

Enhanced Care PPO

Our website is bcbsm.com/uawtrust.



2025 Resource Guide



Medicare Plus BlueSM Group is a PPO plan with a Medicare contract. Enrollment in Medicare Plus Blue Group depends on contract renewal.

Welcome to your Enhanced Care PPO plan

Whether you're new to Blue Cross or an existing member, you've made a smart choice by enrolling in Enhanced Care PPO. We value your participation and strive to do our best to serve you. You might be wondering how you can make the most out of your coverage this year. Here's an easy guide to help you maximize your Blue Cross benefits.



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Welcome! Get started

Wondering what to do to make the most of your coverage? These helpful charts show you how to begin taking advantage of the benefits of your plan.

Steps you can take to get started with your PPO plan

	By mail	By phone	By mobile device	By computer or tablet	By BCBSM mobile app
Sign up for your secure member account at bcbsm.com/register .				✓	
Download our BCBSM mobile app.			✓		
Find a provider.		✓	✓	✓	✓
Take your health assessment.	✓		✓	✓	✓
Make an appointment for your preventive visit with your primary doctor.		✓			
Sign up in your member account to receive plan documents and other special program information by email.			✓	✓	✓

What you'll receive from Blue Cross now that you're a member

	In the mail	By email*	By phone call	In your online member account	In the Blue Cross mobile app
Blue Cross member ID card	✓				✓
Explanation of benefits statements	✓			✓	✓
Special program information	✓	✓	✓		

*When you register for your secure, online member account and provide your email address.

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.



Sign up for your secure online member account

One perk of being a Blue Cross member is our members-only website. Our online tools make it easy to manage your account and stay informed about your benefits. With your secure member account, you can:

- Keep track of your out-of-pocket costs.
- View plan details and track claims.
- Select the paperless plan document option.
- Find a doctor.
- Take your health assessment.
- Access a library of helpful health information.



To register for your online member account:

- Visit our website at bcbsm.com/register or scan the QR code.
- Click **Register Now**.
- Answer a few simple questions and start using your member account — have your Blue Cross member ID card handy.

Download our BCBSM mobile app

Once you've registered for your online member account, download the mobile app at the Apple® App Store or the Google Play™ store on your smart phone (requires an online member account to use the mobile app). You'll get instant access to your member ID card, explanation of benefits statements, plan information and more.

To download the app:

- Open Apple® App Store or the Google Play™ store.
- Search for "BCBSM."
- Click download.

Or, text APP to 222764.

If you text us, we'll send you a link to download the app. Message and data rates may apply.

Visit bcbsm.com/app for our *Terms and Conditions of Use and Privacy Practices*.

For help downloading or using the mobile app, visit bcbsm.com/app or call us at **1-888-417-3479**, from 8 a.m. to 8 p.m. Eastern time Monday through Friday. TTY users, call **711**.



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Take an active role in your care



You're a key player on your health care team. Get more out of your doctor visits by:

- Writing down questions and symptoms you want to discuss with your doctor.
- Taking notes as the doctor answers your questions.
- Reviewing your medications (dose, side effects and any over-the-counter supplements you are taking).
- Speaking up if you have any health concerns.
- Being involved in your care decisions.

Blue Cross Virtual Well-BeingSM

Let Blue Cross Virtual Well-Being webinars give you guidance and support on your personal well-being journey. Virtual Well-Being:

- Features short, high-energy, live webinars every Thursday at noon Eastern time
- Focuses on a different well-being topic each week
- Includes topics such as mindfulness, resilience, social connectedness, emotional health, financial well-being, physical health, gratitude, meditation and more
- Offers informational materials you can download to save and share

Conveniently watch Blue Cross Virtual Well-Being webinars on your computer, tablet or mobile phone.

Learn more, register or watch past webinars at bluecrossvirtualwellbeing.com.

Blue365[®]

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 on fitness gear, vision care, travel, weight-loss programs, wellness products and healthy groceries in your area by logging in to your online member account at 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.

You can also get great deals on gym memberships. 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**.

Fitness Your Way is a registered trademark of Tivity Health, Inc. All rights reserved. Tivity Health[™] is an independent company retained by Blue Cross Blue Shield of Michigan to provide health and well-being services.

