

Cost-share when Medicare is your primary payor

2024 Blue Cross and Blue Shield Service Benefit Plan - FEP Blue Focus Section 9. Coordinating Benefits With Medicare and Other Coverage

Please review the following examples illustrating your cost-share liabilities when Medicare is your primary payor **and** your provider is in our network and participates with Medicare compared to what you pay without Medicare. Please do not rely on this chart alone but read all information in this section of the brochure. You can find more information about how our Plan coordinates with Medicare in our *Medicare and You Guide for Federal Employees* available online at www.fepblue.org.

Benefit Description: Deductible

FEP Blue Focus You Pay **Without** Medicare Parts A & B: \$500-Self; \$1,000-Family
FEP Blue Focus You Pay **With** Medicare Parts A & B: \$500-Self; \$1,000-Family

Benefit Description: Catastrophic Protection Out-of-Pocket Maximum

FEP Blue Focus You Pay **Without** Medicare Parts A & B: \$9,000-Self; \$18,000-Family
FEP Blue Focus You Pay **With** Medicare Parts A & B: \$9,000-Self; \$18,000-Family

Benefit Description: Part B Premium Reimbursement

FEP Blue Focus You Pay **Without** Medicare Parts A & B: N/A
FEP Blue Focus You Pay **With** Medicare Parts A & B: N/A

Benefit Description: Primary Care Provider

FEP Blue Focus You Pay **Without** Medicare Parts A & B: \$10 or 30%
FEP Blue Focus You Pay **With** Medicare Parts A & B: \$0.00

Benefit Description: Specialist

FEP Blue Focus You Pay **Without** Medicare Parts A & B: \$10 or 30%
FEP Blue Focus You Pay **With** Medicare Parts A & B: \$0.00

Benefit Description: Inpatient Hospital

FEP Blue Focus You Pay **Without** Medicare Parts A & B: 30%
FEP Blue Focus You Pay **With** Medicare Parts A & B: \$0.00

Benefit Description: Outpatient Hospital

FEP Blue Focus You Pay **Without** Medicare Parts A & B: 30%
FEP Blue Focus You Pay **With** Medicare Parts A & B: \$0.00

Benefit Description: Incentives Offered

FEP Blue Focus You Pay **Without** Medicare Parts A & B: N/A
FEP Blue Focus You Pay **With** Medicare Parts A & B: N/A