



**2009 Rates
Enclosed**

MEDICARE SUPPLEMENT INSURANCE

From the Name You Can Trust for Stability and Value...



BlueCross BlueShield of Illinois

Experience. Wellness. Everywhere.™

IMPORTANT NOTE!

A policy cannot be issued without all the required forms.

For prompt application processing, **PLEASE...**

- ❑ Be sure a **Policy Checklist** is completed in full and signed by both you and the applicant. The white copy must be returned with the application; the yellow copy stays with the applicant.
- ❑ Be sure a **Notice to Applicant Regarding Replacement** is completed and signed if the applicant is replacing coverage. For your convenience, this form can be found near the back of this salespack.
- ❑ Be sure the **Application** is completed in full and signed. Pay special attention to ***Section C*** to **ensure that the applicant includes his/her Medicare Claim Number.**

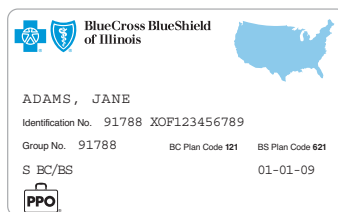
Thank You!

Mail application and all necessary forms to:

Blue Cross and Blue Shield of Illinois
P.O. Box 806162
Chicago, IL 60680-4123

Note to GA Producers: Please submit all new business to your General Agent.

Carry this Card for Reliable Protection & Peace of Mind



For more than 65 years, Illinois residents have turned to the comfort and security of Blue Cross and Blue Shield membership. We're proud that more than 350,000 of your Illinois neighbors age 65 and over (or under age 65 and disabled) count on the strength, stability, and affordable coverage offered by Blue Cross and Blue Shield of Illinois. When you choose Blue Cross and Blue Shield, you're assured of reliable coverage from a respected industry leader.

Carry your Blue Cross and Blue Shield of Illinois card with confidence. It's your assurance that *you* control your health care with complete freedom to choose your own doctors and specialists. All at a price you can afford! *In fact, when you see the premiums for our popular Med-Select option, you'll be surprised at just how affordable this coverage can be.*

Not only that, but today we're the largest health insurer in the state. We use our size and assets to provide you with value and outstanding customer service. When you need us, we'll be there for you — just as we have been for over half a century.

No matter where you go, our coverage will go with you. Our commitment to meeting the health insurance needs of our policyholders has made our card a recognized symbol of reliable health care coverage throughout Illinois, the U.S. and the world. Now, *that's* peace of mind.

Protect Yourself from the Bills Medicare Won't Pay

Although Medicare pays some of your doctor and hospital bills, it was never meant to cover all of them. If you rely on Medicare alone to pay all your bills, you could be left with substantial out-of-pocket costs should you become hospitalized or need extensive outpatient treatment in 2009.

Solid Protection Is Now More Important Than Ever

For 2009, Medicare's deductibles and copayments, the costs you must pay, are higher than ever before. The fact is, you could face over \$51,700 in bills that Medicare will not pay. And that doesn't even include doctor expenses under Medicare Part B or hospital expenses beyond 150 days.

Now and in the years ahead, you can rely on our plans to cover the costs Medicare leaves you to pay. Every time Medicare raises your share of the costs, your Blue Cross and Blue Shield policy will adjust to help cover those increases.

Choice of Plans

Blue Cross and Blue Shield of Illinois has a choice of Medicare Supplement plans:

- Plan C features benefits for the \$135 Part B deductible.
- Plan D covers at-home recovery benefits — which could be important should an illness or injury one day leave you unable to care for yourself.
- Plan E features preventive care benefits.
- Preferred Plan F, our most popular plan, pays your \$135 Part B deductible, plus 100% of your excess doctor charges. So even if your doctor charges more than the Medicare-approved amount, you won't pay a penny out of your own pocket! No other standardized Medicare Supplement plan offers more protection for your uncovered doctor and medical expenses.
- High Deductible Plan F is also available. It provides the same benefits as preferred Plan F but offers a lower premium by paying benefits after your out-of-pocket expenses reach \$2,000 per calendar year.

- We also offer Plan K and Plan L, which are lower-cost plan options. With these plans, you share in some of the costs for covered services until you meet an annual out-of-pocket limit. Once you meet the annual limit, the plan pays 100% of the Medicare deductibles and copayments for the rest of the calendar year.

