

**COMPLEMENTARY  
COVERAGE II**

**THE MEDICARE SUPPLEMENTARY COVERAGE  
THAT TAKES UP WHERE MEDICARE LEAVES OFF**



**Blue Cross Blue Shield  
of Florida**

## **Blue Cross and Blue Shield of Florida, Inc. . . .**

Protecting over 1.6 million Floridians.

Florida's largest Medicare Supplementary insurer with nearly  
300,000 Floridians over 65.

*Now providing Florida's finest Medicare Supplementary coverage.*

*with . . .*

**UNLIMITED LIFETIME DOLLAR MAXIMUM**

# COMPLEMENTARY COVERAGE II

	<b>Medicare Program Does NOT Pay</b>	<b>Complementary Coverage II PAYS</b>
HOSPITAL DEDUCTIBLE	\$260 Per Benefit Period	\$260 Per Benefit Period
CO-INSURANCE 61ST-90TH DAY OF HOSPITAL CARE	\$65 Daily	\$65 Daily
60 DAY HOSPITAL LIFETIME RESERVE CO-INSURANCE	\$130 Daily	\$130 Daily
SKILLED NURSING FACILITY CO-INSURANCE	\$32.50 Daily	\$32.50 Daily
MEDICAL DEDUCTIBLE	\$75 Per Calendar Year	\$75 Not Paid
PHYSICIAN'S SERVICES	20% of Allowed Charges	20% of Allowed Charges

**BENEFITS  
AT A  
GLANCE**

**\$27.55  
per person,  
per month**

## **COMPLEMENTARY COVERAGE II TAKES UP WHERE MEDICARE LEAVES OFF**

### **COMPLEMENTARY COVERAGE II PAYS YOUR HOSPITAL DEDUCTIBLE IN FULL.**

Under Medicare A, you must pay the first \$260 (the deductible) for hospital expenses during each Benefit Period.

### **COMPLEMENTARY COVERAGE II PAYS YOUR MEDICARE A CO-INSURANCE IN FULL**

Under Medicare A, if you need more than 60 days of hospital care in the same Benefit Period, you must pay \$65 (co-insurance) each day from the 61st through the 90th day of care.

### **COMPLEMENTARY COVERAGE II PAYS YOUR LIFETIME RESERVE CO-INSURANCE IN FULL**

Medicare A does not pay \$130 (co-insurance) each day you use your Lifetime Reserve Days.

### **COMPLEMENTARY COVERAGE II PAYS YOUR SKILLED NURSING FACILITY CO-INSURANCE IN FULL**

Complementary Coverage II will pay in full your \$32.50 co-insurance each day for the 21st through 100th day not paid by Medicare A.

## COMPLEMENTARY COVERAGE II HELPS PAY PHYSICIAN AND MEDICAL EXPENSES

Medicare B will not pay 20 percent of the allowable charges for covered medical and physician services after you have paid the first \$75 (as a deductible) in covered expenses each calendar year.

Complementary Coverage II will pay the 20 percent of allowable charges not paid by Medicare B for all covered services during your lifetime.

## COMPLEMENTARY COVERAGE II ADDS TO YOUR LIFETIME MAXIMUM BENEFITS

After your Medicare benefits are exhausted and Medicare stops paying for hospital services, Complementary Coverage II will pay for your semi-private room and other covered services. **(There is no limit on the amount of money we pay during your lifetime.)**

## COMPLEMENTARY COVERAGE II PAYS OUT-OF-COUNTRY BENEFITS

Medicare does not pay for medical services you receive outside the United States. Complementary Coverage II **will pay** for medically necessary emergency services while you are traveling outside the United States. Benefits paid are equal to what Medicare would have paid for these emergency services if you had received them within the United States.

## **DON'T DELAY**

- Complete the enclosed application.
- Be sure to sign the application.
- Mail your application in the enclosed envelope.
- An additional application is provided for your spouse or a friend.

**SEND NO MONEY NOW.** We will bill you after you've been accepted.



## **HOW MUCH IT COSTS**

Complementary Coverage II costs \$27.55 per month, per person.

## **HOW TO APPLY FOR COMPLEMENTARY COVERAGE II**

If you are 65 years old or older, and have Medicare A and B coverage, you may qualify for Complementary Coverage II benefits. You may apply three months prior to your 65th birthday.

## YOUR BLUE CROSS AND BLUE SHIELD IDENTIFICATION CARD



Subscriber's Name

Contract Number

Group Number

Contract Benefits

RR BC SX BS MM RX

**SAMPLE**

**America's Number One Get-Well Card**

## **SERVICES NOT COVERED BY COMPLEMENTARY COVERAGE II**

- Private duty nursing
- Blood
- Most dental care or dentures
- Eye refractions, eyeglasses and examinations for eyeglasses
- Hearing aids, hearing and ear examinations for hearing aids
- Routine foot care
- Services provided for job related injury or illness, or for war sustained illness or injury
- Benefits for cosmetic care except in case of accident, or care required to restore normal bodily function
- Routine immunizations and physical examinations
- Travel, including unnecessary ambulance services
- Any drugs or medications provided to you if you are not an inpatient in a hospital
- Care in rest homes, health resorts and custodial care
- Any services where you have no liability to pay
- Non-emergency services in a hospital which does not participate in the Medicare Program
- Services determined medically unnecessary by Medicare
- Services not covered by Medicare (except medically necessary emergency services while traveling outside the United States will be covered)



- Physician charges for covered services you receive which are more than the allowable amount determined by Medicare
- Skilled nursing home costs beyond the Medicare daily co-insurance, custodial nursing home care costs, and intermediate nursing home care costs
- Home health care above the number of visits covered by Medicare
- Ambulatory surgical facility costs
- Conditions which manifest themselves and you received medical advice, or treatment was received or recommended by a physician within six months prior to the effective date, will not be covered during a period of six months after the effective date of your coverage.
- Charges for covered services you receive which are more than the allowable amount determined by Medicare B

**Refer to Your Medicare Handbook for a list of services not covered by Medicare.**

## HOW TO FILE CLAIMS

**In most instances, you won't have to file a separate claim for Complementary Coverage II benefits. It will be done automatically when you file your Medicare claim.**

Complementary Coverage II claim payments are made separately from Medicare payments. Usually, whether payments are made to the hospital, to a doctor or to you, you will receive statements from both Medicare and Blue Cross and Blue Shield of Florida showing exactly what was paid.

Refer to Your Medicare Handbook for complete details on filing Medicare claims.

## OUR GUARANTEE

**After you receive your contract and Identification Card, read them carefully. If for any reason you're not satisfied with the program, let us know within 30 days. We will cancel your Complementary Coverage II contract with no questions asked.**

If you rely on Medicare for your health care needs, you could be caught short. Nearly 300,000 Floridians have realized that Medicare pays less than \$40 of the average \$100 medical bill. \*

Our Complementary Coverage II takes up where your Medicare coverage leaves off. Complementary Coverage II pays in full your Medicare hospital deductible and co-insurances. And we help pay physician and medical expenses.

**APPLY TODAY!**

\* According to a May, 1979, American Economics Association publication.

