

PriorityActions

IMPORTANT UPDATES FOR OUR PROVIDER NETWORK

Jan. 22, 2026 | Issue #4.2

Big changes to how you work with us, including a new provider portal, are coming later this year

[Priority Health news](#)

To best serve you and your patients, today and in the future, we're making changes to our online platforms and some processes. These changes, which include a new provider portal, will take effect on Aug. 1 of this year. | [Read More](#)

New payment and RA processes coming Aug. 1, 2026

[Billing and payment news](#)

We've partnered with Optum Financial and ECHO Health, Inc. to provide payment and payment reconciliation services to you, our provider network. **Starting on Aug. 1, 2026, you'll begin receiving your Priority Health payments and remittance details from ECHO.** You'll have new payment options to choose from and may need to sign up for your preferred method. | [Read More](#)

January 2026 billing policy updates

[Billing and payment news](#)

We publish billing policies to offer transparency and help providers bill claims more accurately to reduce delays in processing claims, as well as avoid rebilling and additional requests for information. We add new and update several existing policies each month. | [Read More](#)

Get our 2026 HEDIS Provider Guide

[Priority Health news](#)

The 2026 HEDIS Provider Guide is now available. Inside, you'll find information on this year's HEDIS measures, billing codes and actionable tips to help close care gaps. We've also updated the layout and navigation for a more streamlined, user-friendly experience. | [Read More](#)

Reminder: The 2025 HEDIS audit begins soon

[Requirements and responsibilities news](#)

Starting in late January, our HEDIS team will begin reaching out to provider offices to request medical records for the 2025 MY (Measure Year) HEDIS audit. If contacted, please provide all requested medical records by the deadline provided in your communication. [See a sample of the outreach letter.](#) | [Read More](#)

Secret shopper survey assessing appointment wait times for ACA/marketplace members launching soon

[Requirements and responsibilities news](#)

We're partnering with Press Ganey to launch a secret shopper survey that evaluates in-person and virtual appointment-scheduling wait times for provider offices that accept patients covered under our ACA/marketplace plans. In compliance with CMS, the following requirements must be met:

- **Behavioral health offices:** Patients must be able to see a provider within ten business days of contacting the office to schedule an appointment.
- **Primary care offices:** Patients must be able to see a provider within 15 business days of contacting the office to schedule an

appointment.

[Read More](#)

PriorityMedicare Dual Premier, our HIDE-SNP plan, went live on Jan. 1

[Plans and benefits news](#)

Beginning Jan. 1, 2026, PriorityMedicare Dual Premier® (HMO D-SNP) replaced PriorityMedicare D-SNP in some southwest and southeast Michigan counties. Dual Premier, which is a Highly Integrated Dual-Eligible Special Needs Plan (HIDE-SNP), combines Medicare, Medicaid and Long-Term Services & Supports (LTSS) into one plan for an integrated member and provider experience. | [Read More](#)

Check out our three new billing & coding provider education videos

[Training opportunities news](#)

We have three new provider education video modules available for you this month, with topics including remittance advice access for providers and third-party billing companies, tips on coding quality, coding for gap closure and an overview of billing policies. | [Read More](#)

You're receiving this bi-weekly provider newsletter because you've opted into receiving communications from Priority Health. Questions? Please contact our Provider Helpline at [800.942.4765](tel:800.942.4765), or if you're part of an Accountable Care Network (ACN), please contact your Provider Network Management specialist.

Access an archive of our PriorityActions for providers emails [here](#).



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