

2026 Benefits Guide









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Benefits Enrollment Checklist

- Review this Benefits Guide to learn what's changing for 2026.
- □ Complete a **Health insurance enrollment and change** form for the plan in which you are enrolling and review the dependent eligibility criteria, if relevant. To add a designated eligible individual to the health plan, complete the designated eligible individual enrollment form. Gather the supporting documentation you'll need to submit with it, as noted on the form.
- Complete and submit <u>enrollment forms</u>—along with any required supporting documentation—to the Human Resources Service Center by mail, fax, email or in person. The HR Service Center hours are Monday, Tuesday, Thursday and Friday from 8 a.m. to 5 p.m. and Wednesday from 9 a.m. to 5 p.m.
 - Qualifying life event: within 31 days of the qualifying life event
 - Open Enrollment: by Friday, Nov. 14, 2025

Contact Human Resources to update your address and life insurance beneficiaries, if applicable. For additional information, contact the Human Resources Service Center.

Open Enrollment is Oct. 27-Nov. 14, 2025

Open Enrollment is your once-a-year opportunity to make changes to your benefits. Outside of experiencing a qualifying life event, it's the only time you can add or drop coverage for yourself or a dependent.

If you don't enroll:

- You and your covered dependents will have the same medical, dental and vision benefits you had in 2025.
- If you waived coverage for a spouse or dependent in 2025, that person will not have coverage in 2026.

Your elections take effect Jan. 1, 2026.



WMU Retiree Health Plan Overview

When you elect the Blue Cross Blue Shield of Michigan (BCBSM) Community Blue PPO plan, you'll automatically be enrolled in the dental and vision plans. This plan includes prescription drug coverage and preventive care at no additional cost to you. It uses a specific network of providers and facilities to offer the highest-quality care at the lowest rates.

WMU retiree health plan and Medicare

Retirees and spouses who are eligible for Medicare and enrolled in the WMU retiree health plan must carry Medicare Parts A and B; the WMU retiree health plan is secondary coverage.

- in-network or use an out-of-network provider or facility. You don't need a referral to see a specialist.
- You'll pay more out of pocket if you use an out-of-network provider, and some services may not be covered.
- Includes 24/7/365 virtual care through Virtual Care by Teladoc Health (formerly Blue Cross Online Visits).

- Sindecuse Health Center is in-network. Deductibles, coinsurance and copays apply.
- WMU Unified Clinics provide services to you and your family. Plan coverage and costs vary by service.
- Nationwide coverage through BCBS PPO networks.



Community Blue PPO

The PPO offers set copays for some services, like doctor's visits and prescriptions. For other services, such as diagnostic tests and hospital stays, you must first meet your annual deductible. Then the plan will pay 90% of expenses, and you'll pay 10% coinsurance—up to an annual cap.

To locate a provider, visit bcbsm.com and select Find a Doctor. For your plan, select PPO Plans.

Learn more about the Community Blue PPO plan.

Don't want to leave home for care?

You don't have to. The Community Blue PPO plan offers virtual medical and mental health visits to you and your covered dependents through Virtual Care by Teladoc Health (formerly Blue Cross Online Visits). See a certified health professional 24/7/365—wherever you are—using your smartphone, tablet or computer. If you need medication, the doctor can send a prescription directly to your pharmacy. You'll pay a \$25 copay.

You can get help for conditions including cough, sinus infection, sore throat, bronchitis, fever, diarrhea, pink eye, cold, flu, headache, weight concerns, smoking cessation, depression, anxiety, grief and insomnia.

To get started, visit <u>bcbsm.com/find-care/virtual-care</u>, add the app to your smartphone or tablet, or call (844) 606-1608.



What you pay for medical care

To understand the basics, start with this overview.

