

Over 5,000 5 Star enrollments YTD!

70% of these have come from agents. Thank you!

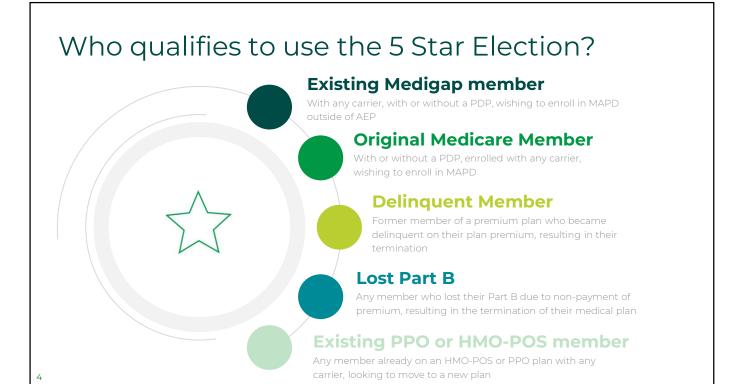
	2023	Example
New to Medicare Advantage	\$601	Medigap to MAPD conversion
New to Priority Health	\$301*	Competitor to Priority

You can leverage this opportunity until November 30, 2023.

*Distributed on a lump sum, prorated basis.

O Priority Health

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AGENT EXPERIENCE

2024 commission rates



	2023	2024
New to Medicare Advantage	\$601	\$611
New to Priority Health (not new to MA)	\$301	\$306*
Priority Health renewal (including plan changes and AOR)	\$301	\$306**

^{*}Distributed on a lump sum, prorated basis.



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Agenda

01 WHY PRIORITY HEALTH?

02 2024 PRODUCT HIGHLIGHTS

03 2024 PLAN DETAILS

04 EMBEDDED EXTRAS

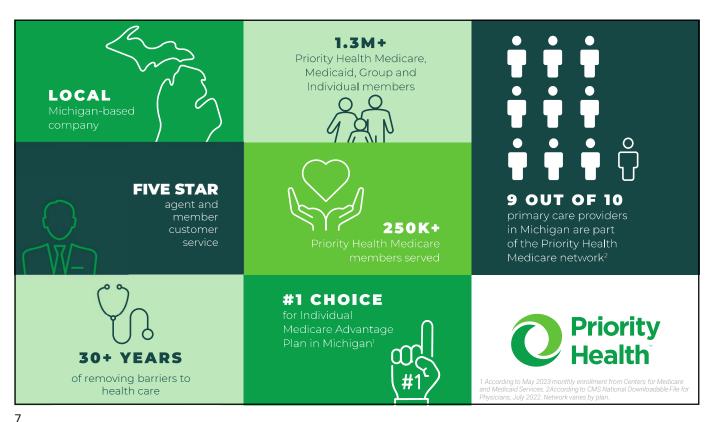
05 PHARMACY

06 MEDIGAP

07 AGENT EXPERIENCE

O Priority Health

^{**}Distributed on a monthly prorated basis at \$25.50 each month a renewing member is enrolled.



2024 PRODUCT HIGHLIGHTS

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Highlights



- Both of our D-SNP plans have been approved to participate in the VBID model for plan year 2024. (Value Based Insurance Design)
- As part of VBID, D-SNP members are targeted by socioeconomic status (LIS) and will be provided the following enhanced benefits:
 - o PriorityFlex card with access to OTC, food, utilities, and pest control
 - o \$0 Part D drugs across any tier.
- All premium plans now include a quarterly OTC allowance.
- We have ended our partnership with Kroger and expanded access to members. The plans have been renamed to **Priority**Medicare Thrive (PPO) and **Priority**Medicare D-SNP Advantage (HMO).
 - o Both plans have expanded to all of Region 5
- Members can receive their annual wellness visit (AWV) once per calendar year instead of the previous once per 11 months.



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2024 PLAN DETAILS

Plan Details

Why our plans lead the charge

- There are two major differences between our HMO-POS and PPO plans:
 - Members on HMO-POS plans MUST have an assigned primary care provider.
 - 2. Members on HMO-POS plans **MUST** get prior authorization for certain services when out-of-network. PPO members do not need to get prior authorization when using out-of-network providers.
- Besides that, our HMO-POS plans act the exact same as our PPO plans. Most benefits are offered both in- or- out-of-network on either plan type.
- Please remember: to be considered HMO-POS, plans only need to offer one benefit out-of-network



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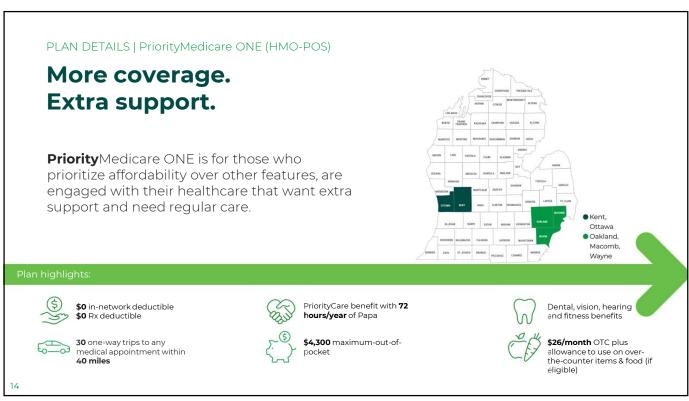
Plan Details

Even better, these PPOs have an Open Network

- We offer three open network PPO plans:
 - o **Priority**Medicare Vital (regions 1, 2 and 5)
 - o **Priority**Medicare Compass (regions 3 and 4)
 - o **Priority**Medicare Thrive (region 5)
- This means that members of these three plans will have the same costshare whether they see an in- or- out-of-network provider. It does not matter where they are in the state of Michigan or across the country.







