

2024 Plan Information

Your guide to Priority Health Medicare Advantage Plans





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, we have a plan that's right for you.

Priority Health is a Michigan-based nonprofit company, so we understand what Michigan residents want out of their Medicare. With a network that includes 9 out of 10 primary care providers in Michigan,² out-of-state 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.

Honest insurance

for real people

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

94% of our Medicare members stay with us, compared to the national average of 80%.4

The Priority Health Medicare network includes all major hospital systems in the Lower Peninsula.5



Plans with more—for less



Doctor visits, hospital coverage and prescription drug coverage

\$0

In-network medical deductibles and Part D prescription drug deductibles (on most plans)

\$0

Virtual visits with in-network primary care, specialists and behavioral health providers

\$0

Free-to-talk annual physical exam and annual wellness visit

\$0

Copays for 90-day prescriptions of many common generic drugs*







Routine hearing, vision and dental coverage

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



Over-the-counter allowance for common health and wellness products on all plans



No referrals needed to see a specialist



Help keeping track of doctor visit details with Abridge



SilverSneakers® fitness membership



Support for your mind and body with BrainHQ and on-demand mental health support



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



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

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®.6 You may also have coverage for fillings, crown repairs and simple extractions (depending on your plan).

Vision

All plans include a routine eye exam and \$100-\$200 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

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 (per calendar year unless otherwise noted)
PriorityMedicare Key SM (HMO-POS) PriorityMedicare Thrive SM (PPO) PriorityMedicare Vital SM (PPO)	\$33 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, onlays, root canals and bridge repairs. 50% of the cost for implants and implant services per tooth, every 5 years. 50% of the cost of dentures every 5 years and bridge repairs and denture relines and repairs every 36 months. \$2,500 yearly limit per calendar year.
Priority Medicare Compass SM (PPO) Priority Medicare Edge SM (PPO) Priority Medicare ONE SM (HMO-POS)	\$42 per month	Eyewear: \$150 eyewear allowance, per calendar year	Dental services: \$0 copay for fillings, crown repairs, anesthesia, one fluoride treatment and emergency treatment of dental pain. 50% of the cost for oral surgery, crowns, inlays, onlays, root canals and relines and repairs to bridges. 50% of the cost for simple extractions (non-surgical) once per tooth per lifetime. 50% of the cost for implants and implant services per tooth, every 5 years. 50% of the cost of dentures every 5 years, and bridge repairs and denture relines and repairs every 36 months. \$2,500 yearly limit per calendar year.

See additional benefit details for the enhanced dental and vision package in the Evidence of Coverage document.

Care that fits your priorities

Get real support from real people

Available on **Priority**Medicare Compass, **Priority**Medicare Edge and **Priority**Medicare ONE.

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. A Papa Pal can help with:

✓ Companionship ✓ Technology

✓ Household needs ✓ Transportation

Papa Pals can be used whenever you need them, up to 72 hours per year depending on your plan, either in person or virtually.

PriorityCare also includes unlimited social care navigation. Papa Pals work together with social care specialists who provide an extra layer of help when issues arise with things like navigating your benefits, the healthcare system or finding community resources.

"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

All of our individual Medicare Advantage 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. Your OTC card will be mailed to you and will automatically be reloaded each quarter. You can purchase items in store at Meijer, Walmart, CVS, Kroger, Walgreens, Rite-Aid, Dollar General and Family Dollar, or order online, by phone or by mail.

OTC Plus allowance

Available on **Priority**Medicare ONE, **Priority**Medicare Key, **Priority**Medicare Thrive and **Priority**Medicare Vital.

We know fresh and healthy food is important for a healthy you. That's why members with certain chronic conditions (including diabetes, cardiovascular disease and more) will be able to spend their OTC allowance on healthy food and produce. Eligibility is based on the severity of your chronic condition (for example, a high risk of hospitalization or intensive care coordination). To find out if you're eligible, contact our customer service team.

\$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.

