# INSURANCE LIST
## PARTICIPATING AND NON-PARTICIPATING CARRIERS

The following list applies only to laboratory services. For services referred by Michigan Medicine physicians or clinics, or for other than laboratory services, please contact Michigan Medicine at 855.855.0863 for assistance. Note that laboratory testing benefits, copays, referral and prior authorization requirements may vary by individual policy. The patient should check with his or her insurance provider for specific details regarding covered laboratory services and approved testing facilities. Michigan Medicine Laboratories (MLabs) service claims are billed as outpatient hospital services, which may be adjudicated differently than independent laboratory claims.

### Participating Carriers

- AETNA (except MEDICARE ADVANTAGE HMO) ¹
- AETNA BETTER HEALTH OF MI (COVENCYCARES) (MEDICAID) ¹
- AETNA STUDENT HEALTH PLAN (formerly CHICKERING) ¹
- ALLIANCE HEALTH AND LIFE
- AMERIHEALTH CARITAS VIP CARE PLUS (MEDICARE-MEDICAID)
- APWU HEALTH PLAN
- ASR HEALTH BENEFITS (ALLIANCE HEALTH & LIFE or PHYSICIANS CARE)
- ASSURANT HEALTH (except HEALTH EOS or PREFERRED ONE)
- BCBSM MEDICARE PLUS BLUE PPO ¹
- BCBSM SIMPLY BLUE (TRUST) ²
- BEAUMONT EMPLOYEE HEALTH PLAN (UNITED HEALTHCARE PPO) (TIER 2)
- BLUE CARE NETWORK (BCN) ADVANTAGE (MEDICARE) ¹
- BLUE CARE NETWORK (BCN) HMO ¹
- BLUE CHOICE PPO (TRUST) ²
- BLUE CROSS BLUE SHIELD TRADITIONAL
- BLUE CROSS COMPLETE (MEDICAID) (formerly BLUECAID) ¹
- BLUE PREFERRED / COMMUNITY BLUE PPO (TRUST) ²
- BLUE PREFERRED PLUS (BPP) PPO ²
- CHOICECARE NETWORK PPO (COFINITY)
- COFINITY
- COFINITY (formerly PPOM)
- CONNEXTCARE PPO
- CSHCS (CHILDREN'S SPECIAL HEALTHCARE SERVICES) FIRST HEALTH
- FLEXIBLE BLUE (TRUST) ²
- FORD COMPREHENSIVE MEDICAL PLAN (BCBSM) ²
- FORD NATIONAL PPO PLAN (NPP) (BCBSM) ²
- HUMANA GOLD PLUS MEDICARE ADVANTAGE HMO
- HUMANA PREFERRED PPO (COFINITY)
- HURON VALLEY PACE
- MAIL HANDLERS BENEFIT PLAN (MHBHP) (AETNA CHOICE POS II)
- MCLAREN ADVANTAGE HMO SNP
- MCLAREN HEALTH ADVANTAGE PPO (MEDICARE) ¹
- MCLAREN HEALTH PLAN (HMO and MEDICAID) ¹
- MEDICAID (mihealth) (MICHIGAN and OHIO ONLY)
- MEDICARE (TRADITIONAL AND PFFS PLANS)
- MEIJER PREMIER HEALTH NETWORK (BCN) ¹
- MERIDIAN CHOICE
- MERIDIAN HEALTH PLAN OF MICHIGAN (MEDICAID and MEDICARE) ¹
- MESSA (MICHIGAN EDUCATION SPECIAL SERVICES) (BCBSM) ²
- MOLINA HEALTHCARE OF MICHIGAN (MEDICAID) ¹
- MOLINA MEDICARE OPTIONS HMO & OPTIONS PLUS HMO SNP ¹
- MPSERS (MI PUBLIC SCHOOL EMPLOYEES RETIREMENT SYS) (BCBSM) ²
- MULTIPLAN PPO (PHCS)
- NALC HEALTH BENEFIT PLAN (FIRST HEALTH)
- PARAMOUNT PPO
- PHCS (PRIVATE HEALTHCARE SYSTEMS) PPO
- PHYSICIAN'S HEALTH PLAN HMO & PPO
- PLAN FIRST!
- PRIORITY HEALTH HMO & POS ¹
- PRIORITY HEALTH MEDICARE ADVANTAGE ¹
- SMARTHEALTH (BLUE PREFERRED) (TIER 2) ²
- STANDARD CARE NETWORK (SCN) (BCBSM) ²
- TRADITIONAL CARE NETWORK (TCN) (BCBSM) ²
- U-M PREMIER CARE (BCN) & U-M GRADCARE (BCN)
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- FRONTPATH HEALTH COALITION (formerly WLEC)
- HAP (HEALTH ALLIANCE PLAN) HMO & POS
- HAP EMPOWERED (formerly MIDWEST) ADVANTAGE (MEDICARE)
- HAP EMPOWERED (formerly MIDWEST) (MEDICAID) ¹
- HAP PREFERRED PPO, POS, & EPA
- HAP SENIOR PLUS (MEDICARE)
- HUMANA CHOICE MEDICARE PPO & GOLDCHOICE MEDICARE ADV ¹

