

Independence 



Your Guide to Blue Medicare Advantage RetireSecure PPO

Effective January 1, 2027

IBX

Never stop caring

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Welcome to your MEDICARE ADVANTAGE PLAN

We’re excited to welcome you to your Blue Medicare Advantage RetireSecure PPO plan from Independence Blue Cross (IBX). You’ll have access to a large network of health care providers, hospitals, and more, with a rich suite of benefits designed to take care of all aspects of your health.

For more than 85 years, we’ve proudly served our members and community. We’re happy to have you as a member.

This guide is designed to give you an introduction to how your health plan works, including:

- Your medical benefits
- Your prescription drug benefits
- Valuable plan extras
- And more!

To learn more about your coverage and get the most from your plan, visit **ibxmedicare.com/RetireSecure** for plan basics, helpful resources, and important information about your benefits.

If you have any questions or concerns, please call our Group Member Help Team at **1-877-456-8002** (TTY/TDD: **711**), Monday through Friday from 8 a.m. to 9 p.m.

We look forward to serving you.

With care,
Independence Blue Cross



Covered services	Your costs
Maximum out-of-pocket (MOOP) ¹ <i>Out-of-network maximum includes combined in/out network</i>	In network: \$6,700 In- and out-of-network: \$10,000
Lifetime maximum	N/A
Plan deductible	In- and out-of-network: \$0
Ambulance (non-emergent requires prior authorization)	
Ground	In- and out-of-network: \$75 copay per one-way trip
Air	In- and out-of-network: \$75 copay per one-way trip
Chiropractic/spinal manipulations	
Medicare-covered chiropractic care	In network: \$15 copay Out of network: 20% coinsurance
Physician office visits	
Primary care visit	In network: \$10 copay Out of network: 20% coinsurance
Specialist visit ²	In network: \$40 copay Out of network: 20% coinsurance
Virtual care through Teladoc Health	
Telemedicine	In network: \$0 copay
Teledermatology	In network: \$0 copay
Telebehavioral health/substance abuse	In network: \$0 copay
Durable medical equipment (DME)	
DME, prosthetics, and orthotics	In- and out-of-network: 10% coinsurance
Liquid and gas oxygen	In- and out-of-network: 10% coinsurance
Diabetic supplies	
Supplies and monitors	In- and out-of-network: \$0 copay
Shoes and inserts	In- and out-of-network: \$0 copay
Insulin pump	In- and out-of-network: \$0 copay
Emergency care	
Emergency care (copay waived if admitted)	In- and out-of-network: \$100 copay
Worldwide coverage ³ (copay waived if admitted)	In- and out-of-network: \$100 copay

Covered services	Your costs
Hearing services	
Hearing aids through TruHearing® (rechargeable hearing aid options)	In network: \$699 copay per Advanced Digital aid; \$999 copay per Premium Digital aid Out of network: 95% coinsurance
Hearing aid fittings and evaluations through TruHearing	In network: \$0 copay for unlimited hearing aid fittings and evaluations for the first year Out of network: 95% coinsurance
Routine hearing exam through TruHearing	In network: \$0 copay once every year Out of network: 95% coinsurance
Medicare-covered hearing exams	In network: \$40 copay Out of network: 20% coinsurance
Home health care	
Home health care	In network: \$0 copay Out of network: 20% coinsurance
Inpatient hospital	
Inpatient hospital	In network: \$250 copay per day for days 1 – 5 per admission Out of network: 20% coinsurance
Inpatient mental health/substance abuse	
Inpatient mental health/substance abuse <i>190-day lifetime maximum applies to treatment received in a Medicare-approved mental health facility</i>	In network: \$250 copay per day for days 1 – 5 per admission Out of network: 20% coinsurance
Medicare Part B drugs (prior authorization is required for certain Part B injectable drugs)	
Insulin	In- and out-of-network: 20% coinsurance with a maximum copay of \$35
All other drugs	In- and out-of-network: 20% coinsurance
Medicare preventive care	
Medicare preventive care ⁴	In network: \$0 copay Out of network: 20% coinsurance
Outpatient diagnostic procedures/lab	
Outpatient diagnostic procedures/lab	In network: \$0 copay Out of network: 20% coinsurance
Outpatient mental health services	
Outpatient mental health services	In network: \$40 copay Out of network: 20% coinsurance
Outpatient radiology/X-ray services	
Advanced imaging (MRI/CT scan)	In network: \$80 copay Out of network: 20% coinsurance
Standard imaging (routine/diagnostic)	In network: \$10 copay Out of network: 20% coinsurance
Outpatient rehabilitation therapy	
Physical, speech, occupational therapy	In network: \$40 copay Out of network: 20% coinsurance
Cardiac, pulmonary rehabilitation	In network: \$0 copay for cardiac; \$35 copay for pulmonary Out of network: 20% coinsurance

