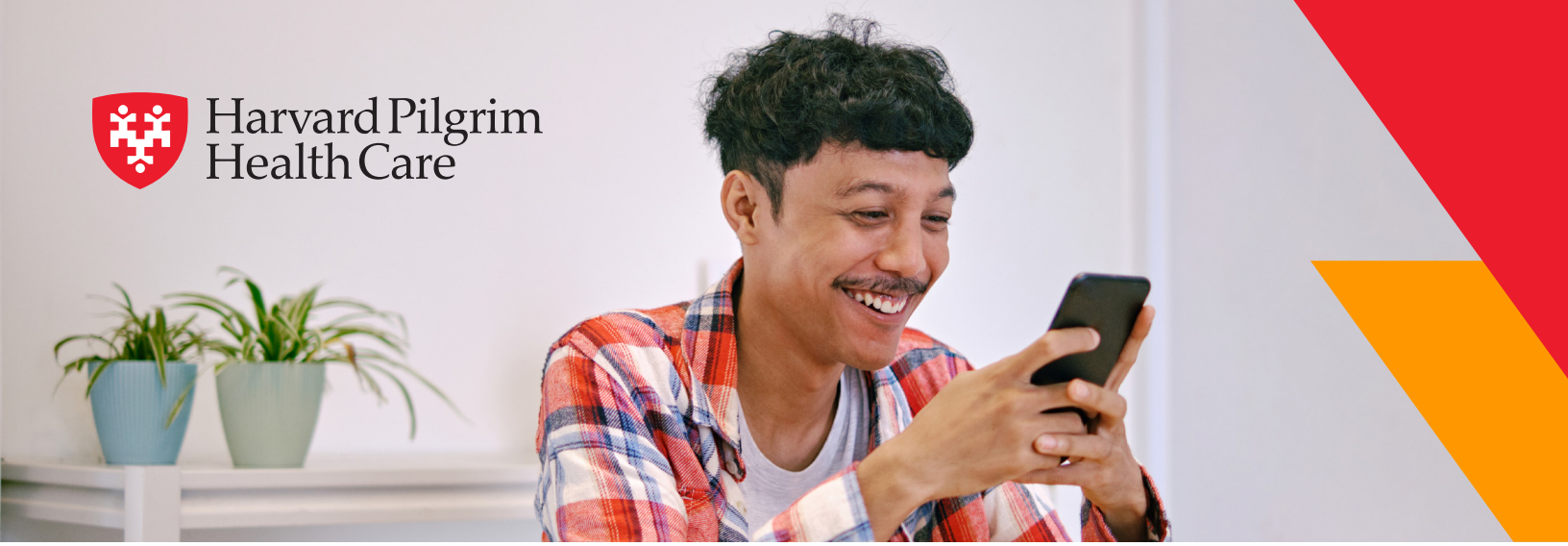


Harvard Pilgrim Health Care

Medical Coverage & Cost-Sharing Guide

ChoiceNet HMO

Smart choices, quality care, and cost savings

This HMO plan offers a 3-tier network to encourage you to choose high-quality, cost-effective providers and hospitals. Reviewing provider tiers before scheduling care can help you maximize savings.

Plan highlights

- ✔ Primary care provider (PCP) required
- ✔ Referrals needed for most specialists
- ✔ In-network coverage only, except in emergencies
- ✔ No cost-sharing on routine annual exams with your PCP and many preventive tests and services*

How tiered coverage works

- With this plan, each provider and hospital has a tier. You can visit any provider or hospital in the network but your out-of-pocket costs may vary by tier—the lower the tier, the less you pay.

Tier	What you pay
Tier 1	Lowest costs
Tier 2	Moderate costs
Tier 3	Highest costs

- Within each tier, you'll usually pay one copayment for PCP visits and a higher copayment for specialist visits. The copayment amounts may increase in the higher tiers. Please note that plans offered by small group employers have the same PCP and specialist visit copayment amounts in all three tiers - they don't vary.
- Choosing Tier 1 facilities for services such as labs, X-rays, imaging and day surgery can significantly reduce your out-of-pocket costs.
- In-network providers such as chiropractors, optometrists and behavioral health clinicians are automatically placed into Tier 1.

*Applies to preventive services that fall under the federal Affordable Care Act. Other tests and services your PCP orders may require cost-sharing.

Follow these steps before you need care

1. **Log in to your secure member account: harvardpilgrim.org/memberlogin**.
2. **Identify a provider and their tier:** Visit the provider search tool to find a PCP, specialist or facility. View the provider's assigned tier (Tier 1, 2, or 3).
3. **Find out what you'd pay for a covered service:** View your Schedule of Benefits document on your secure member account for plan specific cost-sharing amounts by tier. You might consider switching to a provider in a lower tier to pay less when you get care.

Getting care with ChoiceNet HMO

Specialty care: Most specialist visits require a referral from your PCP. Routine eye exams and OB-GYN care do not require referrals.

Hospital care: Referrals are required for most hospital tests, procedures, and treatments, except in emergencies. Your costs are based on the tier of the provider and facility you use. For example, if you are sent to a Tier 1 hospital by a Tier 3 doctor, your hospital visit is covered at the Tier 1 benefit level, and the doctor's services are covered at the Tier 3 benefit level.[1]

Behavioral health care[2]: In-person and virtual visits with participating clinicians are available without a referral.

Travel coverage: Emergency care is covered worldwide.

Urgent and emergency care: When your doctor's office is closed, you have multiple options for non-emergency care. For emergencies, call 911 or go to the nearest emergency room. Learn more about your care options at **harvardpilgrim.org/urgentcareoptions**.

What you pay for services

Cost-sharing is the portion you pay for specific services. Copayments, deductibles and coinsurance are examples of cost-sharing. Check your Schedule of Benefits for your specific cost-sharing responsibilities.

Coinsurance: A percentage of the cost you pay for covered services, typically after meeting your deductible.

Copayment: A fixed dollar amount you pay for certain services, such as office visits or prescriptions.[3]

Deductible: The amount you must pay for covered services before the plan begins to pay. ChoiceNet plans may have separate deductibles by tier. Copayments and coinsurance do not count toward your deductible.

Out-of-pocket maximum: The limit on the total amount you'll pay each year for covered services. Once reached, Harvard Pilgrim pays 100% of covered costs for the remainder of the plan year.

More ways to save and get support

Reduce My Costs: Looking for a lower-cost option for a test, procedure, or treatment? Our Reduce My Costs program can help you find high-quality, lower-cost providers and facilities. Members who contact the program before receiving certain services may be eligible for a reward when they choose a recommended lower-cost option. To learn more visit **harvardpilgrim.org/public/reduce-my-costs**.

Member Services: Need help understanding ChoiceNet tiers or finding in-network providers? Please call the Member Services number listed on the back of your ID card.

[1] Except in an emergency, you must notify member services before a hospital admission when visiting an out-of-network provider.

[2] Not all employer-sponsored plans offer behavioral health benefits through Harvard Pilgrim.

[3] Not all employer-sponsored plans offer Harvard Pilgrim prescription drug benefits.

This plan includes a tiered network called "ChoiceNet HMO." In this plan, members pay different levels of cost-sharing depending on the tier of the provider delivering a covered service. A provider's benefit tier may change annually on January 1. Please consult the Harvard Pilgrim ChoiceNet HMO provider directory or visit the provider search tool at harvardpilgrim.org to determine a provider's tier in the ChoiceNet HMO network. You also may call Harvard Pilgrim to request a paper copy of the provider directory be mailed to you at no charge.

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

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