

## Retiree Health Plans Comparison Chart

### Nursing Care

Benefit	You pay with Original Medicare	You pay with Humana Medicare Advantage (effective January 1, 2012)	You pay with HealthSelect Secondary and Medicare (HealthSelect and Medicare coordinate benefits for you)	You pay with a GBP HMO and Medicare (Both Community First and Scott & White coordinate benefits with Medicare for you)	You pay with KelseyCare Medicare Advantage HMO
<b>Calendar year deductible</b>	\$140	None	\$200 per individual \$600 per family	None	None
<b>Skilled Nursing Facility</b>	<ul style="list-style-type: none"> <li>Days 1-20: \$0 (3-day hospital stay required);</li> <li>Days 21-100: \$141.50 coinsurance per day</li> <li>Per benefit period<sup>2</sup></li> </ul>	<ul style="list-style-type: none"> <li>\$0 up to 100 days per benefit period (no 3-day hospital stay is required)</li> <li>You pay 100% after 100 days</li> </ul>	<ul style="list-style-type: none"> <li>\$0<sup>1</sup> – 30%<sup>3</sup></li> <li>60-day/\$6,000 max per calendar year</li> <li>No deductible</li> <li>You pay 100% after 60 days</li> </ul>	<ul style="list-style-type: none"> <li>\$0 – 20%<sup>3</sup></li> <li>60-day max per plan year</li> <li>You pay 100% after 60 days</li> </ul>	<ul style="list-style-type: none"> <li>Days 1-100: \$0 copayment per day</li> <li>Plan covers up to 100 days each benefit period<sup>5</sup></li> <li>No prior hospital stay is required.</li> </ul>
<b>Home health care</b>	\$0	\$0	\$0	\$0 – 20% <sup>3</sup>	\$0
<b>Hospice</b>	<ul style="list-style-type: none"> <li>5% of the Medicare-approved amount for inpatient respite care</li> <li>\$5 copay for pain management drugs</li> </ul>	Same benefits as under Original Medicare	<ul style="list-style-type: none"> <li>\$0<sup>2</sup> – 30%<sup>3</sup></li> <li>\$18,000 lifetime limit</li> </ul>	\$0 – 20% <sup>3</sup>	<ul style="list-style-type: none"> <li>Same benefits as under Original Medicare</li> <li>You must receive care from a Medicare-certified hospice</li> </ul>
<b>Private Duty Nursing</b>	Does not cover	30% Humana pays a maximum benefit of \$8,000 per year	<ul style="list-style-type: none"> <li>30%<sup>1</sup></li> <li>\$8,000 PY maximum</li> <li>\$40,000 lifetime maximum</li> <li>Out-of-pocket maximum does not apply to this benefit</li> <li>Preauthorization is required</li> </ul>	\$0 – 20% <sup>3</sup>	Does not cover

<sup>1</sup> After payment of deductible. HealthSelect note: Medicare and HealthSelect deductibles run concurrently. Member may be responsible for some charges when the provider does not accept Medicare assignment, or does not have a Par Plan contract with BCBSTX.

<sup>2</sup> A “benefit period” starts the day you go into the hospital. It ends after 60 days in a row without returning to hospital care. If you go into the hospital after one benefit period has ended, a new benefit period will begin. You must pay the inpatient hospital deductible for each benefit period. There is no limit to the number of benefit periods you may have.

<sup>3</sup> Payment amount is dependent upon the coordination of benefits (COB) between your carrier (HealthSelect, Community First, Scott & White, KelseyCare MA HMO) and Original Medicare. Sometimes this means your expense is \$0, but charges will vary depending upon COB. Please reference your Summary of Benefits for more information.