

# 2025 NHADA Plans Overview



Product Name	Office Visit	Deductible	Annual Out-of-Pocket Max	Coinsurance	ER	Urgent Care	Day Surgery	Labs	PT/OT/ST	RX Cost Share
<b>ElevateHealth HMO</b>										
ElevateHealth HMO 2000 Calendar Year MD26064	\$25/\$50	\$2000/\$6000 RX: \$250/\$500	\$7500/\$15000	NA	Ded then \$250	Hosp: Ded then \$75 Free Stand: \$50	Ded then CIF	Ded then CIF	\$50	Retail: Ded then \$10/\$35/30%/50% RX25365
ElevateHealth HMO 3000 Calendar Year MD24604	\$25/\$50	\$3000/\$9000 RX: \$250/\$500	\$7500/\$15000	NA	Ded then \$250	Hosp: Ded then \$75 Free Stand: \$50	Ded then CIF	Ded then CIF	\$50	Retail: Ded then \$10/\$35/30%/50% RX25365
ElevateHealth HMO 5000 Calendar Year MD24606	\$25/\$50	\$5000/\$12000 RX: \$250/\$500	\$7500/\$15000	NA	Ded then \$250	Hosp: Ded then \$125 Free Stand: \$50	Ded then CIF	Ded then CIF	\$50	Retail: Ded then \$10/\$35/30%/50% RX25365
ElevateHealth HMO 6000 Calendar Year MD24607	\$25/\$50	\$6000/\$12000 RX: \$250/\$500	\$7500/\$15000	NA	Ded then \$250	Ded then \$125 Free Stand: \$50	Ded then CIF	Ded then CIF	\$50	Retail: Ded then \$10/\$35/30%/50% RX25365
<b>ElevateHealth HSA HMO</b>										
ElevateHealth HSA HMO 5000 Calendar Year MD24608	Ded then CIF	\$5000/\$10000 Embedded	\$7500/\$15000 Embedded	NA	Ded	Hosp: Ded Free Stand: Ded	Ded	Ded	Ded	Retail: Ded then no charge RX22710
<b>Best Buy HMO-LP</b>										
Best Buy Tiered HMO 2000 LP Calendar Year MD16640	\$25/\$50	\$2000/\$6000 RX: \$250/\$500	\$6500/\$13000	NA	Ded then \$250	Hosp: Ded then \$75 Free Stand: \$50	Ded then CIF Select LP: \$100	Ded then CIF Select LP: CIF	\$50	Retail: Ded then \$10/\$35/30%/50% RX25366
Best Buy Tiered HMO 3000 LP Calendar Year MD16644	\$25/\$50	\$3000/\$9000 RX: \$250/\$500	\$6500/\$13000	NA	Ded then \$250	Hosp: Ded then \$75 Free Stand: \$50	Ded then CIF Select LP: \$100	Ded then CIF Select LP: CIF	\$50	Retail: Ded then \$10/\$35/30%/50% RX25366
Best Buy Tiered HMO 4000 LP Calendar Year MD16818	\$25/\$50	\$4000/\$12000 RX: \$250/\$500	\$6500/\$13000	NA	Ded then \$250	Hosp: Ded then \$75 Free Stand: \$50	Ded then CIF Select LP: \$100	Ded then CIF Select LP: CIF	\$50	Retail: Ded then \$10/\$35/30%/50% RX25366
Best Buy Tiered HMO 5000 LP Calendar Year MD16730	\$25/\$50	\$5000/\$12000 RX: \$250/\$500	\$6500/\$13000	NA	Ded then \$250	Hosp: Ded then \$75 Free Stand: \$50	Ded then CIF Select LP: \$100	Ded then CIF Select LP: CIF	\$50	Retail: Ded then \$10/\$35/30%/50% RX25366
Best Buy Tiered HMO 6000 LP Calendar Year MD3969	\$25/\$50	\$6000/\$12000 RX: \$250/\$500	\$6500/\$13000	NA	Ded then \$250	Hosp: Ded then \$75 Free Stand: \$50	Ded then CIF Select LP: \$100	Ded then CIF Select LP: CIF	\$50	Retail: Ded then \$10/\$35/30%/50% RX25366
<b>Best Buy HSA HMO</b>										
Best Buy HSA HMO 5000 Calendar Year MD3963	Ded then CIF	\$5000/\$10000 Embedded	\$5000/\$10000 Embedded	NA	Ded then CIF	Hosp: Ded then CIF Free Stand: Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Retail: Ded then no charge RX19704
<b>POS Open Access-LP</b>										
POS Open Access LP 3000 Calendar Year MD22928	\$25/\$50	\$3000/\$9000 OON: \$4000/\$12000 RX: \$250/\$500	\$6500/\$13000 OON: \$6500/\$13000	IN: NA OON: 20%	Ded then \$250	Hosp: Ded then \$50 Free Stand: \$50	Ded then CIF Select LP: \$100	Ded then CIF Select LP: CIF	\$50	Retail: Ded then \$10/\$35/30%/50% RX25366