	Community Blue PPO		
	In-Network	Out-of-Network	
Deductible	\$1,000 individual \$2,000 family	\$2,000 individual \$4,000 family	
Coinsurance	10% after deductible (50% for select services)	30% after deductible (50% for select services)	
Out-of-Pocket Maximum	\$2,000 individual \$4,000 family	\$4,000 individual \$8,000 family	

	Community Blue PPO	
	(In-Network)	
Preventive Care	\$0	
Primary Care Provider	\$25 copay	
Blue Cross Virtual Care	\$25 copay	
Specialist	\$40 copay	
Chiropractor	\$0, no deductible/coinsurance (12 visits per calendar year)	
Urgent Care	\$40 copay	
Emergency Room	\$150 copay (waived if admitted to the hospital)	
Hospital Services	10% coinsurance after deductible	
Diagnostic Testing (X-ray, labs, etc.)	10% coinsurance after deductible	
Advanced Imaging* (MRI, CT or PET scan, etc.)	10% coinsurance after deductible	
Outpatient Physical Therapy, Speech Therapy, Occupational Therapy (for rehab)	10% coinsurance after deductible (combined 60-visit maximum per member per calendar year)	
Outpatient Mental Health Care	10% coinsurance after deductible (\$25 copay for Blue Cross Online Visits)	

^{*} Prior authorization required

For coverage details, review the Community Blue PPO plan Benefits at a Glance on the HR website at <u>wmich.edu/hr</u>. Choose your **Employee Group**, select **Benefit Details**, then select **Health Care Benefits**.

Prescription Drugs

Prescription drug coverage is included with your medical plan. What you pay depends on the medication type, fill quantity and where you fill the prescription. In addition to your plan's retail and mail-order pharmacy options, you can also fill your prescriptions at the Sindecuse pharmacy.

What you pay

Community Blue PPO

(In-network pharmacy and Sindecuse pharmacy)

	30-Day Retail	90-Day Mail Order	90-Day Sindecuse	90-Day Retail
Tier 1 (generic)	\$10 copay*	\$20 copay*	\$22.50 copay	\$25 copay*
Tier 2 (preferred brand)	\$40 copay	\$80 copay	\$90 copay	\$100 copay
Tier 3 (non-preferred brand)	\$80 copay	\$160 copay	\$180 copay	\$200 copay
Tier 4 (preferred specialty)**	15% coinsurance, up to a maximum of \$150			
Tier 5 (non-preferred specialty)**	25% coinsurance, up to a maximum of \$300			

 $^{^{\}ast}$ If the price of the drug is less than the copay, you'll pay the lower amount.

^{**} Specialty drugs are limited to a 15- or 30-day supply. Learn more about special coverage and mail order through AllianceRx Walgreens Prime delivery.



Refill maintenance meds by mail and pay less

Save time—and money—when you fill a 90-day prescription using OptumRx mail-order pharmacy. Depending on the medication, you could pay less than you would if you filled the same prescription at a retail pharmacy. To get started, visit bcbsm.com.

PillarRx copay assistance program

If you are on the WMU health plan and you or a covered family member takes a specialty or high-cost prescription drug, the PillarRx copay assistance program through BCBSM is designed to save you money without changing the drug prescribed. This program will help you locate and take advantage of manufacturer copay assistance programs that significantly lower out-of-pocket costs for certain expensive medications. If you currently take one or more medications included in the PillarRx Drug List, you will receive introductory information in the mail and then a phone call from PillarRx to enroll you, explain how the program works and explain what to expect at the pharmacy. Once enrolled, PillarRx sends all the information needed for your discount to your pharmacy.

Special circumstances for some drugs

To ensure you're receiving the most appropriate and cost-effective therapy, certain prescription drugs require **prior authorization** or step therapy before they're covered. Step therapy involves trying less expensive options before the brand-name drug will be covered. View the step therapy overview and drug list.

AllianceRx

Some specialty drugs must use our exclusive pharmacy network administered by AllianceRx. Specialty drugs are prescription medications that require special handling, administration or monitoring. BCBSM offers mail-order service, retail specialty network pharmacies and support programs through AllianceRx Walgreens Prime, an independent company that provides specialty pharmacy services for BCBSM members. For the most up-to-date list, please see the Specialty Drug Program Rx Benefit Member Guide on bcbsm.com or call the customer service phone number on the back of your health plan member ID card.



Dental Plan

Dental coverage is included when you're enrolled in the Community Blue PPO medical plan. The Blue Dental PPO plan offers both in- and out-of-network coverage, but you'll always pay less when you use an in-network dentist.

Tip: Have your Blue Cross member ID card handy when you make your appointment. Use your nine-digit enrollee ID on the front of your card if you need to verify coverage.

To find a PPO network dentist in your area or to confirm whether your regular dentist is in-network, use the online Find a Dentist Tool.

