



Medicare Supplement Outline of Coverage

Plans A, F, Innovative F, Innovative G, N & Innovative N

**Anthem Blue Cross and Blue Shield
Nevada 2020**

Premium Information

Plans A, F, Innovative F, Innovative G, N & Innovative N Effective January 1, 2020

Premiums are subject to change.

Here's some important information, before we get started:

We, Anthem, can only raise your premium if we raise the premium for all plans like yours in this State. We will recalculate your age each year and adjust your premium based on the new age band in January of each year up to the age cap.

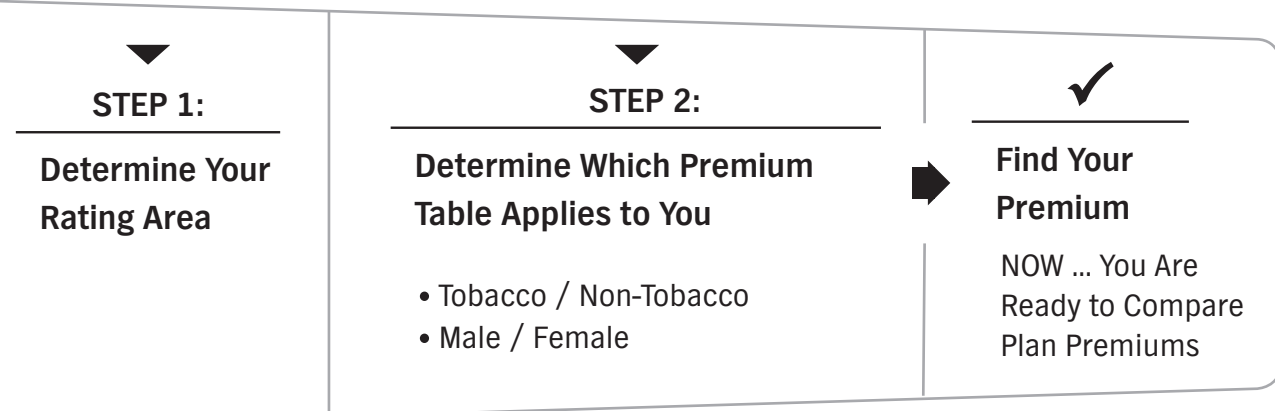
Premiums are subject to change on or after the Renewal Date in accordance with the terms of the Policy. Renewal Date is defined as January 1, subject to state approval. The selected billing preference does not guarantee your premium for any specific period. Approved premium changes are effective as of the Renewal Date.

If you select a billing method other than Monthly EFT (Electronic Fund Transfer), the billing frequency takes effect on the first day of the payment period that immediately follows your coverage effective date. Based on your selected billing method and your coverage effective date, we will prorate the initial premium to align you with the quarterly or annual billing. For example, if you select quarterly billing and your coverage effective date is September 1, your quarterly billing will start on October 1. We base annual billing on a calendar year (January-December).

Find Your Premium

Premiums (and future changes to premiums) are determined by several factors, including the county where you live, tobacco use, age, gender, plan, and the costs of medical services and supplies.

Here's how to find your premium, step-by-step:



Finding the Right Plan for You

Plans A, F, Innovative F, Innovative G, N & Innovative N Effective January 1, 2020

Premiums are subject to change.

Compare Plans

After locating the monthly premium, you are ready to review the individual plan pages. These pages provide details of the covered services and what each plan pays. Based on your individual needs, these pages will help you determine the plan that is best for you. You are now ready to **ENROLL!**

Don't miss out on a chance to **SAVE!**

These optional discounts are offered.

SAVE \$2 on your monthly premium!

Enroll in our Automatic Bank Draft or Electronic Fund Transfer (EFT) program and you will save \$2 on your monthly premium. (To enroll, simply complete the Premium Payment Form.)

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OR
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SAVE \$48 by paying your premium for the entire year!

(Note: Based on the policy effective date, the discount may be pro-rated the first year.)

