Reference Code 15FBC9863

Dear Penn State Retiree:

Thank you for considering enrollment in Freedom Blue PPO, a Medicare Advantage Preferred-Provider Organization (PPO) backed by the experience and financial strength of Highmark Blue Shield.

Freedom Blue PPO gives you broad coverage for virtually every health care service you may need and the freedom to choose your own doctors and hospitals anywhere in the U.S.

**Freedom Blue PPO gives you freedom of choice**
Freedom Blue PPO offers exactly what you want from health care coverage – the freedom to see the doctors, specialists and hospitals of your choice, inside and outside the network, without referrals:

- When you go to Medicare-eligible providers or hospitals in the network or in the hundreds of counties throughout the U.S. that are considered part of the Blue travel program, most eligible services are covered at 100% after you pay a small copayment or coinsurance.

- When you go to Medicare-eligible providers or hospitals in one of the few counties that are not considered part of the Blue travel program, most eligible services are covered at 100% after you pay a small copayment or coinsurance.

- When you go to doctors and hospitals outside of the network, most eligible services are still covered at 90% after you pay an annual deductible – the lower, out-of-network level.

Freedom Blue PPO gives you access to one of the largest Medicare Advantage PPO provider networks. It’s easy to find a participating provider, too. Just call Customer Service or visit the “Find a Doctor or Rx” section in the Highmark website at provdir.highmarkblueshield.com.

**Travel with confidence**
If you travel, Freedom Blue PPO offers a valuable feature – you can use participating Medicare Advantage Blue Cross and/or Blue Shield doctors and hospitals at Blue Plans in 35 other states and Puerto Rico – and your care is covered at the low, in-network costs! And if you travel to a location where no participating Blue Plan providers are available, you may see any Medicare-eligible doctor or hospital of your choice and still only pay the low, in-network costs. And as always, emergent and urgent care is covered worldwide!
Enjoy more benefits, including preventive and hearing care
As a Freedom Blue PPO member, you’re covered for doctor visits, hospital stays, outpatient services, emergency care and even hearing exams and hearing aids. You’ll also enjoy valuable preventive care benefits, including an annual routine physical exam, immunizations and important screenings.

Keep yourself and your budget in shape
Take advantage of full access at one of the participating senior-friendly fitness centers located throughout the U.S. through the award-winning SilverSneakers® Fitness Program. Use the center’s equipment on your own or join a SilverSneakers class designed especially for people with Medicare. There’s no cost for any services you use.

Save money on prescription drugs
Enjoy enhanced Part D Medicare Prescription Drug Coverage with Freedom Blue PPO. All generic and brand name drugs allowed by Medicare are covered.

Personal, knowledgeable Customer Service
Friendly dedicated Customer Service representatives offer you outstanding support. If you have any questions about your benefits, providers, Medicare, or how Freedom Blue PPO works, call toll-free any day of the week between 8:00 a.m. and 8:00 p.m.

Have questions now – call toll-free
If you have any questions now about Freedom Blue PPO, please call 866-918-5285, TTY users call 711, between 8:00 a.m. and 8:00 p.m., seven days a week.

Great benefits, network-level coverage throughout the country, a fitness center membership and the peace of mind knowing your coverage is backed by Highmark Blue Shield, a name people know and trust for over 75 years ... there are many reasons to have Freedom Blue PPO. We look forward to serving you in the near future.

Sincerely,

Jill Hollingshead
Sales Manager, Highmark Senior Markets

Highmark Inc. is a PPO plan with a Medicare contract. Enrollment in Highmark Inc. depends on contract renewal. The benefit information provided is a brief summary, not a complete description of benefits. For more information, contact the plan. Limitations, copayments, and restrictions may apply. Benefits, formulary, pharmacy network, provider network, premium and/or co-payments/co-insurance may change on January 1 of each year.
EGHP_14_0713
Dear Plan Participant:

Thank you for considering enrollment in Freedom Blue PPO, which is a Medicare Advantage Preferred-Provider Organization (PPO) backed by the experience and financial strength of Highmark Blue Shield.

Freedom Blue PPO gives you broad coverage for virtually every health care service you may need and the freedom to choose your own doctors and hospitals anywhere in the United States.

**Freedom Blue PPO gives you access to a national network of participating providers**

That’s because Blue Plans across the country share their Medicare Advantage PPO networks. You may see any Blue Cross and/or Blue Shield Medicare Advantage PPO contracted doctor or hospital in the United States and receive covered services at the higher, network level of reimbursement.

