New Hampshire
2022 Product Guide

Better choices.
Better coverage.
Better value.

For employers with
51 or more eligible employees

Harvard Pilgrim Health Care includes Harvard Pilgrim Health Care,
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Guiding people to better health

Harvard Pilgrim offers a full range of health insurance solutions for employees, while also delivering outstanding customization, coverage, choice and value for employers.

Full, tiered and virtual network plans
Our HMO, POS, PPO* and ElevateHealth products are built around best-in-class local providers who deliver high-quality care at an excellent value. SimplyVirtualSM HMO and Virtual ChoiceSM HMO give members 24/7 access to primary care through Doctor On Demand.

New England & national coverage
Our regional network has more than 90,000 doctors and other clinicians, and more than 180 hospitals. Our PPO plans give members access to providers across the United States.

Self-insured solutions
Harvard Pilgrim and its affiliate, Health Plans, Inc., offer self-funded plans with strong choice and flexibility to meet varying needs. Our New Hampshire self-funded plans feature savings opportunities and are available for large group employers.

Retiree options
Available through employers to their retirees, Medicare Enhance fills in the gaps that Medicare doesn’t pay. Members can live anywhere in the U.S. and visit any provider that accepts Medicare.

* PPO plans are underwritten by HPHC Insurance Company.

Committed to New Hampshire’s communities

Service is more than good business.

As a not-for-profit, service inspires our social mission. We’re driven by a human concern for the health challenges facing our neighbors and communities. And we’re dedicated to helping resolve them, through our partnerships with dozens of New Hampshire nonprofit organizations.

In 2020, over $1.7 million was contributed to New Hampshire nonprofit organizations.
We offer local and national networks

Harvard Pilgrim Health Care network
• 90,000+ doctors and clinicians
• 180+ hospitals

National network through UnitedHealthcare¹
• 1.2 million providers
• 6,000+ hospitals

Access America℠: national coverage close to home

Harvard Pilgrim’s Access America℠ and Access America℠ Value plans, sold in partnership with UnitedHealthcare, offer a consistent health plan experience for all employees.²

These plans are available to employer groups that are headquartered in New Hampshire and meet the following requirements:

<table>
<thead>
<tr>
<th>Eligible Employees</th>
<th>Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>150-250 employees</td>
<td>At least 20% of employees located MA, ME or NH At least 20% of employees located in other states</td>
</tr>
<tr>
<td>250+ employees</td>
<td>At least 50 employees located in MA, ME or NH At least 50 employees located in other states</td>
</tr>
</tbody>
</table>

¹ UnitedHealthcare’s Options network.
² The Access America℠ network includes Harvard Pilgrim’s contracted providers in Maine, Massachusetts and New Hampshire, and UnitedHealthcare’s Choice Plus providers elsewhere in New England and the U.S.
We make switching health insurance easy

Switching insurance benefits should be a seamless experience — and with Harvard Pilgrim SmartStart, it is. As part of our ongoing commitment to service and support, SmartStart eliminates the hassle and uncertainty of switching health insurance. We get employers and members up and running — even before their coverage starts.

Superior service

Skilled support
Access to your own experienced sales team, to ensure successful implementation.

Employer education
We will identify, recommend and implement self-service options, including member portal, EDI resolution interface and online billing.

Early member engagement

Pre-enrollment resource
Our prospective member call center is dedicated to answering employees’ questions about specific benefits and coverage before they enroll.

Virtual benefit fairs
We’ll set up an open enrollment website with information about employers’ Harvard Pilgrim plan options. There’s no hassle and no extra cost!

Clinical transitions
Members have pre-enrollment support for prior authorizations, pharmacy coverage and clinical care team connections, which ensures a seamless transition and continuity of care.

Access to digital ID cards
If they need them, members can get digital ID cards even before their coverage is effective.

Data capture

Guided digital welcome experience
We’ll capture member information through a quick digital journey as soon as enrollment is complete. This additional channel for early and easy collection of member data ensures the complete capture of important information.

PCP and data verification
Our data capture journey verifies primary care information and helps members get the right services to optimize their health and well-being.
Helping members get the most value out of their plan

Our digital welcome guide makes it quick and easy to get started. It takes members just five minutes to input their health information. When they create accounts, employees will instantly get access to helpful online tools and resources to save money, stay healthy and seek guidance for health care concerns. These tools and resources include:

- Access to digital ID card (Apple Wallet compatible)
- Confirmation of PCP or chance to choose one
- Completed personal health assessment, which helps connect the member with services
- Opportunity to access a clinical care team for assistance
- Information about how to get the most value out of their new plan

Members can access all tools through their member account at [www.harvardpilgrim.org](http://www.harvardpilgrim.org).
Taking the guesswork out of plan selection

MyHealthMath\(^1\) helps employees select the plan that gives them the best value. This program is available to fully insured large groups that have more than 100 subscribers and that offer at least two plan options, including an HSA-eligible plan.

How it works

1 Interview
The employee participates in a confidential interview to help MyHealthMath understand their medical usage. They have the option of choosing either a 15-minute phone interview or an even quicker online questionnaire.

2 Results
Interview responses go through a proprietary algorithm that factors in the employer’s plan options and the employee’s expected medical usage.

3 Report
Once the phone or online interview is completed, MyHealthMath emails the employee a personalized report with the total cost-value comparison of all the employer’s plan options. (For select employers renewing with Harvard Pilgrim, employees will receive an automated report card at the beginning of open enrollment that shows a calculated savings estimate based on claims history from the past 12 months. The report is a great way to show how their current plan has worked for them.)

4 Decision
The employee uses the information to make an informed decision when choosing their new health plan.

How it helps employees

- **Personalized approach to engage the employee**
- **Confidence they’re making sound decisions about health insurance**
- **Customized report to help them see how they can save money**
- **Average savings of 6.3% in annual medical costs for employees, resulting in savings for the employer\(^2\)**

\(^1\) MyHealthMath is not affiliated with Harvard Pilgrim Health Care. Harvard Pilgrim has an arrangement with MyHealthMath to offer its service to prospective and current Harvard Pilgrim members.

\(^2\) Information based on MyHealthMath 2017-2018 internal data.
## Our plans include great benefits

No matter which fully insured plan an employer offers, they all include these core benefits.