Covered services	Your costs
Outpatient substance abuse	
Outpatient substance abuse	In network: \$40 copay Out of network: 20% coinsurance
Opioid treatment services	
Opioid treatment services	In network: \$40 copay Out of network: 20% coinsurance
Outpatient hospital	
Observation stay	In network: \$100 copay Out of network: 20% coinsurance
Outpatient surgery	In network: \$100 copay Out of network: 20% coinsurance
Outpatient ambulatory surgical center	In network: \$100 copay Out of network: 20% coinsurance
Podiatry services	
Medicare-covered podiatry	In network: \$10 copay Out of network: 20% coinsurance
Routine podiatry (12 visits/calendar year) ⁵	In network: \$10 copay Out of network: 20% coinsurance
Radiation therapy	
Radiation therapy	In network: \$40 copay Out of network: 20% coinsurance
Dental	
Medicare-covered dental services	In network: \$40 copay Out of network: 20% coinsurance
Vision	
Routine eye exam (one exam every year)	In- and out-of-network: \$0 copay
Eyewear (one pair of contact lenses or one pair of eyeglass frames and lenses are covered every year)	
Eyewear purchased from the Davis Vision collection	In network: \$0 copay Out of network: 80% coinsurance
Eyewear purchased from Visionworks®	In network: \$200 allowance Out of network: 80% coinsurance
Eyewear purchased at a Davis Vision network provider	In network: \$100 allowance Out of network: 80% coinsurance
Contact lenses purchased instead of eyewear	In network: \$100 allowance Out of network: 80% coinsurance
Medicare-covered exam	In network: \$40 copay Out of network: 20% coinsurance

Covered services	Your costs
Skilled nursing facility	
Skilled nursing facility ⁶ (100 days/benefit period) ⁷	In network: \$0 copay per day for days 1 – 20, \$40 copay per day for days 21 – 100 Out of network: 20% coinsurance
Urgently needed services	
Retail health clinic	In- and out-of-network: \$50 copay
Urgent care center	In- and out-of-network: \$50 copay
Worldwide coverage ³ (copay waived if admitted)	In- and out-of-network: \$50 copay
Other services	
Medicare-covered acupuncture	In network: \$10 copay Out of network: 20% coinsurance
Fitness program	One Pass®
Caregiver support services	Carallel
IBX health rewards	Earn rewards on your IBX Care Card for completing healthy activities

1 In-network maximum out-of-pocket (MOOP) includes deductibles, copays, and coinsurance. Combined in-network and out-of-network MOOP includes deductibles, copays, and coinsurance. Visit limits are combined across in-network and out-of-network benefits. Routine care does not count towards the MOOP.

2 Not all specialist services will be available via telehealth.

3 Worldwide emergency coverage available. The amounts paid for emergency and urgently needed care services received outside the United States do not count toward the MOOP.

4 For preventive services, if a separate additional non-preventive evaluation and/or service is received, a copay will apply. The copay amount depends on the provider type or place of service.

5 Combined in- and out-of-network.

6 No prior hospitalization required in order to obtain services from a skilled nursing facility (SNF). In-network and out-of-network maximum day period combined.

7 A Medicare benefit period begins the day a member goes into a hospital or SNF. The Medicare benefit period ends when they haven't received any inpatient hospital care (or skilled care in a SNF) for 60 days in a row. If the member goes into a hospital or a SNF after one Medicare benefit period has ended, a new Medicare benefit period begins. There is no limit to the number of Medicare benefit periods.

Valuable plan extras



Telemedicine through Teladoc Health

It's not always easy or convenient to go to a health appointment. With Teladoc Health, you can get virtual care from wherever you are...with a **\$0 copay!**

- **General Medical 24/7 Care Visits:** You have 24/7 access to board-certified doctors who can diagnose and treat non-emergency conditions such as sinus infections, flu, sore throats, allergies, and pink eye.
- **Mental health care:** Schedule visits with a licensed therapist, psychologist, or psychiatrist and get support for depression, anxiety, stress, grief, and more.
- **Dermatology:** Connect online with board-certified dermatologists who can provide timely answers to questions about new or chronic skin conditions like rashes, acne, eczema, and rosacea.



Registered Nurse Health Coaches

You can call an IBX Registered Nurse Health Coach anytime. They are ready to listen and give you the best advice for your situation.

Our nurses and case managers are specially trained and experienced in helping people with different health needs. They can see your health history, such as your conditions, medications, tests, and treatments, so they can give you personalized and accurate advice. They can also connect you with other health resources and services if you need them.

To get started, call **1-855-332-3102 (TTY/TDD: 711)** 24 hours a day, seven days a week.