Coverage for All Medicare-Eligible Charges

Blue Cross and Blue Shield provides coverage for all Medicare-eligible charges, including those for hospital care; office and home physician services; outpatient X-rays and lab tests; prosthetics and durable medical equipment; physical, radiation and speech therapy; chemotherapy; ambulance service; immunosuppressive drug therapy; and dressings, casts and braces.

Guaranteed Acceptance

You'll never have to answer health questions or take a physical exam. As long as you are an Illinois resident age 65 or over (or under age 65 and disabled) and are covered by Medicare Parts A and B, you will not be turned down for any reason — including past or present medical conditions.

Coverage Is Guaranteed Renewable

This means Blue Cross and Blue Shield will never cancel your coverage because of changes in your health. As long as you pay your premium on time, your policy can never be canceled.

No Lapse in Coverage if You Switch Plans

There's no need to feel "locked in" to any coverage you may have currently. Blue Cross and Blue Shield of Illinois makes it easy to switch with absolutely no lapse in coverage. There is no waiting period for pre-existing health conditions.

TWO Medicare Supplement Options, Standard Option or the Popular, Money-Saving Med-Select Option

When you purchase Medicare Supplement Plan C, Plan D, Plan E, preferred Plan F, Plan K or Plan L, you may choose either the Standard or Med-Select option.

Both options offer the same coverage. For example, with either option, if you select preferred Plan F, you will be covered for the \$135 Part B deductible and 100% of excess charges.

However, with Med-Select, your premiums will be less because you agree to use any one of our contracting

Med-Select hospitals for your non-emergency elective admissions.

If you do not use one of these hospitals, you pay the \$1,068 Part A deductible. It's that simple.

See whether a hospital you would use is on our list. If it is, this money-saving option may be right for you. No matter which option you choose, you can depend on Blue Cross and Blue Shield protection whenever and wherever you need medical care.

Please note: In order to be eligible to choose one of our Med-Select options, you must live within 30 miles of a contracting Med-Select hospital. If you do not live within 30 miles of a contracting Med-Select hospital, you are not eligible for this product.

For additional information, please consult our Med-Select Contracting Hospital Listing.

Save Money
with the
Med-Select
Option!

Medicare Supplement Coverage Overview (Recommended Plans)

	WHAT MEDICARE LEAVES YOU TO PAY	PLAN C COVERS	PLAN D COVERS	PLAN E COVERS	PLAN F/ HIGH DEDUCTIBLE PLAN F COVER	PLAN K COVERS	PLAN L COVERS
PART A Hospital¹ Care	\$1,068 first-day deductible ²	✓	✓	✓	✓	✓ (50% of the cost)	✓ (75% of the cost)
	Charges for the first three pints of blood	✓	✓	✓	✓	✓ (50% of the cost)	✓ (75% of the cost)
	\$267 per day for 61st – 90th day in the hospital	✓	✓	✓	✓	✓	✓
	\$534 per day for 91st – 150th day in the hospital	✓	✓	✓	✓	✓	✓
	100% of bills after day 150 in the hospital for an additional 365 days	✓	✓	✓	✓	✓	✓
Skilled Nursing Facility Care	\$133.50 per day for 21st – 100th day of a skilled nursing facility stay	✓	✓	✓	✓	✓ (50% of the cost)	✓ (75% of the cost)
PART B Physician Services and Supplies	\$135 yearly deductible	✓			✓		
	Generally, 20% of the Medicare-eligible charges for physician services and supplies	✓	✓	✓	✓	✓ (Generally 10% of the cost)	✓ (Generally 15% of the cost)
	Charges for the first three pints of blood	✓	✓	✓	✓	✓ (50% of the cost)	✓ (75% of the cost)
	Physician charges in excess of Medicare-approved amounts ³				✓		
Emergency Care in a Foreign Country	100% of bills	✓ ⁴	✓ ⁴	✓ ⁴	✓ ⁴		
At-Home Recovery	100% of bills for at-home recovery following a hospital stay		✓ ⁵				
Preventive Care	100% of bills			✓ ⁶			
Annual Out-of-Pocket Maximum					\$0/\$2,000 ⁷	\$4,620 ⁸	\$2,310 ⁸

Note: The Blue Cross and Blue Shield of Illinois policies offered here meet state and federal government requirements for standardized Plan C (Part B deductible), Plan D (at-home recovery), Plan E (preventive care), Plan F and High Deductible Plan F (Part B deductible and 100% of excess charges; \$2,000 annual out-of-pocket maximum with High Deductible Plan F), Plan K (\$4,620 annual out-of-pocket maximum), and Plan L (\$2,310 annual out-of-pocket maximum).