<table>
<thead>
<tr>
<th>Benefit Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acupuncture and chiropractic</td>
<td>Treatment for managing pain</td>
</tr>
<tr>
<td>Behavioral health and substance use disorder services</td>
<td>Counseling and psychotherapy</td>
</tr>
<tr>
<td>Ambulatory patient services</td>
<td>Outpatient care without hospital admission</td>
</tr>
<tr>
<td>Pregnancy, maternity and newborn care</td>
<td>Care before, during and after pregnancy</td>
</tr>
<tr>
<td>Emergency services</td>
<td>Trips to the emergency room (ER), when medically necessary</td>
</tr>
<tr>
<td>Prescriptions</td>
<td>Access to safe, effective medications</td>
</tr>
<tr>
<td>Eye exams</td>
<td>One preventive screening every year</td>
</tr>
<tr>
<td>Over-the-counter prescriptions</td>
<td>Certain over-the-counter drugs are included in all our formularies</td>
</tr>
<tr>
<td>Hospitalization</td>
<td>Inpatient services, such as surgery</td>
</tr>
<tr>
<td>Preventive care and chronic disease management</td>
<td>Doctor visits for wellness exams, shots, screenings, health maintenance, etc.</td>
</tr>
<tr>
<td>Laboratory services</td>
<td>Blood work, screenings, etc.</td>
</tr>
<tr>
<td>Rehabilitation and habilitative services and devices</td>
<td>Rehab services, hospital beds, crutches, oxygen tanks, etc.</td>
</tr>
</tbody>
</table>
Covering the prescriptions our members need

Our prescription drug coverage focuses on choice and value.

Harvard Pilgrim has partnered with OptumRx for pharmacy benefit management services. The result is an easier, enhanced experience that makes it simple and convenient for members to order, manage and receive prescription medications.

Members can get prescriptions from more than 67,000 pharmacies nationwide. OptumRx’s mail order pharmacy, OptumRx Home Delivery, gives members the convenience of having prescriptions shipped to their home. CVS Specialty is our primary specialty pharmacy provider.

Questions about our prescription drug program?

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

Select the year and the plan (e.g., 2022 Value 5-Tier) to:

- See which drugs are covered
- Look up drug prices
- Get details on home delivery
- Find nearby in-network pharmacies, and more!
Reduce My Costs helps members save money and earn rewards

When members are scheduled to receive outpatient procedures or diagnostic tests, Reduce My Costs helps them find lower-cost providers and care. They just call (855) 772-8366 or use the Reduce My Costs chat feature whenever their doctor recommends an outpatient test or procedure such as:

- Radiology (e.g., MRI and CT scan)
- Lab work
- Mammogram
- Ultrasound
- Bone density study
- Colonoscopy
- Other non-emergency outpatient test or procedure

Members will speak with an experienced nurse who will:

- Compare provider costs and inform them of the lower-cost providers in their area
- Assist with scheduling or rescheduling their appointment and help with any paperwork

With this program, members can pay less in out-of-pocket expenses and may also be eligible for a reward if they choose a more affordable option. And if they’re already seeing a lower-cost provider, members receive a reward just for calling.²

1 Certain services may require a referral and/or prior authorization before members can receive services from the lower-cost provider. To ensure the services will be covered, members should refer to their plan documents or contact Harvard Pilgrim at (888) 333-4742. The Reduce My Costs program is not offered with all Harvard Pilgrim plans, including Littleton Options HMO. Please review plan documents to confirm whether the Reduce My Costs program is offered.

2 Rewards are considered taxable income; members should consult with their tax advisors.
The care our members need, when they need it

When their primary care providers’ offices aren’t open, members who need medical care for a non-life-threatening injury or illness have urgent care options — other than the ER — that can save time and money.

<table>
<thead>
<tr>
<th>Typical out-of-pocket costs</th>
<th>Common symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Telemedicine services</strong></td>
<td>• Coughs, colds</td>
</tr>
<tr>
<td>Real-time virtual visit with</td>
<td>• Sore/strep throat</td>
</tr>
<tr>
<td>Doctor On Demand providers via smartphone,</td>
<td>• Flu</td>
</tr>
<tr>
<td>tablet or computer</td>
<td>• Pediatric issues</td>
</tr>
<tr>
<td></td>
<td>• Sinus and allergies</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Convenience care/retail clinic</strong></td>
<td>• Nausea/diarrhea</td>
</tr>
<tr>
<td>Walk-in, convenience care or</td>
<td>• Rashes and skin issues</td>
</tr>
<tr>
<td>retail clinic (e.g., MinuteClinic inside of CVS pharmacies)</td>
<td>• UTIs, yeast infections</td>
</tr>
<tr>
<td></td>
<td>• Sports injuries</td>
</tr>
<tr>
<td></td>
<td>• Eye issues</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Freestanding urgent care clinic</strong></td>
<td>• Skin conditions like poison ivy and ringworm</td>
</tr>
<tr>
<td>Walk-in clinic for urgent care</td>
<td>• Strep throat</td>
</tr>
<tr>
<td>(See next page for a list of participating clinics)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hospital-based urgent care clinic</strong></td>
<td>• Burns, rashes, bites, cuts and bruises</td>
</tr>
<tr>
<td>Walk-in clinic for urgent care</td>
<td>• Infections</td>
</tr>
<tr>
<td></td>
<td>• Coughs, cold and flu</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Emergency room (ER)</strong></td>
<td>• Burns, rashes, bites, cuts and bruises</td>
</tr>
<tr>
<td>Part of a local hospital</td>
<td>• Infections</td>
</tr>
<tr>
<td></td>
<td>• Coughs, cold and flu</td>
</tr>
<tr>
<td>Members who think they are having medical emergencies should call 911 or go to the nearest ER</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>What members pay out of pocket depends on their specific Harvard Pilgrim plan. Members should refer to their plan documents for their specific benefit information.</td>
</tr>
</tbody>
</table>

*Members typically pay a copayment for going to a participating clinic.*

*Members typically pay cost sharing for telemedicine services.*

*Members may pay cost sharing for telemedicine services.*

*Members typically pay a copayment for urgent care, sometimes higher than the one for an office visit or convenience care clinic visit.*

*Members typically pay a higher copayment than an office visit; plus, ER services are often subject to a deductible.*

*What members pay out of pocket depends on their specific Harvard Pilgrim plan. Members should refer to their plan documents for their specific benefit information.*
Finding care is just a few clicks away with Doctor On Demand

When members need care right away, but the situation is not life threatening, there’s a better option than an ER visit. Doctor On Demand makes it easy to get care without leaving the house, while saving time and money. All members need is a smartphone, tablet or computer and an internet connection.¹

Get care from licensed medical doctors, psychologists and psychiatrists²

Members receive convenient and private care from their home or any location

Available to members traveling internationally
Excluding U.S. territories (Puerto Rico, Guam, U.S. Virgin Islands) and certain other countries (e.g., nations on the U.S. Sanctions List). Physicians will not order prescriptions for patients calling from outside the U.S.