SAVE 5% when more than one member in the household enrolls in a Medicare Supplement plan with us. The discount is for policies with effective dates of June 1, 2010 or after and available to those members who occupy the same housing unit.

* By calling this number, you will reach an authorized licensed insurance agent who can answer questions about our plans and enrollment.

Finding Your Monthly Premium

Plans A, F, Innovative F, Innovative G, N & Innovative N
Effective January 1, 2020
Premiums are subject to change.

Step 1: Determine Your Rating Area

County Area Guide

► Find the county you live in
from the list below.



Got Your Rating Area?
Now you are ready to go to Step #2.

County	Area	County	Area	County	Area
Carson City	2	Eureka	2	Nye	2
Churchill	2	Humboldt	2	Pershing	2
Clark	1	Lander	2	Storey	2
Douglas	2	Lincoln	2	Washoe	2
Elko	2	Lyon	2	White Pine	2
Esmeralda	2	Mineral	2		

Finding Your Monthly Premium

Plans A, F, Innovative F, Innovative G, N & Innovative N Effective January 1, 2020

Premiums are subject to change. Premium is based upon your tobacco usage, age, area, gender and plan.

Step 2: Find Your Premium

Questions: 916-682-1117

Table 1 | Non-tobacco

If you have not used tobacco products in the past 12 months, use this table.

Area 1

Age*	Male					
	Plan A	Plan F	Innovative F	Innovative G	Plan N	Innovative N
65	\$153.50	\$261.11	\$173.66	\$145.32	\$171.97	\$118.19
66	159.79	271.24	180.39	151.27	178.64	122.78
67	166.08	281.38	187.14	157.22	185.31	127.36
68	172.36	291.50	193.87	163.17	191.98	131.94
69	178.65	301.61	200.59	169.11	198.64	136.53
70	184.94	311.76	207.34	175.06	205.32	141.12
71	191.23	321.87	214.06	181.01	212.00	145.70
72	197.51	332.00	220.80	186.96	218.64	150.27
73	203.80	342.12	227.54	192.89	225.31	154.85
74	210.09	352.25	234.27	198.85	231.98	159.44
75	216.38	362.38	241.01	204.80	238.65	164.02
76	222.66	372.48	247.73	210.73	245.31	168.60
77	228.95	382.63	254.48	216.69	251.99	173.19
78	235.24	392.75	261.21	222.64	258.67	177.78
79	241.53	402.87	267.94	228.57	265.32	182.35
80	247.82	413.02	274.68	234.54	272.00	186.95
81	254.10	423.12	281.41	240.48	278.66	191.53
82	260.39	433.23	288.13	246.41	285.33	196.10
83	266.68	443.37	294.87	252.37	291.98	200.67
84+	272.97	453.49	301.60	258.30	298.66	205.27

* Attained age as of the coverage effective date.

Finding Your Monthly Premium

Plans A, F, Innovative F, Innovative G, N & Innovative N Effective January 1, 2020

Premiums are subject to change. Premium is based upon your tobacco usage, age, area, gender and plan.

Step 2: Find Your Premium

(continued)

Table 1 | Non-tobacco

If you have not used tobacco products in the past 12 months, use this table.

Area 1

Age*	Female					
	Plan A	Plan F	Innovative F	Innovative G	Plan N	Innovative N
65	\$142.42	\$242.52	\$161.29	\$134.40	\$159.71	\$109.77
66	147.61	250.89	166.86	139.31	165.25	113.58
67	152.81	259.26	172.42	144.23	170.74	117.35
68	157.99	267.66	178.01	149.16	176.27	121.15
69	163.18	276.04	183.58	154.08	181.80	124.95
70	168.37	284.42	189.16	159.01	187.30	128.73
71	173.57	292.81	194.74	163.93	192.84	132.54
72	178.76	301.20	200.32	168.86	198.36	136.33
73	183.95	309.58	205.89	173.79	203.88	140.12
74	189.13	317.97	211.47	178.71	209.40	143.92
75	194.32	326.35	217.05	183.64	214.94	147.72
76	199.52	334.72	222.61	188.55	220.43	151.50
77	204.70	343.11	228.19	193.47	225.97	155.30
78	209.89	351.50	233.77	198.40	231.49	159.10
79	215.08	359.88	239.34	203.33	236.99	162.88
80	220.26	368.27	244.92	208.25	242.53	166.68
81	225.46	376.65	250.50	213.18	248.06	170.50
82	230.65	385.04	256.07	218.11	253.58	174.29
83	235.83	393.42	261.65	223.02	259.09	178.08
84+	241.02	401.82	267.24	227.96	264.63	181.88

