



Harvard Pilgrim
HealthCare



It's good to
work together.
Count us in.



Harvard Pilgrim has your back—and the rest of you, too.
Count us in . . .

- to help you be your healthiest, no matter what your health is like.
- when you want a local health plan that's among the best in the country.
- for savings on products and services that can help you live a healthy lifestyle.
- when you want tools that make it easy for you to manage your plan.
- for working to improve the health of the people and the communities we serve.

I want a health plan that:



“Will help me and my family be as healthy as we can be.”

Amazing things can happen when people work together. So whether you're trying to manage your weight, bring down your stress level or deal with a challenging health condition, we'll be there for you with personalized planning and support.

Just take a simple health questionnaire and connect with one of our personal health coaches. They're nurses who have extra training and certification in health and wellness coaching. They'll listen to you, help you come up with a plan and keep you encouraged and motivated.

If you have a chronic condition such as asthma, diabetes or heart disease, we have dedicated nurse care managers who can work with you to help you be as well as you can be. They'll lend you a listening ear along with expertise and advice to help you take the best possible care of yourself.

Even when you're feeling on top of the world, remember to use your preventive care benefits. Routine exams and screenings can go a long way toward helping you stay healthy and well.

I want a health plan that:



“I can trust.”

Harvard Pilgrim is recognized across the country for outstanding quality and customer service, and we are consistently ranked among the nation's highest rated health plans.¹

Our friendly and knowledgeable Member Services representatives have a lot to do with that. Need someone to help you find the right doctor or hospital? We're on it. Give us a call when you have any questions or concerns about your plan.

Chances are very good that the doctors, health professionals and hospitals you know and trust accept Harvard Pilgrim.² To find out if yours do, use our online provider directory at www.harvardpilgrim.org.

¹ NCQA's Private Health Insurance Plan Rankings, 2011-14, HMO/POS/PPO. NCQA's Health Insurance Plan Rankings 2010-11 – Private. *U.S. News/NCQA America's Best Health Insurance Plans 2005-2009* (annual). America's Best Health Insurance Plans is a trademark of *U.S. News & World Report*. NCQA The State of Health Care Quality 2004.

² Some products require referrals and restrictions may apply. Check your benefit information for plan details.

I want a health plan that:

“Gives me more than just medical coverage.”

Could you use a new pair of sneakers? What about a massage? Want to get started on a weight loss plan? Count on Harvard Pilgrim to help you save money on products and services that can help you live a healthy life, including:

- Up to \$150 fitness reimbursement (for members enrolled through participating employers)^{3,4}
- Nutrition and weight loss programs such as Jenny Craig®, Weight Watchers® and DASH for Health®⁴
- Eyewear savings at popular eyewear locations including JC Penney® Optical, LensCrafters®, Pearle Vision®, Sears Optical and Target Optical^{4,5,6}
- Massage therapy services at Massage Envy
- Elder care services, athletic footwear, safety and comfort care products and much more

Visit www.harvardpilgrim.org/savings to find out more.⁷

I want a health plan that:

“Makes it easy for me to get things done.”

When you want to check your benefits or find out what your deductible balance is, take care of it wherever and whenever you want with an *HPHConnect* for Members account. Log on to www.harvardpilgrim.org and find out how to get started. You can also:

- Replace lost ID cards
- Track your health history
- Find out how much common tests and medical procedures cost
- Change your primary care provider
- Compare hospitals

And when you want to talk with someone, remember that our Member Services representatives are there for you during the week.

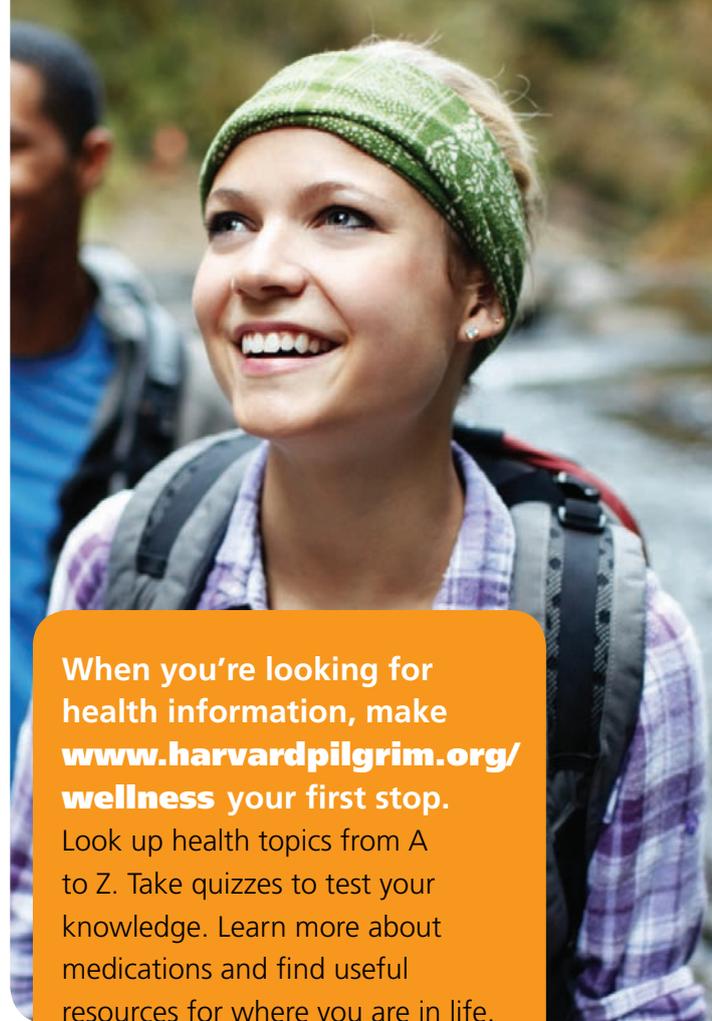
³ There is a \$150 maximum reimbursement per Harvard Pilgrim policy in a calendar year (individual or family contract). Must be currently enrolled in Harvard Pilgrim at time of reimbursement. If enrolled through an employer, available to the extent that it has elected to offer this fitness reimbursement. Some restrictions apply, and reimbursement is not available to all members. Visit www.harvardpilgrim.org/fitnessreimbursement or call us for details. (For tax information, consult with your employer.)

⁴ Per the Patient Protection and Affordable Care Act, as of January 1, 2014, some small group and individual plans include coverage for fitness and weight loss program reimbursement, and some prescription eyewear. Please see your *Benefit Handbook*, *Schedule of Benefits* or applicable Rider for details.

⁵ Frames and lenses must be purchased in the same transaction to receive the full discount. Items purchased separately will be discounted. Discount not available on frames in which the manufacturer prohibits discounts.

⁶ Contact lens fitting fees are not a covered benefit under your Harvard Pilgrim medical plan and you will be billed separately. Discount not available for disposable contact lenses.

⁷ These savings programs are not insurance products. Rather, they are discounts for programs and services designed to help keep members healthy and active.



When you're looking for health information, make www.harvardpilgrim.org/wellness your first stop.

Look up health topics from A to Z. Take quizzes to test your knowledge. Learn more about medications and find useful resources for where you are in life.

Check it out today!

I want a health plan that:



“Cares about the community.”

For more than 30 years, the Harvard Pilgrim Health Care Foundation has provided the tools, training, volunteers and leadership to help build healthy communities.

Since its inception, the Foundation has awarded more than \$130 million to improve schools and nonprofit organizations, reduce childhood obesity and make health care more equitable. In 2012, through its Mini-Grant program, the Foundation distributed more than \$550,000 in employee-chosen Mini-Grants to grass-roots organizations throughout the region.

Each year, Harvard Pilgrim employees work more than 3,500 volunteer hours to serve nonprofit causes. Visit www.harvardpilgrim.org/foundation to learn more.



To find out more about Harvard Pilgrim, talk to your employer, visit us at www.harvardpilgrim.org or call us at **(800) 848-9995**. For TTY service, call (800) 637-8257.

COUNT US IN  **Harvard Pilgrim HealthCare**

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

Wellesley
93 Worcester Street
Wellesley, MA 02481

Worcester
427 Main Street
Worcester, MA 01608

Hartford
City Place II
Second Floor
185 Asylum Street
Hartford, CT 06103

Manchester
650 Elm Street
Seventh Floor
Manchester, NH 03101

Portland
1 Market Street
Portland, ME 04101

(800) 848-9995
www.harvardpilgrim.org

Important information about your plan

The following information refers to plans offered by Harvard Pilgrim Health Care and its affiliates (“Harvard Pilgrim”).

When you need care

If your doctor admits you to a hospital for a test, surgery or other procedure, including admission for surgical day care, hospital representatives are responsible for notifying Harvard Pilgrim on your behalf. There are a few procedures that require Harvard Pilgrim’s authorization, and your doctor is aware of the procedures he/she must discuss with us before they take place.

To find out where our participating doctors admit patients, visit our online directory at www.harvardpilgrim.org. Or you can call one of the telephone numbers at the end of this document to have one of our representatives assist you.

When you’re in the hospital, Harvard Pilgrim’s nurse care managers are available to work with your doctors and other providers to ensure that you receive the care you need. They may evaluate the quality and appropriateness of the services you receive, and when you no longer need hospital care, will work with your medical team to coordinate the services you need in an appropriate clinical setting (e.g., at home, or in a skilled nursing or rehabilitation facility).

Member confidentiality

Harvard Pilgrim is committed to ensuring and safeguarding the confidentiality of its members’ personal information, including medical information, in all settings. Harvard Pilgrim staff use and disclose members’ personal information only in connection with providing services and benefits and in accordance with Harvard Pilgrim’s confidentiality policies. Harvard Pilgrim permits only designated employees who are trained in the proper handling of member information to have access to and use of your information.

Harvard Pilgrim sometimes contracts with other organizations or entities to assist with the delivery of care or administration of benefits. Any such entity must agree to adhere to Harvard Pilgrim’s confidentiality and privacy standards.

When Harvard Pilgrim uses or discloses your personal information, it does so using the minimum amount of information necessary to accomplish the specific activity. Harvard Pilgrim discloses its members’ personal information only: (1) in connection with the delivery of care or administration of benefits, such as utilization review, quality assurance activities and third-party reimbursement by other payers, including self-insured employer groups; (2) when you specifically authorize the disclosure; (3) in connection with certain activities allowed under law, such as research and fraud detection; (4) when required by law; or (5) as otherwise allowed under the terms of your *Benefit Handbook*. Whenever possible, Harvard Pilgrim discloses member information without member identifiers and in all cases only discloses the amount of information necessary to achieve the purpose for which it was disclosed. Harvard Pilgrim will not disclose to other third parties, such as employers, member-specific information (i.e., information from which you are personally identifiable) without your specific consent unless permitted by law or as necessary to accomplish the types of activities described above.

In accordance with applicable laws, Harvard Pilgrim and all of its contracted health care providers agree to give members access to, and a copy of, their medical records upon a member’s request. In addition, your medical records cannot be released to a third party without your consent or unless permitted by law.

Visit www.harvardpilgrim.org or call us for a copy of Harvard Pilgrim’s *Notice of Privacy Practices*.

MEMBERS: (888) 333-4742

NON-MEMBERS: (800) 848-9995

TTY: (800) 637-8257



Five Facts: The HPHC Insurance Company Best Buy HSA PPO - Massachusetts

1 Most services, including prescription drugs, are subject to the deductible.*

Please see the other side of this flyer for a partial list of services that are subject to the deductible. Your coverage includes separate in-network and out-of-network deductibles. The in-network deductible amount is less than the out-of-network deductible amount. If your plan includes coverage for prescription drugs, they will be subject to your in-network deductible.

2 There are no individual contribution limits within the family deductible.

This means that individual family members will continue to pay deductible expenses until the total family deductible amount is reached. After the full, annual family deductible is met, family members on your policy no longer have to make payments toward the deductible.