New Hampshire freestanding urgent care clinics available to our members

Alton: ClearChoiceMD Urgent Care
Bedford: ConvenientMD Urgent Care, Urgent Care at Bedford Medical Park
Belmont: ClearChoiceMD Urgent Care, ConvenientMD Urgent Care
Claremont: Valley Regional Hospital Urgent Care
Concord: Concentra Urgent Care, ConvenientMD Urgent Care, MinuteClinic
Dover: ConvenientMD Urgent Care
Epping: ClearChoiceMD Urgent Care
Goffstown: ClearChoiceMD — CMC
Hampton: MinuteClinic
Hooksett: ClearChoiceMD — CMC
Hudson: Immediate Care of Southern New Hampshire
Keene: ConvenientMD Urgent Care
Lebanon: ClearChoiceMD Urgent Care
Littleton: ConvenientMD Urgent Care, Littleton Urgent Care
Londonderry: ConvenientMD
Manchester: ExpressMED, MinuteClinic
Merrimack: ConvenientMD Urgent Care
Nashua: Concentra Urgent Care, ConvenientMD Urgent Care, HealthStop, Immediate Care of Southern New Hampshire, MinuteClinic
Pelham: Immediate Care of Southern New Hampshire
Plaistow: ClearChoiceMD Urgent Care
Plymouth: MedCheck Urgent Care
Portsmouth: ClearChoiceMD Urgent Care, ConvenientMD Urgent Care
Salem: ExpressMED, MinuteClinic
Stratham: ConvenientMD Urgent Care
Tilton: ClearChoiceMD Urgent Care
Windham: ConvenientMD Urgent Care

Note: Higher “hospital urgent care clinic” member cost sharing may apply to participating urgent care clinics that are not on this list. This list may be updated throughout the year. Refer to the online provider directory for the most up-to-date information.

¹ In a life-threatening emergency, such as choking, severe head trauma, loss of consciousness, heart attack or stroke, members should call 911 or go to the nearest ER immediately.

² Doctor On Demand physicians do not prescribe Schedule I-IV DEA controlled substances, and may elect not to treat or prescribe other medications based on what is clinically appropriate.
Keeping our members healthy

As a recognized leader in effective population health programs, we’re ready to put our expertise and experience to work for the health and well-being of our members.

Engage clinical expertise

<table>
<thead>
<tr>
<th>Chronic care support</th>
<th>Specialty care support</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Diabetes</td>
<td>• Rare diseases</td>
</tr>
<tr>
<td>• Asthma</td>
<td>• Transgender care</td>
</tr>
<tr>
<td>• COPD</td>
<td>• Oncology care</td>
</tr>
<tr>
<td>• Heart disease</td>
<td>• Chronic kidney disease</td>
</tr>
</tbody>
</table>

Clinical care team support
Available for members via the MyConnect mobile app or by phone.

Utilization management
Our programs ensure that members get the right care, at the right time and at the right place.

Aspire Health
We’ve partnered with one of the largest non-hospice palliative care organizations to provide whole-person support for patients with advanced stages of serious illnesses.

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

Maintain a healthy mind

Behavioral health and substance use disorder support over the phone, in person, online or through mobile apps.

24/7 support helplines
• Substance use disorder treatment
• Emotional support

Behavioral health access center
Licensed care advocates help members find available providers and answer questions about benefits and coverage.

Peer coaching for substance use disorders
Services from peer recovery coaches are available through our behavioral health administrator, United Behavioral Health/Optum.

Convenient online resources
• www.liveandworkwell.com (virtual visits, Express Access Network, self-management tools and resources)
• Virtual visits with Doctor On Demand
• Talkspace digital therapy
• Sanvello mobile app

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

1 Transgender care program included for self-insured groups; other programs are buy-ups.
2 Skilled nursing facility and rehab and hospitalization care coordination programs included for self-insured groups; other programs are buy-ups.
3 Self-insured accounts pay based on an engaged per member per month fee.
4 Through our behavioral health administrator, United Behavioral Health/Optum.
Support maternity and family wellness
Parenthood is the journey of a lifetime. And with every journey, it helps to have support and guidance along the way.

Ovia Health
This suite of mobile apps help members:
• Starting families (Ovia Fertility)
• Navigating pregnancy (Ovia Pregnancy)
• Raising young children (Ovia Parenting)

ProgenyHealth
Harvard Pilgrim has partnered with ProgenyHealth to help improve health outcomes for premature and medically complex babies in neonatal intensive care, and to provide support for their families.

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

Improve health and wellness
Harvard Pilgrim members have access to a robust suite of tools and programs to help improve and maintain their health and well-being.

Digital tools and apps
• Limeade mobile app: Holistic wellness activities; earn up to $120 in gift cards
• Living Well at Home: Online wellness classes

Lifestyle management coaches
One-on-one support for setting and achieving personal health goals.

Living WellSM Workplace
Everything an employer needs to start a wellness program, all in one place. Visit www.harvardpilgrim.org/wellnessprogram to check out our turnkey toolkit, online engagement platform and popular buy-up programs.

Discounts and savings
• Vision and hearing
• Fitness and workout gear
• Complementary and alternative medicine

Fitness reimbursement
For large group plans, members can qualify to receive up to $150 in an annual fitness reimbursement — or up to $300 per family contract — on fees for health and fitness club memberships, classes or virtual subscriptions!

1 Self-insured accounts pay an implementation fee and a one-time per-case fee.
2 Restrictions apply; please see program materials for more information. Rewards may be taxable; members should consult their tax advisors.
3 Rewards are available to employees of fully insured accounts that are rated as large group and have up to 999 eligible employees. Rewards may be taxable; members should consult their tax advisors.
4 There is a $300 maximum reimbursement per family contract for up to two members on the Harvard Pilgrim policy with a maximum of $150 per member per calendar year. Must be currently enrolled in Harvard Pilgrim at the time of reimbursement and active fitness club members for at least four months within a calendar year. Restrictions apply. Reimbursement may be considered taxable income; members should consult their tax advisors.
Bringing mindfulness to the workplace

Since 2005, our Mind the Moment program has been at the leading edge of workplace mindfulness education. We’ve delivered trainings throughout the U.S. to companies of all sizes and across a wide range of industries.

