

# For Better Health

Spring 2026



**“For Better Health” is the member newsletter for McLaren Medicare members, collectively referred to as “members.” It is published twice per year by McLaren Health Plan, Inc. who shall be referred to as “MHP” throughout this newsletter.**

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## Member Services

833-358-2404 (TTY: 711)

Monday through Friday  
8 a.m. to 8 p.m. April 1-Sept.30

Seven days a week  
8 a.m. to 8 p.m. Oct. 1-March 31, except for  
Thanksgiving Day and Christmas Day

We want to answer your questions and help you get the care you deserve. Please call Member Services if you have questions about the content of this newsletter, need a printed copy of anything on our website or need verbal help with the provider directory. We have free interpretation and translation services available. Call 711 to access the TTY line if you are deaf, hard of hearing or have speech problems. Michigan Relay will assist you. This service is available 24 hours a day.

## Pharmacy Help Desk

844-336-2678

24 hours a day, seven days a week

Call if you have questions about your pharmacy benefits.

## Online

[McLarenHealthPlan.org/McLarenMedicare](https://www.McLarenHealthPlan.org/McLarenMedicare)

Our website contains useful member information, such as our Privacy Notice; provider directories; Rights and Responsibilities statement; healthy reminders; services covered by McLaren Medicare; what to do when you need a medication; information about our quality programs; our Clinical Practice Guidelines, clinical criteria guidelines, advanced directive information, and much more. Call Member Services if you want printed copies of anything on our website.

## Mail

**McLaren Medicare**

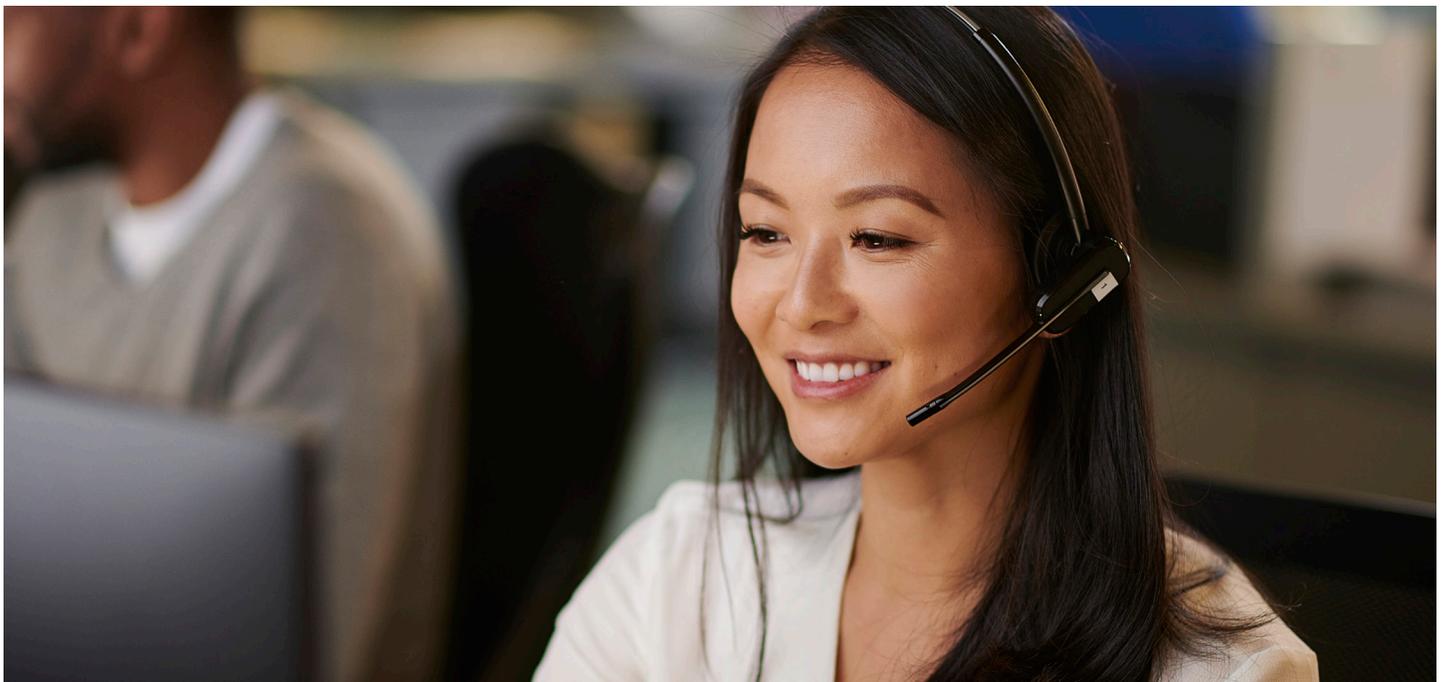
**P.O. Box 710**

**Flint, MI 48501-9900**

## E-Mail

Contact us at:

