

Best of Health

2027 Plan Changes

SEE PAGES 5 AND 10

NEW

MEDICARE
FALL 2026

Information about the Michigan Public School Employees' Retirement System health plan

INSIDE

2 IMPORTANT INFORMATION
Updates

7 PRESCRIPTION COVERAGE
Optum Rx®

10 DENTAL COVERAGE
Delta Dental

MEDICAL COVERAGE **5**
Blue Cross® Blue Shield® of Michigan

VISION COVERAGE **9**
EyeMed

GENERAL INFORMATION **11**
How to reach us

How ORS develops its retiree healthcare plans: The health initiative strategic plan

The healthcare plan for Michigan public school retirees was established by the Michigan Public School Employees' Retirement Act. The Michigan Public School Employees' Retirement Board and the Department of Technology, Management and Budget (DTMB) have a shared role in maintaining this healthcare plan and making decisions about the coverage. In the early 1990s, the board, with the support of DTMB, began a health initiative strategic planning process. The goal of this process has been to improve health outcomes and keep coverage affordable for both retirees and the school districts. Over the years, numerous initiatives have been implemented to balance covered services and medications with ensuring the long-term financial stability of the retirement system healthcare plan.

What is the health initiative strategic planning process and how does it work?

Staff from the Michigan Office of Retirement Services (ORS) work with healthcare consultants to develop proposals for plan updates. Member feedback, healthcare industry trends and financial metrics are taken into consideration when drafting an initiative package with plan updates. Once an initial package of updates is put together, it's presented to the board and DTMB director. This presentation is followed by a public review process, in which feedback and comments from retirees and retiree support organizations are received. Any feedback received is reviewed and may result in revisions being made to the initiative package. Lastly, the board and DTMB director review the public feedback and final recommended initiatives and decide whether to approve the plan updates.

Once plan updates are approved, ORS staff work with the health insurance carriers to implement the changes. The groups work together to communicate plan changes to members and develop benefit booklets and presentations to educate members about their coverage.

What role do the insurance carriers play in the retirement system healthcare plan?

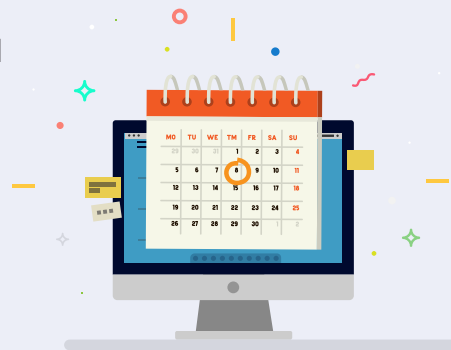
The insurance carriers don't make decisions about covered benefits, deductibles, coinsurance or copays. The coverage and cost sharing are determined by the board and DTMB director with guidance from ORS staff and healthcare consultants. The carriers administer the plans as directed by ORS and any applicable state or federal laws.

As part of their role in administering the plans, the carriers establish networks of qualified providers, negotiate discounts to keep the cost of services low and provide programs to help members manage their health. They also process claims, answer coverage and billing questions, and manage membership ID cards. The carriers produce benefit booklets and educational materials to assist members with understanding their coverage. They also support members through their call centers, websites and mobile apps, all designed to provide members with the information and tools they need to get the most value from their plan.

Online retiree health plan seminar

Every year, ORS works with the health insurance carriers to provide educational materials to inform you of plan updates, help you understand how your plan works and explain the many resources available to you. We encourage you to set aside time to visit the online seminar and learn more about your 2027 healthcare plan. Visit the seminar online at mpsershealthseminars.com anytime starting Oct. 13 through Dec. 18, 2026.

If you can't access plan information online and have questions about your coverage, the insurance carriers are available to assist you. Please refer to Page 11 for each carrier's contact information.



Understanding Medicare open enrollment

Medicare's open enrollment period runs from Oct. 15 through Dec. 7 each year. During this time, you may receive many mailings and phone calls advertising various Medicare healthcare and prescription drug plans, their cost, coverage and networks. These campaigns promote plan options that may be available to you outside of what's offered through the retirement system. During Medicare's open enrollment period, you can compare your current coverage to what's offered outside of the retirement system and consider a new insurance plan for the upcoming year.