3 Many preventive tests and services are not subject to the deductible.

A large number of preventive tests and services are covered at no charge when you receive them from in-network providers. When you receive them from out-of-network providers, you pay out-of-network coinsurance only. See the other side of this page for examples. Please note that you may receive some tests and services that are subject to the deductible during a preventive visit.

4 Some in-network services are subject to an office visit copayment.

You will pay an office visit copayment for certain services that you receive from in-network providers. If you receive them from out-of-network providers, you will pay out-of-network cost sharing. See the other side of this page for examples.

5 HPHC will send you an Activity Summary for services you receive.

The Activity Summary is not a bill. It lists the services you received, any payments HPHC made to the provider for your care, and any amounts you may owe the provider. Your provider will bill you separately.

Compare the provider's bill with your Activity Summary to verify the services you received and any amounts you may have paid or still may owe to the provider. Contact a Member Services representative with questions about your Activity Summary or your annual deductible balance.

If you have questions about your Best Buy HSA PPO coverage, please call the Member Services department at **(888) 333-4742**. For TTY service, please call **(800) 637-8257**.

* The deductible will not apply to certain preventive medications if your plan includes the Preventive Drug Benefit.

The HPHC Insurance Company Best Buy HSA PPO - Massachusetts

These are examples of covered services. Refer to the *Schedule of Benefits* for details and a complete list of benefits. The *Schedule of Benefits* governs in the event that the information in this document is different.

Best Buy HSA PPO services	What you pay: In-network	What you pay: Out-of-network
<ul style="list-style-type: none"> • Preventive tests and services, including: <ul style="list-style-type: none"> - Adult annual visits - Well child visits - Annual gynecological visits - Routine pre-natal and post-partum visits - Cervical cancer screening, including Pap smears - Immunizations, including flu shots (for children and adults as appropriate) - Colorectal cancer screening, including colonoscopy, sigmoidoscopy and fecal occult blood test - Cholesterol screening (adults only) and total cholesterol tests - Diabetes screenings - Blood pressure screening (adults, without known hypertension) - Breast cancer screening, including mammograms and counseling for genetic susceptibility • Fetal ultrasounds • Home care for mother and newborn following delivery • Inpatient physician care for healthy newborn 	No charge	Out-of-network coinsurance
<ul style="list-style-type: none"> • Exams for illness or injuries • Lab tests and diagnostic procedures, including EKGs, MRIs, X-rays and colonoscopies, other than those listed under "Preventive tests and services" • Treatments and procedures, including chemotherapy, surgical procedures, allergy treatments and dialysis • Therapeutic procedures, including occupational therapy, speech therapy, physical therapy, early intervention and cardiac rehabilitation • Inpatient hospital services, including inpatient maternity • Inpatient mental health, drug and alcohol rehabilitation, and detoxification • Hospital outpatient department services and day surgery • Outpatient mental health services • Home health care services • Skilled nursing care • Ambulance transport 	In-network deductible, then in-network coinsurance or no charge	Out-of-network deductible, then out-of-network coinsurance
<ul style="list-style-type: none"> • Prescription drugs (if covered under your plan) 	In-network deductible, then prescription drug cost sharing or no charge*	Same as in-network
<ul style="list-style-type: none"> • Routine eye exams • Routine hearing exams • Nutrition counseling 	Copayment	Out-of-network coinsurance

Please note: Services you receive during different kinds of visits and exams may be subject to the deductible.

* The deductible will not apply to certain preventive medications if your plan includes the Preventive Drug Benefit.



 **The HPHC Insurance
Company PPO Best Buy
HSA \$1500**

Schedule of Benefits



schedule of benefits

BOSTON MEDICAL CENTER
HealthNet Plan 

WELL SENSE 
HEALTH PLAN

 **Harvard Pilgrim
HealthCare**

Schedule of Benefits

HPHC Insurance Company, Inc.

THE HPHC INSURANCE COMPANY BEST BUY HSA PPO PLAN
MASSACHUSETTS

This Schedule of Benefits summarizes your benefits under The HPHC Insurance Company Best Buy HSA PPO Plan (the Plan) and states the Member Cost Sharing amounts that you must pay for Covered Benefits. However, it is only a summary of your benefits. Please see your Benefit Handbook and Prescription Drug Brochure (if you have the Plan's outpatient pharmacy coverage) for detailed information on benefits covered by the Plan and the terms and conditions of coverage.

There are two levels of coverage - In-Network and Out-of-Network

In-Network coverage applies when you use a Plan Provider for Covered Benefits. When using Plan Providers, coverage is based on the contracted rate between HPHC and the Provider.

Out-of-Network coverage applies when you use a Non-Plan Provider for Covered Benefits. When using Non-Plan Providers, the Plan pays only a percentage of the cost of the care you receive up to the Allowed Amount for the service. In most cases, this will be higher than the HPHC contracted rate. If a Non-Plan Provider charges any amount in excess of the Allowed Amount, you are responsible for the excess amount. Please refer to section I.E.6., titled "Member Cost Sharing" in your Benefit Handbook for additional information about Out-of-Network Charges in excess of the Allowed Amount.

In a Medical Emergency, you should go to the nearest emergency facility or call 911 or other local emergency number. Your emergency room Member Cost Sharing is listed below under the heading "Emergency Room Care."

Member Responsibility for Notification and Prior Approval

Members must contact HPHC for coverage of a number of services. These are listed below.

Mental Health Care (Including the Treatment of Substance Abuse Disorders). Prior Approval must be obtained before receiving certain mental health services from Non-Plan Providers. This requirement also applies to treatment of substance abuse disorders. Please refer to our internet site, www.harvardpilgrim.org, or contact the Member Services Department at **1-888-333-4742** for a list of services. To obtain Prior Approval for mental health or substance abuse services, please call the Behavioral Health Access Center at **1-888-777-4742**.

Medical Services. Members are required to notify HPHC before the start of any planned inpatient admission to a Non-Plan Medical Facility. Members are also required to obtain Prior Approval from HPHC for certain services. Before you receive services from a Non-Plan Provider, please refer to our Internet site, www.harvardpilgrim.org, or contact the Member Services Department at **1-888-333-4742** for a list of Out-of-Network services that require Prior Approval.

If you do not provide Notification or obtain Prior Approval when required, you will be responsible for paying the Penalty amount stated in this Schedule of Benefits in addition to any applicable Member Cost Sharing. No coverage will be provided if HPHC determines that the service is not Medically Necessary, and you will be responsible for the entire cost of the service.

Emergency Care. You do not need to contact HPHC before receiving care in a Medical Emergency. In the event of an emergency hospital admission to a Non-Plan Provider, you must

notify HPHC within 48 hours of the admission, unless notification is not possible because of your condition. If notice is given to HPHC by an attending emergency physician, no further notification is required. However, if notification is not received when the Member's condition permits it, the Member is responsible for the Penalty amount stated in this Schedule of Benefits. Please call **1-800-708-4414** to notify us of an emergency admission to a Non-Plan facility.

Clinical Review Criteria

We use clinical review criteria to evaluate whether certain services or procedures are Medically Necessary for a Member's care. Members or their practitioners may obtain a copy of our clinical review criteria applicable to a service or procedure for which coverage is requested. Clinical review criteria may be obtained by calling **1-888-888-4742 ext. 38723**.

COVERED BENEFITS

Your Covered Benefits are administered on a Plan Year basis. Your Plan Year begins on your Employer's Anniversary Date. Please see your Benefit Handbook for more details. If you do not know your Employer's Anniversary Date, please contact your Employer's benefits office or call the Member Services Department at **1-888-333-4742**.

General Cost Sharing Features:		Member Cost Sharing:
In-Network Coinsurance and Copayments		
		See Covered Benefits below
Out-of-Network Coinsurance and Copayments		
		See Covered Benefits below
In-Network Deductible		
		\$1,500 for Individual Coverage per Plan Year \$3,000 for Family Coverage per Plan Year
Out-of-Network Deductible		
		\$1,500 for Individual Coverage per Plan Year \$3,000 for Family Coverage per Plan Year
Important Notice: If you have Family Coverage, the Deductible may be met by any combination of covered family Members. The individual Deductible does not apply. No Member in the family is eligible for benefits subject to the Deductible until the Family Coverage Deductible is met.		
In-Network Out-of-Pocket Maximum		
Includes all Member Cost Sharing		\$3,000 for Individual Coverage per Plan Year \$6,000 for Family Coverage per Plan Year
Out-of-Network Out-of-Pocket Maximum		
Includes all Out-of-Network Member Cost Sharing except: – Any charges above the Allowed Amount and any penalty for failure to receive Prior Approval when using Non-Plan Providers.		\$3,000 for Individual Coverage per Plan Year \$6,000 for Family Coverage per Plan Year
Important Notice: If you have Family Coverage, the Out-of-Pocket Maximum may be met by any combination of covered family Members. The individual Out-of-Pocket Maximum does not apply. Once the Out-of-Pocket Maximum has been reached, no additional Member Cost Sharing will be applied for the remainder of the Plan Year.		

THE HPHC INSURANCE COMPANY BEST BUY HSA PPO PLAN - MASSACHUSETTS

General Cost Sharing Features:		Member Cost Sharing:
Out-of-Network Penalty Payment		
- Does not count toward the Deductible or Out-of-Pocket Maximum.		\$500
Deductible Rollover		
- None		

Benefit	In-Network Plan Providers Member Cost Sharing	Out-of-Network Non-Plan Providers Member Cost Sharing
Acupuncture Treatment for Injury or Illness		
- 20 visits per Plan Year	Deductible, then no charge	Deductible, then 20% Coinsurance
Ambulance Transport		
- Emergency ambulance transport	Deductible, then no charge	Same as In-Network
- Non-emergency ambulance transport	Deductible, then no charge	Deductible, then 20% Coinsurance
Autism Spectrum Disorders Treatment		
- Applied Behavior Analysis	Deductible, then no charge	Deductible, then 20% Coinsurance
Chemotherapy and Radiation Therapy – Other than Inpatient		
- Outpatient hospital or other facility	Deductible, then no charge	Deductible, then 20% Coinsurance
- Physician office visit	Deductible, then no charge	Deductible, then 20% Coinsurance
Dental Services		
Important Notice: Coverage of Dental Care is very limited. Please see your Benefit Handbook for the details of your coverage.		
- Emergency Dental Care	Deductible, then no charge	Deductible, then 20% Coinsurance
- Extraction of teeth impacted in bone	Deductible, then no charge	Deductible, then 20% Coinsurance
- Preventive Dental Care for children (up to the age of 13) – limited to 2 preventive dental exams per Plan Year, only the following services are included: <ul style="list-style-type: none"> - cleaning - fluoride treatment - teaching plaque control - x-rays 	\$20 Copayment per visit	20% Coinsurance
Dialysis		
- Dialysis services	Deductible, then no charge	Deductible, then 20% Coinsurance
- Installation of home equipment is covered up to \$300 in a Member's lifetime.	Deductible, then no charge	Deductible, then 20% Coinsurance

