

Dual Carrier Offering FAQ

This FAQ was created to assist you in fielding employee questions that may arise with the dual carrier offering of Blue Cross Blue Shield of MI and Priority Health plans. If you receive any other questions, please don't hesitate to reach out to your Service Team.

1. Will my current doctor still be covered?

The best way to determine if your current provider is covered is to contact your provider's office directly to confirm, or use [Priority Health's Find a Doctor tool](#).

2. Is my current medication covered?

Employees can review if their current medications will be covered under a Priority Health plan by searching the [2025 Priority Health formulary \(approved drug list\)](#).

3. Will I need to start over on prior authorization / step therapy for my covered medications?

Find the full list of services that may require a prior authorization [here](#).

When a member switches to Priority Health, their healthcare provider must submit a prior authorization (PA) request to ensure coverage of medications and treatments. If the member has already completed step therapy, they won't need to repeat it. The provider must provide documentation, including trial dates, to confirm compliance with Priority's PA requirements.

4. Does Priority Health cover claims out of state? What about for my college student?

Priority Health offers coverage for you and out-of-state dependents through Cigna. Covered members can see any provider in the Cigna Open Access Plus² network, as well as any provider in the Priority Health network, when in the state of Michigan.

Members with Cigna OAP network coverage will have the Cigna logo on their member ID card. Check both the front and the back of the card; members who live in Michigan only have the Cigna logo on the back. To locate an in-network provider outside of Michigan, use the [Cigna / Priority Health Find a Doctor tool](#).

5. Is there a pre-existing condition limitation?

No. Coverage through Priority Health does not include pre-existing condition limitations.

6. What if I have approval for treatment/surgery/etc. for a medical condition with BCBS - will I know that Priority Health will treat it the same way?

Medical policies, coverage, and requirements are different across carriers and cannot be guaranteed to be treated the same. With the addition of PriorityGPS effective 1/1/2026, new members will have pre-effective support to help members navigate these transitions.

7. I am enrolled in Virta/Omada/Hinge/Maven/Teladoc/etc. – will moving to Priority Health impact my program?

The Pool fully covers these programs for eligible members at no cost, and moving to a Priority Health plan will not affect access. Members will need to contact the customer service team of the respective program to make them aware of the health plan update, and coverage will be transferred and resumed.

8. Does Priority Health cover all types of 'special' benefits like BCBS does - oral surgery claims, chiropractic, therapeutic massage, acupuncture, hearing aids, etc.?

These benefits are all covered under a Priority Health plan. However, the level of coverage depends on the specific plan, so it is best to refer to your specific medical plan documents.

To note, medical massage therapy is covered only if it is part of a medically necessary physical therapy program. This is not a covered service at chiropractic offices. In addition, Priority Health does not have in-network acupuncture providers.

9. What are the specific non-covered benefits?

Non-covered benefits include hyaluronic acid injections, experimental or investigative treatments, and the prescription drug formulary may be different, etc. This list is not exhaustive. If more specific information is needed on benefit coverage, Priority Health's customer service line or your Gallagher Service Team will be able to assist.

10. Will my HSA account still be active with a transfer to Priority Health or do I have to open a new one?

Your HSA account is owned by you and portable, meaning if you're enrolled in a high-deductible health plan you can keep your existing account, have your funds roll over to a new HSA account, or roll over to an employer-provided HSA. Priority Health does not have their own HSA banking arrangement but does partner with Health Equity to offer this at no cost. Please note, this is a group decision (subgroup in The Pool's case).