



2023
resource guide
FOR NON-MEDICARE
UAW TRUST MEMBERS

Enhanced Care PPO

UAW RETIREE
Medical Benefits Trust



You're a member of a preferred provider organization plan

Welcome to the Enhanced Care PPO plan, the Blue Cross health plan option for non-Medicare members. The ECP plan provides its members with the expansive Blue Cross network of doctors, hospitals and other health care providers. You'll find that your deductibles, coinsurance, copayments and other out-of-pocket costs will be less when you use a network health care provider. If you go outside the network, you will pay more for services, and in some cases, services may not be covered.



Our website is www.bcbsm.com/uawtrust

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What to expect

Part of our commitment to you is to help you make the best possible use of your plan. We'll keep you informed throughout the year about your plan and your health.

Member ID card



You'll receive a Blue Cross member ID card by mail. Show your card every time you visit a health care provider. Or use our mobile app to show your electronic ID card. [Page 3](#)

Find your team



You have support navigating the complex health care system. If you have questions about finding an in-network doctor, locating a care facility, scheduling doctor appointments or benefits and billing, we've got you covered. Let's start with Health Guide. [Page 3](#)

Create a member account



From coverage details and claims information to ideas for healthier living, you'll find lots of valuable information online. Be sure to register for your secure Blue Cross member account. [Page 3](#)

Download our mobile app



Access your electronic Blue Cross member ID card, coverage, claim and cost information anytime, wherever you go. [See Page 17](#)

Get the care you need



Our care programs can help you work through different challenges. [Page 6.](#)

Hospital discharge checklist



A hospital discharge is typically followed by ongoing care, follow-up appointments and more. Use our checklist to help stay on top of your care when you leave the hospital. [Page 12](#)

Health care definitions



You're not alone if health care terms confuse you. Get some clarity on exactly what a deductible is, how coinsurance works and other health care language. [Page 13](#)

EOB



Just what is an explanation of benefits? We explain. [Page 14](#)

How we support your health

The health care system is complex. But you have support. Health Guide is here to help you navigate all the moving parts of your health care needs. Call, email or chat online with Health Guide to:

- Get answers about benefits, claims and billing questions
- Choose in-network doctors and specialists and schedule appointments
- Connect to nurses or clinical staff for answers to health questions
- Hear recommendations about preventive care
- Receive alerts for clinical programs you may be eligible for
- Learn about gaps in your care

Contact Health Guide at **1-866-507-2850**, 8 a.m. to 8 p.m. Eastern time Monday through Friday. TTY users call **711**. You can also find the number on the back of your Blue Cross member ID card.



Online health resources

With an online member account, you have access to your health care plan information and resources wherever you go. You get the tools, information and support in one secure online account to understand your plan – how it works and what it covers – and make more informed choices about your care. You can:

- Check your cost share balances and coverage
- View claims and explanation of benefits statements
- Search for doctors, hospitals and specialists
- View your member ID card or request a copy
- Compare costs for health care services, and more

Signing up for a Blue Cross member account is easy:

1. Go to **www.bcbsm.com/register**.
2. Click *Register Now*.
3. Follow the registration prompts to create your secure account.

You'll need your Blue Cross member ID card to register.

Or use our app to access your plan from your phone or tablet. Go to the Apple® App Store or Google Play™ and search for "BCBSM."

Go paperless

Use your Blue Cross member ID card to sign up for email and SMS/text messages about your plan. You can also choose to turn off paper delivery of your Explanation of Benefits statements.



Help with your health goals

The Blue Cross Health & Well-BeingSM website, powered by WebMD[®], can help you start making the healthy lifestyle changes you'd like to see.

We offer six Digital Health Assistant programs available at no additional cost to you. They focus on a variety of health goals, including eating better, conquering stress, feeling happier and enjoying exercise.

All tips come straight from WebMD's expert health coaches. Set your goal, choose your level (easy, moderate or challenging), then choose from more than 400 activities that appeal to your lifestyle, interests and schedule.

To learn more or to start working on a Digital Health Assistant program, log in at www.bcbsm.com/uawtrust, or open our mobile app. Then click on *Health & Wellness*. From there, click on *My Health Assistant* under the *Healthy Living* tab.

Check out Blue Cross Virtual Well-BeingSM

As you pursue your well-being journey, know that you have support.

