



Group Forms/Brochures/Flyers Fax on Demand Form

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Fax your request to 248-455-3651

Please print or type

Allow five days for delivery.

Company name	Ordered by (name)	Group number	Date
Address (city, state, Zip) Cannot be shipped to a P.O. Box			Telephone

FORM NAME	DESCRIPTION	FORM NO.	QUANTITY ORDERED	QTY. MAILED
Enrollment forms	Enrollment Change of Status (ECOS) (150 in a packet)	CN3599		
Group publications	BlueHealthConnection disease management programs	CB9046		
	FYI — How to Report Contract Changes	CF6257		
	Healthcaring booklet (overview of quality programs)	CB0206		
	Blue Elect Self Referral option for employers	CB9064		
	Blue Care Network's deductible plans	CF0067		
Member publications — general	A great value in health care coverage (overview)	CF0185		
	Ask: Informed patients are safer patients	DF1403		
	Comprehensive coverage (overview of BCN plans)	CF0100		
	BCN overview — Blue Elect Self-Referral Option	CB9054		
	Care Management Programs	DB9383		
	Coverage goes with you (travel benefits)	CF2448		
	Formulary Quick Guide for Members	CF0155		
	Here's to your health with BCN	CB5705		
	Mail order pharmacy brochure and envelope	CK191		
	Naturally Blue: An alternative for better health	CB6269		
	Quit the Nic	CB3446		
	Specialty Drug Guide	CF0716		
	Top 10 Facts on Generic Drugs	CF3370		
	Top 10 tips for avoiding the emergency room	CF5308		
	Weigh to go	CB9092		
Wellness resources	CF3371			
Your connection to care (primary care physician brochure)	CB3111			
Member FYIs (single-sheet descriptions for members)	Behavioral Health Coverage	CF9001		
	Generic Drugs Save You Money	CF9001		
	Laboratory Services	CF9002		
	Understanding Emergency Procedures	CF5693		
	Understanding the Referral Process	CF5694		
	What do I do if I receive a Coordination of Benefits Questionnaire?	CF7288		
	Woman's Choice program	CB10255		
	Your BCN Drug Benefits	CF9004		
	Your Primary Care Physician	CF5695		
Group FYI (single-sheet description)	Understanding your Blue Care Network invoice	CF5644		
Group publications — Healthy Blue Living SM	Guide to CD materials	CB0962		
	Healthy Blue Living employer's important to-do list	CF9460		
	Healthy Blue Living Questions and Answers	CB9446		
	We think it's too much	CB9441		
	YMCA: Partners for Good Health	CF1066		
	Your commitment to Healthy Blue Living	CF3847		

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FORM NAME	DESCRIPTION	FORM NO.	QUANTITY ORDERED	QTY. MAILED
Member publications — Healthy Blue Living SM	How to Access BCN's Health Risk Appraisal Online	CF9461		
	Healthy Blue Living brochure	CB9440		
	Healthy Blue Living important to-do list	CF1345		
	Healthy Blue Living member guide	CB9459		
Member Handbooks	BCN Member Handbook	CB3804		
	Blue Elect Self-Referral Option	CB9105		
	BCN 65	CB2497		
Provider directories	Greater Michigan	CF3851		
	Southeast	CB7883		

If you need a form that is not on this list, please call Field Services at 877-465-5120.

To order open enrollment or new hire kits, contact your sales representative or independent agent.

To mail this request, send to: Blue Care Network of Michigan, PO Box 5043, Southfield, MI 48086-5043