



2025 Plan Information

Your guide to Priority Health
Medicare Advantage Plans





See why we're ranked **#1 in Customer Satisfaction** among Medicare Advantage Plans in Michigan.¹

Priority Health is a Michigan-based nonprofit that's been providing quality health care to Michigan communities for more than 30 years. We're not just your Medicare advisors, we're your friends and neighbors, too.

That's why we understand what Michigan residents want and need from a health plan. With a network that includes 9 out of 10 primary care providers in Michigan,² out-of-state coverage at in-network prices, tons of \$0 extras and award-winning, Michigan-based customer service, it's no wonder **96% of Medicare members stay with Priority Health compared to a national average of only 80%.⁶**



At Priority Health, your health is our priority.



Priority Health Medicare Advantage plans are the **highest rated** in the state—and some of the highest rated in the nation.³



The Priority Health Medicare network includes **all major hospital systems** in the Lower Peninsula.⁴



Priority Health was named to Newsweek's **America's Best Customer Service** 2024 list⁵—giving you Michigan-based customer service you can count on.



“How quickly and pleasantly my question of coverage of a particular procedure was answered. My wife and I always get any questions or concerns clearly answered! Great staff across the board, we always recommend Priority Health [Medicare] Advantage plans.”

– Priority Health Medicare member



A large, vibrant green wavy shape dominates the middle of the page. Its top and bottom edges are irregular and wavy. Along the top edge, there is a decorative border consisting of various geometric shapes and patterns in shades of green and dark teal. The text is centered within this green area in a white, bold, sans-serif font.

**Whatever your priority,
we've got you covered
with well-rounded plans
to meet your needs.**



*\$0 copay applies to tier 1 and tier 2 drugs via mail-order with ESI and tier 1 drugs at a preferred retail pharmacy
Not available on **Priority Medicare Vintage

We see you. Vision, hearing and dental coverage included in all plans.

Vision

All plans include a routine eye exam and a \$100–\$125 eyewear allowance, depending on your plan. You also have access to in-network providers through the EyeMed Select network, or the option to go out of network and be reimbursed.

Hearing

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

Dental

All plans include \$0 preventive dental coverage, 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®.⁷ You may also have coverage for fillings, crown repairs, simple extractions and root canals, depending on your plan.

Optional Enhanced Dental and Vision Package

If you want more coverage than comes standard with our plans, you can upgrade to our enhanced package that includes an additional \$2,500 to spend on dental services (including dentures) along with an additional \$150 per year to spend on eyewear.

| Plan | Premium | Vision | Dental <i>(per calendar year unless otherwise noted)</i> |
|--|----------------|---|---|
| Priority Medicare SM Value (HMO-POS) | \$37 per month | Eyewear: \$150 eyewear allowance, per calendar year | Dental services: \$0 copay for anesthesia, one fluoride treatment and emergency treatment of dental pain. 50% of the cost for oral surgery, crowns, inlays and onlays. 50% of the cost for implants and implant services per tooth every five years. 50% of the cost of dentures and bridges every five years, and bridge and denture relines and repairs every 36 months. \$4,500 yearly limit (\$2,500 enhanced maximum + \$2,000 standard dental maximum) for combined in- or out-of-network comprehensive dental. |

Optional Enhanced Dental and Vision Package (cont.)

| Plan | Premium | Vision | Dental <i>(per calendar year unless otherwise noted)</i> |
|---|----------------|---|--|
| Priority Medicare SM Vital (PPO) | \$39 per month | Eyewear: \$150 eyewear allowance, per calendar year | \$0 copay for anesthesia, one fluoride treatment and emergency treatment of dental pain. 50% of the cost for oral surgery, crowns, inlays, onlays and root canals. 50% of the cost for implants and implant services per tooth every five years. 50% of the cost of dentures every five years, and denture and bridge relines and repairs every 36 months. \$2,500 yearly limit. |
| Priority Medicare SM Key (HMO-POS) | | | |
| Priority Medicare SM Edge (PPO) | \$49 per month | Eyewear: \$150 eyewear allowance, per calendar year | \$0 copay for anesthesia, one fluoride treatment and emergency treatment of dental pain. \$0 for fillings, crown repairs and simple (non-surgical) extractions. 50% of the cost for oral surgery, crowns, inlays, onlays and root canals. 50% of the cost for implants and implant services per tooth every five years. 50% of the cost of dentures every five years, and denture and bridge relines and repairs every 36 months. \$2,500 yearly limit. |
| Priority Medicare SM Vintage (HMO-POS) | | | |



Just right plans that fit your **priorities**



\$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.