THE HPHC INSURANCE COMPANY BEST BUY HSA PPO PLAN - MASSACHUSETTS

Benefit	In-Network Plan Providers Member Cost Sharing	Out-of-Network Non-Plan Providers Member Cost Sharing
Durable Medical Equipment		
– Durable medical equipment	Deductible, then 20% Coinsurance	Deductible, then 20% Coinsurance
– Blood glucose monitors, infusion devices and insulin pumps (including supplies)	Deductible, then no charge	Same as In-Network
– Oxygen and respiratory equipment	Deductible, then 20% Coinsurance	Deductible, then 20% Coinsurance
Early Intervention Services		
	Deductible, then no charge	Deductible, then 20% Coinsurance
Emergency Admission		
	Deductible, then no charge	Same as In-Network
Emergency Room Care		
	Deductible, then no charge	Same as In-Network
Hearing Aids (for Members up to the age of 22)		
– Limited to \$2,000 per hearing aid every 36 months, for each hearing impaired ear	Deductible, then no charge	Deductible, then 20% Coinsurance
Home Health Care		
	Deductible, then no charge	Deductible, then 20% Coinsurance
Hospice - Outpatient Services		
	Deductible, then no charge	Deductible, then 20% Coinsurance
Hospital – Inpatient Services		
– Acute hospital care	Deductible, then no charge	Deductible, then 20% Coinsurance
– Inpatient maternity care	Deductible, then no charge	Deductible, then 20% Coinsurance
– Inpatient routine nursery care, including prophylactic medication to prevent gonorrhea	No charge	20% Coinsurance
– Home care for mother and newborn following delivery	No charge	20% Coinsurance
– Inpatient rehabilitation – Limited to 60 days per Plan Year	Deductible, then no charge	Deductible, then 20% Coinsurance
– Skilled nursing facility – Limited to 100 days per Plan Year	Deductible, then no charge	Deductible, then 20% Coinsurance

Benefit	In-Network Plan Providers Member Cost Sharing	Out-of-Network Non-Plan Providers Member Cost Sharing
Hypodermic Syringes and Needles		
	<p>Subject to the applicable pharmacy Member Cost Sharing in your Outpatient Prescription Drug Schedule of Benefits and listed on your ID Card.</p> <p>If your Plan does not include coverage for outpatient prescription drugs, then coverage is subject to the lower of the pharmacy's retail price or a Copayment of \$5 for Tier 1 drugs or supplies, \$10 for Tier 2 drugs or supplies and \$25 for Tier 3 drugs or supplies. All Copayments are based on a 30 day supply.</p> <p>For information on the different drug tiers, please visit our website at www.harvardpilgrim.org/members and select "pharmacy/drug tier look up" or contact our Member Services Department at 1-888-333-4742.</p>	
Infertility Services and Treatments (see the Benefit Handbook for details)		
	Deductible, then no charge	Deductible, then 20% Coinsurance
Laboratory and Radiology Services		
– Laboratory and x-rays	Deductible, then no charge	Deductible, then 20% Coinsurance
Advanced radiology – CT scans – PET scans – MRI – MRA – Nuclear medicine services	Deductible, then no charge	Deductible, then 20% Coinsurance
Please Note: No In-Network Member Cost Sharing applies to certain preventive care services. For a list of covered preventive services, please see the Preventive Services Notice at: www.harvardpilgrim.org		
Low Protein Foods		
– Limited to \$5,000 per Plan Year	Deductible, then no charge	Deductible, then 20% Coinsurance
Maternity Care - Outpatient		
– Routine outpatient prenatal and postpartum care	No charge The Deductible does not apply to prenatal and postpartum care provided in a physician's office. All other care is covered as stated in this Schedule of Benefits.	20% Coinsurance
Please Note: Routine prenatal and postpartum care is usually received and billed from the same Provider as a single or bundled service. Different Member Cost Sharing may apply to any specialized or non-routine service that is billed separately from your routine outpatient prenatal and postpartum care. For example, for services provided by another physician or specialist, see "Physician and Other Professional Office Visits" for your applicable Member Cost Sharing. Please see your Benefit Handbook for more information on maternity care.		
Medical Formulas		
	Deductible, then no charge	Deductible, then 20% Coinsurance

Benefit	In-Network Plan Providers Member Cost Sharing	Out-of-Network Non-Plan Providers Member Cost Sharing
Mental Health Care (Including the Treatment of Substance Abuse Disorders)		
– Inpatient Mental Health Care Services	Deductible, then no charge	Deductible, then 20% Coinsurance
Intermediate Mental Health Care Services – Acute residential treatment (including detoxification), crisis stabilization and in-home family stabilization – Intensive outpatient programs, partial hospitalization and day treatment programs	Deductible, then no charge	Deductible, then 20% Coinsurance
– Outpatient Mental Health Care Services	Group therapy – Deductible, then no charge Individual therapy – Deductible, then no charge	Group therapy – Deductible, then 20% Coinsurance Individual therapy – Deductible, then 20% Coinsurance
– Detoxification	Deductible, then no charge	Deductible, then 20% Coinsurance
– Medication management	Deductible, then no charge	Deductible, then 20% Coinsurance
– Psychological testing and neuropsychological assessment	Deductible, then no charge	Deductible, then 20% Coinsurance
Ostomy Supplies		
	Deductible, then 20% Coinsurance	Deductible, then 20% Coinsurance
Physician and Other Professional Office Visits (This includes all covered Providers unless otherwise listed in this Schedule of Benefits)		
– Consultations, evaluations and sickness and injury care	Deductible, then no charge	Deductible, then 20% Coinsurance
– Administration of allergy injections	Deductible, then no charge	Deductible, then 20% Coinsurance
Preventive Care Services – the In-Network Deductible and Out-of-Network Deductible do not apply to the preventive services listed below		
– Routine examinations for preventive care, including immunizations	No charge	20% Coinsurance
Preventive Services and Tests – the In-Network Deductible and Out-of-Network Deductible do not apply to the preventive services and tests listed below		
Preventive care services, including all FDA approved contraceptive devices. Under the federal health care reform law, many preventive services and tests are covered with no Member Cost Sharing. For a list of covered preventive services, please see the Preventive Services Notice on our website at: www.harvardpilgrim.org . You may also get a copy of the Preventive Services Notice by calling the Member Services Department at 1-888-333-4742 .	No charge	20% Coinsurance

Benefit	In-Network Plan Providers Member Cost Sharing	Out-of-Network Non-Plan Providers Member Cost Sharing
Preventive Services and Tests – the In-Network Deductible and Out-of-Network Deductible do not apply to the preventive services and tests listed below (Continued)		
<p>Under federal law the list of preventive services and tests covered above may change periodically based on the recommendations of the following agencies:</p> <p>a. Grade “A” and “B” recommendations of the United States Preventive Services Task Force;</p> <p>b. With respect to immunizations, the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention; and</p> <p>c. With respect to services for women, infants, children and adolescents, the Health Resources and Services Administration.</p> <p>Information on the recommendations of these agencies may be found on the web site of the U.S. Department of Health and Human Services at: https://www.healthcare.gov/what-are-my-preventive-care-benefits/#part=1.</p> <p>Harvard Pilgrim will add or delete services from this benefit for preventive services and tests in accordance with changes in the recommendations of the agencies listed above. You can find a list of the current recommendations for preventive care on Harvard Pilgrim’s web site at www.harvardpilgrim.org.</p>		
Additional Preventive Services and Tests – Fetal ultrasound – Hepatitis C testing – Lead level testing – Prostate-specific antigen (PSA) screening – Routine hemoglobin tests – Routine urinalysis	No charge	20% Coinsurance
Prosthetic Devices		
	Deductible, then 20% Coinsurance	Deductible, then 20% Coinsurance
Rehabilitation Therapy - Outpatient		
– Cardiac rehabilitation	Deductible, then no charge	Deductible, then 20% Coinsurance
– Pulmonary rehabilitation therapy	Deductible, then no charge	Deductible, then 20% Coinsurance
– Speech-language and hearing services	Deductible, then no charge	Deductible, then 20% Coinsurance
– Occupational therapy – limited to 60 visits per Plan Year – Physical therapy – limited to 60 visits per Plan Year Please Note: Outpatient physical and occupational therapy is covered to the extent Medically Necessary for: (1) children under the age of three and (2) the treatment of Autism Spectrum Disorders.	Deductible, then no charge	Deductible, then 20% Coinsurance
Scopic Procedures - Outpatient Diagnostic and Therapeutic		
– Colonoscopy, endoscopy and sigmoidoscopy	Deductible, then no charge	Deductible, then 20% Coinsurance
Please Note: No In-Network Member Cost Sharing applies to certain preventive care services. For a list of covered preventive services, please see the Preventive Services Notice at: www.harvardpilgrim.org .		

THE HPHC INSURANCE COMPANY BEST BUY HSA PPO PLAN - MASSACHUSETTS

Benefit	In-Network Plan Providers Member Cost Sharing	Out-of-Network Non-Plan Providers Member Cost Sharing
Spinal Manipulative Therapy (including care by a chiropractor)		
	Deductible, then no charge	Deductible, then 20% Coinsurance
Surgery – Outpatient		
	Deductible, then no charge	Deductible, then 20% Coinsurance
Vision Services		
– Routine eye examinations – limited to 1 exam per Plan Year	\$20 Copayment per visit	20% Coinsurance
– Vision hardware for special conditions	Deductible, then no charge	Deductible, then 20% Coinsurance
Voluntary Sterilization		
	Deductible, then no charge	Deductible, then 20% Coinsurance
Please Note: No In-Network Member Cost Sharing applies to certain preventive care services. For a list of covered preventive services, please see the Preventive Services Notice at: www.harvardpilgrim.org .		
Voluntary Termination of Pregnancy		
	Deductible, then no charge	Deductible, then 20% Coinsurance
Wigs and Scalp Hair Protheses as required by law		
– Limited to \$350 per Plan Year (see the Benefit Handbook for details)	Deductible, then 20% Coinsurance	Deductible, then 20% Coinsurance

Prescription Drug Coverage

PREMIUM 3-TIER

Covered prescription medications are available at participating pharmacies.

Covered prescription drugs are subject to your plan's Deductible (for Access America and PPO plans, covered prescriptions are subject to the In-Network Deductible). This means that you need to pay the full cost of your medications until you reach the required Deductible amount. The full cost will be the lower of the participating pharmacy's retail price or the price of the medication at Harvard Pilgrim's discount rate. See the *Schedule of Benefits* for your plan's Deductible amount.

Once you meet the Deductible for the year, you pay either a Copayment or Coinsurance.

	Retail (up to a 30-day supply)	Mail (up to a 90-day supply)
Tier 1	Deductible, then \$15 Copayment	Deductible, then \$15 Copayment
Tier 2	Deductible, then \$30 Copayment	Deductible, then \$30 Copayment
Tier 3	Deductible, then \$50 Copayment	Deductible, then \$50 Copayment

Your plan has an annual Out-of-Pocket Maximum, which is listed on the *Schedule of Benefits*. Once you have reached the Out-of-Pocket Maximum (including Deductible, Copayment and Coinsurance amounts), your prescriptions are covered in full for the rest of the year with no other cost sharing required.

Be sure to show your Harvard Pilgrim ID card at the pharmacy to ensure you pay the correct cost-sharing amounts.



Harvard Pilgrim Health Care includes Harvard Pilgrim Health Care, Harvard Pilgrim Health Care of Connecticut, Harvard Pilgrim Health Care of New England and HPHC Insurance Company.

RX0000001020



Q & A:
**Your Prescription
Drug Benefit**



prescription drug



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

Harvard Pilgrim's prescription drug program is designed to give you and your providers as many choices as possible for your medication needs. Your coverage includes a three-tier prescription drug benefit to help make paying for medications more affordable. The following are some common questions and answers about prescription drug coverage.

(Note: This Q & A provides highlights of your prescription drug coverage. You will receive a complete description of your pharmacy benefit, including limitations and exclusions, after you enroll.)

The three-tier benefit

How does this benefit work?

The three-tier prescription drug benefit places all covered medications into one of three levels or tiers.

TIER 1

Tier 1 is primarily made up of generic drugs.

These drugs contain the same active ingredients as their brand-name counterparts. Tier 1 may also include brand-name drugs that the plan has determined to be more effective, less costly or to have fewer side effects than similar medications. You pay the lowest copayment or coinsurance amount for Tier 1 drugs.

TIER 2

Tier 2 is primarily made up of brand-name drugs for which generic equivalents are not available. These drugs have been selected by the plan based on review of the relative safety, effectiveness and cost of the many brand-name drugs on the market. Tier 2 may also include generic drugs that the plan has determined to be more costly than their brand-name alternatives.

