LEADING THE WAY TO BETTER HEALTH CARE
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At the core of Blue Cross Blue Shield of Michigan, is the commitment to be there for the people of Michigan, in times of progress and prosperity and especially in times of uncertainty and need. That commitment has differentiated the company since 1939, just as it has drawn people to Blue Cross as customers, partners, leaders and employees. Speaking on behalf of the Blue Cross Blue Shield of Michigan board of directors, it’s gratifying to look back on 2017 not only as a year of historically strong performance, but a year in which the commitment was stronger than ever. For those who need us most, we were there in every county, providing access to high-quality health care. Our Michigan roots grew deeper. Our community ties got stronger. Our partnerships with diverse stakeholders delivered more impact.

In conjunction with every company success we charted in 2017, Blue Cross also demonstrated to the people of Michigan that it is more than a company. While we innovated to deliver value for those who carry the Blue Cross card, we also demonstrated that we are more than quality insurance. We leveraged partnerships across the state that allowed us to promote good health for people of all ages, address unique needs and serve a diverse population. Our commitment is, as it always has been, to make health care and health insurance work better. Sweeping change on the health care landscape did not deter us from our mission of improving the affordability of health care and ensuring that all Michigan citizens have access to coverage.

Blue Cross met the challenge of change by being a stronger, nimbler version of the same company that committed to be there for Michigan nearly 80 years ago. We were there for our members to make the complex clear. We were there in times of illness to help them get better. We were there, more responsive to our customers’ and members’ needs than ever. I’m proud to say Blue Cross Blue Shield of Michigan was there for Michigan in 2017. And we’ll be there in the future.

There are many ways to measure success. At Blue Cross Blue Shield of Michigan, we measure it primarily through the results we achieve on behalf of our membership. After all, as a nonprofit mutual insurance company, our members are the driving force behind everything we do.

In 2017, our business results validated our member-centric commitment. Blue Cross achieved our seventh consecutive year of membership growth. Our health insurance products continue to be the leading choice of Michigan residents and employers. We concluded the year with 5.4 million members, residing in Michigan and across the nation, covered by a record number of health insurance contracts.

The highest praise we can receive from anyone is an implied statement of trust— I choose you, Blue Cross, to help me protect my family. I want to take this opportunity to thank our members, and their employers, for your trust and your business. My gratitude, as well as the Blue Cross Blue Shield of Michigan employees who come in every day determined to make a positive difference in the lives of the people we serve.

For nearly 80 years, our mission has stood for improving health care access and quality, promoting affordability of coverage and care, and making Michigan healthier. In 2017, we once again accomplished these objectives in numerous ways— including continued work with doctors and hospitals to improve the quality and lower the cost of care, investing time and resources to meet pressing needs within our diverse communities, and continuing to innovate to find ways to deliver affordable coverage and a member experience that is easy, useful and enjoyable.

As this work continues, I’m pleased to provide you with a look back on a very successful 2017.
Blue Cross Blue Shield of Michigan is more than a provider of health care coverage. As a homegrown company that started here nearly 80 years ago, we feel it’s our corporate responsibility—and privilege—to support causes that promote healthy behaviors and lifestyles, expand access to quality health care, address unique health needs of diverse populations and enable sustainable communities.

Our social mission focuses on everybody in Michigan and drives how we do business:

- We keep margins low to improve affordability
- We partner with doctors and hospitals to improve quality and outcomes for all Michigan residents
- We have long been committed to providing insurance to all—regardless of health status—in every corner of the state
- We help protect the vulnerable through our relationship with the Michigan Health Endowment Fund, where Blue Cross has committed $1.66 billion to the Fund over 18 years to help protect vulnerable people in Michigan
- We are deeply committed to the communities of Michigan

We support initiatives that:

- Provide quality health care to underinsured residents
- Inspire school-aged children to develop healthy eating and physical activity habits
- Give senior citizens access to preventive health screenings
- Encourage diversity and inclusion at work and within our communities

Blue Cross regularly partners with organizations on major events to maximize community impact so we can promote better health. In 2017, we supported kids biking initiatives in Northern Michigan, the Michigan Special Olympics, and the National Letter Carriers Association “Stamp Out Hunger”—the world’s largest one day food drive.

