

# FAQs: Caring for Corewell Health East Employee Patients

## Corewell Health East employees moved to Priority Health as their health plan in 2023

If you're in network with Priority Health and have privileges at Corewell Health as an employed or independent provider, you're in network for all Corewell Health East employee health plans. Corewell Health East employees can see you and have the lowest cost share available to them.

### Is the health plan for Corewell Health East employees now an HMO?

Employees had three health plan choices: one HMO and two POS options. Most chose the HMO option, as it had the lowest costs.

### Are Corewell Health East employees who selected the HMO plan required to designate a PCP?

No, they do not have to designate a PCP. We recommend that they do but it is not a requirement at this time.

### I'm a PCP but my name doesn't appear on the patient's ID card. Can I still see the patient?

Yes. We never list a PCP on a member's ID card, as members can change their PCP at any time. If you're in network with Priority Health and have privileges at Corewell Health as an employed or independent provider, you're in network for all Corewell Health East employee health plans.

### Does the HMO plan require a referral to see a specialist?

No. Priority Health does not require an in-network referral to see a Priority Health doctor, even for specialty care. However, some specialists may require a referral from a PCP as part of their own practice requirements.

### I'm a specialist who was seeing a Corewell Health East employee patient in 2022. Do they need approval to continue seeing me?

No. Referrals to specialists are not required. If you're in network with Priority Health and have privileges at Corewell Health as an employed or independent provider, you're in network for all Corewell Health East employee health plans.

## Still have questions?

**If you're a provider with a question about the Corewell Health East Employee Health Plan**, through March 15, email [PHProviderNetworkEscalation@priorityhealth.com](mailto:PHProviderNetworkEscalation@priorityhealth.com). Use this for questions about authorizations, credentialing and enrollment, billing and reimbursement, and coding.

**For any other questions**, we have many self-service options. Start at [priorityhealth.com/provider/contact-us](https://priorityhealth.com/provider/contact-us) or use our [Get your questions answered guide](#). And we're available Monday – Thursday from 7:30 a.m. to 5 p.m. and Friday from 9 a.m. to 5 p.m. at 800.942.4765.

### How do I confirm if I'm in network for my Corewell Health East patient?

Visit our [Find A Doctor](#) tool at [priorityhealth.com](http://priorityhealth.com) or directly at [web.healthsparq.com/healthsparq/public/#/one/insurerCode=PH\\_I&brandCode=PH](http://web.healthsparq.com/healthsparq/public/#/one/insurerCode=PH_I&brandCode=PH). On the top right of the page, select the patient's city or ZIP code. Then select their plan to find in-network providers. Make sure to select the employer group plans called Beaumont Health Network or Beaumont Health Extended. Do not pick the MyPriority Beaumont Health Network plan. This is a plan for individuals under 56 who purchase their own health plan. You can also call us at 800.942.4765.

### What plans are available to Corewell Health East employees?

| Plan Name                    | Plan type | Network type   | Who's in the network   | Member coverage and costs  | Referrals required?                                      |
|------------------------------|-----------|----------------|--|--|--|
| Beaumont Health Network      | HMO       | Narrow network | Corewell Health employed and independent doctors, mid-levels and facilities, including those in-network with Priority Health and with privileges at Corewell Health  | Care in the narrow network is covered. Care outside the narrow network is not covered and the member is liable for all costs   | No. Referrals to in-network specialists are not required |
| Beaumont Health Extended     | POS       | Tiered network | <b>Tier 1:</b> Corewell Health employed and independent doctors, mid-levels and facilities, including those in-network with Priority Health and with privileges at Corewell Health<br><b>Tier 2:</b> Everyone in the Priority Health network | <b>Tier 1:</b> Covered and lowest member costs<br><b>Tier 2:</b> Covered with higher member costs<br><b>Out of network:</b> Covered with highest member costs  | No. Referrals to in-network specialists are not required |
| Beaumont Health Extended HSA |           |                |  | <b>Tier 1:</b> Covered and lowest member costs after deductible<br><b>Tier 2:</b> Covered with higher member costs after deductible<br><b>Out of network:</b> Covered with highest member costs after deductible |  |

### Who's in network for behavioral health and chiropractic care?

All behavioral health providers and chiropractors who participate with Priority Health's HMO plan are in network and Tier 1.

### What services require authorization?

We require authorizations for certain services and procedures. Services like high-tech imaging, genetic testing and more require authorization. See our [list of some of the services requiring](#)

[authorization](http://priorityhealth.com/provider/manual/auths/quick-reference-list) ([priorityhealth.com/provider/manual/auths/quick-reference-list](http://priorityhealth.com/provider/manual/auths/quick-reference-list)), or [log in to prism](http://provider.priorityhealth.com/s/login/) ([provider.priorityhealth.com/s/login/](http://provider.priorityhealth.com/s/login/)) click *Request an auth* then start the process to see if an authorization is required.

### Do high-tech imaging services—like MRIs—require an authorization?

Yes, we require authorization for high-tech imaging services.


### Will authorizations submitted to the previous employee health plan roll over to Priority Health?

We received data on a couple hundred approved authorizations. You can check to see if an authorization is on file for your patient by reviewing your authorizations in GuidingCare.

If we don't have an authorization on file, you can submit one. If you have an approval letter for the authorization from the previous health plan, submit that for fast approval.

Get to GuidingCare by [logging in to prism](http://provider.priorityhealth.com/s/login/) ([provider.priorityhealth.com/s/login/](http://provider.priorityhealth.com/s/login/)) clicking *Authorizations* and then *Request an auth*.


### What does the ID card look like?



**Contract number:** 941234567-00  
**Name:** JANE DOE  
**Group # and name:** 100100, COREWELL HEALTH  
**Health plan:** Beaumont Health Network Plan, PriorityHMO

**Dependents:**  
941234567-01                    JANIE DOE  
941234567-02                    JOHNNY DOE

| Deductible |        |                |        | Total out of pocket limits |        |                |        |
|------------|--------|----------------|--------|----------------------------|--------|----------------|--------|
| In-network |        | Out-of-network |        | In-network                 |        | Out-of-network |        |
| Indiv.     | Family | Indiv.         | Family | Indiv.                     | Family | Indiv.         | Family |
| \$650      | \$1300 | N/A            | N/A    | \$3250                     | \$6500 | N/A            | N/A    |

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