

Helping you live your best life

Health benefits designed for RIPEA members

Anthem

RIPEA
RETIRED INDIANA PUBLIC EMPLOYEES ASSOCIATION

RIPEA 2027

1076521INMENABS 08/25



A health plan for the lifestyle you deserve

You want to live your life to the fullest. With special benefits designed for Retired Indiana Public Employees Association (RIPEA) members like you, Anthem Blue Cross and Blue Shield (Anthem) gives you a health plan that helps you be your healthiest to enjoy the things you love.

A complement to Medicare

When combined with Medicare, your Anthem benefits for RIPEA members can help round out your health coverage. You're protected from many of the costs not covered by Medicare, and you receive benefits that go beyond Medicare coverage. These Anthem plans are available to all RIPEA members and their dependents over age 65 enrolled in Medicare parts A and B.

Dear Retired Public Employee and/or retiree Spouse,

We are pleased to offer you an opportunity to enroll in a RIPEA members-only Medicare Supplement plan. Whether you're a new member or already enrolled and planning to renew:

- Our RIPEA group plans are offered at competitive rates.
- You can review your monthly payment options on page 7.

What you need to know

- If you already have Anthem coverage through RIPEA and don't wish to make a change, no action is necessary. Your same coverage will continue.
- If you're 65 years old or older, you can join now.
- If you're under 65 years old, this information can help you prepare to choose a plan when you're eligible to join.
- Your monthly payment (premium) is age rated. That means it increases each year if you are between the ages of 65 and 80.
- When you turn 81, the rates are no longer age rated, but may increase each year at open enrollment to adjust for inflation.
- The rates only change on January 1st each year, following open enrollment. The rate is based on your age on January 1.
- You may enroll as family coverage with the younger of yourself or your spouse to take advantage of lower rates.

Medicare Advantage

You also have the option to sign up for one of four Medicare Advantage plans. To learn more, call our First Impressions Welcome Team at **833-848-8729** (TTY: 711). They are available Monday through Friday, 8 a.m. to 9 p.m. Eastern time (except holidays).

Together with Anthem, the Retired Indiana Public Employees Insurance Trust has been working hard to bring you the best health plans possible. We're looking forward to another great year. Please read this guide to learn more about these plans to choose the right one for you.

Sincerely,



Jessica Love
Executive Director
Retired Indiana Public Employees Association

Choose with confidence
All plans are available at low rates.

Select a plan that fits your needs

Anthem has two Medicare Supplemental health plans available, as well as the Value Plus Option, exclusive to RIPEA members.

RIPEA is continuing to offer two prescription drug-only plans for individuals electing either the plan F or plan G. Watch your mail for a preenrollment kit that describes the prescription drug plan options. If you have questions about the prescription plan options, please call First Impressions at **833-848-8729**.

Comprehensive Plan F

Identical to the Medicare Supplement Plan F, this plan **also includes additional major medical coverage**. RIPEA's Plan F covers many of the health-related costs not included in Medicare or standard Medicare Supplement plans. This additional major medical coverage is available **only through RIPEA**.

Comprehensive Plan G

Along with the same benefits of the Medicare Supplement Plan G, this plan also includes additional major medical coverage, which covers many of the health-related costs not included in Medicare or standard Medicare supplement plans. This additional major medical coverage is available **only through RIPEA**. As a reminder, Plan G requires the participant to pay the Medicare Part B deductible before benefits will apply. This deductible can change annually.

Value Plus Option

The Value Plus Option can be added to the Comprehensive Plans F or G to enhance your coverage for certain routine expenses not covered by Medicare.

Dental visits	Up to $100 per calendar year	
Hearing exams	Up to $50 per calendar year	
Blue View Vision one time per calendar year:	**When you use doctors in your plan's network**	**Reimbursement when you go outside your plan's network**
Eye exam	$0 copay	Up to $60
Eyeglass frames	$120 allowance	Up to $120
Single-vision lenses	$20 copay	Up to $35
Bifocal lenses	$20 copay	Up to $45
Trifocal lenses	$20 copay	Up to $50

If you're currently enrolled in the Comprehensive Plan F or G and want to add or delete the Value Plus Option, please complete the *Option Change Form* and return it in the enclosed envelope by December 1, 2026. We can still process if received after December 1; however, the initial invoice may be slightly delayed if received after that date.

