

Medicare Plus BlueSM Group PPO

Our website is bcbsm.com/uawtrust.



2026 Resource Guide For UAW Trust Medicare-Eligible Members



*Blue Cross Blue Shield of Michigan is a PPO plan with a Medicare contract.
Enrollment in Blue Cross Blue Shield of Michigan depends on contract renewal.*

Welcome to Medicare Plus Blue Group PPO

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

Out-of-network/non-contracted providers are under no obligation to treat Medicare Plus BlueSM Group 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.



Welcome! Get started.....	2
Ready to help	4
Know where to go for care	6
Take an active role in your care.....	7
Talk to your doctor.....	8
Make sure you're up to date on screenings	9
A closer look at prior authorizations.....	10
Reach your health goals.....	11
Your Explanation of Benefits has important information.....	12
Frequently asked questions	13

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 "Welcome to Medicare" preventive visit or annual wellness 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 BCBSM mobile app
Blue Cross member ID card	✓				✓
Welcome call			✓		
<i>Evidence of Coverage*</i>	✓			✓	✓
Explanation of Benefits statements	✓	✓		✓	✓
Special program information	✓	✓	✓		
Member surveys (Your opinion matters!)	✓	✓			

*Evidence of Coverage sent in the mail upon request.

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



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 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**, Monday through Friday, from 8 a.m. to 8 p.m. Eastern time. TTY users, call **711**.



Apple is a trademark of Apple Inc., registered in the U.S. and other countries. App Store is a service mark of Apple Inc., registered in the U.S. and other countries. Google Play is a trademark of Google LLC.

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.



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 U.S. Centers for Disease Control and Prevention recommends 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. However, getting vaccinated later can still be beneficial and vaccinations are offered throughout flu season.

Medicare Diabetes Prevention program

Medicare Diabetes Prevention is a structured program focusing on practical training in healthy diet, increased physical activity and problem-solving strategies to help members prevent a Type 2 diabetes diagnosis.

To participate in this no-cost program, you must be a member who hasn't been diagnosed with Type 2 diabetes or end stage renal disease and have a body mass index, or BMI, greater than 25.

To find out if you would benefit from this program, talk to your health care provider, or call Customer Service at **1-888-322-5616** Monday through Friday from 8 a.m. to 7 p.m. Eastern time. TTY users, call **711**.

Blue Cross Coordinated CareSM

We understand the journey to better health is personal and, at times, overwhelming. Blue Cross Coordinated Care includes a dedicated care team to **support** you and **connect** you with the right care at the right time.

If you've been diagnosed with a **serious illness**, you can count on our dedicated nurse care managers to work with your health care provider to help you and your loved ones:

- Understand your medical condition.
- Connect with community resources.
- Coordinate care.
- Obtain equipment and medical supplies.
- Review treatment options.

We offer care management services based on your medical claims or when your provider refers you for assistance. In some cases, we work with independent companies to provide services on our behalf.

If you're hospitalized, we can also help with the transition to your home or another facility to ensure you get the care you need.

For a **chronic condition**, our nurse care managers help you develop skills to manage it, so you feel more in control. Your nurse care manager will help you enroll in a care plan and set goals to improve your health.

The program is completely confidential and available at no cost.

Call 1-800-775-BLUE (2583), 8 a.m. to 6 p.m.

Eastern time, Monday through Friday. TTY users, call **711**.

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. **Call 1-888-803-4960** Monday through Friday from 8 a.m. to 5 p.m. Eastern time. TTY users, call **711**.

Quit tobacco for good

Increase your chances for becoming tobacco free with a phone-based tobacco cessation coaching program offered by PersonifyTM Health. This holistic, clinically sound and whole-person program addresses all factors surrounding tobacco use. Whether you're ready to set a quit date or not, enroll and schedule your first call. Call Personify Health at **1-888-573-3113** for enrollment assistance. TTY users, call **711**. Member services support is available by phone, chat and email 8 a.m. to 9 p.m., Monday through Friday. Health coaches are available 8 a.m. to 11 p.m. Monday through Thursday; 8 a.m. to 7 p.m. on Fridays; and 9 a.m. to 3 p.m. on Saturdays. All hours are Eastern time.

