Get to know us

Blue Cross Blue Shield Michigan





2021

We are

- The largest health insurer in Michigan, serving 4.5 million members; plus 1.6 million in other states
- The largest network of doctors and hospitals in Michigan; Blue Cross has a network of more than 52,000 doctors and specialists and 128 hospitals.
- With over 600,000 in-network providers participating nationwide, our network strength ensures that no matter where members live or travel, they can find the health care providers they need.

We offer

BCBSM designs, sells and manages health benefit plans for individuals, families and Michiganbased employers. We offer a comprehensive range of affordable health care options including:

- Traditional plans
- Medicare plans
- Medicaid and state plans
- PPO (preferred provider organization) plans
- HMO (health maintenance organization) plans
- Wellness-based plans
- Plans with health spending accounts
- Dental and vision plans
- International plans
- Prescription Drug plans

We understand the needs of retirees

We understand that employers need coverage for more Medicare-eligible retirees, at increasing costs, for longer periods. We also know that Medicare-eligible retirees with chronic illness are living longer. Finally, we are aware that employers like you want to maintain benefits even as the cost of health care increases.



Medicare Plus Blue Group PPO



Blue Cross Medicare Advantage plans combine the benefits of original Medicare Parts A and B with additional coverage to create health care plans offering Medicare coverage that may include other benefits beyond original Medicare such as prescription drug coverage and fitness memberships. When you choose Blue Cross Medicare Advantage, you can be confident that you've selected the best option available for your retirees.

- Our chronic care support programs help members with complex or chronic illnesses. Blue Cross medical professionals work as health coaches for those with COPD, heart disease and diabetes. We also offer smoking cessation and weight loss support.
- Our fitness and preventive benefits help keep your Medicare-eligible retirees healthy and active, so they can enjoy their retirement and reduce health care costs.
- Globally-recognized coverage allows members to travel anywhere in the U.S. or in the world. They'll feel secure and confident carrying the Cross and Shield, the symbol of coverage they can trust. Medicare Plus Blue PPO members can have peace of mind when they travel knowing that they have options to receive medical care often under in-network rates.



Our Medicare Advantage specialists provide personalized service to answer members' questions and address concerns, including:

- Calling new members to ensure all materials have been received, and to identify and resolve member concerns.
- Educating members on their coverage, including preventive services.
- Connecting members to Customer Service to help resolve coverage or claim issues.
- Putting members in touch with Care Management nurses to provide guidance and information about health issues.

Our proven value





Makes Blue Cross stand out!

We're committed to our customers. This commitment coupled with our compelling product offerings, provides an unparalleled Group Medicare Advantage (MA) experience for you and your retirees.

Competitive pricing and value

Comprehensive and flexible benefits, significant medical cost savings, and leading quality ratings at competitive price points to maximize value for members and employers

National network with a local focus

National network strength combined with local innovation and expertise, leveraging broad Blue Cross system commitment to continually expand and enhance high performance network solutions for a smooth transition to Medicare Advantage

Deep Medicare Advantage expertise

Number one Group MA player in Michigan capturing nearly 80% of the market – a testament to Blue Cross' longstanding commitment to meeting retirees' unique needs with best-in-class MA plans since 2005

Commitment to our members

Data driven enhancements based on the member's end-to-end experience combined with a comprehensive portfolio of innovative supplemental benefits and services delivers unmatched service and support to our members

Flexible account driven approach

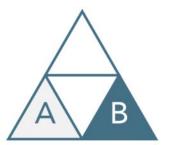
Our approach is centered around administrative simplicity, with an unwavering commitment to anticipating and addressing each account's distinct needs; holistic approach features the existing Commercial account team integrated with additional MA experts

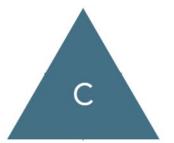
Understanding Medicare Advantage













PART A
Original Medicare

PART B
Original Medicare

PART C
Medicare Advantage

PART D
Prescription Drug
Plan

Part A Covers

- Hospital care
- Skilled nursing facility care
- Hospice
- Home health care

Part B Covers

- Doctor visits
- Mental health care
- Outpatient surgery
- Lab tests
- Durable medical equipment

