BCN Advantage℠ Group (HMO-POS) offered by Blue Care Network Advantage

University of Michigan
Annual Notice of Change for 2026

You're enrolled as a member of BCN Advantage Group HMO-POS.

This material describes changes to your plan's costs and benefits next year.

- **You have from October 15 – November 1 to make changes to your Medicare coverage for next year.** If you don't join another plan, you'll stay in BCN Advantage Group HMO-POS.
- To change to a **different plan**, visit **www.Medicare.gov** or review the list in the back of your *Medicare & You* 2026 handbook.
- Note this is only a summary of changes. More information about costs, benefits, and rules is in the *Evidence of Coverage***.** Get a copy at **www.bcbsm.com/umichmaplans** or call Customer Service at 1-800-658-8878 (TTY users call 711) to get a copy by mail. You can also review the separately mailed *Evidence of Coverage* to see if other benefit or cost changes affect you.

More Resources

- Call Customer Service at **1-800-658-8878 (**TTY users call *711*) for additional information. Hours are 8 a.m. to 5:30 p.m. Monday through Friday (April 1 through September 30), with weekend hours 8 a.m. to 8 p.m. seven days. This call is free.
- This information is available for free in a different format, including large print and audio CD. Please call Customer Service (phone numbers are in Section 4 of this booklet).

About BCN Advantage Group HMO-POS

- Blue Care Network Advantage is an HMO-POS plan with a Medicare contract. Enrollment in Blue Care Network Advantage depends on contract renewal.
- When this material says "we," "us," or "our," it means Blue Care Network Advantage When it says "plan" or "our plan," it means BCN Advantage Group HMO-POS.
- **If you do nothing by November 1, 2025, you'll automatically be enrolled in BCN Advantage Group HMO-POS.** Starting January 1, 2026, you'll get your medical coverage through BCN Advantage Group HMO-POS. Go to Section 2 for more information about how to change plans and deadlines for making a change.
- This plan doesn't include Medicare Part D drug coverage, and you can't be enrolled in a separate Medicare Part D drug plan and this plan at the same time. Note: If you don't have Medicare drug coverage, or creditable drug coverage (as good as Medicare's) for 63 days or more, you may have to pay a late enrollment penalty if you enroll in Medicare drug coverage in the future.

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Summary of Important Costs for 2026

	2025 (this year)	2026 (next year)
Monthly plan premium* *Go to Section 1 for details	Please contact the University of Michigan for information about your plan premium.	**Please contact the University of Michigan for information about your plan premium.**
Maximum out-of-pocket amount This is the most you'll pay out of pocket for covered services. (Go to Section 1 for details.)	$3,000 per individual	**$3,000 per individual**
Primary care office visits	$10 copay per visit	**$10 copay per visit**
Specialist office visits	$10 copay per visit	**$10 copay per visit**
Inpatient hospital stays Includes inpatient acute, inpatient rehabilitation, long-term care hospitals, and other types of inpatient hospital services. Inpatient hospital care starts the day you're formally admitted to the hospital with a doctor's order. The day before you're discharged is your last inpatient day.	Inpatient hospital care is covered at 100% of the approved amount.	**Inpatient hospital care is covered at 100% of the approved amount**

SECTION 1 Changes to Benefits & Costs for Next Year

Section 1.1 Changes to the Monthly Plan Premium

	2025 (this year)	2026 (next year)
Monthly plan premium (You must also continue to pay your Medicare Part B premium.)	Please contact the University of Michigan for information about your plan premium.	**Please contact the University of Michigan for information about your plan premium.**

Section 1.2 Changes to Your Maximum Out-of-Pocket Amount

Medicare requires all health plans to limit how much you pay out of pocket for the year. This limit is called the maximum out-of-pocket amount. Once you've paid this amount, you generally pay nothing for covered Part A and Part B services for the rest of the calendar year.