We also take special pride in our efforts to engage with diverse cultures through staff learning opportunities, community volunteer projects and engagement with minority and women-owned businesses, faith-based organizations and the LGBTQ community.

Corporation Contributions

$7,329,470 Contributed to statewide community initiatives

Free Clinics

$789,546 Granted to free clinics to provide care for uninsured and underinsured Michigan residents, making us Michigan’s largest private donor to free clinics.

Supplier Diversity

$208 million Spent with minority and women-owned businesses, earning us Corporation of the Year, Michigan Minority Supplier Development Council.

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We were impressed by BCBSM’s ‘client first’ attitude throughout the process. Their responsiveness and composure when faced with short timeframes and unexpected challenges was instrumental in achieving the goals of the project. BCBSM delivered high quality work that exceeded our expectations. The various communications approaches created employee buzz that has paved the way for additional educational opportunities post annual enrollment. We exceeded our plan migration targets for 2018, and we consider our 2018 annual enrollment to be a towering success — there is no doubt in our minds that BCBSM played an integral role in contributing to our success story.

*2016 Aon Health Care Survey
Since its launch in 2016, the Blue Cross mobile app continues to help members access everything they need to manage and get the most from their benefits—all at their fingertips. The app is very well received by members and continues to lead across industries in customer satisfaction.

Whether it’s providing information to members about their benefits, deductibles and claims details, or personalizing wellness features for their needs, the app takes the power of Blue Cross and puts it on a device that people carry and use every day.

**VIRTUAL ID CARD**
Show and share your ID card to your doctors, so they have the information they need to look up your coverage.

**VIEW CLAIMS AND LOSS**
You can see what you were charged before you pay.

**FIND A DOCTOR**
Find a doctor or hospital in your network.

**COMPARE COST ESTIMATES**
Compare cost information for health care services to keep your health and budget in check.

**DEDUCTIBLE AND OUT-OF-POCKET BALANCES**
Know how much you’ve paid toward your balances.

**BENEFIT DETAILS**
See what your plan covers so you’re more informed when you need care.
In 2017, the opioid epidemic was declared a national public health emergency. Drug overdoses are now the leading cause of death among Americans younger than 50 and overdose deaths in Michigan have tripled in the last five years. As Michigan’s largest health insurer, Blue Cross is stepping forward to lead and coordinate a statewide response.

Adding to significant efforts that were already underway to address the crisis, Blue Cross created a multidisciplinary task force to coordinate and advance solutions. The task force is addressing the opioid issue by expanding on existing efforts and identifying future efforts that make a difference. The task force is working to:

• Educate and partner with key stakeholders, including providers, members, customers, media and the general public
• Improve access to high-quality treatment
• Fight fraud and abuse
• Enhance robust pharmacy management programs
• Advocate to improve state and federal laws
• Provide support for innovative community coalitions that are addressing the crisis

**TASK FORCE GOAL:** Prevent addiction before it starts and ensure effective treatment is available for those suffering from addiction.

**KEY RESULTS:**

While we must do more to address this crisis, our efforts to date have produced encouraging results.

• Over three years, the number of members receiving the dangerous triple threat drug combination has decreased by 76 percent.
• Opiate pill volume has fallen by more than 250,000 pills, a 30 percent decrease, through the Doctor Shopper program.
• Fill limits: In 2017, we announced a limit on the first fill of a short-acting opioid to a five-day supply.

To learn more about Blue Cross’ efforts to combat the opioid epidemic, visit MIBluesPerspectives.com/opioid101
When health teams design coordinated care plans around the specific needs of each patient, patients get the right care, at the right time and in the right setting. That’s the principle — and the reality — behind the Patient-Centered Medical Home model, a model which has advanced primary care statewide and has led to better health, lower costs and more value.

Care teams in the PCMH model take a whole-person approach to patient care, managing many different factors that may impact health, including behavioral health, and social and community supports. Through better coordination, PCMH practices prevent conditions from worsening, which reduces hospitalizations and emergency room visits.

**National Recognition**

Our PCMH program was approved by the Centers for Medicare & Medicaid Services as meeting the criteria for physicians to receive merit-based payment under the national Medicare Quality Payment Program.