Over-the-counter allowance

Many of our plans come with an over-the-counter (OTC) allowance that can be used to purchase things like aspirin, cold medicine, compression socks and other health and wellness products.

You have flexibility to purchase items in-store at Meijer, Costco, Walgreens, Walmart and more, or order online, by phone or by downloading the app.

Available on Edge, Key, Value and Vital plans.



Healthy from head to toe

Priority Health Medicare plans have benefits for the whole you—from head to toe—including:

- **Acupuncture** for chronic lower back pain, plus six additional acupuncture sessions for any other diagnosis.
- **CogniFit®** that gives you access to online exercises and games to improve memory, attention, brain speed and more.*
- **\$0 behavioral health virtual visits**, providing mental health support from the comfort and safety of your own home.
- **Teladoc Health Mental Health** that gives you access to online mental health resources and tools.

CogniFit is not available on **Priority Medicare Vintage.*



Travel smarter

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

Priority Health Travel Pass benefits include:

- Paying in-network prices 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 you find a provider.
- 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 traveling and even help locate lost luggage.



More ways to get and stay **healthy**



Get fit for free

One Pass® makes fitness engaging for everyone, whether you choose to work out at home or at the gym. Available on Priority Health Medicare Advantage plans,* your free One Pass⁹ includes:

- Access to the largest nationwide network of gyms and fitness locations, including many YMCAs in Michigan, boutique fitness locations like Orangetheory® and more
- Live digital fitness classes and on-demand workouts
- CogniFit® online brain training to improve memory, attention and brain speed
- Groups, clubs and social events near you

Not available on **PriorityMedicare Vintage.*



Get preventive care with no hidden fees

Priority Health Medicare covers many preventive care services at no cost to you, including:

- A convenient in-home health assessment
- Mammograms
- Colonoscopies
- Vaccines and more

All plans also include a \$0 annual physical exam and annual wellness visit that can be scheduled at the same time. During this visit, you can discuss any concerns you have and won't be charged for an office visit no matter what or how much is discussed.



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 that offer guidance and support by phone or in person for chronic conditions and more, all at no cost to you.



Care you can count on

If you're living with a long-term illness and want to talk to a provider about getting relief from physical symptoms and mental stress, we offer \$0 palliative care physician visits on all plans.



Achieve your health goals

All Priority Health Medicare plans come with free access to our Wellbeing Hub, an online hub with personalized information and tools designed to help you set, track and achieve your specific health goals.



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 high-quality care you can afford, with benefits that are easy to understand and simple to use.

Find the plan that fits your priorities

PriorityMedicare Key (HMO-POS)

This plan is a popular choice for members who are in relatively good health but still want full coverage at an affordable price. It also has some of the most comprehensive dental coverage with 100% coverage up to \$1,500.

PriorityMedicare Vintage (HMO-POS)

This new streamlined plan saves you money by getting back to the basics. With a \$0 premium and no in-network medical or prescription deductible, it focuses on core medical benefits to keep your costs low. Available in certain regions only.

PriorityMedicare Value (HMO-POS)

This plan offers a low maximum out-of-pocket amount, a \$0 PCP copay, \$15 physical and occupational therapy copays, and our most robust dental coverage. It's perfect for members looking to balance perks and payment.

PriorityMedicare Edge (PPO)

An attractive all-around plan. It's well-suited for members who are in good health and are looking for as many \$0 services as possible to keep their costs low. Available in certain regions only.

PriorityMedicare Vital (PPO)

This plan puts cash back in your pocket with a Part B rebate of \$540 per year, an open network that allows you to pay in-network prices at any provider that accepts Medicare (deductible may apply) and our most comprehensive hearing coverage. Available in certain regions only.

Don't see what you're looking for?


We offer even more Medicare Advantage plans. The Summary of Benefits document shows additional options. You may also request a wellness plans information packet by calling the number in this booklet or use the form on our "Contact us" page at prioritymedicare.com.



You'll never need a referral to see a specialist, no matter which Priority Health Medicare Advantage plan you choose.