Know where to go for care

You have smart choices for when and where to get health care. Know your options so you can get the treatment you need, right when you need it. It's important to think about what kind of care best fits your needs.



Primary care provider

Call your doctor first when you're not feeling well. They know you best and understand your health history.



24-Hour Nurse Line

There is no cost when you call **1-855-624-5214**. TTY users, call **711**. This is a good option when you have questions about an illness or injury.



Virtual care visits

Virtual care is available through Teladoc Heath®, an independent company. It's as simple as using your smartphone, tablet or computer anywhere in the U.S. to meet with:

- A provider for minor illnesses such as a cold, flu or sore throat when your primary care provider isn't available
- A behavioral health professional or psychiatrist to help work through different challenges such as anxiety or grief

Visit bcbsm.com/virtualcare or call **1-800-835-2362**, 24 hours a day, seven days a week, 365 days a year. TTY users, call **1-855-636-1578**. Behavioral health services are available by appointment from 7 a.m. to 9 p.m. Eastern time, seven days a week.



Retail health clinics

Get quick, in-person evaluation and treatment for minor illnesses and injuries on a walk-in basis at select drug store chains. Copay may apply. Service covered in-network only.



Urgent care

Get non-emergency, in-person care conveniently, after hours or on weekends for conditions such as:

- Mild allergy symptoms
- Colds and flu
- Earache
- Skin rash
- Painful urination
- Sore throat and cough
- Low-grade fever
- Eye irritation or redness
- Minor burns, cuts and scrapes
- Sprains and strains

Copay applies. Service covered in-network only.



Emergency room

Visit for serious or life-threatening illnesses or injuries. Copay may apply. Copay waived if admitted.

Ready to help

Our commitment includes coverage that works for you at every stage. Your benefits aren't just for when you're feeling sick or coping with a chronic condition. They can help you take charge of your health.



Maintaining your well-being

Your health is not just determined by your physical fitness, but by your overall well-being. Your physical health improves when you get enough sleep, eat healthy and exercise. Likewise, your emotional well-being improves when you manage your stress, have support through life's trials and have positive social interactions. We offer behavioral health care to help you transition through difficult times. We also offer help to those struggling with substance use disorder. Call us to discuss your needs and arrange for services. **1-800-431-1059** from 8 a.m. to 6 p.m. Eastern time Monday through Friday. TTY users, call **711**.

If you or someone you know is experiencing an immediate mental health crisis, call the Suicide and Crisis Lifeline at **988**.

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.

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

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

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.

Contact Health Guide at **1-866-507-2850**.

Journeys

Journeys, powered by Personify Health, can help you start making the healthy lifestyle changes you'd like to see. We offer personalized digital coaching 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 Personify Health's expert health coaches. Choose from more than 400 activities that appeal to your lifestyle, interests and schedule.

To learn more or to start working on a program, log in to or register for the members-only website at bcbsm.com/uawtrust, or open the BCBSM mobile app. Then select *Wellness* under the *Programs & Services* tab. Scroll down to *Blue Cross Well-Being* and click or tap *Go to Blue Cross Well-Being*.

Quit tobacco for good

Increase your chances of becoming tobacco free with the tobacco cessation coaching program offered by Personify™ Health. You'll be paired with an experienced coach who offers support personalized to your specific interests and needs. You can connect with your coach online or through the mobile app.

To enroll:

1. Log in to your member account at bcbsm.com or our mobile app.
2. Then select *Wellness* under the *Programs & Services* tab. Scroll down to *Blue Cross Well-Being* and select *Go to Blue Cross Well-Being*. Select the *Programs* tab.
3. Select the *Tobacco Cessation Coaching Program – Get Support: Break a Nicotine Habit*.
4. Select *Start Now* for live support in your journey to becoming tobacco free.

