualified for Medicare by reason other than age.

Male		Female	
Plan A	Plan F	Plan A	Plan F
\$439.43	\$553.29	\$418.51	\$526.95

## Select Plans

(must use a network hospital.)

Use your attained age at the time of enrollment.

Age	Male		Female	
	Plan F	Plan N	Plan F	Plan N
65	\$141.10	\$105.82	\$134.38	\$100.78
66	146.18	109.63	139.22	104.41
67	151.44	113.58	144.23	108.17
68	156.89	117.67	149.42	112.06
69	162.54	121.90	154.80	116.10
70	168.39	126.29	160.37	120.28
71	174.45	130.84	166.14	124.61
72	180.73	135.55	172.13	129.09
73	187.24	140.43	178.32	133.74
74	193.98	145.48	184.74	138.56
75	200.96	150.72	191.39	143.54
76	208.20	156.15	198.28	148.71
77	215.69	161.77	205.42	154.07
78+	223.46	167.59	212.82	159.61

## Under Age 65 Select Premiums (must use a network hospital.)

For those qualified for Medicare by reason other than age.

Male	Female
Plan F	Plan F
\$310.41	\$295.63