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.



24-Hour Nurse Line

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



Primary care provider

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



Virtual care visits

Virtual care is available through Teladoc Health®, 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 seven days a week from 7 a.m. to 9 p.m. Eastern time.



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.



Urgent care

Get non-emergency, in-person care for conditions, such as:

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

Copay may apply.



Emergency room

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

Teladoc Health® is an independent company that provides virtual care solutions for Blue Cross Blue Shield of Michigan and Blue Care Network.

Take an active role in your care

Your plan includes more than 20 preventive care-related services including flu and pneumonia vaccines, mammograms and colorectal cancer screenings. Ask your doctor which preventive services are right for you. If you're new to Medicare, schedule a *Welcome to Medicare* exam. If you've been enrolled in Medicare for more than a year, you can take advantage of your annual wellness visit, which includes a personalized prevention plan, screening schedules, referrals and education based on your specific health situation.



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're taking).
- Speaking up if you have any health concerns.
- Being involved in your care decisions.

Blue Cross Virtual Well-BeingSM webinars and guided meditations

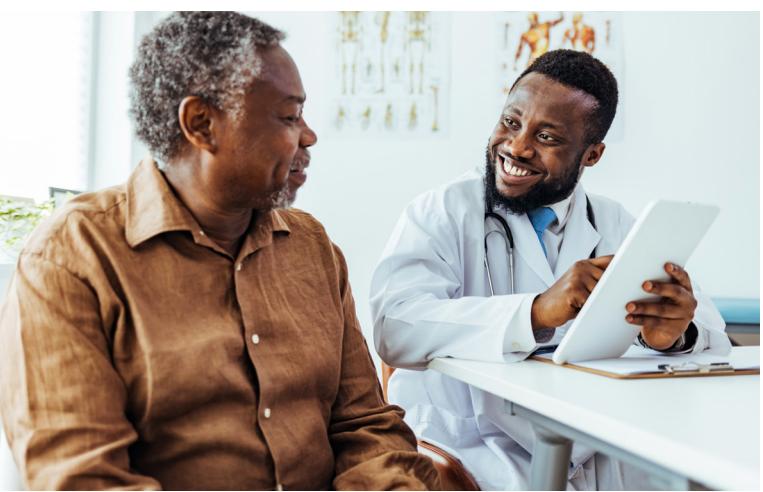
Let Blue Cross Virtual Well-Being webinars give you guidance and support on your personal well-being journey. Virtual Well-Being:

- 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.

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 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 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. Scroll down and click *Find a Doctor*.
2. Follow the prompts on the page to search for an in-network doctor, hospital or clinic by name or specialty.

If you have trouble locating your provider, if your doctor's name doesn't appear or if you have any questions, please call **1-888-322-5616** for help. TTY users, call **711**.

You can also call your provider's office and speak to the billing department. You can ask, **"Do you participate with the Medicare Advantage PPO plan offered by Blue Cross Blue Shield of Michigan?"**

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

In-Home Visits with Signify Health

We work with Signify Health to offer an In-Home Visit program to our members at no additional cost. You can have a complete health and wellness assessment with a licensed medical professional, all in the privacy of your home. You choose the day and time.

The In-Home Visit can be done in one of three ways:

1. In person in your home
2. Through video conference — on your smart phone, tablet or computer
3. Over the telephone

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 bcbsm.com/uawtrust/resources/home-visits.

*Signify Health is an independent corporation retained by Blue Cross Blue Shield of Michigan to provide health and well-being services to select **Medicare Plus Blue Group PPO** members.*

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 Cross 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.
- **Ask for more information** from your doctor to document medical necessity based on Medicare-approved clinical guidelines
- **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, they are 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.

Reach your health goals

Free SilverSneakers® fitness program

SilverSneakers is an exercise and wellness program offered by Tivity Health that helps you live a healthy, active lifestyle through exercise and fitness communities nationwide. You'll have access to thousands of facilities across the country.