What you pay for care

	Individual	Family
Deductible	\$30	\$60
Class I—Preventive* Oral exams, cleanings, X-rays	\$0, no deductible	
Class II—Basic* Fillings, extractions	10% coinsurance after deductible	
Class III—Major* Crowns, bridges, dentures	50% coinsurance after deductible	
Class IV—Orthodontia** Braces, appliances	40% coinsurance, no deductible	

^{* \$2,500} annual benefit maximum per member

For details, including what you'll pay for out-of-network dental care, review Benefits at a Glance on the HR website at wmich.edu/hr. Choose your Employee Group, select Benefit Details, then select Health Care Benefits. Also, you or your provider can call the number on your ID card, (888) 826-8152, from 8 a.m. to 6 p.m., Monday through Friday.

^{** \$2,500} lifetime benefit maximum per member



Vision Plan

Vision coverage is included when you're enrolled in the Community Blue PPO medical plan. As a member of the vision plan, you receive a 20% discount on services through the Vision Service Plan (VSP) network.

What you pay for care

Eye exam	\$10 copay Once every 12 months	
Prescription glasses (lenses and/or frames) or contact lenses	No copay; up to \$500 allowance every 24 months	

If you go out-of-network, you will be responsible for the difference between benefit maximum and the provider's charge.

When you see a VSP provider for an eye exam, you'll pay only a \$10 copay. You can get an eye exam once every 12 months. If you need glasses, you have a \$500 allowance for prescription lenses and frames and/or contact lenses with no copay. You can use this benefit once every 24 months. Other limitations and exclusions may apply. To choose a VSP provider, visit vsp.com.

For details, review Benefits at a Glance on the HR website at wmich.edu/hr. Choose your Employee Group, select Benefit Details, then select Health Care Benefits.

Manage your account and submit claim reimbursements online

For personalized information about your VSP vision plan and to ensure you pick an in-network doctor, create an account at vsp.com.

When you visit an in-network provider, no claim forms are needed. If you go out-of-network, you can submit a claim for reimbursement online from your VSP member account at vsp.com or by contacting VSP member services at (800) 877-7195 and requesting a claim/reimbursement form.



Benefits That Support Your Evolving Needs

No matter what life throws at you, your WMU benefits are designed to keep you and your family healthy and to sustain you when you're not. Take a look at the programs and incentives that support your physical, financial and emotional health, including fully covered preventive care (annual checkups, immunizations, tests and screenings) and dental cleanings.

Virtual health care programs through Teladoc Health

WMU offers several voluntary programs through BCBSM and powered by Teladoc Health. These programs are offered at no additional cost to you if you are enrolled in the WMU health plan and help you improve your health on your terms.

The programs include:

- Diabetes prevention: A team of expert coaches to help you reduce your risk of type 2 diabetes.
- Diabetes management: Personalized support to help you manage diabetes, including a connected blood glucose meter, unlimited strips and lancets, and real-time support for out-ofrange readings.
- Hypertension management: Take control of your heart health and make managing your blood pressure easier with a connected blood pressure monitor and one-on-one support to help you meet your nutrition and activity goals.
- Weight management: Reach your goals with an interactive weight management program, including an app to log food and set goals, a smart scale that syncs to the app so that you can measure progress and access to one-on-one coaching from a team of expert coaches.

Hinge Health

If you are living with joint or muscle pain, Hinge Health can help you with a plan to overcome pain, recover from an injury, prepare for surgery and more. By connecting with a Hinge Health coach, you'll receive:

- Unlimited access to personalized exercises and stretches developed by a physical therapist
- Convenient exercise sessions you can do anytime, anywhere with the Hinge Health app
- Dedicated one-on-one support from a physical therapist and qualified health coach

This program is available at no additional cost to you and your eligible family members if you are enrolled in the WMU health plan.

Get started by visiting **hingehealth.com** or downloading the Hinge Health app. Click on Enroll now and search for Western Michigan University to get started.



