

# Healthy *Blue Living*<sup>SM</sup> HMO

See what's

**NEW**



Blue Care  
Network  
of Michigan

Confidence comes with every card.®

## Member Guide

How to keep your health care costs lower

Visit [bcbsm.com/hbl](https://bcbsm.com/hbl) for videos, FAQs and other online resources about your plan.

**Thank you** for being a Healthy *Blue* Living member. Your plan includes an enhanced online well-being experience with state-of-the-art resources to help you take charge of your health and easily navigate your plan. You'll better understand your current health status and what steps to take for improving your well-being — and lowering your out-of-pocket costs.

## How your plan works

Healthy *Blue* Living has two benefit levels — enhanced and standard.

The **enhanced level** has lower out-of-pocket costs, such as copayments, deductible and coinsurance.

The **standard level** has higher out-of-pocket costs, such as copayments, deductible and coinsurance.

If you're **new to Healthy *Blue* Living**, you'll start at the enhanced level. You need to complete the tasks on your Healthy *Blue* Living to-do list to remain at this level.

If in your previous plan year you were at:

- **The enhanced level:** We'll send you additional details about tasks you need to complete to remain at this benefit level.
- **The standard level:** Complete the tasks for this year to earn back the enhanced benefit level. See **Page 10** to understand how the enhanced level saves you money.

## Your personal to-do list

Your own personal to-do list is available through your online member account at **bcbsm.com**.

Use your computer or the web browser on your mobile device to log in to your account. (The to-do list isn't available on our mobile app.) After you've logged in to your account:

1. Click *My Coverage* in the navigation menu.
2. Click *Medical* from the drop-down menu.
3. Click *To-do List*.

Your to-do list will show:

- If your contract is at the enhanced or standard level.
- The tasks you've already completed and the date you did each one.
- Your remaining tasks and the dates they're due.
- Your qualification form results and how your doctor scored you on your health measures. See **Page 6**.

If your qualification form shows you use tobacco or have a body mass index of 30 or higher check your to-do list. A link to enroll in a program will appear along with a deadline date.



# NEW Blue Cross Well-Being<sup>SM</sup>

## Modernized, personalized support for completing your to-dos

We worked with Personify Health<sup>TM</sup> to offer you a personalized well-being experience that delivers daily content based on your health and interests. The online well-being resources that come with your Healthy *Blue* Living plan are now better than ever to help you build healthy habits for your whole well-being:

- **Comprehensive health assessment** to identify health risks with recommended steps to take for improvement
- **Weight-management and tobacco coaching** with more accessible, one-on-one support
- **Flexible weight-management program** that offers more types of activities to choose from
- **Seamless connection** to more tracking devices and apps, including MyFitnessPal<sup>TM</sup> and Apple Health



And then there are the extras:

- Subscribers of the plan receive a **\$50 credit toward a physical activity tracker** with more options to choose from, including Apple devices.\*
- **Daily self-guided Journeys<sup>®</sup>** for sleeping better, lowering stress, getting fit and other areas of focus
- **Nutrition Guide and Sleep Guide** to support your goals of eating healthy, sleeping well and managing your weight
- **Health care checklist** for tracking exams, screenings and vaccinations

And you can access them conveniently through your member account at **bcbsm.com**. You'll need to enroll in Blue Cross Well-Being to begin your well-being experience. See **Page 9**.

\*Not available to spouses and dependents on the plan



# Steps to take for the enhanced level

**Healthy Blue Living to-do items only apply to you as the subscriber of the plan.** Spouses and dependents don't need to complete the tasks; they're assigned to the same benefit level as you.

Be sure to complete each step below by the deadlines that are posted to your to-do list in your account at [bcbsm.com](http://bcbsm.com).

## Within your first 90 days

### STEP 01

**See your primary care provider to complete your qualification form.** Schedule an appointment for a health evaluation to have your doctor check these six health measures:

- a. Tobacco use
- b. Body mass index
- c. Blood pressure
- d. Blood sugar
- e. Cholesterol
- f. Depression



Watch a video for instructions on completing your qualification form. Go to:

[bcbsm.com/healthyblue90](http://bcbsm.com/healthyblue90)

After your evaluation, tell your doctor to submit your results electronically on a *Blue Care Network Qualification Form*. You'll want to make your appointment with your primary care provider in enough time to submit your qualification form. Qualification forms will be accepted for an office visit that occurred up to 180 days before your plan year began.

