

Spring  
2016



# For Your Benefit

State of Michigan Retirees



A variety of timely information related to your health care benefits and needs

## You Are Here

### Plotting your health journey

When it comes to our health, most of us know what we want to accomplish — to lose weight, quit smoking or to fight stress off however we can. We envision the destination, but not necessarily the journey that's involved in reaching our healthy place. Part of charting that journey means identifying where you are on that road. As your partners in health, our commitment to you involves providing as many helpful tools as possible, to keep or get you on track.

The new, WebMD®-powered Blue Cross® Health & Wellness health assessment gives you a global snapshot of your health using an easy-to-read, visual approach. It only takes about 10 minutes to do, and it uses your answers to questions about your diet, exercise, sleep, medical history and lifestyle to better evaluate your health.

**Before you start** your health assessment, gather as much of this information as you can:

- Blood pressure
- Total cholesterol
- High-density lipoprotein, HDL, cholesterol
- Low-density lipoprotein, LDL, cholesterol
- Triglycerides
- Blood sugar
- Height, weight and waist measurements
- Recent health screenings

If you don't have this information, you can still take your health assessment. But having this information will provide you with more in-depth results.



**Taking the health assessment** is easy.

1. Go to **bcbsm.com**.
2. Log in as a member. If you are a first-time user, you must register for **bcbsm.com**.
3. Click on the *Health & Wellness* tab to enter the Blue Cross Health & Wellness site.
4. Click *Take Your Health Assessment*. *Note: The first time you enter the Blue Cross Health & Wellness site to use WebMD tools, you'll need to register.*

**Get your results**, then take advantage of Blue Cross Health & Wellness online resources to help you with whatever is on your plan. From exercise and diet trackers to Digital Health Assistant<sup>SM</sup> programs, it all starts here.



# Vision coverage questions?

*Make sure you know where to call.*

When it comes to your vision benefits, Blue Cross and VSP Vision Care work together to coordinate your coverage. Each organization has different responsibilities in managing your vision plan. You can save an unnecessary phone call by knowing which one to call — and it depends on the type of help you need.



**Blue Cross** keeps the membership records up to date for State of Michigan employees, retirees and their eligible dependents. Blue

Cross also sends the ID cards to you, your spouse and eligible dependents. To get a replacement card for you or anyone in your family, call the Blue Cross State of Michigan Customer Service Center at 1-800-843-4876.

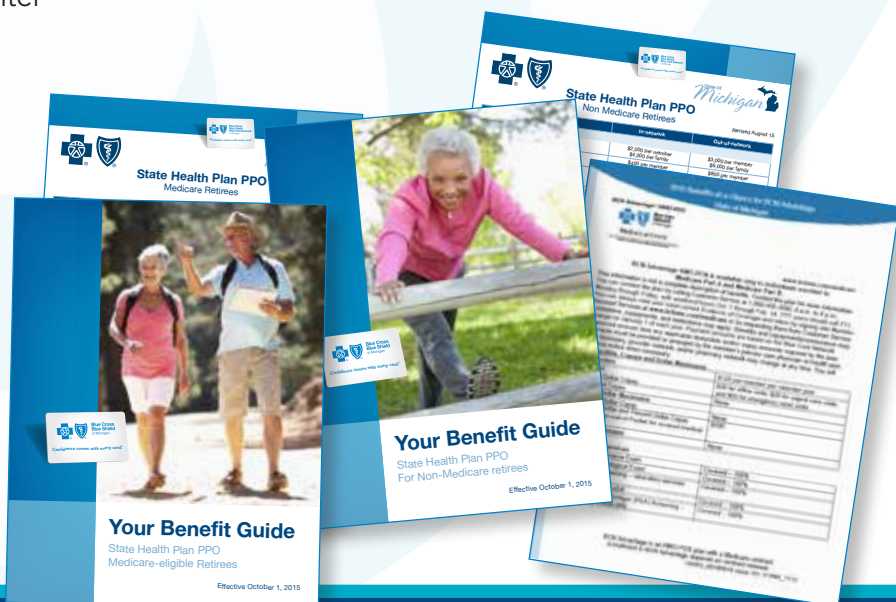


**VSP** is responsible for processing claims from providers and members. To get answers to questions or concerns about your benefits, or to find a participating provider, call VSP Customer Service at 1-855-356-4362.



If you're looking for **general information** on your benefits, save yourself a phone call

and go to [bcbsm.com/som](http://bcbsm.com/som). Your vision benefit book and summary are there.



# Coordination of benefits

## *Another way to keep your out-of-pocket costs low*

Do you have more than one health insurance plan?  
If you do, make sure you let us know.

We use a process called Coordination of Benefits to help manage your coverage if you have more than one plan. It's how the State Health Plan and your other insurance carriers work together to make sure you get the maximum benefits available for all of your plans.

Coordination of Benefits can reduce or even eliminate your out-of-pocket expenses, and ensures that the combined payments for all your plans won't exceed the approved cost for your services.

When we receive a claim for a member who has more than one health insurance plan, part of the processing involves figuring out who should pay first. If the State Health Plan is the primary coverage, we pay the full benefits under the plan. If the State Health Plan is the secondary coverage, we pay towards the balance of the total allowable amount, which is determined by all of the group plans involved. There's a method to the order in which plans pay these types of claims, and it's typically based on the coverage circumstances or family status. More about how the process works can be found in your benefit guide on [bcbsm.com/som](http://bcbsm.com/som).

## How it works (in a nutshell)

### Example: You get a health service, like a consultation or lab work.

The SHP and your other insurance carriers work together to determine two things:

- The amount the plans will collectively pay for that health service
- Which plan pays first (primary) and last (secondary).

Your primary coverage pays for the health service first, covering you under the full benefits of its plan.

Your secondary coverage pays towards what's left of the balance, except your copay or deductible.



Occasionally, we may send you a letter asking you to update your coordination of benefits information. Besides completing the form that accompanies that letter, you can also go to [bcbsm.com/cob](http://bcbsm.com/cob) and submit your updates online.



# For Your Benefit

State of Michigan Employees

MC L04A — Newsletter return only  
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600 E. Lafayette Blvd.  
Detroit, Michigan 48226-2998



## How to reach us

For benefit information or claim inquiries, call or write the BCBSM Customer Service Center.

## To call

1-800-843-4876

Our customer service representatives are available from 7 a.m. to 7 p.m.

Monday through Friday, excluding holidays.

## To write

Please send all correspondence to:  
State of Michigan Customer Service Center  
Blue Cross Blue Shield of Michigan  
232 S. Capitol Avenue L04A  
Lansing, MI 48933-1504

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