* Attained age as of the coverage effective date.

Finding Your Monthly Premium

Plans A, F, Innovative F, Innovative G, N & Innovative N Effective January 1, 2020

Premiums are subject to change. Premium is based upon your tobacco usage, age, area, gender and plan.

Step 2: Find Your Premium

(continued)

Table 1 | Non-tobacco

Questions: 916-682-1117

If you have not used tobacco products in the past 12 months, use this table.

Area 2

Age*	Male					
	Plan A	Plan F	Innovative F	Innovative G	Plan N	Innovative N
65	\$136.92	\$232.91	\$154.90	\$129.63	\$153.40	\$105.43
66	142.53	241.95	160.91	134.93	159.35	109.52
67	148.14	250.99	166.93	140.24	165.30	113.61
68	153.75	260.02	172.93	145.55	171.25	117.69
69	159.36	269.04	178.93	150.85	177.19	121.78
70	164.97	278.09	184.95	156.15	183.15	125.88
71	170.58	287.11	190.94	161.46	189.10	129.96
72	176.18	296.14	196.95	166.77	195.03	134.04
73	181.79	305.17	202.97	172.06	200.98	138.13
74	187.40	314.21	208.97	177.37	206.93	142.22
75	193.01	323.24	214.98	182.68	212.88	146.31
76	198.61	332.25	220.98	187.97	218.82	150.39
77	204.22	341.31	227.00	193.29	224.78	154.49
78	209.83	350.33	233.00	198.59	230.73	158.58
79	215.44	359.36	239.00	203.88	236.67	162.66
80	221.06	368.41	245.01	209.21	242.62	166.76
81	226.66	377.42	251.02	214.51	248.56	170.84
82	232.27	386.44	257.01	219.80	254.51	174.92
83	237.88	395.49	263.02	225.11	260.45	179.00
84+	243.49	404.51	269.03	230.40	266.40	183.10

* Attained age as of the coverage effective date.

Finding Your Monthly Premium

Plans A, F, Innovative F, Innovative G, N & Innovative N Effective January 1, 2020

Premiums are subject to change. Premium is based upon your tobacco usage, age, area, gender and plan.

Step 2: Find Your Premium

(continued)

Table 1 | Non-tobacco

If you have not used tobacco products in the past 12 months, use this table.

Area 2

Age*	Female					
	Plan A	Plan F	Innovative F	Innovative G	Plan N	Innovative N
65	\$127.04	\$216.33	\$143.87	\$119.88	\$142.46	\$97.91
66	131.67	223.79	148.84	124.26	147.40	101.31
67	136.31	231.26	153.80	128.65	152.30	104.68
68	140.93	238.75	158.78	133.05	157.23	108.07
69	145.56	246.23	163.75	137.44	162.17	111.46
70	150.19	253.70	168.73	141.84	167.07	114.83
71	154.82	261.19	173.71	146.23	172.01	118.23
72	159.45	268.67	178.69	150.62	176.94	121.61
73	164.08	276.15	183.65	155.02	181.86	124.99
74	168.70	283.63	188.63	159.41	186.78	128.38
75	173.33	291.10	193.61	163.81	191.73	131.77
76	177.97	298.57	198.57	168.19	196.62	135.14
77	182.59	306.05	203.55	172.58	201.57	138.53
78	187.22	313.54	208.52	176.97	206.49	141.92
79	191.85	321.01	213.49	181.37	211.40	145.29
80	196.47	328.50	218.47	185.76	216.34	148.68
81	201.11	335.97	223.45	190.16	221.27	152.09
82	205.74	343.46	228.41	194.55	226.19	155.47
83	210.36	350.93	233.39	198.93	231.11	158.85
84+	214.99	358.42	238.38	203.34	236.05	162.24

* Attained age as of the coverage effective date.

