



2024 Massachusetts Small Group Overview of Plan Changes

2023		2024 Mapped		
2023 Plan ID	2023 Product Name	2024 Plan ID	2024 Product Name	2023 to 2024 Changes
HMO				
MD0000200289	HMO 25 - Flex	MD0000201128	HMO 20 - Flex	No changes
MD0000200290	HMO 500 - Flex	MD0000201129	HMO 500 - Flex	No changes
MD0000200291	HMO 1000 - Flex	MD0000201130	HMO 1000 - Flex	No changes
MD0000200292	HMO 1500 - Flex	MD0000201131	HMO 1500 - Flex	No changes
MD0000200293	HMO 2000 - Flex	MD0000201132	HMO 2000 - Flex	No changes
MD0000200294	HMO 2500 - Flex	MD0000201133	HMO 2500 - Flex	No changes
MD0000200295	HMO 1500 with Coinsurance - Flex	MD0000201134	HMO 1500 with Coinsurance - Flex	OOPM decreased to \$7,000/\$14,000
MD0000200296	HMO 2000 with Coinsurance - Flex	MD0000201135	HMO 2000 with Coinsurance - Flex	OOPM decreased to \$6,000/\$12,000
MD0000200297	HMO 2000 Value - Flex	MD0000201136	HMO 2000 Value - Flex	OOPM increased to \$9,450/\$18,900
MD0000200298	HMO 3000 - Flex	MD0000201137	HMO 3000 - Flex	- PCP decreased to \$50 - OOPM increased to \$9,450/\$18,900 - X-Ray increased to \$150 after deductible - Non-hospital Adv Radiology increased to \$350 after deductible - Non-hospital PT/OT/ST increased to \$50
MD0000200299	HMO 4000 - Flex	MD0000201138	HMO 4000 - Flex	- PCP increased to \$50 - OOPM increased to \$9,450/\$18,900 - ER increased to \$500 after deductible - Non-hospital PT/OT/ST increased to \$50
MD0000200300	HMO 5000 - Flex	MD0000201139	HMO 5000 - Flex	- PCP increased to \$50 - OOPM increased to \$9,450/\$18,900 - ER increased to \$500 after deductible - Non-hospital PT/OT/ST increased to \$50
		MD0000201140	HMO 6000 Value - Flex	NEW 2024 PLAN

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HMO HSA				
MD0000200301	HMO HSA 2000 - Flex	MD0000201141	HMO HSA 2000 - Flex	<ul style="list-style-type: none"> - OOPM increased to \$8,050/\$16,100 - ER increased to \$500 after deductible - Inpatient increased to \$500 after deductible - Non-Flex Labs increased to \$100 after deductible - Hospital Adv Radiology increased to \$500 after deductible - Flex Day Surgery added \$75 after deductible; non-Flex increased to \$300 after deductible
MD0000200302	HMO HSA 2500 - Flex	MD0000201142	HMO HSA 2500 - Flex	OOPM increased to \$8,050/\$16,100
MD0000200303	HMO HSA 3000 - Flex	MD0000201143	HMO HSA 3000 - Flex	<ul style="list-style-type: none"> - Deductible changed to non-embedded - OOPM increased to \$8,050/\$16,100
MD0000200304	HMO HSA 3400 - Flex	MD0000201144	HMO HSA 3400 - Flex	OOPM increased to \$8,050/\$16,100
MD0000200305	HMO HSA 3600 - Flex	MD0000201145	HMO HSA 4000 - Flex	<ul style="list-style-type: none"> - Deductible increased to \$4,000/\$8,000 - OOPM increased to \$8,050/\$16,100 - Flex Day Surgery increased to \$750 after deductible - X-Ray increased to \$350 after deductible
Focus HMO & Focus HMO HSA				
MD0000200306	Focus HMO 25	MD0000201129	HMO 500 - Flex	*** DISCONTINUING Focus HMO 25 ***
MD0000200307	Focus HMO 1000	MD0000201146	Focus HMO 1000	No changes
MD0000200308	Focus HMO 1500	MD0000201147	Focus HMO 1500	No changes
MD0000200309	Focus HMO 2000	MD0000201148	Focus HMO 2000	No changes
MD0000200310	Focus HMO 2500	MD0000201149	Focus HMO 2500	OOPM decreased to \$6,500/\$13,000
MD0000200311	Focus HMO 3000	MD0000201150	Focus HMO 3000	<ul style="list-style-type: none"> - OOPM increased to \$9,450/\$18,900 - ER increased to \$1,000 after deductible - Day Surgery increased to \$550 after deductible - Adv Radiology increased to \$450 after deductible
MD0000200312	Focus HMO HSA 3400	MD0000201151	Focus HMO HSA 3400	OOPM decreased to \$7,000/\$14,000