Part C coverage combines Parts A and B and often D

Part C may include:

- Prescription drugs
- Fitness memberships
- Many benefits beyond Original Medicare

Part D is a governmentsponsored program that helps cover prescription drug costs

With a Medicare Advantage plan, members:

- Still have Medicare rights and protections
- Still get all Medicare-covered services

And, often receive extra benefits, such as:

- Hearing and vision coverage
- Fitness memberships
- Care management services

Covered medical services

- Inpatient hospital services
- Health screening & lab tests
- Primary care, specialty office visits
- Durable medical equipment
- Inpatient and outpatient mental health and substance abuse treatment
- Home health care
- Hospice care

Preventive services*

- "Welcome to Medicare" visit
- Bone density test
- Preventive screenings
- X-rays
- Pap smears, pelvic exams, mammogram
- Immunizations
- Annual Medicare-covered wellness visit
- Laboratory and pathology tests

^{*}Preventive services must be performed by a participating provider.

Group prescription benefits

In addition to medical plans, we also offer Part D prescription plans.



- You can choose a Medicare Part D or a commercial prescription plan for your group, both of which CMS considers "creditable" coverage.
- Our Part D plans can include coverage for cough and cold medicines, lifestyle drugs, some prescription vitamins and many other drugs, depending on which formulary is selected.
- Members can fill prescriptions for up to a 90-day supply at either local network pharmacies or via mail order.
- You may choose from a variety of formularies that provide benefits for Part D-required drugs and adds coverage for other drugs. Your Medicare-eligible retirees will enjoy similar access to the prescription drugs they had as active employees, with the added convenience of a single ID card.

Your representative can discuss available options to help you customize a plan for your group.

Nearly all Michigan pharmacies, are in our network.

A **network** pharmacy is a pharmacy that has a contract with the plan to provide your members' covered prescription drugs.

Prescription Drug Plan

Cost share is applied based on drug tiers:

Tier 1	Preferred generic drugs
Tier 2	Generic
Tier3	Preferred brand-name drugs
Tier4	Non-preferred drugs
Tier 5	Specialty drugs



- By default, group formularies contain 5 drug tiers. Groups have the flexibility to apply copays to these tiers as they choose and may have different copays for all 5 tiers or assign the same copay to two or more tiers to eliminate out-of-pocket cost differences between drug tiers for group members.
- Our network has pharmacies that offer standard cost-sharing and preferred cost-sharing. Member cost-sharing will be less at pharmacies with preferred cost-sharing.
- A cost-saving supply of prescription drugs available through our retail network or mail-order pharmacies.
- Home delivery through AllianceRx Walgreens Prime Home and Express Scripts.
- Access to an extensive pharmacy network outside of Michigan, including most chain pharmacies.

Wherever BCBSM members go,

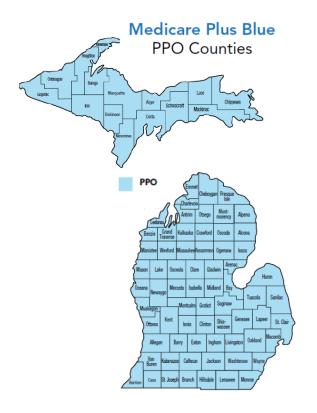
they go confidently!

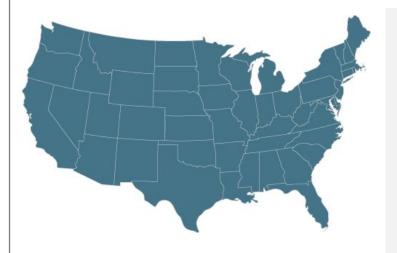


With our 2021 Medicare Advantage plans, BCBCM members can access online medical and behavioral health services using a smartphone, tablet or computer from anywhere in the U.S.

- Access to a nationwide network of Blue Cross doctors and hospitals that accept Medicare.
- Emergency, urgent care and routine care or services often at in-network rates from BlueCard providers nationwide.
- Emergency and urgent care coverage around the world.
- Internationally recognized name.

