

Broome County Purchasing Alliance Medicare Blue PPO – Plan 7

What is Original Medicare?

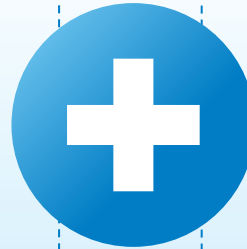
A federal health insurance program administered by the Centers for Medicare & Medicaid Services (CMS)

PART A



Hospital Coverage

- Helps cover inpatient hospital services
- Helps cover skilled nursing facility, hospice, and home health services
- Premium-free for most beneficiaries



PART B



Medical Coverage

- Helps cover doctor visits and outpatient care
- Helps cover some preventive services
- **2025 Premium: \$185.00 per month**
- **2026 Premium (Projected): \$206.50 per month**

How do I apply for Medicare?



Contact the Social Security Administration

- Visit secure.ssa.gov
- Call toll-free **1-800-772-1213**

Enrollment is **automatic** into Part A and Part B if...

- Members are receiving Social Security benefits or are part of a Railroad Retirement plan
- Members are under 65 and have received **Social Security Disability** benefits for 24 months

What are the other parts of Medicare?

PART C



Medicare Advantage Plans

- Medicare Blue PPO

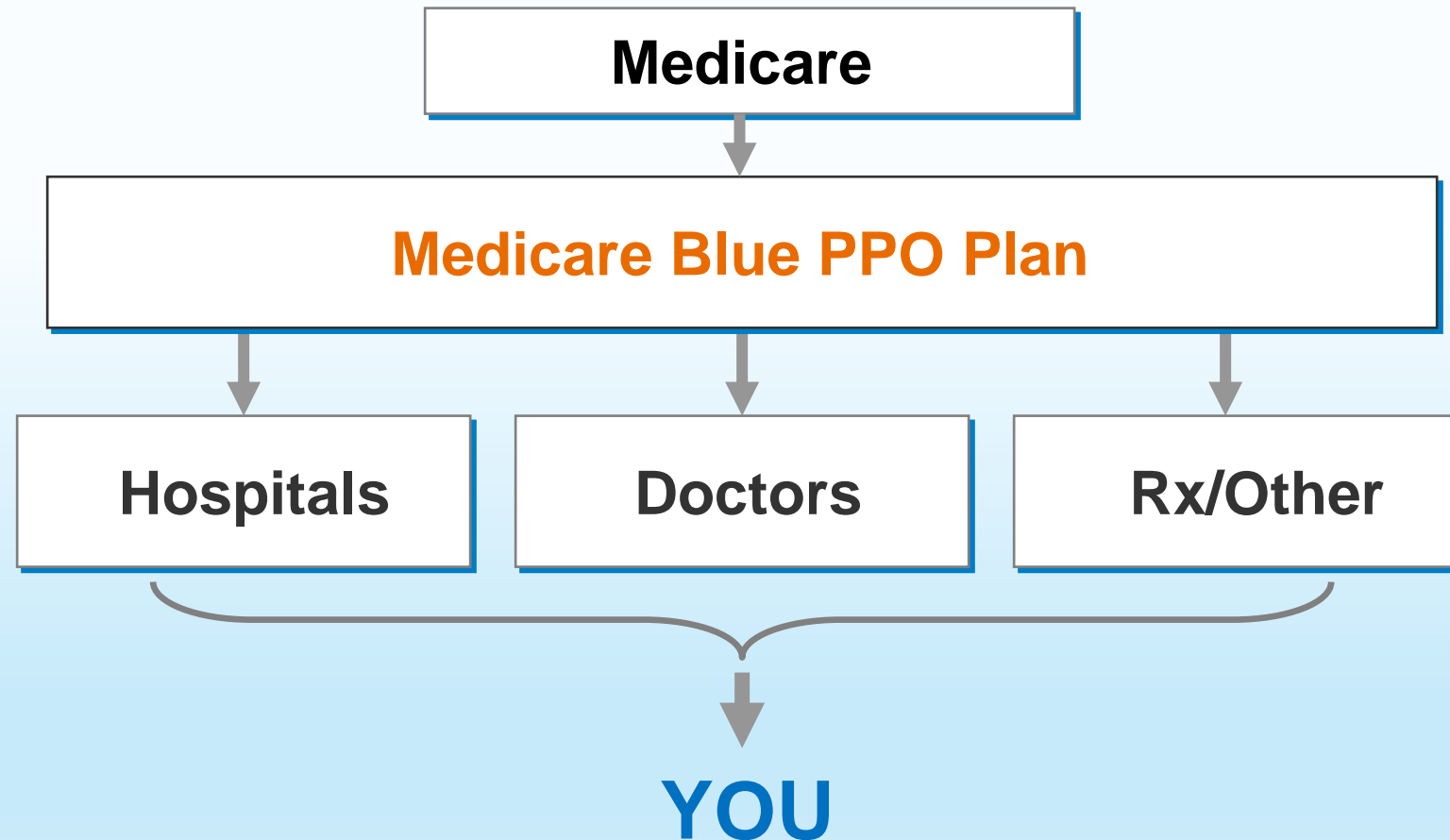
PART D



Prescription Drug Coverage

- Medicare Part D Prescription Drug Coverage is included in the Medicare Blue PPO plan.