2025 Priority Health Medicare Advantage benefit comparison

Summary of the most frequently used benefits. Complete benefit details are available in the Evidence of Coverage document.
Refer to page 21 for regions.

| Benefit (In-network) | PriorityMedicare SM Key (HMO-POS) <i>Available in all Lower Peninsula counties</i> | PriorityMedicare SM Vintage (HMO-POS)  <i>Available in regions 1, 2 and 5</i> |
|---|--|--|
| Monthly premium | \$0 | \$0 |
| Part B Rebate | Not included | Not included |
| Medical Deductible | \$275 (in-network; regions 1, 2 and 5); \$250 (in-network; regions 3 and 4) | \$0 (in-network) |
| Annual out-of-pocket maximum | \$5,500 | \$5,300 |
| Office visit: primary care | \$0 copay | \$0 copay |
| Office visit: specialist | \$40 copay | \$35 copay |
| Outpatient diagnostic services (labs, X-rays, imaging) | \$0 copay for anticoagulant labs & \$10 copay for all other lab services \$35 copay for X-rays \$225 copay for diagnostic radiology/imaging (regions 1, 2 and 5) \$210 copay for diagnostic radiology/imaging (regions 3 and 4) | \$0 copay for anticoagulant labs & \$5 copay for all other lab services \$35 copay for X-rays \$180 copay for diagnostic radiology/imaging |
| Inpatient hospital coverage | \$350 copay per day, days 1-7 | \$320 copay per day, days 1-7 |
| Outpatient hospital coverage (rural health clinic, ambulatory surgery center or outpatient hospital facility) | \$0-\$350 copay for each visit | \$0-\$350 copay for each visit |
| Outpatient hospital observation | \$120 copay for each in-network or out-of-network visit, including all services received | \$120 copay for each in-network or out-of-network visit, including all services received |
| Physical, occupational or speech therapy | \$25 copay | \$25 copay |
| Chiropractic (12 routine visits per year, \$20 copay each) | ● | ● |
| Acupuncture (6 routine visits per year, \$20 copay each) | ● | ● |
| Unlimited U.S. & worldwide emergent/urgently needed services | \$120 copay/\$50 copay | \$120 copay/\$50 copay |
| Prescription drug deductible | \$0 (all tiers) | \$0 (all tiers) |
| Preferred retail pharmacy costs for 30-day retail supply | Tier 1: \$4 (\$0 for 90-day) Tier 2: \$15 Tier 3: 25% of total cost Tier 4: 45% of total cost Tier 5: 33% of total cost | Tier 1: \$4 (\$0 for 90-day) Tier 2: \$15 Tier 3: 25% of total cost Tier 4: 40% of total cost Tier 5: 33% of total cost |
| \$0 for 90-day supply of mail order drugs through Express Scripts (Tier 1 and tier 2) | ● | ● |
| Dental services (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 \$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, per ear per year, for hearing aids | \$0 copay for one routine hearing exam, per year \$295, \$695, \$1,095 or \$1,495 copay, per ear per year, for hearing aids |
| Over-the-counter (OTC) allowance | \$75 per quarter (regions 1 and 2), \$45 per quarter (regions 3 and 4), \$80 per quarter (region 5) | Not covered |


 = Includes transportation


2025 Priority Health Medicare Advantage benefit comparison

Summary of the most frequently used benefits. Complete benefit details are available in the Evidence of Coverage document. Refer to page 21 for regions.

| Benefit (In-network) | PriorityMedicare SM Value (HMO-POS) <i>Available in all Lower Peninsula counties</i> |
|---|---|
| Monthly premium | \$18–\$69 |
| Part B Rebate | Not included |
| Medical Deductible | \$0 (in-network) |
| Annual out-of-pocket maximum | \$4,900 |
| Office visit: primary care | \$0 copay |
| Office visit: specialist | \$35 copay |
| Outpatient diagnostic services (labs, X-rays, imaging) | \$0 copay for anticoagulant labs & \$10 copay for all other lab services \$35 copay for X-rays \$225 copay for diagnostic radiology/imaging |
| Inpatient hospital coverage | \$325 copay per day, days 1-7 |
| Outpatient hospital coverage (rural health clinic, ambulatory surgery center or outpatient hospital facility) | \$0-\$325 copay for each visit |
| Outpatient hospital observation | \$120 copay for each in-network or out-of-network visit, including all services received |
| Physical, occupational or speech therapy | \$15 copay |
| Chiropractic (12 routine visits per year, \$20 copay each) | — |
| Acupuncture (6 routine visits per year, \$20 copay each) | ● |
| Unlimited U.S. & worldwide emergent/urgently needed services | \$120 copay/\$55 copay |
| Prescription drug deductible | \$0 (all tiers) |
| Preferred retail pharmacy costs for 30-day retail supply | Tier 1: \$2 (\$0 for 90-day) Tier 2: \$10 Tier 3: \$25% of total cost Tier 4: 50% of total cost Tier 5: 33% of total cost |
| \$0 for 90-day supply of mail order drugs through Express Scripts (Tier 1 and tier 2) | ● |
| Dental services (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, 50% of the total cost for root canals, up to \$2,000 per year |
| Routine vision (by EyeMed) | \$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, per ear per year, for hearing aids |
| Over-the-counter (OTC) allowance | \$50 per quarter (region 1), \$25 per quarter (regions 2-5) |

