

Your Priority Health Plan

OPEN ENROLLMENT BENEFITS GUIDE



Access your plan anytime, anywhere.

Finding all your important health plan information is easier than ever with a Priority Health member account. With your member account, you can:

- See what's covered by your plan.
- Find or change your primary care physician.
- Replace a lost ID card.
- Estimate the cost of care.
- Schedule virtual care appointments.
- Pay your bill.

To download the Priority Health app, go to **member.priorityhealth.com**, or scan the code below to get started.



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Find doctors in your network

If you live **IN MICHIGAN**

Your plan may require you to be assigned an in-network primary care provider, or PCP, whom you'll visit for all your routine and preventive care needs.

To view or change your PCP:

- 1 Log in to your Priority Health member account at **member.priorityhealth.com** or through the Priority Health app.
- 2 Click or tap on Menu and select Find Care.
- 3 Select "Find a Doctor or Specialist." You'll be redirected to the Find a Doctor tool.
- 4 Search by name, specialty or location.

Search results are based on your specific plan and home address, so you'll only see doctors in your network and your area.

A man and a woman are standing on a rooftop or balcony, looking at a tablet together. The woman is wearing a light-colored trench coat over a red top, and the man is wearing a brown jacket over a pink sweater. They are both looking intently at the tablet. The background shows a city skyline at sunset, with warm orange and yellow light. A black metal railing is in the foreground. The text "Living outside of Michigan" is overlaid on the left side of the image in a large, white, sans-serif font.

Living outside of Michigan

To find or switch your Cigna OAP provider:

- Contract number: 900000000-00**
Name: CALEB J SAMPLE
Group # and name: 000000, GROUP NAME
Health plan: PriorityPOS A
- Dependents:**
 9000000000-01 TAMMY C SAMPLE
 9000000000-02 KELSEY W SAMPLE
 9000000000-03 NOAH W SAMPLE
 9000000000-04 DEREK A SAMPLE
- Member is eligible to receive in-network care from any Cigna OAP provider outside of Michigan. See back of ID card for details.
- | Deductible | | | | Total out of pocket limits | | | |
|-------------------|--------|-------------------|--------|----------------------------|---------|-------------------|---------|
| Preferred Network | | Alternate Network | | Preferred Network | | Alternate Network | |
| Indiv. | Family | Indiv. | Family | Indiv. | Family | Indiv. | Family |
| \$0000 | \$0000 | \$0000 | \$0000 | \$0000 | \$00000 | \$00000 | \$00000 |
- priorityhealth.com*

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Preventive care at no cost to you



We believe in the importance of preventive care—finding illnesses before they get serious and fighting them when things are most treatable. That's why we include preventive health care services, such as flu shots and routine physicals, in every plan at no cost to you.¹

Preventive care can help you avoid health problems, recognize health risks and detect illness early. Below are just a few examples of important services available to you.

To see everything that is covered in the Preventive Health Care Guidelines of your plan, visit priorityhealth.com/preventive.



FOR CHILDREN

- Well-child visits
- Vaccines



FOR ADULTS

- Routine physical exams
- Flu shots
- Colon cancer screenings
- Cholesterol and diabetes screening labs



FOR WOMEN

- Contraceptives²
- Pap and HPV tests
- Breast cancer screenings

Virtual care is a great affordable option for preventive care appointments.
Schedule yours today using your Priority Health member account member.priorityhealth.com

¹Most Priority Health plans include preventive health care at no cost to our members. There are a few plans that do not include preventive health care or have special guidelines. Preventive care may be excluded or may include specific costs for certain services if the plan is grandfathered—typically an employer-sponsored plan that hasn't changed since 2010. ²Employers may not be required to offer contraceptive coverage. You can find out if your plan includes this service by calling customer service at the number listed on the back of your Priority Health member ID card.

Care options that save you time and money

With Priority Health, you have options for care—options that can save you time and money.

ER and urgent care visits are often time consuming and expensive. If you can't see your PCP right away, Priority Health's virtual care services allow you to see a doctor 24/7, including nights, weekends and holidays.

Use virtual care to connect with a doctor over the phone, through video chat or by submitting an online questionnaire. Depending on your condition and the type of virtual care you choose, a doctor can:

- Develop a treatment plan.
- Prescribe a medication and send it to your preferred pharmacy.
- Notify your PCP with current information.
- Make follow-up recommendations, including next steps with a specialist.