### STEP 02

**Complete an online health assessment.\*** Take this simple survey to get a clear snapshot of your health. Through your new Blue Cross Well-Being account, you'll get personalized recommendations on ways you can improve your well-being.

1. Log in to your member account at [bcbsm.com](http://bcbsm.com) using your computer or the web browser on your mobile device or tablet.
2. Select *Medical* under the *My Coverage* tab.
3. Click *To-do List*.
4. Click *Take your Health Assessment*.



For video instructions on completing your health assessment, go to:

[bcbsm.com/healthyblue90](http://bcbsm.com/healthyblue90)

\* The information in your health assessment is confidential and will be disclosed only as permitted by federal and state privacy laws.



## Within the first 120 days (if required)

### STEP 03

If your qualification form shows your BMI is 30 or higher, enroll and participate in a BCN-sponsored weight-management program to stay at the enhanced benefit level.

**NEW** You have two new options\*:

- **Triple Tracker:** Complete 7,000 steps daily, a 15-minute workout or 15 active minutes — or any combination of the three — at least 20 days a month. You can seamlessly connect to more than 100 apps and devices, including Apple devices.\*\*
- **Lifestyle Coaching:** Attend one 20-minute session with your health coach each month either by phone or messaging.

### STEP 04

If your qualification form shows you use tobacco, enroll and participate in the new Blue Cross Well-Being coaching program to stay at the enhanced benefit level.

**NEW** Your new Tobacco Coaching program\*: Attend one 20-minute session with your health coach each month. You can choose to meet with them either by phone or messaging.

If steps 3 or 4 apply to you, we'll mail you details about the programs with instructions on how to enroll.

The deadline dates to enroll in a program will display on your to-do list after we process your qualification form. **Log in to your account** to check your to-do list status. Once we receive a new qualification form from your primary care provider showing a negative cotinine test and/or a BMI under 30, you'll no longer need to participate in these programs.

We don't limit the number of times you can see your doctor to have a qualification form completed, even if you're returning to them after a recent physical less than 12 months ago.

\*On Jan. 1, 2025, we transitioned our weight-management and tobacco coaching programs to Personify Health™. WW® and WebMD® contracts ended Dec. 31, 2024. As a Healthy Blue Living member, you can complete your current WW session. After this session, you'll no longer have access to WW through Blue Care Network.

\*\*Any member using Max Go, Samsung Health, Apple Health or Google Fit™ must use the Personify Health app to synchronize them with your Blue Cross Well-Being™ account. Search "Personify Health" in the App Store® or Google Play™ to download the app. Once synchronized, you can monitor your fitness activities in either the Personify Health app or your online member account.

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Register for Blue Cross Well-Being to access these programs. See **Page 9** for instructions. Your previous well-being account information doesn't transfer.

# Understand your *Blue Care Network Qualification Form*

The qualification form has six important health measures. During your appointment, your primary care provider will check and score each one:

**A** = You've met the recommended target.

**B** = You didn't meet the recommended target, but you've agreed to take the right steps to improve the health measure.

**C** = You didn't meet the recommended target, and you won't commit to your doctor's treatment plan or enroll in a BCN program for weight or tobacco.

## Target these health measures

**A and B scores will keep you at the enhanced benefit level if you complete everything else on your to-do list.**

**Scoring a C will move you to the standard level with higher out-of-pocket costs.**

| Health measure | Target to score an "A"  | If you don't score an "A," do this for a "B"   |
|----------------|---|--|
| Tobacco        | Blood or urine cotinine test confirms no tobacco use*             | Tell your doctor you'll enroll and participate in BCN's Tobacco Coaching program until a new qualification form shows you don't use tobacco.             |
| Weight         | BMI under 30  | Tell your doctor you'll enroll and participate in a BCN-sponsored weight-management program until a new qualification form shows your BMI is under 30.** |
| Blood pressure | Below 140/90  | Commit to and follow your doctor's treatment plan.   |
| Blood sugar    | Fasting blood sugar or A1C at or below target                     |  |
| Cholesterol    | LDL-C is below target (based on risk factors: <100, <130 or <160) |  |
| Depression     | Any symptoms of depression are well-controlled                    |  |

\*After one negative test, no testing is needed again. Self-reported tobacco users don't need the test.