**2017 by the Numbers**

- 4,692 primary care physicians in 1,709 practices earned the PCMH designation
- Physicians in 81 of 83 Michigan counties
- PCMH practices had 19% lower rate of ER visits and 25% lower rate of ambulatory care sensitive inpatient stays for adults, and a 20% lower rate of primary care sensitive pediatric ER visits

- 29.1% higher rate of well-child visits at the appropriate age marks
- 29.8% higher rate of weight assessment counseling with BMI
- 23.6% higher rate of colorectal cancer screening
- 24.0% higher rate of breast cancer screening

To learn more about Blue Cross’ efforts to improve quality and care, visit ValuePartnerships.com.
In 2017, we joined Blue plans across the country to brand a national network for high-quality care focused on patients and their better health. We call it Blue Distinction Total Care. It emphasizes preventive care to keep people healthy, and care coordination to improve quality and cost when they’re not. In Michigan, our nationally recognized Patient-Centered Medical Home program forms the basis of Blue Distinction Total Care.

Doctors earn this designation by working with patients to manage chronic conditions, prevent disease and reach their health goals — to live healthier lives. The national Blue Distinction program is locally tailored to meet each community’s needs and is built on strong relationships with doctors and hospitals.

Blue Distinction Total Care joins Blue Distinction Specialty Care to help members find high-quality doctors and hospitals that meet national standards for patient outcomes and safety. The Specialty Care program designates hospitals that are centers of excellence in seven treatment areas typically in high demand but with varying quality and cost.

Blue Distinction Centers have helped give Blue Cross members peace of mind when choosing hospitals for their care since 2006. Research shows that Blue Distinction Centers provide better results for patients, such as fewer complications and hospital readmissions, compared to other facilities. Hospitals designated as Blue Distinction Centers+ are also 20 percent more cost-efficient than those that haven’t earned the designation.

Blue Distinction Total Care providers

156,000

95% of top 100 metropolitan statistical areas

Members can search online at bcbsm.com or the Blue Cross mobile app to find Blue Distinction Total Care doctors and Blue Distinction Specialty Care centers near them, no matter where they live in the U.S.
Blue Cross Blue Shield of Michigan’s Emerging Markets division enables the diversification into new lines of business and geographies to create additional growth opportunities. Tessellate is at the forefront of how we’re successfully entering new markets on a national scale.

With more than 600 employees, and customers in over 20 states and Puerto Rico, Tessellate supports health plans and providers by improving Medicare Advantage performance relative to risk adjustment, provider engagement and star ratings from the Centers for Medicare & Medicaid Services.

Known for its Provider Engagement Coordination program, Tessellate collaborates with physician offices to ensure members’ medical conditions are treated appropriately, accurately documented, and that preventive services are administered, resulting in more accurate risk scores and improved star ratings. As a result, Tessellate has been recognized in the Blue Cross Blue Shield Association’s Innovation Forum.

**TESSELLATE FACTS**
- Serves over 1 million Medicare Advantage and Commercial members
- Operates in over 20 states and Puerto Rico
- Manages over $5 billion in risk adjustment-related revenue
- Delivers over $300 million in quality-related bonus revenue
- Has helped Blue Cross Blue Shield of Michigan achieve a 4-star rating for our national PPO plan since 2012
Information technology plays a critical role in Blue Cross’ ability to provide the highest quality care to our members. Whether it’s coordinating data and information between a physician and a hospital, protecting our members’ information or ensuring our members have all the tools they need while on the go, IT is ever-present in our members’ experience.

At its heart, Blue Cross will always be focused on keeping our members healthy — a goal that’s helped tremendously by advancements in information technology. The future of IT at Blue Cross is ensuring the company grows in step with the ever-changing world, while remaining true to its mission of serving our members.

“Technology is becoming more and more important to companies in achieving their strategic goals,” said Bill Fandrich, Senior Vice President and Chief Information Officer, Blue Cross Blue Shield of Michigan. “It’s shaping the way we work and operate, and we’re starting to leverage technology differently to achieve our mission of improving the health of Michigan’s residents.”

