



of South Central Wisconsin

a non-profit consumer-sponsored health plan

Administrative Offices
1265 John Q. Hammons Dr.
P.O. Box 44971
Madison, WI 53744-4971
(608) 251-4156
Fax (608) 257-3842
ghcscw.com

Re: Medicare Select Health Plan for 2017

Thank you for your recent inquiry into the Group Health Cooperative of South Central Wisconsin (GHC-SCW) Medicare Select health plan. GHC-SCW offers a comprehensive Medicare Select Plan that ensures convenient, accessible, quality care provided by GHC-SCW clinics and practitioners. The policy covers certain hospital, skilled nursing facility and home health care benefits, as well as the Medicare Part B deductible and co-insurance. Annual physical exams, eye and hearing exams, some immunizations, and routine office visits are additional benefits. A list of limitations and exclusions can be found in the 2017 Outline of Coverage included with this packet. If you had previous GHC-SCW individual or group coverage, this coverage is different.

We strongly recommend that you consider enrolling in a Medicare Part D plan for outpatient prescription drugs to include diabetic supplies and insulin as the GHC-SCW Medicare Select program does not include this type of coverage.

Medicare Select Eligibility Information

To qualify for this plan, you must:

- Be enrolled in both Parts A and B of Medicare.
Live within Dane, Jefferson, Green, Lafayette, Rock, Columbia, Dodge, Iowa, Sauk, Richland, Vernon, Adams, or Juneau County in Wisconsin.

If you meet the criteria above, you are eligible to enroll regardless of your health history, if:

- You are within 6 months of turning age 65 or enrolling in Part B of Medicare.
You are leaving an employer plan that does not offer a Retiree benefit. You must apply to GHC-SCW within 30 days of leaving the plan.
You currently have or had coverage from a Medicare Advantage plan. You must apply to GHC-SCW within 63 days of leaving the plan.
You currently have or had another Medicare Supplement or Medicare Select policy in force.
You currently have or had coverage under any other health insurance, such as an employer plan, union, or individual plan. You must apply to GHC-SCW within 63 days of leaving that plan.

CONTINUED ON OPPOSITE SIDE

This is an advertisement for insurance. In offering Medicare Select insurance, neither Group Health Cooperative of South Central Wisconsin (GHC-SCW) nor its agents are connected with Medicare.

CSC16-28-03-1(08/16)F

Capitol Clinic
675 W. Washington Ave.
Madison, WI 53703
(608) 257-9700
Fax (608) 258-9042

DeForest Clinic
815 S. Main Street
De Forest, WI 53532
(608) 846-4787
Fax (608) 846-4605

East Clinic
5249 E. Terrace Dr.
Madison, WI 53718
(608) 222-9777
Fax (608) 221-2646

Hatchery Hill Clinic
3051 Cahill Main
Fitchburg, WI 53711
(608) 661-7200
Fax (608) 661-7201

Madison College Community Clinic
Health Education Center
Truax Campus
1705 Hoffman St.
Madison, WI 53704
(608) 441-3220

Sauk Trails Clinic
8202 Excelsior Dr.
Madison WI, 53717
(608) 831-1766
(608) 251-5797
Fax (608) 831-1562

Medicare Select Information for You to Review

Carefully review the contents of this packet, which includes the following:

1. 2017 Medicare Select Outline of Coverage
2. Wisconsin Guide to Health Insurance for People with Medicare
3. GHC-SCW Provider Directory
4. Acknowledgement of Receipt of Outline of Coverage and OCI Brochure
5. Medicare Select Application Form
6. Notice to Applicant Regarding Replacement (if applicable to you)
7. Postage Paid Envelope

How to Apply for the GHC-SCW Medicare Select Plan

To apply for the GHC-SCW Medicare Select Plan, please **complete and return** the following items:

- Medicare Select Application Form – please answer all questions and sign on both sides
- Acknowledgement of Receipt of Outline of Coverage and OCI Brochure – please sign and date
- Notice to Applicant Regarding Replacement
- Electronic Fund Transfer Application (if you are interested)
- Your check for the first month's premium.

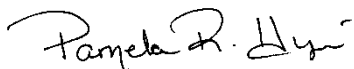
Medicare Select Premium Rates

The table below details the 2017 premium rates for each age range:

| Monthly rates are based on your age on January 1, 2017 | Monthly | Quarterly | Annually |
|--|----------|-----------|------------|
| Younger than 65 years old | \$236.15 | \$708.45 | \$2,833.80 |
| Age 65 – 69 years old | \$170.57 | \$511.71 | \$2,046.84 |
| Age 70 – 74 years old | \$209.98 | \$629.94 | \$2,519.76 |
| Age 75 – 79 years old | \$255.71 | \$767.13 | \$3,068.52 |
| More than 80 years old | \$277.21 | \$831.63 | \$3,326.52 |

If you have any questions concerning this application process or the GHC-SCW Medicare Select Plan, please call me at (608) 828-4831.

Sincerely,



Pamela R. Hying
Account Executive Individual Plans & Medicare Select

Enclosures

This is an advertisement for insurance. In offering Medicare Select insurance, neither Group Health Cooperative of South Central Wisconsin (GHC-SCW) nor its agents are connected with Medicare.