Freedom Blue PPO members also may choose to see providers outside of our shared Medicare Advantage network. However, if a member chooses to go to a non-participating provider when a participating Blue Cross and/or Blue Shield Medicare Advantage PPO contracted provider is available in that location, covered services will be reimbursed at the lower out-of-network level.

If a Freedom Blue PPO group member lives or travels in a location where there are no participating Blue Cross and/or Blue Shield Medicare Advantage PPO providers, the member can go to any Medicare-eligible provider and receive covered services at the higher, network level of reimbursement. Members should confirm that the provider is Medicare-eligible before receiving services. Highmark Inc. will not pay for any service received from a provider who has opted out of the Medicare program. Emergency and urgently needed care is always reimbursed at the higher, network level, regardless of where the care is received.

**Enjoy more benefits, including preventive and hearing care**

As a Freedom Blue PPO member, you’re covered for doctor visits, hospital stays, outpatient services, emergency care, even hearing exams and hearing aids. You’ll also enjoy valuable preventive care
benefits, including an annual routine physical exam, immunizations and important screenings.

**Keep yourself and your budget in shape**

Take advantage of full access at one of the participating senior-friendly fitness centers located throughout the United States through the award-winning SilverSneakers’ Fitness Program. Use the center’s equipment on your own or join a SilverSneakers class designed especially for people with Medicare. There’s no cost for any services you use.

**Save money on prescription drugs**

Enjoy enhanced Part D Medicare Prescription Drug Coverage with Freedom Blue PPO. All generic and brand name drugs allowed by Medicare are covered.

**Personal, knowledgeable Customer Service**

Friendly, dedicated Customer Service representatives offer you outstanding support. If you have any questions about your benefits, providers, Medicare, or how Freedom Blue PPO works, call toll-free any day of the week between 8:00 a.m. and 8:00 p.m. Eastern.

**Have questions now – call toll-free**

If you have any questions now about Freedom Blue PPO, please call 1-866-456-7739, TTY users call 711, between 8:00 a.m. and 8:00 p.m. Eastern, seven days a week.

Great benefits, network-level coverage throughout the country, a fitness center membership and the peace of mind knowing your coverage is backed by Highmark Blue Shield, a name people know and trust for over 75 years ... there are many reasons to have Freedom Blue PPO. We look forward to serving you.

Sincerely,

Jill Hollingshead
Sales Manager, Senior Markets

You have access to information about your Highmark Medicare Advantage plan at your fingertips! Please visit pennstate.highmarkretireesolutions.com for an easy to understand website containing contact information, plan and benefit resources and health and wellness guides specifically for you!
Important Information about Diabetic Testing Supplies and Certain Medicare Excluded Prescription Drugs

If you are a diabetic:

Your Freedom Blue PPO plan includes medical coverage and prescription drug coverage (Medicare Part D). Diabetic testing supplies (glucometers, lancets and test strips) are covered by your medical benefits, not by your Medicare Part D Prescription Drug coverage. Because you are a Penn State retiree covered under the Freedom Blue PPO plan, you may purchase lancets and test strips supplies from durable medical equipment (DME) suppliers, retail pharmacies, University Health Services (UHS) or the Express Scripts mail order service, and they will be covered. Glucometers must be purchased from durable medical equipment (DME) suppliers.

You can also get insulin, syringes and oral medications for diabetics from retail pharmacies, UHS and the mail order service, and they will be covered.

Free Glucose Monitoring Devices for Freedom Blue PPO Members

The providers listed below have notified Highmark that they will supply glucose monitoring devices free of charge to Freedom Blue PPO members when you have the appropriate prescription for a new or replacement monitoring device:

<table>
<thead>
<tr>
<th>Company Name</th>
<th>Telephone</th>
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</thead>
<tbody>
<tr>
<td>Better Living Now</td>
<td>1-888-598-2195</td>
</tr>
<tr>
<td>Byram Healthcare Centers</td>
<td>1-800-681-1395</td>
</tr>
<tr>
<td>CCS Medical – Medical Express Depot</td>
<td>1-800-633-0063</td>
</tr>
<tr>
<td>Edgemark Medical Supplies</td>
<td>1-800-321-0591</td>
</tr>
<tr>
<td>Liberator Medical Supply</td>
<td>1-877-232-4436</td>
</tr>
<tr>
<td>Liberty Medical Supply</td>
<td>1-888-306-7337</td>
</tr>
<tr>
<td>Sterling Medical Services</td>
<td>1-800-216-5500</td>
</tr>
<tr>
<td>Tri State Medical</td>
<td>1-888-297-3713</td>
</tr>
<tr>
<td>United States Medical Supply</td>
<td>1-877-840-8218</td>
</tr>
</tbody>
</table>
If you take certain Medicare Part D excluded drugs:

