

PriorityActions

FOR PROVIDERS

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Welcome to our biweekly PriorityActions for providers, where you'll receive important information to help you work with us and care for our members.

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You're receiving this email because you're a part of an Accountable Care Network (ACN) or Provider Organization (PO) with us. Please share relevant information with your provider groups and practices. Your Provider Strategy & Solutions consultant remains your primary contact for support.

BILLING AND PAYMENT

Virtual services are now covered at some urgent care centers

Effective Jan. 1, 2024, urgent care centers contracted to provide the services listed in our [Telemedicine policy](#) (#91604) are now able to perform these services virtually and be reimbursed at their contracted rate. The policy had previously included an exclusion for urgent care which has been removed.

To be reimbursed, providers must bill these services with POS 02.

Assistant surgeon reimbursement rate change for Medicaid

On January 11, we announced [reimbursement rate changes for assistant surgeons](#) that will go into effect in March.

We want to share an update. There will be a rate change for Medicaid in March as well, for the AS (midlevel) modifier from 16% to 13.6% of fee schedule. This update is in alignment with industry standard and our other lines of business for this modifier.

PLANS AND BENEFITS

Now available: benefit briefs describing 15 member benefits that we offer as extras on our Priority Medicare plans

Our Priority Medicare and D-SNP plans have many extra member benefits to give your patients access to additional services and support. To give you as much information about them as possible and answer any questions you might have, we've created 15 benefit briefs, which include:

- Benefit descriptions
- Vendor partner information
- Information on where services related to the benefit may be performed
- Authorization requirements
- Short guides to accessing and using the benefit
- Coverage criteria
- FAQs

[ACCESS BENEFIT BRIEFS](#)

Which benefits have briefs available?

- Abridge: a mobile app for recording health conversations
- Assist America: a worldwide travel assistance program
- Best Buy Health: a personal emergency response system
- BrainHQ: a digital mental activity program

- Delta Dental: routine dental coverage
- EyeMed: routine vision coverage
- Mom's Meals: a meal delivery program
- MultiPlan: a travel pass for health care coverage outside the lower peninsula of Michigan
- OTC, OTC Plus and PriorityFlex: over-the-counter health products, healthy food access and other payment support benefits
- PriorityCare: companion care and other social supports
- SafeRide: non-emergency transportation
- SilverSneakers: a fitness and physical wellness program
- Teladoc Health Mental Health: a mental health and wellness app
- TruHearing: hearing exam and hearing aid benefits
- Wellth: a chronic condition management tool

Should I share these with my patients?

No, these benefit briefs are intended for providers. If your patients come to you with questions about their benefits, they should be directed to priorityhealth.com/medicare/once-you-enroll to find information about their plan, including extra benefits. They can also contact member support through their online member portal or by calling the number on the back of their Priority Health member ID card.

The new version of Cost Estimator is now live

As originally announced in [November 2023](#), the new version of our Cost Estimator tool is now live for both members and providers. As a reminder, the primary change in this updated version is that it includes pricing and cost-sharing information for **all covered procedures and services**, in response to the "[transparency in coverage](#)" rule from the federal departments of Health and Human Services, Treasury and Labor.

How do I access Cost Estimator?

Providers still access Cost Estimator through prism. However, rather than it being in a separate tab on the Resources menu, it is now accessed through Member Inquiry.

[DOWNLOAD THE PROVIDER GUIDE](#)

Where can I get questions about this new version of Cost Estimator answered?

We've created this [FAQ document](#) to answer many of the questions you may have, including questions about:

- Why we made this change
- How Cost Estimator defines “fair price”
- How cost estimates are calculated
- PriorityRewards
- Updated rates and how these factor into the cost estimates

Why should I use Cost Estimator?

The way people shop for health care continues to change. Consumers are looking for cost transparency and want to know what they are paying for, the same as if they were shopping for a new car or appliance. Talking about costs with your patients, using data from Cost Estimator, can allow you to meet them where they are and help them get the care they need at the right price.

