



2024 PRODUCT GUIDE FOR PROVIDERS



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This guide will give you an at-a-glance view of our new and updated commercial and Medicare products for 2024. For more detail, we've reviewed all product updates you need to know at our October 2023 Virtual Office Advisory (VOA) webinar.

Click below for more information on a specific product or update.

Product updates across lines of business

- PriceMyMeds (prescription drug cost savings program)
- Continuous glucose monitor update
- RSV vaccines
- Cost Estimator (price transparency system)

Commercial group products

- Behavioral health vehicle transport
- Breast cancer screenings for men
- Employer group weight loss medication options

Individual (My**Priority**) products

- Southeast Michigan Network
- 2024 narrow network plans

PriorityMedicare products

- Updated benefits
- PriorityFlex (Visa debit card allowance for non-health care needs)
- OTC & OTC Plus
- Medicare pharmacy updates
- Inflation Reduction Act changes



For all the details you need to know about our 2024 products, watch our October 2023 Virtual Office Advisory.

[Watch now](#)

Product updates across lines of business

New benefits

PriceMyMeds

Available to commercial group and individual members

Launching in early 2024, PriceMyMeds is a new pharmacy program available to our members that helps them save on prescription medications. When a member's prescription is filled at a pharmacy, PriceMyMeds automatically searches for and applies savings opportunities, when applicable. In instances where members utilize the PriceMyMeds app to locate a better price at an alternative pharmacy, PriceMyMeds will provide instructions on how to 1) ask for a price match or 2) ask for a prescription transfer. All this with no effort from the provider, aside from occasionally sending the prescription to a new pharmacy if the member's current pharmacy doesn't accommodate transfers. PriceMyMeds is a key part of our ongoing goal to better support our members in getting the care they need by making sure prescription drug costs are not a barrier to care.

Continuous glucose monitor update

In 2024, continuous glucose monitors (CGMs) and CGM supplies will be a pharmacy-only benefit and will no longer be covered at DME suppliers. There will be no changes to other diabetic supplies: test strips, syringes, insulin pumps, etc.

RSV vaccines



We're now covering the Arexvy and Abrysvo vaccines, as well as the new Beyfortus monoclonal antibody treatment, under our members' preventive benefit.

Priority Health members who are 60 years old or older*, pregnant, or 0–19 months old† have access to these treatments at \$0 cost.

*RSV vaccines are not covered by Medicare Advantage plans but are covered by Medicare Part D.

†Prior authorization is required for patients over 8 months of age.

Expanded price transparency

Priority Health has been providing cost-sharing information to members with our Cost Estimator tool since 2014. Beginning January 1, 2024, prices will be listed for *all* procedures and services covered under the terms of the member's plan*.

Providers can use the Cost Estimator tool too.

Log in to prism and select "Cost Estimator" from the Resources menu. You'll be able to see what your patients see and what their out-of-pocket costs are for items and services.

*Cost Estimator is not available for Medicare members.

Commercial group products

Core benefit updates

Behavioral health vehicle transport

Certain ambulance services recently introduced vehicles designed specifically for behavioral health transports. Priority Health will continue to cover behavioral health vehicle transports, including transports in the newly introduced behavioral-health-specific vehicles, between a facility and behavioral health facility, at the ambulance cost-share.

Breast cancer screenings for men

Beginning on January 1, 2024, we'll cover at \$0 cost share preventive breast cancer screenings for men with a family history of breast cancer under our preventive care benefits. Diagnostic breast cancer screenings for men continue to have a cost share.

Employer group weight loss medication options

We're now offering rider coverage for commercial group plans to cover certain lower-cost weight-loss drugs (for various member cost shares, depending on the plan). Step therapy is required for some medications. This rider does not include GLP-1 type medications, although an enhanced version is available to self-funded groups to cover Saxenda and Wegovy.



Find Jan. 1 formulary changes in our Provider Manual beginning in November



Get more details on product updates by watching our recorded Virtual Office Advisory.