Certain prescription drugs are excluded from being covered by Medicare coverage by law. These include:

- Drugs for*:
  - Anorexia, weight loss or weight gain (except to treat physical wasting caused by AIDS, cancer or other diseases)
  - Fertility
  - Cosmetic purposes or hair growth
  - Relief of the symptoms of colds, like a cough and stuffy nose
  - Erectile dysfunction
- Prescription vitamins and minerals (except prenatal vitamins and fluoride preparations)
- Non-prescription drugs (over-the-counter drugs)

However, the following is a list of Medicare Part D excluded drugs covered under your Freedom Blue PPO plan with copays of $12 generic/$20 preferred brand/$40 non-preferred brand.

<table>
<thead>
<tr>
<th></th>
<th>Folic Acid 1mg Tablets</th>
<th>Levitra 10mg Tablets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Levitra 2.5mg Tablets</td>
<td>Levitra 20mg Tablets</td>
<td>Levitra 5mg Tablets</td>
</tr>
</tbody>
</table>

*Note: Prescription drugs used for the above conditions will not be covered by Medicare Part D. However, they may be covered if they are being prescribed to treat other conditions. For example, prescription medications for the relief of cold symptoms may be covered by Part D if prescribed to treat something other than a cold—such as shortness of breath from severe asthma—as long as they are approved by the U.S. Food and Drug Administration (FDA) for such treatment.

Highmark Blue Shield is an Independent Licensee of the Blue Cross and Blue Shield Association. Blue Shield and the Shield symbol are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans. Highmark is a registered mark of Highmark Inc. Highmark Inc. is a PPO plan with a Medicare contract. Enrollment in Highmark Inc. depends on contract renewal. The benefit information provided is a brief summary, not a complete description of benefits. For more information contact the plan. Limitations, copayments and restrictions may apply. Benefits, formulary, pharmacy network, premium and/or co-payments/co-insurance may change on January 1 of each year.

EGHP_14_0003
Freedom Blue℠ PPO gives you exactly what you want from your health care coverage – freedom of choice

Freedom Blue PPO, a Medicare Advantage Preferred-Provider Organization from Highmark Blue Shield, offers comprehensive benefits and the freedom to use the doctors, hospitals and other professional providers of your choice, both inside and outside the network – with no referrals needed.

- When you receive eligible care from doctors, hospitals and other professional providers in the network, your care is covered at the higher, network level of benefits and you pay lower, in-network costs.

- When you receive eligible care from doctors, hospitals and other professional providers in an area without a network, your care is covered at the higher, network level of benefits and you pay lower, in-network costs.

- When you receive eligible care from doctors, hospitals and other professional providers outside of the network, your care is covered at the lower, out-of-network level of benefits and you pay slightly higher, out-of-network costs.

It includes thousands of family doctors, general practitioners, internists, all types of specialists and most hospitals. Freedom Blue PPO participating providers are carefully screened before joining the network and regularly reviewed in an ongoing effort to ensure that they meet strict criteria for quality service.

- If you travel, Freedom Blue PPO allows you to receive care from any participating Blue Cross and/or Blue Shield Medicare Advantage PPO doctor, professional provider or hospital available in 35 states and Puerto Rico – including Florida, California, the Carolinas, Ohio, New York and more.

- Freedom Blue PPO provides access to over 200,000 PCPs, 324,000 specialists and nearly 3,000 hospitals across the country.

It's easy to find a participating Blue Cross and/or Blue Shield Medicare Advantage PPO provider. Just call Customer Service at the number printed on the Freedom Blue PPO ID card you will receive after you enroll, or visit providdir.highmarkblueshield.com.

- If you live in or travel to locations where a participating network is not available, you may visit any Medicare-eligible provider. Again, when you do, eligible services will be covered at the higher, network level of benefits. Please refer to the "Freedom Blue PPO Network Provider Information" section for more information.

Important Notes:

1. If you decide to go to a non-participating provider, but a participating Blue Cross and/or Blue Shield Medicare Advantage PPO provider is available in the location where you received eligible services, those services will be covered at the lower, out-of-network level of benefits.

2. Highmark Inc. cannot pay a provider who has opted out of the Medicare program. Check with your provider before you receive care to confirm that they have not opted out of Medicare.