Coaches are available:

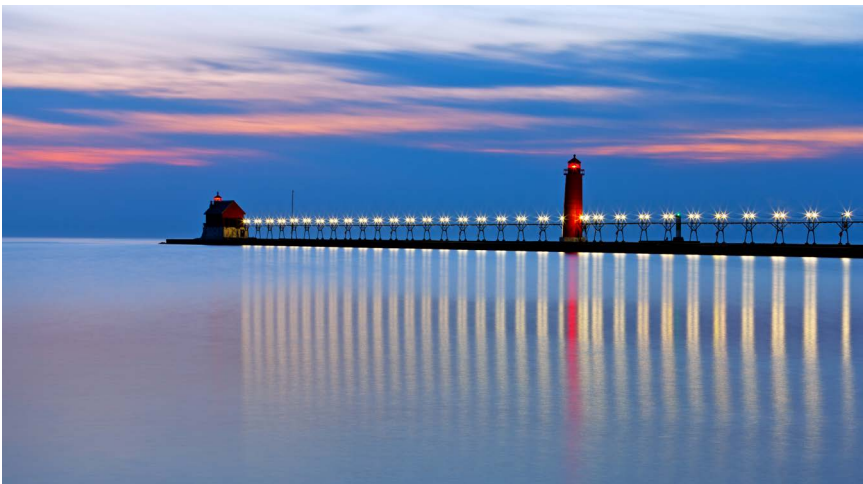
Monday through Thursday, 8 a.m. to 11 p.m. Eastern time
Friday, 8 a.m. to 7 p.m. Eastern time
Saturday, 9 a.m. to 3 p.m. Eastern time

If you are contacted to participate in a program and you do not wish to participate, call **1-866-507-2850**. Have your member ID available and indicate which campaigns you wish to opt out of.

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

Personify Health® is an independent company supporting Blue Cross Blue Shield of Michigan and Blue Care Network by providing well-being services.

Talk to your doctor



Topic	Speak Up	Good to know	Ask your doctor	Get specific
Physical and mental health	Talk to your doctor about concerning physical or mental limitations.	If you physically or mentally don't feel at your best, there are ways to manage it.	Should you change your daily activities or add new ones?	What type of support programs are right for your overall well-being?
Cardiovascular screenings	Get your blood pressure checked during each health care visit.	Talk to your doctor about your weight, waist circumference and your body mass index.	Request any cholesterol screenings you may need.	Discuss smoking, physical activity and your diet.
Fall prevention	If you've fallen, make sure to call your doctor. Don't wait until your next appointment.	There may be simple solutions, such as a medication dosage change.	Could you benefit from a cane, walker or physical therapy?	Discuss any balance or walking problems.

Find more information at bcbsm.com/agehealthy.

Finding care

To see if your doctors are in our network, visit us online at bcbsm.com/uawtrust.

1. Click *Find a Plan*.
2. Select your state.
3. Under *Select your plan type*, click *non-Medicare plans*.
4. Click on *View plan* under your plan.
5. Scroll down to the *Find a Doctor* box and follow the prompts.

You can choose a doctor by name or specialty or choose a hospital or clinic by name or type.

If you have trouble locating your provider, if your doctor's name doesn't appear or if you have any questions, please call **1-866-507-2850** for help. TTY users, call **711**.

Make sure you're up to date on screenings

Ask your doctor if you need to schedule any of these regular services.

Preventive screenings

Breast cancer screening	Colorectal cancer screening	Bone density screening for osteoporosis	Cholesterol
Annually	1 to 10 years depending on test	Every 2 years	Annually

Vaccines

Flu shot	Pneumonia vaccine	Shingles	COVID-19
Annually	The number of shots per lifetime will depend on vaccine used and time between doses	2 doses*	Talk to your doctor

Diabetic services (if applicable)

A1c test	Diabetic retinal eye exam	Urine protein screening	Fasting plasma glucose test
2 to 4 times a year	Annually	Annually	Annually

Easy ways to get your flu and pneumonia vaccines

There are several places to get vaccines:

- Local pharmacy
- Doctor's office

Good to know: The Centers for Disease Control and Prevention recommend getting your flu vaccine in October before the flu season begins because it takes about two weeks after vaccination for the antibodies that protect against the flu to develop in the body. Getting vaccinated later can still be beneficial and vaccinations are offered throughout flu season.



A closer look at prior authorizations



Before getting certain treatments, your doctor will request prior authorization from our plan on your behalf. This helps ensure that the recommended treatment is safe, appropriate for your condition and follows guidelines based on the latest medical research.