TIER 3

Tier 3 is made up of drugs that the plan has not included in Tier 1 or Tier 2. You pay the highest copayment or coinsurance amount for Tier 3 drugs.



What do I pay for my medications?

Depending on your plan, your payments—also called “cost-sharing”—may include a combination of copayments, coinsurance and a deductible. See the *Prescription Drug Coverage* insert to find out what you will pay for prescriptions. All payments are due to the pharmacy at the time you purchase your medications.

- ▶ **COPAYMENT:** A fixed dollar amount you pay per prescription. In most cases, there are different copayments for each of the three tiers. Each copayment covers up to a 30-day supply for each prescription or refill, except where limited by the plan. If your physician prescribes less than a 30-day supply of a medication, each copayment covers the amount prescribed. Harvard Pilgrim may limit the quantity of a drug available per 30-day period or per copayment.
- ▶ **COINSURANCE:** A percentage amount you pay for a medication. The percentage may be different for each of the three tiers.
- ▶ **DEDUCTIBLE:** A specific dollar amount you must pay each year for prescription drugs before coverage begins. The deductible may apply to drugs in one, two or all three tiers. Depending on your plan, the prescription drug deductible may apply to drugs purchased through the Mail Service Prescription Drug Program.
- ▶ **OUT-OF-POCKET MAXIMUM:** Some plans include an out-of-pocket maximum for prescription drugs. This is the total amount you are required to pay annually in prescription drug copayment, coinsurance and deductible amounts. Please see the *Prescription Drug Coverage* insert to see whether your plan includes an out-of-pocket maximum for prescription drugs.

How can I learn which tiers my medications are in?

For the most up-to-date information, please visit www.harvardpilgrim.org/rx and choose “3-Tier Program.” Use the Drug Tier Look-up to find out which tiers your medications are in.*

Who determines which drugs go in which tier?

Harvard Pilgrim’s Pharmacy and Therapeutics Committee is an advisory group that makes recommendations for placing drugs in different tiers, as well as for setting exclusions and limitations on drug coverage. The committee is comprised of physicians and pharmacists who are advised by physician consultants from a large number of medical specialties. The committee makes recommendations to Harvard Pilgrim’s Pharmacy Services clinical team, who are responsible for making all decisions about tier assignment.

Do drugs ever change tiers?

The tier placement of covered drugs may change from time to time. Harvard Pilgrim is working to control rising drug costs in a rapidly changing prescription drug market, while still preserving choice for our members and their physicians. When new information comes to light about prescription drugs—from published clinical research, from the federal Food and Drug Administration (FDA) or as a result of marketplace developments—Harvard Pilgrim evaluates the information and assesses whether any tier changes are necessary.

Drug coverage

What drugs are covered?

Your prescription drug benefit covers all FDA-approved drugs that require a prescription, except a limited number of drugs that Harvard Pilgrim has excluded from coverage. Your benefit also covers certain non-prescription items. All covered drugs are subject to the applicable cost sharing amounts. Please see the *Prescription Drug Coverage* insert for the cost-sharing amounts that apply to your coverage.

What drugs are not covered?

Currently, the only FDA-approved prescription drugs that are not covered are drugs primarily used for cosmetic purposes or weight loss.

Are there limitations on certain drugs?

Harvard Pilgrim limits the coverage of specific drugs for reasons of cost and to ensure their safe and effective use. Limitations may be placed on the quantity of certain drugs we will cover.

For the most up-to-date information on drugs that have quantity limitations, visit www.harvardpilgrim.org/rx and choose “3-Tier Program.” Click on “Quantity limitations.”*

Are there drugs that require prior authorization?

Harvard Pilgrim requires prior authorization for some medications to evaluate whether they are medically necessary. Based on clinical criteria, prior authorization may include: an evaluation of (1) whether a drug is clinically appropriate for the medical condition for which it has been prescribed; or (2) whether “step therapy” will be required. Drugs subject to step therapy are only covered if a member has either first tried another drug to treat a specific condition or obtained prior authorization to be exempted from that requirement.

To find out which medications require prior authorization or are subject to step therapy, visit www.harvardpilgrim.org/rx. Choose “3-Tier Program” and click on “Prior authorization required” or “Step Therapy.”*

To request prior authorization your physician must submit a Medication Request Form to our pharmacy benefits manager, MedImpact. Physicians can obtain these forms on the “Providers” section of www.harvardpilgrim.org or by calling MedImpact at (800) 788-2949. Determinations are made within 24-48 hours of receiving the request.

Are exceptions available?

Harvard Pilgrim providers may request exceptions on behalf of members for coverage of any drug that is excluded or limited. Exceptions may be granted only for clinical reasons. Harvard Pilgrim will not grant exceptions to waive or reduce the copayment or coinsurance amount of a particular drug. However, Harvard Pilgrim providers may submit a request to the Pharmacy and Therapeutics Committee to review a drug for placement in a lower tier.

*If you don’t have Internet access, please call us and we’ll send you a copy of Harvard Pilgrim’s Three-Tier Prescription Drug List. It includes the medications we cover, the tiers they’re in, the medications that have quantity limitations and those that require prior authorization and step therapy. The Prescription Drug List and the phone call are free.

Buying prescriptions

Where can I buy prescriptions?

There are thousands of pharmacies in our network (more than 50,000 nationwide), including major chains such as CVS/pharmacy, Kmart Pharmacy, Rite Aid Pharmacy, Stop & Shop, Walgreens and Walmart. You can also fill prescriptions at many local, independent pharmacies. Just present your member ID card and pay your appropriate cost-sharing amount.

To find out if a certain pharmacy participates in our network, visit www.harvardpilgrim.org/rx. Click on “Find a retail pharmacy near you.” You can also give us a call. For phone numbers, see “Questions?”

Can I buy prescriptions through the mail?

You may purchase up to a 90-day supply of maintenance medications through our Mail Service Prescription Drug Program. In addition to saving a trip to the pharmacy, some plans provide lower cost-sharing amounts when you purchase drugs through this program. See the *Prescription Drug Coverage* insert for your mail service cost-sharing amounts.

In some states you may also be able to obtain a 90-day supply of maintenance medications from certain retail pharmacies. Find information on participating pharmacies by visiting www.harvardpilgrim.org/rx or by calling Member Services.

What about specialty medications?

You must obtain certain specialty medications (including those for treatment of conditions such as hepatitis C, osteoarthritis, multiple sclerosis, rheumatoid arthritis and certain hereditary conditions) from pharmacies that participate in Harvard Pilgrim’s Specialty Pharmacy Program. For details, including a list of drugs that must be purchased through this program and a list of specialty pharmacies, visit www.harvardpilgrim.org/rx. Choose “3-Tier Program” and click on “Specialty Pharmacy Program.” Or call us for more information. See “Questions?” for phone numbers.

Questions?

If you have questions about your prescription drugs, please speak with your doctor. To learn more about Harvard Pilgrim’s pharmacy program, visit www.harvardpilgrim.org/rx. Or:

- If you’re already a member, call Member Services with questions at **(888) 333-4742**. For TTY service, call (800) 637-8257.
- If you’re not yet a member, call **(800) 848-9995**.



**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

Harvard Pilgrim Health Care
93 Worcester Street, Wellesley, MA 02481

(800) 848-9995
www.harvardpilgrim.org



Savings With Generics

Generic medications offer the same benefits as their brand-name counterparts and usually cost significantly less. We review every prescription order to see if there is a less-expensive generic medication available. Unless otherwise noted by your prescriber or state law, we will dispense an FDA-approved generic equivalent, if available. If you do not want a generic, please contact our Customer Care Center.

Privacy and Security

The information you provide us is kept confidential in accordance with HIPAA and other applicable state privacy laws. In addition, we use technology that is designed for use with secure Web servers. This technology ensures that your personal, health, prescription and credit card information cannot be accessed when submitted over the Internet.

Mail prescriptions to:

Walgreens
P.O. Box 29061
Phoenix, AZ 85038-9061

Walgreens Customer Care Center
877-347-3216
Hours of Operation
7 days a week
24 hours a day
En español: 800-778-5427
TTY: 800-573-1833



For more information, visit:
WalgreensHealth.com



Mail Service Pharmacy



Convenient, reliable delivery for the members of:

Harvard Pilgrim Health Care



Your pharmacy benefit includes mail service, offering you convenient delivery of your maintenance medications from Walgreens to the location of your choice.

Maintenance medications are used to treat chronic (long-term) conditions. You may receive up to a three-month supply or the maximum allowed by your plan.

Getting Started

It's easy to register and order your first prescription:

Online: Register at WalgreensHealth.com. From the registration confirmation page, follow the instructions to submit your new prescription.

By mail: Complete the registration form included with your enrollment packet. Mail the form along with your original prescription.

By phone: Call our Customer Care Center and have your insurance information handy.

Additional ordering options after registration:

Ask your prescriber to fax or e-prescribe your new prescription.*

- **Fax:** Use the enclosed fax form or log in to your online account to print a prescriber fax form. Give the form to your prescriber to complete and fax to the number listed on the form.
- **E-prescribe:** If your prescriber has the technology to submit prescriptions electronically, request that he or she do so.

If you need your medication right away:

Request two prescriptions from your prescriber: one for an initial short-term supply (e.g., 30-day supply or the amount allowed by your plan) that your local pharmacy can fill immediately and one for a 90-day supply with three refills (or the maximum amount allowed by your plan) to mail to Walgreens.

Free standard shipping: Please allow 10 business days from the time you place your order until you receive it at the address you specified.

Convenient Auto Refills

For an added convenience, you can choose to have your refills processed automatically. All you need to do is check the Automatic Refill option on your order form. We will process your order and bill the credit card you placed on file with us.

Please note: By law, medications cannot be returned once they are dispensed from our pharmacy. If you need to cancel or modify your next Automatic Refill, notify us three weeks prior to your next refill date. Doing so may allow you to avoid unnecessary charges.

Flexible Payment Options

Payment in full—by credit card or check—is required with every prescription order. We accept all major credit cards. For your convenience, we can keep your credit card on file for future orders by adding it to your secure online account. Simply complete the fields on your registration form or call our Customer Care Center.

*By law, prescription fax forms and e-prescriptions are valid only if sent from a prescriber's office.



Use this form to register/submit your first prescription order. You can also register at **WalgreensHealth.com**. **DO NOT** staple, tape or paperclip anything to this form.

Please print clearly using only **BLACK INK** and **UPPERCASE** letters. Fill in the applicable circles completely (●). **Not all ID and Group Number boxes may be needed.**

MEMBER INFORMATION

- Male
- Female

Date of Birth [MM/DD/YYYY] / /

Intercom: HARV UPI#: HPC001

Member ID Number (Located on card)

Suffix (If on card)

Group Number

Email Address (To receive information regarding the processing of your order)

Last Name

First Name

Cell Phone Text Msg* Yes No
 - -

Permanent Address Line 1

Daytime Phone
 - -

Permanent Address Line 2

Evening Phone
 - -

City

State ZIP Code

Government ID (Most states require ID for controlled Rx substances by law)[†]

Prescriber Last Name

Prescriber First Initial

Prescriber Phone
 - -

Prescriber Fax
 - -

MEMBER			Payment Options	
Allergies	Health Conditions	Order Preference	<i>Payment is required at time of order. Please do not send cash.</i> We accept American Express®, Discover®, MasterCard® and Visa®.	
<input type="radio"/> Aspirin <input type="radio"/> Cephalosporin <input type="radio"/> Codeine derivatives <input type="radio"/> Morphine derivatives <input type="radio"/> Penicillin <input type="radio"/> Sulfa drugs <input type="radio"/> None known <input type="radio"/> Other (Use lines below) _____ _____	<input type="radio"/> Arthritis <input type="radio"/> Asthma <input type="radio"/> Diabetes <input type="radio"/> Glaucoma <input type="radio"/> Heart disease <input type="radio"/> Hypertension <input type="radio"/> Pregnancy <input type="radio"/> Thyroid disease <input type="radio"/> None known <input type="radio"/> Other (Use lines at right) _____ _____	<input type="radio"/> Large-print vial labels <input type="radio"/> Spanish vial labels <input type="radio"/> Automatic refill ‡ ‡Fill in this circle if you would like us to automatically refill your prescriptions in the future. _____ _____	<input type="radio"/> Check made payable to Walgreens Credit Card Number <input type="text"/> Expiration Date [MM/YY] <input type="text"/> / <input type="text"/>	<input type="radio"/> Charge credit card below for this order only <input type="radio"/> Place credit card below on file for this and all future orders I authorize Walgreens to charge my credit card for services for which I am financially responsible. If the credit card provided is not able to fulfill payment for any reason, I agree to pay my statement balance upon receipt of the statement and understand that failure to do so may result in discontinuation of pharmacy services. Cardholder Signature _____ Date _____

*Standard text message and data rates may apply.

