



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



**MICHIGAN OFFICE OF
RETIREMENT SERVICES**
Big Plans. Small Steps.

**Medicare Plus BlueSM Group PPO
administered by Blue Cross Blue Shield of Michigan
for the
Michigan Public School Employees' Retirement System**

Annual Notice of Changes for 2026

You are currently enrolled as a member of Medicare Plus Blue Group PPO.

This material describes changes to your plan's cost and benefits for next year.

- Medicare Plus Blue Group PPO allows for enrollment changes at any time during the year. Please contact the Michigan Office of Retirement Services (ORS) at **1-800-381-5111** (TTY: **711**), 8:30 a.m. to 5 p.m. Eastern time, Monday through Friday, for more information.
- To change to a different plan, visit **medicare.gov** or review the list in the back of your *Medicare & You 2026* handbook.
- This is only a summary of changes. More information about costs, benefits and rules is in the *Evidence of Coverage*. Get a copy at **bcbsm.com/mpsers** or call Blue Cross Blue Shield of Michigan Customer Service at **1-800-422-9146** (TTY: **711**) to get a copy by mail.

More Resources. If you have questions or need assistance, please contact Blue Cross. We are available to assist you from 8:30 a.m. to 5 p.m. Eastern time, Monday through Friday.

Blue Cross Blue Shield of Michigan Customer Service

Toll-Free: 1-800-422-9146

TTY: 711

Website: bcbsm.com/mpsers

Medicare Plus Blue is a PPO plan with a Medicare contract. Enrollment in Medicare Plus Blue depends on contract renewal. When this booklet says "we," "us," or "our," it means Blue Cross Blue Shield of Michigan. When it says "plan" or "your plan," it means the Michigan Public School Employees' Retirement System's Medicare Plus Blue Group PPO. If you need this information in another language or alternate format (e.g., large print, audio), please contact Blue Cross Customer Service at the number above.

This plan does not include Medicare Part D prescription drug coverage, but you can enroll in the prescription drug plan offered by your retirement system, which is administered separately from this plan. You cannot be enrolled in this plan and a separate Medicare Part

D prescription drug plan offered outside of the retirement system at the same time. Note: If you do not have Medicare prescription drug coverage, or creditable prescription drug coverage (as good as Medicare's), for 63 days or more, you may have to pay a late enrollment penalty if you enroll in Medicare prescription drug coverage in the future.

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Summary of important costs for 2026

Below compares the 2025 costs and 2026 costs for Medicare Plus Blue Group PPO in several important areas.

Cost	2025 (this year)	2026 (next year)
Monthly plan premium	Contact ORS at 1-800-381-5111	Contact ORS at 1-800-381-5111
Yearly deductible	\$800	\$800
Maximum out-of-pocket amounts This is the <u>most</u> you will pay out-of-pocket for your covered services. Note: Your out-of-pocket maximum consists of your \$800 deductible, plus the annual coinsurance/copayment maximum of \$900. Routine hearing care copayments are not included in the maximum.	Combined in-network and out-of-network: \$1,700	Combined in-network and out-of-network: \$1,700

SECTION 1 Changes to benefits and costs for next year

Section 1.1 – Changes to the monthly premium

Cost	2025 (this year)	2026 (next year)
Monthly premium (You must also continue to pay your Medicare Part B premium.)	Contact ORS at 1-800-381-5111.	Contact ORS at 1-800-381-5111.

Section 1.2 – There are no changes to your maximum out-of-pocket amounts

Medicare requires all health plans to limit how much you pay out of pocket for the year. This limit is called the maximum out-of-pocket amount. The maximum out-of-pocket amount for 2026 is \$1,700.

Your maximum out-of-pocket amount in 2026 will be the same as it is in 2025. Copayments for routine hearing exams and hearing aids are not included in the maximum out-of-pocket amount.

Section 1.3 – Changes to the provider network

Our network of providers has changed for next year. To see if your providers (primary care provider, specialists, hospitals, etc.) are in our network:

- Visit our website at bcbsm.com/mpsers and use the Find a Doctor search tool.
- Call Blue Cross Customer Service at **1-800-422-9146** (TTY: **711**) from 8:30 a.m. to 5 p.m. Eastern time, Monday through Friday to get current provider information or to ask us to mail you a Provider Directory.

To locate network providers for your routine hearing exams and hearing aids, you must call TruHearing at **1-855-205-6305** (TTY: **711**) from 8 a.m. to 8 p.m., Monday through Friday. Your routine hearing exams and hearing aids are not covered unless you call TruHearing and follow the instructions you are given.

We can make changes to the hospitals, doctors and specialists (providers) that are part of our network during the year. If a mid-year change in our providers affects you, call Blue Cross Customer Service at **1-800-422-9146** (TTY: **711**) from 8:30 a.m. to 5 p.m. Eastern time, Monday through Friday.

Section 1.4 – Changes to benefits and costs for medical services

Cost	2025 (this year)	2026 (next year)
Emergency care	In- and Out-of-network: You pay a \$140 copayment for a hospital emergency department visit.	In- and Out-of-network: You pay a \$150 copayment for a hospital emergency department visit.
Home health agency care	Covered up to 100% of the approved amount.	Covered up to 100% of the approved amount. Home health agency care may require prior authorization; your plan provider will arrange for this authorization, if needed.