How can you help the process?

- **Collaborate** with your doctor during your care. Be sure to tell your doctor about all earlier treatment because prior authorization requests require the provider to list other treatment you've had.
- **Ask your doctor** if the treatment requires prior authorization or call us before you get treatment. Services that need prior authorization are noted in the medical benefits chart included with your *Evidence of Coverage* booklet available online at bcbsm.com/uawtrust.

Here's how the process works:

First, a doctor sends a written request to Blue Care Network detailing the diagnosis and recommended treatment. Then, we review the request and either:

- **Approve the request**, which means your plan will cover the treatment. Your out-of-pocket cost is determined by your plan benefits.
- **Approve the request on a trial basis**. We will cover part of the initial treatment to see if it produces the desired outcome. Additional medically necessary treatment may be covered once it is established that the initial treatment is producing positive results. Your out-of-pocket cost is determined by your plan benefits.
- **Ask for more information** from your doctor to document medical necessity.
- **Deny the request**, which means your plan won't cover the treatment. We'll explain the reason for the denial to the provider, and mail you a denial letter that explains your options, including how to appeal the denial. If a doctor provides a service requiring approval without a prior authorization, he or she is usually responsible for the cost. If your provider has told you a service wasn't approved, your provider may ask you to pay the full cost.

Frequently asked questions

Why is it important to have a routine physical?

During a routine physical, a primary care provider collects health information through an exam and assesses your current health and risk factors.

Services include:

- A physical examination, including vital signs and measurements
- Guidance, counseling and risk factor interventions
- Recommendations for immunizations, lab tests or diagnostic procedures

If your routine physical is done by your primary care doctor, there is no copayment or deductible for this preventive service. If a specialist performs your physical, a specialist copay will apply. Additionally, if your doctor provides services outside the scope of the set parameters, a copayment or deductible may apply.

Will I be billed for my colonoscopy?

A colonoscopy screening checks to see that you're healthy (no sign, symptom or disease present).

There is no copayment or deductible for a colorectal cancer screening exam. If your doctor finds and removes a polyp or other tissue during the colonoscopy or flexible sigmoidoscopy, the screening exam becomes a diagnostic exam, however, you won't be charged additional out-of-pocket costs.

If you receive other services or if additional conditions are discussed during the visit, your copay may apply.

Why am I being charged an emergency room copay? I thought the copay was waived if I spent the night in the hospital.

- If you go to the emergency room and are admitted to the hospital as an inpatient, your ER copay is waived.
- If you go to the emergency room and are held in observation as an outpatient but not admitted, your ER copay is not waived.

Will I be paying inpatient or outpatient out-of-pocket costs?

If you're having a service in a hospital, you should ask your provider beforehand to see if the service is inpatient or outpatient, as this will affect your out-of-pocket cost. Unless the provider writes an order to admit you as an inpatient to the hospital and your plan authorizes admission, the service will be outpatient and you will pay the cost-sharing amounts for outpatient services. Even if you stay in the hospital overnight, the service might still be considered outpatient. If you're not sure the service is considered outpatient, call Customer Service at **1-800-222-5992**. TTY users, call **711**.

Do you have any money-saving tips?

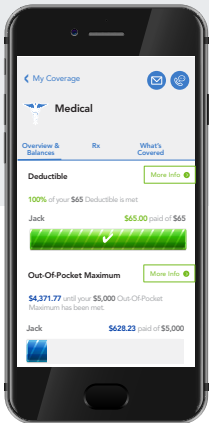
The cost of your services may be different based on where they're performed (in office or outpatient in a surgery center). For example, you can save money by using an urgent care or retail health clinic for treatment of minor illnesses instead of the emergency room.

Manage your costs with confidence

Your online member account will help you make informed, confident decisions about your health care costs and more.

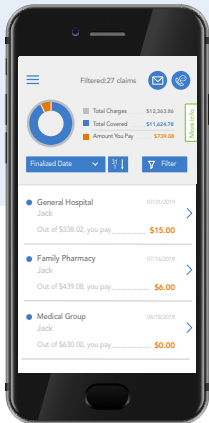
Keep track of your deductible and out-of-pocket maximum

Your deductible is how much you'll pay for care before we start to pay. Your out-of-pocket max is the most you'll pay before we cover the cost completely. You can see how close you are to meeting both.