Healthy from head to toe

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

- · Medicare-covered acupuncture for chronic lower back pain, plus six additional acupuncture sessions for any other diagnosis.
- · BrainHQ 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 (formerly myStrength) that gives you access to online mental health resources and tools.

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

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 or pharmacy.
- · 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 stay healthy



Get fit for free

SilverSneakers⁸ is a free and convenient fitness program that gives you access to:

- ✓ 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 nutrition you need following an inpatient hospital, psychiatric hospital or skilled nursing facility stay. Mom's Meals will deliver 28 fresh, ready-to-heat meals at no cost to you, up to four times per year.



Food as medicine

Food can be a powerful tool in achieving and maintaining a healthy lifestyle. That's why we provide up to six nutritional classes with a registered dietitian, in your home or in an outpatient setting.



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.



Keep track of your health

Use the free Abridge app to capture doctor visit details, care strategies and conversations between you and your doctor. Abridge allows you to review key details, and to share care information with family members or loved ones.



Need a lift?

Available on **Priority**Medicare ONE.

Getting to doctor appointments, procedures or to the pharmacy shouldn't be a barrier to your health. Get up to 30 one-way trips within 40 miles with SafeRide transportation services, included in your plan at no cost.



Get preventive care with no hidden fees

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

- ✓ An in-home health assessment provided by Signify Health®,
- ✓ 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.



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.



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.



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 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.

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)

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, Walmart and more.

Mail order

You'll pay \$0 for a 90-day supply of tier 1 and tier 2 drugs through a 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.

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.



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.

Find your \$0 plan

While all of our plans offer the care and coverage you need, along with plenty of premium perks that you want, they each have specific strengths. These descriptions and the details included on the following charts will help you determine the best plan for you.

PriorityMedicare Compass (PPO): This plan is great for members who travel and want coverage wherever they go. This open network plan allows members to see any provider who accepts Medicare and pay in-network rates. Available in certain regions only.

PriorityMedicare Key (HMO-POS): This plan is a popular choice for members who are in relatively good health, but want full coverage at an affordable price. Key has one of our most comprehensive dental offerings with 100% coverage up to \$2,500. And it now includes OTC Plus for over-the-counter items and if eligible, healthy food and produce.

Priority Medicare ONE (HMO-POS): This plan was built for members with chronic conditions who have a higher need for care and want additional support like an OTC Plus allowance, transportation and PriorityCare. This plan also includes a higher level of customer service with a dedicated phone line. Available in certain counties only.

PriorityMedicare Edge (PPO): This is our best-selling PPO plan. It's perfect 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 premium credit of \$360 per year, an open network that allows you to see any provider who accepts Medicare and pay in-network rates, and our most comprehensive hearing coverage with two hearing aids (one per ear, per year) for \$0. Available in certain regions only.

Priority Medicare Thrive (PPO): This plan has been expanded to allow members to use their OTC Plus allowance to purchase over-the-counter items and if eligible, healthy food and produce at any participating retailer, and offers our highest eyewear allowance, along with the richest dental coverage. Available in certain regions only.

Don't see what you're looking for? We also offer additional Medicare Advantage plans that come with a monthly premium. Request a premium sales packet by calling the number listed in this brochure or use the form on our "Contact us" page at prioritymedicare.com.

