

# **Connecticut Small Group Benefit Designs**

**October 1, 2018 through December 31, 2018**



**Harvard Pilgrim  
Health Care**

Harvard Pilgrim Health Care includes Harvard Pilgrim Health Care and its affiliates.  
Harvard Pilgrim Health Care of New England and HPHC Insurance Company.

HMO										
Product Name	OV	Deductible	Out Of Pocket Max	Coins	ER	Conv Care/ Urgent Care	Inpatient/ Day Surgery	Labs/ X-Rays	Scans: CT, MRI, PET	PT/OT/ST
HMO Copay 25/35  Platinum MD0000004520 RX0000001433	\$25/\$35	None/None	\$2,000/\$4,000	None	\$150	Conv: \$25  Urg: \$75	IP: \$500  Day: \$250	Labs: CIF  X-Rays: CIF	\$75, \$375 Max/Year	\$25
Best Buy HMO Hospital 2000  Gold MD0000004513 RX0000001520	\$25/\$35	\$2,000/\$4,000	\$4,700/\$9,400	None	Ded then \$200	Conv: \$25  Urg: \$75	IP: Ded then CIF  Day: Ded then CIF	Labs: \$10  X-Rays: \$35	\$75, \$375 Max/Year	PT/OT: \$25  ST: \$35
Best Buy HMO 2000 with Coinsurance Gold MD0000004518 RX0000001434	\$25/\$35	\$2,000/\$4,000	\$4,500/\$9,000	50%	Ded then 50%	Conv: \$25  Urg: \$75	IP: Ded then 50%  Day: Ded then 50%	Labs: 50%  X-Rays: 50%	Ded then 50%	Ded then 50%
Best Buy HMO 5000 with Coinsurance Silver MD0000004521 RX0000001524	\$40/\$50	\$5,000/\$10,000	\$7,100/\$14,200	50%	Ded then 50%	Conv: \$40  Urg: \$75	IP: Ded then 50%  Day: Ded then 50%	Labs: 50%  X-Rays: 50%	Ded then 50%	Ded then 50%
HSA HMO										
Product Name	OV	Deductible	Out Of Pocket Max	Coins	ER	Conv Care/ Urgent Care	Inpatient/ Day Surgery	Labs/ X-Rays	Scans: CT, MRI, PET	PT/OT/ST
Best Buy HSA HMO 3000  Silver MD0000004523 RX0000001526	Ded then \$35/\$50	\$3,000/\$6,000	\$6,400/\$12,800	None	Ded then \$200	Conv: Ded then \$35  Urg: Ded then \$75	IP: Ded then \$500 , \$2,000 Max/Admit  Day: Ded then \$500	Labs: Ded then \$10  X-Rays: Ded then \$40	Ded then \$75	PT/OT: Ded then \$30  ST: Ded then \$50

