

## **State Health Plan Medicare Advantage (MA) PPO, a Medicare Plus Blue<sup>SM</sup> Group PPO administered by Blue Cross Blue Shield of Michigan**

### **Annual Notice of Change for 2026**

You're currently enrolled as a member of State Health Plan MA PPO. Next year, there'll be changes to the plan's costs and benefits. **Please see page 3 for a Summary of Important Costs, including Premium.**

This material describes the changes to our plan. Note this is only a summary of changes. More information about costs, benefits, and rules is in the Evidence of Coverage. Get a copy at [www.bcbsm.com/som](http://www.bcbsm.com/som). You may also call Customer Service at 1-800-843-4876 (TTY users dial 711) to ask us to mail you an *Evidence of Coverage*.

State Health Plan MA 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, Monday through Friday, 8:30 a.m. to 5:00 p.m. Eastern time, for more information.

#### **More resources**

- This information is available for free in a different format, including large print and audio CD. Please call Customer Service (phone numbers are in Section 4 of this booklet).

#### **About State Health Plan MA PPO**

- Blue Cross Blue Shield of Michigan is a PPO plan with a Medicare contract. Because the State Health Plan Medicare Advantage (MA) PPO is a Medicare Plus Blue Group PPO plan administered by Blue Cross Blue Shield of Michigan (Blue Cross), enrollment in State Health Plan MA PPO depends on Blue Cross's Medicare contract renewal.
- When this document says "we," "us," or "our," it means Blue Cross. When it says "plan" or "our plan," it means the State Health Plan MA PPO.
- Out-of-network/non-contracted providers are under no obligation to treat State Health Plan MA 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.
- This plan doesn't include Medicare Part D drug coverage, and you can't be enrolled in a separate Medicare Part D drug plan and this plan at the same time. Note: If you don't have Medicare drug coverage, or creditable 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 drug coverage in the future.

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## Summary of Important Costs for 2026

The table below compares the 2025 costs and 2026 costs for the State Health Plan MA PPO plan in several important areas. **Please note this is only a summary of costs.**

	2025 (this year)	2026 (next year)
<b>Monthly plan premium</b> (You must also continue to pay your Medicare Part B premium.)	Contact the ORS, Monday – Friday, 8:30 a.m. – 5:00 p.m. at 1-800-381-5111.	Contact the ORS, Monday – Friday 8:30 a.m. – 5:00 p.m. at 1-800-381-5111.
<b>Yearly deductible</b>	\$400 per individual \$800 per family  Except for insulin furnished through an item of durable medical equipment.	\$400 per individual \$800 per family  Except for insulin furnished through an item of durable medical equipment.
<b>Maximum out-of-pocket amounts</b> This is the <u>most</u> you'll pay out of pocket for your covered Part A, Part B, and Part D services. (See Section 1.2 for details.)	<b>Combined in-network and out-of-network:</b> \$2,000 per individual \$4,000 per family	<b>Combined in-network and out-of-network:</b> \$2,000 per individual \$4,000 per family
<b>Doctor office visits</b>	<b>Primary care visits:</b> You pay \$20 per visit.  <b>Specialist office visits:</b> You pay \$20 per visit.	<b>Primary care visits:</b> You pay \$20 per visit.  <b>Specialist office visits:</b> You pay \$20 per visit.
<b>Inpatient hospital stays (including rehabilitative services)</b>	You pay 2% coinsurance after deductible.	You pay 2% coinsurance after deductible.
<b>Inpatient hospital care: Mental health and substance use disorder</b>	There is no member cost share for covered services.	There is no member cost share for covered services.

## SECTION 1 Changes to Benefits and Costs for Next Year

### Section 1.1 – Changes to the Monthly Premium

	2025 (this year)	2026 (next year)
<b>Monthly plan premium</b> (You must also continue to pay your Medicare Part B premium.)	Contact the ORS Monday – Friday 8:30 a.m. – 5:00 p.m. at 1-800-381-5111.	Contact the ORS Monday – Friday 8:30 a.m. – 5:00 p.m. at 1-800-381-5111.

### Section 1.2 – Changes to Your Maximum Out-of-Pocket Amounts

There are no changes to your maximum out-of-pocket amounts for next year. 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. Once you've paid this amount, you generally pay nothing for covered Part A and Part B services for the rest of the calendar year.

### Section 1.3 – Changes to the Provider Network

Our network of providers has changed for next year. **Review the 2026 *Provider Directory* at [www.bcbsm.com/som](http://www.bcbsm.com/som) to see if your providers (primary care provider, specialists, hospitals, etc.) are in our network.** Here is how to get an updated Provider Directory:

- Visit our website at [www.bcbsm.com/som](http://www.bcbsm.com/som).
- Call Customer Service at 1-800-843-4876 (TTY users dial 711) to get current provider information or to ask us to mail you a Provider Directory.

We can make changes to the hospitals, doctors, and specialists (providers) that are part of our plan during the year. If a mid-year change in our providers affects you, please contact Customer Service at 1-800-843-4876 (TTY users dial 711) for help.

If your provider is not on our Provider Directory, confirm that they will continue to accept your State Health Plan MA PPO insurance card. State Health Plan MA PPO has a passive network. If an out-of-network provider accepts Medicare and agrees to accept your State Health Plan MA PPO insurance card, Blue Cross will reimburse the submitted claim at the Original Medicare rate for the services billed.

## Section 1.4 – Changes to Benefits and Costs for Medical Services

	2025 (this year)	2026 (next year)
Annual physical exams	Annual physical exams are covered up to 100% once every 12 months	Annual physical exams are covered up to 100% once per calendar year.