¹ Hospital does not include a nursing home, convalescent home, extended care facility or psychiatric hospital.

² Med-Select plans require that you use Blue Cross and Blue Shield of Illinois contracting Med-Select hospitals to receive coverage for the Medicare Part A deductible, except in the event of emergency admission.

³ By law, no physician may charge more than 115% of Medicare-approved amounts.

⁴ Plan pays 80% of Medicare-eligible expenses after a \$250 yearly deductible — \$50,000 lifetime total.

⁵ Plan pays up to \$40 per day for at-home recovery care — up to \$1,600 per year; this care can include help with eating, dressing, bathing and taking medicine.

⁶ Plan pays 100% of costs, up to \$120 a year for annual physical exams, hearing screenings, vaccines and other tests or preventive measures not covered by Medicare.

⁷ Our High Deductible Plan F offers the same benefits as our Plan F after you have paid a \$2,000 calendar-year deductible. Benefits from High Deductible Plan F will not begin until out-of-pocket expenses are \$2,000.

⁸ You will pay half the cost-sharing under Plan K and one fourth the cost sharing under Plan L for some covered services until you reach the annual out-of-pocket limit of \$4,620 for Plan K or \$2,310 for Plan L each calendar year. Once you reach the annual limit, both plans pay 100% of your Medicare copayments and coinsurance for the rest of the calendar year. However, this limit does NOT include charges from your provider that exceed Medicare-approved amounts (these are called “excess charges”), and you will be responsible for paying this difference in the amount charged by your provider and the amount paid by Medicare for the item or service. The out-of-pocket limit will increase each year to keep pace with inflation.

See Why More Than 350,000 Illinois Residents Age 65 and Over Choose Blue Cross and Blue Shield of Illinois

Choose Your Insurance Company Based on Price, Reputation and Service

Insurance companies in Illinois can only offer “standardized” Medicare Supplement plans that have been approved by the National Association of Insurance Commissioners. Since the standardized Plan C, Plan D, Plan E, preferred Plan F, High Deductible Plan F, Plan K and Plan L presented here must be the same as Plan C, Plan D, Plan E, Plan F, High Deductible Plan F, Plan K and Plan L offered by other companies, you should choose your insurance company based on price, reputation and service. Considering these points, we think you will find Blue Cross and Blue Shield of Illinois is your best choice for coverage.

Most Widely Recognized Coverage Available

The Blue Cross and Blue Shield card is recognized by more doctors and hospitals than any other card of its kind. You can depend on Blue Cross and Blue Shield protection at home or when travelling.

Commitment to Illinois

Our Medicare Supplement coverage has been helping Illinois residents since Medicare began in 1966. We're financially strong and proud of our “A+” (Superior) rating* from A.M. Best, one of the most experienced rating agencies of the insurance industry. Our strength and stability mean you can count on us — in 2009, 2010 and every year thereafter.

Freedom to Choose Your Own Doctors and Specialists

Unlike Medicare HMOs that restrict your choice of doctors and specialists, with your Blue Cross and Blue Shield of Illinois Medicare Supplement plan, you are always free to choose any doctor or specialist you wish. There are no restrictions and you never need referrals. You control your health care!

No Claim Forms

Blue Cross and Blue Shield of Illinois handles all the paperwork and pays your doctor or hospital directly. There are no claim forms for you to complete, in most cases.

30-Day Guarantee of Satisfaction

We want you to be 100% satisfied. If you should change your mind about your Blue Cross and Blue Shield of Illinois policy, even after you've made your first premium payment, simply return your policy and membership card to your insurance representative within 30 days. If no claims were filed, you will get a refund of your premium. You'll be under no further obligation.

Choice of Billing Options for Greater Ease and Flexibility

Blue Cross and Blue Shield of Illinois gives you added flexibility and choice when it comes to paying your premiums. You can choose to be billed every two months, every six months or once a year. Simply indicate on your application which option you prefer.

