

Medicare Plus BlueSM Group PPO

Our website is bcbsm.com/uawtrust.



2027 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

Medicare Plus Blue is the Medicare Advantage PPO plan from Blue Cross Blue Shield of Michigan, offered to UAW Retiree Medical Benefits Trust members. This type of plan — otherwise known as Medicare Part C — combines all the benefits of Medicare Part A and Part B, plus extra benefits and services not included in Original Medicare.

Your Blue Cross member ID card is used for all of your medical benefits. With Medicare Plus Blue, you have access to thousands of network doctors, hundreds of hospitals, wellness and preventive services throughout the U.S., and access to urgent and emergency care worldwide.

You're eligible for this plan if the following conditions are met:

- You're a UAW Retiree Medical Benefits Trust member
- You're enrolled in Medicare Part A and Part B*
- Your permanent address is in Michigan, Alabama, Florida, Indiana, Missouri or Tennessee

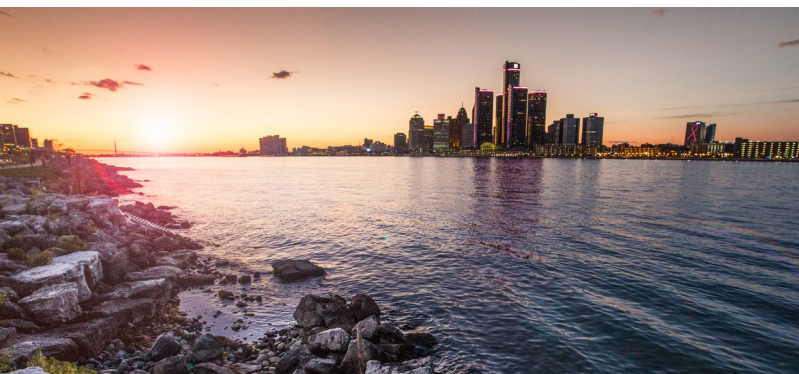
Important: Medicare guidelines only allow you to be enrolled in one Medicare Advantage plan at a time. If you're already enrolled in a Medicare Advantage plan through the UAW Trust and you enroll in an individual or non-Trust Medicare Advantage plan, you'll be disenrolled from the Trust Medicare Advantage plan.

*You must continue to pay your monthly Part B premium.



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Welcome! Get started



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 your *Evidence of Coverage*.
- Select the paperless plan document option.
- Find a doctor.
- Take your health assessment.
- Access a library of helpful health information and special programs.



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**.



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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, use them to 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 before the flu season begins in October, as it takes about two weeks after the vaccination for the antibodies to develop and protect against the flu. Although, receiving the vaccine anytime during the flu season can still be beneficial.

Talk to your healthcare provider about other vaccines you may need. Refer to your Evidence of Coverage for a more comprehensive list of vaccines covered by your plan.

Medicare Diabetes Prevention program

The Medicare Diabetes Prevention Program focuses on healthy lifestyle changes that aid in the prevention of Type 2 diabetes. This 12-month program, included with your plan, is for members with a body mass index, or BMI, greater than 25 who aren't diagnosed with Type 2 diabetes or end-stage renal disease.

To find out if you would benefit from this program, talk to your healthcare 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**.

Maintain 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 engage in positive social interactions. Behavioral health and care for substance use disorder is included in your plan. 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**.

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** and **connect** you with the right care at the right time.

If you've been diagnosed with a **serious illness**, take advantage of working with our dedicated nurse care managers 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'll help with your transition to 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 cope and help you feel more in control. Your nurse care manager will help you enroll in a care plan and set goals to improve your health.

This program is completely confidential and included in your plan.

Call **1-800-775-BLUE (2583)**, 8 a.m. to 6 p.m. Eastern time, Monday through Friday. TTY users, call **711**.

Quit tobacco for good

Become tobacco free with our phone-based tobacco cessation coaching program offered by PersonifyTM Health. This whole-person program uses holistic and clinically sound practices to address all factors surrounding tobacco use. Make today the day you enroll and schedule your first contact. 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've got options when it comes to your healthcare — know where to get the treatment you need when you need it. Out-of-pocket costs vary for each option.



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'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.



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
- 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 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 healthcare 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 healthcare 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	Call your doctor right away if you've fallen or are having problems with balance or walking. 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.

Diabetes 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 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](https://www.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're usually responsible for the cost. If your provider tells you a service wasn't approved and you have the service, your provider may ask you to pay the full cost.

Reach your health goals

Journeys

Journeys, powered by Personify Health, can help you start making the healthy lifestyle changes you'd like to see.

This personalized digital coaching program focuses on a variety of health goals, including eating better, conquering stress, feeling happier and enjoying exercise. All tips come straight from an expert health coach.

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*.



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.
- Modify exercises to make them easier or harder with just one click.
- Enjoy on-demand videos and live classes.
- Find everything you need in one place — your SilverSneakers ID, SilverSneakers locations and more.



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. © 2026.

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 2 (sign up for your secure online member account) has more information and easy ways to register.

Frequently asked questions



What's the difference between an annual wellness visit and an annual physical?

At an **annual wellness visit**, you'll 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, other services received during these visits, could result in a copay.



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?

One colonoscopy is covered each 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 (RHCC)

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**.

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