PLAN DETAILS

PriorityMedicare ONE (HMO-POS)

In-network benefit	2023	2024
Medical deductible	\$0	\$0
PCP visit	\$0	\$0
Specialist visit	\$35	\$35
Cardiac/pulmonary rehab.	\$20	\$20/ \$15
Inpatient hospital	\$285/day, days 1-7	\$285/day, days 1-7
Outpatient hospital	\$285	\$285
Labs/tests & procedures	\$0 anticoagulant labs \$10 all other	\$0 anticoagulant labs \$10 all other
Diagnostic radiology (i.e., MRI)	\$175	\$175
Outpatient behavioral health visit	\$20	\$20
Ambulance (transport or treat/non-transport)	\$285	\$285

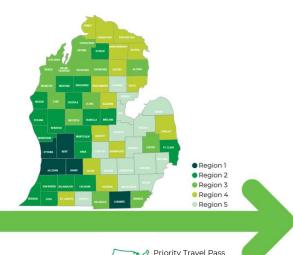
In-network benefit	2023	2024
ER/Observation/UC	\$110/\$110/\$35	\$120/\$120 /\$35
Max out-of-pocket	\$4,300	\$4,300
Routine chiro (limit 12)	\$20	\$20
Virtual visits (PCP, specialist & behavioral health provider)	\$0	\$0
Rx deductible	\$0	\$0
Rx preferred	\$0/\$10/\$42/45%/33%	\$0/\$10/\$42/45%/33%
Tier 1 (90-day preferred retail)	\$0	\$0
Tier 1 & Tier 2 (90-day mail order)	\$0/\$0	\$0/\$0
OTC Plus	\$15/M for OTC + Food if SSBCI eligible	\$26 /M for OTC + Food if SSBCI eligible

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PLAN DETAILS | PriorityMedicare Key (HMO-POS)

Most popular \$0 plan. Better benefits.

PriorityMedicare Key is for those who want affordable medical coverage. These members do not want their illness to take over their life, so they are looking for medical benefits designed around them.



Plan highlights:



\$0 In-network medical deductible **\$0** Rx deductible



\$0 PCP & **\$0** virtual visits for PCP, Specialists and Behavioral Health appointments



Embedded comprehensive dental up to **\$2,500** per year

\$74-\$100/quarter OTC plus allowance to use on over-the-counter items & food (if eligible)



Priority Travel Pass gives you in-network coverage wherever you go



Free and convenient fitness program giving you access to classes and centers nationwide

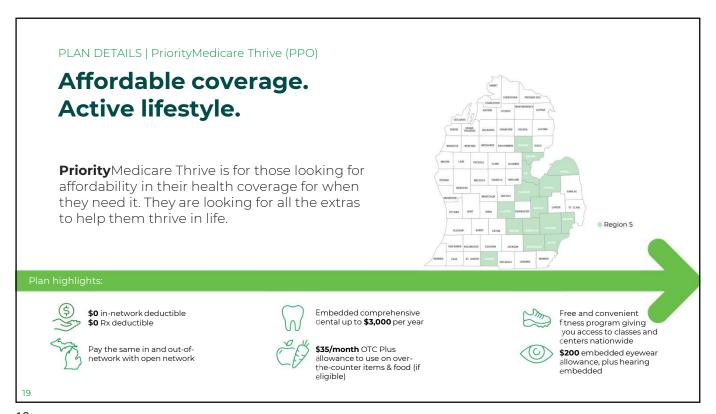
PLAN DETAILS PriorityMedicare Key (HMO-POS)

In-network benefit		2024
Medical deductible	\$0	\$0
PCP visit	\$0 (Regions 1, 2 & 5) \$10 (Regions 3 & 4)	\$0 (Regions 1, 2 & 5) \$10 (Regions 3 & 4)
Specialist visit	\$45	\$45
Cardiac/pulmonary rehab.	\$20	\$20/ \$15
Inpatient hospital	\$325/day, days 1-6	\$320/day, days 1-7
Outpatient hospital	\$290	\$290
Labs/tests & procedures	\$0 anticoagulant labs \$10 all other	\$0 anticoagulant labs \$10 all other
Diagnostic radiology (i.e MRI)	\$160 (1, 2, 3 & 4) \$130 (5)	\$160 (1, 2, 3 & 4) \$160 (5)
Outpatient behavioral health visit	\$20	\$20
Ambulance (transport or treat/non-transport)	\$270	\$270

In-network benefit	2023	2024
ER/Observation/UC	\$110/\$110/\$50	\$120/\$120 /\$50
Max out-of-pocket	\$5,000 (1, 2, 5) \$5,500 (3 & 4)	\$5,000 (1, 2, 5) \$5,500 (3 & 4)
Routine chiro (limit 12)	\$20	\$20
Virtual visits (PCP, specialist & behavioral health provider)	\$0	\$0
Rx deductible	\$0 All Tiers	\$0 All Tiers
Rx preferred	\$4/\$15/\$42/45%/33%	\$4/\$15/\$42/45%/33%
Tier 1 (90-day preferred retail)	\$0	\$0
Tier 1 & Tier 2 (90-day mail order)	\$0/\$0	\$0/\$0
отс	\$80/Q (1 & 2) - OTC only \$75/Q (5) - OTC only \$55/Q (3 & 4) - OTC only	\$100/Q (1 & 2) \$95/Q (5) \$74/Q (3 & 4) for OTC + Food if SSBCI eligible