The strength of the Blue position in priority markets minimizes the risk of member disruption, leading to optimal uptake of the high-performance networks. We have a strong track record of success in serving employees like yours, a willingness to adapt our products to meet their needs, a reliable and committed team, and a strong organization with the resources and commitment of the entire Blue Cross Network system of health plans across the country.





Blue Card®1 covers members outside of Michigan.

Members can travel secure in the knowledge that wherever they travel, medical emergencies and urgent care are always covered. Coordinated plan approval is required for routine and follow-up care across in the U.S. Just use one of the many Blue plan participating providers.

Blue Cross offers care management and many other health & well-being programs





There are a wide variety of programs Blue Cross offers to help members manage chronic conditions and live healthier, more active lives. These programs are included at no additional cost to the members and can have positive impacts on their health and well-being.

24-Hour Nurse Line

This 24 hour a day, 7 day a week telephone triage and health information service, provided by our vendor Carenet, supports members in making healthcare decisions for themselves and their family members. Registered Nurses investigate member health concerns, determine the urgency of medical care and determine the timing of required interventions. Members are given clinically relevant patient education and empowered to make appropriate decisions. This program is available to BCBSM & BCNA members nationwide.

Advance Care Planning

Blue Cross partnered with Vital Decisions to provide a highly specialized Advance Care Planning solution designed to overcome systemic, analytic and clinical barriers causing disconnect between members' wishes and care received at end of life (EOL). The program identifies members via proprietary predictive models using BCBSM supplied and third-party data and offers.

This program enables engaged members to overcome emotional, physical and social barriers to communicating care preferences at end of life, allowing for engaged members to articulate their care goals, priorities, and preferences and effectively communicate their wishes to family, caregivers and providers. It includes education on end of life decision making, including hospice and palliative care, Advance Directive including Five Wishes and Living Wills, Healthcare Proxy, and Medical Orders for Life Sustaining Treatment. This program is available to BCBSM & BCNA members in select geographical areas.

Blue Cross® Virtual Well-Being

In this program, Blue Cross offers short weekly webinars designed to support members on their well-being journeys. Webinar content includes:

- Trending topics
- Meditation
- Financial well-being
- Health challenges

Members can visit virtual well-being online to learn more: https://www.bcbsm.com/index/members/health-wellness.html

Blue Cross® Coordinated Care

An integrated, member-centric care management program with medical, behavioral health, pharmacy and social needs addressed by teams deployed by region/community including:

- A multi-disciplinary team (RN care managers, MSWs, Pharmacists, Dieticians) lead by a nurse who
 coordinates the support of the new integrated team
- Holistic member management (medical, behavioral health, social)
- Community-centric teams and services; teams dedicated to regions/communities to gain a better
 understanding of the geographic area, providers, available resources and gaps in resources. Regional
 alignment of resources supports enhanced coordination with local providers and community resources to
 increase ability to address social determinants of health
- Member-centric engagement channels: Text, telephone, in-person. Includes a digital engagement platform (Wellframe) that increase and enhance member touchpoints

Eligible members include those selected by high dollar claimant review, meaning that members incurring >\$150K in a rolling 12-month period are reviewed by an RN for the purpose of ensuring appropriate care and identifying opportunities for intervention.

Collaborative Care

Collaborative Care is a primary care tool to reduce behavioral health and medical services. It enhances care and improves outcomes of member's behavioral health needs. It includes a multidisciplinary team of professionals providing care in a coordinated manner and empowered to work at the top of their professional training.





Diabetes Management Program

Blue Cross has partnered with Livongo to provide members with a Diabetes Management program designed to help them reduce HgbA1c, improve medication adherence and reduce gaps in care. Members receive multimodal outreach and have access to wireless, mobile and web-based diabetes management systems and technologies. Also available with the program are 24/7 monitoring and support, as well as clinical coaching for diabetes education and support.

Upon enrollment into the program, members receive a Welcome Kit including:

- A Diabetes blood glucose meter (in-Touch Device)
- Lancing device
- Carrying case
- On-demand supplies (trips, lancets, control solution).

This program is available to BCBSM & BCNA members nationwide who meet the criteria:

- Diabetes Type 1 or Type 2, AND one or more of the following:
- HbA1c >8, Insulin first fill (one Rx in past 12 months)
- No HbA1c in past 12 months, or non-adherent to diabetes medication.