Finding Your Monthly Premium

Plans A, F, Innovative F, Innovative G, N & Innovative N Effective January 1, 2020

Premiums are subject to change. Premium is based upon your tobacco usage, age, area, gender and plan.

Step 2: Find Your Premium

(continued)

Table 2 | For Tobacco Users

If you have used tobacco products in the past 12 months, use this table.

Area 1

Age*	Male					
	Plan A	Plan F	Innovative F	Innovative G	Plan N	Innovative N
65	\$171.92	\$292.44	\$194.50	\$162.76	\$192.61	\$132.37
66	178.96	303.79	202.04	169.42	200.08	137.51
67	186.01	315.15	209.60	176.09	207.55	142.64
68	193.04	326.48	217.13	182.75	215.02	147.77
69	200.09	337.80	224.66	189.40	222.48	152.91
70	207.13	349.17	232.22	196.07	229.96	158.05
71	214.18	360.49	239.75	202.73	237.44	163.18
72	221.21	371.84	247.30	209.40	244.88	168.30
73	228.26	383.17	254.84	216.04	252.35	173.43
74	235.30	394.52	262.38	222.71	259.82	178.57
75	242.35	405.87	269.93	229.38	267.29	183.70
76	249.38	417.18	277.46	236.02	274.75	188.83
77	256.42	428.55	285.02	242.69	282.23	193.97
78	263.47	439.88	292.56	249.36	289.71	199.11
79	270.51	451.21	300.09	256.00	297.16	204.23
80	277.56	462.58	307.64	262.68	304.64	209.38
81	284.59	473.89	315.18	269.34	312.10	214.51
82	291.64	485.22	322.71	275.98	319.57	219.63
83	298.68	496.57	330.25	282.65	327.02	224.75
84+	305.73	507.91	337.79	289.30	334.50	229.90

* Attained age as of the coverage effective date.

Finding Your Monthly Premium

Plans A, F, Innovative F, Innovative G, N & Innovative N Effective January 1, 2020

Premiums are subject to change. Premium is based upon your tobacco usage, age, area, gender and plan.

Step 2: Find Your Premium

(continued)

Table 2 | For Tobacco Users

If you have used tobacco products in the past 12 months, use this table.

Area 1

Age*	Female					
	Plan A	Plan F	Innovative F	Innovative G	Plan N	Innovative N
65	\$159.51	\$271.62	\$180.64	\$150.53	\$178.88	\$122.94
66	165.32	281.00	186.88	156.03	185.08	127.21
67	171.15	290.37	193.11	161.54	191.23	131.43
68	176.95	299.78	199.37	167.06	197.42	135.69
69	182.76	309.16	205.61	172.57	203.62	139.94
70	188.57	318.55	211.86	178.09	209.78	144.18
71	194.40	327.95	218.11	183.60	215.98	148.44
72	200.21	337.34	224.36	189.12	222.16	152.69
73	206.02	346.73	230.60	194.64	228.35	156.93
74	211.83	356.13	236.85	200.16	234.53	161.19
75	217.64	365.51	243.10	205.68	240.73	165.45
76	223.46	374.89	249.32	211.18	246.88	169.68
77	229.26	384.28	255.57	216.69	253.09	173.94
78	235.08	393.68	261.82	222.21	259.27	178.19
79	240.89	403.07	268.06	227.73	265.43	182.43
80	246.69	412.46	274.31	233.24	271.63	186.68
81	252.52	421.85	280.56	238.76	277.83	190.96
82	258.33	431.24	286.80	244.28	284.01	195.20
83	264.13	440.63	293.05	249.78	290.18	199.45
84+	269.94	450.04	299.31	255.32	296.39	203.71

* Attained age as of the coverage effective date.