## SECTION 2 How to change plans

**To stay in State Health Plan MA PPO, you don't need to do anything.** Unless you sign up for a different plan or change to Original Medicare by December 7, you'll automatically be enrolled in State Health Plan MA PPO.

If you want to change plans for 2026 follow these steps:

- To make a change, call the ORS at 1-800-381-5111, Monday through Friday, 8:30 a.m. to 5:00 p.m. Eastern time. Once you change your plan with the ORS, you'll be disenrolled automatically from State Health Plan MA PPO and the State Prescription Drug Plan administered by Optum Rx.
- To change to a different Medicare health plan, enroll in the new plan. You'll be automatically disenrolled from State Health Plan MA PPO.
- To change to Original Medicare with Medicare drug coverage, enroll in the new Medicare drug plan. You'll be automatically disenrolled from State Health Plan MA PPO.
- To change to Original Medicare without a drug plan you can send us a written request to disenroll. Call the ORS at 1-800-381-5111 for information on how to do this. Or call Medicare at 1-800-MEDICARE (1-800-633-4227) and ask to be disenrolled. TTY users can call 1-877-486-2048.
- To learn more about Original Medicare and the different types of Medicare plans, visit [www.Medicare.gov](http://www.Medicare.gov), check the Medicare & You 2026 handbook, call your State Health Insurance Assistance Program (go to Section 4), or call 1-800-MEDICARE.

As a reminder, the State of Michigan offers other Medicare health plans and Medicare prescription drug plans. These other plans may differ in coverage, monthly premiums, and cost-sharing amounts.

## Section 2.1 – Deadlines Changing Plans

If you want to change to a different plan or to Original Medicare for next year, please contact the ORS at 1-800-381-5111, Monday through Friday, 8:30 a.m. to 5:00 p.m. Eastern time.

If you don't like your plan choice for 2026, you can disenroll **at any time, but the timeframe in which you can enroll in another Medicare Advantage plan may be limited**. For more information, see Chapter 8 of the *Evidence of Coverage*, and contact the ORS at 1-800-381-5111.

## Section 2.2 – Are there other times of the year to make a change?

In certain situations, people may have other chances to change their coverage during the year. Examples include people who:

- Have Medicaid
- Get Extra Help paying for their drugs
- Have or are leaving employer coverage
- Move out of our plan's service area

If you recently moved into or currently live in an institution (like a skilled nursing facility or long-term care hospital), you can change your Medicare coverage **at any time**. You can change to any other Medicare health plan (with or without Medicare drug coverage) or switch to Original Medicare (with or without separate Medicare drug coverage) at any time. If you recently moved out of an institution, you have an opportunity to switch plans or switch to Original Medicare for 2 full months after the month you move out.

## SECTION 3 Programs That Help Pay for Prescription Drugs

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You may qualify for help paying for prescription drugs. Different kinds of help:

- **Extra Help from Medicare.** People with limited incomes may qualify for Extra Help to pay for their prescription drug costs. If you qualify, Medicare could pay up to 75% or more of your drug costs, including monthly drug plan, yearly deductibles, and coinsurance. Also, those who qualify won't have a late enrollment penalty. To see if you qualify, call:
  - 1-800-MEDICARE (1-800-633-4227).  
TTY users can call 1-877-486-2048, 24 hours a day, 7 days a week;
  - Social Security at 1-800-772-1213 between 8 a.m. and 7 p.m., Monday - Friday for a representative. Automated messages are available 24 hours a day. TTY users can call, 1-800-325-0778; or
  - Your state Medicaid Office.
- **Help from your state's Pharmaceutical Assistance Program (SPAP).** Some states have an SPAP that helps people pay for prescription drugs based on their financial need, age, or medical condition. Michigan does not have SPAPs. Names and phone numbers for SPAPs outside of Michigan are in *Exhibit 4* in the Appendix at the back of your *Evidence of Coverage*.

- **Prescription Cost-sharing Assistance for Persons with HIV/AIDS.** The AIDS Drug Assistance Program (ADAP) that helps ensure that ADAP-eligible people living with HIV/AIDS have access to life-saving HIV medications. To be eligible for the ADAP operating in your state, you must meet certain criteria, including proof of state residence and HIV status, low income as defined by the state, and uninsured/under-insured status. Medicare Part D drugs that are also covered by ADAP qualify for prescription cost-sharing help through the **Michigan Drug Assistance Program (MIDAP)**. For information on eligibility criteria, covered drugs, or how to enroll in MIDAP, please call 1-888-826-6565. Be sure, when calling, to inform them of your Medicare Part D plan name or policy number.

## SECTION 4 Questions?

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### Getting Help from Blue Cross

- **Call Customer Service at 1-800-843-4876. (TTY only, call 711.)** We're available for phone calls Monday through Friday 8:30 a.m. to 5:00 p.m. Eastern time. Calls to these numbers are free.
- **Read your 2026 *Evidence of Coverage***  
This *Annual Notice of Change* gives you a summary of changes in your benefits and costs for 2026. For details, look in the 2026 *Evidence of Coverage* (EOC) for State Health Plan MA PPO. The EOC is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services and Part B prescription drugs. Get the EOC on our website at [www.bcbsm.com/som](http://www.bcbsm.com/som). You may also call Customer Service to ask us to mail you a copy.
- **Visit [www.bcbsm.com/som](http://www.bcbsm.com/som)**  
Our website has the most up-to-date information about our provider network (Provider Directory).

### 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 EOC.

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. TTY users should call 711.

## 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 [www.Medicare.gov](http://www.Medicare.gov)**

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

- **Write to Medicare**

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

- **Visit [www.Medicare.gov](http://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 [www.Medicare.gov](http://www.Medicare.gov) or by calling 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.