



FIVE TIPS

for choosing a **non-Medicare plan** in retirement
(AND OTHER MUST-KNOW INFO)



MICHIGAN
PUBLIC SCHOOL
EMPLOYEES'
RETIREMENT SYSTEM

While retirement brings a new chapter full of new hobbies, new adventures and new beginnings, navigating your benefits in retirement can be complex.

Use this guide to help you determine if Priority Health is the health plan that will fit your needs.



LEARN THE TERMS

THE ABCs OF HEALTH CARE

Deductible

Your deductible is the amount you pay each year before the health plan starts to pay for certain services like hospitalization and labs.

Coinsurance

After you've paid your deductible, coinsurance is your portion of the cost for medical services listed as benefits in your insurance plan or prescriptions listed in the Approved Drug List.

For example, if your plan's fee for an outpatient service is \$1,000 and you've met your deductible, your coinsurance payment of 20% would be \$200. Your health plan would pay the remaining 80% fee, which would be \$800.

Coinsurance maximum

This maximum applies to certain inpatient and outpatient hospital services and non-hospital facility services. This limits the amount of coinsurance for covered services that you or your covered dependents will pay during a benefit year.

Copayment

A copayment, also known as a copay, is the portion you pay at the time you receive a health care service. You may also have a copay when you get a prescription filled.

In-network vs. out-of-network

The providers (doctors, hospitals, pharmacies, etc.) and suppliers your plan has contracted with to provide health care services to plan members are known as in-network. If you see a provider that does not contract with your health plan, that service is considered out-of-network.

Health Maintenance Organization (HMO)

HMO plans provide care through a network of doctors, hospitals and other medical professionals that members must use in order to be covered for that care. Priority Health's HMO plan provides a network of providers in Michigan and nationwide.

Preventive care

Preventive care includes specific health care services that help you avoid potential health problems or find them early when they are most treatable, before you feel sick or have symptoms. *Examples of preventive care include annual wellness exams, flu shots and cancer screenings.*

TIP 1 UNDERSTAND HOW TO ACCESS CARE

If you want to get the most from your health benefits, you'll want to know how your services are covered, how to find an in-network provider, and where to access care.

Understand what's covered

This is probably one of the biggest questions you have. We understand it's not fun to be surprised when you receive a bill. That's why you always should read your health insurance plan documents. Each health plan may set up benefits differently, so doing your research and comparing coverage details is important in selecting the level of coverage that makes sense for you.

Go to priorityhealth.com/mpsers to learn more.

In-network care

Your network includes all the doctors and hospitals that have contracted with your insurance company. It's important to make sure your current primary care physician or any specialists are in your plan's network. You can search Priority Health's network at priorityhealth.com/provider-directory.

Get care without referrals

Some health plans may require a referral from them before you can see a specialist. If you need to see a specialist in the future, it's important to understand the steps. Priority Health doesn't require a referral to see an in-network specialist. Some specialists may require a referral from your doctor before they see you, but there's no approval needed from Priority Health.

\$0 virtual care

Many health plans offer more ways to receive care, including virtual or online visits. This gives you access to a provider 24/7 through a video visit on your smartphone, desktop or tablet.

Get virtual care at virtually no cost. Priority Health offers virtual care at no extra cost, meaning you'll pay \$0 when you see a doctor virtually.

Worried HMO Plans Limit Your Access?

Not with Priority Health's non-Medicare HMO Michigan Public Schools Employees' Retirement System HMO plan. You get comprehensive, high-quality care everywhere you go.

We make it easy with a strong network across Michigan and nationwide access for urgent and emergency care. Our Find a Provider tool and award-winning¹, local customer service make it simple to find the in-network care you need, quickly and confidently.

TIP 2 KNOW THE PRESCRIPTION COVERAGE PRINCIPLES

It's important to know what to expect at the pharmacy when you fill your prescriptions under your health plan. Here's how to prepare.

Prescription tiers

Plans may cover prescriptions differently, which could impact your cost. Most plans include prescription drug tiers, which help set copay amounts of the medication. This means the more expensive drugs (like the ones trending for weight loss) rank at a higher tier, and you may be paying more for those prescriptions. At Priority Health, we organize prescriptions cover by Tiers 1–5.

Approved Drug List

Most health plans have an Approved Drug List—a master list that lets you know how prescription drugs are covered (based on tiers). Referring to this will help you understand your plan documents and possible costs at the pharmacy. Find your prescriptions on our Approved Drug List at priorityhealth.com/formulary.

Seamless transition

Your new health plan should support you with time to transition any prescriptions. This is important because some medications require prior authorization or step therapy. At Priority Health, we understand you may need additional time to work with your doctor for these medications. Most prescriptions that require step therapy or prior authorization can be filled one time without fulfilling those requirements if they are filled within 120 days of your plan's start date.