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PPO										
Product Name	OV	Deductible	Out Of Pocket Max	Coins	ER	Conv Care/ Urgent Care	Inpatient/ Day Surgery	Labs/ X-Rays	Scans: CT, MRI, PET	PT/OT/ST
PPO Copay 25/35  Platinum MD0000004519 RX0000001433	\$25/\$35	IN: None/None  OON: \$2,000/\$4,000	IN: \$2,000/\$4,000  OON: \$4,000/\$8,000	IN: None  OON: 30%	\$150	Conv: \$25  Urg: \$75	IP: \$500  Day: \$250	Labs: CIF  X-Rays: CIF	\$75 , \$375 Max/Year	\$25
Best Buy PPO Hospital 1200  Platinum MD0000004533 RX0000001538	\$20/\$40	IN: \$1,200/\$2,400  OON: \$2,400/\$4,800	IN: \$3,250/\$6,500  OON: \$6,500/\$13,000	IN: None  OON: 40%	\$150	Conv: \$20  Urg: \$75	IP: Ded then CIF  Day: Ded then CIF	Labs: \$10  X-Rays: \$40	\$75 , \$375 Max/Year	PT/OT: \$20  ST: \$40
Best Buy PPO 1500  Gold MD0000004544 RX0000001434	\$25/\$40	IN: \$1,500/\$3,000  OON: \$3,000/\$6,000	IN: \$4,500/\$9,000  OON: \$9,000/\$18,000	IN: None  OON: 50%	Ded then \$200	Conv: \$25  Urg: \$75	IP: Ded then \$500 , \$1,500 Max/Admit  Day: Ded then \$500	Labs: Ded then \$10  X-Rays: Ded then \$40	Ded then \$75 , \$375 Max/Year	PT/OT: \$25  ST: \$40
Best Buy PPO 1500 with Coinsurance  Gold MD0000004514 RX0000001434	\$25/\$40	IN: \$1,500/\$3,000  OON: \$3,000/\$6,000	IN: \$4,500/\$9,000  OON: \$9,000/\$18,000	IN: 40%  OON: 50%	Ded then 40%	Conv: \$25  Urg: \$75	IP: Ded then 40%  Day: Ded then 40%	Labs: Ded then 40%  X-Rays: Ded then 40%	Ded then 40%	PT/OT: \$25  ST: \$40
Best Buy PPO 3500  Silver MD0000004524 RX0000001527	\$40/\$50	IN: \$3,500/\$7,000  OON: \$7,000/\$14,000	IN: \$6,900/\$13,800  OON: \$13,800/\$27,600	IN: None  OON: 50%	Ded then \$200	Conv: \$40  Urg: \$75	IP: Ded then \$500 , \$2,000 Max/Admit  Day: Ded then \$500	Labs: Ded then \$10  X-Rays: Ded then \$40	Ded then \$75 , \$375 Max/Year	PT/OT: \$30  ST: \$50
Best Buy PPO 3500 with Coinsurance  Silver MD0000004534 RX0000001540	\$35/\$50	IN: \$3,500/\$7,000  OON: \$7,000/\$14,000	IN: \$6,900/\$13,800  OON: \$13,800/\$27,600	IN: 40%  OON: 50%	Ded then 40%	Conv: \$35  Urg: \$75	IP: Ded then 40%  Day: Ded then 40%	Labs: Ded then 40%  X-Rays: Ded then 40%	Ded then 40%	PT/OT: \$30  ST: \$50
Best Buy PPO 3 Free 3300  Silver MD0000004525 RX0000001528	3 visits CIF, then Ded then 30%	IN: \$3,300/\$6,600  OON: \$9,900/\$19,800	IN: \$6,950/\$13,900  OON: \$20,850/\$41,700	IN: 30%  OON: 50%	Ded then 30%	Conv: 3 visits CIF, then Ded then 30%  Urg: Ded then 30%	IP: Ded then 30%  Day: Ded then 30%	Labs: Ded then 30%  X-Rays: Ded then 30%	Ded then 30%	Ded then 30%

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PPO - CB										
Product Name	OV	Deductible	Out Of Pocket Max	Coins	ER	Conv Care/ Urgent Care	Inpatient/ Day Surgery	Labs/ X-Rays	Scans: CT, MRI, PET	PT/OT/ST
Best Buy PPO Hospital 1500 - CB  Gold MD0000004540 RX0000001587	\$30/\$45	IN: \$1,500/\$3,000	IN: \$3,700/\$7,400	IN: None	\$200	Conv: \$30	IP: Ded then \$500 , \$1,500 Max/Admit	Labs: \$10	Hosp: Ded then \$75 /Fre: \$75, \$375 Max/Year	PT/OT: \$30  ST: \$45
		OON: \$3,000/\$6,000	OON: \$7,400/\$14,800	OON: 50%		Urg: \$75	Day: Hosp: Ded then \$500	X-Rays: \$40		
Best Buy PPO Hospital 2500 - CB  Gold MD0000004535 RX0000001582	\$25/\$50	IN: \$2,500/\$5,000	IN: \$5,500/\$11,000	IN: 20%	20%, Max \$350 Per Visit	Conv: \$25	IP: Ded then 20%	Labs: \$10	Ded then 20%	PT/OT: \$25  ST: \$50
		OON: \$5,000/\$10,000	OON: \$11,000/\$22,000	OON: 50%		Urg: 20%, Max \$175 Per Visit	Day: Ded then 20%	X-Rays: \$40		
Best Buy PPO 3250 - CB  Silver MD0000004536 RX0000001583	\$40/\$50	IN: \$3,250/\$6,500	IN: \$7,350/\$14,700	IN: 30%	Ded then 30%	Conv: \$40	IP: Ded then 30%	Labs: Ded then 30%	Hosp: Ded then 30%/Fre: \$75, \$375 Max/Year	PT/OT: \$30  ST: \$50
		OON: \$6,500/\$13,000	OON: \$14,700/\$29,400	OON: 50%		Urg: Ded then 30%	Day: Hosp: Ded then 30%	X-Rays: Ded then 30%		
Best Buy PPO 3750 - CB  Silver MD0000004545 RX0000001591	\$40/\$50	IN: \$3,750/\$7,500	IN: \$7,350/\$14,700	IN: 30%	Ded then 30%	Conv: \$40	IP: Ded then 30%	Labs: \$10	Ded then 30%	PT/OT: \$30  ST: \$50
		OON: \$7,500/\$15,000	OON: \$14,700/\$29,400	OON: 50%		Urg: Ded then 30%	Day: Ded then 30%	X-Rays: Ded then 30%		
Best Buy PPO 4000 - CB  Silver MD0000004541 RX0000001588	\$35/\$50	IN: \$4,000/\$8,000	IN: \$7,150/\$14,300	IN: 50%	Ded then 50%	Conv: \$35	IP: Ded then 50%	Labs: Ded then 50%	Ded then 50%	Ded then 50%
		OON: \$8,000/\$16,000	OON: \$14,300/\$28,600	OON: 50%		Urg: Ded then 50%	Day: Ded then 50%	X-Rays: Ded then 50%		