Mindfulness is a practice that helps you tap into your brain’s built-in capacity for awareness, focus and clarity.

It’s something anyone can do — anywhere and anytime.

It can help employees improve their well-being and become more resilient and productive.

Learn more!
Let our experts introduce mindfulness to employees and guide them on their path to better health and well-being.

(617) 509-7047
mindthemoment@harvardpilgrim.org
www.harvardpilgrim.org/mindfulness
Providing one-stop HSA shopping

Together, a qualified high-deductible health plan and a health savings account (HSA) help employers and members save money and maximize their health care dollars.

You know Harvard Pilgrim has great high-deductible health plan options. We also have relationships with several preferred HSA vendors to help make setup and administration easy. Contact your account executive for more information.

**HSA partners**
- Benefit Strategies, LLC
- Benefit Wallet®
- Fidelity®
- Group Dynamic, Inc.
- HealthEquity®
- HRC Total Solutions
- Optum Bank® HSA

**2022 HDHP and HSA updates**
The IRS has increased out-of-pocket maximum amounts for high-deductible health plans (HDHPs) and contribution amounts for health savings accounts (HSAs). For 2022, the IRS defines a high-deductible health plan as any plan with a deductible of at least $1,400 for an individual or $2,800 for a family. An HDHP’s total yearly out-of-pocket maximum (including deductibles, copayments and coinsurance) can’t be more than $7,050 for an individual or $14,100 for a family. (This limit doesn’t apply to out-of-network services.) The contribution limits for HSAs will increase to $3,650 for an individual and $7,300 for a family.

Explore savings with ancillary products

We have teamed up with The Guardian Life Insurance Company of America to provide a full line of ancillary insurance products.

By purchasing a Harvard Pilgrim fully insured medical plan along with one or more new fully insured ancillary products from Guardian, employers can save money and provide more insurance options for their employees.

Discounts are available off fully insured medical premiums for employer groups with 51+ full-time employees, up to 999 subscribers. Available on new and renewal business.

**What we offer**

- **Dental**
- **Vision**
- **Life, short-term disability and long-term disability**
- **Supplemental health**
  - (accident, cancer, critical illness, hospital indemnity)

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Our plans: Where choice meets savings

Our plans are designed to improve the quality of care and lower premiums.

<table>
<thead>
<tr>
<th>Feature</th>
<th>ElevateHealth HMO</th>
<th>ElevateHealth Options HMO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to the select ElevateHealth network</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Access to the full Harvard Pilgrim network</td>
<td>No, unless authorized by Harvard Pilgrim</td>
<td>Yes, with the appropriate referrals</td>
</tr>
<tr>
<td>Lower member cost sharing with Tier 1 providers</td>
<td>N/A</td>
<td>Yes</td>
</tr>
<tr>
<td>HSA-compatible plan design</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

ElevateHealth HMO

This plan offers premium savings in exchange for access to just the ElevateHealth network.*

- ElevateHealth plans are not available to individuals who reside in Carroll County.
- Members must receive care from ElevateHealth providers and hospitals (except in an emergency).

ElevateHealth Options HMO

This is a full-network plan option that offers premium savings over standard full-network plans.*

- Includes two tiers of providers and hospitals.
  Tier 1 is Harvard Pilgrim’s ElevateHealth network.
  Tier 2 is the rest of Harvard Pilgrim’s network (New Hampshire, Massachusetts, Maine, Vermont, Connecticut and Rhode Island).
- Features lower copayments and deductibles for services members receive from Tier 1 providers and hospitals.
- Members can choose any PCP in the Harvard Pilgrim network and visit other participating providers with the proper referrals.

* Changes to our network may occur at any time. For the most current information, visit the provider search tool at www.harvardpilgrim.org/providerdirectory.
Littleton Options HMO

Designed to deliver for northern New Hampshire employers, Littleton Options HMO focuses on high-quality health care that’s local and affordable. Members can save time and money by keeping their care close to home.

Littleton Options HMO features two tiers of providers and hospitals:

**Tier 1 =**
- **Lower cost sharing**
- Littleton Regional Healthcare and other nearby health systems

**Tier 2 =**
- **Higher cost sharing**
- Other Harvard Pilgrim participating providers and hospitals throughout New England

• Members can choose Tier 1 PCPs with a “Preferred PCP” designation for low or even $0 copays for non-routine office visits.

• Cost sharing may apply for tests and services such as X-rays or blood work related to the visit.

HMO-LP and PPO-LP plans explained

These plans provide a great opportunity for members to reduce their costs for outpatient surgery and lab work. Lab tests (excluding genetic testing) received at an LP (low-cost provider) facility are covered in full, and the member pays no cost sharing. For outpatient surgery at an LP facility, the deductible does not apply, and the member pays only a copayment. For PPO-LP plans, this applies only to in-network services. LP facilities are flagged in the “LP Plans” Provider Directories. PPO plans are underwritten by HPHC Insurance Company.

<table>
<thead>
<tr>
<th>Scenario 1</th>
<th>Scenario 2</th>
<th>Scenario 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="Lab work needed" /></td>
<td><img src="image" alt="Outpatient surgery needed" /></td>
<td><img src="image" alt="Lab work or outpatient surgery needed" /></td>
</tr>
<tr>
<td>Member goes to LP facility</td>
<td>Member goes to LP facility</td>
<td>Member <strong>DOES NOT</strong> go to LP facility</td>
</tr>
<tr>
<td><strong>Covered in full</strong></td>
<td><strong>Member pays copayment only</strong></td>
<td><strong>Deductible &amp; any additional cost sharing apply</strong></td>
</tr>
</tbody>
</table>

* Changes to our network may occur at any time. For the most current information, visit the provider search tool at [www.harvardpilgrim.org/provierdirectory](http://www.harvardpilgrim.org/providerdirectory).
Introducing virtual primary care

Two unique plans with a virtual-first primary care model.

With the growing popularity of virtual visits, members are looking for more flexible health plan options. Harvard Pilgrim delivers with two new plans with a virtual-first primary care model: SimplyVirtual℠ HMO¹ and Virtual Choice℠ HMO².