Behavioral Health Care Navigators

Behavioral Health Care Navigators are available to help members assess their needs, understand treatment options, find in-network providers, and connect to the right behavioral health resources and support.

Connect with care quickly by calling **1-844-233-7745 (TTY/TDD: 711)** 24 hours a day, seven days a week.



Free fitness membership through One Pass®

Stay healthy with a variety of physical, social, and mental fitness programs! Find your fit:

- **At the gym** — Access a large national fitness network, including YMCAs; boutique studios; yoga, Pilates, and spinning studios; and more.
- **At home** — Choose from a selection of on-demand and live-streamed online fitness classes. The workout builder will recommend routines for your interests and fitness levels.
- **With friends** — Participate in virtual or in-person community fitness activities at recreation areas, community centers, parks, and more. Search for local community events through the One Pass platform.
- **In the kitchen** — Get fresh meals delivered at home from Mom's Meals. Order from tasty menus designed by dietitians and professional chefs. Costs for meals apply; free shipping is available.

Valuable plan extras



Caregiver support through Carallel

Are you providing care for a loved one? Is a loved one providing care for you? IBX Medicare Advantage plan members can access a wealth of caregiver support services from Carallel at **no cost**.

Get caregiver support today by visiting app.carallel.com/ibxmedicare, or call **1-877-715-0877** (TTY/TDD: **711**) to speak with a caregiving expert. The first time you visit, you'll need to register. It only takes a few minutes, and you'll need your IBX member ID number, or the IBX member ID number of the member you are a caregiver for. You can find it on their member ID card.



Coverage when you travel with the BlueCard® program

The BlueCard program gives you access to your health care benefits while traveling to places within the national Blue Cross® and Blue Shield® service areas. You'll pay the in-network cost-sharing level for covered services when using participating providers.

BlueCard is a national program offered through the Blue Cross and Blue Shield Association, an association of independent Blue Cross® and Blue Shield® plans.

To learn more, call **1-800-810-BLUE (2583)** or visit bcbs.com.



IBX health rewards

Doing the right thing for your health can be very rewarding. As an IBX Medicare Advantage member, you can earn up to **\$250 in rewards** for completing certain health activities, with rewards loaded directly to your IBX Care Card.

It starts with your Annual Wellness Visit, available at no cost. Complete it to unlock your first reward. From there, you can earn even more by participating in additional health-focused activities throughout the year.

Visit ibxmedicare.com/carecard for more information.



Benefit vendor comparison

To help you prepare for the new plan year, we’ve outlined any vendor changes in the chart below. You’ll find a quick overview of each change and what it means for you.

Service / Benefit	Current	New	What this means for you
NEW! Caregiver support	Not covered	Carallel	Caregiver support will be available through Carallel at a \$0 copay.
Fitness	SilverSneakers	One Pass	Review the available locations and instructions before using the benefit.
Health rewards	Covered	IBX health rewards (administered by InComm)	Earn up to \$250 in rewards through IBX health rewards. Review your new plan materials to learn about eligible activities and how to redeem rewards.
Hearing	Hearing Care Solutions	TruHearing	Use TruHearing when accessing covered hearing services and confirm participating providers.
Mail order	RxChoice Home Delivery	OptumRx® Home Delivery	Review transition instructions for refills, deliveries, and specialty medications to help avoid delays.
Meals	Healthy Meals	Not covered	A meals benefit will not be covered under the new plan.
Pharmacy Benefit Manager (PBM)	Carelon	Optum	A PBM helps manage your prescription coverage, including covered medications and pharmacy services. This means your Formulary, pharmacy network, and utilization rules may change. Review your medications to ensure they’re covered. You will receive your Formulary prior to January 1, 2027.
Telemedicine	LiveHealth Online	Teladoc Health	Create a new account and review the updated scheduling process and contact information.
Vision	Blue View Vision	Davis Vision	Use Davis Vision when accessing covered vision services and confirm participating providers.