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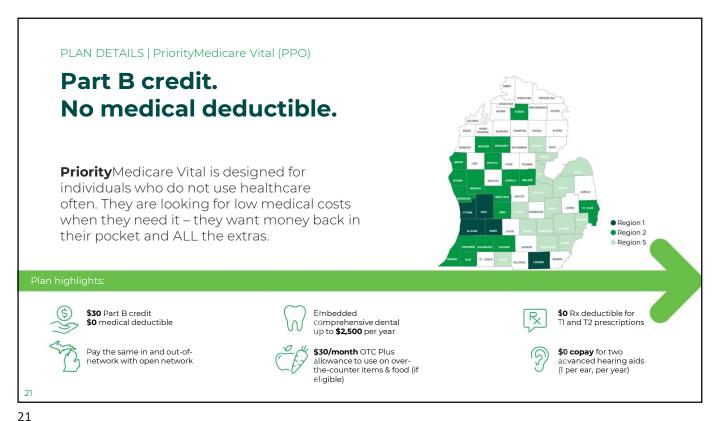
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PLAN DETAILS

PriorityMedicare Thrive(PPO)

		2024	In-network benefit		
Medical deductible	\$0	\$0	ER/Observation/UC	\$110/\$110/\$40	\$120/\$120 /\$40
PCP visit	\$0	\$0	Max out-of-pocket	\$4,900	\$5,200
Specialist visit	\$40	\$40	Routine chiro (limit 12)	\$20	\$20
Cardiac/pulmonary rehab.	\$20	\$20/ \$15	Virtual visits (PCP, specialist & behavioral	\$O	\$0
Inpatient hospital	\$325/day, days 1-5	\$320/day, days 1-7	health provider)		
Outpatient hospital	\$275	\$275	Rx deductible	\$0	\$0
Labs/tests & procedures	\$0	\$0	Rx preferred	\$3/\$10/\$42/45%/33%	\$3/\$10/\$42/45%/339
Diagnostic radiology (i.e., MRI)	\$275	\$275	Tier 1 (90-day preferred retail)	\$0	\$0
Outpatient behavioral health visit	\$20	\$20	Tier 1 & Tier 2 (90-day mail order)	\$0/\$0	\$0/\$0
Ambulance (transport or treat/non-transport)	\$290	\$290	ОТС	\$25/M for OTC + Food if SSBCI eligible	\$35/M for OTC + Food if SSBCI eligible

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PLAN DETAILS

PriorityMedicare Vital(PPO)

			In-network benefit		
Medical deductible	\$0	\$0	ER/Observation/UC	\$110/\$110/\$60	\$120/\$120 /\$60
PCP visit	\$0	\$0	Max out-of-pocket	\$4,900	\$5,100
Specialist visit	\$50	\$50	Routine chiro (limit 12)	\$20	\$20
Cardiac/pulmonary rehab.	\$20	\$20/ \$15	Virtual visits (PCP, specialist & behavioral	\$0	\$0
Inpatient hospital	\$350/day, days 1-5	\$350/day, days 1-5	health provider)		
Outpatient hospital	\$300	\$300	Rx deductible	\$350 (tiers 3-5)	\$350 (tiers 3-5)
Labs/tests & procedures	\$0	\$0	Rx preferred	\$1/\$10/\$42/45%/26%	\$1/\$10/\$42/45%/26
Diagnostic radiology (i.e., MRI)	20%	20%	Tier 1 (90-day preferred retail)	\$0	\$0
Outpatient behavioral health visit	\$20	\$20	Tier 1 & Tier 2 (90-day mail order)	\$0/\$0	\$0/\$0
Ambulance (transport or treat/non-transport)	\$265	\$265	OTC	\$20/M for OTC + Food if SSBCI eligible	\$30/M for OTC + Food if SSBCI eligible

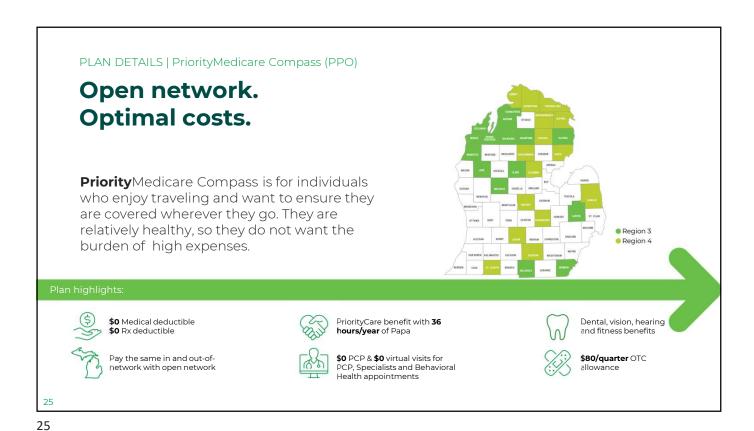


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PLAN DETAILS

PriorityMedicare Edge (PPO)

