

A guide to your medical coverage



Getting care with the PPO HSA plan

With this plan, you may receive care from medical professionals and hospitals in or out of Harvard Pilgrim's network. Your costs will be lower when you receive care from in-network providers.

Routine and preventive care*

There's no extra charge for routine annual exams and many preventive tests and services with in-network providers. Other tests and services your in-network provider orders may require cost sharing.

Specialty care

You can see specialists inside or outside of Harvard Pilgrim's network for covered services. Referrals are not required.

Behavioral health care**

Your plan covers in-person visits with thousands of participating licensed clinicians. Virtual visits via smartphone, tablet or computer are also available.

Care when you're traveling

Your plan covers emergency care at the in-network level if you get sick or injured while traveling anywhere in the world.





Acupuncture and chiropractic treatments

Acupuncture and chiropractic benefits are included on most plans. Referrals are not required.

Urgent and emergency care

If you have a non-life-threatening illness or injury and your doctor's office is closed, you have a variety of options for getting care. Of course, if you think you're having a medical emergency, go to the emergency room or call 911.

Commonly treated conditions

	Virtual visits Real-time virtual visit with providers via smartphone, tablet or computer	Non-life-threatening illnesses and injuries (coughs/ colds, sore/strep throat, nausea/diarrhea, etc.)	\$
	Convenience care/retail clinic Walk-in, convenience care or retail clinics	Minor illnesses and infections (bronchitis, strep throat, ear & eye infections, etc.)	\$\$
	Urgent care center Walk-in clinic for urgent care	Minor illnesses, injuries and infections (burns, bites, colds & flu, sprains & strains, etc.)	\$\$\$
	Emergency room (ER) Part of a hospital that provides immediate treatment for life-threatening illnesses and injuries	Medical emergencies (heart attack, stroke, choking, loss of consciousness, seizures, etc.)	\$\$\$\$

Visit www.harvardpilgrim.org/urgentcareoptions for more information about these options.

*Preventive services that fall under the federal Affordable Care Act.

**Not all employer-sponsored plans offer behavioral health benefits through Harvard Pilgrim.

How the PPO HSA plan works

The PPO HSA plan gives you flexibility and choice with the providers you see and the hospitals you use.

You have coverage for preventive care with no cost sharing when received in-network. Most other services fall under the annual deductible, and you may be able to open a health savings account (HSA) to help pay for qualified health care expenses.

Features



In-network coverage



No referrals required



Out-of-network coverage



Option to open a Health Savings Account (HSA)

In-network coverage

You get in-network coverage—which typically costs less—when you receive care from participating providers. Our network is vast, with thousands of participating providers and hospitals across the country. Chances are very good that you can receive all of your care with in-network providers.

Out-of-network coverage

You get out-of-network coverage—which typically costs more—when you receive care from non-participating providers. Our network providers have agreed to certain charges. When you choose out-of-network providers, they can charge more than the Harvard Pilgrim allowed amount and you will be responsible for paying the difference.

A note about hospital admissions

When you're going to be admitted to the hospital, services are covered according to what combination of providers you use. Suppose that you are being sent to a participating hospital by a non-participating doctor. In this case your hospital visit is covered at the in-network benefit level, and the doctor's services are covered at the out-of-network benefit level. Except in an emergency, you must notify us before a hospital admission when non-participating providers are involved. Just give Member Services a call.

A primary care provider is key to good health

A primary care provider (PCP) is the doctor, nurse practitioner or other qualified medical professional you see for annual check-ups and for treatment when you're sick or injured.

We strongly recommend having a PCP to work with even though this plan doesn't require you to have one. A PCP will keep a record of your care and can help you make informed decisions about your health.

You and each of your dependents can choose different PCPs from our network of participating providers.

The role of a PCP

- Provides preventive and routine medical care
- Refers you to participating medical specialists, when needed
- Knows your health history and educates you about healthy lifestyle choices

Two ways to find a PCP:

Find a PCP or see if your current provider is in our network.



Visit harvardpilgrim.org/providerdirectory



Call us:
Already a member:
(888) 333-4742

Not yet a member:
(866) 874-0817

TTY: **711**

Once you're a member

Register for your member account at harvardpilgrim.org:

- Look up the details of your plan.
- Compare costs for tests and procedures.
- Explore different health topics and ways to be well.
- Check out ways to save with discounts on eyewear, reimbursement for fitness programs and more!

Take advantage of an HSA

With this plan, you can set up a health savings account (HSA), provided you meet Internal Revenue Service eligibility guidelines. You can use HSA funds to help pay for qualified health care expenses or save them for future health care needs. Both you and your employer can contribute to your HSA, which may be available through your company or through a bank.