\*\*Consult with your doctor before starting any regular exercise or program.

## Did you score all As on your qualification form?

You don't need to complete a qualification form and health assessment every year if you scored all As on your most recent qualification form. If you're younger than 40, you'll need to submit a qualification every three years. If your age is 40 or older, you submit one every two years.

We'll send you a letter when it's time to submit one. Or **check your to-do list** by logging in to your account at [bcbsm.com](https://bcbsm.com).

## Your doctor's office must electronically submit your qualification form

The paper qualification form you received with your guide serves only as an example.

Your doctor's office might not submit your qualification form right after your appointment. **Log in to your account at [bcbsm.com](https://bcbsm.com)** to check your to-do list a week after your appointment to confirm it's been submitted. If not, call your doctor's office to remind them you're a Blue Care Network member with the Healthy *Blue* Living plan, and they need to submit the form to us before your deadline.



We're committed to helping you achieve your best health status. Lower out-of-pocket costs for participating in our well-being health care plan, Healthy *Blue* Living, are available to subscribers who meet all qualification requirements. If you think you might be unable to meet a standard or requirement under this plan, you might qualify for an opportunity to earn lower out-of-pocket costs by different means. You can work with your BCN primary care provider to find an alternative that's right for you in light of your health status.

# Blue Care Network Qualification Form

to be submitted electronically by your primary care provider



A nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association

## Member section:

|                             |  |            |  |                            |   |
|-----------------------------|--|------------|--|----------------------------|---|
| Last name                   |  | First name |  | Date of birth (MM/DD/YYYY) |   |
| Contract/enrollee ID number |  |            | <b>Gender:</b><br><input type="checkbox"/> Female <input type="checkbox"/> Male  |                            | <b>Ethnicity (optional):</b><br><input type="checkbox"/> Arab American<br><input type="checkbox"/> Asian American<br><input type="checkbox"/> Black not Hispanic<br><input type="checkbox"/> Chaldean |
| Telephone number            |  |            | <input type="checkbox"/> Hispanic<br><input type="checkbox"/> Multiracial<br><input type="checkbox"/> North American Native<br><input type="checkbox"/> White not Hispanic<br><input type="checkbox"/> Other |                            |   |

**BCN primary care provider:** Take notes on this form, and input the data into Health e-Blue<sup>SM</sup>. Refer to Health e-Blue for standards of care. If you have any questions, contact your BCN provider representative. Give a copy of the electronic *Certificate of Submission* or a completed and signed copy of the paper form to the member, and keep a copy with the member's medical records. Tip: If you arrange for the member to receive laboratory tests in advance of the physical exam, you may be able to complete the form during the office visit.

### Scoring key:

- A = Member meets criteria
- B = Member commits to treatment plan
- C = Member does not commit

Visit date (MM/DD/YYYY)