		2024	In-network benefit		
Medical deductible	\$0	\$0	ER/Observation/UC	\$110/\$110/\$30	\$120/\$120 /\$30
PCP visit	\$0	\$0	Max out-of-pocket	\$5,300	\$5,300
Specialist visit	\$45	\$45	Routine chiro (limit 12)	\$20	\$20
Cardiac/pulmonary rehab.	\$20	\$20/ \$15	Virtual visits (PCP, specialist & behavioral	\$0	\$0
Inpatient hospital	\$350/day, days 1-5	\$320/day, days 1-7	health provider)		
Outpatient hospital	\$325	\$325	Rx deductible	\$0	\$0
Labs/tests & procedures	\$0	\$0	Rx preferred	\$2/\$8/\$38/40%/33%	\$2/\$8/\$38/40%/33%
Diagnostic radiology (i.e., MRI)	\$270	\$270	Tier 1 (90-day preferred retail)	\$0	\$0
Outpatient behavioral health visit	\$20	\$20	Tier 1 & Tier 2 (90-day mail order)	\$0/\$0	\$0/\$0
Ambulance (transport or treat/non-transport)	\$275	\$275	OTC	\$60/Q	\$95/Q



PLAN DETAILS

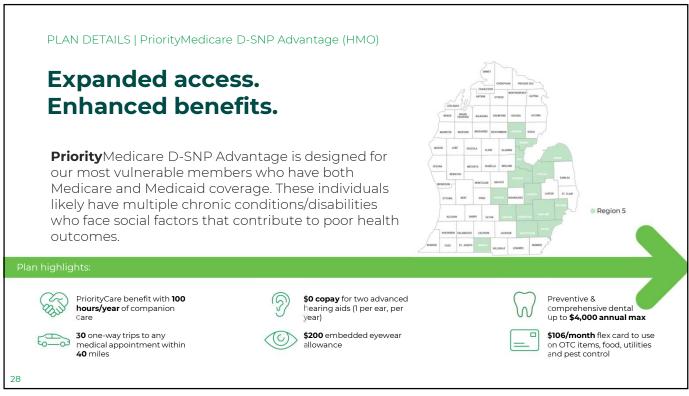
PriorityMedicare Compass (PPO)

In-network benefit		
Medical deductible	\$0	\$0
PCP visit	\$0	\$0
Specialist visit	\$50	\$50
Cardiac/pulmonary rehab.	\$20	\$20/ \$15
Inpatient hospital	\$350/day, days 1-5	\$320/day, days 1-7
Outpatient hospital	\$325	\$325
Labs/tests & procedures	\$0 for anticoagulant labs \$20 for all other	\$0 for anticoagulant labs \$20 for all other
Diagnostic radiology (i.e., MRI)	\$275	\$275
Outpatient behavioral health visit	\$20	\$20
Ambulance (transport or treat/non-transport)	\$325	\$325

		2024
ER/Observation/UC	\$110/\$110/\$30	\$120/\$120 /\$30
Max out-of-pocket	\$5,650	\$5,650
Routine chiro (limit 12)	\$20	\$20
Virtual visits (PCP, specialist & behavioral health provider)	\$0	\$0
Rx deductible	\$0 All Tiers	\$0 All Tiers
Rx preferred	\$4/\$15/\$42/45%/33%	\$4/\$15/\$42/45%/33%
Tier 1 (90-day preferred retail)	\$0	\$0
Tier 1 & Tier 2 (90-day mail order)	\$0/\$0	\$0/\$0
OTC	\$35/Q	\$80/Q

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PLAN DETAILS

PriorityMedicare D-SNP Advantage (HMO)

In-network benefit	2023	2024
Medical deductible	\$0	\$0
PCP visit	\$0	\$0
Specialist visit	\$0	\$0
Cardiac/pulmonary rehab.	\$0	\$0
Inpatient hospital	\$0	\$0
Outpatient hospital	\$0	\$0
Labs/tests & procedures	\$0	\$0
Diagnostic radiology (i.e., MRI)	\$0	\$0
Outpatient behavioral health visit	\$0	\$0
Ambulance (transport or treat/non-transport)	\$0	\$0

In-network benefit	2023	2024
ER/Observation/UC	\$0	\$0
Max out-of-pocket	\$0	\$0
Rx deductible	\$0	\$0

All services covered by Original Medicare are a \$0 liability to the D-SNP member

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PLAN DETAILS | PriorityMedicare D-SNP (HMO) Statewide coverage. Seamless support. **Priority**Medicare D-SNP is designed for our most vulnerable members who have both Medicare and Medicaid coverage. These individuals likely have multiple chronic conditions/disabilities. They also Region 1 face social factors that contribute to poor health and Region 2 Region 3 outcomes. Region 4 Region 5 PriorityCare benefit with \$0 copay for two advanced Preventive & comprehensive dental up to \$2,500 annual max 100 hours/year of hearing aids (1 per ear, per companion care 30 one-way trips to any \$200 embedded eyewear \$222/quarter flex card to medical appointment within use on OTC items, food, . allowance 40 miles utilities and pest control

PLAN DETAILS

PriorityMedicare D-SNP (HMO)

In-network benefit		
Medical deductible	\$0	\$0
PCP visit	\$0	\$0
Specialist visit	\$0	\$0
Cardiac/pulmonary rehab.	\$0	\$0
Inpatient hospital	\$0	\$0
Outpatient hospital	\$0	\$0
Labs/tests & procedures	\$0	\$0
Diagnostic radiology (i.e., MRI)	\$0	\$0
Outpatient behavioral health visit	\$0	\$0
Ambulance (transport or treat/non-transport)	\$0	\$0

In-network benefit	2023	2024
ER/Observation/UC	\$0	\$0
Max out-of-pocket	\$0	\$0
Rx deductible	\$0	\$0

All services covered by Original Medicare are a \$0 liability to the D-SNP Advantage member