Cost	2025 (this year)	2026 (next year)
Vision Care	Refraction tests not covered by your medical plan.	Refraction tests received with a medical eye exam are a covered medical plan benefit. You pay 10% coinsurance, after the deductible.

SECTION 2 Administrative Changes

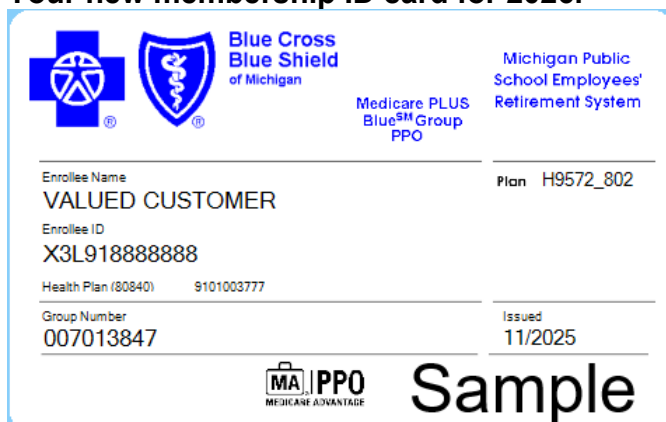
You will receive a new Blue Cross Blue Shield of Michigan member ID card before the end of 2025. Starting Jan. 1, 2026, be sure to use this new ID card when you visit your healthcare providers. This is only a change in the card you will use for your medical services. It does not change your coverage. Your new member ID card will include your new enrollee ID number, new group number and an issue date on or after November 2025.

Your membership ID card from 2025.



This is an example of a member ID card. Your personalized card will look similar.

Your new membership ID card for 2026.



This is an example of a member ID card. Your personalized card will look similar.

SECTION 3 Unless you choose another plan, you will be automatically enrolled in Medicare Plus Blue Group PPO in 2026

If you want to change to a different plan for next year, please contact ORS at **1-800-381-5111**, 8:30 a.m. to 5 p.m. Eastern time, Monday through Friday. TTY users call **711**. For more information, see Chapter 8 of the *Evidence of Coverage*. ORS can explain your options, implications of leaving this plan and the correct process to disenroll from this plan. Refer to section 4 of this document, Getting help from Medicare, for information about selecting a different plan.

The information in this document tells you about the differences between your current benefits in Medicare Plus Blue Group PPO and the benefits you'll have on Jan. 1, 2026, as a member of Medicare Plus Blue Group PPO.

SECTION 4 Questions?

Get help from Medicare Plus Blue Group PPO

- **Call Blue Cross Customer Service toll-free at 1-800-422-9146. (TTY users call 711.)**

We are available for phone calls from 8:30 a.m. to 5 p.m. Eastern time, Monday through Friday.

- **Read your 2026 *Evidence of Coverage***

This *Annual Notice of Changes* gives you a summary of changes in your benefits and costs for 2026. For coverage details, look in the 2026 *Evidence of Coverage* for Medicare Plus Blue Group PPO. The *Evidence of Coverage* is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services. Get the *Evidence of Coverage* on our website at **bcbsm.com/mpsers** or call Blue Cross Customer Service at **1-800-422-9146** (TTY: **711**) from 8:30 a.m. to 5 p.m. Eastern time, Monday through Friday, to ask us to mail you a copy.

- **Visit our website at bcbsm.com/mpsers.**

Our website has the most up-to-date information about our provider network through our Find a Doctor search tool at **bcbsm.com/mpsers**.

Get Free Counseling about Medicare

The State Health Insurance Assistance Program (SHIP) is an independent government program with trained counselors in every state. In Michigan, the SHIP is called MI Options. For a list of SHIPs in other states, refer to Exhibit 1 located at the back of your *Evidence of Coverage*.

MI Options is independent (not connected with any insurance company or health plan). It is a state program that gets money from the federal government to give free local health insurance counseling to people with Medicare. MI Options counselors can help you with

your Medicare questions or problems. They can help you understand your Medicare plan choices and answer questions about switching plans. You can call MI Options at **1-800-803-7174**.

Get help from Medicare

Call 1-800-MEDICARE (1-800-633-4227).

You can call **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day, 7 days a week. TTY users can call **1-877-486-2048**.

Chat live with [medicare.gov](https://www.medicare.gov).

You can chat live at [medicare.gov/talk-to-someone](https://www.medicare.gov/talk-to-someone).

Write to Medicare.

You can write to Medicare at PO Box 1270, Lawrence, KS 66044.

Visit [medicare.gov](https://www.medicare.gov).

The official Medicare website has information about cost, coverage and quality Star Ratings to help you compare Medicare health plans in your area.

Read *Medicare & You 2026*.

The *Medicare & You 2026* handbook is mailed to people with Medicare every fall. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. Get a copy at [medicare.gov](https://www.medicare.gov) or by calling **1-800-MEDICARE (1-800-633-4227)**. TTY users can call **1-877-486-2048**.