[medicarememberservices@mclaren.org](mailto:medicarememberservices@mclaren.org)



# Welcome Spring!

Spring is upon us once again – a season of fresh starts! As the weather warms up and the days stretch a little longer, there is a natural urge to open the windows, clear out the clutter, and start anew. At McLaren Medicare, we believe your health deserves that same refreshing energy. Spring is a great time to refocus on your health and well-being. Think of it like “spring cleaning” for your mind and body.

In tandem with your spring refresh, we are focusing on the quality of your care and helping you reach your health and wellness goals in 2026.

## Quality Care: Your Roadmap to Longevity

When we talk about “quality care,” we aren’t just talking about numbers on a chart. We’re talking about ensuring you have more energy for your grandkids, more mobility for your morning walks, and coverage that gives you more peace of mind.

Quality starts with prevention. If you haven’t already, now is the perfect time to schedule your Annual Wellness Visit. Unlike a standard physical, this visit is a dedicated time for you and your doctor to build a personalized prevention plan. It’s 100% covered by McLaren Medicare, and it’s the single best tool for catching small issues before they become big. Learn more about the Annual Wellness Visit and other important health services in this edition of For Better Health.



## Our Commitment to You

At McLaren Medicare, you are more than a policy number; you are our neighbor. Our commitment to quality means we are constantly working to improve our Medicare Star Ratings and service standards so that you receive the care you deserve.

Let’s make this season about more than just cleaning out closets. Let’s make it about renewing your health and living your best life possible!

Happy Spring!

# Helpful Programs and Services from McLaren Medicare

Health is wealth, as they say. McLaren Medicare takes your health seriously. We want to ensure you have the help and the information you need to make healthy lifestyle changes, if needed.

McLaren Medicare offers enhanced disease management programs, a fitness membership allowance and nutritional/dietary education, along with the following:

**Smoking and Tobacco Use Cessation** - If you use tobacco, McLaren Medicare covers two cessation attempts per year (each attempt may include a maximum of four (4) intermediate or intensive sessions, with the member getting up to eight (8) sessions per year.) There is no coinsurance, copayment, or deductible for the Medicare-covered smoking and tobacco use cessation preventive benefits.

## **Medicare Diabetes Prevention Program (MDPP)**

MDPP services are covered for eligible Medicare beneficiaries under all Medicare health plans. MDPP is a structured health behavior change intervention that provides practical training in long-term dietary change, increased physical activity, and problem-solving strategies for overcoming challenges to sustaining weight loss and a healthy lifestyle. There is no coinsurance, copayment, or deductible for the MDPP benefit.

**Health & Wellness** - McLaren Medicare offers health and wellness resources on our website. You'll find Information on maintaining a healthy weight, eating healthy, managing stress and more. Go to [www.McLarenHealthPlan.org](http://www.McLarenHealthPlan.org), click on Health & Wellness and check out the resources available to you.



# Register Now!

## McLaren Medicare Member Rewards

We all know there are many regular tests, immunizations and procedures you should get to maintain good health. Did you know, as a McLaren Medicare member, you can receive up to \$100<sup>^</sup> in annual rewards\* for completing certain eligible services? It's all part of the McLaren Medicare Member Rewards program!

### How Does It Work?

Enrolling is easy, and it doesn't cost you anything. Just register for our rewards program by completing the online form at [McLarenHealthPlan.org/McLarenMedicareRewards](https://McLarenHealthPlan.org/McLarenMedicareRewards) and schedule your appointment(s) for your eligible services.

Don't wait! Schedule your appointments now. Services must be completed by Dec. 31 and we must receive a claim from your provider. Call Member Services at 833-358-2404 (TTY: 711) if you have any questions or need help registering.

### Eligible Activities

**Mammogram** - women up to age 75 should have a breast screening test (mammogram) every one to two years depending on your personal risk factors. If your mammogram is completed by Dec. 31, 2026, you will receive a \$20 gift card.

