

Your out-of-state travel benefit

Your out-of-state travel benefit lets you get care **anywhere in the U.S.** and pay the same as you would if you were in network in Michigan.

If you plan to travel or stay outside Michigan for an extended period of time, don't forget to update your address with Priority Health so we have the most current information to contact you. To learn more about your coverage and benefits, log in to your member account at priorityhealth.com.

Tips for using your travel benefit and FAQs

Q: I've called my outside-of-Michigan provider and they won't accept Priority Health insurance. What should I do?

A: Your Priority Health insurance can be used at any out-of-state facility in the U.S. However, if your provider does not wish to accept your insurance, and you continue to see them, they will bill you. If this happens, send us a member reimbursement form. If you choose to change your provider, you have options. Before traveling, look for a provider near your destination who accepts Priority Health insurance. Visit www.medicare.gov/physiciancompare to search for out-of-state providers.

Prior to traveling:

- **Pack your Priority Health member ID and keep it with you.** Your ID card serves as proof of your insurance through Priority Health and will help providers understand your plan's coverage. Your card also clarifies that you have coverage outside of Michigan.
- **Know before you go.** If you regularly visit a provider outside of Michigan, call and let them know that Priority Health covers services received outside of Michigan. This will help ensure your provider bills Priority Health for your services instead of you.

TIP 1

Q: I'm at the doctor's office and my out-of-state provider won't accept Priority Health insurance. What should I do?

A: Your Priority Health insurance can be used at any outside of Michigan facility in the U.S. However, your provider may not be familiar with Priority Health if they are located outside of Michigan. Encourage your doctor to call the number for providers on the back of your member ID card if they require confirmation that they can bill Priority Health for your visit. Your provider can also visit priorityhealth.com/provider to learn more about Priority Health and our Medicare out-of-state coverage benefit. If your provider does not wish to call to confirm or accept your insurance, consider seeing a new provider. Otherwise the provider can bill you and you can send us a member reimbursement form.

While traveling, during your medical service:

At your appointment, **show your provider your Priority Health member ID card and let them know Priority Health covers medical services received outside of Michigan.** Ask them to bill Priority Health for your service.

TIP 2

Q: When do I need a prior authorization for my care? What do I do and what does my doctor need to do?

A: Reference chapter four of your Evidence of Coverage (EOC) to find out what services your plan covers and what services require a prior authorization or contact Priority Health at the number on the back of your member ID card. Access your EOC in your member account at prioritymedicare.com. If the medical service you need requires prior authorization, your provider should reference our provider manual at priorityhealth.com/provider/manual and click on **authorizations**. There, your provider will find instructions for requesting an authorization and applicable forms.

What to expect after your out-of-state medical service visit:

If you spoke to your provider and they agreed to accept your Priority Health insurance, they should bill Priority Health for the services you received.

TIP 3

Q: My provider billed me instead of Priority Health. What should I do?

A: If your provider bills you, please send us a reimbursement form.

Need to access a reimbursement form?

Visit priorityhealth.com/medicare, click **Already a member**, select **Learn more** under the *Your relationship with Priority Health* section, then select **Find your form** under *File a claim*.

**Emergency and urgent care services are always covered under your Priority Health plan.*

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ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1.888.389.6648 (رقم هاتف الصم والبكم: 711).

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