Virtual care is perfect for treating nonemergency issues such as:

- Cough
- Cold and flu
- Fever
- Nausea and vomiting
- Sinus infections
- Pink eye
- Allergies
- Bites and stings
- Rashes and hives
- Anxiety
- And more

How do I get started?

Log into your member account at member.priorityhealth.com or in the Priority Health app. Under the "Find care" menu, click on Find virtual care. Then click on the appropriate "Get started" button.



When to use urgent care

Use urgent care for non-life-threatening conditions that can't wait for an appointment, such as minor broken bones or fractures in fingers or toes, sprains and strains, or X-rays and lab tests.



When to use the emergency room

Use the emergency room for emergencies or symptoms that can't wait, such as bleeding that won't stop, pain in the chest or one arm, poisoning or drug overdose, seizures or slurred speech and broken bones.

Prescription coverage

Is my prescription covered?

That's an important question. We know prescription coverage can make a difference in both your health and budget. That's why we improve our prescription benefits, expand our approved drug list and update you on your options as regularly as possible.

How to check if your prescriptions are covered

The easiest way to see if your plan covers your prescriptions is to check the approved drug list, or ADL. You can find it on our website:

- Go to priorityhealth.com/formulary/employer.
- Check the back of your member ID card to select the appropriate list. If it says "Prescription: Yes", you have Traditional Formulary. If it says "Optimized Rx: Yes", you have Optimized Formulary.
- Search for medications alphabetically by name or by therapeutic class—like antihistamines, for example. You can also search for medications by cost.



Lower the cost of your prescription drugs.

Prescription drugs can be costly. That's why we offer **PriceMyMeds** to help you save.

PriceMyMeds looks for prescription discounts and automatically applies them at the pharmacy checkout. Show your member ID card at the pharmacy so that you get the lowest cost on your prescription drugs. This benefit is available at no extra cost to members aged 18 and older.¹

Express Scripts® automatically finds the lowest available price for your prescriptions when you fill your Rx—no action needed and all savings count toward your benefit. If you take a daily maintenance medication, then using Express Scripts home delivery may be a great option for you, saving you trips to the pharmacy and with out-of-pocket costs.²



Get savings alerts with the PriceMyMeds app.

You can also download the PriceMyMeds app, load your medication list and enable notifications to get alerts on discounts available at nearby pharmacies.

All prescriptions purchased at an in-network pharmacy using PriceMyMeds count toward your deductible and out-of-pocket maximum.

Use the **Find a Doctor** tool available in your member account to verify your pharmacy is in-network.

¹Currently available only to fully funded employer groups. Any future expansion will be communicated once finalized.

²Check your plan documents to verify your mail order benefits

What do prescription tiers mean for you?

“Tiers” are simply a way of grouping prescription drugs by cost and value. Different insurance carriers categorize drugs into tiers according to their specific approved drug lists (ADLs), so it’s important for you to check Priority Health’s ADL for your prescriptions.

Tier 1(\$): Includes low-cost generic drugs—which are proven to be as safe as brand-name drugs—and, on some formularies, select brand-name drugs.

Tier 2 (\$\$): Includes preferred and lower-cost brand-name drugs, and some higher-cost generic drugs. If you must take a brand-name drug, you should work with your doctor to choose one that is covered here, as it will be the most affordable.

Tier 3 (\$\$\$): Includes non-preferred and expensive brand-name drugs, as well as higher-cost generic drugs. These drugs may cost you a significant amount out of pocket, so ask your provider if a tier 1 or 2 option can be prescribed instead.

Tier 4 (\$\$\$\$\$): Includes very expensive brand-name and generic drugs, as well as preferred specialty drugs used to treat complex conditions. Specialty drugs often have high costs and may have special handling or storage requirements. They are usually dispensed by trained personnel at specialty pharmacies. If you need to take a specialty drug, you should work with your doctor to choose one that is covered here. These drugs do not typically have a specific copay. Instead, you may pay a percentage of the total cost, up to a maximum amount per prescription.

Tier 5 (\$\$\$\$\$\$): Includes non-preferred specialty drugs, and the most expensive brand-name and generic drugs are covered here because they offer limited clinical value. Most have a similar lower-cost option offering the same clinical value on tiers 1 through 4. Ask your provider about alternatives. These drugs typically do not have a specific copay. Instead, you may pay a percentage of the total cost, up to a maximum amount per prescription.



