



2023 Plan Information

Your Guide to Priority Health
Medicare Advantage Plans





Honest insurance
for real people

\$0 drug deductibles
medical deductibles
PCP doctor visits
premium options

A Medicare plan for your health, your budget and your peace of mind

At Priority Health, we put your priorities first. That's why we offer a variety of Medicare plans with custom choices to meet your health needs and wants. Whether it's being protected when you travel, managing chronic conditions or maintaining your mental agility, our plans are just right for you.

With our Medicare plans, what you see is what you get: straightforward coverage on the things you actually need, with service the way it was meant to be. We make Medicare simple and easy, so you can rest assured that you made the right choice.

Priority Health is a Michigan-based company, so we understand what Michigan residents want out of their Medicare. With a network that includes all major hospital systems in the Lower Peninsula,¹ out-of-area coverage at in-network prices and tons of \$0 options, it's no wonder more individuals choose a Priority Health Medicare Advantage plan than any other in the state.²

The Priority Health Medicare network includes 9 out of 10 primary care providers in Michigan.³

Priority Health Medicare Advantage plans are the highest rated in the state—and among the highest rated in the nation.⁴

92% of our Medicare members stay with us, compared to the national average of 84%.⁵

Choose from plans with more benefits—for less.

Doctor visits,
hospital coverage
and prescription
drug coverage

\$0
medical
deductibles

and Part D prescription
drug deductibles (on
most plans).

\$0
virtual visits

for in-network primary
care, specialists and
behavioral health.

\$0
copays for 90-day
prescriptions

of many common generic drugs*.

Routine hearing
and vision
coverage

Over-the-counter
allowance

for common health and
wellness products
(on most plans).

Flip to the back of this booklet for a side-by-side comparison of our plan benefits and pricing by county.

**\$0 copay applies to tier 1 and tier 2 drugs via mail order with ESI and tier 1 drugs at a preferred retail pharmacy.*

**No referrals
needed to see
a specialist**

**SilverSneakers®
fitness
membership**

Home fitness kits and
access to online classes.

**\$0
dental services**

like exams, cleanings and
panoramic X-rays, with access
to the Delta Dental® network.⁶

**Support for your
mind and body**

with acupuncture and mental
wellbeing tools like BrainHQ
and myStrength.

**\$0
annual physical
exam**

You're free to talk without being
charged for an office visit.

**Priority Health
Travel Pass and
Assist America®
coverage**

Help keeping
track of doctor's
visit details,
notes and
conversations
with Abridge

Say what?

Hearing, vision and dental coverage are included in all plans.



Hearing

\$0 routine hearing exam and coverage for hearing aids through our partner TruHearing®. Each hearing aid purchase includes a 60-day trial period, a year of unlimited follow-up visits and 80 batteries.



Dental

\$0 preventive dental comes standard on all plans, plus comprehensive periodontal maintenance and panoramic X-rays at no additional cost. And you'll have access to the largest network of dentists in the country with Delta Dental®.



Vision

Vision coverage, including a no-cost routine eye exam and \$100-\$175 eyewear allowance (depending on the plan). Access to in-network providers through the EyeMed "Select" network or the option to go out of network and be reimbursed.

Optional enhanced dental and vision package

If you want more coverage than what comes standard, you can upgrade to our enhanced package that includes additional dental coverage **with \$2,500 to spend each calendar year, including coverage for dentures, and another \$150 per year toward your eyewear allowance.**

Plan	Premium	Vision	Dental
<p>PriorityMedicare KeySM (HMO-POS)</p> <p>PriorityMedicare VitalSM (PPO)</p>	\$29	<p>Eyewear: \$150 eyewear allowance per calendar year</p>	<p>Dental services: \$0 copay for anesthesia, one fluoride treatment and emergency treatment of dental pain.</p> <p>50% of the cost for oral surgery, crowns, inlays, onlays, root canals and relines and repairs to bridges.</p> <p>50% of the cost for implants and implant services per tooth.</p> <p>50% of the cost of dentures and denture relines and repairs.</p> <p>\$2,500 yearly limit per calendar year.</p>
<p>PriorityMedicare EdgeSM (PPO)</p> <p>PriorityMedicare CompassSM (PPO)</p> <p>PriorityMedicare ONESM (PPO)</p> <p>PriorityMedicare IdealSM (PPO)</p> <p>PriorityMedicare ValueSM (HMO-POS)</p>	\$38	<p>Eyewear: \$150 eyewear allowance per calendar year</p>	<p>Dental services: \$0 copay for fillings, crown repair, anesthesia, one fluoride treatment and emergency treatment of dental pain.</p> <p>50% of the cost for oral surgery, crowns, inlays, onlays, root canals and relines and repairs to bridges.</p> <p>50% of the cost for simple extractions (nonsurgical).</p> <p>50% of the cost for implants and implant services per tooth.</p> <p>50% of the cost of dentures and denture relines and repairs.</p> <p>\$2,500 yearly limit per calendar year.</p>