Drug benefit highlights

Covered services	Your costs
Deductible	\$0
Initial Coverage	After members meet their annual deductible, they pay the following out-of-pocket costs until they reach the TrOOP cost (paid by members and their health plan)
30-day supply at network retail pharmacy (Preferred/Standard pharmacy)	
Tier 1 Preferred Generic Drugs	\$0 copay — Preferred \$0 copay — Standard
Tier 2 Generic Drugs	\$5 copay — Preferred \$10 copay — Standard
Tier 3 Preferred Brand Drugs	\$5 copay — Preferred \$15 copay — Standard
Tier 4 Non-Preferred Drugs	\$20 copay — Preferred \$30 copay — Standard
Tier 5 Specialty Drugs	\$20 copay — Preferred \$30 copay — Standard
90-day supply at network retail pharmacy (Preferred/Standard pharmacy)	
Tier 1 Preferred Generic Drugs	\$0 copay — Preferred \$0 copay — Standard
Tier 2 Generic Drugs	\$15 copay — Preferred \$30 copay — Standard
Tier 3 Preferred Brand Drugs	\$15 copay — Preferred \$45 copay — Standard
Tier 4 Non-Preferred Drugs	\$60 copay — Preferred \$90 copay — Standard
Tier 5 Specialty Drugs	N/A
90-day supply at network mail order pharmacy (Preferred pharmacy)	
Tier 1 Preferred Generic Drugs	\$0 copay
Tier 2 Generic Drugs	\$5 copay
Tier 3 Preferred Brand Drugs	\$5 copay
Tier 4 Non-Preferred Drugs	\$20 copay
Tier 5 Specialty Drugs	N/A
Excluded Covered Drugs	
Excluded Covered Drugs	Your prescription drug plan covers certain drugs that are not typically covered under Medicare Part D. These drugs do not count towards your TrOOP limit.
True Out-of-Pocket Cost (TrOOP)	
TrOOP	\$2,400

Using an IBX Medicare Advantage plan



How to find in-network care

As a Blue Medicare Advantage RetireSecure PPO plan member, you may use in-network or out-of-network health care providers, but will generally save money using in-network providers. The IBX provider network is one of the largest in our region, so finding in-network providers is usually easy.

How to find an in-network health care provider

Our online *Find a Provider* tool makes finding in-network health care providers easy.

1. Visit ibxmedicare.com/providerfinder.
2. Sign in or search by location.
3. Narrow the search by typing in a specific doctor, specialty, hospital, or condition, and easily sort and refine results by:
 - Distance
 - Gender
 - Languages spoken
4. Select a provider's profile to view additional information, such as affiliations, hospital admitting privileges, medical school attendance, residency completion, board certification status, and quality recognitions.



How to find a preferred pharmacy

Pharmacies in the IBX network are classified as either preferred or standard pharmacies.

Preferred pharmacies include:

- CVS Pharmacy (including in Target)
- ShopRite
- Other independent pharmacies
- Giant
- Wegmans

Standard pharmacies include:

- ACME Markets
- Walmart
- Costco Wholesale
- Walgreens

You can find a nearby pharmacy at ibxmedicare.com/providerfinder.



How to use our Formulary

Your plan's *Formulary* is a list of covered drugs. It states which drug tier each prescription medication is on and explains any limitations. Knowing which tier a drug is on can help you understand how much you will pay for it. View it online at ibxmedicare.com/RetireSecure.

Your plan also covers certain drugs that are not typically covered by Medicare Part D. To learn more, view your plan's Excluded Covered Drug List at ibxmedicare.com/RetireSecure.

Using an IBX Medicare Advantage plan



How to use our member portal

Log into our secure member site at ibx.com/login to easily see all your health plan information in one place, find resources, and much more, including:

- Checking your benefits
- Looking up claims and statements
- Viewing, printing, or sharing your member ID card or ordering a new one



How to get connected

Sign up to receive email or text messages from IBX.

Get personalized reminders about your health, notifications about important plan information, and ways to maximize your benefits.

Sign up at ibxmedicare.com/connect.



On holidays, your call may be sent to voicemail, but we'll call you back.

One Pass is a voluntary program offered by an independent company. The One Pass program varies by plan/area. Information provided is not medical advice. Consult a health care professional before beginning any exercise program.

Teladoc Health and the practitioners accessible through Teladoc Health are independent companies and contractors not affiliated with Independence Blue Cross. Please consult a physician for personalized medical advice. Always seek the advice of a physician or other qualified health care provider with any questions regarding a medical condition.

Vision benefits are offered by Independence Assurance Company and administered by Davis Vision, an independent company.

TruHearing® is a registered trademark of TruHearing, Inc., an independent company.

Independence Blue Cross (IBX) has contracted with InComm Healthcare & Affinity, Inc. (InComm), an independent company, to manage the IBX Care Card. This offer is only available to eligible Medicare Advantage beneficiaries who complete a health care activity. This offer may not be redeemed for cash (unless required by law). InComm, at its discretion, may substitute retailers and products. Terms and conditions may apply for the IBX Care Card. To learn more, visit mybenefitscenter.com. Products not covered under rewards include, but are not limited to, stamps, lottery, alcohol, firearms, and tobacco.

Carallel is an independent company that provides caregiver services.

Other pharmacies are available in our network.

This is not a complete description of benefits.



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Independence Blue Cross offers products through its subsidiaries and affiliates including Independence Assurance Company, Independence Hospital Indemnity Plan, Keystone Health Plan East and QCC Insurance Company — independent licensees of the Blue Cross and Blue Shield Association.