Scan the QR code to visit Priority Health's ADL.

Prescription FAQs



**What if my drug
isn't on the list?**



**What if my drug
isn't covered and my
doctor can't switch my
prescription before my
new plan starts?**



**The ADL says I
need step therapy.
*What does that
mean?***



**The ADL says
I need prior
authorization.
*What does that
mean?***



**Who decides
which drugs are
on the ADL?**



Learn more about the ADL at [**priorityhealth.com/rx101**](https://priorityhealth.com/rx101).

What will it cost me?

Remove guesswork and reduce costs with Cost Estimator, powered by Healthcare Bluebook.

Did you know the price of a procedure can vary depending on where it's performed? Want to know what health care services will cost you?

Cost Estimator, powered by Healthcare Bluebook, is a tool that shows you an estimate of what in-network providers might charge for common medical services—so you can save money.

With Cost Estimator, you don't have to brace yourself for the bill. You can financially prepare for hundreds of services, whether you need to schedule a doctor's visit, get an MRI or plan for surgery.

Using Cost Estimator is as easy as 1, 2, 3.

- 1 Scan the QR code or sign up for a Priority Health member account to easily access Cost Estimator. Once logged in, click "Check a Procedure" under "Coverage check" and you will be directed to the tool through our trusted partner Healthcare Bluebook.
- 2 Search for estimates by procedure name, single billing code, or a provider name. Then, select a location or provider and compare costs for medical services.
- 3 Choose a location or provider and get a personalized out-of-pocket estimate of how much you'll pay based on your plan benefits and deductible amount.



Access Cost Estimator by logging into your member account at ***member.priorityhealth.com***.

Staying healthy and engaged

Your journey to health and wellness starts here.

We believe supporting the whole person is the way to achieve long-term health, and we know the health and wellness journey can look different for everyone. That's why these programs are designed to support the unique, personalized needs of Priority Health members through experiences that spark interest, encourage engagement and ultimately improve health.

Get discounted gym memberships.

What's the best way to break a sweat without breaking the bank? Active&Fit Direct™. It's a program designed to help you work out at one of our many fitness centers in Michigan—and more than 12,000 centers nationwide. Membership is \$28 per month, plus a one-time \$28 enrollment fee (plus applicable taxes).¹ Learn more at priorityhealth.com/activeandfit.



Get healthy tips and more.

Our digital magazine, *ThinkHealth*, offers the latest stories and information to help you live your healthiest life. Topics include personal well-being, nutrition, healthy tips and ways to save on your health care. Learn more at priorityhealth.com/thinkhealth.



Join PriorityVoice.

Your experience with Priority Health is important to us—so important we think you should have a say in how things run around here. You're invited to join PriorityVoice, an online community for our members, through which you can share your feedback. The information you provide will help us better serve you and more than 1 million members. Learn more and sign up at priorityvoice.com/c/r/join.



Become an Ambassador.

Priority Health has partnered with the National Fitness Campaign to build Fitness Courts in public spaces, with the goal of fighting obesity, improving quality of life and creating equitable access to exercise. Learn more about becoming a Fitness Court Ambassador at nationalfitnesscampaign.com/ambassador.



¹Participants must be 18 years of age and have a valid email address. Participants may pay by credit card and are charged in advance on a monthly basis using a recurring payment subscription. This is a per-member fee. Participants commit to three months of membership. If participants choose to cancel, they must provide a 30-day notice of cancellation. All payments are subject to tax, if applicable, based on the participant's location. Members are encouraged to enroll and pay their fees at the beginning of the month, as fees are charged on a per-calendar-month basis.

Exclusive programs



Get support when managing a chronic condition.

Managing a chronic condition? Our care management program puts your care front and center by pairing you with licensed nurses or social workers who are trained to help you manage chronic conditions including asthma, diabetes and depression. They can also help with new diagnoses, recent hospitalizations and more. Learn more at priorityhealth.com/caremanagement.



Prevent or manage your diabetes.

Did you know?

- One in 10 Americans are living with diabetes.¹
- Of those, 90%–95% have Type 2 diabetes.¹
- 96 million adults are living with prediabetes and aren't aware they could develop Type 2 diabetes.²

Priority Health members who are at risk, diagnosed with prediabetes or diagnosed with diabetes may be eligible to participate in our diabetes management and prevention programs that offer tools, resources and support through in-person or virtual classes. Learn more at priorityhealth.com/member/managing-your-health.