Protecting data
As millions of members trust Blue Cross with their personal information, every employee plays a role in protecting the company — and our customers’ and members’ — against cyber threats and ensuring confidential information does not leave our buildings or systems to be improperly used. In 2014, Blue Cross launched the B-Smart B-Secure awareness campaign. This internal campaign is focused on educating employees on how they can help support the company’s privacy and security standards.

Improving health outcomes through technology
Blue Cross Blue Shield of Michigan has been leading the charge on finding ways to harness technology to improve health outcomes and manage costs. More and more, we’re turning to technology and data to drive Michigan forward.

• Ensuring essential information about our members gets to physicians and hospitals at the right time through the Michigan Health Information Exchange.

• Sharing of data by hospitals and physicians through our Collaborative Quality Initiatives to identify best practices for common areas of care that have high costs and wide variation in outcomes.

• Collecting and tracking data through our Patient-Centered Medical Home program to better coordinate care for patients.

“Health care has become a high target for hackers as they recognize the value of patient data”

— USA Today, 2017

With more than 1,000 IT employees, Blue Cross is among Michigan’s largest IT employers.
For nearly 80 years, Blue Cross Blue Shield of Michigan has been able to deliver on our wide-ranging commitments because they are backed by our strong financial foundation. Achieving and maintaining strength and stability assures our stakeholders they can continue to rely on us as a trusted partner and advisor.

In 2017, our business performance continued to strengthen our ability to provide security to our members. We increased membership for the seventh year in a row, delivered high-quality, competitively priced products and advanced our work as a leading champion of value-based care. We worked diligently to manage administrative costs and sharpen the focus of our care management initiatives. As a result, our core health business achieved positive net results within our consolidated revenue base of nearly $27 billion.

We also experienced strong results in our subsidiaries. Our subsidiary AF Group, one of the leading workers' compensation insurance carriers in the country, continued to perform at an elite level. Our Medicaid subsidiary, Blue Cross Complete, now serves over 200,000 members. Our minority ownership of Medicaid managed care company, AmeriHealth Caritas, continued to see strong growth as that organization grew its footprint to serve populations in several additional states.

Blue Cross' investment portfolio performed well, providing positive income that contributed to our 2017 financial results. We also benefited from a change in federal tax law, which, in the short term, allows tax benefits to be recognized as assets, improving both net income and capital. Those tax benefits, combined with our investment and business performance, resulted in a 20 percent improvement in our risk-based capital (or RBC) measurement.

A strong RBC means Blue Cross has adequate statutory reserves and financial capital to support the insurance products we sell. In short, it means our stakeholders can rest assured we will be there for them in good and bad times to help them navigate the complexity of health care. It also means we are upholding, and will continue to uphold, our commitments to the people of the state of Michigan.
### Consolidated Financial Information (in millions)

#### December 31, 2017 and 2016 (GAAP* basis)

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<tr>
<th></th>
<th>2017</th>
<th>2016</th>
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<tbody>
<tr>
<td><strong>Assets</strong></td>
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<tr>
<td>Investments</td>
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<tr>
<td>Other</td>
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<tr>
<td><strong>Total assets</strong></td>
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<td>$13,903</td>
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<tr>
<td><strong>Liabilities, capital and surplus</strong></td>
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<td></td>
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<tr>
<td>Total liabilities</td>
<td>$9,657</td>
<td>$9,579</td>
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<tr>
<td>Total capital and surplus</td>
<td>5,646</td>
<td>4,324</td>
</tr>
<tr>
<td><strong>Total liabilities, capital and surplus</strong></td>
<td>$15,403</td>
<td>$13,903</td>
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<tr>
<td><strong>Premium revenue</strong></td>
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<td>$25,902</td>
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<tr>
<td>Claims under self-funded arrangements</td>
<td>(11,760)</td>
<td>(11,574)</td>
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<tr>
<td><strong>Expenses</strong></td>
<td>(14,800)</td>
<td>(14,508)</td>
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<tr>
<td><strong>Operating Gain (Loss)</strong></td>
<td>385</td>
<td>(180)</td>
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<td>Investment Income and other, net</td>
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<tr>
<td><strong>Other</strong></td>
<td>440</td>
<td>(33)</td>
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<tr>
<td><strong>Addition/Reduction to Policyholders Reserves</strong></td>
<td>$1,191</td>
<td>$122</td>
</tr>
</tbody>
</table>

To see our detailed consolidated financial statements, go to [bcbsm.com/annualreport](http://bcbsm.com/annualreport).