★ = **Open network plan:** Offering you the freedom to see any provider who accepts Medicare and pay in-network rates, deductible may apply

| 2025 Priority Health Medicare Advantage benefit comparison Summary of the most frequently used benefits. Complete benefit details are available in the Evidence of Coverage document. Refer to page 21 for regions. | | |
|--|--|--|
| Benefit (In-network) | PriorityMedicare SM Edge (PPO) <i>Available in regions 1, 2 and 5</i> | PriorityMedicare SM Vital (PPO)  <i>Available in regions 1, 2 and 5</i> |
| Monthly premium | \$0 | \$0 |
| Part B Rebate | Not included | \$540 credit each year |
| Medical Deductible | \$195 (in-and-out of network) | \$375 (in-and-out of network) |
| Annual out-of-pocket maximum | \$5,700 combined in- and out-of-network | \$5,600 combined in- and out-of-network |
| Office visit: primary care | \$0 copay | \$0 copay |
| Office visit: specialist | \$35 copay | \$50 copay |
| Outpatient diagnostic services (labs, X-rays, imaging) | \$0 copay for lab services \$20 copay for X-rays \$270 copay for diagnostic radiology/imaging | \$0 copay for lab services \$40 copay for X-rays 20% of the total cost for diagnostic radiology/imaging |
| Inpatient hospital coverage | \$350 copay per day, days 1-7 | \$350 copay per day, days 1-5 |
| Outpatient hospital coverage (rural health clinic, ambulatory surgery center or outpatient hospital facility) | \$0-\$350 copay for each visit | \$0-\$350 copay for each visit |
| Outpatient hospital observation | \$120 copay for each in-network or out-of-network visit, including all services received | \$120 copay for each in-network or out-of-network visit, including all services received |
| Physical, occupational or speech therapy | \$40 copay | \$30 copay |
| Chiropractic (12 routine visits per year, \$20 copay each) | ● | ● |
| Acupuncture (6 routine visits per year, \$20 copay each) | ● | ● |
| Unlimited U.S. & worldwide emergent/urgently needed services | \$120 copay/\$30 copay | \$120 copay/\$55 copay |
| Prescription drug deductible | \$0 (all tiers) | \$350 (tiers 3-5) |
| Preferred retail pharmacy costs for 30-day retail supply | Tier 1: \$2 (\$0 for 90-day) Tier 2: \$8 Tier 3: 25% of total cost Tier 4: 40% of total cost Tier 5: 33% of total cost | Tier 1: \$1 (\$0 for 90-day) Tier 2: \$10 Tier 3: \$42 Tier 4: 45% of total cost Tier 5: 28% of total cost |
| \$0 for 90-day supply of mail order drugs through Express Scripts (Tier 1 and tier 2) | ● | ● |
| Dental services (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 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 \$125 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, per ear per year, for hearing aids | \$0 copay for one routine hearing exam, per year \$0 copay for up to two TruHearing-branded 'Advanced' hearing aids, one per ear, per two years |
| Over-the-counter (OTC) allowance | \$25 per month | \$25 per month |

 = **Open network plan:**
Offering you the freedom to see any provider who accepts Medicare and pay in-network rates, deductible may apply



**Prescription drug
coverage**

Fill your prescriptions at any of the more than **60,000 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.

Keep more money in your pocket

Priority Health divides drugs into five tiers to make it easier for you and your doctor to understand the cost of a prescription. Each tier typically has its own copay or coinsurance amount. However, all our plans have a \$0 drug deductible for tier 1 and tier 2 drugs, and all plans except **Priority** Medicare Vital have a \$0 deductible for all drug tiers.