Find a participating location:

silversneakers.com/Locations

1-866-584-7352

TTY users, call **711**

8 a.m. to 8 p.m. Eastern time
Monday through Friday

Getting active is easy with SilverSneakers GO™, the first fitness app designed just for you

- Access workout programs that can be tailored to your fitness level.
- Choose between four- or 12-week programs including strength, walking and meditation.
- Find everything you need in one place: your Silver Sneakers member ID, SilverSneakers locations and more.



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

Tivity Health is an independent company that has a contract with Blue Cross Blue Shield of Michigan to offer fitness services to its members. SilverSneakers GO is a trademark of Tivity Health, Inc. © 2025.

Apple and the Apple logo are trademarks of Apple Inc., registered in the U.S. and other countries. App Store is a service mark of Apple Inc., registered in the U.S. and other countries. Google Play and the Google Play logo are trademarks of Google LLC.

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*.

Your Explanation of Benefits has important information



What is an Explanation of Benefits, or EOB?

An EOB is a breakdown of the costs of your services, including what your insurance paid and what you may owe. An EOB is not a bill.

What am I supposed to do with an EOB?

Compare it to your medical bills. If a bill from your provider doesn't match your EOB and benefits, call us.

What if my medical bill doesn't show any insurance payments?

If you receive a medical bill for covered services that doesn't show any Medicare Plus Blue PPO payments and you never received an EOB, ask your provider to file an insurance claim. Wait to pay until you have a bill showing that we paid our share of the cost.

When should I pay my medical bills?

Your doctors may charge you a copay at the time of service or bill you later. You can wait to pay medical bills you receive in the mail until you receive an EOB that shows your share of the costs.

How often will I get an EOB?

We send EOBs monthly, when you've used your benefits. However, we can only process payments and list them on EOBs after your provider sends the service information to us.

Can I view my EOBs online?

Yes. You can see your benefits, claims, balances and electronic EOBs using your secure Blue Cross online member account. Page 3 (sign up for your secure online member account) has more information and easy ways to register.

Frequently asked questions



What is the difference between an annual wellness visit and an annual physical?

At an **annual wellness visit**, you will develop or update a personal prevention plan based on your current health and risk factors. It's for members who haven't received a *Welcome to Medicare* preventive visit or annual wellness visit within the past year. The annual wellness visit is covered under Part B and can occur anytime throughout the calendar year, regardless of the date of your previous annual wellness visit.

At an **annual physical**, a primary care provider collects health information through an exam. It's covered once per calendar year and is more comprehensive than an annual wellness visit. Services include:

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

There is no coinsurance, copay or deductible for these preventive services. However, if you receive other services at these visits, a 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.

Per Medicare guidelines:

- 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.

What is behavioral health?

Behavioral health is a broad term that includes mental health, as well as emotional well-being and substance use disorder. It's a term that focuses on supporting your whole self — because what you think, feel and do affects both your mental and physical states.

Will I be billed for my colonoscopy?

You are covered for one colonoscopy per year at 100%, regardless if it is preventive or diagnostic.

Contact information

UAW Retiree Medical Benefits Trust Service Center

1-888-322-5616; TTY users, call **711**

8 a.m. to 7 p.m. Monday through Friday

bcbsm.com/uawtrust

Retiree Health Care Connect

1-866-637-7555

TTY users, call **711**

8:30 a.m. to 4:30 p.m. Eastern time

Monday through Friday

Durable medical equipment, diabetic supplies, prosthetics and orthotics

1-888-322-5616

TTY users, call **711**

8 a.m. to 7 p.m. Eastern time

Monday through Friday

24-Hour Nurse Line

1-855-624-5214

TTY users, call **711**

24 hours a day, seven days a week

Behavioral health and substance use disorder care

1-888-803-4960

TTY users, call **711**

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

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

TruHearing

1-844-394-5420

TTY users, call **711**

Medicare PLUS BlueSM Group PPO



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.

UAW RETIREE
Medical Benefits Trust