| Criteria  | Score  | Current results   |
|---|--|---|
| <b>Tobacco</b><br>Does not use (never used or quit >1 month with cotinine levels of <10 ng/mL for serum or <100 ng/mL for urine)        | <input type="checkbox"/> A. Does not use tobacco<br><input type="checkbox"/> B. Tobacco user: Commits to enroll in or is enrolled in BCN-designated tobacco-cessation program<br><input type="checkbox"/> C. Tobacco user: Does not commit to and is not enrolled in BCN-designated tobacco-cessation program                  | Cotinine test: After one negative test, no testing needed in future years; test not needed for self-reported tobacco users<br><input type="checkbox"/> Blood <input type="checkbox"/> Urine<br><input type="checkbox"/> Positive <input type="checkbox"/> Negative<br>Date of cotinine test: _____<br>Cotinine level: _____ ng/mL |
| <b>Weight</b><br>Body mass index <30 kg/m <sup>2</sup>  | <input type="checkbox"/> A. BMI <30<br><input type="checkbox"/> B. BMI is ≥ 30: Commits to enroll in a BCN-sponsored weight-management program<br><input type="checkbox"/> C. BMI is ≥ 30: Does not commit to enroll in a BCN-sponsored weight-management program  | Date height and weight measured: _____<br>Height: _____ (feet) _____ (inches)<br>Weight (pounds): _____ BMI: _____  |
| <b>Blood pressure</b><br><140/90 mmHg   | <input type="checkbox"/> A. Does not have high blood pressure or it is controlled<br><input type="checkbox"/> B. Has high blood pressure that is not controlled but is following treatment<br><input type="checkbox"/> C. Has high blood pressure; does not commit to or is not following treatment                            | Systolic: _____ Diastolic: _____<br>Date of blood pressure reading: _____   |
| <b>Cholesterol</b><br>LDL target level based on risk factors: <100, <130 or <160  | <input type="checkbox"/> A. Does not have high cholesterol or it is well controlled<br><input type="checkbox"/> B. Has high cholesterol that is not controlled but is following treatment or does not tolerate treatment<br><input type="checkbox"/> C. Has high cholesterol; does not commit to or is not following treatment | Total cholesterol: _____<br>LDL: _____ HDL: _____<br>Triglycerides: _____<br>Date of cholesterol test: _____  |
| <b>Blood sugar</b><br>Fasting blood sugar or A1C<br><b>Non-diabetic:</b> FBS <126mg/dL A1C <6.5%<br><b>Known diabetic:</b> A1C goal <8% | <input type="checkbox"/> A. Does not have diabetes or A1C is well controlled<br><input type="checkbox"/> B. A1C is not controlled but is following treatment<br><input type="checkbox"/> C. A1C is not controlled; does not commit to or is not following treatment  | <input type="checkbox"/> <b>No known diabetes</b><br>FBS: _____ mg/dl A1C: _____<br><input type="checkbox"/> <b>Known diabetes</b> A1C: _____<br>Date of A1C or FBS test: _____   |
| <b>Depression</b><br>Any depression is in full remission  | <input type="checkbox"/> A. Does not have either history or current symptoms of depression<br><input type="checkbox"/> B. Has depression and is following treatment<br><input type="checkbox"/> C. Has depression and does not commit to or is not following treatment   | Date of PHQ-2 or PHQ-9 test: _____<br>PHQ-2 score: _____<br>PHQ-9 score: _____  |

**Provider's approval:** I verify the information supplied is complete and accurate.

|                                  |   |                                      |
|----------------------------------|---|--------------------------------------|
| Health care provider's last name | Health care provider's first name       | National provider identifier, or NPI |
| Health care provider's signature | Health care provider's telephone number | Date                                 |

## Additional resources



### 24-Hour Nurse Line

For no extra cost, reach a registered nurse 24/7, toll-free, at **1-855-624-5214** or **711** (TTY). A registered nurse can answer your health care questions, assess symptoms and provide self-care tips.



### Member discounts

Take advantage of national and Michigan-based discounts for a variety of health products and services from fitness gear to gym memberships. Log in to your member account at **bcbsm.com** and then click *Member Discounts with Blue 365*<sup>®</sup>.



### Blue Cross Virtual Well-Being<sup>SM</sup> webinars and meditations

Blue Cross Virtual Well-Being offers live, 30-minute, interactive webinars on Thursdays at noon Eastern time focused on engaging and inspiring people to enhance their overall well-being. Every webinar includes a science-based discussion of well-being topics.

In addition, guided meditations are presented live each Wednesday at noon Eastern time. All webinars and meditations are available on-demand. Register for webinars or meditations, or to learn more, at **bluecrossvirtualwellbeing.com**.

### Register your online member account at [bcbsm.com/register](https://bcbsm.com/register)

Log in to your account:

- View your *Member Handbook*, claims and explanation of benefit statements.
- Select or change your primary care provider.
- Check the status of your authorizations and referrals, and see when they expire.





# Create your Blue Cross Well-Being account

If you haven't registered your well-being account, log in to your account at [bcbsm.com](https://bcbsm.com) and then:

1. Click the *Programs & Services* tab.
2. Click *Blue Cross Well-Being* under *Quick Links*. (You'll be directed to another page to create your account.)
3. When creating your account, you'll be asked to:
  - **Tell us who you are.** Confirm your name and enrollment details.
  - **Legal and privacy.** Review and agree to the rules, data collection and privacy policy.
  - **Create your account.** Add your email, make a password and provide some additional details to customize your experience.
4. You're all set. Your account is ready. Select *Take Me There* to get started.