Stay healthy with the right plan

Anthem plans for RIPEA members make it easier to receive care when and where you need it.

24/7 NurseLine

For answers to your health questions, you can call 24/7 NurseLine and speak with a registered nurse. They can talk to you about your health and help you find a doctor nearby. Call **800-337-4770** to speak with a nurse.

Nurses can also:

- Remind you to schedule important screenings and exams.
- Provide guidance during natural catastrophes and health outbreaks.
- Direct you to health-related educational material resources.

Plans are integrated with Medicare

Your RIPEA plan works automatically with Medicare. That means when Medicare processes your claims, the remaining covered balances are processed under your Anthem plan. When Medicare makes benefit changes, your Anthem plan automatically adjusts.

Benefits that travel with you

Although Medicare will not cover you outside of the U.S. and its territories, **the major medical provision included with a comprehensive plan will cover you in foreign countries**.

Caring customer support

Anthem's Customer Service representatives are available Monday through Friday from 8 a.m. to 6 p.m. Eastern time at **866-649-2041**. You also can call RIPEA Monday through Friday between 9 a.m. and 4 p.m. Eastern time at **800-345-9214**.



Local focus, with national strength

Designed for retirees like you, these plans are backed by the strength of Anthem, which has more than 40 million members across the country and over 75 years of experience in Indiana.

How to start

Step one

Review the information in this guide to choose a plan that fits your health needs and budget. You may want to ask your doctors if they accept Medicare-approved charges. If they don't, we recommend you enroll in a comprehensive plan **because it helps pay for additional charges** from doctors who don't accept Medicare. For added flexibility, a member and spouse can choose different plans and will be billed on two separate invoices if they are enrolling under separate plans

Step two

If you're enrolling for the first time, please fill out the application in this guide and return it to RIPEA in the enclosed envelope no later than **December 1, 2026**, if you are signing up during open enrollment. Select the plan you're enrolling in and let us know if you want extended coverage through the Value Plus Option. We can still process if received after December 1; however, the initial invoice may be slightly delayed if received after that date.

Plans are only available to RIPEA members and their dependents age 65 and over who are enrolled in Medicare parts A and B. If you're not yet a RIPEA member, you can join by sending an $18 check, made payable to RIPEA. Mail to: RIPEA, 2415 Directors Row, Suite M, Indianapolis, IN 46241.

You're eligible for coverage **within 90 days of your retirement date or your Medicare Part A or Part B effective date**, whichever comes later. If you don't apply during this 90-day period, you can apply during the open enrollment period: **November 1 through December 1**.

Step three

Your plan will take effect on **January 1, 2027**.

If you are already enrolled and need to make changes

You and your spouse can enroll together under the same plan, or you can enroll separately and choose different plans. You can fill out the *Change Form for Optional Coverage* to change plans and add or delete the Value Plus Option. Send the form in the enclosed envelope by **December 1, 2026** to make changes during open enrollment. Otherwise, you'll stay enrolled in the same plan you had in 2026.

We are here to help.

If you have questions, please call Anthem Customer Service at **866-649-2041**, Monday through Friday, 8 a.m. to 6 p.m. Eastern time.