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	Region 1	Region 2	Region 3	Region 4		DV Package Buy-up
PriorityMedicare ONE (HMO-POS)	\$0 in l		awa, Wayr omb coui	ne, Oaklan nties	id and	\$42
Priority Medicare Key (HMO-POS)	\$0	\$0	\$0	\$0	\$0	\$33
Priority Medicare Value (HMO-POS)	\$12	\$31	\$68	\$43	\$31	\$42
PriorityMedicare (HMO-POS)	\$74	\$79	\$113	\$103	\$59	\$42
Priority Medicare Thrive (PPO)					\$0	\$33
PriorityMedicare Vital (PPO)	\$0	\$0			\$0	\$33
PriorityMedicare Edge (PPO)	\$0	\$0			\$0	\$42
Priority Medicare Compass (PPO)			\$0	\$0		\$42
PriorityMedicare Ideal (PPO)	\$19	\$19	\$19	\$19	\$19	\$42
PriorityMedicare Merit (PPO)	\$60	\$73	\$104	\$118	\$95	\$42
PriorityMedicare Select (PPO)	\$157	\$147	\$206	\$223	\$212	\$42
Priority Medicare D-SNP Advantage					\$0	N/A
Priority Medicare D-SNP	\$0	\$0	\$0	\$0	\$0	N/A



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Embedded Extras

Great benefits. Great Support.

Supplemental Benefit	Medicare					Edge	Compass	Key	Vital		ONE	D-SNP	D-SNP Advantage
Abridge®	1	✓	1	✓	1	1	✓	✓	1	1	1	✓	1
myStrength®	✓	✓	✓	1	✓	✓	✓	✓	1	1	1	✓	✓
BrainHQ®	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	1
OTC only	\$40/Q	\$25/Q	\$25/Q	\$40/Q	\$80/Q	\$95/Q	80/Q		-	-	-	-	-
OTC + Food *Food if SSBCI	-	-	-	-	-	-	-	Key 182 \$100/Q Key 384 \$74/Q Key 5 \$95/Q	\$30/M	\$35/M	\$26/M	-	-
Mom's Meals®	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Multiplan®	✓	✓	1	✓	✓	1	✓	✓	1	✓	✓	-	-
Assist America®	✓	✓	1	1	✓	✓	✓	✓	1	✓	✓	-	-
Papa®					48 hours/year	48 hours/year	36 r hours/year				72 hours/year	100 hours/year	100 hours/yea
SilverSneakers®	✓	✓	✓	✓	✓	✓	1	✓	✓	✓	✓	1	✓
PERs	-	-	-	-	-	-	-	-	-	-	-	✓	✓
Transportation (Saferide®)	-	-	-	-	-	-	-	-	-	-	✓	✓	1
PriorityFlex												\$222/Q	\$106/M

Dental Coverage



- Largest network of dentists in Michigan
- Same great \$0 preventive dental on all Priority Health Medicare plans.
- PriorityMedicare D-SNP and PriorityMedicare D-SNP Advantage include the following comprehensive dental services:
 - o 100% coverage for two additional periodontal maintenance cleanings, non-surgical periodontal procedures, simple and surgical extractions of teeth, fillings and crown repairs, bridges and dentures (including relines and repairs), and anesthesia when used during any of the services above.
- Annual maximums on D-SNP plans apply to both preventive and comprehensive services
 - o **Priority**Medicare D-SNP: \$2,500
 - 🕝 o 🏻 **Priority**Medicare D-SNP Advantage: \$4,000

*D-SNP plan members only have access to the Delta Dental PPO network



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Embedded Extras

Dental Coverage



- Comprehensive dental on **Priority**Medicare Key, **Priority**Medicare Thrive and **Priority**Medicare Vital includes:
 - o 100% coverage for fillings, crown repairs, non-surgical ("simple") extractions and anesthesia when used during any of these services.
- Annual maximums on these three plans applies ONLY to comprehensive dental services:



- o **Priority**Medicare Key: \$2,500
- o **Priority**Medicare Vital: \$2,500
- o **Priority**Medicare Thrive: \$3,000



Vision Coverage



- Medical coverage: \$0 annual glaucoma screenings and annual diabetic retinopathy screenings. A specialty copay applies for Medicare-covered exams to diagnose and treat disease or conditions of the eye.
- Members will pay an outpatient surgery copay for cataract surgery. There is a chance the member may pay up to a 20% coinsurance for a Part B injection if it goes beyond the standard procedure.
 - o After surgery there is a \$0 copay Medicare-covered eyewear after each cataract surgery that includes insertion of an intraocular lens.



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Embedded Extras

Vision Coverage



- Routine coverage: provided by EyeMed[®]
- 100% coverage for one routine eye exam including refraction and dilation and one non-Medicare covered retinal imaging and a \$100-\$200 eyewear allowance depending on plan.
- Members can use services with a non-EyeMed provider
 - o Up to \$50 reimbursement for one routine vision exam, including dilation and refraction, as necessary.
 - o Up to \$20 reimbursement for non-Medicare covered retinal imaging.
 - Member can use their eyewear allowance out-of-network but they will have to submit for reimbursement.



