



WPS Medicare Supplement Insurance Plans

NO WORRIES. NO HASSLES.

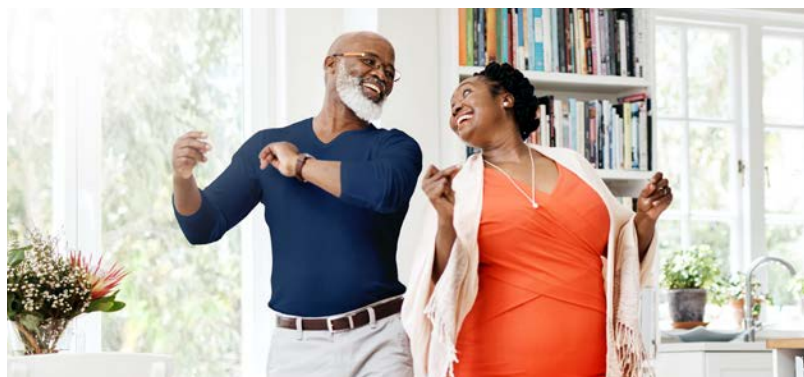
Rates effective Jan. 1, 2024

**Choose peace-of-mind
coverage with caring
customer support.**

1-800-236-1448
wpsmedicareolutions.com

WI_MSS_2306

WPS | HEALTH
INSURANCE®
Medicare Supplement Insurance



Get to know WPS

A good reputation is earned. With 60+ years providing superior service to seniors, WPS Medicare supplement insurance is chosen by more Wisconsinites than any other company.* As a not-for-profit company with a stable rate history², WPS Medicare supplement insurance plans offer great value and peace of mind!

Choose freedom

With WPS, you can visit any doctor in the United States who accepts Medicare. There are no networks, no worries, and no hassles.

WPS gives you a healthy edge

WPS customers get special programs and services with their plan, including:

- Vision care program³
- Hearing care program³
- Unlimited preventive care benefit⁴
- Optional \$100,000 foreign travel emergency rider⁵
- 2% discount when you use automatic bank withdrawal
- 7% household discount⁶
- Option to purchase dental coverage⁷

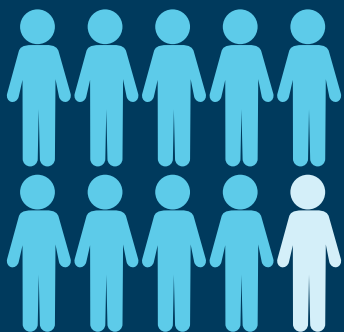
*Based on enrollment data submitted to NAIC, 2022.

¹Based on customer support survey response data, 2022. ²Based on historical Wisconsin plan rate increases filed with Wisconsin Office of the Commissioner of Insurance. ³Vision and hearing programs are not insurance, are not part of the insurance policy, and can be changed or discontinued at any time. Limitations, member fees, and restrictions may apply. ⁴Base plans include Medicare Part B preventive services with no maximum benefit amounts.

⁵Requires purchase of an additional rider. ⁶Household: Two or more individuals who reside together in the same dwelling. Dwelling is defined as a single home, condominium unit, or apartment unit within an apartment complex. ⁷WPS has partnered with Delta Dental to provide dental coverage. Dental policies are underwritten by Delta Dental of Wisconsin.

“I get the privilege of helping seniors through every part of their Medicare journey.”

—Jordan
Sales Representative



9 out of 10

customers surveyed say they would recommend WPS to their friends and family¹

WPS by the numbers

75⁺

Years as a not-for-profit company
serving the health care needs of
Wisconsinites

60⁺

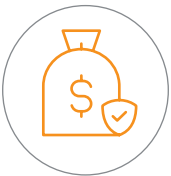
Years serving
seniors

Providing
**Medicare
supplement
insurance**
across the U.S.



16 million beneficiaries⁸

Served across all lines of business, including WPS
Government Health Administrators' Medicare administrative
contracts and WPS Military and Veterans Health



214.5 million claims paid⁸

across all lines of business



Over 65,000 policies⁸

Issued and administered by WPS for Medicare
supplement insurance.

⁸WPS Health Solutions Enterprise Fact Sheet, 2023.