Once registered, use your member account at [bcbsm.com](https://bcbsm.com) to access your plan's well-being services.



# What the enhanced level can mean for you

The example below can help you understand how the enhanced level works for your plan. These sample costs are meant to illustrate examples of the types of savings you could see; they're not specific to your plan. Other costs may apply in this scenario if other tests occurred and health issues were present. Log in to your account at [bcbsm.com](http://bcbsm.com) to view your plan documents. Your account also displays costs that are based on whether you're at the enhanced or standard level.

## Meet Jennifer



Jennifer has Healthy *Blue* Living. She did her health assessment and saw her doctor a month after her plan started. After her visit, Jennifer's doctor submitted her qualification form electronically to make sure we received it within the first 90 days of her plan year. Jennifer didn't have any 120-day tasks because her BMI is below 30 and she doesn't use tobacco.

## A trip to the emergency room

Jennifer tripped on her stairs at home. She was in severe pain after the fall and thought her ankle was broken so she went to the emergency room.

By doing the items on her to-do list, Jennifer was at the enhanced level and **saved \$550 on her out-of-pocket costs.**

|                                    | Enhanced-level situation<br>(completed to-do items) | Standard-level situation<br>(incomplete to-do items) |
|------------------------------------|---|--|
| Total cost for emergency room trip | \$3,000   | \$3,000  |
| Jennifer pays:                     |   |  |
| Deductible                         | \$500   | \$1,000  |
| Copayment                          | \$100   | \$150  |
| Her plan pays                      | \$2,400   | \$1,850  |
| <b>Jennifer's total cost</b>       | <b>\$600</b>  | <b>\$1,150</b>                                       |

## Your savings apply to all health care services

You don't just save on emergency room visits. Your out-of-pocket cost savings apply for trips to your doctor and urgent care, as well as prescriptions and other services that are part of your benefits, such as physical therapy.

**We Speak Your Language**

ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 877-469-2583 TTY: 711 or speak to your provider.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También se ofrecen, sin costo alguno, ayuda y servicios auxiliares adecuados para proporcionar información en formatos accesibles. Llame al 877-469-2583 TTY: 711 o hable con su proveedor.

تنبيه: إذا كنت تتحدث الإنجليزية، فإن خدمات المساعدة اللغوية المجانية متوفرة لك. تتوفر أيضًا المساعدات والخدمات المساعدة المناسبة لتوفير المعلومات بتنسيقات يسهل الوصول إليها مجانًا. اتصل برقم 877-469-2583 TTY: 711 أو تحدث إلى مزود الخدمة الخاص بك.

注意: 如果您说[中文], 我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务, 以无障碍格式提供信息。请致电 877-469-2583 (TTY: 711) 或咨询您的服务提供商。

අමතර: ඔබ ඉංග්‍රීසි භාෂාවෙන් කතා කරන්නේ නම්, නිවැරදි ආවේණික ආධාර සේවාවන් සඳහා ඔබට නිවැරදි තොරතුරු ලබාදීමට අපට සූදානම්ව සිටිමු. අමතන්න 877-469-2583 TTY: 711 හෝ ඔබේ සේවකරු සමඟ කතා කරන්න.

LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ và dịch vụ phù hợp để cung cấp thông tin bằng các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi số 877-469-2583 TTY: 711 hoặc trao đổi với người cung cấp dịch vụ của bạn.

VËMENDJE: Nëse flisni shqip, shërbime falas të ndihmës së gjuhës janë në dispozicion për ju. Ndhima të përshtatshme dhe shërbime shtesë për të siguruar informacion në formate të përdorshme janë gjithashtu në dispozicion falas. Telefononi 877-469-2583 TTY: 711 ose bisedoni me ofruesin tuaj të shërbimit.

알림: 한국어를 사용하는 경우 언어 지원 서비스를 무료로 이용할 수 있습니다. 정보를 접근 가능한 형식으로 제공받을 수 있는 적절한 보조 기구와 서비스도 무료로 이용할 수 있습니다.