Optional **enhanced** dental and vision

	PM Key, PM Vital and PM Thrive	PM Value, PM Merit, PM, PM Select, PM Ideal, PM Compass, PM Edge and PM ONE	
Monthly premium	\$33	\$42	
Dental (Delta Dental®)	\$0 copay for emergency treatment of dental pain, anesthesia and one fluoride treatment	\$0 copay for fillings, crown repairs, emergency treatment of dental pain, anesthesia and one fluoride treatment	
	50% coinsurance for crowns/onlays, root canals, denture relines & repairs, bridge repairs and surgical extractions/oral surgery	50% coinsurance for crowns/onlays, root canals, denture relines & repairs, bridge repairs, simple extractions and surgical extractions/oral surgery	
	50% coinsurance for implants & implant	50% coinsurance for implants & implant repairs	
	repairs	50% coverage for dentures \$2,500 annual coverage limit	
	50% coverage for dentures		
	\$2,500 annual coverage limit	42,000 dimidal obvoluge illini	
Vision (EyeMed®)	\$150 additional eyewear allowance per year w	vith OON reimbursement option	

O Priority Health

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Optional enhanced dental and vision

- Available to individual Priority Health Medicare Advantage members
 - o Runs on calendar year, no deductibles and no waiting periods and benefits are offered as a package
- Easy to enroll
 - o Either click the box during MAPD enrollment, or enroll within two months of a member's MAPD effective date at *priorityhealth.com/enrollDV*
- Find in-network providers
 - Dental: priorityhealth.com/findadoc, choose Medicare plans and then dental by Delta Dental
 - o Vision: *priorityhealth.com/findadoc*, choose Medicare plans and then vision, by EyeMed..



Hearing Coverage



- Hearing coverage provided by TruHearing®
 - o Members should call TruHearing to set up their first appointment.
- 100% coverage for one routine hearing exam every year.
- Hearing aid coverage:
 - PriorityMedicare D-SNP, PriorityMedicare D-SNP Advantage and PriorityMedicare Vital include 100% coverage for two Advanced Aids, one per ear per year.
 - o All other Priority Health Medicare plans cover hearing aids on a 4-tier copay structure. Aids range from \$295-\$1,495.



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Embedded Extras

PriorityCare

PriorityCare is our benefit package that includes all of the services offered by Papa on select plans.

- 1. In-person or virtual **companion care**
 - o Hourly allowances moving from monthly to yearly, allowing members greater flexibility to use as needed.
 - o Papa Pals can help with things such as:
 - Household chores
 - Transportation
 - Grocery shopping
 - Light meal prepping
 - Companionship
 - Technical set-up and how-to
- 2. Unlimited **Social Care Navigation** to help members navigate plan benefits, find providers, schedule doctor appointments, transportation, etc.



Embedded hours per plan:

Plan	Companion Care	Social Care Navigation
PM Compass	36 hrs/year	Unlimited
PM Edge	48 hrs/year	Unlimited
PM Ideal	48 hrs/year	Unlimited
PM ONE	72 hrs/year	Unlimited
PM D-SNP	100 hrs/year	Unlimited
PM D-SNP Advantage	100 hrs/year	Unlimited

Priority Health

PriorityCare



- 3. Unlimited **Caregiver Support** for D-SNP members including:
 - · Care advocates that have a vast knowledge of topics such as;
 - o Social needs
 - o Housing insecurities and resources
 - o Family communication coaching
 - o Community services
 - o And more...
 - Care advocates have all been caregivers themselves

Plan Monthly Amt
PM D-SNP Unlimited
PM D-SNP Unlimited
Advantage



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Embedded Extras

Transportation





- Lyft and Uber are part of the SafeRide® network
- Coverage includes 30 one-way trips per year; up to 40 miles per one-way trip; to/from healthrelated locations



Plan
PM ONE
PM D-SNP

PM D-SNP Advantage

O Priority Health

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Over-the-Counter (OTC) Allowance



- Powered by Convey/InComm[®]
- Three convenient ways to shop:
 - o Buy online or via mobile app
 - o Call to order
 - Buy in store (Meijer/Walmart/ CVS/Kroger/Walgreens/Rite Aid/Family Dollar/Dollar General)
- Free shipping on all online and phone orders. Limit of 3 phone/online orders per quarter

Embedded OTC quarterly allowance per plan: **Quarterly Amt*** Plan PM Edge \$95 **PM Compass** \$80 PM Ideal **PM Value** \$40 РМ \$40 **PM Select** \$25 **PM Merit** \$25 *Amounts do not roll over

NEW

Priority Health

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Embedded Extras

OTC Plus Allowance



- All members who have OTC Plus can use their monthly allowance on OTC items.
- Healthy food and produce can be purchased at the same in-store retailers as OTC but can also be used towards meal/pantry boxes through Mom's Meals®.
- To be eligible for healthy food and produce members must meet **all of** the following criteria:
 - o Have one or more of the qualifying comorbid and medically complex chronic conditions (Obesity added to criteria in 2024).
 - A high risk of hospitalization or other adverse health outcomes
 - o Require intensive care coordination

Plan Monthly Amt*

PM ONE \$26/Month

PM Vital \$30/Month

PM Thrive \$35/Month

PM Key 1 & 2 \$100/Quarter

PM Key 3 & 4 \$74/Quarter

PM Key 5 \$95/Quarter

Embedded OTC Plus allowance per plan:

*Amounts do not roll over

Priority Health

Special Supplemental Benefits for the Chronically III (SSBCI)

- Only applies to OTC Plus benefit.
- CMS recognizes certain chronic conditions that meet SSBCI criteria (listed in member EOC), and we have added obesity as a condition to increase access and eligibility to our members.
- · To be eligible for SSBCI members can qualify one of three ways.
 - 1. Claims Data existing members will not have to do anything, we will pull the data and ensure on 1/1/24 they can purchase healthy food and produce with their OTC Plus card.
 - 2. HRA Data once HRA is completed, we will pull the data and if the member is eligible, they will be able to purchase healthy food and produce the first of the month following the HRA completion date.
 - 3. Complete our online survey if they are eligible, they will know upon completion of the survey. They can use their allowance towards healthy food and produce the first of the next month, following the day they took the survey.