Virtual primary care is a new, innovative model for health care that gives members 24/7 access to primary care providers (PCPs) through virtual visits with Doctor On Demand. Members have the freedom to receive virtual visits from anywhere — at home, in the workplace, while traveling on vacation — all with lower PCP visit cost sharing than office-based offerings. Doctor On Demand physicians send prescriptions directly to the pharmacy of choice, and they also order lab work, when needed.

Both plans: Members under age 19 must select a Harvard Pilgrim network PCP and continue to receive office-based care. They’ll always pay the lowest cost sharing.

How they compare

<table>
<thead>
<tr>
<th>SimplyVirtual℠ HMO</th>
<th>Virtual Choice℠ HMO</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PCP requirement</strong></td>
<td><strong>PCP requirement</strong></td>
</tr>
<tr>
<td>• Adult members age 19+ must select a PCP from Doctor On Demand³</td>
<td>• Adult members age 19+ may choose either a PCP from Doctor On Demand or an office-based PCP from Harvard Pilgrim’s New England HMO network.</td>
</tr>
<tr>
<td>• All members under age 19 must select a PCP from Harvard Pilgrim’s HMO network and receive office-based care</td>
<td>• All members under age 19 must select a PCP from Harvard Pilgrim’s HMO network and receive office-based care</td>
</tr>
<tr>
<td><strong>PCP cost sharing</strong></td>
<td><strong>PCP cost sharing</strong></td>
</tr>
<tr>
<td>• Same cost sharing for all members, regardless of age</td>
<td>• For adult members age 19+, cost sharing varies based on PCP selection:</td>
</tr>
<tr>
<td></td>
<td>- Lower cost sharing for a Doctor On Demand PCP</td>
</tr>
<tr>
<td></td>
<td>- Higher cost sharing for an office-based PCP</td>
</tr>
<tr>
<td></td>
<td>• Members under age 19 always pay lower cost sharing for office-based care</td>
</tr>
<tr>
<td><strong>Specialists and referrals</strong></td>
<td><strong>Specialists and referrals</strong></td>
</tr>
<tr>
<td>All members receive office-based care from specialists within Harvard Pilgrim’s HMO network. Doctor On Demand PCPs refer to office-based specialists as needed, and help members find providers and schedule appointments.</td>
<td></td>
</tr>
<tr>
<td><strong>Behavioral health access</strong></td>
<td><strong>Behavioral health access</strong></td>
</tr>
<tr>
<td>Members may choose behavioral health providers from Doctor On Demand or from the full United Behavioral Health network</td>
<td></td>
</tr>
</tbody>
</table>

¹ Available 7/1/21 to large group employers in New Hampshire.
² Available 9/1/21 to large group employers in New Hampshire.
³ A member must establish a relationship with a Doctor On Demand PCP by: (1) registering with Doctor On Demand in the state the member resides in, and (2) completing a PCP appointment in the same state.
Why virtual primary care?

The virtual-first model offers:

Seamless continuity of care — preventive care, chronic disease management, urgent care and integrated behavioral health are all provided on a smartphone, tablet or computer.

A compassionate, efficient experience — meeting the member where and when it’s most convenient, with more emphasis on shared decision-making and taking the time to guide them through medical concerns.

A dedicated team, 24/7/365 — members have access to an entire care team, including nurses, care managers and nutritionists, plus:

- Weekend appointments for some PCPs
- Option to schedule a visit with another Doctor On Demand provider when their PCP isn’t available
- Personalized care plans
- Fast responses when member reaches out to care team

Prescriptions and refills at local and select mail order pharmacies.

Getting started with Doctor On Demand

After enrolling with Harvard Pilgrim, members who choose the Doctor On Demand PCP option will:

- Register with Doctor On Demand
- Select and virtually meet their PCP*
- Receive a Care Kit, which includes a thermometer, blood pressure cuff and welcome materials

Once the member is registered, Doctor On Demand will contact them with additional resources:

- Welcome to Doctor On Demand
- Walkthrough kit
- How to set up a wellness appointment

Finding an office-based PCP (Virtual ChoiceSM HMO only)

Virtual ChoiceSM HMO members who choose to have an office-based PCP must select their PCP from Harvard Pilgrim’s HMO provider directory at www.harvardpilgrim.org/providerdirectory.

* A member must establish a relationship with a Doctor On Demand PCP by: (1) registering with Doctor On Demand in the state the member resides in, and (2) completing a PCP appointment in the same state.
# Customized Plan Options to Meet Your Health Goals

This brochure describes our standard plan offerings; however, we can customize and tailor a plan to your needs.

## Here are examples of our most popular plans

This document provides an overview of the plan features. Complete plan design features are defined in the applicable Summary of Benefits (SOB). If there is a discrepancy between the two, the terms of the SOB apply.

### Plan Options

<table>
<thead>
<tr>
<th>Plan Name</th>
<th>Office Visit (PCP/Specialist)</th>
<th>Deductible (Individual/Family)</th>
<th>Out-of-Pocket Maximum (Individual/Family)</th>
<th>Coinurance</th>
<th>Emergency Room</th>
</tr>
</thead>
<tbody>
<tr>
<td>HMO - LP</td>
<td>$25/$50</td>
<td>$3,000/$9,000</td>
<td>$6,500/$13,000</td>
<td>None</td>
<td>Ded, then $250</td>
</tr>
<tr>
<td>HMO - LP</td>
<td>$30/$60</td>
<td>$6,000/$12,000</td>
<td>$6,500/$13,000</td>
<td>20%</td>
<td>Ded, then $300</td>
</tr>
<tr>
<td>HMO - LP</td>
<td>$30/$60</td>
<td>$4,000/$12,000</td>
<td>$7,150/$14,300</td>
<td>None</td>
<td>Ded, then $300</td>
</tr>
<tr>
<td>HMO - LP</td>
<td>$25/$50</td>
<td>$3,000/$9,000</td>
<td>$6,500/$13,000</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
</tr>
<tr>
<td>HMO - LP</td>
<td>$25/$50</td>
<td>$3,000/$9,000</td>
<td>$6,500/$13,000</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
</tr>
<tr>
<td>HMO - LP</td>
<td>$25/$50</td>
<td>$3,000/$9,000</td>
<td>$6,500/$13,000</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
</tr>
</tbody>
</table>