†Driver's license, state ID number, social security number, military ID or passport ID.



9920000HARVHPC001

DEPENDENT INFORMATION

- Male
 Female

Date of Birth [MM/DD/YYYY] / /

For separate shipping, please contact the Customer Care Center toll free at 877-347-3216.

Dependent Last Name

Dependent First Name

Suffix (If on card)

Email address (To receive information regarding the processing of your order)

Prescriber Last Name

Prescriber First Initial

Prescriber Phone

Prescriber Fax

 - - - - **DEPENDENT****Allergies**

- Aspirin
 Cephalosporin
 Codeine derivatives
 Morphine derivatives
 Penicillin
 Sulfa drugs
 None known
 Other (Use lines below)

Health Conditions

- Arthritis
 Asthma
 Diabetes
 Glaucoma
 Heart disease
 Hypertension
 Pregnancy
 Thyroid disease
 None known
 Other (Use lines below)

Order Preference

- Large-print vial labels
 Automatic refill*
 Spanish vial labels

*Fill in this circle if you would like us to automatically refill your prescriptions in the future.

ORDER INFORMATION – If including a prescription order, please complete this section.

Please allow 10 business days from the time that you place your order to receive your prescription(s). A refill order form and return envelope will be included with your shipment.

It is standard pharmacy practice to substitute generic equivalents for brand-name medications. Walgreens will dispense an FDA-approved generic equivalent if available, permitted by your prescriber and allowed by state law. If you do not want a generic equivalent or have questions regarding your mail service prescription(s), please call our Customer Care Center at 877-347-3216.

By submitting this form, you have authorized release of all information to Walgreens (and other necessary parties) as required to process your order under your benefit plan.

Total number of prescriptions in this order..... Total included for copay(s)..... \$

- Standard Shipping **NO CHARGE**
 Next Business Day (\$19.95 †) \$
 2nd Business Day (\$10.95 †) \$

Total Payment Due..... \$ Please print your name and date of birth on all prescriptions;
enclose them along with this completed form and mail to:Walgreens
P.O. Box 29061
Phoenix, AZ 85038-9061

† Shipping prices may be subject to change by carrier without notification and may vary depending upon weight and zone.

Brand names are the property of their respective owners. ©2010 Walgreen Co. All rights reserved.

W0038-0312

Welcome, BMC HealthNet / Well Sense Health Plan employees!

We're pleased to serve your health care needs, and we look forward to providing you with the service and quality you deserve and can depend on. During open enrollment, a team of Harvard Pilgrim professionals is available to answer your questions.

Whether you . . .

- ▶ need assistance from a health and benefit expert, or
 - ▶ are concerned about continuing medical treatment
- . . . *We will be there to guide you along the way.*

Specifically, Harvard Pilgrim offers you:

Health Insurance Coaches – via a dedicated toll-free number during your transition to Harvard Pilgrim, our coaches are available to:

- ▶ Answer questions about your benefits or help you find a doctor
- ▶ Empower you to make the best decisions about your own health care by showing you how to use our extensive online tools, including:
 - **HPHConnect** – a secure, easy-to-use support tool enabling you to access your plan information and decision-making tools
 - Look up **Health Topics A-Z**
 - **WebMD Hospital Advisor** – an interactive tool available to members who set up an account on **HPHConnect** that provides information about health issues to help in making key health care decisions

Assistance with transitioning to Harvard Pilgrim – We know that changing health plans may be stressful, especially if you are in the midst of ongoing treatment. Our Clinical Transition Program, designed to ensure a smooth transition, enables you to discuss your concerns by phone with a dedicated nurse and develop a plan that best meets your needs.

Have questions about Harvard Pilgrim? Turn over to learn more ▶▶



Remember, we're ready to help you. Starting October 3, you can call us weekdays toll-free at (866) 874-0817. When prompted, state that you are an employee of "BMC HealthNet / Well Sense Health Plan." For TTY service, call (800) 637-8257.



Harvard Pilgrim
Health Care

Harvard Pilgrim Health Care includes Harvard Pilgrim Health Care, Harvard Pilgrim Health Care of Connecticut, Harvard Pilgrim Health Care of New England and HPHC Insurance Company

Questions about your transition to Harvard Pilgrim? We're here to help!

Here are some answers to frequently asked questions to help make your transition Harvard Pilgrim easier. We also encourage you to visit www.harvardpilgrim.org/bmchp to learn more about your benefits, access wellness resources, and find out about our discount savings program.

What plans will be offered to me?

Harvard Pilgrim is offering three plans similar to what you currently have with Tufts, including HMO and PPO coverage. That means you can choose the option that's right for you and your family.

How can I find out if my doctor participates with Harvard Pilgrim?

Harvard Pilgrim has an extensive provider network throughout New England, so chances are very good that the doctors, health professionals and hospitals you know and trust accept Harvard Pilgrim. This includes a statewide network in New Hampshire, so you'll be able to find providers convenient to you. To see if your providers participate, use our "Find a doctor" tool at www.harvardpilgrim.org/bmchp.

Is my drug covered and at what tier?

Harvard Pilgrim's prescription drug program gives you and your providers a wide range of choices for your medication needs. Your coverage includes our Premium formulary three-tier prescription drug benefit to help make paying for medications more affordable. To find out more about our prescription drug program and to use our online drug lookup tools, go to www.harvardpilgrim.org/bmchp.

I had to get prior authorization or go through step therapy for my prescription. Do I need to get approval again with Harvard Pilgrim?

No, we are taking care of that for you. If prior authorization or step therapy was required for any of your current prescriptions, you will not need to get approval again.

I currently get my prescription through the mail. What will happen now?

If you use a mail order pharmacy service, your prescriptions will be transferred automatically to Walgreens, Harvard Pilgrim's mail service pharmacy. However, you will still need to register with Walgreens. You'll receive more details on how to do this in the coming weeks.

I am undergoing treatment for a medical condition and I am concerned about how my transition to Harvard Pilgrim will affect my care. Do you have any support in place to help me?

Our Clinical Transition Program lets prospective members discuss specific issues or concerns about specialized medical care with Harvard Pilgrim staff prior to enrollment. You'll be able to talk with Harvard Pilgrim staff about your specific situation, and find out about resources available to meet your individual medical needs. And if appropriate, we can have a plan for your continuing care already in place by the time you enroll. If you have concerns about your specialized medical care, starting October 3, you can call the Clinical Transition Program at (888) 888-4742, extension 31209, then press #.

I'm currently working with a nurse from Tufts to help manage my chronic condition. Does Harvard Pilgrim have a similar program?

Yes, Harvard Pilgrim offers care and disease management programs similar to Tufts. During this transition, we will be informed by Tufts if you are currently working with a nurse from Tufts, and one of our nurses will contact you directly to discuss what your options are with Harvard Pilgrim.

What do I need to do next?

There is nothing you need to do at this time. You'll receive more information as open enrollment approaches.

Who can I call with questions?

If you have additional questions, call us weekdays toll-free at (866) 874-0817. **Please Note:** this phone line will be open as of October 3. When prompted, state that you are an employee of "BMC HealthNet / Well Sense Health Plan." For TTY service, call (800) 637-8257.



Q&A: Your Behavioral Health Benefits – *Massachusetts*

Do I need a referral from a primary care provider (PCP) to visit a behavioral health clinician?

You do not need a referral, but you do have to call Harvard Pilgrim's Behavioral Health Access Center at (888) 777-4742 for authorization. If your PCP is suggesting treatment, he or she may call for authorization on your behalf.

How do I receive authorization for care?

Call Harvard Pilgrim's Behavioral Health Access Center at (888) 777-4742. One of our clinical coordinators will assist you by:

- determining the type of care you need
- finding an appropriate behavioral health clinician located within or near your community
- authorizing the services

If you already know the name of a clinician you'd like to visit, our coordinators will let you know whether he or she treats Harvard Pilgrim members. They will also answer questions you may have about your benefits and applicable cost sharing (e.g., copayment, deductible and coinsurance) amounts.

I am joining Harvard Pilgrim from another health plan and I'm in the middle of treatment with a behavioral health clinician. What should I do?

If your clinician accepts Harvard Pilgrim coverage

You can continue treatment, provided it is a covered benefit. Be sure to call the Behavioral Health Access Center **as soon as you enroll with Harvard Pilgrim**. Please note that your cost sharing amounts may change depending on your particular plan.

If your clinician does not accept Harvard Pilgrim coverage

Call the Behavioral Health Access Center to ask for transitional benefits. Transitional benefits allow you to continue ongoing treatment for a limited time with providers who do not accept Harvard Pilgrim coverage, as described below.

You must call the Behavioral Health Access Center to request transitional coverage **within 30 days of the effective date of your coverage with Harvard Pilgrim**. Otherwise you may not be eligible for transitional benefits.

To be eligible for transitional benefits:

- you must be in active treatment with your current practitioner at the time you enroll with Harvard Pilgrim
- your employer must only offer employees a choice of plans in which the practitioner is not a participating provider
- your practitioner must agree to accept our usual authorization, review and claims procedures, and in-network fees
- the services provided must be a covered benefit under our plan

If you receive approval for transitional benefits, you will be covered for medically necessary services at the in-network level of coverage for 90 days. During that time, you and your clinician can either conclude treatment or arrange for a coordinated transition to a practitioner who accepts Harvard Pilgrim coverage.

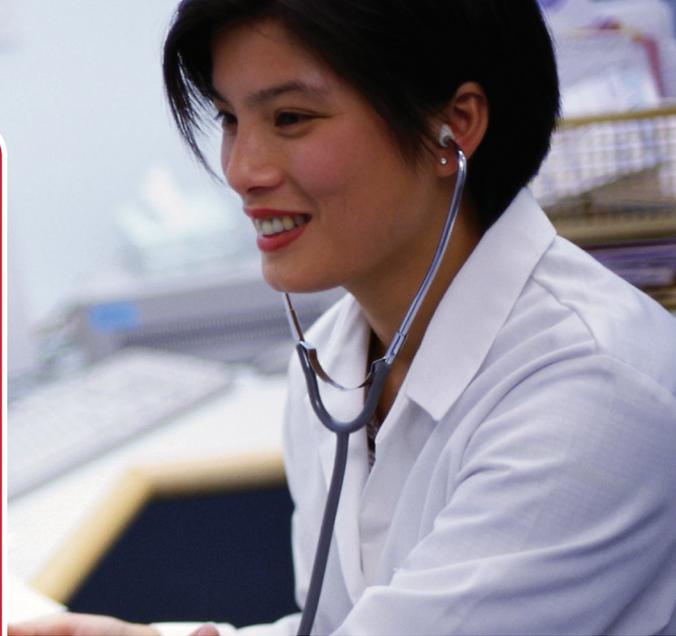
I'm having trouble finding a provider or obtaining a timely appointment. What can I do?