Blue Cross Virtual Well-Being features short, high-energy, live webinars every Thursday at noon Eastern time. Well-being coordinators focus on a different subject each week. Topics include:

- Mindfulness
- Resilience
- Emotional, physical and financial health
- Meditation

Hosts often share informational materials to save or pass on to others.


Register for upcoming webinars or watch past episodes at www.bluecrossvirtualwellbeing.com.

Benefits of Blue

Our care support programs help you manage chronic or complex medical conditions. Diverse care teams use programs that help close crucial gaps in care by offering community resources, education, coordination of care and other forms of support.


Emotional and mental well-being

New Directions is here to help you get the care you need, no matter what challenges you're facing. Licensed clinicians provide support around the clock for depression, anxiety, substance use disorder and much more. They can connect you to local, community resources and help you locate in-network health care providers and treatment facilities. New Directions provides prior authorizations for inpatient mental health and substance use treatment.

 Visit www.ndbh.com to access self-help tools and the online resource center. For additional or more specific assistance, call New Directions at **1-877-228-3912**. You can also find the number on the back of your Blue Cross member ID card.


Diabetes management

Cecelia Health is a diabetes support program. Managing diabetes takes a lot of work. Cecelia Health can help you take control of this condition. Call, email or text your dedicated certified diabetic educator for guidance on topics such as medication, blood sugar monitoring and healthy habits. Plus, you can connect with other people during live, interactive coaching webinars. During these virtual events, people can share healthy living ideas, tips on how to better manage diabetes and more.

 To learn more, contact Health Guide at **1-866-507-2850**.


Trustworthy medical second opinions

2nd.MD provides expert second medical opinions at no additional cost. With 2nd.MD, you're connected with board-certified, leading doctors across the country for consultations over the phone or with video chats. Consultations take place in three to five days, during evenings or weekends, so it'll be at a convenient time, and you won't wait long. 2nd.MD specialists can help you understand a new or chronic diagnosis, treatments available and if surgery is your best option. You may also learn about breakthrough treatments that your local health care providers may not be aware of yet.

 Contact 2nd.MD by calling **1-866-842-1141** or by visiting www.2nd.md/trust. You can also download the mobile app. Go to the Apple® App Store or Google Play™ and search "2nd.MD."

Considering surgery

Welvie is a surgery decision-support program to help make the best possible outcome happen. As an internet-based program, Welvie lets you easily explore the surgery process, providing a step-by-step approach from diagnosis to recovery.


 Visit www.welvie.com and select Register to get started. You even have a chance to receive a \$25 gift card. You can also call Welvie Customer Service at **1-877-434-6168**.

In-home visits

You can have a complete health and wellness assessment with a doctor or nurse practitioner in the privacy of your home. We've partnered with Signify Health to offer members convenient at-home visits. In-home visits can be done:

- In person in your home
- Through video conference – on your computer, tablet or smartphone
- Over the phone

You choose the day and time. Once the visit is complete, you'll get a written summary. We'll send a copy to your doctor too.

 For more information, or to schedule an in-home visit, call Signify Health at **1-844-226-8216**, 8 a.m. to 8 p.m. Eastern time Monday through Friday. TTY users call **711**. You can also visit www.bcbsm.com/uawtrust/resources/home-visits/.

Quit tobacco for good

Tobacco cessation coaching, powered by WebMD® can help you become tobacco free. The program provides dedicated tobacco cessation coaches who offer counseling and other forms of support on a regular basis. Ready to stop smoking?

Call **1-855-326-5102** to talk with a coach and make a plan.



You can score big savings on a variety of healthy products and services from businesses in Michigan and across the U.S. All you need is your Blue Cross member ID card. View available discounts in your area by logging in to your online member account at www.bcbsm.com or through our mobile app (search BCBSM in the app stores). Once logged in, select *Blue365® member discounts* under the *Health & Well-Being* tab.

Here are just a few of the products you can get a discount on with Blue365:

- Fitness gear
- Vision care
- Travel
- Weight-loss programs
- Wellness products
- Healthy groceries

Through Blue365, you can also get great deals on gym memberships. Log in to your member account at www.bcbsm.com and click on *Blue365® member discounts* under the *Health & Well-Being* tab. Then search for the Fitness Your Way™ by Tivity Health™ deal under the *Fitness* tab. With this deal, you can get access to nearly 10,000 gyms nationwide for \$29 a month. It also includes discounts on health and well-being specialists. Check it out using your member account or call Fitness Your Way at **1-888-242-2060**.