### Full-network PPO plans

<table>
<thead>
<tr>
<th>Plan Name</th>
<th>Office Visit (PCP/Specialist)</th>
<th>Deductible (Individual/Family)</th>
<th>Out-of-Pocket Maximum (Individual/Family)</th>
<th>Coinurance</th>
<th>Emergency Room</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPO - LP</td>
<td>$25/$50</td>
<td>$3,000/$9,000</td>
<td>$6,500/$13,000</td>
<td>20%</td>
<td>Ded, then $300</td>
</tr>
</tbody>
</table>

### HSA PPO plans

<table>
<thead>
<tr>
<th>Plan Name</th>
<th>Office Visit (PCP/Specialist)</th>
<th>Deductible (Individual/Family)</th>
<th>Out-of-Pocket Maximum (Individual/Family)</th>
<th>Coinurance</th>
<th>Emergency Room</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSA PPO</td>
<td>$25/$50</td>
<td>$3,000/$9,000</td>
<td>$6,500/$13,000</td>
<td>20%</td>
<td>Ded, then $300</td>
</tr>
</tbody>
</table>

* Physical, occupational and speech therapies combined: Limited to 60 visits per year.
** Acupuncture limited to 20 visits per year; chiropractic limited to 12 visits per year.
<table>
<thead>
<tr>
<th>Plan Name</th>
<th>Office Visit (PCP/Specialist)</th>
<th>Deductible (Individual/Family)</th>
<th>Out-of-Pocket Maximum (Individual/Family)</th>
<th>Coinsurance</th>
<th>Emergency Room</th>
<th>Urgent Care</th>
<th>Inpatient</th>
<th>Day Surgery</th>
<th>Labs</th>
<th>X-Ray</th>
<th>Scans: CT, MRI, PET</th>
<th>PT/OT/ST*</th>
<th>Acupuncture &amp; Chiropractic**</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Full-network POS plans</strong></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>POS Open Access - LP</td>
<td>IN: $25/$50 OON: Ded, then 20%</td>
<td>IN: $3,000/$9,000 OON: $4,000/$12,000</td>
<td>IN/OON: $6,500/$13,000</td>
<td>IN: None OON: 20%</td>
<td>IN/OON: Ded, then $250</td>
<td>IN: $50 OON: Ded, then 20%</td>
<td>IN: Ded, then $125 OON: Ded, then 20%</td>
<td>IN: Ded, then CIF OON: Ded, then 20%</td>
<td>IN: Ded, then CIF Others: Ded, then $250 OON: Ded, then 20%</td>
<td>IN: Select LP, C1F Others: Ded, then CIF OON: Ded, then 20%</td>
<td>IN: Ded, then CIF OON: Ded, then 20%</td>
<td>IN: Non-hospital-based: $250 Hospital-based: Ded, then $350 OON: Ded, then 20%</td>
<td>IN: $50 OON: Ded, then 20%</td>
</tr>
<tr>
<td>POS Open Access HSA</td>
<td>IN: Ded, then CIF OON: Ded, then 20%</td>
<td>IN: $3,000/$6,000 OON: $6,000/$12,000</td>
<td>IN/OON: $6,000/$12,000</td>
<td>IN: None OON: 20%</td>
<td>IN/OON: Ded, then CIF</td>
<td>IN: Ded, then CIF OON: Ded, then 20%</td>
<td>IN: Ded, then CIF OON: Ded, then 20%</td>
<td>IN: Ded, then CIF OON: Ded, then 20%</td>
<td>IN: Ded, then CIF OON: Ded, then 20%</td>
<td>IN: Ded, then CIF OON: Ded, then 20%</td>
<td>IN: Ded, then CIF OON: Ded, then 20%</td>
<td>IN: Ded, then CIF OON: Ded, then 20%</td>
<td>IN: Ded, then CIF OON: Ded, then 20%</td>
</tr>
<tr>
<td>ElevateHealth HMO</td>
<td>$25/$50</td>
<td>$3,000/$9,000</td>
<td>None</td>
<td>Ded, then $250</td>
<td>$50</td>
<td>Ded, then $125</td>
<td>Ded, then CIF</td>
<td>ASC: $125 Hosp: Ded, then $250</td>
<td>Ded, then CIF</td>
<td>Ded, then $250</td>
<td>$50</td>
<td>$25</td>
<td></td>
</tr>
<tr>
<td>ElevateHealth HMO Copy waived for first 2 non-routine PCP visits per year</td>
<td>$3,000/$6,000</td>
<td>$6,500/$13,000</td>
<td>None</td>
<td>Ded, then $250</td>
<td>$50</td>
<td>Ded, then $125</td>
<td>Ded, then CIF</td>
<td>ASC: $125 Hosp: Ded, then $250</td>
<td>Ded, then CIF</td>
<td>Ded, then $250</td>
<td>$50</td>
<td>$25</td>
<td></td>
</tr>
<tr>
<td>ElevateHealth Options HMO</td>
<td>T1: $25/$50 T2: T2 Ded, then 20%</td>
<td>T1: $3,000/$6,000 OON: $6,000/$12,000</td>
<td>T1: $6,500/$13,000</td>
<td>T1: None T2: 20%</td>
<td>T1/T2: T1 Ded, then $250</td>
<td>T1: $50 T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: $125 Hosp: T1 Ded, then $250 T2: T2 Ded, then 20%</td>
<td>T1: $50 T2: T2 Ded, then 20%</td>
</tr>
<tr>
<td>ElevateHealth Options HMO Open Access</td>
<td>T1: $25/$50 T2: T2 Ded, then 20%</td>
<td>T1: $3,000/$6,000 OON: $6,000/$12,000</td>
<td>T1: $6,500/$13,000</td>
<td>T1: None T2: 20%</td>
<td>T1/T2: T1 Ded, then $250</td>
<td>T1: $50 T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: $125 Hosp: T1 Ded, then $250 T2: T2 Ded, then 20%</td>
<td>T1: $50 T2: T2 Ded, then 20%</td>
</tr>
<tr>
<td>ElevateHealth HSA</td>
<td>Ded, then CIF</td>
<td>$4,000/$8,000</td>
<td>None</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
</tr>
<tr>
<td>Littleton Options HMO</td>
<td>Preferred PCP: CIF T1: $25/$50 T2: T2 Ded, then 20%</td>
<td>T1: $3,000/$6,000 OON: $6,000/$12,000</td>
<td>T1: $6,500/$13,000</td>
<td>T1: None T2: 20%</td>
<td>T1/T2: T1 Ded, then $250</td>
<td>T1: $50 T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: T1 Ded, then CIF T2: T2 Ded, then 20%</td>
<td>T1: $125 Hosp: T1 Ded, then $250 T2: T2 Ded, then 20%</td>
<td>T1: $50 T2: T2 Ded, then 20%</td>
</tr>
</tbody>
</table>