If you have difficulty finding a provider or getting an appointment that meets your needs, please call the Behavioral Health Access Center for help. Our coordinators can provide additional referrals, assist with getting you an appointment, and help you if you're experiencing an urgent situation.



This information refers to products and services offered by Harvard Pilgrim Health Care and its affiliate, HPHC Insurance Company.

Need care when your primary provider isn't available? Consider the benefits of a Harvard Pilgrim-participating urgent care clinic.



Urgent care clinics offer convenient care when you need it, like when you're not faced with a medical emergency but need immediate care, and your primary provider's office is closed.

What is an urgent care clinic?

Urgent care clinics are independent, freestanding facilities not connected to, or affiliated with, a hospital. These clinics offer medical treatment for illnesses or injuries that require immediate attention but are not life threatening. A doctor oversees the clinic with nurse practitioners, physician assistants and nurses typically providing overall care. These clinics can serve you well when your primary provider—or anyone in his or her office—can't see you and you don't need to go to an emergency room (ER).

Clinics provide:

- Same-day appointments and walk-in service
- Convenient, extended hours, including evenings and weekends*
- A lower-cost alternative to emergency room care
- Shorter waiting times than the ER
- Staff who will send a note to your primary provider for follow-up

You cannot use urgent care clinics for preventive services or for screenings such as school physicals, diabetes or pregnancy.

EXAMPLE OF WHEN YOU MAY NEED CARE AT AN URGENT CARE CLINIC:

- ▶ You cut your hand on broken glass after a late Saturday lunch. You call your primary provider but the office is closed. You don't want the wait or hassle of sitting in the ER; you're not even sure you need to go.

Other reasons why you may visit an urgent care clinic:

- Infections
- Coughs, cold and flu
- Minor injuries
- Respiratory infections
- Burns, rashes, bites, cuts and bruises
- Sprains and strains

If you think you're having a medical emergency, call 911 or go to the ER.

*Clinic hours, capabilities and types of services vary based on individual facility. Be sure to call and ask before you go.

Why go to an urgent care clinic instead of an emergency room (ER)?

Remember, always call your primary provider's office before going to an urgent care clinic. Many doctors' offices have their own extended or weekend hours. If your primary provider isn't available, a benefit to going to an urgent care clinic is that your cost sharing is typically a lot less than going to the ER.

With most Harvard Pilgrim plans, you'll pay only an office visit copayment.**

AVERAGE COST DIFFERENCES BETWEEN URGENT CARE CLINIC AND EMERGENCY ROOM VISIT

\$55 - \$195 Urgent care visit	\$440 - \$1,900 Emergency room visit
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Average costs are calculated based on Harvard Pilgrim's 2014 - 2015 cost estimate in Massachusetts, Maine and New Hampshire.

Can I go to any urgent care clinic?

As a Harvard Pilgrim member, you are covered at any of our participating urgent care clinics when medically appropriate. You'll find more than 100 clinics in Massachusetts, Connecticut, New Hampshire and Maine that participate in our network.

For some types of care, you also can visit participating MinuteClinic locations. While they're not urgent care facilities, MinuteClinics are retail-based health centers located in participating CVS locations and staffed by board-certified nurse practitioners. They offer Harvard Pilgrim members the convenience of walk-in care for common illnesses, like strep throat or the flu. No appointments or referrals are necessary.

How do I find a participating urgent care location?

You'll find Harvard Pilgrim-participating providers in our online directory at www.harvardpilgrim.org/providerdirectory. Follow these steps:

- Select your plan.
- Click on "Specialists" and then "Urgent Care Centers."
- For MinuteClinic locations, go to the main provider directory page for your plan and type "MinuteClinic" in the search bar.

If you don't have Internet access, you can call Harvard Pilgrim for locations.



Think you need care from an urgent care clinic?

REMEMBER:

- + Check to see if your primary provider is available first
- + Office visit copayments apply, plus any cost-sharing payments

If you think you're having a medical emergency, call 911 or go to the ER.

WANT MORE INFORMATION?

If you have questions about your Harvard Pilgrim coverage, call our Member Services department toll-free at **(888) 333-4742**. You also can look up your plan information at www.harvardpilgrim.org/members.

Simply log into your *HPHConnect* account. If you don't have one, it takes just minutes to create.

**If you're enrolled in a tiered network plan, the cost for the clinic services is always Tier 1.



Harvard Pilgrim Health Care includes Harvard Pilgrim Health Care, Harvard Pilgrim Health Care of Connecticut, Harvard Pilgrim Health Care of New England and HPHC Insurance Company.

For common illnesses, a “MinuteClinic” may save you money and time



Did you know there’s a way to get quick, convenient care for common family illnesses without an appointment — even “after-hours” or during a weekend? No, we don’t mean the emergency room. We’re talking about MinuteClinic, the walk-in clinic located inside select CVS/pharmacy stores. Harvard Pilgrim contracts with MinuteClinic to offer members the convenience of walk-in care for common illnesses that typically require straightforward treatment.

MinuteClinic walk-in clinics are staffed by board-certified nurse practitioners who can diagnose, treat and prescribe medications for common illnesses such as strep throat, bronchitis, and ear and eye infections. They also can provide treatment for minor injuries and skin conditions.

You don’t need a referral or appointment to visit MinuteClinic, just walk in. MinuteClinic locations are open seven days a week, including evenings and weekend.



Haven’t received your flu shot yet? Don’t forget that you can get yours at a participating MinuteClinic. If that’s the only reason for your visit, it’ll be at no cost to you!

Visit any of these Massachusetts MinuteClinic locations inside CVS/pharmacy, or visit www.minuteclinic.com or www.harvardpilgrim.org to locate the site nearest you.

ASHLAND 414 Union Street	DANVERS 311 Newbury Street	MARSHFIELD 1880 Ocean Street	NORTH ATTLEBORO 8 E Washington Street	TAUNTON 284 Winthrop Street
BEVERLY 19 Dodge Street	EAST WEYMOUTH 1515 Commercial Street	MAYNARD 105 Main Street	NORTHBOROUGH 24 W Main Street	TEWKSBURY 1900 Main Street
BRAINTREE 270 Grove Street (Tedeschi Shopping Plaza)	FALL RIVER 1620 President Avenue	MEDFIELD 555 Main Street	NORTON 35 W Main Street	WELLESLEY 188 Linden Street
BRIDGEWATER 19 Summer Street	FRANKLIN 272 East Central Street	MEDFORD 85 High Street	PLYMOUTH 8 Pilgrim Hill Road	WESTFORD 174 Littleton Road
BROCKTON 316 N. Pearl Street	HANOVER 207 Rockland Street	MEDWAY 67 D. Main Street	QUINCY 600 Southern Artery	WEYMOUTH 1515 Commercial Street
CAMBRIDGE 36 White Street 211 Alewife Brook Parkway	KINGSTON 189 Summer Street	NATICK 137 West Central Street	ROCKLAND 80 Market Street	WILMINGTON 222 Main Street
		NEWTON 978 Boylston Street	STOUGHTON 1025 Central Street	

Be sure to find out your nearest location’s hours of operation.

Want more information?

To learn a particular location’s address or hours, visit www.MinuteClinic.com or call **866-389-ASAP (2727)**.

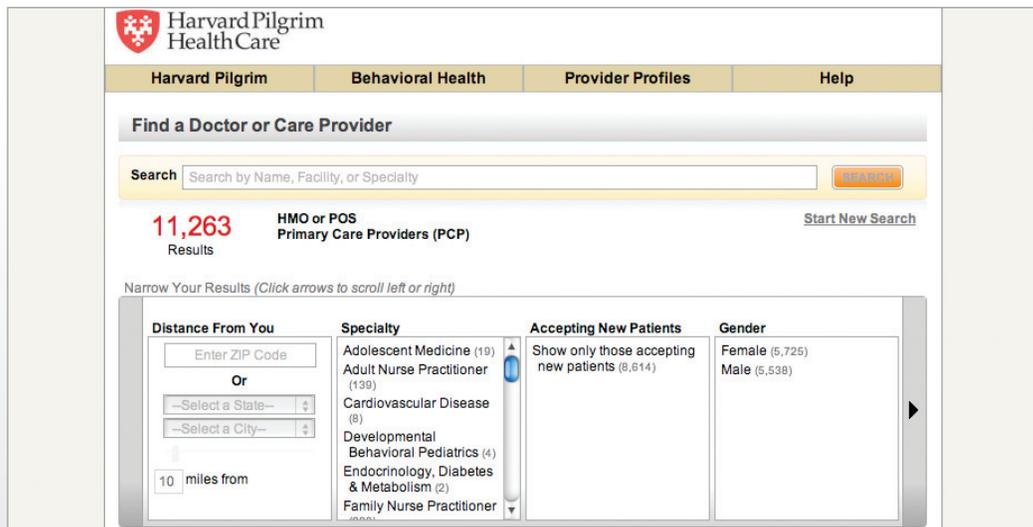
If you have questions about your Harvard Pilgrim coverage, call our Member Services department toll-free at **(888) 333-4742**. (Hours of operation are 8 a.m. - 7:30 p.m. EST on Monday and Wednesday, and 8 a.m. - 5:30 p.m. on Tuesday, Thursday and Friday.)



Count us in to help you find providers who accept Harvard Pilgrim.

Chances are very good that the doctors, health professionals and hospitals you know and trust accept Harvard Pilgrim.¹ To find out if yours do, use our online provider directory at www.harvardpilgrim.org.

- 1 Go to www.harvardpilgrim.org and visit the members page by choosing the “members” tab on the left.
- 2 In the upper right corner, click on “Find a doctor.”
- 3 Then, choose “Find a doctor, hospital or facility.”
- 4 You’re now in our provider lookup tool. Under standard plans, choose “PPO.”
- 5 The next screen lets you search by name, facility, specialty or provider type.
- 6 If searching by provider type, you can narrow your search by:
 - Using your ZIP code to find providers near you
 - Selecting a certain specialty
 - Choosing only providers accepting new patients
 - Indicating your preferred provider gender
 - Selecting providers who speak additional languages
 - Selecting providers with admitting privileges at specific hospitals or affiliated with certain provider groups



¹ Some products require referrals and restrictions may apply. Check your benefit information for plan details.

Questions? If you have questions or need help, just give us a call.

Already a Harvard Pilgrim member? Call **(888) 333-4742**. Not yet a member? Call **(800) 848-9995**. For TTY service, call **(800) 637-8257**.

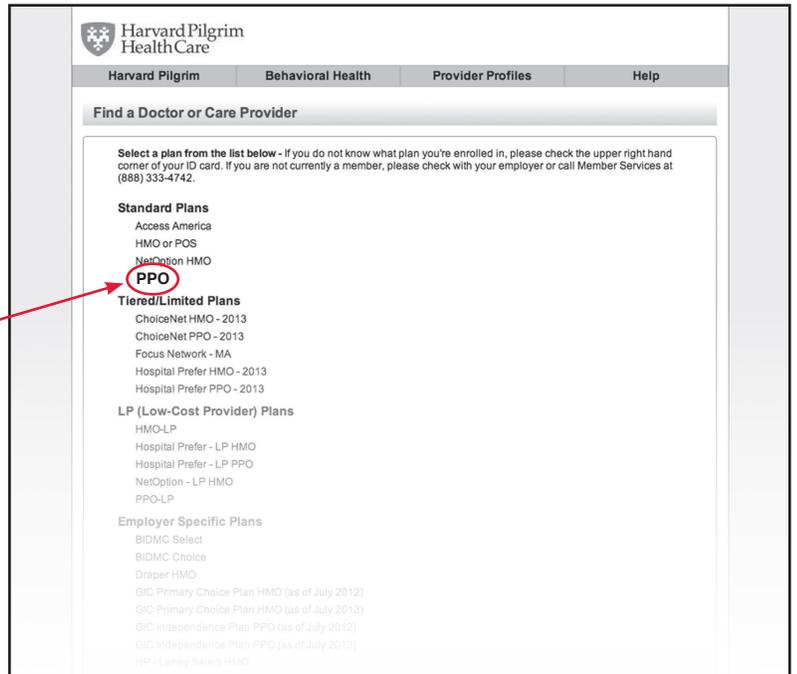
Finding a provider

Harvard Pilgrim's PPO plans give you access to thousands of providers and hospitals locally and across the country.