- UNITED HEALTHCARE ¹
- UNITED HEALTHCARE COMMUNITY PLAN (MEDICAID) ¹
- UNITED HEALTHCARE DUAL COMPLETE (MEDICARE) ¹
- VALUEOPTIONS, BCN MEMBERS ONLY
- WASHTENAW HEALTH PLAN

Participating Carriers for Clinical Laboratories Services Only
- COMMUNITY CARE ASSOCIATES (WAYNE CO. HEALTH CHOICE) ¹,³
- HAP INTEGRATED (HENRY FORD or GENESYS) ¹,³
- HUMANA X (HMOx) ¹,³

Non-Participating Carriers
- AARP MEDICARE HMO & PPO
- AETNA MEDICARE ADVANTAGE HMO
- AMERICAN HEALTH GROUP
- ASSURANT HEALTHEOS OR PREFERRED ONE
- BEECH STREET PPO
- BUCKEYE COMMUNITY HEALTH PLAN
- CAREFIRST PLUS (WAYNE COUNTY)
- CARESOURCE OF OHIO
- COMMUNITY CARE PLAN
- EMERALD HEALTH NETWORK
- FOUR STAR HEALTH (WAYNE COUNTY)
- GRAND VALLEY HEALTH PLAN
- HARBOR HEALTH PLAN (MEDICAID)
- HEALTHCARE VALUE MGMT PPO
- HEALTHSCOPE
- HUMANA HMO & POS
- MEDBASIC (WAYNE COUNTY)
- MIDWEST HEALTH AKM HEALTHCHOICE
- NORTHERN HEALTH PLAN
- PARAMOUNT HMO
- PHYSICIAN’S HEALTH PLAN FAMILY CARE (MEDICAID)
- PHYSICIANS OF WEST MICHIGAN (POWM)
- ppoNEXT
- PRIORITY HEALTH MEDICAID
- SECURE HORIZONS (MEDICARE)
- TENCON HEALTH PLAN
- TOTAL HEALTH CARE
- TOTAL HEALTH CHOICE
- TRICARE
- UPPER PENINSULA HEALTH PLAN
- WEYCO

Questions
Call 800.862.7284 or mlabs.umich.edu
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1. MLABS participation is through Joint Venture Hospital Laboratories (JVHL) agreement.

2. Copayments and deductibles may apply to BCBSM groups selecting the Plus Lab, Cap Lab (Quest), or other restricted lab arrangement. BCBSM groups include: Delphi BPP (72100), Delphi TCN (72137, 72200), Delphi PPO (72240, 72540), Ford BPP (87951, 87961, 87973), GM BPP (83100), GM TCN (83200, 83500), GM PPO (83240, 83540), and MPSERS PPO (59000).

3. JVHL or MLABS (facility) are participating for this plan, but pathologist (professional) services are excluded. Professional charges will be considered out of network; therefore, MLABS does not recommend sending testing for this plan unless you are certain that only facility services will be provided or have obtained prior authorization from the plan.