**Diabetic Vision & Kidney Screening\*\*** - If you have diabetes, it's important to see your doctor annually to get your eyes and kidneys checked. Talk to your doctor about creating or reviewing your diabetes management plan. Your plan will be based on your lifestyle, preferences, health goals and other health conditions you may have. Your doctor may prescribe medications. You may have a diabetes educator help you understand your diabetes and provide support as you make lifestyle changes to manage your diabetes. You can also receive up to \$30 in gift cards for completing recommended screening services (Diabetic eye exam - \$10 gift card,\*\* Diabetic HbA1c Testing - \$10 gift card,\*\* Diabetic Kidney Disease monitoring - \$10 gift card.\*\*)



**Annual wellness visit (AWV)** - You should see your doctor every year, even if you are not sick. If you've had Medicare Part B (medical insurance) for longer than 12 months, you get a yearly wellness visit to develop or update your personalized plan to help prevent disease or disability, based on your current health and risk factors. This yearly visit isn't a physical; it's your opportunity to ask any questions you might have. If your annual well visit is completed by Dec. 31, 2026, you will receive a \$20 gift card.

**Flu shot** - September and October are the best months for older adults to get the flu vaccine. The flu is easily passed from person to person when someone coughs, talks or sneezes. Older adults with underlying conditions, including heart disease, diabetes and lung disease, are at highest risk for developing life-threatening complications from the flu. If you receive a flu shot by Dec. 31, 2026, you will get a \$10 gift card.

**Colon cancer screening** - men and women age 45 to 75 should be screened for colorectal cancer using fecal occult blood testing, sigmoidoscopy or colonoscopy. If a qualifying colon cancer screening service is completed by Dec. 31, 2026, you will receive a \$20 gift card.

\* Not all members qualify for all services. Dates of service must be in the current plan year.

\*\* Only available to qualifying members with diabetes.

## Frequently Asked Questions

### *How long does it take to get my reward?*

After you complete an eligible service, McLaren Medicare will need to receive a claim (bill) from your provider. Once the claim is received, gift cards will be mailed to your address on file within two to six weeks.

### *How can I report and confirm the completion of eligible activities?*

Self-reporting is not required. McLaren Medicare will review claims to determine which registered members should receive rewards.

### *How does McLaren Medicare know what gift card I want?*

When you register for the McLaren Medicare Member Reward program, you will make a selection at that time. You may choose between Walmart or Walgreens.

### *Can I get more than one reward for each service?*

No, you may only earn one reward per service each year.

### **Terms and conditions**

To qualify for rewards, you must be a McLaren Medicare member and registered in the Medicare Rewards program. Not all members will be eligible for all services. Depending on eligibility, members may earn up to \$100 in rewards in the form of gift cards. You may receive rewards for each eligible service separately. You do not have to complete all activities before receiving rewards. Rewards will only be issued after receipt of a claim from your provider. One reward per service per year. McLaren Medicare is not responsible for lost or stolen gift cards.

Call Member Services at 833-358-2404 (TTY: 711) if you have any questions. We are available April 1-Sept. 30: Monday through Friday, 8 a.m. to 8 p.m. Oct. 1-March 31: Seven days a week, 8 a.m. to 8 p.m. (except Thanksgiving and Christmas days)



# How We Stay in Touch

You may get a welcome phone call from us when you join McLaren Medicare. It's our way of making sure you know how to get the care and services you need. Our Outreach team may call or send you emails throughout the year to remind you about preventive services you need or to share health and wellness tips with you. Your nurse may contact you to complete an assessment, after a hospital visit, or to talk about your health. You can opt out of any of these reminders at any time – just let us know when we contact you that you prefer not to receive any more communication from us.

# Year-Round Tips for Managing Your Diabetes

Diabetes is a serious chronic condition that affects many older adults, but you can still lead a full, healthy life by taking the right steps. Below are some daily tips and recommended services and exams to keep you healthy.