877-469-2583 TTY: 711 번으로 전화하거나 담당 기관에 문의하십시오.

মনোযোগ দিন: যদি আপনি বাংলা বলেন তাহলে আপনার জন্য বিনামূল্যে ভাষা সহায়তা পরিষেবাদি উপলব্ধ রয়েছে। অ্যাক্সেসযোগ্য ফরম্যাটে তথ্য প্রদানের জন্য উপযুক্ত সহায়ক সহযোগিতা এবং পরিষেবাদিও বিনামূল্যে উপলব্ধ রয়েছে। 877-469-2583 TTY: 711 নম্বরে কল করুন অথবা আপনার প্রদানকারীর সাথে কথা বলুন।

UWAGA: Osoby mówiące po polsku mogą skorzystać z bezpłatnej pomocy językowej. Dodatkowe pomoce i usługi zapewniające informacje w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer 877-469-2583 TTY: 711 lub porozmawiaj ze swoim usługodawcą.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistenzdienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 877-469-2583 TTY: 711 an oder sprechen Sie mit Ihrem Provider.

ATTENZIONE: se parli Italiano, sono disponibili servizi di assistenza linguistica gratuiti. Sono inoltre disponibili gratuitamente ausili e servizi ausiliari adeguati per fornire informazioni in formati accessibili. Chiama l'877-469-2583 TTY: 711 o parla con il tuo fornitore.

注: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。情報をアクセスしやすい形式で提供するための適切な補助器具やサービスも無料でご利用いただけます。877-469-2583 TTY: 711 までお電話いただくか、ご利用の事業者にご相談ください。

ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются

бесплатно. Позвоните по телефону 877-469-2583 TTY: 711 или обратитесь к своему поставщику услуг.

PAŽNJA: Ako govorite srpsko-hrvatski, dostupne su vam besplatne usluge jezične pomoći. Odgovarajuća pomoćna pomagala i usluge za pružanje informacija u pristupačnim formatima također su dostupni besplatno. Nazovite 877-469-2583 TTY: 711 ili razgovarajte sa svojim pružateljem usluga.

PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na karagdagang tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 877-469-2583 TTY: 711 o makipag-usap sa iyong provider.

**Discrimination is against the law**

Blue Cross Blue Shield of Michigan and Blue Care Network comply with Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex (including sex characteristics, intersex traits; pregnancy or related conditions; sexual orientation; gender identity, and sex stereotypes). Blue Cross Blue Shield of Michigan and Blue Care Network does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

Blue Cross Blue Shield of Michigan and Blue Care Network:

- Provide people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as: qualified sign language interpreters, written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provide free language services to people whose primary language is not English, which may include qualified interpreters and information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, call the Customer Service number on the back of your card. If you aren't already a member, call 877-469-2583 or, if you're 65 or older, call 888-563-3307, TTY: 711. Here's how you can file a civil right complaint if you believe that Blue Cross Blue Shield of Michigan or Blue Care Network has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance in person, by mail, fax, or email with:

Office of Civil Rights Coordinator  
600 E. Lafayette Blvd., MC 1302  
Detroit, MI 48226  
Phone: 888-605-6461, TTY: 711  
Fax: 866-559-0578

Email: [CivilRights@bcbsm.com](mailto:CivilRights@bcbsm.com)

If you need help filing a grievance, the Office of Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health & Human Services Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal website

<https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>, or by mail, phone, or email at:

U.S. Department of Health & Human Services  
200 Independence Ave, SW  
Room 509, HHH Building  
Washington, D.C. 20201  
Phone: 800-368-1019, TTD: 800-537-7697

Email: [OCRComplaint@hhs.gov](mailto:OCRComplaint@hhs.gov)

Complaint forms are available on the U.S. Department of Health & Human Services Office for Civil Rights website <https://www.hhs.gov/ocr/complaints/index.html>.

This notice is available at Blue Cross Blue Shield of Michigan and Blue Care Network's website: <https://www.bcbsm.com/important-information/policies-practices/nondiscrimination-notice/>.



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Personify Health is an independent company that provides health and well-being services on behalf of Blue Care Network.