*See additional benefit details in the Evidence of Coverage document.

Get more of the benefits you need and the extras you want.

\$0 virtual care: See a doctor from anywhere

With \$0 in-network virtual care, seeing a provider is easier than ever. You can use a virtual visit to speak with your primary care provider, a specialist (like a dermatologist, for example) or a behavioral health provider (for services like counseling) without ever leaving home—and all for a \$0 copay. All you need is an internet connection and a computer, smartphone or tablet.

Real support from real people

Available on PriorityMedicare Edge, PriorityMedicare Compass, PriorityMedicare ONE and PriorityMedicare Ideal.

There's nothing quite like human connection. That's why many of our Medicare plans offer PriorityCare—real support from real people in the form of a Papa Pal. Papa connects real people to Medicare members who need companionship or assistance with transportation, household chores, technology and other everyday tasks.

Papa Pals can be used whenever you need them, up to 100 hours per year, either in-person or virtually; the amount varies depending on the plan.

PriorityCare also includes unlimited:

- Papa Care Concierge, a team of caring individuals trained to help you navigate your benefits, schedule doctor appointments, find providers and so much more.
- Caregiver support. Caregivers can contact trained care advocates for support and digital resources that help reduce stress and improve confidence in caring for loved ones.



“It really helps to have people to talk to every once in a while, especially when you live alone. I enjoy talking with someone younger who has different perspectives than mine.”

Priority Health
Medicare member

Over-the-counter allowance

Get an over-the-counter (OTC) allowance with many of our plans to purchase the health and wellness products you need to support your health. If your plan is eligible, you'll receive an OTC card loaded with a stipend to use on things like aspirin, cold medicine, compression socks and more. Your OTC card will come in the mail and will be automatically reloaded. There are several convenient ways to buy health items: shop in-store at Walmart, CVS, Kroger, Walgreens, Rite-Aid, Dollar General and Family Dollar; order online; or purchase by phone or mail order.

OTC Plus allowance


Available on PriorityMedicare Vital and PriorityMedicare ONE.


We know fresh and healthy food is important for a healthy you. That's why members with certain chronic conditions will be able to spend their OTC allowance in-store on healthy food and produce at the same locations they can purchase their OTC items from. Eligibility is based on your chronic condition (such as if you have diabetes, cardiovascular disorders and more) and the level of your need (for example, if you're at high risk of hospitalization and need intensive care coordination).


**To find out if you're eligible to receive healthy food and produce, contact our customer service team.*


Healthy from head to toe

Priority Health Medicare plans include benefits for your mind and body. Our plans have solutions for the whole you, from head to toes.

- 

Plans include Medicare-covered acupuncture for chronic lower back pain, plus six additional acupuncture sessions for any other diagnosis.
- 

With BrainHQ, you can access online exercises and games that improve memory, attention, brain speed and more.
- 

With \$0 behavioral health virtual visits, you can get the help and support you need from mental health professionals from the comfort and safety of your own home.
- 

Self-care and coping skills are critical to your mental health and overall wellbeing, which is why we partner with digital health specialist myStrength to offer ongoing free access to mental wellness resources.



"I learned about BrainHQ through Priority Health. All of the exercises are beautifully done. My favorite exercise is Hawkeye, which I feel has helped me become more observant."

**Priority Health
Medicare member**



Travel smarter

Hitting the road soon? Seeking warmer weather come winter? With the Priority Health Travel Pass, you can travel without worry, knowing you can see a doctor wherever you go while paying your regular in-network cost.