## Daily

Living with diabetes involves taking care of yourself each day. Your daily self-care plan to control your blood glucose may include:

- 1. Blood sugar (glucose) tests.** Your health care provider will show you how often you should check your blood sugar and how often to get an A1C test to monitor your blood glucose control over time.
- 2. Healthy food choices.** Since the food you eat affects your blood sugar levels, it is important to learn what's best for you to eat, how much, and when.
- 3. Physical activity.** Walking and other forms of daily exercise can improve sugar levels in older people with diabetes. Set a goal to be active most days of the week. Contact your doctor to discuss a fitness plan that is right for you.
- 4. Taking your medicines.** You should take your medications as prescribed, even when you feel good. Tell your doctor if you have any side effects or cannot afford your medications.
- 5. Foot checks.** Diabetes can cause poor blood circulation by narrowing and hardening your blood vessels. This can make it hard for your feet to fight infections and heal. Check your feet daily for cuts, blisters, cracks or dry skin, and numbness. If you have limited mobility, you can use a mirror to check the bottoms of your feet or ask someone to help you. Call your doctor right away if your feet are numb or painful, or if you have any sores or cuts that don't heal within a few days.



## Quarterly to Biannually

Here are some recommendations for managing your diabetes throughout the year:

- 1. Doctor visit every 3-6 months.** Your provider will perform a physical exam and discuss important aspects of managing your diabetes, such as checking your blood sugar, lifestyle habits, prescription adjustments, and more. They may also send you for lab work to check your cholesterol, kidney function, and A1C. This is also a good time to mention your mental health and any questions or concerns you have.
- 2. A1C Test.** You should have your A1C checked at least twice a year. This blood test shows how often your blood sugar level has been within your target range over previous months. Depending on the results, your doctor may make adjustments to your care plan to help you better manage your diabetes.

- 3. Dental exam.** People with diabetes can be more prone to dental complications and gum (periodontal) disease if their blood sugar levels are not within a healthy range. Everyone should visit a dentist for an exam every six months, but it's even more important to stick to that schedule if you have diabetes. Make sure to tell your dentist about your diabetes, and inform them of any changes to your health.

## Annually

Untreated diabetes can cause serious health problems over time, such as damage to the eyes, kidneys, nerves, feet, and heart. Here are some important tests and services to help you stay on track with managing diabetes (these are covered by McLaren Medicare):

- 1. Kidney check.** Because diabetes can affect your kidneys, getting recommended urine and blood tests will show if your kidneys are healthy.
- 2. Dilated eye exam.** Finding and treating eye problems early can help keep your eyes healthy. Have a retinal eye exam annually to help detect any problems early. This is a covered benefit for members with diabetes.
- 3. Cholesterol.** At least once a year, get a blood test to check your cholesterol and triglyceride levels. High levels may increase your risk for heart problems.
- 4. Flu shot.** People with diabetes are at increased risk of flu complications, even if well managed. The flu vaccine can reduce your risk of getting the flu and reduces risk of hospitalization if you do get sick. Talk to your doctor about additional vaccines that you may need, such as pneumonia, shingles and more.

If you have diabetes, you are eligible to participate in a voluntary free program and receive personal contacts from your McLaren Health Plan nurse, educational materials and newsletters, and more to help you manage your diabetes. Please call Member Services at 833-358-2404 (TTY: 711) to join the diabetes outreach program.

# How's Your Experience? We Want to Know



We want you to get the care you need. Does it take you a long time to get appointments? When you need to see your primary care provider for an annual exam or if you need to see a specialist, do you get an appointment within six months? Call us if it is taking you longer.

We want to ensure you are completely satisfied with your care providers and McLaren Medicare services. We aim to provide you with great customer service when you call us for help! Let us know how we are doing. Our goal is to be the best possible health plan for our members. Call Member Services at 833-358-2404 (TTY:711). Our hours of operation are April 1-Sept. 30: Monday-Friday, 8 a.m. to 8 p.m., Oct. 1-March 31: Seven days a week, 8 a.m. to 8 p.m. (except Thanksgiving and Christmas days).



## Culturally and Linguistically Appropriate Services

McLaren Medicare is committed to providing you with inclusive and equitable health care. As part of this commitment, McLaren Medicare will begin asking you about your race, ethnicity, preferred language, gender, sexual orientation, and pronouns. Having this information will help us make sure you have access to the highest quality of care based on your unique needs.

We want to be clear that providing this information is entirely voluntary, and you have the option to decline to answer any or all questions. We respect and honor the privacy and confidentiality of our patients, and we will never share this information with anyone outside of our health care team without your explicit consent.

Thank you for your understanding and support as we work to provide the best possible care for you and your loved ones.