There's no annual open enrollment period for the ORS insurance plans. You can switch among the retirement system's plans at any time. However, it's important to understand how your plan will be changing and how that impacts you, so you're prepared before the new plan year begins.

Here are some steps you can take to better understand your coverage:

- Review this newsletter for information about the retirement system's plan changes for 2027. Page 5 addresses medical plan changes (administered by Blue Cross Blue Shield of Michigan) and page 10 explains dental plan changes (administered by Delta Dental).
- Visit the online healthcare plan seminar described above to learn more about your 2027 retirement system healthcare coverage overall.
- Compare your current medical and prescription drug coverage to other retirement system plan options. Go to the ORS website, michigan.gov/orsschools, choose *Your Insurance Benefits* on the top navigation bar, then select *Insurance Carrier Options* to find a document called *Insurance Options Summary (R0379C)*.

Once you understand your current plan's coverage, you can determine whether it'll continue to meet your needs or decide to pursue other options available to you. Important information to keep in mind:

- If you're satisfied with your current coverage and **don't** want to switch plans, **you don't need to do anything**.
- If you choose to enroll in a different Medicare Advantage plan or Medicare prescription drug plan, you and anyone else on your insurance will automatically be disenrolled from your current medical and prescription drug coverage.



Keep your contact information up to date

It's important that ORS has your current contact information to communicate with you in a timely manner. ORS also shares your contact information with your insurance carriers, so they can send you important information about your healthcare coverage.

Please take some time to log in to miAccount at michigan.gov/orsmiaccount and review your physical, mailing and, in some cases, legal addresses to ensure they're accurate. While you're logged in, review your phone number and email address and update if needed.

You must also keep your contact information up to date with the Social Security Administration (SSA). To update your information with SSA, call **1-800-772-1213** from 8 a.m. to 7 p.m. local time, Monday through Friday. TTY users, call **1-800-325-0778**.

Retiree healthcare coverage differs from employee coverage

New retirees are sometimes surprised to learn their retiree healthcare coverage differs from the coverage they had while working. The reason? There's no connection between employer-based healthcare coverage negotiated by the unions and the coverage provided by the Michigan Public School Employees' Retirement System, which is authorized by the board and DTMB. These plans are completely separate from one another.



Updates to your 2027 retirement system medical plan

Starting Jan. 1, 2027, your retirement system medical plan is introducing the following benefit changes:

- **Your deductible in 2027 will decrease by \$100.** Your new deductible will be \$700, and your new out-of-pocket maximum will be \$1,600.
- **Blue Cross will send you an Advantage Dollars card that you can use to buy certain over-the-counter items.** You'll get \$25 added to your card every three months (Jan. 1, April 1, July 1 and Oct. 1) through the end of 2027. Blue Cross will mail your card to you with instructions on how to use it by the end of the year.

If you have questions about your retirement system medical coverage, 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.



Blue Cross has made the prior authorization process easier to understand

Prior authorizations ensure that you receive high-quality, appropriate and affordable care. Blue Cross has been working to improve your experience with the prior authorization process and make it easier to navigate.

There's a new self-service tool on the Blue Cross member portal that allows you to determine if a prior authorization or referral is needed for a procedure or service. You'll also be able to see next steps in the process. Through the tool, you can search for a procedure code or name.

To use this self-service tool:

1. Log in to your member account on bcbsm.com/mpsers.
2. Select *My Coverage*.
3. Select *Referrals & Prior Authorizations* under *Resources*.
4. Select *Need care?* to check if a referral or prior authorization is required.

We've also made several other enhancements to the prior authorization process. You can:

- Receive email, text or mobile app notifications to let you know when a prior authorization or referral request is received, has been approved, partially approved or not approved.
- View an at-a-glance status tracker showing the real-time progress of your prior authorization or referral request.
- Receive additional guidance to help you understand prior authorizations and what the process means to you.

Want a simple way to boost your health? Stay social.



An apple a day keeps the doctor away, but so does a laugh with friends, a family trip to a pumpkin patch or an online cooking class. Being with others and fostering social connections can make you feel good while leading to better physical health.