*Generally accepted accounting principles.

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### 2017 Key Indicators

**GAAP Revenue**: $26.9 billion

**Claims**: $63 million

**Operating Margin**: 1.4%

**Nationwide Membership**: 5.4 million

Seventh consecutive year of growth

**Michigan Healthy Endowment Fund**: $85 million paid in 2018

$355 million in total payments
James Agee*  
President  
JG Agee Consultants LLC

Peter Aljuni, D.O.  
Orthopedic Surgeon (Retired)

Renée Axt*  
President  
RCP Associates LLC

Ronald J. Bieber  
Michigan AFL-CIO

William Black*  
Executive Director  
Michigan Teamsters Joint Council 43

Darrell Burks*  
PriceWaterhouseCoopers (Retired)

Terry Burns  
Executive Vice President  
Michigan Automobile Dealers Association

Robert Casalou  
Regional President and CEO  
St. Joseph Mercy Health System

Patrick Devlin  
Financial Secretary/Treasurer  
Michigan Building Trades Council

Sarah Doyle  
International Union, UAW (Retired)

Linda Forte  
Comerica Bank (Retired)

Yousif Ghafar*  
Chairman and Founder  
Ghafari Associates LLC

Diane Goddeeris, RN, B.S.N.  
Registered Nurse, Obstetrics Informatics  
Sparrow Hospital

James Grant, M.D.  
Physician  
Beaumont Health – Royal Oak Campus

Paula Herbert  
President  
Michigan Education Association

Norwood H. Jewell  
International Union, UAW (Retired)

Melvin Larsen  
Larsen & Associates Inc. (Retired)

Daniel J. Loopp*  
President and Chief Executive Officer  
Blue Cross Blue Shield of Michigan

Christopher Maksym, Pharm.D.  
Director, Pharmacy and Home Care Operations,  
HomeMed, MedEQIP and Wheelchair Seating Services  
University of Michigan Health System

Gary McInerney*  
Owner  
McInerney & Associates

Anne Mervenne  
Chief Executive Officer  
Mervenne & Company

William Meyers  
Wm. Meyers & Associates LLC (Retired)

Dan Musser III  
President  
Grand Hotel

Kathleen Neal*  
Director, Integrated Health Care and Disability  
Fiat Chrysler Automotive US LLC

Robert Petzer*  
Michigan Infrastructure & Transportation  
Association (Retired)

Brian Peters  
Chief Executive Officer  
Michigan Health & Hospital Association

Wallace Riley  
Wallace O. Riley & Associates PLC (Retired)

Jean Rose  
Executive Director, Global Manufacturing  
Human Resources  
General Motors LLC

Edwin Secord, D.D.S., M.S.  
Orthodontist (Retired)

James Settles Jr.*  
Vice President  
International Union, UAW

F. Remington Sprague, M.D.*  
Ministry Organization Vice President and  
Chief Medical Officer  
Mercy Health Muskegon, CHE – Trinity Health

Gregory Sudworth*  
Chairman of the Board, President and founder  
CJR, Inc. dba Executive Labor-Management Services, Inc.

Laura Swartsmiller  
Director, Health & Welfare Benefits  
Ford Motor Company

Gary Torgow  
Chairman  
Chemical Bank

Renee Turner-Bailey  
Sr. Benefits Consultant  
International Union, UAW

*Member of Executive Committee
Subsidiary Corporations

AF Group
Lansing, MI
Lisa Corless
President
afgroup.com

Detroit, MI
Audrey Harvey
Executive Director and Chief Executive Officer
bcbam.com/foundation

*Subsidiary of Blue Care of Michigan, Inc.

Southfield, MI
Tiffany A. Albert
President and Chief Executive Officer
bcbsm.com

Tessellate
Southfield, MI
Jamie Wells
President
tessellate.com

Visiant
Southfield, MI
Jamie Wells
President
visianthealth.com