Learn more at: join.livongo.com/MEDICAREBLUE

Meals Delivery

Blue Cross partners with vendor Mom's Meals to ensure that members engaged in Blue Cross Coordinated Care who would benefit from the program are be offered fourteen days of meals (28 meals). Meals are tailored to meet member-specific nutritional needs such as low sodium for members with Hypertension and Heart Failure. This program is available to BCBSM fully-insured/underwritten members and BCNA members nationwide who are discharged from acute medical or surgical stays and post-acute (SNF, Rehab, LTAC, etc.) and are at risk for re-admission.

MyBlueSM Concierge

BCN Advantage HMO-POS or HMO plan members have access to a concierge program that helps them learn more about their plan's benefits and how to use them. With this program, members have a dedicated concierge who will call to introduce them to your plan and tell them about benefits they might not be aware of, including preventive services available to them at no additional cost and BlueCard® and Silver Sneakers® (if their plans includes these programs).

They'll also help members:

- Schedule doctor appointments
- Connect with a Customer Service agent when they have a coverage or claim issue
- Get in touch with Blue Cross' care management team if they have a chronic condition
- Learn preventive measures they can take to maintain and improve health

This program is available to BCNA members nationwide.

Online Visits

Members may utilize Blue Cross Online Visits for non-urgent medical and behavioral health concerns. To access this benefit, members should visit bcbsmonlinevisits.com. Members are encouraged to share a visit summary with their provider(s). Members may also have an online visit with their own provider, if the provider offers this service.

Palliative Care





Blue Cross partners with vendor Aspire Health to provide members with non-hospice, palliative care that focuses on symptom management, patient-family communication, advanced care planning, medical crisis prevention and urgent response. Comprehensive, collaborative care is delivered by community-based providers to members with a life expectar

delivered by community-based providers to members with a life expectancy of less than 12 months and consists of medical care provided by a multidisciplinary team that includes: Palliative Care Physician, Social Worker, Patient Care Coordinator, Palliative Care NP, Registered Nurse, and Chaplain.

Palliative Care is Available to members residing in Grand Rapids, Michigan, St. Louis and Kansas City, Missouri, and Indianapolis, Indiana; a 2020 mid-year expansion included additional states (AL, TN, OH, NC). A telehealth Palliative Care program is available to some rural regions in Michigan that lack the population density to support home-based services (Northern Michigan, Thumb area and the Upper Peninsula). This program is available to BCBSM & BCNA members in select geographical areas.

Remote Monitoring

This program targets high risk members diagnosed with Heart Failure or COPD and comorbidities. Our vendor, AMC Healthcare Professional, uses BCBSM claims data to identify members for targeting. Selected members will have a monitor, placed in their homes that transmits biometric and/or other symptom data daily. When data falls outside of usual parameters AMC Healthcare Professional will follow up with member and/or physician. The goal of the program is to reduce avoidable in-patient and out-patient utilization by improving each member's self-management skills. This program is available to BCBSM & BCNA members nationwide who meet targeting criteria.

Shared Decision Making

Members have access to WelvieSM, an internet-based surgery decision-support program that helps them explore treatment options. WelvieSM provides guidance from diagnosis to recovery using a six-step interactive web-based curriculum that covers all preference-sensitive surgeries and focuses on health literacy and patient safety. This step-by-step approach helps members understand their options, make their decision and informs them of what to expect along the way. A letter and a flyer are sent to each member household (one per household) to encourage them to access the website and register for the program. Targeted mailings are distributed to members with specific claims history or conditions. Blue Cross partners with vendor WelvieSM to make this program available to members. This program is available to BCBSM & BCNA members nationwide.