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Embedded Extras

PriorityFlex Allowance



- Included on both **Priority**Medicare D-SNP and **Priority**Medicare D-SNP Advantage
- To qualify for this benefit member must have a low-income subsidy (LIS) of any level all D-SNP members should qualify.
- PriorityFlex allowance can be used towards:
 - o OTC (can be purchased the same way as all other OTC allowances)
 - o Food (can be purchased at the same retailers as OTC Plus)
 - o Pest control services
 - Utilities (water, sewer, electric, gas, trash, septic, internet and phone)
- Members will receive a VISA card. They should be able to pay bills/purchase services the same as they would with any other VISA card they have.

Embedded PriorityFlex allowance per plan:

Plan	Amount
PM D-SNP	\$222/Quarter
PM D-SNP Advantage	\$106/Month

*Amounts do not roll over



Low Income Subsidy (LIS)

- Only applies to PriorityFlex and \$0 Part D benefits on both D-SNP plans.
- Both of our D-SNP plans are participating in the VBID model in 2024 which allows us to target members by socioeconomic status (LIS).
- Most of our D-SNP members have a LIS status which means they are all eligible for these benefits. *If the member does not have LIS and needs help enrolling, please reach out to our customer service team.
- **Please remember**: LIS status is separate from Medicaid eligibility. If a D-SNP member loses full Medicaid coverage they will still fall into the grace period and be responsible for any cost-share. PriorityFlex and \$0 Part D cost-share will not be affected by the grace period, these benefits will remain the same.



Embedded Extras

Chiropractic Coverage



- \$20 copay per service*
- All our plans offer manual manipulation of the spine to correct subluxation.
- Beyond standard coverage, non-Medicare routine visits are covered on: Compass, Edge, Ideal, Key, ONE, Thrive, Vital and both D-SNP plans.
 - Routine coverage can be used for conditions including, but not limited to, back pain, neck pain, and headache.
 - Limited to 12 routine visits and one non-Medicare covered x-ray per year.

*\$0 copay for **Priority**Medicare D-SNP and **Priority**Medicare D-SNP Advantage



Acupuncture



- \$20 copay per session*
- Up to 20 Medicare-covered sessions for chronic lower back pain
- Plus, 6 non-Medicare covered sessions for other conditions such as:
 - o Chronic pain (not lower back pain)
 - o Anxiety and sleep problems
 - o Headaches
 - o Chemo side effects

*\$0 copay for **Priority**Medicare D-SNP and **Priority**Medicare D-SNP Advantage



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Embedded Extras

Abridge



- Embedded on all Priority Health Medicare Advantage plans.
- Abridge is a smartphone-based application that allows members to record conversations with their physicians.
- Members need to download the Abridge app and ask providers for permission to record to use the app.
 - o A transcription of the appointment is automatically created to allow the user to go back and revisit any part of the conversation.
 - o The app automatically finds the key points to provide helpful medical terms.
 - o Member can access medical conversations in the app and share with caregivers, family, etc. who can access recordings via the app too.



Personal Emergency Response(PERS)



- Powered by Critical Signal Technologies (CST)
- CST can utilize cellular networks, ensuring PERS works anywhere, not only at home
- All D-SNP members can obtain a device without meeting eligibility criteria*
- Care manager will coordinate PERS device for the members along with the risk of falling assessment which is done as part of the individual care plan assessment.

PERS coverage is included in enhanced disease management on all individual MAPD plans. Only available to members meeting certain criteria



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Embedded Extras

Fitness benefits with SilverSneakers®



- Embedded on all Priority Health Medicare Advantage plans.
- Robust at-home options
 - o Over 100 on-demand classes designed for all abilities.
 - o SilverSneakers GO ™ fitness app for additional workout ideas
 - o Fitness kits (toning, strength, yoga and walking).
- Over 480 facilities in Michigan and 16,000 nationwide find a participating location at silversneakers.com
- Members can "gym hop" at home or when traveling.
- Tuition rewards; members can earn in-person or virtually



Brain HQ



- Embedded on all Priority Health Medicare Advantage plans.
- "A personal gym for the brain"
- 29 online exercises that help with attention, brain speed, memory, people skills, navigation and intelligence
- Can be accessed via computer, tablet, smartphone, etc.



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Embedded Extras

myStrength



- Embedded on all Priority Health Medicare Advantage plans.
- Access to online mental wellness tools to help manage depression, sleep better, reduce stress, find daily inspiration and improve mood.
- Members can opt-in to having a dedicated one-on-one coach while they go through this program.
- Over 1,400 self-directed activities, each just 3-5 minutes.



Mom's meals®



- Eligible to anyone following an inpatient discharge from inpatient acute hospital, psychiatric hospital or SNF facility.
- \$0 for up to 28 meals (2 meals per day x14 days), up to 4 times per year.
- All members also have the option to purchase meals and pantry boxes from Mom's Meals at any point during the plan year.
 - o \$7.99 per meal (\$8.99 for gluten free and renal meals) shipping is included.
 - o Members with OTC Plus or PriorityFlex can use their allowances to purchase meals.