Priority Health Travel Pass benefits include:

- ✓ Pay in-network costs when you visit any Medicare-participating provider in the U.S. outside the Lower Peninsula of Michigan.⁷
- ✓ Access to our MultiPlan Medicare Advantage network to help find providers when seeking care outside of the Lower Peninsula of Michigan.
- ✓ Unlimited worldwide urgent and emergency services.
- ✓ Assist America® to provide support when you're more than 100 miles away from home or in a foreign country. Assist America can coordinate care during a medical travel emergency, find a doctor near you while you're traveling and even help locate lost luggage.



"I love that I'm covered no matter where I travel—and there's no hassle when I see a doctor out of state!"

More ways to stay healthy

We know that being healthy goes beyond just visiting the doctor when you don't feel well—it's about living healthy habits every day.



Medical care for people living with a serious illness.

We offer \$0 palliative care physician visits on all plans. If you're living with a long-term illness and want to talk to a provider about getting relief from the symptoms and physical and mental stress, visit a palliative care physician at no cost to you.



SilverSneakers fitness membership is included at no cost.

The SilverSneakers program[®] is included at no cost to you when you become a Priority Health Medicare Advantage plan member. You get to choose how you want to work out—from the comfort of home or at a fitness center.

Program benefits include:

- Membership at thousands of participating SilverSneakers fitness centers nationwide. Try a new gym as often as you like, and visit locations while you're traveling, too.
- Multiple at-home workout options, including members-only virtual exercise classes and online workshops, the SilverSneakers GO™ fitness app and the SilverSneakers home fitness kit.
- Tuition Rewards[®] through SilverSneakers, a program that lets you earn money toward college tuition for family members.



Get healthy meals delivered right to you.

Get the proper nutrition you need following an inpatient stay with fresh, ready-to-heat meals from Mom's Meals. All of our plans include 28 home-delivered meals following discharge from an inpatient hospital, psychiatric hospital or skilled nursing facility stay, delivered to your home at no additional cost up to four times per year.



Know the cost before you go to the doctor or pharmacy.

With Cost Estimator, you can take control of your budget. See costs for some medical services before you schedule a procedure, or medication costs and pharmacy options before you refill your next prescription. Once you become a Priority Health Medicare member, you can access the cost estimator through your online member account.



A little extra care goes a long way.

A little extra care can make all the difference. That's why every Priority Health Medicare plan includes a care management team of licensed nurses and social workers. They offer guidance and support by phone or in person for chronic conditions and more. There's no cost to you, and you can get started with just a phone call.



Keep close track of your health.

Included with your plan, the Abridge app creates a useful reference of your health for you, your caregivers and your care team. Use it to capture doctor visit details, conversations and care strategies between you and your doctor.



Take transportation out of the equation.

Available on PriorityMedicare ONE.

Getting to your appointments, doctor visits and procedures shouldn't be a barrier. SafeRide transportation services are included in your plan at no cost. Get up to 30 free one-way trips, within 30 miles per one-way trip, so you can focus on what's most important—your health.



Get the preventive care you need.

Priority Health Medicare covers many services at no cost to you, including preventive mammograms and colonoscopies, vaccines and more.

Plans include a truly \$0 annual physical exam—with no hidden fees for your office visit. You can talk with your physician to discuss any concerns you have and won't be charged for the office visit no matter what or how much is discussed.

In addition to \$0 preventive care, we offer members access to tools and services to make it easier to get healthy and stay healthy, including:

- A personalized online hub where members can get rewarded for completing health screenings, participate in health challenges, view instructional fitness videos and more
- An in-home health assessment provided by Signify Health® at no additional charge

Prescription drug coverage

Fill your prescriptions at any of the more than 65,000 pharmacies in our network, including big-name chains and small local pharmacies, mail-order, long-term care, Indian Health Service/Tribal/Urban Indian Health Program (I/T/U) and home-infusion pharmacies.

The drug tiers

Priority Health divides drugs into five tiers to make it easier for you and your doctor to understand the cost. Each tier has its own copay or coinsurance:

Tier 1 (preferred generic drug tier)

Tier 2 (generic drug tier)

Tier 3 (preferred brand drug tier)

Tier 4 (nonpreferred drug tier)

Tier 5 (specialty drug tier)

All of our plans have a \$0 drug deductible for tier 1 and tier 2 drugs, and most plans have a \$0 deductible for all drug tiers, keeping more money in your pocket.