## Your Member Portal: McLaren CONNECT

Did you know that McLaren Medicare has a member portal called McLaren CONNECT? The portal helps you stay 'connected' and informed about your health care. You can:

- Review enrollment history
- Access claims history
- Request a PCP change
- View and print ID cards
- View and print EOBs
- Look up Rx claims history
- Check prescription costs, drug interactions, and generic equivalents
- Send Member Services inquiries via secure email
- Search for network providers
- View plan summaries and more!

All new members need to create an account. You will need your full name, date of birth, McLaren Medicare ID number and email address.

### Here's how to create your new account:

1. Go to [McLarenHealthPlan.org/McLarenCONNECT](https://McLarenHealthPlan.org/McLarenCONNECT).
2. Click on Create Member Account and you will be guided through the process.

McLaren CONNECT is available 24/7 for self-service options. There's also an app so you can manage your health care on the go! You can download McLaren CONNECT to your mobile device from the Apple App Store or Google Play.

**Security Statement:** You must always sign in with your user name and password to access features of the portal and app. Without this information, no one can access your app. It is safe!

Questions? Please call McLaren Medicare Member Services at 833-358-2404 (TTY 711) April 1-Sept. 30, Monday through Friday, 8 a.m. to 8 p.m.; Oct. 1-March 31, seven days a week, 8 a.m. to 8 p.m. (except Thanksgiving and Christmas days).

# Special Supplemental Benefits

Do you have a chronic condition? If so, you may be eligible to receive added benefits. Supplemental Benefits for the Chronically Ill (SSBCI)\* are available to McLaren Medicare Inspire Plus members with certain chronic conditions who meet qualifying criteria.

## Qualifying chronic conditions may include:

- Chronic alcohol and drug dependence
- Autoimmune disorders
- Cancer
- Cardiovascular disorders
- Chronic heart failure
- Dementia
- Diabetes
- End-stage liver disease
- Chronic kidney disease
- Stroke

Refer to your Evidence of Coverage for additional qualifying conditions.

As a member of McLaren Medicare, you should have already received your Benefits Mastercard® Prepaid Card in the mail. Once your SSBCI benefit has been activated, \$50 will automatically be loaded onto your Benefits Mastercard® Prepaid Card each month for purchasing qualifying healthy foods and produce at participating retail locations. You may also use your card to buy online through NationsBenefits with free home delivery.

Please call Member Services to learn more about this benefit and to see if you qualify. You may also refer to your current Evidence of Coverage online at [McLarenHealthPlan.org/McLarenMedicare](https://McLarenHealthPlan.org/McLarenMedicare) for specific details about SSBCI benefits.

\*The benefits mentioned are a part of a special supplemental program for the chronically ill. Eligibility for this benefit cannot be guaranteed based solely on your condition. All applicable eligibility requirements must be met before the benefit is provided. Qualifying conditions may include but are not limited to the following: heart failure, diabetes, cancer, chronic lung disorders like COPD, and stroke. Contact us to confirm your eligibility for these benefits.



## Medicare Annual Wellness Visit: FAQs

Taking a proactive approach to your health starts with your Medicare Annual Wellness Visit (AWV). McLaren Medicare covers the AWV at no cost to you. This visit is designed to help you connect with your doctor (primary care physician or PCP) and stay on top of your health.

### Q: Is the Medicare Annual Wellness Visit the same as an annual physical?

A: No. The AWV is separate from your yearly physical. Both appointments are important, but they have different purposes.

### Q: What is the Medicare Annual Wellness Visit?

A: During your AWV, you and your doctor will:

- Review your medical history and current health conditions
- Discuss preventive screenings and necessary tests
- Discuss immunizations to keep you protected
- Discuss diet, exercise, and smoking cessation, if applicable

It's important to discuss your health with your doctor and set goals for the next year.

### Q: How do you prepare for your AWV?

A: Come prepared with a list of questions, medications you are currently taking, and any medical records or information related to your health status. You are encouraged to ask your doctor any questions or discuss any concerns you have regarding your health.

### Q: Does the AWV cost me anything?

A: No, McLaren Medicare covers the AWV at no cost to you. However, please keep in mind that any additional services you receive, such as lab tests or screenings, may have additional costs that you will be responsible for, depending on the plan you are enrolled in. Call Member Services if you have questions about your plan benefits.

Start the year off on a path to good health. Contact your doctor's office to schedule your Medicare Annual Wellness Visit appointment today!

## Are You at Risk for Kidney Disease?



Did you know that 33% of adults are at risk for chronic kidney disease (CKD)? Kidney disease often progresses without symptoms until it's advanced, which makes it crucial to be aware of risk factors and take preventive steps.