Tier 1 (preferred generic drug tier)

Tier 2 (generic drug tier)

Tier 3 (preferred brand drug tier)

Tier 4 (non-preferred drug tier)

Tier 5 (specialty drug tier)

New for 2025: a cap on Part D prescription drug copays

Starting in 2025, you'll never pay more than \$2,000 for Part D prescription drugs. Your true out-of-pocket (TrOOP) costs will be capped at \$2,000 a year. After you've reached the cap, all drug copays are \$0.

Preferred pharmacy¹⁰

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, Walmart and more.

Mail order

Save time, money and hassle with mail-order prescription delivery. You'll pay \$0 for a 90-day supply of tier 1 and tier 2 drugs through Express Scripts (ESI) no matter which plan you choose. A 90-day supply on tier 2 and tier 3 drugs is also typically available for a reduced cost.

The approved drug list

Not all drugs are covered by every Medicare plan. Remember to check our approved drug list 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 preferred generic drug tier. You can view the approved drug list by going to ***prioritymedicare.com***.

More affordable insulin and vaccines

With a Priority Health Medicare plan, 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 as necessary by Medicare.

2025 monthly premiums

| Counties | PriorityMedicare SM Edge (PPO) | PriorityMedicare SM Vintage (HMO-POS) | PriorityMedicare SM Key (HMO-POS) | PriorityMedicare SM Vital (PPO) | PriorityMedicare SM Value (HMO-POS) |
|---|---|--|---|--|---|
| Region 1: Allegan, Barry, Kent, Lenawee, Ottawa | \$0 | \$0 | \$0 | \$0 | \$18 |
| 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 | \$0 | \$32 |
| 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. | PriorityMedicare Vintage is not available in these counties. | \$0 | PriorityMedicare Vital is not available in these counties. | \$69 |
| Region 4: Alpena, Cheboygan, Eaton, Emmet, Gladwin, Gratiot, Iosco, Jackson, Kalkaska, Montmorency, Oscoda, Presque Isle, Roscommon, Sanilac, Shiawassee, St. Joseph | | | \$0 | | \$44 |
| Region 5: Arenac, Bay, Branch, Clinton, Genesee, Huron, Ingham, Livingston, Macomb, Oakland, Ogemaw, Saginaw, Tuscola, Washtenaw, Wayne | \$0 | \$0 | \$0 | \$0 | \$32 |



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 16.
- 3** | You can 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 at the bottom of this 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 877.230.1562 (TTY 711) from 8 a.m. – 8 p.m. Eastern time, seven days a week.

ONLINE

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

MAIL

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



Understanding Medicare

Resources

MEDICARE LEARNING CENTER

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

MEDICARE E-BOOK

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

PERSONALIZED PLAN RECOMMENDATION

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

Our award-winning, Michigan-based customer service team is here to make Medicare simple and easy so you can rest assured you made the right choice with Priority Health Medicare.

Our Medicare experts are happy to answer questions and guide you through the plan selection process. Call us toll-free at 877.230.1562 (TTY 711) from 8 a.m. – 8 p.m. Eastern time, seven days a week.

“My husband and I are new to Priority Health and you by far have the best customer service of anyone. No matter what I was calling for or who I talked to, everyone was curious, polite, and patient. Everyone was very professional and knowledgeable.”

– *Priority Health Medicare member*





¹Priority Health Medicare received the highest score in Michigan J.D. Power 2024 Medicare Advantage Study of customers' satisfaction with their Medicare Advantage health plan experience. Visit [jdpower.com/awards](https://www.jdpower.com/awards) for more details.

²Excludes providers in Michigan's Upper Peninsula; based on CMS National Downloadable File of Physicians, Sept. 2023 and Priority Health provider database.

³Priority 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 2023.

⁴Excludes hospitals in Michigan's Upper Peninsula; based on CMS Hospital Listing file Sept. 2023 data and Priority Health provider database.

⁵Based on an independent survey of U.S. customers who have either made purchases, used services, or gathered information about products or services in the past three years.

⁶According to the 2022 Medicare Advantage Health and Drug Plan Disenrollment Reasons Survey Results issued by the Centers for Medicare and Medicaid Services (CMS), September 2023. Results for HMO-POS plans.

⁷In-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 (non-participating) providers. If out-of-network (non-participating) 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 that has opted out of Medicare. See the Delta Dental Certificate of Coverage for more details.

⁸Out-of-network/non-contracted 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.

⁹One Pass is a voluntary program. The One Pass program varies by plan/area. Information provided is not medical advice. Consult a health care professional before beginning any exercise program.

¹⁰Priority 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](https://www.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](https://www.priorityhealth.com) for more information.