Benefits at a glance

Covered service	Medicare pays	Comprehensive Plans F and G
Hospital insurance — Part A	**Hospital insurance — Part A**	**Hospital insurance — Part A**
Inpatient hospitalization		
First 60 days	Medicare pays all but a fixed deductible amount.	Plan pays the deductible.
Days 61 to 90	Medicare pays all but a fixed amount per day.	Plan pays the remaining amount per day.
60-day lifetime reserve	Medicare pays all but a fixed amount per day.	Plan pays the remaining amount per day.
Additional days	Medicare pays nothing.	Plan pays 100% of covered charges up to 365 days after Medicare benefits are exhausted.
Skilled nursing facility		
First 20 days of skilled care	Medicare pays all days of skilled care.	All charges covered by Medicare.
Days 21 to 100 of skilled care	Medicare pays all but a fixed amount per day.	Plan pays the remaining amount per day.
Additional days of skilled care	Medicare pays nothing.	See "Major medical benefits" entry.
Blood	Medicare pays for all except first three units.	Plan pays for first three units.
Hospice care	Medicare pays all but a fixed amount for outpatient prescription drugs and a percentage of Medicare's approved amount for inpatient respite care.	Not covered.
Medical insurance — Part B	**Medical insurance — Part B**	**Medical insurance — Part B**
Annual Part B deductible amount	Medicare pays nothing.	**Plan F** pays annual Part B deductible. **Plan G** pays nothing.
Medical/surgical treatment and doctor care (covers doctors, hospital, office services — including surgery, office calls, and hospital visits)	Medicare pays a percentage of the allowed amount after a deductible.	Plan pays the remaining percentage of Medicare's approved amount and Medicare Part B excess charges.*
Outpatient services (covers diagnostic services, physical therapy administered by a licensed therapist, X-rays, and lab tests)	Medicare pays a percentage of the allowed amount after a deductible.	Plan pays the remaining percentage of Medicare's approved amount and Medicare Part B excess charges.*
Private-duty nursing	Not covered.	See the *Benefits Certificate*.
Home healthcare Noncustodial medical and nursing care	Medicare pays 100% of approved charges.	All approved charges are covered by Medicare. Plan pays the remaining percentage of Medicare's approved amount and Medicare Part B excess charges.*
Durable medical equipment	Medicare pays a percentage of the allowed amount after a deductible.	
Mental health	Medicare pays a percentage of the allowed amount after a deductible.	Plan pays the remaining percentage of Medicare's approved amount and Medicare Part B excess charges.*
Mammogram (one per 12 months)	Medicare pays 100% of approved charges.	Plan pays Medicare Part B excess charges* (not subject to the deductible).
Major medical benefits	Not applicable.	Plan pays a percentage of covered charges, if considered medically-necessary by Anthem.
Prescription drugs (out of hospital)	Not covered.	Plan pays a percentage of covered charges for services not covered by Medicare, if considered medically-necessary by Anthem.

This is a summary of benefits only. Please see the *Benefits Certificate* for details regarding benefits, limitations, and exclusions. In the event this summary conflicts with the Certificate, the terms and conditions of the Benefits Certificate shall prevail.

* Excess charges are the difference between your doctor's actual charge and Medicare's approved amount if your doctor does not accept Medicare.

Plan monthly payment amount

Effective January 1, 2027

Age	Plan F*		Plan G*		Value Plus Option			
					Dental		Vision	
	Single	Family	Single	Family	Single	Family	Single	Family
<64	$248.64	$472.42	n/a	n/a	$1.54	$2.90	$6.29	$11.98
64	$202.79	$385.30	$180.79	$343.50	$1.54	$2.90	$6.29	$11.98
65	$202.79	$385.30	$180.79	$343.50	$1.54	$2.90	$6.29	$11.98
66	$214.84	$408.20	$191.54	$363.93	$1.54	$2.90	$6.29	$11.98
67	$226.93	$431.17	$202.31	$384.39	$1.54	$2.90	$6.29	$11.98
68	$240.06	$456.11	$214.02	$406.64	$1.54	$2.90	$6.29	$11.98
69	$253.24	$481.16	$225.76	$428.94	$2.71	$5.10	$6.29	$11.98
70	$266.37	$506.10	$237.47	$451.19	$2.71	$5.10	$6.29	$11.98
71	$279.53	$531.11	$249.20	$473.48	$2.71	$5.10	$6.29	$11.98
72	$292.72	$556.17	$260.95	$495.81	$2.71	$5.10	$6.29	$11.98
73	$305.85	$581.12	$272.68	$518.09	$2.71	$5.10	$6.29	$11.98
74	$319.03	$606.16	$284.41	$540.38	$2.71	$5.10	$6.29	$11.98
75	$332.16	$631.10	$296.12	$562.63	$4.50	$8.48	$6.29	$11.98
76	$345.32	$656.11	$307.85	$584.92	$4.50	$8.48	$6.29	$11.98
77	$358.50	$681.15	$319.62	$607.28	$4.50	$8.48	$6.29	$11.98
78	$371.65	$706.14	$331.32	$629.51	$4.50	$8.48	$6.29	$11.98
79	$384.79	$731.10	$343.04	$651.78	$4.50	$8.48	$6.29	$11.98
80+	$397.96	$756.12	$354.77	$674.06	$4.50	$8.48	$6.29	$11.98