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Embedded Extras

\$0 services – across ALL plans

- "Free to talk" physical a truly \$0 annual physical or annual wellness visit, with no hidden fees when your client's discuss things that fall outside what's included in these visits
- \$0 anticoagulant labs
- \$0 copay for palliative care
- \$0 for virtual visits with a primary care, specialist or behavioral health provider
- \$0 enhanced disease management
- \$0 in-home safety assessments
- \$0 nutritional education
- \$0 post-discharge in-home medication reconciliation
- \$0 telemonitoring



Prior Authorization



- No Prior Authorization changes in 2024.
- As a reminder: All plans require certain prior authorizations for in-network services.
 - o HMO-POS plans require certain prior authorizations for out-of-network services as well.
 - o PPO members do not need to get prior authorization when using outof-network providers.



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If your clients travel, they will have in-network coverage with any Medicare-participating provider across the nation outside of Michigan's lower peninsula

And don't forget these unique Priority Health differences:

- · Unlimited emergent and urgent care anywhere in the world
- Assist America® for global emergency travel assistance



Priority Health Travel Pass



- Visitor/travel benefit allows members to reside outside of Michigan for up to 12 months
- Members pay in-network copays/coinsurance at out-of-network, Medicare participating providers, everywhere but the lower peninsula of Michigan (unless on an open network plan).
- Partnered with MultiPlan® to offer better access to Medicare providers outside Michigan
 - o Members not limited to MultiPlan providers—can still get services from any Medicare-participating provider
 - MultiPlan participating providers can submit the claim to Priority Health
 - o MultiPlan logo on back of ID cards

*Excludes PriorityMedicare D-SNP and PriorityMedicare D-SNP Advantag



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Embedded Extras

Priority Health Travel Pass



- Members can see Medicare-participating dentists in Delta Dental's[®] commercial network outside of Michigan, Indiana and Ohio
- Plus, all plans include unlimited worldwide emergent and urgent care coverage
- Includes Assist America®



Customer Service: 888.389.6648 (TTY 711)
8 a.m. to 8 p.m., seven days a week
priorityhealth.com/travelpass

Indevoks prices with any Medicare participating
proofer anywhere in the 10.5 custode of Michigan
Unified workfowde emergency and urgent coverage
(filebal emergency travel assistance with Assist America*)
fileberence number: 01-AA-PHF-12123M

Note: new members receive their travel pass (left) at the same time they receive their $\ensuremath{\mathsf{ID}}$ card.

*Excludes **Priority**Medicare D-SNP and **Priority**Medicare D-SNP Advantage





RX Coverage

Pharmacy highlights



- \$0 cost-share on Part D drugs (all tiers) on both D-SNP plans.
- 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
- Kroger pharmacies will be **moving out of network** for all Medicare products effective January 1, 2024.



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RX Coverage

Inflation Reduction Act



- Insulin coverage is capped at \$35 for a one-month supply (both Part B and Part D).
 - o Part B Members will pay 20% **UP TO** \$35. The member will never pay more than \$35.
 - o 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.



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RX Coverage

2024 positive formulary changes

Common Use	Drug(s)	Estimated member impact	Change
Asthma/COPD	fluticasone/salmeterol (generic Advair Diskus)	N/A	Added to formulary
Bone Health	cinacalcet 60 mg and 90 mg	4	Lowered tier
Diabetes	insulin lispro injection (vials)	N/A	Added to formulary as a preferred insulin
Growth Hormone Deficiency	Omnitrope	N/A	Added to formulary as a preferred product
Multiple sclerosis	Avonex, Betaseron, Plegridy, Rebif	N/A	Removed step therapy requirement

*NF = Non-formulary, QL = Quantity limit, PA = Prior authorization



RX Coverage

New generics or biosimilars added/coming to formulary in 2024

- fluticasone/salmeterol (generic Advair Diskus)
- budesonide/formoterol (generic Symbicort)*
- teriflunomide (Aubagio)
- Insulin lispro (Humalog)
- Lenalidomide (Revlimid)
- Sodium oxybate (Xyrem)
- Humira biosimilars*

Pending generic availability and pricing

O Priority Health

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Medigap

- Members are eligible for a **12% reduction in premium** if another person in their household currently has or is enrolling in a Priority Health Medigap plan.
- 12-month rate guarantee, with renewals on members' enrollment anniversary date each year
- **Fast-track underwriting** for applicants who are age 65+ and within three years of Part B enrollment minimal health questions
- **No hidden fees**, and no application or association fees, so your clients start saving money sooner
- Billing starts when the plan goes into effect
- Low or no cost sharing for your clients
- Members have access to Assist America for global travel assistance when more than 100 miles from home or in a foreign country at no extra cost



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AGENT EXPERIENCE

Book of Business



- Coming soon, the book of business will transfer from PriorityQuote into the Agent Center.
- Enhancements include:
 - o Ability to view/order ID cards
 - View 'Under 65' members aging into Medicare within the next 6 months
 - o More self service and reporting capabilities



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AGENT EXPERIENCE

Connecture – Retention platform



- Launching in Q4
- Access to active beneficiaries enrolled in a Under 65 plan that is aging into Medicare that you are the AOR
 - Must be certified to sell Medicare to access these leads
- Allows you to seamlessly enroll beneficiaries into an MAPD plan.
- A retention summary will recommend plans based on data such as prescription claims, lowest cost plan in zip code, and demographics



AGENT EXPERIENCE

Let's get to the point-Priority Health leads the charge in health plans

- Smart investments in sustainable benefit and plan designs
- #1 enrolled individual Medicare Advantage plan in the state
- Every hospital in the lower peninsula including the thumb
- · Personalized approach to health care
- · Same formulary and provider network on all plans
- Self-referral to in-network specialists
- Direct access to territory managers
- Retention status updates to your book of business via termination reports



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