You also don't need to submit any payment with your application. Instead, when you receive your policy, an initial premium notice for the billing period that you've selected will automatically be enclosed. All you have to do is send in your first payment, payable by either check or money order, no later than the date requested, and your coverage will be activated. It's that easy!

And there's more. At the time you submit your initial payment, you can also decide to pay *future* premiums automatically with our monthly E-Z BlueSM Payment Option. Available at no extra cost, the E-Z Blue option allows you to authorize Blue Cross and Blue Shield of Illinois to withdraw the cost of premiums from your checking or savings account on a monthly basis. Nothing could be more convenient.

Whichever payment option you choose, you'll have the peace of mind that comes from knowing your valuable Blue Cross and Blue Shield Medicare Supplement coverage is always with you.

**As of November 2007*

A Word About Medicare Supplement Coverage

By law, Illinois Insurance Companies must offer standardized plans from among the 12 developed by the National Association of Insurance Commissioners. These plans are identifiable by the letters A through L.

Blue Cross and Blue Shield of Illinois, in accordance with state and federal standardization guidelines, began offering only standardized Medicare Supplement policies on January 1, 1992.

The cover of the enclosed outline of coverage shows the main features of the 12 standardized plans. Our Standard and Med-Select options are identical in benefits, but our Med-Select option requires that you use a Blue Cross and Blue Shield of Illinois contracting Med-Select hospital for non-emergency admissions to receive coverage for the \$1,068 Medicare Part A deductible.

The plans Blue Cross and Blue Shield of Illinois offers are Plan C, which offers benefits for the \$135 Part B deductible; Plan D, which offers benefits for at-home recovery; Plan E, which offers preventive care benefits; and preferred Plan F and High Deductible Plan F, which offer benefits for the \$135 Part B deductible and any Part B charges in excess of the eligible amounts. We also offer Plan K and Plan L, which are lower-cost plan options. With these plans, you share in some of the costs for covered services until you meet an annual out-of-pocket limit. These plans are in the unshaded area of the chart, and were chosen because they provide significant coverage at a reasonable cost. By law, Plan A, which provides the lowest level of benefits, must be offered by all insurance companies. Plan A and High Deductible Plan F are available as Standard option plans only. More information on these plans is contained on the inside pages of the enclosed Outline of Coverage.

Choose your Medicare Supplement insurance company based on price, company reputation and service.

Since all plans are required to offer a standardized package of benefits, our Standard Plan C, Plan D, Plan E, preferred Plan F, High Deductible Plan F, Plan K and Plan L must be identical to the Standard Plan C, Plan D, Plan E, Plan F, High Deductible Plan F, Plan K and Plan L offered by other companies in Illinois. Therefore, your choice of an insurance company should be based on price, service, reputation and added features. We believe you'll find Blue Cross and Blue Shield of Illinois to be superior in each of these areas.

If you have any questions about the enclosed Outline of Coverage, please feel free to contact your insurance representative.



BlueCross BlueShield of Illinois

Experience. Wellness. Everywhere.™

Exclusions and Limitations

The policy covers only Medicare-eligible charges, and coverage is limited to the services and supplies mentioned in the policy. Other services not covered are the following: treatment of injuries or illnesses which are related to employment or covered by an insurance or workers' compensation law; treatment covered or provided by Government Programs except for medical assistance under Article V, VI, or VII of the Illinois Public Aid Code; treatment for injuries or illnesses caused by war or any act of war whether declared or undeclared; treatment received from medical and dental departments maintained by or for an employer, a mutual benefit association, a labor union, a trustee, or similar entity; free treatment or treatment that would have been free if not insured under the policy; custodial care; services you no longer need; routine physical examinations; cosmetic surgery except oral surgery; eye exams, eyeglasses or contact lenses; hearing aids or exams for their prescription and fitting; routine foot care or the treatment of flat feet or subluxations of the foot; fees charged to complete a claim form or to compensate for a missed scheduled appointment; services performed by a member of your immediate family; and outpatient prescription drugs. Policy is cancelable only for non-payment of premium or material misrepresentation.

With our Med-Select coverage option, you must use one of the Blue Cross and Blue Shield of Illinois contracting Med-Select hospitals to receive benefits for the \$1,068 Part A deductible. (This does not apply in cases of emergency admission.) If you do not use a contracting Med-Select hospital for non-emergency admissions, you will be responsible for the Part A deductible.

REMINDER: Don't forget to complete the policy checklist with your client and return the original with the application!