Save with mail-order prescriptions

Some people prefer to have their prescriptions delivered to their home versus making a visit to the pharmacy. It's a preference that could save you money.

At Priority Health, we offer a discount when you use mail order. Get three months of your prescription for only two copays.

Smart options

With Priority Health, you're never obligated to use mail order. Just use the option that works best for you.

Avoid minimum copays.

Priority Health doesn't have minimum copays on our plans offered to Michigan public school retirees. If your drug costs \$0, you'll pay \$0.



TIP 3 MAKE SURE YOUR HEALTH PLAN TRAVELS WITH YOU

When you're traveling, you want to know your health plan has you covered no matter where you go.

Stay on top of routine care

You may be traveling for an extended period away from home and need to access more routine services, like visiting the doctor for a cold. Priority Health also covers routine care during travel, but will have different deductible and coinsurance amounts.

For a more detailed outline of the difference in cost, review our plan documents, available at priorityhealth.com/mpsers.

Emergency coverage

Priority Health covers emergency and urgent care worldwide, the same as if you were at home. That means your same deductible and copays apply whether you're admitted to an emergency room in Michigan or in California.



TIP 4 SELECT A PARTNER THAT HAS YOUR HEALTH AT HEART

Make sure you get resources that support your mental and physical well-being.

Mental health support

It's important to partner with a health plan that prioritizes your mental well-being. Priority Health is supporting our members with free access to Teladoc Health® Mental Health, an online tool that offers activities and coaching around how to manage stress and bolster mental health.

Learn more at
priorityhealth.com/mentalhealth.

Health care made easier

Most adults find the healthcare system overwhelming, making it hard to get the care they need. That's where care managers come in.

A care manager helps you manage your health more effectively. From coordinating treatments to providing support for chronic conditions, they ensure you have the guidance and resources you need every step of the way.

With a care manager by your side, you can take the stress out of health care and focus on what matters most—your well-being.

Priority Health takes your wellness seriously, and includes no-cost care management in every plan.



TIP 5 PARTNER WITH A HEALTH PLAN THAT FITS YOUR LIFESTYLE

Access personalized resources, comprehensive hearing care, and low-cost gym memberships.

Information the way you want it

Whether you prefer online or phone calls, in-person or virtual visits, your health plan should fit your lifestyle. Online access to claims, benefits and spending is important to ensure that you always have a way to access your health information.

Our online member account (including an app for your smartphone) is available 24/7 so you're never without the information you need, whether you're looking up a claim or researching the cost of care.

We hear you

Good hearing is important to your health. That's why you have access to TruHearing®, a comprehensive hearing care solution that gives you and your extended family discounts on hearing exams and high-quality hearing aids.

Low-cost gym memberships

Some health plans even offer exclusive discounts for gym memberships. If you're looking to stay active in retirement by joining a gym, this is a great way to get more bang for your buck.

Priority Health plans include the Active&Fit program for members who aren't yet ready for Medicare. This program offers nationwide gym memberships, including in-home options, at a discounted rate.



HAVE QUESTIONS ABOUT YOUR PLAN?

Whether you have questions about coverage or need help finding a provider, our local team is ready to support you.

Call our dedicated Michigan Public School Retiree phone number at **844.403.0847** (TTY 711) from 8 a.m. to 8 p.m., seven days a week. Or visit priorityhealth.com/mpsers to learn more about your plan.



ENROLL

WITH THE MICHIGAN OFFICE OF RETIREMENT SERVICES

You can complete your enrollment online through the Michigan Office of Retirement Services (ORS). Go to michigan.gov/orsmiaccount to enroll or call 800.381.5111 for assistance.

You may also contact the ORS to learn more about the enrollment process. The quickest way to do this is by logging in to miAccount at michigan.gov/orsmiaccount. In miAccount you can enroll or change coverage or use the message board for secure, direct access to ORS customer service representatives. You can also go to the ORS website at michigan.gov/orsschools to learn about enrollment, or contact the ORS at 517.284.4400 in the Lansing area or toll-free at 800.381.5111.



¹Priority Health was named to the America's Best Customer Service in Financial Services list by USA TODAY for 2026, and to Newsweek's America's Best Customer Service list for 2025 and 2024. Priority Health Medicare has HMO-POS and PPO plans with a Medicare contract. Enrollment in Priority Health Medicare depends on contract renewal. For accommodations of persons with special needs at meetings call 888.389.6648, TTY users call 711.

H2320_NCMS400040102714O_M 09142026 ©2026 Priority Health PH022 PH38297-6.2 09/26