* The “under 65 years” rate is applicable only to currently disabled enrolled members who are under age 65. The plan can no longer accept new enrollments for members under age 65.

Health benefits application

Retired Indiana Public Employees Association (RIPEA)

Underwritten by Anthem Insurance Companies, Inc.

RIPEA
2415 Directors Row, Suite M
Indianapolis, IN 46241

Please return this form in the enclosed envelope by December 1, 2026 for covera ge effective January 1, 2027.

IMPORTANT: This form is for new enrollments only. If you are currently enrolled and have modifications to your current coverage, please complete the change form on page 10. For new enrollments, please check the appropriate box if you are enrolling for retiree only, retiree + spouse coverage, or if you would like yourself and spouse enrolled under two single plans.

Case ID: L01168

FILL OUT THIS SECTION IF YOU ARE APPLYING FOR COVERAGE FOR YOURSELF. **PLEASE PRINT.**

Last name	First name	M.I.
Street address	City	State / ZIP code
Date of birth	☐ Male ☐ Female / ☐ Single ☐ Married	Social Security number / Phone number ( )
Date retired (MM/YYYY)	Date you'd like coverage to start	From where did you retire? / Email address

☐ I would like to sign up for the Comprehensive Plan F
☐ I would like to sign up for the Comprehensive Plan G
☐ I am also applying for the Value Plus Option

☐ Enrolling as a retiree only (single)
☐ Enrolling as a retiree + spouse (family coverage)
☐ Enrolling as a retiree and spouse separately (two single plans)

FILL OUT THIS SECTION IF YOU ARE APPLYING FOR COVERAGE FOR YOUR SPOUSE. **PLEASE PRINT.**

Last name	First name	M.I.
Street address	City	State / ZIP code
Date of birth	☐ Male ☐ Female	Social Security number / Phone number ( )
Date retired (MM/YYYY)	Date you'd like coverage to start	From where did you retire?

Please fill in the blanks below with the facts from your Medicare cards and sign your respective card.

Member

MEDICARE HEALTH INSURANCE

800-MEDICARE (800-633-4227)

NAME OF BENEFICIARY

MEDICARE CLAIM NUMBER _____ SEX _____

IS ENTITLED TO: EFFECTIVE DATE

HOSPITAL (PART A) _____

MEDICAL (PART B) _____

SIGN HERE → _____

Spouse

MEDICARE HEALTH INSURANCE

800-MEDICARE (800-633-4227)

NAME OF BENEFICIARY

MEDICARE CLAIM NUMBER _____ SEX _____

IS ENTITLED TO: EFFECTIVE DATE

HOSPITAL (PART A) _____

MEDICAL (PART B) _____

SIGN HERE → _____

Anthem Blue Cross and Blue Shield is the trade name of Anthem Insurance Companies, Inc. Independent licensee of the Blue Cross and Blue Shield Association.
Anthem is a registered trademark of Anthem Insurance Companies, Inc.

TERMS AND CONDITIONS

Please read this part carefully before you sign this form.