Please encourage your patients to research the cost of their care and have your staff use Cost Estimator when they're helping a patient with a referral for tests and procedures.

Reminders about seeing Cigna members in Michigan

You may already know that we have a [Strategic Partnership with Cigna](#), through which Cigna commercial group members can access care on Priority Health's PPO network in Michigan and Priority Health commercial group members can access care on Cigna's Open Access Plus (OAP) network outside of Michigan.

We want to remind you about some of the specifics of seeing Cigna members in Michigan.

Is there a page in the provider manual with instructions for seeing Cigna members in Michigan?

[Yes](#). It has information about:

- Confirming patient eligibility
- Submitting claims

- Receiving payment
- Reviewing claims status
- Submitting appeals
- Obtaining prior authorizations
- Providing behavioral health care

What about ancillary care?

Check out the ancillary care content drawer on our [provider FAQs](#) page to learn about:

- Referrals
- Authorizations
- Specialty pharmacy services

Can Cigna's other Strategic Partners receive care on the Priority Health network, just as Cigna members do?

Yes. These Strategic Partners include:

- TUFTS Health Plan/CareLink
- HealthPartners
- MVP

For more information about these Strategic Partners, including sample member cards, see Cigna's [online guide](#).

As a general rule, simply follow any instructions on the member ID card for submitting claims, prior authorizations or calling for assistance.

2024 VFC program registration open Feb. 1 – Mar. 15

The enrollment portal for MDHHS's Vaccines For Children (VFC) program will open on Feb. 1. While it typically opens in January, it's delayed this year due to the Michigan Care Improvement Registry's (MCIR) server migration.

New and established VFC program providers **must complete the enrollment process by March 15** to participate in 2024.

[Get more information](#) on VFC and provider enrollment from MDHHS.

Visit and bookmark our new provider onboarding center

It's important to us that providers in our network, from the moment they join, have the resources they need to work with our members. To help us achieve that goal, we've created the [provider onboarding center](#), your new go-to hub of resources and information.

Who is the provider onboarding center for?

As the name suggests, the provider onboarding center was mainly built for new providers: both new provider offices and new individual staff members. Even if you're not new, **bookmark this page for a one-stop spot** for the most common work you do with us.

What is included in the provider onboarding center?

At the landing page, you'll find:

- Links to resources needed for joining the Priority Health network, including contracting and credentialing information
- Links to go-to tools and some explainers on how to use these tools, especially for prism
- Links to training guides on various essential topics, including claims, authorizations, appeals and patient eligibility
- Information on getting questions answered
- Links to key sources of information and updates from Priority Health, including our news site, quarterly newsletter and VOAs
- Information on Priority Health products
- Out-of-state provider information
- Incentive program information
- A set of frequently asked questions with answers and supporting links
- A digital packet that contains all essential onboarding information in downloadable and printable form
- A PDF file of the four provider welcome emails that providers receive after they join prism
- A survey for you to give feedback on the provider onboarding center

- A self-assessment for providers to gauge their level of understanding

Note that much of the content is in expandable drawers. Access it by tapping the white plus sign next to the drawer heading text.

Can the provider onboarding center resources be used for training new staff?

Yes. Whether you share the link to the provider onboarding center or send the digital packet, be sure to distribute these resources to everyone in your group or office.

The provider onboarding center is an excellent starting point for your work with Priority Health. Before you or any of your colleagues pick up the phone to call our Provider Helpline, visit the provider onboarding center to check to see if your answer is there.

Join us for our next Virtual Office Advisory (VOA) webinar on February 8

Join us for our next Virtual Office Advisory webinar at noon on February 8 and learn about:

- prism inquiry tips
- Community care management
- Cost Estimator updates
- PriorityBABY: introducing a new Priority Health program for babies
- Medicare and Medicaid quality updates
- Disease burden management program updates
- 2024 PCP incentive program updates and being successful in the 2024 performance year

REGISTER NOW

Can't join us?

All VOAs are recorded and posted to [our website](#) within a week of the webinar, so you can watch at your convenience.

Questions? Connect with your Provider
Strategy & Solutions consultant.



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