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2023 Plan ID	2023 Product Name	2024 Plan ID	2024 Product Name	2023 to 2024 Changes
PPO				
MD0000200313	PPO 25 - Flex	MD0000201152	PPO 20 - Flex	No changes
MD0000200314	PPO 500 - Flex	MD0000201153	PPO 500 - Flex	No changes
MD0000200315	PPO 1000 - Flex	MD0000201154	PPO 1000 - Flex	No changes
MD0000200316	PPO 1500 - Flex	MD0000201155	PPO 1500 - Flex	<ul style="list-style-type: none"> - PCP increased to \$50 - OOPM increased to \$9,450/\$18,900 - ER increased to \$750 after deductible - Non-hospital PT/OT/ST increased to \$50
MD0000200317	PPO 2000 - Flex	MD0000201156	PPO 2000 - Flex	No changes
MD0000200318	PPO 2000 Value - Flex	MD0000201158	PPO 2000 Value - Flex	<ul style="list-style-type: none"> - PCP increased to \$30 after deductible; Specialist wincreased to \$55 after deductible - OOPM increased to \$9,450/\$18,900 - ER increased to \$350 after deductible - Urgent care increased to \$50 after deductible - Inpatient increased to \$750 after deductible - Flex Day Surgery increased to \$250; Non-Flex increased to \$500 after deductible - Non-hospital PT/OT/ST increased to \$50
		MD0000201157	PPO 2500 - Flex	-- NEW 2024 PLAN --
MD0000200319	PPO 3000 - Flex	MD0000201159	PPO 3000 - Flex	<ul style="list-style-type: none"> - PCP decreased to \$50 - OOPM increased to \$9,450/\$18,900 - X-Ray increased to \$150 after deductible - Non-Hospital Adv Radiology increased to \$350 after deductible - Non-hospital PT/OT/ST increased to \$50
MD0000200320	PPO 4000 - Flex	MD0000201160	PPO 4000 - Flex	<ul style="list-style-type: none"> - PCP increased to \$50 - OOPM increased to \$9,450/\$18,900 - ER increased to \$500 after deductible - Non-hospital PT/OT/ST increased to \$50

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PPO HSA				
MD0000200321	PPO HSA 3000 - Flex	MD0000201161	PPO HSA 3000 - Flex	- Deductible changed to non-embedded - OOPM increased to \$8,050/\$16,100
MD0000200322	PPO HSA 3400 - Flex	MD0000201162	PPO HSA 3400 - Flex	- OOPM increased to \$8,050/\$16,100
MD0000200323	PPO HSA 5000 - Flex	MD0000201163	PPO HSA 5000 - Flex	- OOPM increased to \$8,050/\$16,100
Connector Plans				
MD0000200230	Standard Platinum - Flex	MD0000201122	Standard Platinum - Flex	No changes
MD0000200269	Standard High Gold	MD0000201116	Standard High Gold	OOPM increased to \$6,000/\$12,000
MD0000200234	Standard Silver	MD0000201117	Standard Silver	- PCP decreased to \$25 - OOPM increased to \$9,450/\$18,900 - Labs decreased to \$25 after deductible - X-Ray decreased to \$50 after deductible - RX T2 decreased to \$55; RX T3 decreased to \$75 after deductible
MD0000200235	Standard Low Silver HSA - Flex	MD0000201125	Standard Low Silver HSA - Flex	No changes
MD0000200236	Standard High Bronze HSA - Flex	MD0000201126	Standard High Bronze HSA - Flex	- Deductible increased to \$3,600/\$7,200 - OOPM increased to \$8,000/\$16,000
MD0000200233	HMO 2000 Low - Flex	MD0000201123	HMO 2000 Low - Flex	- Office visit decrease to \$25/\$50 - OOPM decreased to \$5,450/\$10,900 - ER decreased to \$300 after deductible - X-Ray decreased to \$50 after deductible - Non-hospital Adv Radiology decreased to \$150 - Hospital PT/OT/ST/ST decreased to \$50
MD0000200239	PPO HSA 2000 - Flex	MD0000201127	PPO HSA 2000 - Flex	No changes
MD0000200238	HMO 3500 - Flex	MD0000201124	HMO 3500 - Flex	ER increased to \$1,500 after deductible