

Medicare Enhance Small Group Benefit Grid – Mass.

Q1 – Rates for groups enrolling or renewing January 1, 2025 through March 31, 2025

	OV Copay	ER Copay	Inpatient/Day Surgery Copay	Calendar Year Deductible	Rx Copay	Premium (PMPM)
Medicare Enhance MD0000000242	\$20	\$100 (does not include coverage for ER outside of US)	None	None	Without Rx RX0000001957	\$277
					\$5/\$15/\$30/\$45 Mail: \$10/\$30/\$60/\$135 RX0000001952	\$836
					\$5/\$20/\$30/\$50 Mail: \$10/\$40/\$60/\$150 RX0000000708	\$826
					\$5/\$25/\$35/\$50 Mail: \$10/\$50/\$70/\$150 RX0000000713	\$815
Medicare Enhance Preventive Plus MD0000005602	\$5	\$50	None	None	Without Rx RX0000001957	\$306
					\$5/\$15/\$30/\$45 Mail: \$10/\$30/\$60/\$135 RX0000001952	\$865
					\$5/\$20/\$30/\$50 Mail: \$10/\$40/\$60/\$150 RX0000000708	\$855
					\$5/\$25/\$35/\$50 Mail: \$10/\$50/\$70/\$150 RX0000000713	\$844
Medicare Enhance Preventive Plus MD0000005603	\$15	\$50	None	None	Without Rx RX0000001957	\$289
					\$5/\$15/\$20/\$35 Mail: \$10/\$30/\$40/\$105 RX0000000715	\$862
					\$5/\$20/\$30/\$50 Mail: \$10/\$40/\$60/\$150 RX0000000708	\$838
					\$5/\$25/\$35/\$50 Mail: \$10/\$50/\$70/\$150 RX0000000713	\$827
Medicare Enhance Preventive Plus with Deductible MD0000005604	\$15	\$50	Subject to \$500 deductible*	\$500*	Without Rx RX0000001957	\$230
					\$5/\$15/\$20/\$35 Mail: \$10/\$30/\$40/\$105 RX0000000715	\$803
					\$5/\$20/\$30/\$50 Mail: \$10/\$40/\$60/\$150 RX0000000708	\$779
					\$5/\$25/\$35/\$50 Mail: \$10/\$50/\$70/\$150 RX0000000713	\$768
Medicare Enhance Preventive Plus with Deductible MD0000000243	\$25	\$150	Subject to \$1,000 deductible*	\$1,000*	Without Rx RX0000001957	\$179
					\$5/\$15/\$30/\$45 Mail: \$10/\$30/\$60/\$135 RX0000001952	\$738
					\$5/\$20/\$30/\$50 Mail: \$10/\$40/\$60/\$150 RX0000000708	\$728
					\$5/\$25/\$35/\$50 Mail: \$10/\$50/\$70/\$150 RX0000000713	\$717

*The calendar year deductible applies to Inpatient Hospital Services, Outpatient Surgery, High-End Radiology and Ambulance.

Guidelines for Groups with Less than 51 Eligible Active Employees

Medicare Enhance

Medicare Enhance complements a subscriber's Medicare Part A and B coverage. Medicare Enhance members can live anywhere in the U.S. and see any provider that accepts Medicare. Available through employer groups based in Massachusetts, Maine, New Hampshire, and Rhode Island, Medicare Enhance is offered by HPHC Insurance Company, Inc., a wholly owned subsidiary of Harvard Pilgrim Health Care, Inc.

- Must be offered alongside Harvard Pilgrim Commercial plan
- Groups need only 1 Medicare Enhance Subscriber
- For groups offering Medicare Enhance on a fully-insured basis with competitor Medicare products also offered, the competitor products must be comparable in benefits to Medicare Enhance
- Groups may only offer one Medicare Enhance benefit package
- Groups will be community rated

When offered to groups for their Working Aged employees who are enrolled in Medicare A and B:

- Groups must not have had more than 19 active employees (part-time, full-time or temporary) during the past two years.
- Groups that increase to more than 19 active employees must notify HPHC immediately.
- The Medicare Enhance plan must be comparable to benefits of the active commercial product.
- Groups must sign the Medicare Enhance Employer Agreement.

Please note that this document provides an overview of the benefit designs. Complete plan designs are defined in the applicable Summary of Benefits (SOB). If there is a discrepancy between the two documents, the terms of the SOB apply.