Know where to go for care

Injuries and illnesses can happen at any time. Knowing where to go for medical services ahead of time ensures you receive the right care in the right place and in the most efficient manner. Making the right choice can save you time and money.

When considering where to go for medical treatment, it's important to consider the severity of your condition and the options available to you. Life-threatening situations are best handled at the emergency room. For routine illnesses, injuries and less urgent conditions, you have several high-quality health care choices to meet your needs. Making the right choice can save you time and money.

Choosing the right place for care



<p>PRIMARY CARE DOCTOR</p> <p>Comprehensive, personalized care from a trusted health care provider, virtually or in person — the first choice for care</p>
<p>\$0 - \$10*</p>
<p>AVERAGE WAIT TIME FOR CARE 30 minutes</p>
<p>APPOINTMENT REQUIRED? Yes</p>
<p>AVAILABILITY In person By phone Virtually</p>
<p>TREATMENT Start here when you want to talk with a doctor you know and trust</p>
<ul style="list-style-type: none"> • High-quality, comprehensive care • Knows you and your medical history and coordinates all your care • Many primary care offices offer virtual care, same-day appointments, extended hours and other services



<p>24-HOUR NURSE LINE</p> <p>Free medical advice from a registered nurse from the comfort of home or on the go — anytime of day or night</p>
<p>\$0</p>
<p>AVERAGE WAIT TIME FOR CARE 1 minute</p>
<p>APPOINTMENT REQUIRED? No</p>
<p>AVAILABILITY By phone</p>
<p>TREATMENT When you have questions about an illness or injury, anytime day or night</p>
<ul style="list-style-type: none"> • No cost • Available by phone anytime, anywhere in the U.S. • Care provided by a registered nurse



<p>BLUE CROSS ONLINE VISITSSM</p> <p>Virtual visits 24/7 with U.S. board-certified doctors and nurse practitioners, anywhere in the U.S. Behavioral health is also available.</p>
<p>\$0-\$20*</p>
<p>AVERAGE WAIT TIME FOR CARE 5 minutes</p>
<p>APPOINTMENT REQUIRED? Only for behavioral health services</p>
<p>AVAILABILITY Virtually</p>
<p>TREATMENT When you want to talk to a doctor or therapist virtually from your smartphone, tablet or computer</p>
<ul style="list-style-type: none"> • Video chat 24/7 with a provider, therapist or psychiatrist anywhere in the U.S. • Send a visit summary to your primary doctor • Care provided by U.S. board-certified doctors, nurse practitioners or behavioral health providers • Prescriptions, if needed, can be sent to a pharmacy you prefer



<p>WALK-IN CLINICS</p> <p>In-person care after hours or on weekends, without an appointment. Retail health clinics and urgent care centers are conveniently located near your home, school and work.</p>	
<p>RETAIL HEALTH CLINIC</p>	<p>URGENT CARE CENTERS</p>
<p>\$0 - \$50*</p>	
<p>AVERAGE WAIT TIME FOR CARE 30 to 60 minutes</p>	
<p>APPOINTMENT REQUIRED? No</p>	
<p>AVAILABILITY In person</p>	
<p>TREATMENT For a quick, in-person evaluation to get minor health care and a prescription at one location</p>	<p>TREATMENT When your symptoms are a little more complicated and you need convenient, in-person care</p>
<ul style="list-style-type: none"> • Evening and weekend hours • Convenient locations • Care provided by physician assistants and certified nurse practitioners, overseen by a U.S. board-certified doctor 	<ul style="list-style-type: none"> • Evening and weekend hours • Convenient locations • May offer labs and X-rays • Care provided by U.S. board-certified doctors, nurses and nurse practitioners, depending on severity of symptoms

Remember to coordinate all your care with your primary care provider.
*Ford Protected members covered at 100%.

Hospital discharge planning checklist

It's never too soon to start planning. If you're a family member of a loved one preparing to leave a hospital or other care setting, or a patient, use this checklist to help prepare for discharge.