* Physical, occupational and speech therapies combined: Limited to 60 visits per year.
** Acupuncture limited to 20 visits per year; chiropractic limited to 12 visits per year.
<table>
<thead>
<tr>
<th>Plan Name</th>
<th>Office Visit (PCP/Specialist)</th>
<th>Deductible (Individual/Family)</th>
<th>Out-of-Pocket Maximum (Individual/Family)</th>
<th>Coinsurance</th>
<th>Emergency Room</th>
<th>Urgent Care Freestanding</th>
<th>Hospital-Based</th>
<th>Inpatient</th>
<th>Day Surgery</th>
<th>Labs</th>
<th>X-Ray</th>
<th>Scans: CT, MRI, PET</th>
<th>PT/OT/ST*</th>
<th>Acupuncture &amp; Chiropractic**</th>
</tr>
</thead>
<tbody>
<tr>
<td>SimplyVirtual™ HMO</td>
<td></td>
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</tr>
<tr>
<td>SimplyVirtual™ HMO</td>
<td>$10/$45</td>
<td>$3,000/$9,000</td>
<td>$6,500/$13,000</td>
<td>None</td>
<td>.Ded, then $250</td>
<td>$45</td>
<td>Ded, then CIF</td>
<td>Ded, then $250</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then $250</td>
</tr>
<tr>
<td>Virtual Choice™ HMO plans</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Virtual Choice™ HMO</td>
<td>Virtual PCP: $10/$45</td>
<td>$3,000/$6,000</td>
<td>$6,500/$13,000</td>
<td>None</td>
<td>Ded, then $250</td>
<td>$45</td>
<td>Office-based PCP: $75</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then CIF</td>
<td>Ded, then CIF</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then $45</td>
</tr>
<tr>
<td>Virtual Choice™ HMO</td>
<td>Office-based PCP: $40/$75</td>
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</tr>
<tr>
<td>Virtual Choice™ HMO</td>
<td>Virtual PCP: $10/$45</td>
<td>$3,000/$6,000</td>
<td>$6,500/$13,000</td>
<td>10%</td>
<td>Ded, then $250</td>
<td>$45</td>
<td>Office-based PCP: $30</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then $45</td>
</tr>
<tr>
<td>Virtual Choice™ HMO</td>
<td>Office-based PCP: $30</td>
<td>$3,000/$6,000</td>
<td>$6,500/$13,000</td>
<td>10%</td>
<td>Ded, then $250</td>
<td>$45</td>
<td>Office-based PCP: $30</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then $250</td>
<td>Ded, then $45</td>
</tr>
</tbody>
</table>

* Physical, occupational and speech therapies combined: Limited to 60 visits per year.

** Acupuncture limited to 20 visits per year; chiropractic limited to 12 visits per year.
Here are examples of our most popular Rx plans

<table>
<thead>
<tr>
<th>Plan ID</th>
<th>Formulary</th>
<th>Number of Tiers</th>
<th>Rx Deductible*</th>
<th>30-Day Retail Cost Sharing</th>
<th>90-Day Mail Order Cost Sharing</th>
</tr>
</thead>
<tbody>
<tr>
<td>RX0000013237</td>
<td>Value</td>
<td>4-Tier</td>
<td>None</td>
<td>$10/$35/30%, up to a $300 max/50%, up to a $300 max</td>
<td>$20/$70/30%, up to a $600 max/50%, up to a $600 max</td>
</tr>
<tr>
<td>RX0000011456</td>
<td>Value</td>
<td>5-Tier</td>
<td>None</td>
<td>$5/$15/$35/$50/30%, up to a $300 max</td>
<td>$10/$30/$70/$150/30%, up to a $600 max</td>
</tr>
<tr>
<td>RX0000014271</td>
<td>Premium</td>
<td>4-Tier</td>
<td>$500/$1,000</td>
<td>$15/$35/$60/50%, up to a $300 max</td>
<td>$30/$70/$120/50%, up to a $900 max</td>
</tr>
<tr>
<td>RX0000017896</td>
<td>Value</td>
<td>5-Tier</td>
<td>$500/$1,000</td>
<td>$5/$25/$40/$60/40%, up to a $400 max</td>
<td>$13/$63/$120/$180/40%, up to an $800 max</td>
</tr>
<tr>
<td>RX0000017922</td>
<td>Value</td>
<td>5-Tier</td>
<td>$500/$1,000</td>
<td>$5/$25/$40/$60/40%, up to a $400 max</td>
<td>$13/$63/$120/$180/40%, up to an $800 max</td>
</tr>
</tbody>
</table>

* Rx deductible can be added to any formulary. The deductible amount and applicable tiers are customizable. Rx deductibles can be added to retail only, mail order only or both.
Important legal information

What’s not covered on our NH large group plans.

For a full list of services not covered, please refer to plan documents. Typically, exclusions include:

- Alternative services and treatments
- Dental care, except as described in the policy
- Any devices or special equipment needed for sports or occupational purposes
- Experimental, unproven or investigational services or treatments
- Routine foot care, except for preventive foot care for members with diabetes
- Educational services or testing
- Cosmetic services or treatment
- Commercial diet plans and weight loss programs
- Nutritional or cosmetic therapy using vitamins, minerals or elements, and other nutrition-based therapy
- Charges for services that were provided after the date on which membership ends
- Charges for any products or services related to non-covered benefits
- Services or supplies provided by (1) anyone related to a member by blood, marriage or adoption, or (2) anyone who ordinarily lives with the member
- Infertility treatment for members who are not medically infertile
- Costs for any services for which a member is entitled to treatment at government expense
- Costs for services for which payment is required to be made by a workers’ compensation plan or an employer under state or federal law
- Custodial care
- Private duty nursing
- Vision services, except as described in the policy
- Services that are not medically necessary
- Transportation other than by ambulance
- (HMO ONLY) Delivery outside the service area after the 37th week of pregnancy, or after the member has been told that she is at risk for early delivery

General notice about nondiscrimination and accessibility requirements

Harvard Pilgrim Health Care complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Harvard Pilgrim Health Care does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Harvard Pilgrim Health Care:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, audio, other formats)
- Provides free language services to people whose primary language is not English, such as qualified interpreters.