Learn more at: https://welvie.com

SilverSneakers®

If included in your plan, fitness club membership through the SilverSneakers® fitness program is 100% covered. There are +17,000 participating U.S. locations and online support to help members lose weight and reduce stress. With SilverSneakers® members get:

- Access to more than 17,000 fitness centers
- Specialized classes designed to meet member needs
- Live and on-demand online classes, online tools, and basic fitness equipment to use at home
- Health and well-being educational classes
- Group activities and classes offered outside the gym

Learn more at https://www.SilverSneakers.com

SilverSneakers® Tuition Rewards Program

SilverSneakers® members can visit any SilverSneakers® participating locations seven times per month to accumulate Tuition Rewards Points for students that they designate (from birth to the beginning of their junior year of high school). Participating members get 1,000 Tuition Rewards Points when they sign up for the program. Then each month that they visit any participating location seven times, they'll earn 250 points. Each Tuition Rewards Point equals \$1.00 in tuition discounts at more than 400 colleges and universities. Learn more at SilverSneakers.TuitionRewards.com

Supervised Exercise Therapy (SET)

SET is covered for members who have symptomatic peripheral artery disease (PAD) from the physician responsible for PAD treatment. This includes up to 36 sessions of covered if the SET program requirements are met.





SET program guidelines include treatment under the following conditions:

- Sessions last 30-60 minutes, comprising a therapeutic exercise-training program for PAD in patients with claudication
- Treatment is conducted in a hospital outpatient setting or a physician's office
- Treatment is delivered by qualified auxiliary personnel necessary to ensure benefits exceed harms, and who are trained in exercise therapy for PAD
- Treatment is under the direct supervision of a physician, physician assistant, or nurse practitioner/clinical nurse specialist who must be trained in both basic and advanced life support techniques

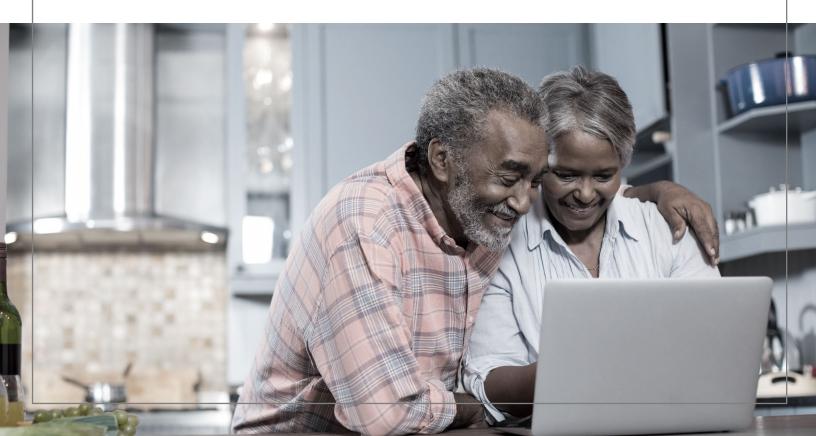
SET may be covered beyond 36 sessions over 12 weeks for an additional 36 sessions over an extended period if deemed medically necessary by a health care provider. This program is available to BCBSM & BCNA members nationwide.

Tobacco Cessation Coaching

This is a telephone-based program provided by WebMD, designed to support members in their efforts to stop smoking. The program's goal is to improve the members' quality of life and reduce costs and hospital utilization for conditions associated with tobacco use.

Transportation

Blue Cross has partnered with Ride Health to provide Non-Emergency Medical Transportation for members engaged in the Blue Cross Coordinate Care management program. The program is available to members identified as lacking access to transportation to post-discharge follow-up medical appointments. Transportation is limited to physician visits, physical therapy appointments, outpatient laboratory services, diagnostic testing and pharmacy. Members are eligible for this service for up to 28 days post-discharge. Services cover Oakland, Wayne, Macomb and Washtenaw counties. This program is available to BCBSM & BCNA members in select geographical areas.



24/7 Member access to information



With online or mobile app access, members can manage their health plan anytime, anywhere. Some convenient services available to Blue Cross members are:

- Check coverage, claims and balances
- Find doctors and estimate costs
- Interact with health and wellness information
- Save with exclusive member discounts

Behavioral health services

- Available for emotional or mental distress, including depression, and drug or alcohol abuse
- Specialized case managers evaluate your needs to arrange the right services
- Case managers work with you and your doctor to get you the care you need
- There is **no cost** for the evaluation



Get in touch!

Thank you for considering Blue Cross Medicare Advantage solutions.

If you have additional questions, don't hesitate to reach out to me.

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