WATCH NOW

Individual (My**Priority**) products

What's new

Southeast Michigan Network

This is a new narrow network product in 2024 that includes Corewell Health (formerly Beaumont) facilities and providers along with Trinity Health facilities and providers in Southeast Michigan. A provider is in the Southeast Michigan Network if...

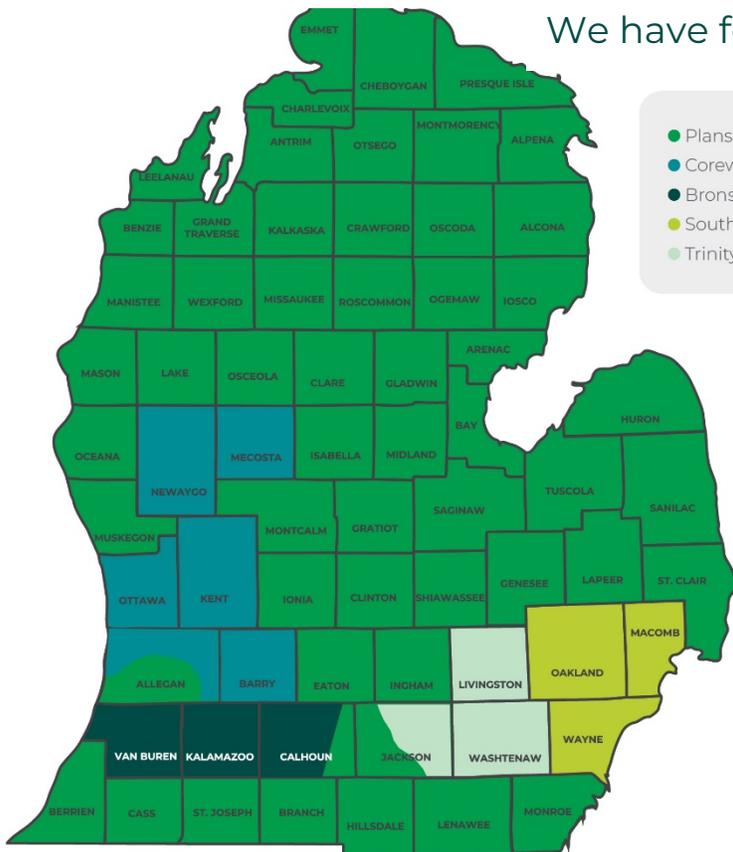
The provider was part of the former Beaumont Health Network

-OR-

The provider is part of the Trinity Health East Network

Visit priorityhealth.com/provider/manual/provider-plans/narrow-networks for more information.

We have four narrow network plans available in 2024



- Plans available in all Lower Michigan counties
- Corewell Health West Michigan Network
- Bronson Healthcare Partners
- Southeast Michigan Network
- Trinity Health East Network

Plan name

Plan updates

Corewell Health West Michigan Network

Previously known as Spectrum Health Partners

Bronson Healthcare Partners

Nothing has changed

Southeast Michigan Network

New plan; see above for more information

Trinity Health East Network

Change in area of availability

Narrow network plans are available to individuals and families under age 65 who purchase their own health plan coverage.

Priority Medicare products

Updated benefits

OTC allowance

All Priority Medicare plans now include an over-the-counter (OTC) allowance.

Expanded transportation benefits *(available on certain plans)*

We've expanded transportation to 40 miles per one-way trip for Priority Health Medicare members.

Discontinued Kroger partnership

We've ended our partnership with Kroger. The plans that included Kroger-based benefits have been renamed to Priority Medicare Thrive (PPO) and Priority Medicare D-SNP Advantage (HMO). Kroger Pharmacy will now be considered out-of-network.