If you need these services, contact our Civil Rights Compliance Officer.

If you believe that Harvard Pilgrim Health Care has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Civil Rights Compliance Officer
1 Wellness Way
Canton, MA 02021
(866) 750-2074, TTY service: 711,
Fax: (617) 509-3085
Email: civil.rights@point32health.org

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, the Civil Rights Compliance Officer is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
(800) 368-1019, (800) 537-7697 (TDD)

Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.
Important legal information

Language assistance services

Español (Spanish) ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están a su disposición. Llame al 1-888-333-4742 (TTY: 711).


Kreyòl Ayisyen (French Creole) ATANSYON: Si nou palè Kreyòl Ayisyen, gen asisans pou sèvis ki disponib nan lang nou pou gratis. Rele 1-888-333-4742 (TTY: 711).

繁體中文 (Traditional Chinese) 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-888-333-4742 (TTY: 711)。


Русский (Russian) ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-333-4742 (телетайп: 711).


ភាសាខ្មែរ (Cambodian) ប្រការសិទ្ធិដូចជាប្រការសិទ្ធិខ្មែរអង់គ្លេស, ប្រការសិទ្ធិជាអង់គ្លេសរបស់អង់គ្លេស អាមេរិកអាមេរិក 1-888-333-4742 (TTY: 711).

Français (French) ATTENTION: Si vous parlez français, des services d’aide linguistique vous sont proposés gratuitement. Appelez le 1-888-333-4742 (ATS: 711).

Italiano (Italian) ATTENZIONE: In caso la lingua parlata sia l’italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-888-333-4742 (TTY: 711).

한국어 (Korean) '알림': 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-333-4742 (TTY: 711) 번으로 전화해 주십시오.

ελληνικά (Greek) ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, υπάρχουν στη διάθεσή σας δωρεάν υπηρεσίες γλωσσικής υποστήριξης. Καλέστε 1-888-333-4742 (TTY: 711).

Polski (Polish) UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-888-333-4742 (TTY: 711).

हिन्दी (Hindi) ध्यान दिव्य: अगर आप हिंदी बोलते हैं तो आपके लिए आशाकी सहायता मुफ्त में उपलब्ध है.

Български (Bulgarian) Внимание: Ако говорите български, обслужване на източноевропейски езици е безплатно.

注意力 (Lao) ສំពូកអស់: ມស់សំណាលមកពីវិស្សីវិធីសាស្រ្តសាស្ត្រ, សំណាលរបស់អន្តរជាតិពិភពសព្ទ, ដែលអាចរកបានស្តីចុងក្រោយ. បញ្ជាក់ 1-888-333-4742 (TTY: 711).

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call 1-888-333-4742 (TTY: 711).

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Meet our New Hampshire team

Kathryn Skouteris, Vice President
Kate joined Harvard Pilgrim in 2021 as the vice president of the New Hampshire market. She is responsible for the company's strategic and operational aspects across the state.

Previously, Kate worked at Rath, Young & Pignatelli as an attorney serving health care and financial industry clients. Her background also includes leadership roles at Southern New Hampshire Health System; as senior vice president/chief administrative officer, she was responsible for operational efficiency initiatives that improved patient and employee satisfaction, and oversaw growth and innovation opportunities, as well.

A New Hampshire native, Kate holds a Bachelor of Arts in English from the University of New Hampshire and a law degree from Suffolk University Law School. Along with her husband and two daughters, she loves skiing the mountains in the winter and hunting for sea glass and paddle boarding on the coast in the summer.

Phillip Chambers, Sales Director
Phil joined Harvard Pilgrim as the New Hampshire director of sales in 2018 and is responsible for leading sales growth through development and managing customer and broker relationships. With more than 17 years of experience, Phil's extensive background includes positions at Aetna and in the wellness industry.

Born in Ipswich, MA, Phil attended the University of Maine, Orono, for his undergraduate degree and received his MBA from the University of Massachusetts, Boston.

Phil grew up near the ocean, and his love for the beach, fishing and surfing has extended to his family. In Phil's free time, you can typically find him, his wife of 21 years, Ali, and his two sons, Jack and Mason, enjoying the outdoors and all that the water has to offer.

Bryan Adams, Senior Key Account Executive
Bryan brings more than 20 years of industry experience to his position with Harvard Pilgrim, including 15 years within the organization. As a Senior Key Account Executive, he focuses on renewals and existing business for New Hampshire's large group market including fully insured, self-insured, and stop loss policies, as well as broker relationships for those customers.

Originally from Andover, Massachusetts, Bryan attended the University of Kentucky and graduated from Central Connecticut State University.

When not working, Bryan enjoys cheering on the Patriots and spending time with his friends, family and dogs.

Sarah Schwartz, Account Executive
Sarah has been a part of the New Hampshire sales team since March 2018. In that time, she has worked with small group brokers and employers, and is currently responsible for broker relationships, renewals and existing business for New Hampshire's large group segment.

Raised on the South Shore of Massachusetts, Sarah attended the University of New Hampshire, receiving a bachelor's degree in animal sciences and a master's in public health.

When she's not in the office, you can usually find Sarah enjoying the outdoors, playing volleyball or camping, and spending lots of time with her husband, sons and four cats.

Sue Sullivan, Account Executive
Sue has been with the Harvard Pilgrim sales team since 2015. With more than 15 years of experience in the health insurance industry, she has worked with various market sizes and is currently responsible for broker relationships, renewals and existing business for New Hampshire's large group segment.

Originally from Windsor Locks, CT, Sue attended Becker College, receiving a degree in business administration.

In her free time, Sue enjoys the outdoors, including hiking and kayaking. She especially loves reading a good book and spending some time with her family at her cabin in northern New Hampshire.

Grant Wege, Sales Executive
Grant joined the New Hampshire sales team in November 2019. As a sales executive, he is responsible for broker relationships and new business sales to New Hampshire large employer group customers.

Originally from Londonderry, Grant joined the U.S. Marine Corps right out of high school. After six years of service, which included a deployment to Iraq, he accepted his first job in the health insurance industry. Since then, Grant's expertise has brought him to major national carriers, including Cigna, UnitedHealthcare, Anthem and Aetna.

When he's not volunteering his time for Make-A-Wish NH, Toys for Tots, United Way and other local veterans organizations, you'll find Grant and his Siberian Husky, River, enjoying everything the outdoors has to offer.
Contact us