The approved drug list

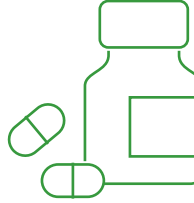
Not all drugs are covered by every Medicare plan. Remember to check our approved drug list, also called a formulary, to make sure your drugs are covered by Priority Health Medicare. The list shows both generic and brand-name drugs that we cover, including the more than 300 drugs in our low-cost preferred generic drug tier. You can view the approved drug list by going to prioritymedicare.com.

Yearly medication review

Our plans include a no-cost, face-to-face visit or phone appointment with a pharmacist who can help you understand your drugs and maximize results while controlling your out-of-pocket costs.

Preferred pharmacy⁹

With all of our plans you'll pay \$0 for a 90-day supply of tier 1 drugs when filled at preferred retail pharmacies including; Meijer, Walgreens, Kroger, Walmart and more.



Mail order

You'll pay \$0 for a 90-day supply of tier 1 and tier 2 drugs through mail order with Express Scripts (ESI) no matter what plan you choose. For other drugs, you can usually get up to a 90-day supply through ESI for the cost of two and a half copayments.



More affordable insulin and vaccines

All Priority Health Medicare plans now include improved insulin and vaccine coverage thanks to recent legislation changes for Medicare:

- You'll pay no more than \$35 for a 30-day supply of covered insulin products defined by Medicare.
- You'll pay \$0 for covered vaccines defined by Medicare.



Which Priority Health Medicare plan is right for you?


When did simple and easy get replaced with options that make your head spin?
At Priority Health, we believe you deserve Medicare that's simple to use, easy to trust and honestly priced.

With us, what you see is what you get.


2023


Priority Health Medicare Advantage benefit comparison

Summary of the most frequently used benefits in many of our plans. Complete benefit details are available in the Evidence of Coverage document.

 = Open network plan with the freedom to see any provider who accepts Medicare and pay in-network rates.

Not all available plans are shown here. See the Summary of Benefits for additional plans.