According to the Centers for Disease Control and Prevention, social connections can reduce the risk of chronic disease and serious illness, including heart disease, stroke, dementia, depression and anxiety. Social connections also improve stress management, healthy eating habits and sleep quality.

Ideas for how to strengthen social connections this fall:

- **Enjoy the season.** Fall festivals and holiday gatherings are fun ways to feel a part of a community.
- **Use technology to stay in touch.** Schedule a video call to catch up with family and friends or take online classes to engage with others.
- **Join a local group or activity.** Meet new people by joining a book club, faith community or hobby club.
- **Volunteer your time.** Giving back can create a sense of purpose while helping you connect with others who share your beliefs.
- **Stay active together.** Invite a neighbor or friend for a walk to enjoy the crisp autumn weather before winter arrives.

Behavioral, mental and emotional well-being care

Do you feel lonely or isolated? Or maybe you need help with life's challenges? Your medical plan covers behavioral healthcare benefits to support your mental health needs. For information about behavioral health, visit bcbsm.com/mentalhealth or call **1-888-803-4960** (TTY: **711**).

You can receive behavioral health services online or over the phone from your provider if they offer telehealth services. To find a mental healthcare provider, log in to your member account and use *Find a Doctor*.

Virtual care is also available through Teladoc Health®. Use your smartphone or tablet to meet with a behavioral health professional or psychiatrist. Visit bcbsm.com/virtualcare or call **1-800-835-2362** (TTY: **711**) to ask questions or schedule a telephone visit. Appointments are available from 7 a.m. to 9 p.m. Eastern time, seven days a week.

For emergencies, please seek help at your nearest emergency room or call or text the Suicide and Crisis Lifeline at **988**, 24 hours a day, seven days a week.

Breathe easier this fall: Asthma tips for cooler weather

As the weather turns cooler, you may notice changes in your breathing. Cold, dry air can irritate airways. Seasonal viruses spread more easily. Spending more time indoors can increase exposure to dust and other triggers. A few simple habits can help prevent flare-ups this fall.



Protect your lungs outdoors

When you're outside, cover your nose and mouth with a scarf or mask to warm the air before you breathe it in. This can help reduce coughing and tightness. On colder or windy days, try shortening outdoor activities, adding a longer warmup or moving exercise indoors if you start to feel symptoms.



Reduce indoor triggers

Change your HVAC filters regularly, vacuum or dust often and keep your home's humidity at a healthy level to discourage mold. On mild days, open windows for a short time to let in fresh air if the outdoor air quality is good.



Prevent seasonal illnesses

Colds, flu and other viruses can make asthma symptoms worse. Wash your hands often, avoid close contact with people who are sick and stay up to date on recommended vaccines.



Take medications as directed

Use your daily and rescue medications exactly as prescribed. Contact your healthcare provider if your symptoms change, you need your rescue inhaler more often than usual or breathing becomes harder to control.

With a bit of planning and awareness, you can enjoy all the best parts of fall while keeping your asthma in check. If you're unsure about managing symptoms, activity or medications, reach out to your primary care provider or pharmacist for guidance.

Did you know?

You can now find your plan resources in one place on the Optum Rx landing page — including a new cost sharing resource to help you better understand what you may pay. Visit welcome.optumrx.com/mpser.

Managing diabetes during the fall

The fall brings cider mill trips, Halloween candy and holiday parties. Here are some tips for keeping your blood sugar in a safe range when there are changes to your daily routine:



Eat at your usual times

Regular meals help keep your blood sugar steady. Fill half your plate with non-starchy vegetables, add lean protein and keep portions of grains or starchy foods smaller. If you choose dessert, cut back on other carbohydrates in your meal.



Fit in movement

Even small amounts of activity can help your body manage blood sugar more effectively. Take a 10-to-15-minute walk after meals, park a little farther from the store or choose the stairs.



Manage stress, sleep and water

Lack of sleep, stress or not drinking enough water can raise blood sugar. Do your best to stay rested and drink water throughout the day.