2024 Priority Health Medicare Advantage benefit comparison Summary of the most frequently used benefits on our \$0 plans. Complete benefit details are available in the Evidence of Coverage document. Refer to page 18 for regions.					
Benefit (In-network)	PriorityMedicare Compass SM (PPO) Available in Regions 3 and 4	PriorityMedicare Key SM (HMO-POS) Available in all Lower Peninsula counties	PriorityMedicare ONE (HMO-POS) Available in Kent, Macomb, Oakland, Ottawa and Wayne counties		
Monthly premium	\$0	\$0	\$0		
Medical deductible	\$0	\$0 (in-network)	\$0 (in-network)		
Office visit: primary care	\$0 copay	\$0 copay (regions 1, 2 and 5): \$10 copay (regions 3 and 4)	\$0 copay		
Office visit: specialist	\$50 copay	\$45 copay	\$35 copay		
Outpatient diagnostic services (labs, X-rays, imaging)	\$0 copay for anticoagulant labs & \$20 copay for all other lab services \$20 copay for X-rays \$275 copay for diagnostic radiology/imaging	\$0 copay for anticoagulant labs & \$10 copay for all other lab services \$35 copay for X-rays \$160 copay for diagnostic radiology/imaging	\$0 copay for anticoagulant labs & \$0 copay for all other lab services \$20 copay for X-rays \$175 copay for diagnostic radiology/imaging		
Inpatient hospital coverage	\$320 copay per day, days 1-7	\$320 copay per day, days 1-7	\$285 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	\$0-\$290 copay for each visit (regions 1, 2 & 5) \$10-\$290 copay for each visit (regions 3 & 4)	\$0-\$285 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	\$120 copay for each in-network or out-of-network visit, including all services received		
Unlimited U.S. & worldwide emergent / urgently needed services	\$120 copay / \$30 copay	\$120 copay / \$50 copay	\$120 copay / \$35 copay		
Chiropractic (12 routine visits per year)	✓	✓	✓		
Acupuncture (6 routine visits per year)	✓	✓	✓		
Transportation	Not covered	Not covered	\$0 copay for up to 30 one-way trips (limit 40 miles per one-way trip)		
Annual out-of-pocket maximum	\$5,650 combined in- and out-of-network	\$5,000 (regions 1, 2 and 5): \$5,500 (regions 3 and 4)	\$4,300		
Additional 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 \$2,500 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	\$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 \$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	\$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 and OTC Plus	\$80 per quarter to use toward over-the-counter items	\$100 per quarter (regions 1 and 2); \$74 per quarter (regions 3 and 4); \$95 per quarter (region 5) to use toward over-the-counter items and, if eligible, healthy food	\$26 per month to use toward over-the-counter items and, if eligible, healthy food		
PriorityCare	\$0 for up to 36 hours of companion care per year plus unlimited social care navigation	Not covered	\$0 for up to 72 hours of companion care per year plus unlimited social care navigation		
Prescription drug deductible	\$0 (all tiers)	\$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: \$42 Tier 4: 45% coinsurance Tier 5: 33% coninsurance	Tier 1: \$4 (\$0 for 90-day) Tier 2: \$15 Tier 3: \$42 Tier 4: 45% coinsurance Tier 5: 33% coninsurance	Tier 1: \$0 (\$0 for 90-day) Tier 2: \$10 Tier 3: \$42 Tier 4: 45% coinsurance Tier 5: 33% coninsurance		
\$0 for 90-day supply of mail order drugs through Express Scripts (Tier 1 and tier 2)	✓	✓	✓		