Benefit (In-network)	PriorityMedicare EdgeSM (PPO) <small>Available in select counties; see the listing in the premiums chart.</small>	PriorityMedicare CompassSM (PPO)  <small>Available in select counties; see the listing in the premiums chart.</small>	PriorityMedicare KeySM (HMO-POS)
Monthly premium	\$0	\$0	\$0
Medical deductible	\$0	\$0	\$0
Office visit: primary care	\$0 copay	\$0 copay	\$0 copay (regions 1, 2 and 5) \$10 copay (regions 3 and 4)
Office visit: specialist	\$45 copay	\$50 copay	\$45 copay
Outpatient diagnostic services (labs, X-rays, imaging)	\$0 copay for labs \$20 copay for X-rays \$270 copay for diagnostic radiology/imaging	\$0 copay for anticoagulant labs & \$20 copay for all other labs \$20 copay for X-rays \$275 copay for diagnostic radiology/imaging	\$0 copay for anticoagulant labs & \$10 copay for all other labs \$35 copay for X-rays \$160 copay for diagnostic radiology/imaging (regions 1, 2, 3 and 4) \$130 copay for diagnostic radiology/imaging (region 5)
Inpatient hospital coverage	\$350 copay per day, days 1-5	\$350 copay per day, days 1-5	\$325 copay per day, days 1-6
Outpatient hospital coverage (rural health clinic, ambulatory surgery center or outpatient hospital facility)	\$0-\$325 copay for each visit	\$0-\$325 copay for each visit	\$0-\$290 copay for each visit (regions 1, 2 & 5) \$10-\$290 copay for each visit (regions 3 & 4)
Outpatient hospital observation	\$110 copay for each in-network or out-of-network visit, including all services received	\$110 copay for each in-network or out-of-network visit, including all services received	\$110 copay for each in-network or out-of-network visit, including all services received
Unlimited U.S. and worldwide emergent/urgently needed services	\$110 copay/\$30 copay	\$110 copay/\$30 copay	\$110 copay/\$50 copay
Chiropractic (12 routine visits per year)	✓	✓	✓
Acupuncture (6 routine visits per year)	✓	✓	✓
Transportation	Not covered	Not covered	Not covered
Annual out-of-pocket maximum	\$5,300 combined in- and out-of-network	\$5,650 combined in- and out-of-network	\$5,000 (regions 1, 2 and 5) \$5,500 (regions 3 and 4)
Dental (by Delta Dental)	\$0 copay for two exams, two cleanings, one set of bitewing X-rays & one brush biopsy each year \$0 for all other X-rays, including panoramic, once every 2 years	\$0 copay for two exams, two cleanings, one set of bitewing X-rays & one brush biopsy each year \$0 for all other X-rays, including panoramic, once every 2 years	\$0 copay for two exams, two cleanings, one set of bitewing X-rays & one brush biopsy each year \$0 for all other X-rays, including panoramic, once every 2 years \$0 for fillings, crown repairs and simple extractions, up to \$1,500 per year
Routine vision (by EyeMed)	\$0 copay for one routine eye exam & one retinal imaging each year \$100 eyewear allowance each year	\$0 copay for one routine eye exam & one retinal imaging each year \$100 eyewear allowance each year	\$0 copay for one routine eye exam & one retinal imaging each year \$100 eyewear allowance each year
Routine hearing (by TruHearing)	\$0 copay for one routine hearing exam per year \$295, \$695, \$1,095 or \$1,495 copay, one per ear per year, for hearing aids	\$0 copay for one routine hearing exam per year \$295, \$695, \$1,095 or \$1,495 copay, one per ear per year, for hearing aids	\$0 copay for one routine hearing exam per year \$295, \$695, \$1,095 or \$1,495 copay, one per ear per year, for hearing aids
Over-the-counter (OTC) allowance	\$60 per quarter	\$35 per quarter	\$80 per quarter (regions 1 and 2)/\$55 per quarter (regions 3 and 4) \$75 per quarter (region 5)
OTC Plus allowance			
PriorityCare	\$0 for up to 72 hours of companion care per year plus unlimited Papa Care Concierge and caregiver support services	\$0 for up to 36 hours of companion care each year plus unlimited Papa Care Concierge and caregiver support services	Not covered
Prescription drug deductible	\$0 (all tiers)	\$0 (all tiers)	\$0 (all tiers)
Preferred retail pharmacy costs for 30-day supply Plus, pay no more than \$35 for insulin and \$0 for certain vaccines, as defined by Medicare.	Tier 1: \$2 (\$0 for 90-day) Tier 2: \$8 Tier 3: \$38 Tier 4: 40% coinsurance Tier 5: 33% coinsurance	Tier 1: \$4 (\$0 for 90-day) Tier 2: \$15 Tier 3: \$42 Tier 4: 45% coinsurance Tier 5: 33% coinsurance	Tier 1: \$4 (\$0 for 90-day) Tier 2: \$15 Tier 3: \$42 Tier 4: 45% coinsurance Tier 5: 33% coinsurance
\$0 for 90-day supply of mail-order drugs through Express Scripts (Tier 1 and tier 2)	✓	✓	✓