Plan of care

- I'm involved to the extent I want to be in the decisions about my plan of care after I leave the hospital.
- I understand what the plan is for my care once I leave the hospital.
- My health care provider has answered my questions about the plan of care after I leave the hospital.

Medications

- I understand what medications I'll be taking once I leave the hospital.
- I understand what my medications are for and how to take them.
- I understand how to get my medications and where.
- I'll be able to cover the out-of-pocket costs for my medications.
- I know if I need a prescription refill or a renewal of an existing medication.

Self-care

- I understand what I can do to prevent my health problems from becoming worse.
- I understand what symptoms I need to watch out for after I leave the hospital.
- I understand what to do if I notice these symptoms.

Follow-up plan

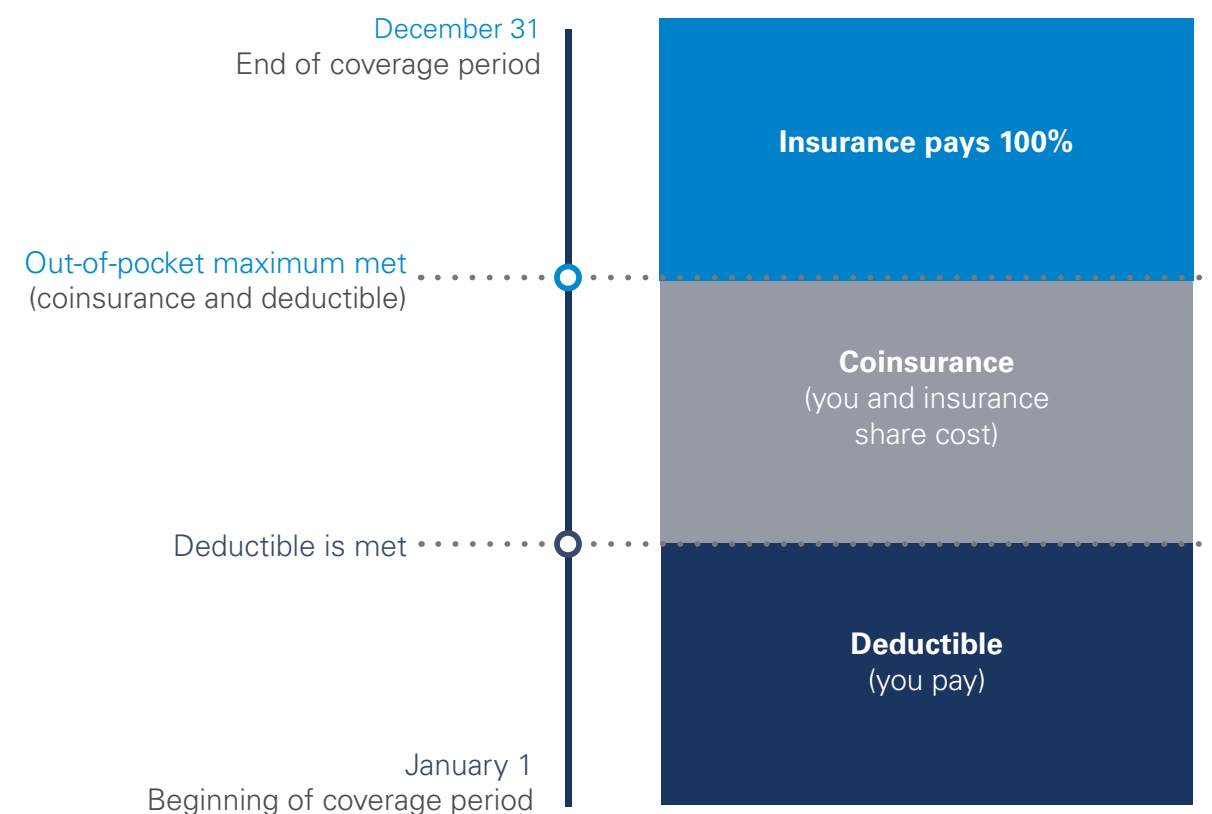
- I understand where I'm going after I leave the hospital.
- My family, or someone close to me, knows that I'm leaving and is prepared to provide the support I need at home.
- I know if I need help with daily tasks of living, such as dressing, bathing, going to the bathroom and using the stairs.
- I know if I require assistive devices, such as a cane, wheelchair, walker or grab bars.
- I know if I need a shower chair, oxygen supply or other medical equipment or supplies.
- I have an appointment scheduled with my doctor for a follow-up visit.
- I know if I need assistance with arranging transportation to get to my doctor appointments.
- I have the phone number for my doctor as well as any home care agency involved in my care.
- During your hospital stay, ask your nurse about this checklist.