**“I don’t ever see wanting to
change to another company.
Don’t go anywhere else!”**

—Dean
Customer since 2019
St. Croix County



Part A

Inpatient/hospital insurance



Part B

Outpatient/medical insurance

Part C

Medicare Advantage plans replace Parts A and B and may include prescription drug coverage

Part D

Prescription drug plans can be used with Medicare supplement insurance

Medicare supplement plans work with Part A and Part B to enhance coverage. With Original Medicare Part A and Part B, you can also add any stand-alone Medicare prescription drug plan you choose.

How to choose a Medicare supplement insurance plan

Start by choosing your base plan. Then, choose optional riders for more coverage at an additional cost. See page 6 for details on base plans and riders.

Choose base plan

Base Plan OR Base Plan with Copay

Choose optional riders

- 1 Rider 1 Part A Deductible**
WPS pays either 100% or 50% of the Medicare Part A deductible
- 2 Rider 2 Part B Deductible**
WPS pays the Medicare Part B deductible each calendar year¹
- 3 Rider 3 Part B Excess Charges**
WPS pays the difference between what Medicare approves and the amount charged by a health care provider if the provider does not accept Medicare assignment
- 4 Rider 4 Additional Home Health Care**
Increases the number of visits allowed for home health care
- 5 Rider 5 Foreign Travel Emergency**
WPS reimburses for covered services received outside the U.S.

¹Optional Part B Deductible rider is only available to applicants first eligible for Medicare prior to Jan. 1, 2020.

Find out more about how Medicare works

1-800-236-1448
wpsmedicareolutions.com

“WPS makes you feel good, they make you feel relaxed, they make you feel special. That’s what service is all about.”

—Ike
Customer since 2016
Milwaukee County



Enroll after you turn 65

If you have reached the 65-year milestone and are already signed up for Medicare, you can enroll in a WPS Medicare supplement insurance plan at any time during the year. There is no Annual Enrollment Period as with Medicare Advantage plans. After your Open Enrollment Period ends, you may be required to answer health questions to enroll.

If you have other coverage that's terminating or changing, you may be eligible for guaranteed acceptance of a WPS Medicare supplement insurance plan.

Take the first step

Determine your rate area. Check the box below for your rate area.



Area 1

Milwaukee area and southeastern Wisconsin

530__ All ZIPs that begin with these 3 numbers
531__ 01-13, 16-19, 22-24, 26, 27, 29-36, 39-46,
49-55, 58-75, 77, 79-83, 85-89, 92-94, 96-99
532__ All ZIPs that begin with these 3 numbers
533__ All ZIPs that begin with these 3 numbers
534__ All ZIPs that begin with these 3 numbers



Area 2

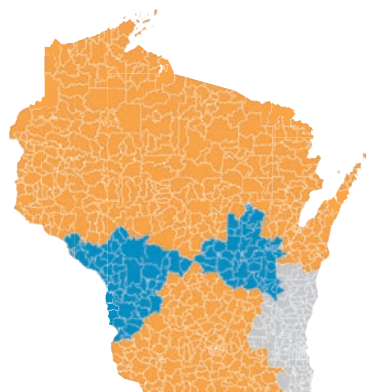
Central and western Wisconsin

546__ All ZIPs that begin with these 3 numbers
549__ All ZIPs that begin with these 3 numbers



Area 3

All other Wisconsin ZIP codes and moving out of state



Area 1 Area 2 Area 3

For Medicare, timing is everything

Understand the enrollment timeline



12 months before you turn 65

You should begin preparing for your transition to Medicare.



3 months before you turn 65

Medicare's Initial Enrollment Period begins, and you can apply for a Medicare supplement plan.



1st of the month in which you turn 65: Enroll in Part B and a Medicare supplement

If you apply for a Medicare supplement plan during your Open Enrollment Period, you won't need to answer any health questions.



3 months after you turn 65

Medicare's Initial Enrollment Period ends.



6 months after you turn 65

Medicare supplement Open Enrollment Period ends.



said their Medicare supplement plan makes it easier to handle medical bills and paperwork.²

²Seniors' Satisfaction with their Medicare Supplemental Insurance Coverage, conducted by Global Strategy Group on behalf of America's Health Insurance Plans (AHIP), 2023.

Design your plan

1. Determine your rate area (see previous page)

☐ **Area 1**
See rates on page 7

☐ **Area 2**
See rates on page 8

☐ **Area 3**
See rates on page 9

2. Select your base plan (choose one)

<input type="checkbox"/> Base Plan—highest coverage option	OR	<input type="checkbox"/> Base Plan with Medicare Part B copayment or coinsurance rider
Covers your Medicare Part A and Part B copayments and coinsurance—costs you would otherwise pay out of pocket. This plan offers unlimited preventive benefits.*		After you pay the Medicare Part B deductible, you pay a \$20 copayment for office visits and either up to a \$50 copayment for emergency room visits or the Medicare Part B coinsurance, whichever is less. This plan offers unlimited preventive benefits.*

*Base plans include Medicare Part B preventive services with no maximum benefit amounts.

3. Choose optional riders

Enhance your base plan with optional benefit riders, each at an additional cost.

- ☐ **Rider 1—Medicare Part A Deductible**—WPS will pay either 100% or 50% of your Medicare Part A deductible during the first 60 days of hospitalization.
- ☐ 100% Medicare Part A Deductible **OR** ☐ 50% Medicare Part A Deductible
- ☐ **Rider 2—Medicare Part B Deductible** (available for Base Plan with highest coverage option only)—WPS will pay your Medicare Part B deductible each calendar year. This rider is only available to applicants who were first eligible for Medicare prior to Jan. 1, 2020.
- ☐ **Rider 3—Medicare Part B Excess Charges**—If your health care provider does not accept Medicare assignment, WPS will pay the difference between what Medicare approves for payment and the amount charged by the provider. The difference shall be no more than the actual charge or the limiting charge allowed by Medicare, whichever is less.
- ☐ **Rider 4—Additional Home Health Care**—WPS will pay benefits for an additional 325 home health care visits each calendar year up to a total of 365 visits per year, including those covered by Medicare.
- ☐ **Rider 5—Foreign Travel Emergency**—WPS will pay 80% of the billed charges for expenses associated with medically necessary emergency medical care you receive outside the U.S. that begins in the first 60 days of a trip after you satisfy a deductible of \$250; lifetime maximum benefit of \$100,000.

4. Apply discounts for which you qualify

- ☐ **2% Automatic Bank Withdrawal Discount**—Receive a 2% discount when you pay your premium by automatic bank withdrawal each month.
- ☐ **7% Household Discount**—Receive a 7% discount when you and another member of your household enroll in a WPS Medicare supplement insurance plan. Household is defined as two or more individuals who reside together in the same dwelling. Dwelling is defined as a single home, condominium unit, or apartment unit within an apartment complex.

Area 1 monthly rates

Base Plans <i>Choose One</i>			Optional Riders					
Age at Time of Enrollment	Base Plan Only	Base Plan with Copay/ Coinsurance	Rider 1 <i>Choose One</i>		Rider 2	Rider 3	Rider 4	Rider 5
			Part A Deductible 100%	OR Part A Deductible 50%	Part B Deductible ¹	Part B Excess Charges	Additional Home Health Care	Foreign Travel Emergency
65	141.06	122.59	28.68	14.06	20.69	6.61	2.04	1.53
66	148.90	129.39	30.48	14.97	20.69	6.85	2.04	1.53
67	156.77	136.22	32.36	15.86	20.69	7.13	2.04	1.53
68	164.62	143.06	34.19	16.76	20.69	7.40	2.04	1.53
69	172.47	149.89	36.03	17.64	20.69	7.69	2.04	1.53
70	180.34	156.71	37.87	18.54	20.69	7.94	2.04	1.53
71	188.17	163.53	39.70	19.45	20.69	8.23	2.04	1.53
72	196.03	170.36	41.54	20.37	20.69	8.47	2.04	1.53
73	203.90	177.18	43.36	21.25	20.69	8.78	2.04	1.53
74	211.74	184.01	45.21	22.14	20.69	9.06	2.04	1.53
75	219.60	190.82	47.03	23.05	20.69	9.30	2.04	1.53
76	227.47	197.65	48.89	23.95	20.69	9.59	2.04	1.53
77	235.31	204.49	50.71	24.84	20.69	9.87	2.04	1.53
78	243.16	211.32	52.55	25.73	20.69	10.15	2.04	1.53
79	250.99	218.09	54.37	26.63	20.69	10.40	2.04	1.53
80	258.87	224.96	56.23	27.55	20.69	10.70	2.04	1.53
81	264.00	229.42	58.06	28.46	20.69	10.94	2.04	1.53
82	269.22	233.95	59.90	29.35	20.69	11.22	2.04	1.53
83	274.54	238.57	61.72	30.27	20.69	11.50	2.04	1.53
84	280.02	243.34	63.57	31.16	20.69	11.77	2.04	1.53
85+	285.54	248.14	65.41	32.03	20.69	12.01	2.04	1.53
Under 65	570.40	495.66	125.15	61.31	20.69	23.01	2.04	1.53

Calculate your plan cost—Area 1

Please refer to pages 6–8 for descriptions of benefit options.

1. Base plan rate (choose one)

\$ _____

2. Choose optional riders

Rider 1—Medicare Part A Deductible

\$ _____

Rider 2—Medicare Part B Deductible¹

\$ _____

Rider 3—Medicare Part B Excess Charges

\$ _____

Rider 4—Additional Home Health Care

\$ _____

Rider 5—Foreign Travel Emergency

\$ _____

3. Your total per month

Total = \$ _____

4. Apply discounts for which you qualify²

2% Automatic Bank Withdrawal Discount

Total x 0.98 = \$ _____

OR, 7% Household Discount

Total x 0.93 = \$ _____

OR, BOTH Discounts

Total x 0.9114 = \$ _____

¹This rider is only available to applicants who were first eligible for Medicare prior to Jan. 1, 2020, and who purchase our highest-level base plan.

²Discounts are approximate; actual discount amount will be determined when your application is approved.

Area 2 monthly rates

Base Plans <i>Choose One</i>			Optional Riders					
Age at Time of Enrollment	Base Plan Only	Base Plan with Copay/ Coinsurance	Rider 1 <i>Choose One</i>		Rider 2	Rider 3	Rider 4	Rider 5
			Part A Deductible 100%	OR Part A Deductible 50%	Part B Deductible ¹	Part B Excess Charges	Additional Home Health Care	Foreign Travel Emergency
65	138.91	120.72	28.24	13.85	20.69	6.51	2.04	1.53
66	146.63	127.42	30.02	14.74	20.69	6.74	2.04	1.53
67	154.38	134.14	31.87	15.62	20.69	7.02	2.04	1.53
68	162.11	140.88	33.67	16.50	20.69	7.28	2.04	1.53
69	169.84	147.60	35.48	17.38	20.69	7.57	2.04	1.53
70	177.59	154.32	37.29	18.26	20.69	7.81	2.04	1.53
71	185.30	161.04	39.09	19.15	20.69	8.10	2.04	1.53
72	193.04	167.76	40.91	20.06	20.69	8.35	2.04	1.53
73	200.79	174.47	42.70	20.92	20.69	8.64	2.04	1.53
74	208.51	181.20	44.52	21.81	20.69	8.92	2.04	1.53
75	216.25	187.91	46.31	22.70	20.69	9.16	2.04	1.53
76	224.00	194.63	48.15	23.59	20.69	9.44	2.04	1.53
77	231.73	201.38	49.94	24.46	20.69	9.72	2.04	1.53
78	239.45	208.09	51.75	25.33	20.69	9.99	2.04	1.53
79	247.17	214.77	53.54	26.23	20.69	10.25	2.04	1.53
80	254.93	221.54	55.38	27.14	20.69	10.53	2.04	1.53
81	259.98	225.93	57.18	28.03	20.69	10.78	2.04	1.53
82	265.12	230.39	58.99	28.90	20.69	11.05	2.04	1.53
83	270.36	234.94	60.78	29.81	20.69	11.33	2.04	1.53
84	275.75	239.63	62.60	30.68	20.69	11.59	2.04	1.53
85+	281.19	244.36	64.42	31.55	20.69	11.83	2.04	1.53
Under 65	561.71	488.11	123.24	60.37	20.69	22.66	2.04	1.53

Calculate your plan cost—Area 2

Please refer to pages 6–8 for descriptions of benefit options.

1. Base plan rate (choose one)	\$ _____
2. Choose optional riders	
Rider 1—Medicare Part A Deductible	\$ _____
Rider 2—Medicare Part B Deductible ¹	\$ _____
Rider 3—Medicare Part B Excess Charges	\$ _____
Rider 4—Additional Home Health Care	\$ _____
Rider 5—Foreign Travel Emergency	\$ _____
3. Your total per month	Total = \$ _____
4. Apply discounts for which you qualify²	
2% Automatic Bank Withdrawal Discount	Total x 0.98 = \$ _____
OR, 7% Household Discount	Total x 0.93 = \$ _____
OR, BOTH Discounts	Total x 0.9114 = \$ _____

¹This rider is only available to applicants who were first eligible for Medicare prior to Jan. 1, 2020, and who purchase our highest-level base plan.

²Discounts are approximate; actual discount amount will be determined when your application is approved.

Area 3 monthly rates

Base Plans <i>Choose One</i>			Optional Riders					
Age at Time of Enrollment	Base Plan Only	Base Plan with Copay/ Coinsurance	Rider 1 <i>Choose One</i>		Rider 2	Rider 3	Rider 4	Rider 5
			Part A Deductible 100%	OR Part A Deductible 50%	Part B Deductible ¹	Part B Excess Charges	Additional Home Health Care	Foreign Travel Emergency
65	125.68	109.22	25.55	12.53	20.69	5.89	2.04	1.53
66	132.66	115.28	27.16	13.34	20.69	6.10	2.04	1.53
67	139.67	121.36	28.83	14.13	20.69	6.35	2.04	1.53
68	146.67	127.46	30.46	14.93	20.69	6.59	2.04	1.53
69	153.66	133.54	32.10	15.72	20.69	6.85	2.04	1.53
70	160.67	139.62	33.74	16.52	20.69	7.07	2.04	1.53
71	167.65	145.70	35.37	17.33	20.69	7.33	2.04	1.53
72	174.65	151.78	37.01	18.15	20.69	7.55	2.04	1.53
73	181.66	157.85	38.63	18.93	20.69	7.82	2.04	1.53
74	188.65	163.94	40.28	19.73	20.69	8.07	2.04	1.53
75	195.65	170.01	41.90	20.54	20.69	8.29	2.04	1.53
76	202.66	176.09	43.56	21.34	20.69	8.54	2.04	1.53
77	209.65	182.19	45.18	22.13	20.69	8.79	2.04	1.53
78	216.64	188.27	46.82	22.92	20.69	9.04	2.04	1.53
79	223.62	194.31	48.44	23.73	20.69	9.27	2.04	1.53
80	230.64	200.43	50.10	24.55	20.69	9.53	2.04	1.53
81	235.21	204.40	51.73	25.36	20.69	9.75	2.04	1.53
82	239.86	208.44	53.37	26.15	20.69	10.00	2.04	1.53
83	244.60	212.55	54.99	26.97	20.69	10.25	2.04	1.53
84	249.48	216.80	56.64	27.76	20.69	10.49	2.04	1.53
85+	254.40	221.08	58.28	28.54	20.69	10.70	2.04	1.53
Under 65	508.20	441.61	111.50	54.62	20.69	20.50	2.04	1.53

Calculate your plan cost—Area 3

Please refer to pages 6–8 for descriptions of benefit options.

1. Base plan rate (choose one)	\$ _____
2. Choose optional riders	
Rider 1—Medicare Part A Deductible	\$ _____
Rider 2—Medicare Part B Deductible ¹	\$ _____
Rider 3—Medicare Part B Excess Charges	\$ _____
Rider 4—Additional Home Health Care	\$ _____
Rider 5—Foreign Travel Emergency	\$ _____
3. Your total per month	Total = \$ _____
4. Apply discounts for which you qualify²	
2% Automatic Bank Withdrawal Discount	Total x 0.98 = \$ _____
OR, 7% Household Discount	Total x 0.93 = \$ _____
OR, BOTH Discounts	Total x 0.9114 = \$ _____

¹This rider is only available to applicants who were first eligible for Medicare prior to Jan. 1, 2020, and who purchase our highest-level base plan.

²Discounts are approximate; actual discount amount will be determined when your application is approved.

With our Medicare supplement insurance, peace of mind is part of the plan

Only the luckiest of us get to age without ever worrying about our health, medical costs, and the stress of managing it all. No one knows what the future holds. Preparing for life on a fixed income can be challenging, much less trying to predict and budget for your future health care needs.

It's important to know that Original Medicare doesn't pay for everything. With Original Medicare, there is no out-of-pocket maximum for deductibles, copays, and coinsurance. If you need health care, those costs can add up quickly. Medicare supplement insurance helps cover the costs Original Medicare leaves behind.

Our Medicare supplement insurance plans:

- **Work with Medicare**—If Medicare pays for a service, we cover it.
- **Are guaranteed renewable**—Keep your policy for life, as long as premiums are paid.
- **Have no networks**—You're free to see any provider, anywhere in the U.S., that accepts Medicare.
- **Offer live, U.S.-based customer support**—You'll speak with a friendly, knowledgeable, licensed representative who is trained to help get you the answers you need.

When you purchase one of our Medicare supplement insurance plans, it doesn't mean you'll never face challenges or hard times. Instead, it means you'll have more peace of mind when those times come. We've been serving seniors for more than 60 years, and we'll be there for you, too.

Medicare Supplement

NO WORRIES.

NO HASSLES.

NO NETWORKS.

Insurance Plans

Opportunities for connection

It's important to maintain social connections, especially as we age. We offer our Medicare supplement insurance customers options for connecting with us and each other. Our groups and programs educate, inform, offer the chance to provide feedback and drive change, and foster a sense of connection and well-being.



WPS Medicare Solutions Group on Facebook

Our private Facebook group offers ways for seniors to connect with each other, learn more about Medicare options, and find tips for healthy living.

Members can also explore helpful tools like enrollment checklists and “how-to” videos. We curate all the content ourselves and don't allow any sales pitches or spam posts.

This group is open to anyone approaching or at Medicare age. **You don't need to be a current customer to join.** To find the group, search “WPS Medicare Solutions” on Facebook and click the “Join group” button.



WPS Pen Pal Program

Writing letters can be a fun way to maintain relationships and create new social connections. Sharing stories and receiving mail from someone who cares about you can add joy to your life. Besides, who doesn't enjoy receiving a letter or card in the mail?

The WPS Pen Pal Program is another special perk available to our Medicare supplement insurance customers. We connect customers who express interest in the program to a WPS employee they can correspond with. We send new pen pals a welcome kit to help them get started. Then, participants get to know their pen pal at their own pace.



WPS Cares Community

At WPS, we want to know what everyone thinks. That includes current customers, non-customers, and future customers. That's why we created the Cares Community. Members of the Cares Community share their insights and opinions by completing online surveys and polls. They can also connect with other community members in the private Cares Community Member Hub, play word games, and more! By joining the Cares Community, you become an active part of the conversations that help us enhance our products and services, while getting a look behind the scenes of WPS.



Limitations and exclusions

No insurance policy covers everything. Here's a list of things our Medicare supplements do not cover:

- A. Personal comfort items
- B. Routine physical exams and any related diagnostic, X-ray and laboratory tests covered by Medicare
- C. Eye exams and hearing exams, except as stated in the policy
- D. Orthopedic shoes or other supporting devices for the feet
- E. Routine foot care not covered by Medicare
- F. Custodial care, including maintenance care or supportive care
- G. Cosmetic surgery, except as stated in the policy
- H. Outpatient prescription drugs
- I. Professional services not provided by a physician, except as required by law
- J. Routine immunizations except if eligible under Medicare and except as stated in the policy
- K. Preparation, fitting, or purchase of eyeglasses or hearing aids, unless covered by Medicare
- L. Care, treatment, filling, removal, or replacement of teeth; dental X-rays, root canals, surgery for impacted teeth, or other surgical procedures to the teeth or supporting structures
- M. Nursing home care costs beyond what is covered by Medicare and the additional 30-day skilled nursing mandated by s. 632.895 (3), Stats
- N. If you terminate your Medicare coverage, expenses which would have been covered by Medicare
- O. Your Medicare Part A Deductible, unless you purchase the Medicare 100% Part A Deductible rider or the Medicare 50% Part A Deductible Rider
- P. Your Medicare Part B Deductible, unless you purchase the Medicare 100% Part B Deductible Rider
- Q. Physician charges above Medicare's approved charge, unless you purchase the Medicare 100% Part B Excess Charges Rider
- R. Home health care beyond 40 visits, unless you purchase the Additional Home Health Care Rider
- S. Any health care treatments, services, or supplies received outside the United States, unless you purchase the Foreign Travel Emergency Rider
- T. Any health care treatments, services, or supplies:
 - Not covered by Medicare, unless specifically stated in the policy
 - You, or anyone on your behalf, aren't legally obligated to pay for
 - Paid for by Medicare or another government entity or program
 - For any injury, occurring on or after your effective date, caused by an act of war
 - Provided by immediate family members or by anyone else who lives with you
 - To the extent covered by worker's compensation or similar laws
 - Provided before the effective date of coverage or after coverage ends
 - Determined by Medicare to be unreasonable or unnecessary
 - For a military service-related condition treated at any military or veterans hospital, or at any hospital contracted by any national government or agency



"You want an insurer that's going to be there, somebody that's been around for a while, has a track record. And that's what WPS has been for us."

—Brende
Customer since 2014

Vision and hearing programs for a healthy edge

Being able to see and hear well can help make it easier to enjoy your favorite activities and time with your favorite people. Unfortunately, routine hearing and vision care is not currently covered by Original Medicare, and hearing aids and eyeglasses can be expensive. We offer programs that can help make hearing and vision care more affordable. The Hearing Care Solutions and EyeMed programs are available to all our Medicare supplement insurance customers.¹

¹Vision and hearing programs are not insurance, are not part of the insurance policy, and can be changed or discontinued at any time. Vision program is administered by EyeMed Vision Care, LLC. Hearing program is administered by Hearing Care Solutions, Inc.



Hearing Care Solutions makes better hearing affordable



Available to all our Medicare supplement customers, the Hearing Care Solutions program offers fixed prices for hearing aids. Plus, you're eligible for:

- Free comprehensive hearing exam
- Free hearing aid evaluation and fitting
- Three-year manufacturer's warranty including loss, damage, and repair
- Three-year supply of batteries (up to 64 cells per aid, per year)
- One year of follow-up care at no charge
- A 60-day evaluation period for your hearing aid
- 12-month interest-free financing (to those who qualify)

Examples of how you can save

Sample Savings	MSRP or Average Price	You Pay ¹
Three-year repair, loss, and damage warranty	\$500	\$0
Three years of hearing aid batteries	\$360	\$0
One year of office service with original provider	\$300	\$0
Basic digital hearing aid	\$1,300	\$450
Mid-level hearing aid	\$1,800	\$750
Premium digital hearing aid	\$3,000	\$1,350

¹These are savings examples only. May be used in conjunction with your existing insurance coverage. Hearing program is not part of the insurance policy, is offered at no additional charge, and can be changed or discontinued at any time. Hearing program is administered by Hearing Care Solutions, Inc.



“It’s just incredible, the peace of mind you get from knowing that you’re covered.”

Rick | Customer since 2020

Find out more about this program
Call 1-800-236-1448 today!



EyeMed Vision Care Program

All our Medicare supplement insurance plan customers receive access to the EyeMed



Vision Care program at no additional cost.¹ EyeMed offers substantial savings on eyewear at thousands of provider locations nationwide.

EyeMed's provider network includes many familiar national optical retailers.

**Find out more
about this program**

Call 1-800-236-1448 today!

**Does your vision provider
accept EyeMed?**

We would be happy to explain how this valuable program works and help you find a provider.

Vision Care Services		Customer Benefits
Eye exam (with dilation, as necessary)		\$5 off routine exam \$5 off contact lens exam
Complete Pair Eyeglass Purchase²		
Frames		
Any available frame at provider location		35% off retail price
Standard Plastic Lenses		
Single vision		\$50 patient responsibility
Bifocal		\$70 patient responsibility
Trifocal		\$105 patient responsibility
Lens Options		
UV coating		\$15 patient responsibility
Tint (solid and gradient)		\$15 patient responsibility
Standard scratch-resistant coating		\$15 patient responsibility
Standard polycarbonate		\$40 patient responsibility
Standard anti-reflective coating		\$45 patient responsibility
Standard progressive (add-on to bifocal)		\$65 patient responsibility
Other add-ons and services		20% off retail price
Contact Lenses (discount applies to materials only)		
Conventional		15% off retail price
Laser Vision Correction		
LASIK or PRK from U.S. Laser Network		15% off retail price 5% off promotional price
Frequency of use for examination, frames, lenses, or contact lenses unlimited		



Contact your local agent or call WPS today at 1-800-236-1448.

¹Vision program is not insurance and is not part of the insurance policy and can be changed or discontinued at any time. Vision program is administered by EyeMed Vision Care, LLC. ²Frame, lens, and lens option discounts apply only when purchasing a complete pair of eyeglasses. If purchased separately, customers receive 20% off the retail price. Benefits may not be combined with any discount, promotional offering, or other group benefit plans, except as indicated. Contract is effective July 1, 2022 through June 30, 2024.

Optional Delta Dental coverage

You can choose any dentist for a variety of dental services. From cleanings and X-rays to fillings and crowns, our optional dental coverage provides the essential coverage you need for a healthy smile.

Optional dental coverage includes:

- Annual maximum benefit: \$1,200 per individual.
- Annual deductible: \$50 per individual.
- Freedom to choose any licensed dentist. Seeing a dentist in the Delta Dental PPO network may result in lower out-of-pocket costs.

Monthly dental rate: \$48.06

Discounts available:

- Save 7% on your dental plan premium when you and a second household¹ member are enrolled in a WPS Medicare supplement plan
- Save 2% when you pay by automatic bank withdrawal

 **DELTA DENTAL®**



“It’s a wonderful life when you don’t have to worry about health care.”

— Tom | Customer since 2014

When You Visit a Delta Dental Dentist

Diagnostic and Preventive Care

	This policy pays ²	Frequency
Regular cleanings and routine exams	80%	2 per year
Bitewing X-rays	80%	1 set per year
Full mouth X-rays	80%	1 every 5 years
Emergency exam	80%	N/A

Restorative Services³

	This policy pays ²	Waiting period
Fillings and simple extractions	50%	6 months
Oral surgery, endodontic, and periodontic ⁴ services	50%	12 months
Crowns and prosthodontics (fixed or removable)	50%	12 months ⁵

¹Household: Two or more individuals who reside together in the same dwelling. Dwelling is defined as a single home, condominium unit, or apartment unit within an apartment complex. ²After \$50 deductible is met. ³Predetermination of benefits is strongly encouraged before restorative services are scheduled. ⁴Provides additional Evidence-Based Integrated Care Plan benefits for people with specific medical conditions. ⁵Replacement of a defective existing appliance 10 years after its original placement date.

Plan underwritten by Delta Dental of Wisconsin. Waiting period waived with proof of continuous insurance coverage from Delta Dental of Wisconsin for at least two years. This plan summary provides only a general description of benefits and limitations. A detailed description of coverage is in the applicable policy. Coverage is subject to all terms and conditions of the policy and any endorsements. The policy is your contract of insurance. If there's ever a discrepancy between the policy and this plan summary, the policy has final authority. Visit DeltaDentalWI.com to find a Delta Dental PPO dentist.

Notes

Notes



Ready to take the next step?

Contact your local agent or call WPS today at 1-800-236-1448.

8 a.m.–5 p.m., weekdays (year-round) and 8 a.m.–8 p.m., seven days a week (Oct. 1–Jan. 31).

Current WPS customers, please call 1-888-253-2694.



Proud partner of the
Milwaukee Brewers™

WPS | **HEALTH
INSURANCE**

Medicare supplement insurance

IMPORTANT INFORMATION:

In some states, all Medicare supplement insurance plans are offered to qualified individuals under the age of 65 and/or to Medicare-qualified individuals due to disability or end-stage renal disease. *Based on enrollment data submitted to NAIC, 2022. The intent of this advertisement is solicitation of insurance, and contact may be made by the insurer or a licensed agent. Neither Wisconsin Physicians Service Insurance Corporation (WPS), nor its agents, nor products are connected with the federal Medicare program. This plan summary provides only a general description of benefits and limitations. A detailed description of coverage is in the applicable policy. If there is ever a discrepancy between the policy and this document, the policy has final authority. Comments from our customers are a result of our questions regarding their thoughts about our services. No customers are directly or indirectly compensated for making a testimonial or endorsement. Milwaukee Brewers™ partnership is a paid endorsement.