

BCBS MT Medicare Supplement Plan Disclaimer

"This information is a solicitation for insurance."

HMO and PPO plans provided by Blue Cross and Blue Shield of Montana, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC), an Independent Licensee of the Blue Cross and Blue Shield Association. HMO plans available for employer/union groups only. HCSC is a Medicare Advantage organization with a Medicare contract. Enrollment in HCSC's plans depends on contract renewal. Prescription drug plans provided by Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC), an Independent Licensee of the Blue Cross and Blue Shield Association. A Medicare-approved Part D sponsor. Enrollment in HCSC's plans depends on contract renewal.

"Not connected with or endorsed by the U.S. Government or Federal Medicare Program."

Medicare Supplement insurance plans are offered by Blue Cross and Blue Shield of Montana, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association. As long as you are age 65 or older, have Medicare Part A and are within the six months following your enrollment for Medicare Part B, your acceptance is guaranteed. If you are under age 65, have Medicare Part A and are enrolled in Medicare Part B, your acceptance is guaranteed within six months of your Part B effective date or another qualifying event. If you are on Medicare under age 65, you will also have a six month open enrollment period when you reach age 65. If you are turning age 65, were previously enrolled in Medicare Parts A and B, and apply within six months of turning age 65, your acceptance is guaranteed.

Additionally, perforated documents must include the DOI#. The DOI# can be the same # as listed on the letter/material.

Individuals under the age 65 may qualify for Medicare if they become disabled.

HMO plan in New Mexico, HMO and HMO-POS plans in Illinois, and PPO plans in Illinois, Montana, and New Mexico are provided by Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC). HMO plan in Illinois provided by Illinois Blue Cross Blue Shield Insurance Company (ILBCBSIC). HMO Special Needs Plan and PPO Special Needs Plan in New Mexico provided by HCSC. HMO, PPO, and Dual Care HMO Special Needs plans in Texas provided by HCSC Insurance Services Company (HISC). HMO and PPO plans in Texas provided by GHS Insurance Company (GHSIC). All HMO and PPO employer/union group plans provided by HCSC. HMO plan in Oklahoma provided by GHS Health Maintenance Organization, Inc. d/b/a BlueLincs HMO (BlueLincs). PPO plans in Oklahoma provided by GHS Insurance Company (GHSIC). HCSC, ILBCBSIC, HISC, GHSIC, and BlueLincs are Independent Licensees of the Blue Cross and Blue Shield Association. ILBCBSIC, GHSIC and BlueLincs are Medicare Advantage organizations with a Medicare contract. HCSC is a Medicare Advantage organization with a Medicare contract and a contract with the New Mexico Medicaid program. HISC is a Medicare Advantage organization with a Medicare contract and a contract with the Texas Medicaid program. Enrollment in these plans depends on contract renewal.

Prescription drug plans provided by HCSC Insurance Services Company (HISC), an Independent Licensee of the Blue Cross and Blue Shield Association. A Medicare-approved Part D sponsor. Enrollment in HISC's plans depends on contract renewal.

Humana MT Plan Disclaimer

- *Humana* - Humana is a Medicare Advantage (HMO, HMO SNP, PPO, PPO SNP and PFFS) organization and a stand-alone PDP prescription drug plan with a Medicare contract. Humana is also a Coordinated Care plan with a Medicare contract and a contract with the state Medicaid program. Enrollment in any Humana plan depends on contract renewal.
- *Humana* - Humana's Medicare plans with prescription drug coverage may have additional benefits in 2026 that are not currently displayed.
- *Humana* - **Important Message About What You Pay for Vaccines** - These Medicare plans with prescription drug coverage offer most Part D vaccines at no additional cost to you, even if your plan has a deductible and you haven't paid it. Age and availability restrictions may apply.
- *Humana* - **Important Message About What You Pay for Insulin** – For Medicare plans with prescription drug coverage, you won't pay more than \$35 for a one-month (up to 30-day) supply of each Part D insulin product covered by this plan, no matter what cost-sharing tier it's on, even if your plan has a deductible and you haven't paid it.
- *Humana* - Allowance amounts cannot be combined with other benefit allowances. Limitations and restrictions may apply.
- *Humana* - The Part B Giveback Benefit pays part or all of your Part B premium and the amount may change based on the amount you pay for Part B.