1. I may not assign any payment under my Anthem Blue Cross and Blue Shield program.
2. I will tell Anthem quickly if any change might not let me or my dependent have this coverage.
3. I give Anthem permission to record and/or listen to Anthem-related phone calls.

I have read the terms and conditions above and I accept them. I gave true answers to all questions on this form to the best of my knowledge. I know that Anthem relies on true answers to accept me for coverage. I know that giving any false answers may change my coverage or premium rates. Giving answers that aren't true — or leaving out any important facts in this form — means my coverage can be denied or canceled. I know this is a group health plan. I know I can't have this coverage if I have another Medicare Supplement plan.

Member signs here	Date	Spouse signs here	Date
X		X	

Please read and fill out:

I want to sign up for this health plan with Anthem. I know my coverage starts on the date shown on my health plan ID card. I also know a claim may not be paid — or my coverage may be canceled — if I give false answers on this form or with a claim.

Do you or your spouse have any other hospital and/or health coverage? If yes, fill out these blanks:

Policyholder name	Policy number
Insurance company name	Effective date

If you currently have an existing individual or group Medicare Supplement or Medicare Advantage plan, you are responsible for canceling that plan prior to January 1, 2027.

Change form for optional coverage

Case ID: L01168

Retired Indiana Public Employees Association (RIPEA)

Effective **January 1, 2027**, make the following additions or deletions to my group insurance program, as indicated:

☐ **Switch** my benefits from Comprehensive Plan F to Comprehensive Plan G.

☐ **Switch** my benefits from Comprehensive Plan G to Comprehensive Plan F.

☐ **Add** Value Plus Option to my benefits.

☐ **Delete** Value Plus Option from my benefits.

☐ **Cancel** all coverage under this plan.

☐ I am currently covered as retiree + spouse. Please split my coverage into two single plans.

☐ I am currently covered as retiree only, and my spouse is enrolled under their own single plan. Please combine our plan to retiree + spouse (family coverage with the younger of retiree or spouse as primary).

If you currently have an existing individual or group Medicare Supplement or Medicare Advantage plan, you are responsible for canceling that plan prior to January 1, 2027.

Subscriber name (printed)		Spouse name (printed)	
Subscriber Social Security number	Date of birth	Spouse Social Security number	Date of birth
Subscriber signature **X**		Spouse signature **X**	

If you want to make this option change effective **January 1, 2027**, this form must be postmarked no later than **December 1, 2026**. Only written, signed, and dated requests for changes in coverage will be accepted. Telephone requests cannot be honored. If you have questions, please call Customer Service at **866-649-2041**. If you are currently enrolled in the plan and do not want to make any changes, **no action is needed**. We can process after December 1, but your first invoice may be delayed.

To file claims for services received under the Value Plus Option, please instruct your dental or vision provider to either file directly to the address below or to give you a copy of the itemized statement so you can file the claim. Claims should be mailed to the address below:

Dental claims	**Vision claims**
Anthem Blue Cross and Blue Shield Dental Claims Unit P.O. Box 659444 San Antonio, TX 78265-9444	Blue View Vision Attn: OON Claims P.O. Box 8504 Mason, OH 45040-7111

If you are utilizing an in-network vision provider that is part of the Blue View Vision network, no claim form is required and your vision provider will file the claim directly to Anthem electronically.

Anthem Blue Cross and Blue Shield is the trade name of Anthem Insurance Companies, Inc. Independent licensee of the Blue Cross and Blue Shield Association.
Anthem is a registered trademark of Anthem Insurance Companies, Inc.



Choose with confidence.

All plans are available at competitive rates.

Anthem

RIPEA
RETIRED INDIANA PUBLIC EMPLOYEES ASSOCIATION

Anthem Blue Cross and Blue Shield is the trade name of Anthem Insurance Companies, Inc. Independent licensee of the Blue Cross and Blue Shield Association.

Anthem is a registered trademark of Anthem Insurance Companies, Inc.