To find participating providers near you:

- ▶ Visit www.harvardpilgrim.org/providerdirectory and click on the link for the PPO plan you're considering.

Includes Best Buy PPO, Best Buy HSA PPO and Core Coverage PPO.



- ▶ Look for the following ID card, which will have a **UnitedHealthcare Options PPO Network** logo on the back (lower right-hand corner), and click to bring up the directory.

Notice to Members

- For Member Services, call: **888-333-HPHC (4742)**
- For Mental Health and Substance Abuse services, call United Behavioral Health at: **888-777-HPHC (4742)**.
- In a medical emergency, go to the nearest emergency facility or call **911** or other emergency number.
- If hospitalized, notify the Plan within 48 hours.
- Contact the Plan at **800-708-4414** to request approval for:
 - admission by a non-participating physician and/or hospital.
 - all services listed in the Schedule of Benefits requiring approval.

Please refer to your evidence of coverage for a full description of your benefits.

www.harvardpilgrim.org

Notice to Providers

- In MA, ME, NH, CT, RI, VT: **800-708-4414** or www.harvardpilgrim.org
- Medical Claims: Payer ID: 04271
- HPHC, PO Box 699183, Quincy MA 02269-9183.
- In other states: **800-693-5254**
- United Health Shared Services
- Medical Claims: Payer ID 39026
- Group Number: 11-123456
- PO Box 30783, Salt Lake City, UT 84138 • www.uhis.com

UnitedHealthcare Options PPO Network

shared savings MultiPlan

HPHC-61 rev 3/09

Questions?

- ▶ If you are already a Harvard Pilgrim member, call **(888) 333-4742**.
- ▶ If you are not yet a Harvard Pilgrim member, call **(800) 848-9995**.

For TTY service, call **(800) 637-8257**.



Be well, save money and use your plan with www.harvardpilgrim.org

Our Web site for members is designed to make it easy for you to get information and do the things you need to do to make the most of your Harvard Pilgrim plan.

That includes learning about:

- + Ways to improve your overall health and well-being
- + Special programs and tips to help you save money along the way
- + Tools and resources to help you manage your plan benefits

Be well

Learn about important topics affecting your health

- Access preventive care guidelines
- See educational resources on condition and disease management, including cholesterol, blood pressure, asthma, ADHD, depression, diabetes, cancer and heart health
- Take a health quiz
- Look up health topics from A to Z
- Check out our health and wellness publications for members
- Search online resources via our Web library

Health improvement

- Learn about treatment options and how to prepare for a procedure 
- Participate in our Healthy Pregnancy program using interactive tools
- Take a Health Questionnaire and learn your wellness score 
- Visit www.harvardpilgrim.org/wellness for well-being support based on where you are in life



About **HPHConnect** for members

HPHConnect is a secure online member account that helps you manage your personal health through a wide variety of tools and resources.

continued ►



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

Save
money

Save on products and services to help you keep fit and healthy

- See the newest additions to our Your Member Savings program, which features special savings on health-related products and services including eyewear, fitness reimbursement,* nutrition, alternative complementary medicine, safety products, eldercare and much more

Save on medications**

- Learn how to save with generic prescriptions
- Order mail service prescriptions 

Use your
plan

Providers and services

- Find participating physicians
- See physician hospital affiliations and profiles
- Choose or change your primary care physician 
- Compare hospital safety and quality 
- Find typical costs for tests and procedures

Your prescriptions**

- Look up your medications by tier or retail price
- Find a pharmacy
- Check your prescription drug records 

Your benefits and records

- Check your benefit and eligibility details 
- Check the status of your claims and authorizations 
- Track your health history (including allergies, illnesses/conditions, procedures and family history) and share information with providers using your Harvard Pilgrim Personal Health Record 
- Order an ID card 
- Update your contact info 
- Learn about new member programs
- Find out about benefit changes

* \$150 maximum reimbursement per Harvard Pilgrim policy in a calendar year (individual or family policy). Restrictions apply; reimbursement is not available to all members. Visit www.harvardpilgrim.org/savings or call us for details. (For tax information, consult with your employer.)

** If your employer offers prescription drug coverage through Harvard Pilgrim.



We're also available
by phone

Contact Member Services
at (888) 333-4742. If you are
deaf or hard-of-hearing,
please call (800) 637-8257
for TTY service.



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

Now iKnowSM

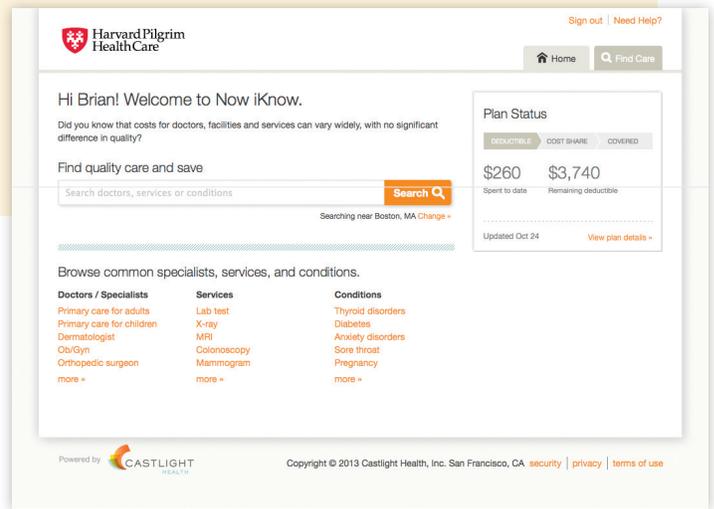
A better way to shop for health care



When you shop for a house, a car or even groceries, you can compare price and quality, and make decisions based on what's right for you. Why shouldn't you be able to do the same with your health care? Now iKnow gives you the power to do just that.

Now iKnow is an online cost and quality tool that helps you:

- ▶ **Compare** cost information and quality ratings
- ▶ **Prepare** financially for all types of care—office visits, surgery and more
- ▶ **Save** on health care costs by making more-informed decisions



What makes Now iKnow unique?

Now iKnow helps you understand and plan for potential out-of-pocket costs related to your health care options by giving you:

- Comparative cost information, updated monthly, for our network of providers in Massachusetts, Maine and New Hampshire
- Estimates for hundreds of services and conditions, based on your specific plan
- Quality ratings for doctors and hospitals based on national benchmarking data
- Up-to-date cost-sharing information for your specific plan—like deductible requirements—so you know what your out-of-pocket costs will be before you get services

continued on back ▶▶

Examples of cost savings in Massachusetts – Member has an HSA plan with a \$4,000 family deductible

1 Dermatology office visit (follow-up)			2 MRI - lower back (without contrast)		
Lowest price	Highest price	Savings	Lowest price	Highest price	Savings
\$90	\$172	\$82	\$602	\$890	\$288

Estimates are generated by Castlight and Harvard Pilgrim. They are personalized estimates based on Harvard Pilgrim historical claims data and may not reflect the actual total price. Estimates are based on the member's Harvard Pilgrim plan as of the search date. The actual cost may differ if the member receives additional services, the coverage changes or the provider bills the service differently. Members should not rely exclusively on Now iKnow or any other price estimate to make health care purchasing decisions.



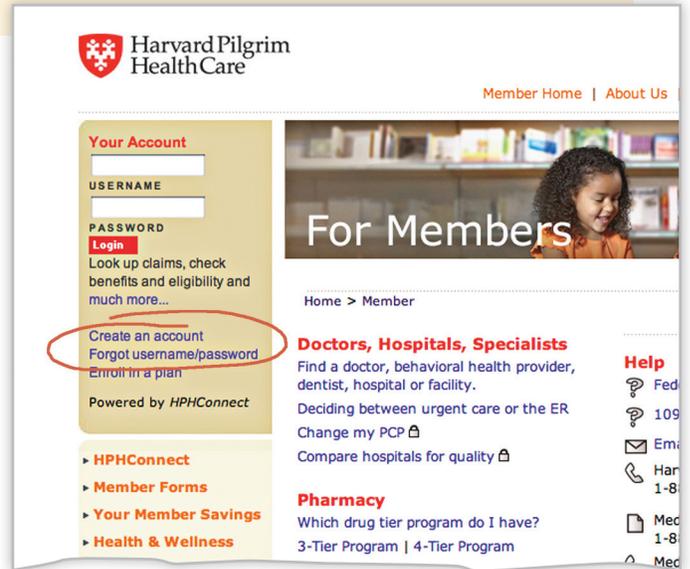
How to access Now iKnow

Go to www.harvardpilgrim.org/members and log in to your *HPHConnect* account. Then click on the Now iKnow link listed under the “My Plan” section.

Not registered on *HPHConnect* for Members?

If you do not have an account, setting up an account is quick and easy.

- Go to www.harvardpilgrim.org/members
- In the shaded box on the upper left side of the page, select “Create an account” (If you forgot your username and password, select “Forgot username/password” and follow the instructions)
- Enter your Harvard Pilgrim I.D. number (from your I.D. card), birth date, ZIP code and the last four digits of the subscriber’s Social Security number
- Choose a username and password to activate your account



Better transparency. Better choices. Better savings.

Questions?

Call our Member Services department at **(888) 333-4742**. For TTY service, call **(800) 637-8257**.



Harvard Pilgrim Health Care includes Harvard Pilgrim Health Care, Harvard Pilgrim Health Care of Connecticut, Harvard Pilgrim Health Care of New England and HPHC Insurance Company.

YOUR MEMBER SavingsSM

Discover big discounts on your path to wellness.



Up to
\$150
Fitness
Reimbursement
DETAILS INSIDE

**Free
Eyewear
Program**
DETAILS INSIDE



20%-50%
DISCOUNTS
on dental
procedures
DETAILS INSIDE



Harvard Pilgrim
HealthCare

Free eyewear program at Visionworks®

Have your routine eye exam¹ at participating Visionworks and get a free pair of prescription eyeglasses from a select store collection. Just show your Harvard Pilgrim ID card upon arrival for your appointment. You must choose and order your free eyewear on the day of your exam.

With a covered eye exam, you get FREE:

- Frames from the Harvard Pilgrim Silver Collection
- Single vision, non-coated plastic lenses (or single vision polycarbonate lenses for children ages 14 and under)

If you upgrade your frames and lenses, you'll still receive great savings on Harvard Pilgrim's Platinum and Designer collections, bifocal lenses, and standard progressive/multifocal lenses. Visit www.harvardpilgrim.org/savings for details.

More eyewear savings

Save big at many popular locations²

Purchase a complete pair of glasses and get 35% off frames, plus additional discounts on lenses and lens options.³

And save 20% on any frame or lens options purchased separately, or on any optical accessory. Locations include:

- LensCrafters®
- Sears Optical
- Pearle Vision®
- Target Optical
- JCPenney Optical®

You can also get 40% off frames at Harvard Vanguard Medical Associates and a 20% discount on prescription sunglasses.

Get more savings at many independent eyewear providers

To learn more about these savings, visit www.harvardpilgrim.org/savings or call us at one of the numbers listed on the back cover.