Benefit (In-network)	PriorityMedicare VitalSM (PPO) <small>Available in select counties; see the listing in the premiums chart.</small> 	PriorityMedicare ONE (HMO-POS) <small>Available in Kent, Macomb, Oakland, Ottawa and Wayne counties.</small>
Monthly premium	\$0	\$0
Medical deductible	\$0	\$0
Office visit: primary care	\$0 copay	\$0 copay
Office visit: specialist	\$50 copay	\$35 copay
Outpatient diagnostic services (labs, X-rays, imaging)	\$0 copay for labs \$40 copay for X-rays 20% coinsurance for diagnostic radiology/imaging	\$0 copay for labs \$20 copay for X-rays \$175 copay for diagnostic radiology/imaging
Inpatient hospital coverage	\$350 copay per day, days 1-5	\$285 copay per day, days 1-7
Outpatient hospital coverage (rural health clinic, ambulatory surgery center or outpatient hospital facility)	\$0-\$300 copay for each visit	\$0-\$285 copay for each visit
Outpatient hospital observation	\$110 copay for each in-network or out-of-network visit, including all services received	\$110 copay for each in-network or out-of-network visit, including all services received
Unlimited U.S. and worldwide emergent/urgently needed services	\$110 copay/\$60 copay	\$110 copay/\$35 copay
Chiropractic (12 routine visits per year)	✓	✓
Acupuncture (6 routine visits per year)	✓	✓
Transportation	Not covered	\$0 for up to 30 one-way trips (limit 30 miles per one-way trip)
Annual out-of-pocket maximum	\$4,900 combined in- and out-of-network	\$4,300
Dental (by Delta Dental)	\$0 copay for two exams, two cleanings, one set of bitewing X-rays & one brush biopsy each year \$0 for all other X-rays, including panoramic, once every 2 years \$0 for fillings, crown repairs and simple extractions up to \$1,500 per year	\$0 copay for two exams, two cleanings, one set of bitewing X-rays & one brush biopsy each year \$0 for all other X-rays, including panoramic, once every 2 years
Routine vision (by EyeMed)	\$0 copay for one routine eye exam & one retinal imaging each year \$125 eyewear allowance each year	\$0 copay for one routine eye exam & one retinal imaging each year \$175 eyewear allowance each year
Routine hearing (by TruHearing)	\$0 copay for one routine hearing exam per year \$0 copay for up to 2 TruHearing-branded "Advance" hearing aids, one per ear per year	\$0 copay for one routine hearing exam per year \$295, \$695, \$1,095 or \$1,495 copay, one per ear per year, for hearing aids
Over-the-counter (OTC) allowance		
OTC Plus allowance	\$20 per month that can be used toward over-the-counter items and, if eligible, healthy food and produce.	\$15 per month that can be used toward over-the-counter items and, if eligible, healthy food and produce
PriorityCare	Not covered	\$0 for up to 100 hours of companion care each year plus unlimited Papa Care Concierge and caregiver support services
Prescription drug deductible	\$350 (tiers 3-5)	\$0 (all tiers)
Preferred retail pharmacy costs for 30-day supply Plus, pay no more than \$35 for insulin and \$0 for certain vaccines, as defined by Medicare.	Tier 1: \$1 (\$0 for 90-day) Tier 2: \$10 Tier 3: \$42 Tier 4: 45% coinsurance Tier 5: 26% coinsurance	Tier 1: \$0 (\$0 for 90-day) Tier 2: \$10 Tier 3: \$42 Tier 4: 45% coinsurance Tier 5: 33% coinsurance
\$0 for 90-day supply of mail-order drugs through Express Scripts (Tier 1 and tier 2)	✓	✓

2023 monthly premiums

	PriorityMedicare EdgeSM (PPO)	PriorityMedicare CompassSM (PPO)	PriorityMedicare KeySM (HMO-POS)	PriorityMedicare VitalSM (PPO)
Region 1: Allegan, Barry, Kent, Lenawee, Ottawa	\$0	PriorityMedicare Compass is not available in these counties.	\$0	\$0
Region 2: Berrien, Calhoun, Cass, Ionia, Isabella, Kalamazoo, Mason, Midland, Missaukee, Montcalm, Muskegon, Newaygo, Oceana, Osceola, Otsego, St. Clair, Van Buren, Wexford	\$0		\$0	\$0
Region 3: Alcona, Antrim, Benzie, Charlevoix, Clare, Crawford, Grand Traverse, Hillsdale, Lake, Lapeer, Leelanau, Manistee, Mecosta, Monroe	PriorityMedicare Edge is not available in these counties.	\$0	\$0	PriorityMedicare Vital is not available in these counties.
Region 4: Alpena, Cheboygan, Eaton, Emmet, Gladwin, Gratiot, Iosco, Jackson, Kalkaska, Montmorency, Oscoda, Presque Isle, Roscommon, Sanilac, Shiawassee, St. Joseph		\$0	\$0	
Region 5: Arenac, Bay, Branch, Clinton, Genesee, Huron, Ingham, Livingston, Macomb, Oakland, Ogemaw, Saginaw, Tuscola, Washtenaw, Wayne	\$0	PriorityMedicare Compass is not available in these counties.	\$0	\$0

PriorityMedicare ONESM (HMO-POS)	
Available in the following counties: Kent, Macomb, Oakland, Ottawa and Wayne	\$0

One health system, one plan, one priority—you

Introducing PriorityMedicare ONE

This new, \$0 plan leverages the partnership between Priority Health and Beaumont Health Spectrum Health to bring you a more integrated experience. This plan has the right tools to help you keep living well while managing conditions. With **Priority**Medicare ONE, you'll get the care and coverage you need with premium perks you'll want. The ONE plan still allows you to see any provider in our Medicare network, including, but not limited to, Beaumont Health Spectrum Health providers.