Pack for success

If you have upcoming travel plans, be prepared. Bring your prescription drug and medical insurance cards. Pack your continuous glucose monitor (CGM), extra test strips or sensors, medications, needles or pen tips and snacks. Carry a copy of your prescriptions and emergency contact information.

If you're unsure how to manage meals, alcohol or medication timing while traveling, reach out to your primary care provider or pharmacist ahead of time. Small choices make a big difference.

Prescription drug update

The patents on some brand-name drugs have expired or are set to expire, which means members will be able to save money by using the generic equivalents. Any drug that was available on the formulary (drug list) in its brand-name form will continue to be on the drug list in its generic form. Your pharmacist will automatically dispense the generic on new or refilled prescriptions for these drugs.

Brand name	Generic name	Indication/use	Generic availability*
Uptravi	Selexipag	Pulmonary arterial hypertension	April 2027
Orenitram	Treprostinil	Pulmonary arterial hypertension	June 2027
Relistor	Methylnaltrexone	Opioid-induced constipation	July 2027
Cresemba	Isavuconazonium	Serious fungal infections	September 2027
Edurant Ped	Rilpivirine	HIV	September 2027
Ibrance	Palbociclib	Breast cancer	September 2027
Xtandi	Enzalutamide	Prostate cancer	September 2027
Zonisade	Zonisamide	Partial seizures	September 2027

*Generic availability is subject to change based on FDA approval, manufacturer decision and any litigation.

Three ways to manage seasonal eye concerns

As the seasons change, factors such as variations in humidity, temperature and sunlight exposure can impact eye health. By adjusting some of your habits and care routines, taking care of your eyes can be easy.



Protect yourself from the sun: No matter the season or weather, the sun's ultraviolet (UV) radiation can affect your vision and potentially damage your eyes. Here are a few sun-friendly tips to help keep your eyes (and skin) healthy when outdoors:

- **Reach for a pair of sunglasses.** Whether it's a stylish pair of non-prescription or prescription sunglasses with UV protection, make sure you're protected by wearing sunglasses outdoors.
- **Wear a hat** with a broad brim to protect your face and the top of your head.
- **Be aware of clouds.** Have you ever gotten sunburned on a cloudy day? That's because clouds don't block UV light.
- **Seek shade**, especially from midday to early afternoon when the sun is most intense.

Prepare for allergies: Fall is in the air and so are allergens — both indoors and outdoors. Keeping your home clean is a simple way to help protect your eyes as the seasons change. Eye allergies, also known as allergic conjunctivitis, are quite common and occur when the eyes react to something that irritates them. Common allergens that cause eye allergies include pollen from grass, trees and ragweed, dust, pet dander, mold and smoke.

When your eyes are irritated from allergens, your symptoms could include:

- Red, swollen or itchy eyes.
- Burning or tearing of the eyes.
- Sensitivity to light.



Visit your eye doctor: Scheduling your annual eye exam with an in-network provider is a great way to keep your health in check. Besides measuring your vision, regular eye exams can help identify early signs of certain chronic health conditions.



Dental plan changes effective Jan. 1, 2027

Effective Jan. 1, 2027, the retirement system dental plan will cover diagnostic and preventive services at 100% of the Delta Dental PPO approved amount for all dentists. All members and their dependents who are enrolled in the dental plan will receive this benefit whether an in-network dentist is used or not. If you go to a Delta Dental PPO dentist, you'll pay nothing for these services. If you go to a Delta Dental Premier or nonparticipating dentist, you'll pay any costs above the PPO approved amount.

A second enhancement for 2027 is that costs for diagnostic and preventive services will no longer count toward the dental plan annual maximum. The annual maximum for the dental plan is the most the retirement system will pay each calendar year for basic and major services. This means you can receive essential preventive care while saving your dental plan annual maximum for higher-cost treatments such as fillings, crowns and root canals. You can still use any of your remaining preventive and diagnostic services coverage even if you have exceeded your dental plan annual maximum during the calendar year.

The final change is the dental plan annual maximum will also increase to \$1,700 in 2027. This is an increase of \$600 from the previous dental plan annual maximum. Each covered individual will have their own \$1,700 dental plan annual maximum. Although this enhancement applies to all provider types, you will save the most with Delta Dental PPO dentists who accept the PPO approved amount as payment in full for covered services.