How Medicare Blue PPO Plan Works



Medicare Blue PPO – Plan 7

\$5/\$15/\$30 Rx Coverage

Preventive Care

- | | |
|--------------------------|---------------------------|
| • Diagnostic tests/lab | Covered in full |
| • Routine Physical | Covered in full |
| • Immunizations | Covered in full |
| • Mammography | Covered in full |
| • PAP/Pelvic Exam | Covered in full |
| • Bone Density Screening | Covered in full |
| • Prostate Screening | Covered in full |
| • Routine Hearing Exam | \$0 – TruHearing Provider |

Medicare Blue PPO – Plan 7

\$5/\$15/\$30 Rx Coverage

- **Primary Care** \$15 copay
- **Specialist** \$15 copay
- **Urgent Care** \$25 copay - Worldwide
- **MRI, CAT, PET** \$0 copay
- **X-Rays** \$0 copay
- **Ambulatory Surgery** \$0 copay
- **Ambulance** \$15 copay - Worldwide
- **Chiropractic Care** \$15 copay
- **Part B Medical Drugs** \$0 copay

Medicare Blue PPO – Plan 7

\$5/\$15/\$30 Rx Coverage

- **Emergency Room** \$65 copay - Worldwide
- **Inpatient Hospitalization** \$0 copay - Unlimited Days
- **Home Health Care** \$0 copay
- **Cardiac Rehab** \$0 copay
- **PT, OT, ST** \$15 copay
- **Diabetic Supplies** \$0 copay
- **Out of Pocket Max** \$1,250 Medical In-Network & Out-Of-Network

Extras

- **Eyewear Allowance** \$100 annually
- **TruHearing Hearing Aids** \$499 or \$799 copay per aid
- **Silver & Fit** \$0 annually

Medicare Blue PPO – Plan 7

\$5/\$15/\$30 Rx Coverage

Initial Coverage:

Tier 1 - \$5 for a 30-day supply
Tier 2 - \$15 for a 30-day supply
Tier 3 - \$30 for a 30-day supply

1x copay for a 90-day supply at any participating pharmacy or mail order pharmacy (Express Scripts and Wegmans)

Annual out-of-pocket costs will be capped at **\$2,100** for Medicare Part D drugs
(New for 2026)

Catastrophic Coverage

\$0 member responsibility

- **2026 Rx Formulary:** medicare.excellusbcbs.com/prescriptions/drug-lists
 - *Medicare Plans through a Former Employer or Group*
 - *Three Tier Formulary with Prior Authorization and Step Therapy (PDF)*

Medicare Blue PPO National Network



- Reside anywhere in the United States
- Access to both BCBS providers and providers that accept Original Medicare
- Same cost share for In-Network and Out-Of-Network providers

BCBS website:

provider.bcbs.com

BCBS phone:

1-800-810-BLUE (2583)

Abbott Diabetes Care



- **Phone Number:** 1-800-680-6850
Website: www.choosefreestyle.com
- **\$0 copay for Glucometers or Blood Glucose Monitors**
- **\$0 copay for FreeStyle test strips and lancets**
- **Continuous Glucose Monitor (CGM) and Supplies:**
 - Dexcom Sensors
 - FreeStyle Libre Sensors (CGMs)
 - **Prior Authorization Required**
- **Insulin Pump**
 - Coverage through DME provider
 - **Prior Authorization Required**
- **Self-Injectable Insulin – Syringes - Needles**
 - Coverage through Medicare Part D Rx Benefit



- **Dedicated Phone Number: 1-888-797-7925**
- **Membership at fitness facility**
 - \$0 annual fee
 - National network = 15,000+ facilities
- **Optional Home Fitness Program**
 - \$0 annual fee
- **Great Support**
 - Comprehensive website
 - Quarterly newsletter
 - Dedicated Customer Service

TruHearing – Hearing Aid Coverage



- **Dedicated Phone Number: 1-855-205-5519**
(Monday – Friday / 8 am – 9 pm)
- **TruHearing Advanced**
\$499 copayment per aid
(32 channels / 6 programs / 8 styles)
Retail Cost: \$2,720
- **TruHearing Premium**
\$799 copayment per aid
(48 channels / 6 programs / 11 styles)
Retail Cost: \$3,250
- Comprehensive hearing exam (\$0 copay) with 1-year of follow up visits / 60-day trial / 80 batteries per hearing aid

Telemedicine / MDLIVE



Medical Services

- Allergies and Cold / Flu
- Sunburn and Rashes
- Joint Aches and Pain

Behavioral Health

- Addiction and Depression
- Bipolar and Eating Disorders
- Stress, Trauma and PTSD

Don't wait until you need it. There are three easy ways to activate Telehealth today.

WEB - mdlive.com/excellusmedicare

APP - Download the MDLIVE app

TEXT - EXCELLUS to 635483

Message and data rates may apply.)

VOICE - Call 1-888-670-6351 /TTY: 1-800-770-5531

Contact Information

- **Excellus BCBS Dedicated Customer Care Team**
1-800-872-4570
- **Excellus BCBS Medicare Member Website**
www.medicare.excellusbcbs.com
- **Social Security Administration**
1-800-772-1213
secure.ssa.gov



Thank You