Finding Your Monthly Premium

Plans A, F, Innovative F, Innovative G, N & Innovative N Effective January 1, 2020

Premiums are subject to change. Premium is based upon your tobacco usage, age, area, gender and plan.

Step 2: Find Your Premium

(continued)

Table 2 | For Tobacco Users

If you have used tobacco products in the past 12 months, use this table.

Area 2

Age*	Male					
	Plan A	Plan F	Innovative F	Innovative G	Plan N	Innovative N
65	\$153.35	\$260.86	\$173.49	\$145.18	\$171.80	\$118.08
66	159.64	270.98	180.22	151.12	178.47	122.66
67	165.92	281.11	186.96	157.07	185.13	127.24
68	172.19	291.22	193.68	163.01	191.80	131.81
69	178.48	301.32	200.40	168.95	198.45	136.40
70	184.76	311.46	207.14	174.89	205.12	140.98
71	191.05	321.56	213.85	180.84	211.80	145.56
72	197.32	331.68	220.59	186.78	218.43	150.13
73	203.60	341.79	227.32	192.70	225.09	154.70
74	209.89	351.91	234.05	198.66	231.76	159.29
75	216.17	362.03	240.78	204.60	238.42	163.86
76	222.45	372.12	247.49	210.53	245.07	168.44
77	228.73	382.26	254.24	216.48	251.75	173.02
78	235.01	392.37	260.96	222.43	258.42	177.61
79	241.30	402.48	267.68	228.35	265.07	182.17
80	247.58	412.62	274.42	234.31	271.74	186.77
81	253.86	422.71	281.14	240.25	278.39	191.35
82	260.14	432.81	287.85	246.17	285.06	195.91
83	266.42	442.94	294.59	252.13	291.70	200.48
84+	272.71	453.05	301.31	258.05	298.37	205.07

* Attained age as of the coverage effective date.

Finding Your Monthly Premium

Plans A, F, Innovative F, Innovative G, N & Innovative N Effective January 1, 2020

Premiums are subject to change. Premium is based upon your tobacco usage, age, area, gender and plan.

Step 2: Find Your Premium

(continued)

Table 2 | For Tobacco Users

If you have used tobacco products in the past 12 months, use this table.

Area 2

Age*	Female					
	Plan A	Plan F	Innovative F	Innovative G	Plan N	Innovative N
65	\$142.28	\$242.29	\$161.14	\$134.27	\$159.56	\$109.66
66	147.47	250.65	166.70	139.18	165.09	113.47
67	152.66	259.01	172.25	144.09	170.58	117.24
68	157.84	267.40	177.84	149.02	176.10	121.03
69	163.02	275.78	183.40	153.93	181.63	124.83
70	168.21	284.15	188.98	158.86	187.12	128.61
71	173.40	292.53	194.55	163.77	192.65	132.41
72	178.59	300.91	200.13	168.70	198.17	136.20
73	183.77	309.28	205.69	173.62	203.68	139.99
74	188.95	317.66	211.27	178.54	209.20	143.78
75	194.13	326.04	216.84	183.46	214.73	147.58
76	199.33	334.40	222.40	188.37	220.22	151.35
77	204.50	342.78	227.97	193.28	225.75	155.15
78	209.69	351.16	233.55	198.21	231.27	158.95
79	214.87	359.53	239.11	203.13	236.76	162.72
80	220.05	367.92	244.68	208.05	242.30	166.52
81	225.24	376.29	250.26	212.98	247.82	170.34
82	230.43	384.67	255.82	217.90	253.34	174.12
83	235.60	393.04	261.40	222.81	258.84	177.91
84+	240.79	401.43	266.98	227.74	264.38	181.71

* Attained age as of the coverage effective date.