How to reach us

When contacting us, help us help you by providing your contract number.

Blue Cross Blue Shield of Michigan

For questions about healthcare claims, ID cards or participating providers in Michigan:

Call: 1-800-422-9146

TTY: 711

Monday through Friday,
8:30 a.m. to 5 p.m. Eastern time

Write: Blue Cross Blue Shield of Michigan
MPSERS-Medicare Plus Group PPO
Customer Service Inquiry Department
P.O. Box 441790
600 E. Lafayette Blvd.
Detroit, MI 48226-1790

Website: bcbsm.com/mpsers

BlueCard PPO providers outside Michigan

Call: 1-800-810-BLUE (810-2583)

Medicare

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

TTY: 1-877-486-2048

Website: medicare.gov

TruHearing™

Routine hearing care services and hearing aids are only covered when you call TruHearing and follow the instructions you're given.

Call: 1-855-205-6305

TTY: 711

Monday through Friday,
8 a.m. to 8 p.m.

Website: truhearing.com/mpsers

Delta Dental Plan of Michigan

For questions about your dental benefits, contact Delta Dental Plan of Michigan.

Call: 1-800-345-8756

Monday through Friday,

8:30 a.m. to 8 p.m. Eastern time

Automated service available 24/7

Website: deltadentalmi.com/mpsers

Optum Rx

For questions about pharmacy claims, ID cards or participating providers, contact Optum Rx Prescription Plan at:

Call: 1-855-577-6517

Customer service representatives are available 24 hours a day, seven days a week.

Website: welcome.optumrx.com/mpser

Optum® Specialty Pharmacy

For questions about specialty medications, contact Optum Specialty Pharmacy at:

Call: 1-855-427-4682

Customer service representatives are available 24 hours a day, seven days a week.

Website: specialty.optumrx.com

EyeMed Vision Care

For questions about your vision benefits, contact EyeMed Vision Care.

Call: 1-866-248-2028

Monday through Friday,
7:30 a.m. to 11 p.m. Eastern time

Saturday 8 a.m. to 11 p.m. Eastern time

Sunday 11 a.m. to 8 p.m. Eastern time

Website: eyemed.com/mpsers

Michigan Public School Employees' Retirement System

For information about your pension account and health insurance enrollment and eligibility, contact the Michigan Office of Retirement Services:

Call: 1-800-381-5111

Monday through Friday,
8:30 a.m. to 5 p.m. Eastern time

Website: michigan.gov/orsschools

For address and enrollment changes:

Website: michigan.gov/orsmiaccount

Write: Michigan Office of Retirement Services
P.O. Box 30171
Lansing, MI 48909-7671

Upcoming Pension Payment Dates

Oct. 23, 2026 • Nov. 25, 2026 • Dec. 18, 2026

IMPORTANT INFORMATION
Michigan Public School Employees' Retirement System

Blue Cross Blue Shield of Michigan
600 E. Lafayette Blvd., MC 517J
Detroit, MI 48226-2998

PRESORTED STD
U.S. POSTAGE PAID

BLUE CROSS
BLUE SHIELD
OF MICHIGAN

Best of Health

Best of Health is published four times a year for retirees of the Michigan Public School Employees' Retirement System by: Blue Cross Blue Shield of Michigan, 600 E. Lafayette Blvd. — MC 517J, Detroit, MI 48226

Editor: Rebecca Stojcevski

©Copyright 2026 Blue Cross® Blue Shield® of Michigan. Blue Cross Blue Shield of Michigan is a nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association.

NOTICE: The information contained here is a summary of coverage and is not a contract. If statements in the description differ from the applicable group contracts, then the terms and conditions of those group contracts will prevail. The Michigan Public School Employees' Retirement Board and the Department of Technology, Management & Budget reserve the right to change the plan. For more detailed information about benefit provisions, contact the applicable plan administrator. Your routine hearing care benefit is brought to you through an arrangement between Blue Cross and TruHearing. TruHearing is an independent company that provides hearing services. TruHearing does not provide Blue Cross-branded products and services.