Digestive health support.

As a Priority Health member, you can access Ayble Health™, a virtual provider offering personalized digestive care through a virtual gastroenterology (GI) clinic. You'll have a comprehensive digestive care team that collaborates with your current provider, along with smart nutrition and stress relief tools to alleviate common digestive symptoms. Learn more at ayblehealth.com/priorityhealth.



There's more to Priority Health than costs and coverage.

A Priority Health plan comes with access to a number of unique, affordable health services. Here are just a few ways you can get the most out of a Priority Health plan through our exclusive, low- or no-cost programs.



Say what?

Heard about our hearing discount program? Priority Health members have access to discounts on hearing exams and hearing aids through our partnership with TruHearing. Learn more at priorityhealth.com/truhearing.



More for moms and babies.

PriorityMOM, which stands for Maternity Offering for Members, is designed to navigate health care costs and coverage through pregnancy and beyond. The goal is to promote more full-term pregnancies and offer helpful information on ways to stay happy and healthy throughout pregnancy. Learn more at priorityhealth.com/prioritymom.



PriorityBABY™ is Priority Health's premier family-first program, available to all members with newly added newborn dependents. The program is designed to support members and their little one, up to the baby's second birthday. The goal is to promote healthier and safer infant care for new caregivers by providing resources and information. Learn more at priorityhealth.com/joinprioritybaby.



Save on the brands you love.

Priority Health members can find deals on travel, restaurants, shopping, family care, car rentals and more through our easy-to-use online marketplace called BenefitHub. With exclusive offers, cash back and discounted gift cards to businesses near you, it's easy to save. Learn more at priorityhealth.com/benefithub.



Behavioral Health resources

Priority Health knows mental health issues can affect how we think, feel, act, handle stress, relate to others or make choices. Whether you're seeking treatment or simply searching for more information, we have many support options and free resources that can help.

Use the Teladoc Health Mental Health platform.

You have a free self-help resource waiting online.

Focusing on your emotional health is essential. As a Priority Health member, we encourage you to take advantage of Teladoc Health's Mental Health program.* This free mental wellness resource offers support for stress, depression, sleep and more to help you live your happiest and healthiest life. To get started, visit priorityhealth.com/mentalhealth to sign up for your free Teladoc Health account.



Find a provider.

Locate in-network help that fits your needs.

Our behavioral health network includes outpatient psychologists, licensed professional counselors, licensed master social workers, psychiatrists, behavior analysts and so many more. You can find a behavioral health specialist by using our Find a Doctor tool at priorityhealth.com/findadoc or directly through your Priority Health app or member account. In the tool, click on **Advanced Search** and use the **Areas of Focus** and **Specialty filters** to find a list of behavioral health specialists who match the areas of expertise you are seeking.



Call us directly.

Priority Health remains committed to your mental well-being.

Navigating the behavioral health system can be tough. We have a team of behavioral health specialists who can talk to you about your health coverage, treatment options and find in-network specialists. They can even help you determine whether outpatient care or inpatient care will best meet your needs. Just call the number on the back of your member ID card or **800.673.8043 (TTY: 711)**. Crisis support is available 24 hours a day, seven days a week.

You may also call or text 988 anytime to receive emotional support outside of Priority Health. Additionally, if you are experiencing immediate safety concerns or need medical attention, we encourage you to call 911 or to go the nearest emergency room.



Questions? Call customer service.

Did you know our customer service team members have won awards for being helpful, efficient and there when you need them? If you have questions regarding your health plan, please call the number listed on the back of your member ID card to be connected with a customer service representative.

Each representative is located right here in Michigan and is available:

- Monday to Thursday, 7:30 a.m. to 7 p.m. Eastern Time
- Friday, 9 a.m. to 5 p.m. Eastern Time
- Saturday, 8:30 a.m. to noon Eastern Time



Notes

Priority Health complies with applicable civil rights laws and does not discriminate, exclude people, or treat them differently on the basis of race, color, ethnicity, national origin, age, HIV status, marital status, sex (as defined by law and Priority Health policy), sexual orientation, gender identity or expression, disability, religion, socioeconomic status or source of payment for service, height, weight, veteran status, association or any other protected characteristic based on federal, state or local law.