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HSA PPO										
Product Name	OV	Deductible	Out Of Pocket Max	Coins	ER	Conv Care/ Urgent Care	Inpatient/ Day Surgery	Labs/ X-Rays	Scans: CT, MRI, PET	PT/OT/ST
Best Buy HSA PPO 2700 90/70  Silver MD0000004526 RX0000001529	Ded then 10%	IN: \$2,700/\$5,400	IN: \$5,700/\$11,400	IN: 10%	Ded then 30%	Conv: Ded then 10%	IP: Ded then 30%	Labs: Ded then 10%	IN: Ded then 30%	Ded then 10%
		OON: \$5,400/\$10,800	OON: \$11,400/\$22,800	OON: 50%		Urg: Ded then 10%	Day: Ded then 30%	X-Rays: Ded then 10%		
Best Buy HSA PPO 2700  Silver MD0000004527 RX0000001530	Ded then \$25/\$35	IN: \$2,700/\$5,400	IN: \$5,400/\$10,800	IN: 50%	Ded then 50%	Conv: Ded then \$25	IP: Ded then 50%	Labs: Ded then \$10	Ded then 50%	PT/OT: Ded then \$25
		OON: \$5,400/\$10,800	OON: \$10,800/\$21,600	OON: 50%		Urg: Ded then \$75	Day: Ded then 50%	X-Rays: Ded then \$35		ST: Ded then \$35

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HSA PPO - CB										
Product Name	OV	Deductible	Out Of Pocket Max	Coins	ER	Conv Care/ Urgent Care	Inpatient/ Day Surgery	Labs/ X-Rays	Scans: CT, MRI, PET	PT/OT/ST
Best Buy HSA PPO 2800 - CB	Ded then 20%	IN: \$2,800/\$5,600	IN: \$4,500/\$9,000	IN: 20%	Ded then 20%	Conv: Ded then 20%	IP: Ded then 20%	Labs: Ded then 20%	Ded then 20%	Ded then 20%
Silver MD0000004537 RX0000001584		OON: \$5,600/\$11,200	OON: \$9,000/\$18,000	OON: 50%		Urg: Ded then 20%	Day: Ded then 20%	X-Rays: Ded then 20%		
Best Buy HSA PPO 3500 - CB	Ded then 30%	IN: \$3,500/\$7,000	IN: \$5,500/\$11,000	IN: 30%	Ded then 30%	Conv: Ded then 30%	IP: Ded then 30%	Labs: Ded then 30%	Ded then 30%	Ded then 30%
Silver MD0000004538 RX0000001585		OON: \$7,000/\$14,000	OON: \$11,000/\$22,000	OON: 50%		Urg: Ded then 30%	Day: Ded then 30%	X-Rays: Ded then 30%		

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Non-HSA qualified Plans Retail Rx	
Platinum & Gold Plans (2x max on Mail Order Rx)	Silver & Bronze Plans (2x max on Mail Order Rx)
Tier 1: \$5	Tier 1: \$5
Tier 2: 30% (\$50/script max)	Tier 2: 30% (\$50/script max)
Tier 3: 40%(\$250/script max)	Tier 3: 40%(\$250/script max)*
Tier 4: 40%(\$500/script max)	Tier 4: 50%(\$750/script max)*
	*MD 4534 has Ded on T3 & T4 Rx

**Massachusetts Minimum Creditable Coverage (MA CC):**

All of the Small Group plans meet the  
Massachusetts Minimum Creditable Coverage (MA CC) Standards.

HSA-qualified Plans Retail Rx
All Plans (2x max on Mail Order Rx)
Tier 1: Ded then \$5*
Tier 2: Ded then 30% (\$50/script max)*
Tier 3: Ded then 40%(\$250/script max)*
Tier 4: Ded then 50%(\$750/script max)*
*Preventive Rx not subject to deductible

**Medicare Creditable Coverage (MCC):**

All plans pass Medicare Creditable Coverage

**HSA-qualified Medical Plans:**

All have embedded deductibles and out-of-pocket maximums

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**Business Rules**

All HMO plans are offered by Harvard Pilgrim Health Care of Connecticut Inc. and all PPO plans are offered by HPHC Insurance Company, an affiliate of Harvard Pilgrim Health Care.

HPHC requires groups of 1-4 employees who are eligible for health benefits to have a minimum of 100% participation in our product(s),  
and for all other small groups minimum of 65% participation in our product(s), except during the Small Group Special Open Enrollment Period.