Your coverage

Blue Cross Blue Shield of Michigan covers skilled rehabilitation at a facility or at home and skilled home care services. For more information, call the Customer Service number on the back of your Blue Cross member ID card.



Understanding important terms



Understanding important terms

Deductible: The amount you must pay toward covered medical services within a calendar year before Blue Cross begins to pay. This doesn't apply to services that require a copayment.

Coinsurance: Your share of the cost of a health care service, usually a fixed percentage of what Blue Cross pays the health care provider. You start paying coinsurance after you've met your plan deductible.

Out-of-pocket maximum: The total amount you'll pay in a calendar year. It's a combination of the deductible and coinsurance. Once met, you won't pay anything for most services included in your plan for the rest of the calendar year.

Copayment: Copay, for short, is a set dollar amount you pay for a health care service or prescription, usually when you receive it. Note: Copayments don't go toward paying the deductible, coinsurance or out-of-pocket maximum. Copays are separate and continue even after your out-of-pocket maximums are met.

In network: Health care providers who have an agreement with Blue Cross and are part of our network. These providers, or facilities, accept the allowed amount as payment in full. So when visiting in-network providers, you won't be billed other than the applicable out-of-pocket costs.

Out of network: Health care providers who don't have an agreement with your Blue Cross PPO plan but accept the allowed amount as payment in full. So if you visit an out-of-network provider, you may have to pay higher out-of-pocket costs.

Nonparticipating: Health care providers who don't have an agreement with Blue Cross and who don't have to accept the allowed amount as payment in full. Services rendered by a nonparticipating provider aren't covered.

EOB stands for Explanation of Benefits


If you don't have an "Amount you pay" after your services are rendered, you will NOT receive an Explanation of Benefits, or EOB. If you do owe an amount, you'll receive an EOB that will show you:

- What services you had and what the provider billed.
- What your Plan paid and any Blue Cross discounts that were applied.
- The amount you may owe through deductibles, coinsurance or copayments.
- Any noncovered services that were not payable through your benefit plan.

Reviewing your EOB statements is a good way to keep track of your medical care and expenses.

EOB statement details

- 1 Identifies who this EOB statement is for.
- 2 Summarizes claims by doctor, hospital, or other health care provider as follows:
 - A The amount submitted to Blue Cross on the claim.
 - B What you saved by being a Blue Cross member.
 - C What Blue Cross paid.
 - D Amounts any other insurance(s) paid.
 - E What you pay. You may have already paid or may still owe this amount. You should never be asked to pay more than this amount.
- 3 Shows the balances to date for deductibles and out-of-pocket maximums for your current benefit period.
- 4 Important information about your coverage, tips to lower health care costs, and ways to improve overall health.
- 5 Customer Service information if you have questions about something on your statement.



EXPLANATION OF BENEFIT PAYMENTS
THIS IS NOT A BILL

Statement Date : 05/10/23

0012345-1234
PAUL MEMBER
12345 MAIN STREET
HEALTH WAY MI 99999-9999

5 Customer Service
Web: View your benefits and manage your plan online at bcbsm.com.
Call: 1-800-999-9999 (toll free)
Mail: BLUE CROSS BLUE SHIELD OF MICHIGAN CUSTOMER SERVICE ANY TOWN MI 99999-9999
 To report suspected fraud, call 1-800-482-3787.

1 Patient Name: PAUL MEMBER
Patient Born In: JULY 1990
Enrollee Name: PAUL MEMBER
Enrollee ID: *****1234
Group Name: COMPANY NAME
Group Number: 0012345-1234
Coverage: MEDICAL

2 Claim Summary (for Claim Detail, see below)

Hospital, Doctor or Other Health Care Provider	A Total Charges	B minus Discount *	C minus Plan Paid	D minus Other Insurance Paid	E Amount You Pay
DOCTOR A	\$ 66.00	\$ 41.26	\$ 22.27	\$ 0.00	\$ 2.47
	\$ 66.00	\$ 41.26	\$ 22.27	\$ 0.00	\$ 2.47

* Blue Cross negotiates discounts with hospitals, doctors and other health care providers to help save you money.