Health Plan Monthly Rates

Retiree

	Medicare Eligible	Non-Medicare Eligible
Retiree only	\$183.19	\$178.87
Retiree with one Medicare- eligible dependent	\$1,099.13	\$1,094.81
Retiree with one non-Medicare- eligible dependent	\$1,077.53	\$1,430.93
Retiree with two Medicare- eligible dependents	\$2,015.06	\$2,010.74
Retiree with two or more non-Medicare-eligible dependents	\$2,329.58	\$1,967.54
Retiree with one Medicare- and one non-Medicare-eligible dependent	\$1,993.46	\$2,346.86

Surviving Spouse

	Medicare Eligible	Non-Medicare Eligible
Surviving spouse only	\$551.75	\$538.30
Surviving spouse with one Medicare-eligible dependent	\$1,347.24	\$1,355.52
Surviving spouse with one non- Medicare-eligible dependent	\$1,355.52	\$1,603.41



WESTERN MICHIGAN UNIVERSITY

Human Resources

The HR Service Center hours are Monday, Tuesday, Thursday and Friday, 8 a.m. to 5 p.m. and Wednesday, 9 a.m. to 5 p.m.

(269) 387-3620

(269) 387-3441 (fax)

Email: hr-hris@wmich.edu

Website: wmich.edu/hr

Mailing address:

1903 W. Michigan Ave. Kalamazoo, MI 49008-5217

Location:

1270 Seibert Administration Building

Contacts

Blue Cross Blue Shield of Michigan

Medical plan

(877) 671-2583

Website: bcbsm.com

Blue Cross Blue Shield of Michigan

Dental plan

(877) 671-2583

Website: bcbsm.com

Blue Cross Blue Shield of Michigan Virtual Care by Teladoc Health, formerly **Blue Cross Online Visits**

PPO medical plan members only

(844) 606-1608

Website: bcbsm.com/find-care/virtual-care/

Hinge Health

Exercise therapy and physical therapy services to help with musculoskeletal (MSK) conditions

(855) 902-2777

Website: hingehealth.com Email: help@hingehealth.com

OptumRx

Mail-order prescription drugs

(855) 811-2223

Website: bcbsm.com

Sindecuse Health Center

Medical, pharmacy, sports medicine, physical therapy, massage therapy, nutrition counseling

(269) 387-3287

Website: wmich.edu/healthcenter

Teladoc Health

Diabetes prevention, diabetes management, hypertension management and weight management programs.

(800) 835-2362

Website: TeladocHealth.com/Smile

TIAA

Retirement savings, tax-deferred savings

(800) 842-2776

Website: tiaa.org/wmich

Contacts are continued on the next page →



Vision Service Plan (VSP)

Vision plan for PPO medical plan members only (800) 877-7195

Website: vsp.com

West Hills Athletic Club

(269) 387-0410

Website: westhillsathletic.com

Location:

2001 South 11th St.

Kalamazoo, MI 49009-5448

WMU Student Recreation Center

University Recreation

(269) 387-4732

Website: wmich.edu/rec

WMU Unified Clinics

College of Health and Human Services **Specialty Clinics**

(269) 387-7000

Website: wmich.edu/unifiedclinics

Location:

1000 Oakland Drive

Kalamazoo, MI 49008-5361

There's an App for That

Download these mobile apps now, so you can access your benefits on your mobile device—wherever you are, whenever you need to.



Blue Cross Blue Shield of Michigan

App Store Google Play



OptumRx

App Store Google Play



VSP

App Store Google Play



Hinge Health

App Store Google Play



Teladoc Health

App Store Google Play

Notices

You can review the following notices at wmich.edu/hr/benefits-notices:

- COBRA Continuation of Coverage
- Health Insurance Portability and Accountability Act of 1996 (HIPAA) Notification of Privacy Practice
- Michelle's Law
- Newborns' and Mothers' Health Protection Act
- New Health Insurance Marketplace Coverage Options and Your Health Coverage
- No Surprises Act
- Notice of Patient Protection
- Notice of Special Enrollment Rights

- Notice Regarding Wellness Program
- Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)
- Protections From Disclosure of Medical Information
- Summary of Benefits and Coverage for Employee Assistance Program
- Summary of Benefits and Coverage for Medical and Prescription Drug
- Women's Health and Cancer Rights Act (WHCRA) of 1998

This guide is intended to be a summary of benefits offered and does not include complete coverage and policy details. In case of a discrepancy between the guide and the actual plan documents and policy statements, the actual plan documents and complete policy will prevail. For more information on what each benefit covers, visit wmich.edu/hr, select your employee group and then select benefit details to see the individual benefit summaries, contracts or policies.



October 2025