PT – Physical Therapy; OT – Occupational Therapy; ST – Speech Therapy; Hosp – Hospital Based Urgent Care; Free Stand – Free Standing Urgent Care; Conv – Convenience Care Clinic; ASC – Ambulatory Surgical Center; Ded – Deductible; CIF – Covered In Full; T3 – Tier 3; T4 – Tier 4; T5 – Tier 5; IN – In Network; OON – Out of Network

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

**Remember, all plans offer:**

- No cost sharing for Preventive Services as defined by the Affordable Care Act
- Coverage for emergency care anywhere in the world

**Best Buy HMO-LP (Low-cost Providers):**

These are HMO deductible plans that require members to choose a PCP (Primary Care Provider) and receive referrals to specialists for specialty services as needed. Members must access the Harvard Pilgrim network, which includes 180+ hospitals across New England and thousands of providers.

These plans offer a special feature: they allow members to save money when receiving diagnostic lab testing and outpatient surgery procedures from LP providers. See the list of LP providers at [harvardpilgrim.org/nhada](http://harvardpilgrim.org/nhada).

When members receive these types of services from designated LP providers, they have no out-of-pocket cost for lab testing, and surgical procedures take only a copayment. Normally these services would track toward the member's deductible. This feature is ideal for anyone with chronic medical conditions that require routine blood sampling. Examples of chronic conditions include: diabetes, thyroid disorders, high cholesterol and conditions that require taking blood thinners.

**POS Open Access-LP:**

With this plan, members are required to choose a PCP and have access to thousands of participating providers throughout New England and nationwide. Members can receive care for covered services without a PCP referral; they have in-network coverage when visiting participating providers and out-of-network coverage when visiting non-participating providers.

The LP (low-cost provider) benefit allows members to save money at select facilities for lab services and outpatient services.

**ElevateHealth HMO:**

These are HMO plans that require members to choose a PCP and receive referrals to specialists for specialty services as needed. The ElevateHealth network includes 24 high quality hospitals (23 in New Hampshire and one in Vermont) including Elliot Health Systems, Catholic Medical Center and Dartmouth-Hitchcock. Members can choose from hundreds of PCPs and thousands of specialists. These plans are priced lower than the Best Buy HMO LP plans and are ideal for members who are already seeing these

providers today or looking for high quality care at a lower price point.

Similar to the Best Buy HMO LP plans, the ElevateHealth HMO plans also offer a copayment instead of deductible for outpatient surgeries. However, the facilities differ from the Best Buy HMO LP listing. Please visit [harvardpilgrim.org/nhada](http://harvardpilgrim.org/nhada) for the most up-to-date listing of participating outpatient surgical centers.

**Please Note:** The ElevateHealth HMO plans do not offer the zero out-of-pocket cost for diagnostic lab testing feature of the Best Buy HMO LP plans because these providers have already agreed to a lower charge, which is reflected in the premium paid by you and your employees.

**ElevateHealth HSA HMO:**

Similar to the ElevateHealth HMO plans, this plan is focused to the ElevateHealth network in New Hampshire and members are required to select a PCP and obtain referrals. The Health Savings Account (HSA) allows members to use pre-tax funds to pay medical expenses, and the funds are owned by the member. While preventative services such as physical exams are covered in full, with an HSA, most services, including prescription drugs, track toward the plan year deductible. You can learn more about the deductible at [harvardpilgrim.org/nhada](http://harvardpilgrim.org/nhada).

**Best Buy HSA HMO:**

This plan requires members to choose a PCP and receive referrals to specialists for specialty services as needed. Members must access the Harvard Pilgrim network, which includes 182 hospitals across New England and thousands of providers. The Health Savings Account (HSA) allows members to use pre-tax funds to pay medical expenses, and the funds are owned by the member.

While preventative services such as physical exams are covered in full, with an HSA, most services, including prescription drugs, track toward the deductible. You can learn more about the deductible at [harvardpilgrim.org/nhada](http://harvardpilgrim.org/nhada).

**Want to learn more? Call NHADA at: (800) 852-3372**

\* The copayment amount is determined by which type of providers you see. A lower copayment applies to some outpatient services, including most primary care, obstetrical care, gynecological care, mental health care and substance abuse rehabilitation. A higher copayment applies to most outpatient specialty care. See Schedule of Benefits for details.