

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

PARTICIPATING CARRIERS for CLINICAL LABORATORY SERVICES ONLY

COMMUNITY CARE ASSOCIATES (WAYNE CO. HEALTH CHOICE)^{1,3}
DMC CARE^{1,3}
HAP INTEGRATED (HENRY FORD or GENESYS)^{1,3}

HARBOR HEALTH PLAN^{1,3} (MEDICAID) (formerly PROCARE HEALTH PLAN)
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
BOTSFORD HEALTH PLAN
CAREFIRST PLUS (WAYNE COUNTY)
CARESOURCE ADVANTAGE
COMMUNITY CARE PLAN
EMERALD HEALTH NETWORK
FOUR STAR HEALTH (WAYNE COUNTY)
GRAND VALLEY HEALTH PLAN
HARBOR HEALTH PLAN MEDICARE
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
SECURE HORIZONS (MEDICARE)
TENCON HEALTH PLAN
TOTAL HEALTH CARE
TOTAL HEALTH CHOICE
TRICARE
UPPER PENINSULA HEALTH PLAN
WEYCO

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.