3 Summary of Deductibles and Out-of-pocket Maximums
(These totals are based on our information to date and may not reflect all outstanding claims.)

Totals for Family
 BENEFIT PERIOD: Jan. 01, 2023 through Dec. 31, 2023

In-network deductible applied to date: \$ 300.00
 In-network out-of-pocket maximum applied to date: \$ 524.13


4 Helpful Information

Did you know that good oral health impacts your overall health? Gum disease can increase the severity of diseases like heart disease and diabetes. See your dentist for a healthier you!

Make your life easier! Get all your benefit statements online. It's simple. It's safe. It's secure. Your EOB statements are available to you any time, any day, whenever you choose. Register now at BCBSM.com/login

The statement shown is general and for illustrative purposes only. Your actual statement may look slightly different depending on your benefit plan.

- 6 Detailed information about each claim we processed.
 The sum of all claims in this section for the same provider should match the numbers in the Claim Summary section.
- F Information your provider puts on the claim to identify the medical service you received.
- G The unique number Blue Cross assigns to a claim. You can reference this number if you need to call us about this claim.



EXPLANATION OF BENEFIT PAYMENTS
THIS IS NOT A BILL

Statement Date : 05/10/23

6 Claim Detail	Enrollee ID: *****1234	Patient: PAUL MEMBER
Provider Name: DOCTOR A Provider Status: PARTICIPATING Service Dates: 00/00/00 Service Type: OTHER MED SERVICES Procedure: X-RAYS Procedure Code: 00000 Claim Received: 00/00/00 Claim Number: 9999999999991	Total Charge	\$ 66.00
	Amount approved by Blue Cross for this service	24.74
	In-network coinsurance you pay	- 2.47
	Your plan paid this provider on 12/05/14	22.27
	Discount	+ 41.26
	Total Covered	\$ 63.53
	Amount You Pay	\$ 2.47

Page 2 of your statement shows your appeal rights and what you can do if you disagree with any of the benefit decisions made for a claim. You can also find definitions for terms used on the statement.

Important information you should know about your Explanation of Benefit Payments statement

Your appeal rights

If this statement shows a balance for a reduced or denied service, and you disagree with the amount, Customer Service might be able to help. The phone number is on the back of your ID card and the top right corner of page 1 of this form.

If you ask, we must give you access to and copies of the documents related to your claim. We won't charge you for the copies. Within the limits of other privacy laws that we must obey, upon request, we'll share treatment and diagnosis codes with you. We'll also include the meaning of the codes reported by health care providers.

To ask for an internal appeal when you disagree with our decision, you must

Help with terms you might see on this statement

Amount approved – Our maximum payment allowed for a service. For some patients, this amount is decided by Medicare or other insurers.

Amount you pay – This amount is your share of the cost for health services and is based on the benefits in your Blue Cross health care plan. Your health care provider should not ask you to pay more than this amount.

Benefit period – The time period (usually one year) during which your deductibles and coinsurance accumulate.

Blue Cross paid – The amount we paid based on the benefits in your health care plan. We tell you who we sent the payment to and when.

Online EOBs

Log in at www.bcbsm.com/uawtrust if you want to view recent claims, deductibles, coinsurance balances, and other information. It's easy:

1. Go to www.bcbsm.com/uawtrust and follow steps to create a login account.
2. After logging in, select *Claims* in the blue bar near the top.
3. Click on *Explanation of Benefits* statements.

Help us prevent fraud

Checking to make sure you actually received services as shown on the EOB helps us prevent error and fraud. Call **1-866-507-2850** if you have questions about a claim or EOB.



Understanding your claims

Reimbursement

Most doctors file claims electronically after your visits. However, you may occasionally need to request direct reimbursement of a medical expense, such as a service from an independent lab, one that's out of network or a nonparticipating provider.