Employees who waive coverage due to spousal or dependent coverage, employees covered by Medicare, Medicaid, or a Military Program, or covered under another plan by a second employer are excluded from the participation calculations.

If a subscriber enrolls with a dependent who is over the age of 26 and is disabled, the dependent will require approval from Harvard Pilgrim before obtaining coverage.

We require employer rate contributions to be at least 50% of the employee-only rate of the lowest plan offered.

HMO plans are only available to employees who reside in HPHC's HMO service area at least nine months of the year.

This requirement does not apply to a dependent child who lives outside of the Harvard Pilgrim Enrollment Area.

For each new health plan sale or annual renewal, employers must disclose to HPHC all out-of-state office locations and the state residency for each enrolled member under the plan.

Bariatric Surgery is not covered on all 2018 small group plans

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### 2018 Portfolio Snapshot with 2017 Mapping

	2018 Medical Plan	2018 MD#	2017 Plan Version(s)
<b>Copay Plans</b>			
	HMO Copay 25/35	MD0000004520	HMO Copay 25/35 (MD4204)
	PPO Copay 25/35	MD0000004219	PPO Copay 25/35 (MD4205)
<b>Hospital Plans</b>			
	Best Buy <b>HMO Hospital 2000</b>	MD0000004513	BB HMO Hospital 2000 (MD4212)
<b>New!</b>	Best Buy <b>PPO Hospital 1200</b>	MD0000004533	
	Best Buy <b>PPO Hospital 1500 - CB</b>	MD0000004540	BB PPO Hospital 1500-CB (MD4224)
	Best Buy <b>PPO Hospital 2500 - CB</b>	MD0000004535	BB PPO Hospital 2000 (MD4209) / BB PPO Hospital 2000-CB (MD4225)
<b>Coinsurance &amp; 3 Free Plans</b>			
<b>New!</b>	Best Buy <b>HMO 2000 w/Coinsurance</b>	MD0000004518	
<b>New!</b>	Best Buy <b>HMO 5000 w/Coinsurance</b>	MD0000004521	BB HMO Hospital 4000 (MD4211)
<b>New!</b>	Best Buy <b>PPO 1500 w/Coinsurance</b>	MD0000004514	
<b>New!</b>	Best Buy <b>PPO 3500 w/Coinsurance</b>	MD0000004534	
	Best Buy <b>PPO 3 Free 3300</b>	MD0000004525	BB PPO 3 Free 3000 (MD4218) / BB PPO 3 Free 4000 (MD4219)
<b>PPO Plans</b>			
	Best Buy <b>PPO 1500</b>	MD0000004544	BB PPO 1500 (MD4206)
	Best Buy <b>PPO 3500</b>	MD0000004524	BB PPO Hospital 3500 (MD4208) / BB PPO 3500 (MD4207)
	Best Buy <b>PPO 3250 - CB</b>	MD0000004536	BB PPO 3000 (MD4228)
	Best Buy <b>PPO 3750 - CB</b>	MD0000004545	BB PPO Hospital 3750 (MD4229) / BB PPO 2500 (MD4226)
	Best Buy <b>PPO 4000 - CB</b>	MD0000004541	BB PPO 4000-CB (MD4230) / BB PPO Hospital 4500 (MD4210) / BB PPO Hospital 5000 (MD4227) / BB PPO 5000 (MD4220)
<b>HSA-qualified Plans</b>			
	Best Buy <b>HSA HMO 3000</b>	MD0000004523	BB HSA HMO 3000 (MD4216)
<b>New!</b>	Best Buy <b>HSA HMO 4000 w/Coinsurance</b>	MD0000004522	BB HSA HMO 6100 (MD4215)
	Best Buy <b>HSA PPO 2700 90/70</b>	MD0000004526	BB HSA PPO 2600 90/70 (MD4217)
	Best Buy <b>HSA PPO 2700</b>	MD0000004527	BB HSA PPO 2600 (MD4214)
	Best Buy <b>HSA PPO 2800 - CB</b>	MD0000004537	BB HSA PPO 2800 - CB (MD4221)
	Best Buy <b>HSA PPO 3500 - CB</b>	MD0000004538	BB HSA PPO 3500 (MD4231)
<b>New!</b>	Best Buy <b>HSA PPO 4250 - CB</b>	MD0000004542	
	Best Buy <b>HSA PPO 5000 - CB</b>	MD0000004539	BB HSA PPO 5000 (MD4222)
	Best Buy <b>HSA PPO 5500</b>	MD0000004528	BB HSA PPO 5500 (MD4213)
	Best Buy <b>HSA PPO 6500 - CB</b>	MD0000004543	BB HSA PPO 6500 (MD4223)