3. Emergency and urgently needed care is always covered at the higher network level of benefits, regardless of where the care is received.

Enjoy the higher, network-level of benefits at lower, in-network costs throughout the United States – great for snowbirds and people on the move!

Freedom Blue PPO offers you unique opportunities to get the health care you need wherever you live or travel throughout the U.S. – and you pay only your network level of cost sharing.

- Freedom Blue PPO features one of the largest Medicare Advantage PPO networks in the country.
Freedom from claim forms and referrals

Freedom Blue PPO was designed to eliminate the hassle that many people associate with health insurance. There are no claim forms to file when you show your Freedom Blue PPO ID card at any of our Freedom Blue PPO network provider locations or participating Blue Cross and/or Blue Shield Medicare Advantage PPO providers throughout the U.S. They will process all the paperwork for you. When you see a provider who is not in the network, always ask the provider or facility to file a claim for you to Freedom Blue PPO.

No referrals are needed for you to get the care you need. Certain services, however, like inpatient admissions or outpatient surgery, do require pre-certification.

Enjoy personal, reliable Customer Service

If you ever have a question about Medicare or Freedom Blue PPO plan benefits, or about how to get care or how to locate a provider – in short, any concern related to your health care coverage – help is just a toll-free call away. You can reach a friendly, knowledgeable, dedicated Customer Service representative any day of the week, between 8:00 a.m. and 8:00 p.m. Eastern, by calling the phone/TTY number printed on your Freedom Blue PPO identification card.

Our Customer Service representatives specialize in understanding Medicare and the needs of people with Medicare. They are carefully trained to answer your questions and those of your providers...a valuable resource to you, if needed, when you receive care.

Trust the plan that’s backed by Highmark Blue Shield

Freedom Blue PPO is backed by more than 75 years of financial strength and experience with Highmark Blue Shield – a name millions of people know and trust.

Highmark Blue Shield has been dedicated to offering quality, affordable health care coverage to people with Medicare since the Medicare program began in 1965.

Answers to frequently asked questions

Q. Is Freedom Blue PPO a Medicare supplement?
A. No. Freedom Blue PPO is a Medicare Advantage PPO that makes supplemental insurance unnecessary. Freedom Blue PPO gives you all the benefits of Medicare and more. As a PPO, Freedom Blue PPO lets you get care from the doctors and hospitals of your choice – either in or out of the network. And no referrals are needed.

Q. Is everything covered by Freedom Blue PPO?
A. All Medicare benefits are covered, such as periodic physical exams, immunizations and screenings. Limitations, copayments and coinsurance apply. Please refer to the benefits chart and other information in this brochure for the specific benefits your group provides.

Q. Can I be sure I’ll receive quality care with Freedom Blue PPO?
A. Highmark Inc. participating health care providers are carefully screened before joining the Highmark Inc. Medicare Advantage PPO Provider Network. They must meet our strict selection
criteria and submit to an evaluation by a medical review committee. Then they are reviewed on an ongoing basis.

Q. Am I still covered by original Medicare Part A and Part B as a Freedom Blue PPO member?

A. Once you are a member of Freedom Blue PPO, you still have Medicare, but now you are getting your Medicare as a Freedom Blue PPO member. You no longer have to pay original Medicare deductibles and coinsurance charges because Freedom Blue PPO will cover all services and supplies offered by original Medicare, plus some additional services and supplies not covered by original Medicare. Members must continue to pay their Medicare Part B premium. In addition, Freedom Blue PPO does require you to pay a copayment and coinsurance for certain network services and for out-of-network care you receive.

Q. What is IRMAA and does it affect me?

A. Medicare beneficiaries who have higher incomes may be required to pay a little more (known as income related monthly adjustment amount or IRMAA) in addition to their standard premiums. Fewer than five percent of people with Medicare are affected, so most people will not pay a higher premium. To find out if a beneficiary will pay higher premiums, Social Security uses their most recent federal tax return. Beneficiaries who will be required to pay a higher premium are those with a total modified adjusted gross income (MAGI) higher than $85,000.

Q. What if I sign up for Freedom Blue PPO and later want to drop it?

A. If you disenroll from Freedom Blue PPO outside of the open enrollment period and go to original Medicare insurance, you may have the option (if available in your county of residence) to switch to a Medicare Supplement plan. Be sure to talk to your group benefits office before you disenroll from Freedom Blue PPO and follow the disenrollment guidelines of your former employer or trust fund regarding open enrollment or special election periods.