**Wear contact lenses?
Great savings available
at many of our
eyewear partners.**

**Be sure to present
your Harvard Pilgrim
ID card along with
your valid written
vision prescription at
any of these locations.**



➔ **Up to 25%
off laser vision
correction
procedures**

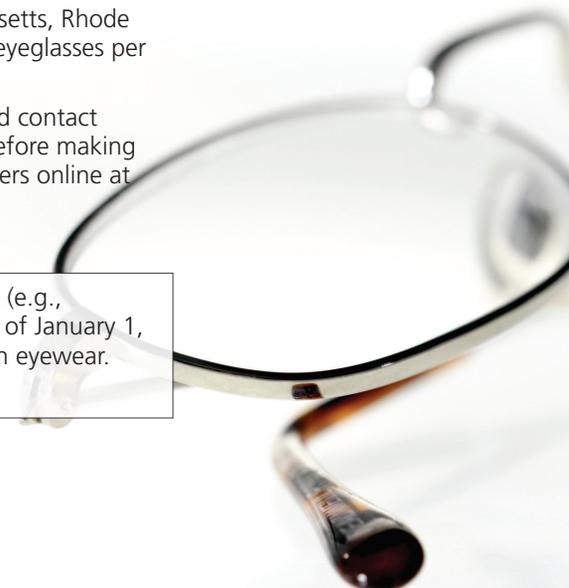
Two great options to save on laser vision procedures, including LASIK and Photorefractive Keratectomy (PRK)! Choose from more than 20 facilities in Massachusetts, Maine and New Hampshire. Visit www.harvardpilgrim.org/savings for details.

¹ Free eyewear program is available only at select participating locations in Massachusetts, Rhode Island and New Hampshire. Offer subject to restrictions; limited to one free pair of eyeglasses per member per year.

² Participating eyewear providers offer special savings on items such as eyeglasses and contact lenses. Not all are contracted with Harvard Pilgrim to provide covered eye exams. Before making an appointment, refer to the most up-to-date listing of contracted eye exam providers online at www.harvardpilgrim.org/savings or call us at a number listed on the back.

³ Valid at participating locations only. Restrictions apply.

Coverage for routine eye exams varies according to your specific health plan design (e.g., copayments or coinsurance). Per the Patient Protection and Affordable Care Act, as of January 1, 2014, some small group and individual plans include coverage for some prescription eyewear. Please see your *Schedule of Benefits* and applicable Rider for details.





Fitness pays!

Harvard Pilgrim members who belong to a qualified health and fitness club for four months can get up to \$150 back.⁴

How you're eligible

You're eligible for money back as long as your employer offers fitness reimbursement or you're enrolled in one of our Buy Direct plans. You can receive up to \$150 reimbursement when you're both a member of Harvard Pilgrim and any qualified health and fitness club⁵ for four months in the current calendar year. Don't wait to get fit. It pays!

Most health and fitness clubs qualify

If your health and fitness club is a full-service facility that offers cardiovascular and strength-training equipment and facilities for exercising and improving physical fitness, it likely qualifies. Most "traditional" health and fitness clubs, YMCAs and Jewish Community Centers (JCCs) qualify.

Facilities and/or programs that don't qualify for reimbursement include country or social clubs, spas, fees for trainers, gymnastics centers, martial arts studios, tennis, aerobic or pool-only facilities, as well as sports teams or leagues. Individual and group classes are not eligible for reimbursement.

Complementary and Alternative Medicine

Take a balanced approach to wellness—and save up to 30%

Save 10%-30% on a wide range of services offered through our partnership with Healthways Whole-Health Networks. With more than 40,000 credentialed practitioners *nationwide*, Healthways manages one of the leading Complementary and Alternative Medicine networks in the country.

Choose from more than 30 options, including:

- Acupuncture⁶
- Chiropractic⁶
- Massage and bodywork
- Chinese herbal medicine
- Naturopathic medicine
- Yoga and Pilates
- Tai chi and qigong
- And more



Visit www.harvardpilgrim.org/cam to learn more.

⁴ \$150 maximum reimbursement per Harvard Pilgrim policy in a calendar year (individual or family policy). Restrictions apply; reimbursement is not available to all members. Visit www.harvardpilgrim.org/savings or call us for details. (For tax information, consult with your employer.)

⁵ A full-service club is one that is open to the general public with multiple pieces of equipment designed for cardiac and strength training.

⁶ Program does not replace or supplement coverage under your Harvard Pilgrim medical benefits plan. Some plans include chiropractic and/or acupuncture coverage, in which case the provider networks and office visit benefits differ. Once a member, consult with your plan administrator for information or call for details.

Per the Patient Protection and Affordable Care Act, as of January 1, 2014, some small group and individual plans include coverage for fitness reimbursement. Please see your *Benefit Handbook* and *Schedule of Benefits* for details.

Universal Dental Plan

A new reason to smile

Universal Dental Plan is a unique solution to the high cost of dental care. An independent discount dental plan, Universal Dental Plan provides member-only discounts of **20%-50% on all procedures** from a network of participating dentists.

Harvard Pilgrim members also get up to 28% off Universal Dental Plan's membership fees.

How it works

- 1 Select one of three options.** Choose from Individual, Individual +1 or Family.
- 2 Pay the membership fee.** Choose between a monthly or an annual payment.
- 3 Make an appointment with the dentist.** Select a dentist from Universal Dental Plan's network of dentists, and schedule an appointment using your Universal Dental Plan membership ID number.⁷
- 4 Save immediately.** Pay your dentist at the time of the visit and save up to 50%. Universal Dental Plan's discounted prices are pre-negotiated and displayed on the fee schedule online at www.universaldentalplan.com/hphc.

Universal Dental Plan member advantages

Universal Dental Plan is transparent, hassle-free and very easy to use. Because it's not dental insurance, you'll enjoy:

- **The dental care you need when you need it.** Universal Dental Plan has no waiting periods, no restrictions and no limitations, no matter how complicated your dental care need is.
- **No procedure limits or annual maximums.** There is no annual cap (maximum) on how much you can save, and there are no frequency limits on any type of procedure. You can go to the dentist as much as you need and save every time.
- **No age limitations.** Everyone is accepted; Universal Dental Plan is truly universal!

Become a member now

- Visit www.universaldentalplan.com/hphc. Or, call (617) 859-1777 or (800) 894-8984.
- When enrolling as a Universal Dental Plan member, be sure to use promotional code **HP4742**.
- Review the Universal Dental Plan Online Dentist Directory at www.universaldentalplan.com/hphc to see if your current dentist accepts Universal Dental Plan.
- All members receive a 60-day "no hassle" money-back guarantee.

⁷ Universal Dental Plan membership ID number is assigned immediately upon every completed enrollment.

Universal Dental Plan is not dental insurance. This plan does not meet minimum creditable coverage under applicable state law. The plan provides discounts at specific dental providers for dental services. The plan does not make payments directly to the providers of dental services. The plan member is obligated to pay for all dental care services but will receive a discount from those dental care providers who have contracted with the discount dental plan organization. The range of discounts will vary depending on the services provided. The plan is offered to all eligible Harvard Pilgrim members and may be discontinued at any time. For questions concerning the Plan, including a listing of network providers, please contact Universal Dental Plan: 20 Park Plaza 4th Floor, Boston, MA 02116. (800) 894-8984, www.universaldentalplan.com, info@universaldentalplan.com.



Go to
www.universaldentalplan.com/hphc
to view the current Universal Dental
Plan Fee Schedule of discounted
prices.

More ways to save on your path to wellness

Nutrition programs

- **DASH for Health® Online Program**
 - 50% off a six-month subscription
- **Diet.com**
 - Save up to 35% off membership
- **Healthy Habits Kitchen – 25% off delicious, nutritious meal kits**
- **iDiet in-person or online programs**
 - Save \$99 on community group rate
- **Jenny Craig®**
 - Free 30-day trial program⁸
 - 25% off a premium program
- **Meals to Heal – 10% off meals for cancer patients and their caregivers**
- **Weight Watchers® Registration fee waived at traditional meetings⁹**
 - In Maine, registration fee is waived with purchase of monthly pass

Fitness and sports clubs

- **Select fitness network**
 - Special discounts at selected fitness clubs
- **Boston Ski & Sports Club**
 - Save 23% on membership
- **Appalachian Mountain Club (AMC)**
 - Save 20% on membership
- **Genavix Wellness Network**
 - Discounts on “90 Day Commit To Get Fit” program and comprehensive wellness assessment

Health and fitness magazine subscriptions

- **Save up to 83% on magazine subscriptions**

New parent support

- **Safe Beginnings®**
 - 15% off merchandise
- **The Happiest Baby™**
 - 40% off selected CDs and DVDs

Complementary and Alternative Medicine

- **Mindful magazine**
 - 25% off subscription
- **Mindfulness course (UMass Medical School)**
 - 15% discount
- **RESPeRATE Blood Pressure Machine**
 - \$50 rebate
- **Savings at Massage Envy in MA, ME and NH**

Athletic needs

Save 15% on athletic footwear at these fine specialty stores:

- **Marathon Sports**
- **Northampton Running Co.**
- **Runner’s Alley**
 - Save 5% on exercise equipment and services
- **Workout Fitness Store**

Eldercare

- **Home Instead Senior Care**
 - \$100 credit at participating offices and free home safety inspection
- **SeniorAssist for caregivers**
 - \$500 off lifetime flat fee for services
- **My Vigorous Mind**
 - FREE trial and 10% off membership
- **CareScout**
 - 20% discount on the Eldercare Advocacy Program

Hearing aids

Save at the following locations:

- **HearPO**
- **Flynn Associates**
- **Speech-Language and Hearing Associates of Greater Boston, PC**

Smoking cessation

- **Craving to quit – 25% off this smartphone-based program**
- **QuitSmart®**
 - 18% off smoking cessation programs

More ways to save!

- **My Notification Service**
 - 50% discount on membership
- **Newbury Hypnotherapy**
 - 35% off hypnosis services
- **Care.com**
 - 25% off membership
- **Green City Growers**
 - 15% off installation
- **Community health education programs**
 - Up to 25% off programs
- **MedMinder electronic pill dispensers**
 - 20% off membership fee
- **The Original Healing Threads™**
 - 15% off clothing
- **Sense-Able Autism Spectrum Disorder Products**
 - 15% discount on products
- **In Control Crash Program**
 - 15% discount for member and family
- **Support Plus™**
 - 10% off products
- **Personal Emergency Response System**
 - \$10% discount
- **New England Spas**
 - Save \$300 on hot tub or spa

Want all the details?

Visit www.harvardpilgrim.org/savings or call us at one of the numbers listed on the back cover. ➔

⁸ Food and, if applicable, shipping not included. Offer applies to initial membership fee only and is valid at participating U.S., Canada and Puerto Rico centres and through Jenny Craig At Home®.

⁹ Discount available at all Weight Watchers North America locations. Some locations are owned locally and may not honor this discount. Discount does not include Weight Watchers online programs.

Per the Patient Protection and Affordable Care Act, as of January 1, 2014, some small group and individual plans include coverage for weight loss programs. Please see your *Benefit Handbook* and *Schedule of Benefits* for details.

Learn all the program details. Visit
www.harvardpilgrim.org/savings.

If you don't have Internet access or you have additional questions, call us.

If you're an existing Harvard Pilgrim member, please call the
Member Services department toll-free at **(888) 333-4742**.

If you're not currently a member, call **(800) 848-9995**.

For TTY service call **(800) 637-8257**.

Harvard Pilgrim is pleased to make these savings available to you. Your Member Savings is not an insurance product. Rather, it's a program that offers our existing health plan members discounts for programs and services designed to help keep you healthy and active. To the fullest extent permitted by applicable law, we bear no responsibility or liability for any injury or damages that might arise out of or result from use of any of these products or services. We also recommend that you check with your physician before starting any exercise program. Programs, discounts and prices are subject to change without advance notice. Please visit www.harvardpilgrim.org/savings for the most current information.



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Harvard Pilgrim Health Care of Connecticut, Harvard Pilgrim Health Care
of New England and HPHC Insurance Company.