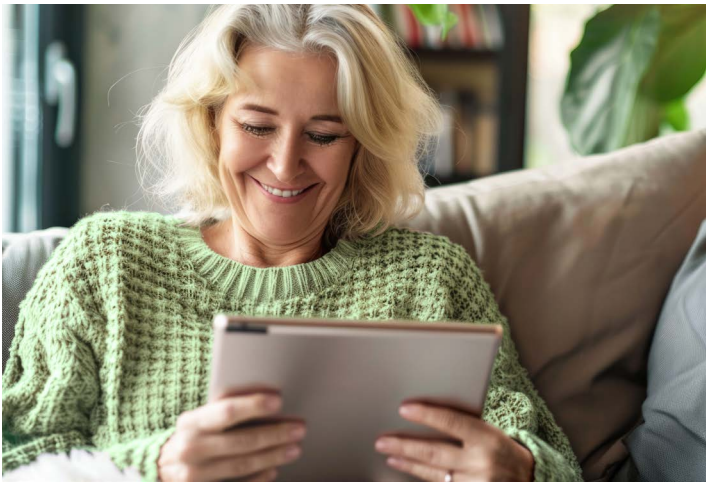
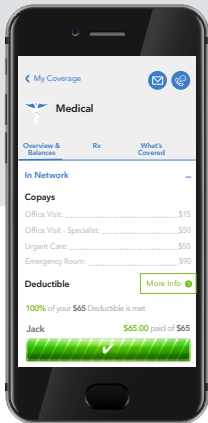
Review your claims and explanation of benefits

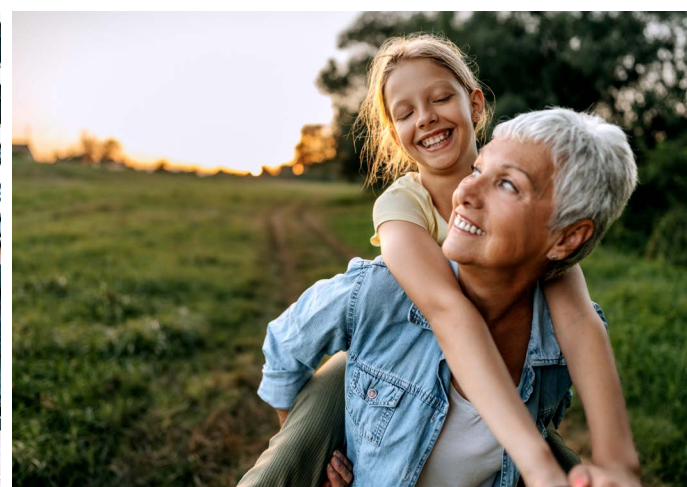
Claims and explanation of benefits statements show how much a provider charged for services, and what portion we've paid. They also tell you what services you've already paid for, and if your payment amount is correct.



Know your copays before you visit a provider

Easily access copayment information for commonly used services, including office visits and urgent care.





Contact information

Health Guide

For health care or benefit questions, claim assistance, or help finding a participating provider
8 a.m. to 8 p.m. Eastern time, Monday – Friday

1-866-507-2850

Mailing Address (for claim inquiries):
UAW Auto Retiree Service Center
P.O. Box 311088
Detroit, Michigan 48231

Precertification — Behavioral Health and Substance Use Disorder

1-877-228-3912

If you or someone you know is experiencing
an immediate mental health crisis, call the Suicide
and Crisis Lifeline at **988**.

Tobacco Cessation

1-833-380-8436

Member service support: 8am to 9pm Eastern time
Monday through Friday (excluding holidays)

Coaching: 8am to 11pm Eastern time Monday through
Thursday, 8am to 7pm Friday, 9am to 3pm Saturday

Blue Cross Blue Shield Global Core

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

bcbsglobalcore.com

Retiree Health Care Connect

[The UAW Trust eligibility and call center](#)

Eligibility, membership and address changes

1-866-637-7555

Veterans Health Administration

va.gov/health

1-800-698-2411

UAW Retiree Medical Benefits Trust

uawtrust.org



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