## Medicare Supplement Plan G Inspire Notice of New or Innovative Benefits

The purpose of this form is to notify consumers of the availability of Medicare Supplement plans offered for sale by Blue Shield of California, which, in addition to the standardized coverage offered by the plan, include new or innovative benefits. For additional details, please contact **(800) 248-2341 (TTY; 711)**, 8:00 a.m. – 8:00 p.m., 7 days a week, year around.

## New or Innovative Benefits Added To Medicare Supplement Plan Medicare Supplement Plan G Inspire

Description	Your out- of-pocket costs (In- network provider)	Your out- of-pocket costs (Out-of-network provider)
Basic Gym Access Through SilverSneakers® Fitness Program		
<ul> <li>Exercise, education and social activities with access to:</li> <li>Thousands of fitness locations.</li> <li>Exercise equipment and SilverSneakers classes.</li> <li>Social events and activities.</li> <li>SilverSneakers FLEX<sup>™</sup> classes such as yoga, Latin dance, and tai chi.</li> <li>Live and SilverSneakers On-Demand<sup>™</sup> online workout videos.</li> </ul>	\$O	All Costs

## Independent and Safe Mobility with AAA

Your benefit is provided by American Automobile Association of Northern California, Nevada & Utah (AAA). The benefit is a Classic AAA membership and includes access to Independent and Safe Mobility tools and services.

<ul> <li>Roadwise Driver™</li> <li>Educational Driving Resources</li> <li>Roadside Assistance</li> </ul>	\$O	All Costs
Acupuncture and Chiropractic		
Your acupuncture and chiropractic services benefits are administered by American Specialty Health Plans of California, Inc. (ASH Plans). The benefits covered under this plan must be received from ASH Participating Providers. ASH Participating Providers may be located through an online directory at blueshieldca.com. Click on Find a doctor.  Up to 20 visits per calendar year for acupuncture and	\$O	All Costs
Up to 20 visits per calendar year for acupuncture and chiropractic services combined.		

SilverSneakers is a registered trademark of Tivity Health, Inc. © 2022 Tivity Health, Inc. All rights reserved.© 2022 AAA Northern California, Nevada & Utah. All rights reserved.



	Your out- of-pocket costs (In-network	Your out- of-pocket costs (Out-of-network
Description	provider)	provider)
(continuous from previous page)		

Hearing aid services benefits are provided by EPIC Hearing Healthcare (EPIC). This benefit is designed for you to use EPIC network providers. EPIC Participating Providers are listed at **blueshieldca.com/medicare/providerdirectory**. If you choose to use out-of-network providers, those services will not be covered. This benefit is separate from diagnostic hearing examinations and related charges as covered by Medicare.

Hearing Aids Services

		Your out- of-pocket costs (Out-of-network
Description	provider)	provider)
(continuous from previous page)		

Vision benefits are provided by Vision Service Plan (VSP). This benefit offers one of the largest national networks of independent doctors located in retail, neighborhood, medical, and professional settings. You can lower any out-of-pocket costs by choosing network providers for covered services. Participating providers may be located through an online directory at **blueshieldca.com**. *Click on* 

**Vision Services** 

Find a doctor.

Comprehensive eye exam once every 12 months	\$20 copay	All costs above \$50
Eyeglass frame once every 24 months	All costs above \$100 allowance	All costs above \$40 allowance
<ul><li>Eyeglass lenses once every 12 months</li><li>Single vision</li><li>Bifocal</li><li>Trifocal</li></ul>		Single vision: All costs above \$43  Bifocal: All costs above \$60
· Aphakic, lenticular monofocal, or multifocal	\$25 copay	Trifocal: All costs above \$75
		Aphakic or lenticular monofocal or multifocal: All costs above \$104
Contact lenses (instead of eyeglass lenses) once every 12 months  Non-elective (medically necessary) – Hard or Soft – one pair	Non-elective (hard or soft): \$25 copay and all costs above \$500	Non-elective (hard or soft): All costs above \$200
<ul> <li>Elective (cosmetic/convenience) – Hard – one pair</li> <li>Elective (cosmetic/convenience) – Soft – Up to a three- to six-month supply for each eye based on lenses selected</li> </ul>	Elective: \$25 copay and all costs above \$120	Elective (hard or soft): All costs above \$100
Physician Consultation by Phone or Video Through Teladoc	\$0 per consult	All Costs

Description	Your out- of-pocket costs (In-network provider)	Your out- of-pocket costs (Out-of-network provider)
(continuous from previous page)		
Over-the-Counter Items through CVS		
Eligible over-the-counter (OTC) items are available through the OTC Items Catalog, at <b>blueshieldca.com/medicareOTC</b> . Limitations may apply. Refer to the OTC Items Catalog for more information.  Up to two orders per quarter.	All costs above the \$100 allowance per quarter	All Costs
Total annual premium for new or innovative benefits only:	\$336.00	\$336.00

Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Fresno, Glenn, Humboldt, Kings, Lake, Lassen, Madera, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Placer, Plumas, Sacramento, San Benito, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Monterey, Napa, Nevada, Placer, Plumas, Sacramento, San Benito, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Monterey, Napa, Nevada, Placer, Plumas, Sacramento, San Benito, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Santa Clara, Santa Clara,Stanislaus, Sutter, Tehama, Trinity, Tuolumne, Yolo, and Yuba.

<sup>\*</sup>The Plan G Inspire plan is only available in the following counties: