

Ready to Help:

A guide to Medicare Plus BlueSM PPO and Medicare Supplement plans



2026

**READY
TO HELP**



bcbsm.com/medicare

The right Medicare coverage matters — you're on the right track!

Let your health speak for itself with a Medicare plan that best fits your needs.

Our licensed Medicare experts, experienced sales agents and comprehensive website will guide you to a plan that fits your lifestyle.



It's easy to enroll:



Call **1-833-844-3892**, from 8 a.m. to 9 p.m. Eastern time,
Monday through Friday, with weekend hours Oct. 1 through March 31.
TTY users, call **711**.



Enroll online at bcbsm.com/medicare.

Medicare Advantage

What you'll like about Blue	2
Top Medicare Advantage picks in Upper Michigan.....	4
Top Medicare Advantage picks of Lower Michigan.....	6
Popular picks available in all Michigan counties.....	8
Everyday wellness and preventive services.....	10
Medicare Plus Blue PPO optional supplemental dental and vision plan.....	11

Medicare supplement

Blue Cross Medicare Supplement SM plans	12
Blue Cross Medicare Supplement SM plans G and HD-G	13
Blue Cross Medicare Supplement SM Dental Vision Hearing Package	13



Contact your Blue Cross-authorized, independent agent for an explanation of plans available to you. There is no cost or need to commit to receive agent services.








Scan the QR code to start your application.

What you'll like about Blue

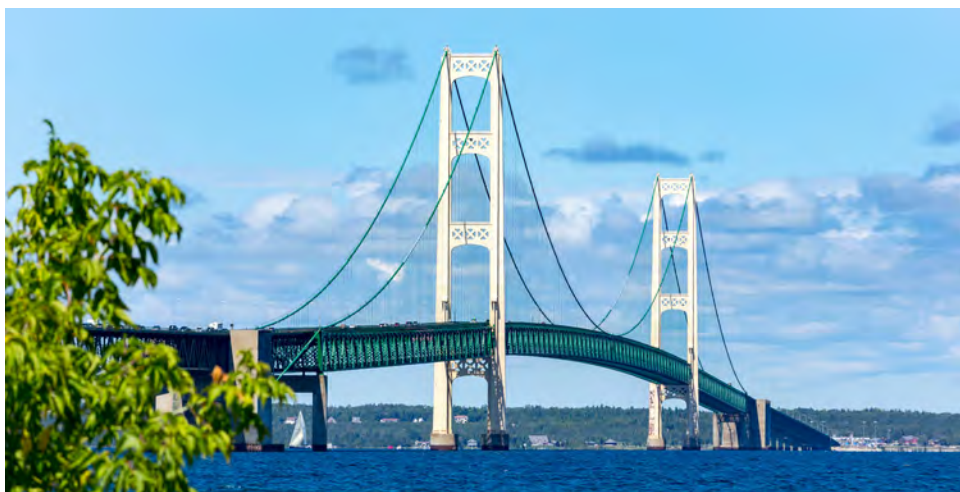
Blue Cross Blue Shield of Michigan is all about helping people live healthier lives. From the tip of the Keweenaw to the Motor City, our Medicare Plus Blue PPO plans cover Michigan.

Check out some of the extras included with our PPO plans:

-  **Access** to more than 65,000 active providers*
-  **Prescription drug coverage** included in all Medicare Plus Blue PPO plans
-  **Preventive dental services**, including, cleaning, X-rays, dental exams and fluoride
-  **No-cost** routine eye exam
-  **Hearing aid benefit** through TruHearing®

**Blue Cross Blue Shield of Michigan MA PPO Active Provider Counts report, July 2025.*





Blue Cross Well-BeingSM, online well-being resources to help form healthy habits



No-cost PCP office visits



While traveling, access our nationwide network of Blue plan doctors and hospitals



24/7 online member account connects you to your virtual member ID card, claim documents and the status of prior authorization and referral requests

A **Medicare Advantage PPO** (preferred provider organization) plan, such as Medicare Plus Blue PPO, gives you the freedom to choose any health care provider you prefer, although you'll pay lower out-of-pocket costs when you see in-network providers.

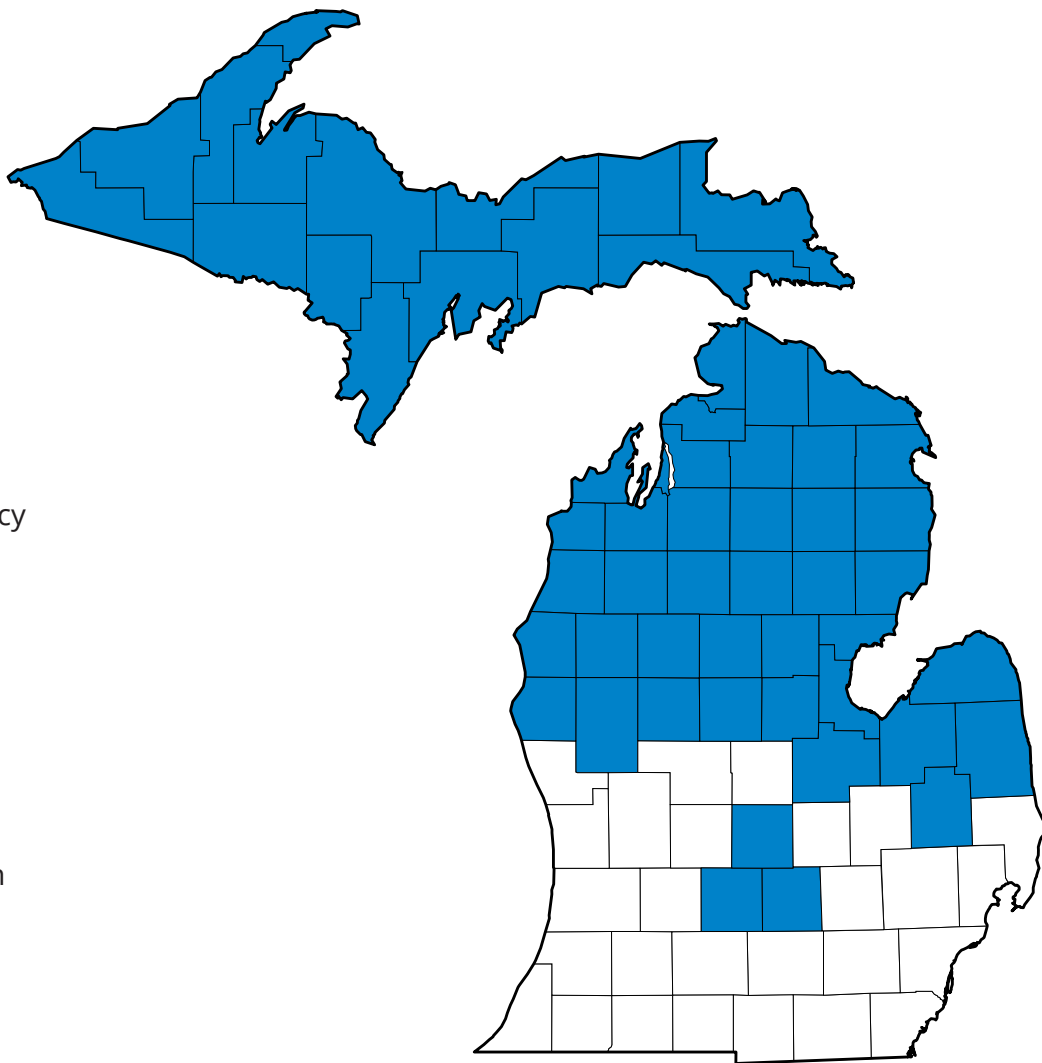
Top Medicare Advantage picks for Upper Michigan

Medicare Plus BlueSM PPO Value is a good fit if your health needs are limited to annual wellness and physical exams with minimal specialist use. You get full health care coverage and access to high-quality providers.

Value is the plan for you if you live in the upper counties of Michigan and prefer to pay for medical services at the time you use your benefits, rather than having a monthly premium.

Medicare Plus BlueSM PPO Value is available in these Michigan counties:

Alcona	Keweenaw
Alger	Lake
Alpena	Lapeer
Antrim	Leelanau
Arenac	Luce
Baraga	Mackinac
Bay	Manistee
Benzie	Marquette
Charlevoix	Mason
Cheboygan	Mecosta
Chippewa	Menominee
Clare	Midland
Clinton	Missaukee
Crawford	Montmorency
Delta	Newaygo
Dickinson	Oceana
Eaton	Ogemaw
Emmet	Ontonagon
Gladwin	Osceola
Gogebic	Oscoda
Grand Traverse	Otsego
Houghton	Presque Isle
Huron	Roscommon
Ingham	Saginaw
Iosco	Sanilac
Iron	Schoolcraft
Isabella	Tuscola
Kalkaska	Wexford



	MEDICARE PLUS BLUE SM PPO Value	MEDICARE PLUS BLUE SM PPO Vitality	MEDICARE PLUS BLUE SM PPO Assure
Monthly premium	\$0	\$38.50 to \$84.70	\$191.60 to \$298.60
In-network medical deductible	\$675	\$0	\$0
Maximum out of pocket (MOOP), in network	\$6,750	\$5,000	\$4,000
Primary care office visit copay	\$0	\$0	\$0
Specialist copay	\$50	\$30	\$10
Inpatient acute hospital copay per day (days 1 to 7)	\$430	\$250	\$100
Over-the-counter allowance	\$25 every three months, no rollover	\$50 every three months, no rollover	\$50 every three months, no rollover
Emergency care copay	\$130	\$130	\$130
Urgent care copay (depending on place of service)	\$0-\$50	\$0-\$50	\$0-\$40
Dental annual maximum	N/A	\$1,500/calendar year	\$1,500/calendar year
Vision – eye wear maximum	N/A	N/A	\$150/calendar year
Routine eye exam	\$0	\$0	\$0
Hearing aids (through TruHearing)	\$495 to \$1,695 copay per ear per year	\$495 to \$1,695 copay per ear per year	\$495 to \$1,695 copay per ear per year
Prescription drug deductible	\$615 (tiers 2, 3, 4 and 5)	\$0	\$0
1- to 31-day supply copays/coinsurance	Preferred	Preferred	Preferred
Prescription drug tiers			
Tier 1 preferred generic	\$2	\$0	\$0
Tier 2 generic	\$15	\$11	\$7
Tier 3 preferred brand	20%	20%	20%
Tier 4 nonpreferred drug	31%	25%	25%
Tier 5 specialty tier	25%	33%	33%
Catastrophic period (after your drug costs reach \$2,100)	\$0		

Note: All costs are in network; out-of-network costs may vary.

You won't pay more than \$35 for a one-month or \$105 for a three-month supply of each insulin product regardless of the cost-sharing tier. A plan's monthly premium is determined by the county you live in. Please call for more information about specific plan premiums.

Top Medicare Advantage picks for Lower Michigan

Medicare Plus BlueSM PPO Giveback is a good fit if you live in the Lower Michigan counties and your focus is living a healthy lifestyle and saving money.

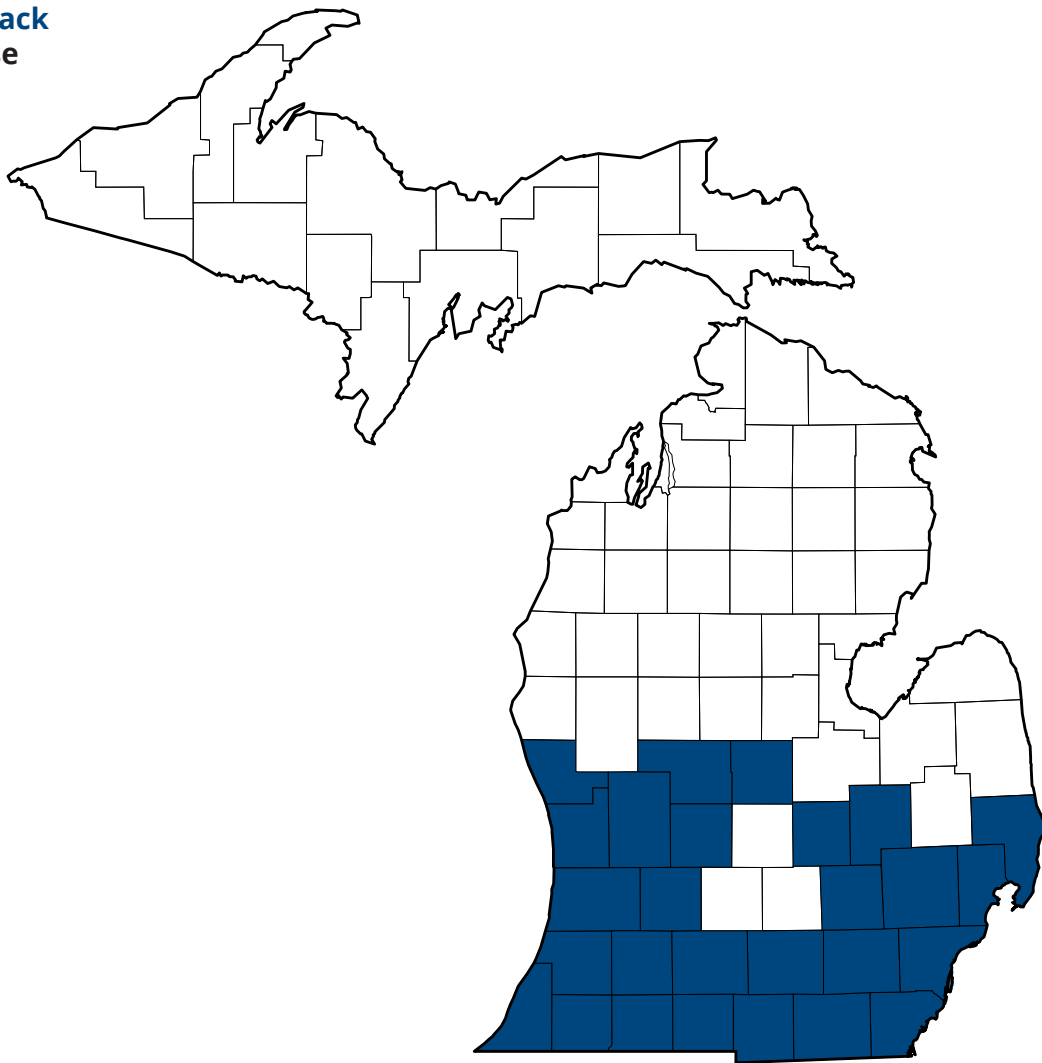
The **Giveback** plan from Blue Cross Blue Shield of Michigan provides \$840 per year back into social security checks, which helps protect you from financial burden if faced with serious health concerns.

Medicare Plus BlueSM PPO Secure is a good fit if your health needs are limited to annual wellness and physical exams with minimal specialist use. You'll get full health care coverage and access to high-quality providers.

Secure is the plan for you if you live in the lower counties of Michigan and prefer to pay for medical services at the time you use your benefits rather than having a monthly premium.

Medicare Plus BlueSM PPO Giveback and Secure are available in these Michigan counties:

Allegan	Livingston
Barry	Macomb
Berrien	Monroe
Branch	Montcalm
Calhoun	Muskegon
Cass	Oakland
Genesee	Ottawa
Gratiot	St. Clair
Hillsdale	Shiawassee
Ionia	St. Joseph
Jackson	Van Buren,
Kalamazoo	Washtenaw
Kent	Wayne
Lenawee	



Note: All costs are in network; out-of-network costs may vary.

A plan's monthly premium is determined by the county you live in. Please call for more information about specific plan premiums.

	MEDICARE PLUS BLUE SM PPO Giveback	MEDICARE PLUS BLUE SM PPO Secure	MEDICARE PLUS BLUE SM PPO Vitality	MEDICARE PLUS BLUE SM PPO Assure
Monthly premium	\$0 \$70 giveback	\$0	\$38.50 to \$84.70	\$191.60 to \$298.60
In-network medical deductible	\$650	\$0	\$0	\$0
Maximum out of pocket (MOOP), in network	\$9,250	\$6,750	\$5,000	\$4,000
Primary care office visit copay	\$0	\$0	\$0	\$0
Specialist copay	\$55	\$45	\$30	\$10
Inpatient acute hospital copay per day (days 1 to 7)	\$385	\$375	\$250	\$100
Over-the-counter allowance	N/A	\$40 every three months, no rollover	\$50 every three months, no rollover	\$50 every three months, no rollover
Emergency care copay	\$115	\$130	\$130	\$130
Urgent care copay (depending on place of service)	\$0-\$40	\$0-\$40	\$0-\$50	\$0-\$40
Dental annual maximum	N/A	\$1,000/calendar year	\$1,500/calendar year	\$1,500/calendar year
Vision – eye wear maximum	N/A	\$100/calendar year	N/A	\$150/calendar year
Routine eye exam	\$0	\$0	\$0	\$0
Hearing aids (through TruHearing)	\$495 to \$1,695 copay per ear per year	\$495 to \$1,695 copay per ear per year	\$495 to \$1,695 copay per ear per year	\$495 to \$1,695 copay per ear per year
Prescription drug deductible	\$150 (tiers 3, 4 and 5)	\$150 (tiers 3, 4 and 5)	\$0	\$0
1- to 31-day supply copays/coinsurance Prescription drug tiers	Preferred	Preferred	Preferred	Preferred
Tier 1 preferred generic	\$0	\$0	\$0	\$0
Tier 2 generic	\$7	\$7	\$11	\$7
Tier 3 preferred brand	20%	20%	20%	20%
Tier 4 nonpreferred drug	30%	30%	25%	25%
Tier 5 specialty tier	31%	31%	33%	33%
Catastrophic period (after your drug costs reach \$2,100)	\$0			

You won't pay more than \$35 for a one-month or \$105 for a three-month supply of each insulin product regardless of the cost-sharing tier.

Popular picks available in all Michigan counties

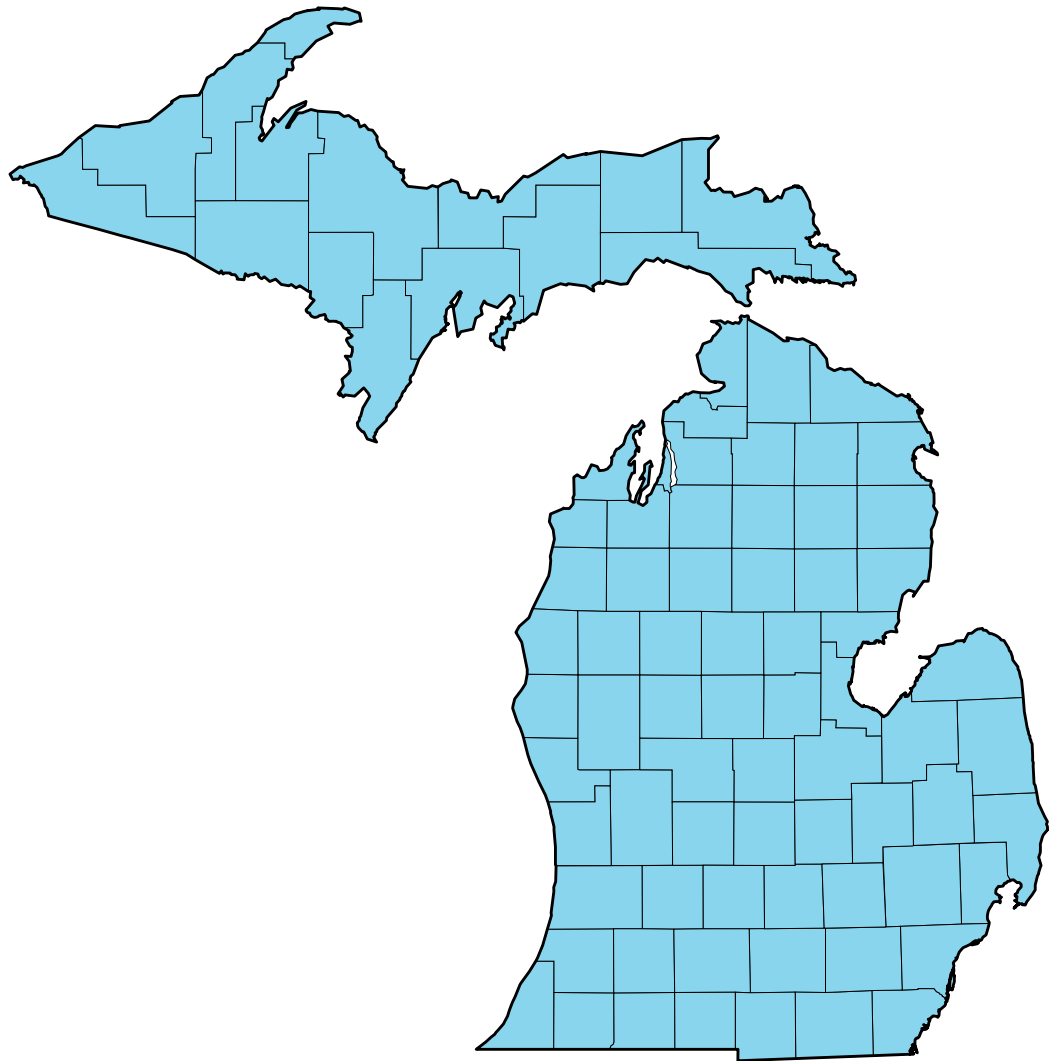
Medicare Plus BlueSM PPO Vitality is a good fit if you prefer a balance of **low premium with low out-of-pocket costs**.

With **Vitality** you'll get the most value with full health care services and extra benefits. It's a good fit if your goal is managing your ongoing care needs with financial stability.

Medicare Plus BlueSM PPO Assure is a good fit if you have health needs that require you to receive more frequent or specialized medical attention.

With comprehensive benefits from the highest-quality providers, **Assure** provides the lowest out-of-pocket costs and extra benefits not available with Original Medicare.

Medicare Plus BlueSM Vitality
and **Assure** are available in all
Michigan counties



	MEDICARE PLUS BLUE SM PPO Vitality	MEDICARE PLUS BLUE SM PPO Assure
Monthly premium	\$38.50 to \$84.70	\$191.60 to \$298.60
In-network medical deductible	\$0	\$0
Maximum out of pocket (MOOP), in network	\$5,000	\$4,000
Primary care office visit copay	\$0	\$0
Specialist copay	\$30	\$10
Inpatient acute hospital copay per day (days 1 to 7)	\$250	\$100
Over-the-counter allowance	\$50 every three months, no rollover	\$50 every three months, no rollover
Emergency care copay	\$130	\$130
Urgent care copay (depending on place of service)	\$0-\$50	\$0-\$40
Dental annual maximum	\$1,500/calendar year	\$1,500/calendar year
Vision – eye wear maximum	N/A	\$150/calendar year
Routine eye exam	\$0	\$0
Hearing aids (through TruHearing)	\$495 to \$1,695 copay per ear per year	\$495 to \$1,695 copay per ear per year
Prescription drug deductible	\$0	\$0
1- to 31-day supply copays/coinsurance	Preferred	Preferred
Prescription drug tiers		
Tier 1 preferred generic	\$0	\$0
Tier 2 generic	\$11	\$7
Tier 3 preferred brand	20%	20%
Tier 4 nonpreferred drug	25%	25%
Tier 5 specialty tier	33%	33%
Catastrophic period (after your drug costs reach \$2,100)	\$0	

Note: All costs are in network; out-of-network costs may vary.

You won't pay more than \$35 for a one-month or \$105 for a three-month supply of each insulin product regardless of the cost-sharing tier. A plan's monthly premium is determined by the county you live in. Please call for more information about specific plan premiums.

We're in tune with your health —

Everyday wellness

Annual wellness visits

Your wellness visit is a time for you to address concerns with your doctor before they grow into problems. The appointment is provided at no cost to you, although there could be out-of-pocket charges if other services are performed at that visit.

Health assessment

Complete a health assessment from your online member account and receive a customized plan to discuss with your primary care provider at your next visit.

Vaccines

Most adult Part D vaccines are included at no cost to you.

Blue Cross Virtual Well-BeingSM

Attend our virtual well-being webinars and guided meditations each week from your computer, tablet or mobile phone. Topics include home fitness, social isolation, healthy cooking and gardening.

Free SilverSneakers[®] fitness*

Most plans offer free access to a fitness center benefit with SilverSneakers. Join in person at participating locations across the U.S. or have a fitness kit mailed to you for at home workouts.

Advantage Dollars

Most plans offer Advantage Dollars to purchase over-the-counter items, including air purifiers, activity trackers or a smart scale. Advantage Dollar amounts vary by plan and renew quarterly with no rollover.

Blue365[®] discounts

Find discounts on fitness, healthy eating and personal care from well-known retailers, such as, Chewy, Nutrisystem, Skechers, Fitbit and Bosley Hair Restoration with Blue365 in your Blue Cross member account.

Tune in with TruHearing

A hearing aid through our Medicare Advantage plans will help you enjoy the sounds of Michigan.

You'll receive an annual routine hearing exam, an evaluation for hearing aids once per year and an option of varying levels of hearing aids from a basic model for \$495 copay per ear each year to the premium hearing aid for \$1,695 per ear each year.



**SilverSneakers not available with Giveback plan.*

it's just the way we are.

Get care your way

Virtual care

Get safe and secure online urgent medical and behavioral health services using your phone, tablet or computer from anywhere in the United States.

Virtual Care offered through Teladoc Health® is available 24/7/365 for urgent, medical appointments for non-emergency illnesses. Mental health services are available by appointment seven days a week.

24-Hour Nurse Line

Talk to a registered nurse about a minor illness or injury. Call the nurse line to discuss a procedure, symptoms or your health status.

Home-delivered prescription drugs

Free standard shipping, 90-day medication supply and 24/7 access to registered pharmacists is offered with plans that include prescription drugs.

Blue Cross Coordinated CareSM

With Blue Cross Coordinated Care, a nurse care manager oversees and assists members with chronic conditions. Additional services include, nutrition education, telemonitoring services, tobacco cessation coaching and caregiver support for caregivers of high-risk Medicare Advantage members who require at-home care.

Medicare Plus Blue PPO optional supplemental dental and vision plan

\$30.50 monthly premium, in addition to your monthly base plan premium

Dental			Vision
Comprehensive dental \$1,500 combined in- and out-of-network annual maximum. There are no waiting periods and no deductibles.			\$250 combined in- and out-of-network allowance may be used for elective contacts or one frame once every calendar year. No prior authorization needed. No deductible. Standard lenses are covered in full once per calendar year. Lens options are polycarbonate lenses or those with anti-reflective coating. Out-of-network covered at 50% coinsurance up to combined allowance.
Procedures	In-network	Out-of-network	
Restorative – onlays	25%	50%	
Periodontics (Surgery, debridement, localized delivery of antimicrobial agents)			
Dentures and removable partials (Includes adjustments and repairs)			
Bridges (Includes repairs)			
Implants (Includes maintenance and repairs)			
Implant bridges and implant crowns			
Anesthesia			
Consultation exams			

Frequency limits may apply.

Additional services for Medicare Plus Blue PPO Value and Giveback		
Procedures	In-network	Out-of-network
Fillings, crowns, crown repairs, root canal, extractions, deep cleaning	25%	50%

Medicare supplement plans



Medicare supplement is a state-approved health care policy also known as Medigap. These plans help make your health care expenses more predictable and manageable when you have Original Medicare.

A Blue Cross Medicare Supplement plan covers some or all of your out-of-pocket costs and is accepted across the United States.

Here are some reasons to consider a **Blue Cross Medicare Supplement plan**:

- Peace of mind with a plan that meets your needs and budget.
- Freedom from networks and referrals to see health providers who accept Original Medicare.
- Protection from unexpected medical costs not included with Original Medicare.
- The option to add the Dental Vision Hearing Package to your plan.
- A 10% household discount off your monthly premium if you live with another Blue Cross Medicare Supplement or Legacy Medigap member.
- Worry-free travel with coverage throughout the United States.

Our exclusive Blue Cross Well-BeingSM program offers online health and well-being resources with 24/7 access to:

- Programs and resources to address your interests and health goals
- Tools to track well-visits, screenings and other care needs
- A collaborative tobacco cessation program
- More than 100 fitness devices and apps

Like Medicare, Blue Cross Medicare Supplement coverage is accepted nationwide. There are no provider networks or referrals — just use any health care provider who accepts Original Medicare.

Simply present your Blue Cross Medicare Supplement member ID card and your red, white and blue Medicare health insurance card whenever you receive health care services. We'll coordinate payment with Medicare and your health care providers. In most cases, you'll never have to bother with claim filing or paperwork.

See the 2025 Blue Cross Medicare Supplement Outline of Coverage booklet for eligibility criteria on all available plans.



Medicare supplement plans can be sold in 10 standard plan options, plus two high-deductible plan options throughout the country. These are the Blue Cross Medicare Supplement Plans — A, C, D, F, High-Deductible F, G, High-Deductible G and N.

Our popular Medicare supplement plans

Plan G

Plan G is a comprehensive plan with robust coverage. Once you've met your annual deductible, you'll have no further out-of-pocket costs for services covered by your Original Medicare.

High-Deductible Plan G

This high-deductible plan offers the same benefits as Plan G, but has a lower monthly premium and a higher annual deductible. This plan may be good for those who are relatively healthy and want to lower their costs.

Blue Cross Medicare SupplementSM Dental Vision Hearing Package

Complete your Medicare supplement plan with a Dental Vision Hearing Package for \$34.50 a month. You'll receive:

- \$0 in-network dental exams, cleanings, X-rays and fluoride treatment
- In-network vision coverage that includes standard lenses every 12 months
- One \$0 hearing exam every 12 months and savings of up to 60% off average retail hearing aid prices at a TruHearing[®] provider

Speak with a Blue Cross-authorized, independent agent for more information on Blue Cross Medicare Supplement plans.

Notice of Availability

English: Call 1-877-241-2583 to connect with a complimentary interpreter who speaks English or to receive additional support you may need.

Spanish: Llame al 1-877-241-2583 para conectarse de forma gratuita con un intérprete que hable español o para recibir apoyo adicional que pueda necesitar.

Arabic: اتصل على 1-877-241-2583 للتواصل مع مترجم مجاني يتحدث اللغة العربية أو لتلقي المزيد من الدعم الذي قد تحتاجه.

Chinese Mandarin: 拨打1-877-241-2583联系一位会说普通话的免费翻译，或获取您可能需要的其他支持。

Albanian: Telefononi në numrin 1-877-241-2583 për t'u lidhur me një interpret pa pagesë që flet shqip ose për të marrë mbështetje shtesë që mund t'ju nevojitet.

German: Rufen Sie 1-877-241-2583 an, um einen kostenlosen Dolmetscher zu finden, der Deutsch spricht, oder um weitere Unterstützung zu erhalten.

Amharic: አማርኛ ከአሚናገር ነጻ ተርጓሚ ጋር ለመገናኘት ወይም ሊያስፈልግዎ የሚችል ተጨማሪ ድጋፍ ለማግኘት 1-877-241-2583 ላይ ይደውሉ።

Bengali: বিনামূল্যে বাংলা ভাষায় কথা বলতে পারেন এমন একজন সহায়ক দোভাষীর সাথে যোগাযোগ করতে অথবা আপনার প্রয়োজনীয় অতিরিক্ত সহায়তা পেতে 1-877-241-2583 নম্বরে কল করুন।

French: Appelez le 1-877-241-2583 pour entrer en contact avec un interprète gratuit qui parle français ou pour bénéficier d'un soutien supplémentaire dont vous pourriez avoir besoin.

Hindi: किसी ऐसे मानार्थ (कंप्लीमेंटरी) दुभाषिए से संपर्क करने के लिए जो हिंदी बोलता हो या ऐसी अतिरिक्त सहायता प्राप्त करने के लिए जिसकी आपको आवश्यकता हो सकती है, 1-877-241-2583 पर कॉल करें।

Korean: 한국어 무료 통역사와 연결하시거나 필요한 추가 지원을 받으시려면 1-877-241-2583로 전화해 주십시오.

Polish: Zadzwoń pod numer 1-877-241-2583, aby połączyć się z nieodpłatnym tłumaczem posługującym się językiem polskim lub aby – w razie potrzeby – uzyskać dodatkową pomoc.

Telugu: తెలుగు మాట్లాడే ఉచిత ఇంటర్ప్రెటీటర్తో కనెక్ట్ కావడానికి లేదా మీకు అవసరం కాగల అదనపు మద్దతును పొందడానికి 1-877-241-2583 కు కాల్ చేయండి.

Vietnamese: Xin gọi 1-877-241-2583 để kết nối với một thông dịch viên tiếng Việt miễn phí hoặc để được hỗ trợ thêm nếu quý vị cần.

Pennsylvania Dutch: Call 1-877-241-2583 fer schwetze mit en Interpreter as Deutsch schwetzt odder fer ennichi Hilf griege as du brauchsch. Des zellt dich nix koschde.

Tagalog: Tumawag sa 1-877-241-2583 upang kumonekta sa isang walang bayad na interpreter na nagsasalita ng Tagalog o upang makatanggap ng karagdagang suporta na maaaring kailanganin mo.

Discrimination is against the law

Blue Cross Blue Shield of Michigan, Blue Care Network and our vendors comply with Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex (including sex characteristics, intersex traits; pregnancy or related conditions; sexual orientation; gender identity, and sex stereotypes). Blue Cross Blue Shield of Michigan, Blue Care Network and our vendors do not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex. Blue Cross Blue Shield of Michigan, Blue Care Network and our vendors:

- Provide people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provide free language services to people whose primary language is not English, which may include:
 - Qualified interpreters
 - Information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, call the Customer Service number on the back of your card. If you aren't already a member, call 1-877-469-2583 or, if you're 65 or older, call 1-888-563-3307, TTY: 711.

Here's how you can file a civil rights complaint

If you believe that Blue Cross Blue Shield of Michigan, Blue Care Network or our vendors have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance in person, by mail, fax, or email with:

Office of Civil Rights Coordinator
600 E. Lafayette Blvd., MC 1302
Detroit, MI 48226
Phone: 1-888-605-6461, TTY: 711
Fax: 1-866-559-0578
Email: CivilRights@bcbsm.com

If you need help filing a grievance, the Office of Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health & Human Services Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal website at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail, phone, or email at:

U.S. Department of Health & Human Services
200 Independence Ave, SW, Room 509F, HHH Building
Washington, D.C. 20201
Phone: 1-800-368-1019, TDD: 1-800-537-7697
Email: OCRComplaint@hhs.gov

Complaint forms are available on the U.S. Department of Health & Human Services Office for Civil Rights website at <http://www.hhs.gov/ocr/office/file/index.html>.

This notice is available at Blue Cross Blue Shield of Michigan and Blue Care Network's website: <https://www.bcbsm.com/important-information/policies-practices/nondiscrimination-notice/>.

TruHearing® is an independent company contracted to provide hearing services on behalf of Blue Cross Blue Shield of Michigan for certain plans..

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Teladoc Health® is an independent company that provides Virtual Care Solutions for Blue Cross Blue Shield of Michigan and Blue Care Network.

Out-of-network/noncontracted providers are under no obligation to treat Medicare Plus Blue PPO members, except in emergency situations. Please call our Customer Service number or see your Evidence of Coverage for more information, including the cost sharing that applies to out-of-network services.

SilverSneakers is a registered trademark of Tivity Health, Inc. © 2025 Tivity Health, Inc. All rights reserved. Tivity Health is an independent corporation retained by Blue Cross Blue Shield of Michigan and Blue Care Network to provide health and fitness services to their Medicare Plus Blue and BCN Advantage members.

We're ready to help: Contact us today.



Call **1-833-844-3892**, from 8 a.m. to 9 p.m. Eastern time, Monday through Friday, with weekend hours Oct. 1 through March 31. TTY users, call **711**.



Contact your Blue Cross-authorized, independent agent for an explanation of plans available to you. There is no cost or need to commit to receive agent services.



Enroll online at bcbsm.com/medicare. Or scan the QR code to start your application.



**Blue Cross
Blue Shield
Blue Care Network**
of Michigan

This is a solicitation of insurance. We may contact you about buying insurance. Blue Cross Medicare Supplement plans aren't connected with or endorsed by the U.S. government or the federal Medicare program.

Blue Cross Blue Shield of Michigan and Blue Care Network are PPO plans with Medicare contracts. Enrollment in Blue Cross Blue Shield of Michigan and Blue Care Network depends on contract renewal.

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