Ready to enroll?

There are three requirements you must meet before you can enroll in a Priority Health Medicare Advantage plan.

- 1** | You must have both Medicare Parts A and B and continue to pay your Part B premium (unless it's paid by Medicaid or another third party).
- 2** | You must have a primary residence in our service area, which includes the 68 counties in Michigan's Lower Peninsula, listed on page 18.
- 3** | You must be enrolled in only one Medicare Advantage or Medigap plan at a time.

You may enroll or disenroll from a Medicare Advantage plan only during specific times of the year. If you have questions about when you can enroll, call the number on the next page.

How to enroll

Once you've chosen a plan,
there are three easy ways to enroll:



Phone

Call one of our Medicare experts toll-free at 888.481.2091 from 8 a.m.–8 p.m., seven days a week. TTY users should call 711.



Online

Go to prioritymedicare.com to complete and submit the form online.



Mail

Complete the form in this packet and mail it back to us in the envelope provided.



Understanding Medicare

Our award-winning, Michigan-based customer service team is here to help guide you through the Medicare process so instead of stressing over whether you made the right choice, you can focus on what matters most to you.

If you have questions about your Priority Health Medicare plan, call our experts to get your questions answered toll-free at 888.481.2091, from 8 a.m.–8 p.m., seven days a week. TTY users should call 711.

Personalized plan recommendation

Use our guided help tool when shopping and get a plan recommendation and estimated costs personalized to your needs. Visit prioritymedicare.com to get started.

Medicare Learning Center

This is your one-stop shop for a variety of tools to help you understand how Medicare works and find a plan that is right for you. Explore our Medicare Explained videos, take a short quiz and read informational articles about Medicare. Visit prioritymedicare.com to start exploring.

Medicare e-book

Go to priorityhealth.com/medicarebook and download your free Medicare e-book. It provides simple explanations about all parts of Medicare, along with tips about eligibility, enrollment and much more.



“I experienced a difficult billing situation a few weeks ago, and Katrina led me right to the solution—with expertise, empathy and follow-up.”

Priority Health
Medicare member



¹Excludes hospitals in Michigan's Upper Peninsula; based on American Hospital Directory April 2019 data and Priority Health provider contracts. Network varies by plan.

² According to May 2022 monthly enrollment reports from the Centers for Medicare and Medicaid Services.

³According to CMS National Downloadable File for Physicians, July 2021. Network varies by plan.

⁴ Priority Health Medicare Advantage HMO-POS plans are the highest-rated HMO-POS plans in Michigan and some of the highest-rated Medicare insurance plans in the nation, with a rating of 4.5 out of 5 in the NCQA Medicare Health Insurance Plan Ratings 2022.

⁵According to the 2020 Medicare Advantage Health and Drug Plan Disenrollment Reasons Survey Results issued by the Centers for Medicare and Medicaid Services (CMS), September 2021. Results for PPO plans.

⁶ In-network (participating) dentists are those in Michigan, Indiana and Ohio who are in Delta Dental's Medicare Advantage PPO or Medicare Advantage Premier network. All other dentists are considered out-of-network nonparticipating providers. If out-of-network nonparticipating dentists charge more for a service than what Delta Dental has agreed to pay, you will be responsible for the difference. All dentists must participate with Medicare; Delta Dental cannot pay for services received from a dentist who has opted out of Medicare. See the Delta Dental Certificate of Coverage for more details.

⁷ Out-of-network/noncontracted providers are under no obligation to treat Priority Health members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost sharing that applies to out-of-network services.

⁸ The SilverSneakers® program is provided by Tivity Health®. All programs and services may not be available in all areas.

⁹ Priority Health's pharmacy network includes limited lower-cost, preferred pharmacies in Michigan. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including whether there are any lower-cost preferred pharmacies in your area, please call 888.389.6648 (TTY users call 711), or consult the online pharmacy directory at prioritymedicare.com.

Priority Health has HMO-POS and PPO plans with a Medicare contract. Enrollment in Priority Health Medicare depends on contract renewal.

If you have questions regarding the utilization management process and decisions, please contact Priority Health. Know that utilization management decisions are based on appropriateness of care and service and that no financial incentives exist for issuing denials. Visit priorityhealth.com for more information.