Make a copy of your itemized receipt containing this information:

- Procedures with corresponding codes
- Dates of service
- Doctor's name
- Diagnosis
- Proof of payment

Keep the copy and mail the original to:

Blue Cross Blue Shield of Michigan
UAW Auto Retiree Service Center
P.O. Box 311088
Detroit, MI 48231

Or you can fax your receipt to **1-866-624-4481**.

Managing your account

If you have questions about claim payments that have been made or have yet to be processed, you can call Health Guide at **1-866-507-2850**. If you have someone else call on your behalf, we must have your signed *Protected Health Information and Privacy* form on file. That's a requirement under the Health Insurance Portability and Accountability Act of 1996, or HIPAA.

This form allows you to designate who we can speak to about your medical information.

You can request this form from Health Guide or find it online at either www.bcbsm.com/uawtrust or the Trust website, www.UAWtrust.org.

Send the signed, completed form to:

Blue Cross Blue Shield of Michigan
UAW Auto Retiree Service Center
P.O. Box 311088
Detroit, MI 48231

Claim questions and appeals

After your claims are submitted to Blue Cross by your providers, you'll receive an EOB. In addition, you'll most likely receive a billing statement from your health care provider, showing any outstanding balances you may owe.

Here are your options:

1. **To confirm you are paying the right amount**, compare the EOB and the provider bill side by side. Match the service dates and the amounts. If they match, pay the provider that amount and file the EOB for your records.
2. **If the amounts don't match**, or if you have questions, call 1-866-507-2850, as shown on the back of your Blue Cross member ID card. A Customer Service representative will be happy to review the EOB statement and answer your questions.
3. **If you are not satisfied with the response or outcome from Customer Service**, you may file an appeal with Blue Cross by sending the bills in question, the information on the front of your Blue Cross member ID card (name, contract and group number), your phone number, and a statement that explains your concern, to this address:

Auto National Appeal Unit – Mail Code 1620

600 E. Lafayette Blvd.
Detroit, MI 48226-2998

You have 180 days from the date of discovery of a problem to file a grievance.

If the issue remains unresolved, you may file an appeal with the UAW Trust. Please see your Summary Plan for details.



Contact information

Health Guide

If you have health care or benefit questions, need claim assistance or help finding a participating provider

1-866-507-2850

8 a.m. to 8 p.m. Eastern time, Monday – Friday

Blue Cross Blue Shield of Michigan

Hospital, surgical/medical services

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

Monday through Friday

1-877-832-2829

Mailing address for claim inquiries:

UAW Auto Retiree Service Center

P.O. Box 311088

Detroit, MI 48231

Blue Card Access — National provider network

Information on participating network providers

while traveling

1-800-810-2583

Blue Cross Blue Shield Global Core

For international claim and provider services

1-800-810-2583 or call collect at **1-804-673-1177**

www.bcbsglobalcore.com

Retiree Health Care Connect

The UAW Trust eligibility and call center

Eligibility, membership and address changes

1-866-637-7555

www.digital.alight.com/rhcc

UAW Retiree Medical Benefits Trust

www.uawtrust.org

Prescription drugs

Mail order and retail (drug stores)

8 a. m. to 8 p.m. Local time

Monday through Friday

1-855-409-0219

TruHearing

1-844-394-5420

www.truhearing.com

Delta Dental

1-800-524-0149

www.deltadentalmi.com

Davis Vision

1-888-234-5164

Client code: **3642**

www.davisvision.com

Veterans Health Administration

1-800-698-2411

www.va.gov/health

Centers for Medicare & Medicaid Services

Medicare.gov

1-800-633-4227

www.Medicare.gov

Social Security Administration

1-888-772-1213

www.ssa.gov

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WebMD Health Services is an independent company supporting Blue Cross Blue Shield of Michigan and Blue Care Network by providing health and wellness services.

New Directions is an independent company that contracts with Blue Cross Blue Shield of Michigan to perform mental health and substance use disorder case management services.

Cecelia Health is an independent company that contracts with Blue Cross Blue Shield of Michigan to provide diabetes management support.

2nd.MD is an independent company that contracts with Blue Cross Blue Shield of Michigan to provide second medical opinions.

Welve is an independent company retained by Blue Cross Blue Shield of Michigan to provide a surgery decision-support program for select Blue Cross Medicare Advantage members.

Signify Health is an independent corporation retained by Blue Cross Blue Shield of Michigan provide health and well-being services.

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