Factors such as high blood pressure, heart disease, obesity, family history, and age increase the risk of kidney disease. The National Kidney Foundation of Michigan's "Are You the 33%?" campaign is here to help you assess and take charge of your kidney health.

**Know Your Risk:** Take the one-minute Kidney Risk Quiz at [kidney.org/quiz](https://kidney.org/quiz) to see if you may be at risk for CKD.

**Ask for the Tests:** Talk with your doctor about getting tested for kidney disease. Two simple tests can detect early signs:

- **eGFR (blood test):** measures how well your kidneys filter waste.
- **uACR (urine test):** checks for protein — an early sign of kidney damage.

Awareness and early action are key to managing and preventing kidney disease. Take a moment for your health today!

# Make Your Wishes Known: Advance Directives

McLaren Health Plan supports your right to file an Advance Directive according to Michigan law. This document is a written statement of your wishes for medical care. It explains, in advance, what treatments you want or don't want if you have a serious medical condition that prevents you from telling your provider how you want to be treated. Your health care representative also may make medical decisions on your behalf to carry out your wishes if you become incapacitated. Our plan cannot refuse care or otherwise discriminate against a member based on their decision to have or not have an Advance Directive.

The State of Michigan only recognizes an advance directive called a durable power of attorney for health care. To create one, you will need to choose a patient advocate.

This person carries out your wishes and makes decisions for you when you cannot. It is important to choose a person who you know and trust to be your advocate. Make sure you talk with the person to let them know what you want.

Talk to your family and primary care physician about your choices. File a copy of your advance directive with your other important papers. Give a copy to the person you designate as your patient advocate. Ask to have a copy placed in your medical record.

## **Where to get Durable Power of Attorney for Health Care Forms:**

***State Bar of Michigan - A Guide to Medical and Legal Decisions: Planning and Your Peace of Mind***

<https://www.legislature.mi.gov/Publications/PeaceofMind.pdf>

***CaringInfo: Free templates for Michigan***

<https://www.caringinfo.org/planning/advance-directives/by-state/michigan/>

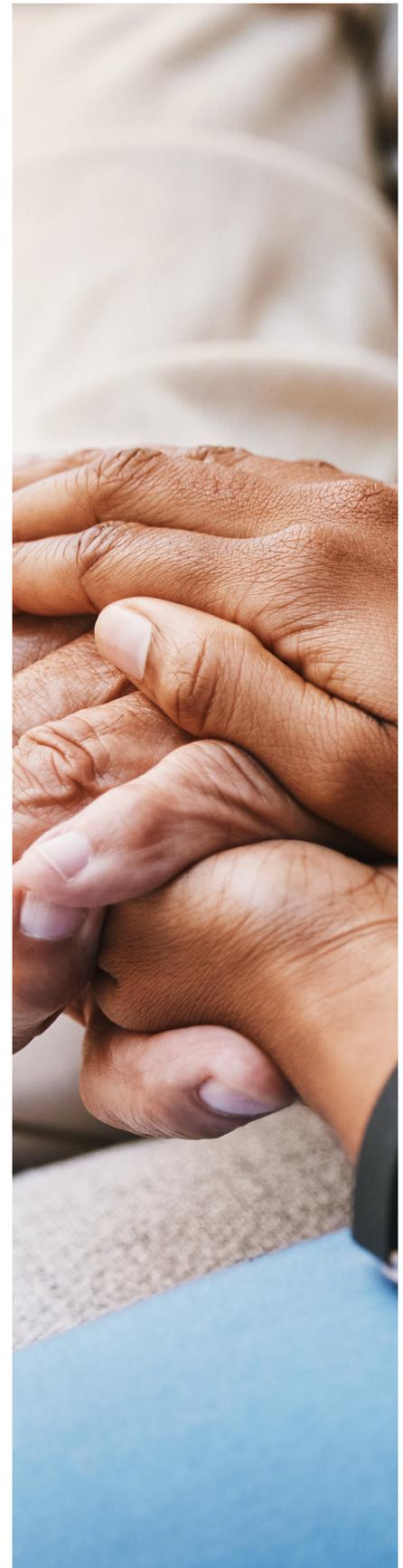
***Michigan Power of Attorney Forms (free and downloadable)***