The advantages of an HSA include:

- You can contribute to your account through pre-tax deductions, which lowers your taxable income.
- Your interest earnings and withdrawals for qualified health care expenses are tax-free.
- Any unused amounts in your HSA carry over from year to year.
- Once you establish your HSA, you can use it to pay for all eligible expenses tax-free for the rest of your life. If you no longer meet eligibility guidelines (e.g., you enroll in a new plan that's not HSA-qualified), you lose only your ability to make additional contributions.
- Your HSA is portable – when you change jobs or retire, your money stays with you.



HPHC Insurance Company is an affiliate of Harvard Pilgrim Health Care, and Harvard Pilgrim Health Care of New England.

Need help?

Already a member: **(888) 333-4742**

Not yet a member: **(866) 874-0817**

TTY: **711**

What you pay for services

Cost sharing is the portion you pay for specific services like office visits, X-rays and prescriptions.* Copayments, deductibles and coinsurance are examples of cost sharing.

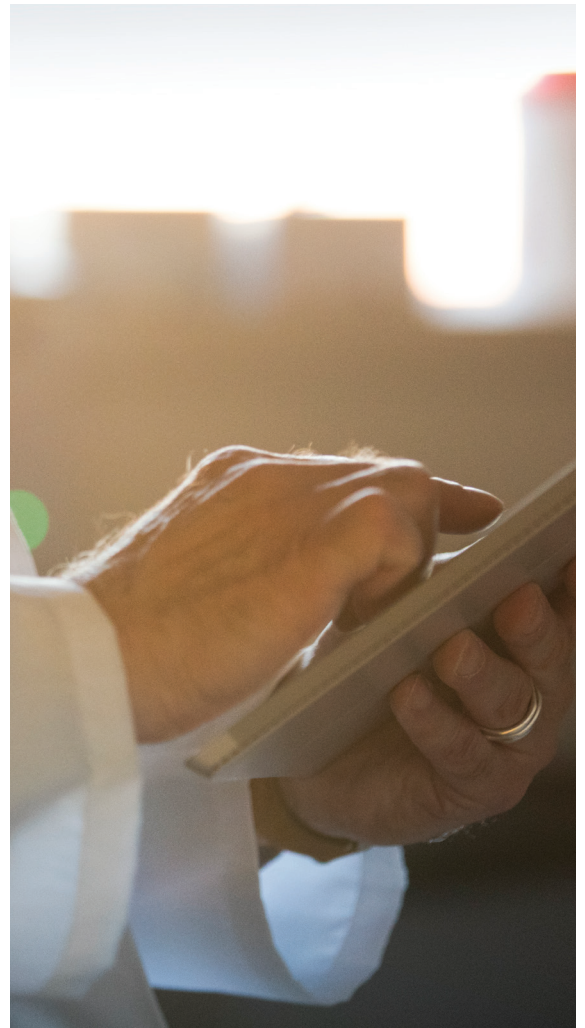
Allowed amount: Generally, this is the maximum amount that Harvard Pilgrim will pay a provider for covered services. If you see a non-participating provider, it's possible that the provider will charge more than the allowed amount for the care you received. In that case, you would be responsible for paying the difference between the provider's charges and Harvard Pilgrim's allowed amount. This is sometimes called "balance billing."

Coinsurance: A fixed percentage of costs you pay for covered services. For example, you may have to pay 20% of a provider's bill for your care, while Harvard Pilgrim pays 80%. Coinsurance is usually something you pay after you have paid your full annual deductible.

Copayment: A flat dollar amount you pay for certain services on your plan. You may have different copayments for different services (e.g., primary care visits, specialist visits and prescription drugs). Copayments are normally due when you have your appointment or pick up prescriptions at the pharmacy.

Deductible: A set amount of money you pay out of your own pocket for certain covered services including prescription drugs. If you have a \$2,000 annual deductible, for example, you will have to pay \$2,000 worth of charges before Harvard Pilgrim helps pay. Copayments and coinsurance do not count toward your deductible.

Out-of-pocket maximum: A limit on the total amount of cost sharing you pay annually for covered services. This generally includes copayments, deductibles and coinsurance. After you meet your out-of-pocket maximum, Harvard Pilgrim will pay all additional covered health care costs.



*Not all employer-sponsored plans offer Harvard Pilgrim prescription drug benefits.

See the **Schedule of Benefits** for more details on your coverage and cost-sharing amounts.



What your PPO HSA plan covers

Here's how your plan covers some common services.

No cost sharing when received in-network—Routine & preventive care*

- Annual checkup
- Preventive screenings and tests
- Immunizations, including flu shots
- Routine pre-natal and post-partum visits

Deductible and cost sharing applies—Doctor office visits, diagnostic tests & services, hospital services

- Visits to your provider when you're sick or injured
- Diagnostic screenings and tests outside of preventive care
- X-rays, CT scans and MRIs
- Inpatient and outpatient hospital care
- Emergency room visits
- Prescription drugs**

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