	2025 (this year)	2026 (next year)
Maximum out-of-pocket amount Your costs for covered medical services (such as copays) **count** toward your maximum out-of-pocket amount. Your plan premium and your costs for prescription drugs **don't count** toward your maximum out-of-pocket amount.	$3,000 per individual	**There are no changes to your maximum out-of-pocket amounts for next year.** **Once you've paid $3,000 out of pocket for covered Part A and Part B services, you'll pay nothing for your covered Part A and Part B services for the rest of the calendar year.**

Section 1.3 Changes to the Provider Network

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

- Visit our website at **www.bcbsm.com/umichmaplans**.
- Call Customer Service at **1-800-658-8878** (TTY users call 711) to get current provider information or to ask us to mail you a Provider *Directory*.

We can make changes to the hospitals, doctors, and specialists (providers) that are part of your plan during the year. If a mid-year change in our providers affects you, call Customer Service at **1-800-658-8878** (TTY users call 711) for help.

Section 1.4 There are no changes to your benefits or amounts you pay for medical services

Our benefits and what you pay for these covered medical services will be the same in 2026 as they are in 2025.

SECTION 2 How to Change Plans

To stay in BCN Advantage Group HMO-POS, you don't need to do anything. Unless you sign up for a different plan or change to Original Medicare by November 1, you'll automatically be enrolled in our BCN Advantage Group HMO-POS plan.

If you want to change to a different plan or to Original Medicare for next year, please contact the University of Michigan.

SECTION 3 Get Help Paying for Prescription Drugs

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

- **Extra Help from Medicare.** People with limited incomes may qualify for Extra Help to pay for their prescription drug costs. If you qualify, Medicare could pay up to 75% or more of your drug costs including monthly drug plan premiums, yearly deductibles, and coinsurance. Also, people who qualify won't have a late enrollment penalty. To see if you qualify, call:
    - 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048, 24 hours a day, 7 days a week.
    - Social Security at 1-800-772-1213 between 8 a.m. and 7 p.m., Monday -Friday for a representative. Automated messages are available 24 hours a day. TTY users can call, 1-800-325-0778 or
    - Your State Medicaid Office.

SECTION 4 Questions?

Get Help from BCN Advantage Group HMO-POS

- **Call Customer Service at 1-800-658-8878 (TTY users call *711*.)**

  We're available for phone calls. Hours are 8 a.m. to 5:30 p.m., Monday through Friday (April 1 through September 30), with weekend hours 8 a.m. to 8 p.m. seven days a week (October 1 through March 31). This call is free.

  Read your *2026 Evidence of Coverage*

  This *Annual Notice of Change* gives you a summary of changes in your benefits and costs for 2026. For details, look in the *2026 Evidence of Coverage* for BCN Advantage Group HMO-POS. The Evidence of *Coverage* is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs. Get the *Evidence of Coverage* on our website at **www.bcbsm.com/umichmaplans** or call Customer Service at 1-800-658-8878 (TTY users call 711) to ask us to mail you a copy.

- **Visit www.bcbsm.com/umichmaplans**

  Our website has the most up-to-date information about our provider network (Provider Directory).

Get Free Counseling about Medicare

The State Health Insurance Assistance Program (SHIP) is an independent government program with trained counselors in every state. In Michigan, the SHIP is called MI Options.

Call MI Options to get free personalized health insurance counseling. They can help you understand your Medicare plan choices and answer questions about switching plans. Call MI Options at 1-800-803-7174.

Get Help from Medicare

- **Call 1-800-MEDICARE (1-800-633-4227)**

  You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users can call 1-877-486-2048.

- **Chat live with www.Medicare.gov**

  You can chat live at **www.Medicare.gov/talk-to-someone**.

- **Write to Medicare**

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

- **Visit www.Medicare.gov**

  The official Medicare website has information about cost, coverage, and quality Star Ratings to help you compare Medicare health plans in your area.

- **Read Medicare & You 2026**

  The Medicare & You 2026 handbook is mailed to people with Medicare every fall. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. Get a copy at www.Medicare.gov or by calling 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.