2024 Priority Health Medicare Advantage benefit comparison Summary of the most frequently used benefits on our \$0 plans. Complete benefit details are available in the Evidence of Coverage document. Refer to page 18 for regions.			
Benefit (In-network)	PriorityMedicare Edge SM (PPO) Available in Regions 1, 2 and 5	PriorityMedicare Vital SM (PPO) Available in Regions 1, 2 and 5	PriorityMedicare Thrive SM (PPO) Available in Region 5
Monthly premium	\$0	\$0	\$0
Medical deductible	\$0	\$0	\$0
Office visit: primary care	\$0 copay	\$0 copay	\$0
Office visit: specialist	\$45 copay	\$50 copay	\$40 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% coinsurance for diagnostic radiology/imaging	\$0 copay for lab services \$20 copay for X-rays \$275 copay for diagnostic radiology/imaging
Inpatient hospital coverage	\$320 copay per day, days 1-7	\$350 copay per day, days 1-5	\$320 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	\$0-\$300 copay for each visit	\$0-\$275 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	\$120 copay for each in-network or out-of-network visit, including all services received
Unlimited U.S. & worldwide emergent / urgently needed services	\$120 copay / \$30 copay	\$120 copay / \$60 copay	\$120 copay / \$40 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	\$5,100 combined in- and out-of-network	\$5,200 combined in- and out-of-network
Additional 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 \$2,500 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 \$0 for fillings, crown repairs and simple extractions, up to \$3,000 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	\$0 copay for one routine eye exam & one retinal imaging each year \$200 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 2 TruHearing-branded 'Advanced' hearing aids, one per ear per year	\$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 and OTC Plus	\$95 per quarter to use toward over-the-counter items	\$30 per month to use toward over-the-counter items and, if eligible, healthy food	\$35 per month to use toward over-the-counter items and, if eligible, healthy food
PriorityCare	\$0 for up to 48 hours of companion care per year plus unlimited social care navigation	Not covered	Not covered
Prescription drug deductible	\$0 (all tiers)	\$350 (tiers 3-5)	\$0 (all tiers)
Preferred retail pharmacy costs for 30-day retail supply	Tier 1: \$2 (\$0 for 90-day) Tier 2: \$8 Tier 3: \$38 Tier 4: 40% coinsurance Tier 5: 33% coninsurance	Tier 1: \$1 (\$0 for 90-day) Tier 2: \$10 Tier 3: \$42 Tier 4: 45% coinsurance Tier 5: 26% coninsurance	Tier 1: \$3 (\$0 for 90-day) Tier 2: \$10 Tier 3: \$42 Tier 4: 45% coinsurance Tier 5: 33% coninsurance
\$0 for 90-day supply of mail order drugs through Express Scripts (Tier 1 and tier 2)	✓	✓	✓

2024 monthly premiums

Counties	PriorityMedicare Edge SM (PPO)	PriorityMedicare Compass SM (PPO)	PriorityMedicare Key SM (HMO-POS)	PriorityMedicare Vital SM (PPO)	PriorityMedicare Thrive SM (PPO)
Region 1: Allegan, Barry, Kent, Lenawee, Ottawa	\$0		\$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	PriorityMedicare Compass is not available in these counties.	\$0	\$0	
Region 3: Alcona, Antrim, Benzie, Charlevoix, Clare, Crawford, Grand Traverse, Hillsdale, Lake, Lapeer, Leelanau, Manistee, Mecosta, Monroe	Priority Medicare	\$0	\$0	Priority Medicare	PriorityMedicare Thrive 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	Edge is not available in these counties.	\$0	\$0	Vital is not available in these counties.	
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	\$0

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





Ready to enroll?

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

- 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).
- 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 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.



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 877.854.1934 from 8 a.m. to 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. You may also scan the completed form and email it to PH-MedicareEnrollment@priorityhealth.com



Understanding Medicare

Our 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.

"I experienced a difficult billing situation a few weeks ago, and Katrina led me right to the solution—with expertise, empathy and follow-up. How did I know she was smiling while talking to me on the phone?"



Our Medicare experts are happy to answer questions and guide you through the enrollment process. Call us toll-free at 877.854.1934, from 8 a.m. to 8 p.m., seven days a week. TTY users should call 711

Additional 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 Medicare e-book. It provides simple explanations about all parts of Medicare, along with tips about eligibility, enrollment and much more.

Personalized plan recommendation

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

- $^{ ext{-}}$ According to July 2023 monthly enrollment reports from the Centers for Medicare and Medicaid Services.
- ² Excludes hospitals in Michigan's Upper Peninsula; based on American Hospital Directory January 2022 data and Priority Health provider contracts. Network varies by plan.
- ³ Priority Health Medicare Advantage HMO-POS plans are one of 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.
- ⁴ According to the 2021 Medicare Advantage Health and Drug Plan Disenrollment Reasons Survey Results issued by the Centers for Medicare and Medicaid Services (CMS), September 2022. Results for HMO-POS plans.
- ⁵ According to CMS National Downloadable File for Physicians, July 2022. Network varies by plan.
- 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 (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.
- ⁷ Out-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.
- 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.