Priority Health provides free language services to people whose primary language is not English, which may include:

- Qualified interpreters.
- Information written in other languages.

Priority Health provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:

- Qualified sign language interpreters.
- Written information in other formats (e.g. large print, audio, accessible electronic).

If you need reasonable modifications, appropriate auxiliary aids and services or language assistance services, visit priorityhealth.com/contact-us.

If you believe that Priority Health has failed to provide these services or discriminated in another way on the basis of race, color, ethnicity, national origin, age, HIV status, marital status, sex (as defined by law and Priority Health policy), sexual orientation, gender identity or expression, disability, religion, socioeconomic status or source of payment for service, height, weight, veteran status, association or any other protected characteristic based on federal, state, or local law, you can file a grievance in person or by mail, phone, fax or email. The Section 1557 Civil Rights Coordinator can answer questions and help file a grievance by:

Mail: Attention: Section 1557 Civil Rights Coordinator
Compliance Department MC 3230
Priority Health
1231 East Beltline Ave NE Grand Rapids, MI 49525-4501

Phone: 866.807.1931 (TTY: 711)

Fax: 616.975.8850

Email: PH-compliance@priorityhealth.com

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, the Priority Health civil rights coordinator is available to help you.

You can also file a civil rights complaint with the Office for Civil Rights (OCR) at the U.S. Department of Health and Human Services (HHS) by:

Mail: 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

Phone: 800.368.1019 (TTD: 800.537.7697)

Form: hhs.gov/civil-rights/filing-a-complaint

We offer free language assistance services and auxiliary aids and services.

Arabic (العربية) - تنبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على الرقم 800.942.0954 (TTY: 711) أو تحدث إلى مقدم الخدمة.

Hindi (हिंदी) - ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध होती हैं। सुलभ प्रारूपों में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएँ भी निःशुल्क उपलब्ध हैं। 800.942.0954 (TTY: 711) पर कॉल करें या अपने प्रदाता से बात करें।

Italian (Italiano) - ATTENZIONE: se parli Italiano, sono disponibili servizi di assistenza linguistica gratuiti. Sono inoltre disponibili gratuitamente ausili e servizi ausiliari adeguati per fornire informazioni in formati accessibili. Chiama l'800.942.0954 (TTY: 711) o parla con il tuo fornitore.

Japanese (日本語) - 注: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。アクセシブル(誰もが利用できるよう配慮された)な形式で情報を提供するための適切な補助支援やサービスも無料でご利用いただけます。800.942.0954 (TTY: 711) までお電話ください。または、ご利用の事業者にご相談ください。

Korean (한국어) - 주의: [한국어]를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 800.942.0954 (TTY: 711) 번으로 전화하거나 서비스 제공업체에 문의하십시오.

Polish (Polski) - UWAGA: Osoby mówiące po polsku mogą skorzystać z bezpłatnej pomocy językowej. Dodatkowe pomoce i usługi zapewniające informacje w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer 800.942.0954 (TTY: 711) lub porozmawiaj ze swoim dostawcą.

Russian (Русский) - ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 800.942.0954 (TTY: 711) или обратитесь к своему поставщику услуг.

Serbian (Srpski) - ПАЖЊА: Ако говорите језиком који није енглески, доступне су вам услуге бесплатне помоћи у вези језика. Одговарајућа помоћна средства и услуге ради пружања информација у приступачном формату су такође доступни без накнаде. Позовите 800.942.0954 (TTY: 711) или разговарајте са пружаоцем услуга.

Spanish (Español) - ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 800.942.0954 (TTY: 711) o hable con su proveedor.

Tagalog - PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyonang tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 800.942.0954 (TTY: 711) o makipag-usap sa iyong provider.

Urdu (اردو) - توجہ دیں: اگر آپ اردو بولتے ہیں، تو آپ کے لیے زبان کی مفت مدد کی خدمات دستیاب ہیں۔ قابل رسائی فارمیٹس میں معلومات فراہم کرنے کے لیے مناسب معاون امداد اور خدمات بھی مفت دستیاب ہیں 800.942.0954 (TTY: 711) پر کال کریں یا اپنے فراہم کنندہ سے بات کریں۔

Vietnamese (Tiếng Việt) - LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 800.942.0954 (TTY: 711) hoặc trao đổi với người cung cấp dịch vụ của bạn.