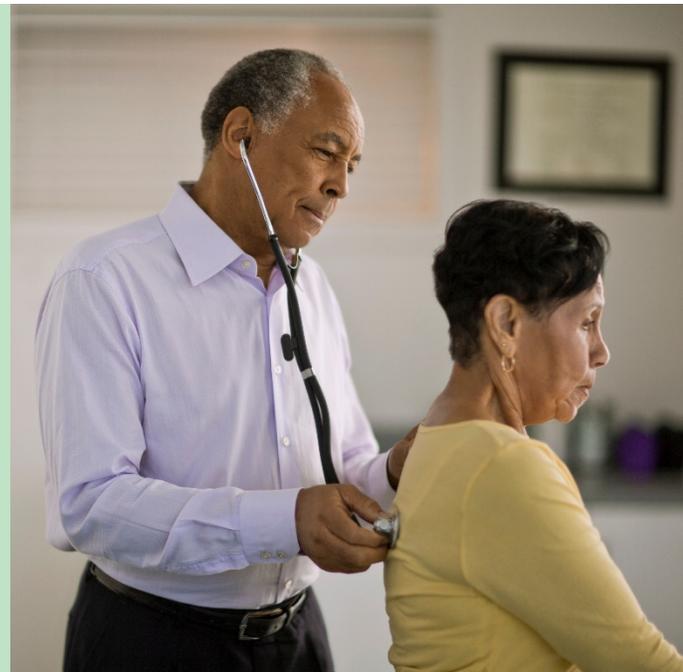
Enhanced benefits for D-SNP members

Dual-eligible special needs plans (D-SNP) will now include a PriorityFlex card (more on the next page) and \$0 Part D drugs across any tier. *Member must receive Extra Help (Low-Income Subsidy) to qualify.*

Annual wellness visit update

You asked, and we listened.

We're pleased to announce that annual wellness visits (AWVs) for Priority Health Medicare members can now be scheduled once per calendar year, giving more flexibility to see your patients when it works best for both of you.



Priority Medicare products

New **PriorityFlex**

Helping members pay for over-the-counter costs, healthy foods, select utilities (water, gas, electric, septic, trash, internet and phone) and pest control services.

- Included on both **Priority**Medicare D-SNP and **Priority**Medicare D-SNP Advantage.
- Members qualify for this benefit if they have any level of Low-Income Subsidy (LIS).
- The PriorityFlex card will be a Visa card, with which members can purchase items and services and pay bills at participating retail stores, through mail order or over the phone.

Expanded options for OTC & OTC Plus

Over-the-counter allowance

All of our plans include a **monthly or quarterly** allowance to purchase health-related products not requiring a prescription, such as cold and allergy medication, as well as additional health and wellness products such as bathroom safety bars, toothpaste, sunscreen, incontinence supplies, etc.

There are four convenient ways to shop:

- Call to order
- Buy in-store at participating stores
- Online or via mobile app
- Mail-in order

New this year: we've added obesity as a condition for members with OTC Plus to qualify for healthy food and produce.

Members can use their OTC, OTC Plus and PriorityFlex cards at...









Priority Medicare products

Medicare pharmacy updates

- \$0 cost-share on Part D drugs (all tiers) on both D-SNP plans for members who qualify for Extra Help (Low-Income Subsidy)
- Statin quantity limits added to align with FDA-approved labeling
- Prior authorizations added to GLP-1s to add a review for a covered diagnosis
- Multiple generic and biosimilar additions with minimal member disruption (Find more details about this and other formulary changes in our Provider Manual)
- Kroger pharmacies will be **moving out of network** for all Medicare products effective January 1, 2024

New for 2024: GLP-1s will require prior authorization for members when a claim for a covered diagnosis (Type 2 Diabetes) is not on file with Priority Health; Medicare does not cover these medications for weight loss.

Inflation Reduction Act changes

- Insulin coverage is capped at \$35 for a one-month supply (both Part B and Part D).
 - Part B – Members will pay 20% **UP TO** \$35. The member will never pay more than \$35.
 - Part D – A one month supply of insulin will never exceed \$35.
 - If the copay is less than \$35, it will be the lesser copay
 - If the copay is more than \$35 or a coinsurance, the member will pay \$35 for a one-month supply.
- \$0 cost-share for all Part D adult vaccines.
- Expansion of Low-Income Subsidy (LIS or Extra Help) program expansion.
- Elimination of the 5% coinsurance for catastrophic coverage.