<https://powerofattorney.com/michigan/>

For complaints about how your provider follows your wishes, write or call:  
Michigan Department of Licensing and Regulatory Affairs Ottawa Building  
611 W. Ottawa, P.O. Box 30004, Lansing, MI 48909  
517-241-0199 or [bplhelp@michigan.gov](mailto:bplhelp@michigan.gov)

The BPL Complaint & Allegation website is: <https://www.michigan.gov/lara/bureau-list/bpl/complaint> (Click on "File Complaint Now")

For complaints about how your health plan follows your wishes, write or call:  
Michigan Department of Insurance and Financial Services  
Toll free at 877-999-6442 or [www.michigan.gov/difs](http://www.michigan.gov/difs)



# HELP PREVENT FRAUD, WASTE AND ABUSE

McLaren Medicare works hard to prevent fraud, waste and abuse. We follow state and federal laws about fraud, waste and abuse. Examples of fraud, waste and abuse by a member include:

- Changing a prescription form
- Changing medical records
- Changing referral forms
- Letting someone else use his or her McLaren Medicare ID card to get health care benefits
- Resale of prescriptions

Examples of fraud, waste and abuse by a doctor include:

- Falsifying his or her credentials
- Billing for care not given
- Billing more than once for the same service
- Performing services that are not needed
- Not ordering services that are medically necessary
- Prescribing medicine that is not needed

Call our Fraud and Abuse line at 866-866-2135 if you think a doctor, other health care provider or member might be committing fraud, waste or abuse. You can email our Compliance department at [MHPcompliance@McLaren.org](mailto:MHPcompliance@McLaren.org).

You also can write to us at:

**McLaren Medicare**  
**Attn: Compliance**  
**P.O. Box 1511**  
**Flint, MI 48501-1511**



**Contact the State of Michigan if you think a member has committed fraud, waste or abuse. Here's how:**

- Fill out a fraud referral form at [mdhhs.michigan.gov/Fraud/](https://mdhhs.michigan.gov/Fraud/) OR
- Call the MDHHS office in the county where you think the fraud, waste or abuse took place OR
- Call the MDHHS office in the county where the member lives

Contact the Michigan Department of Health and Human Services Office of Inspector General if you think a doctor or other health care provider has committed fraud, waste or abuse. Here's how:

- Call them at 855-MI-FRAUD (855-643-7283) OR
- Write to them at Office of Inspector General, P.O. Box 30062, Lansing, MI 48909

## Help Protect Yourself From Fraud

You might be the target of a fraud scheme if you receive medical supplies that you or your doctor did not order.

### Take action to protect your benefits:

- Refuse medical supplies you did not order
- Return unordered medical supplies that are shipped to your home
- Report companies that send you these items

Identity theft can lead to higher health care costs and personal financial loss. Don't let anybody steal your identity.

Current fraud schemes to be on the lookout for include:

- People using your health plan number for reimbursement of services you never received
- People calling you to ask for your health plan numbers
- People trying to bribe you to use a doctor you don't know to get services you may not need

You are one of the first lines of defense against fraud. Do your part and report services or items that you have been billed for but did not receive.

- Review your plan Explanations of Benefits (EOBs) and bills from physicians
- Make sure you received the services or items billed
- Check the number of services billed
- Ensure the same service has not been billed more than once

## Do Your Part!

- Never give out your Social Security number, health plan numbers or banking information to someone you do not know
- Carefully review your Explanation of Benefits (EOBs) to ensure the information is correct
- Know that free services DO NOT require you to give your McLaren Medicare ID number to anyone

**Share this information with your friends. Please call Member Services at 833-358-2404 (TTY: 711) to discuss benefit, coverage or claims payment concerns.**

## YOUR PRIVATE DATA AND HOW WE PROTECT IT

McLaren Medicare has policies that cover who can see and use private data about you. This includes your race or ethnicity and what language you speak.

### This is how we protect your data:

- We keep your paper documents in locked file cabinets.
- We keep electronic data on physically secure media.
- We keep electronic data in files with passwords.
- Only our staff who need to know this information will have it.

### This is how we use your data:

- To help with health care disparities.
- To create programs to improve your health.
- To create outreach materials.
- To tell your provider about your language, cultural, or other needs that have to do with your care.
- To tell your provider to help improve health outcomes.

### We will not use your data:

- For underwriting, setting rates or benefit decisions.
- To give to those who shouldn't have it.





MEDICARE

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Flint, MI 48501-9900

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