

# Delivering Quality Care

New Hampshire Small Group Product Guide

Plan Year 2024

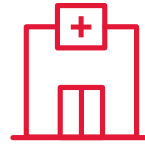


# Table of Contents

- Empowering and Guiding Healthier Lives..... 1
- Your Local Partner with the Strength of a National Network ..... 2
- We Make Switching Health Insurance Easy..... 3
- Core Health Plan Benefits ..... 4
- Covering the Prescriptions Our Members Need..... 5
- Reduce My Costs Helps Members Save Money and Earn Rewards ..... 6
- Know Your Care Options ..... 7
- Finding Care is Just a Few Clicks Away with Doctor On Demand..... 8
- Keeping Our Members Healthy ..... 9-11
- Providing One-Stop HSA Shopping ..... 11
- Help Your Members Choose a Plan ..... 12
- 2024 Updates ..... 13
- Our Plans: Where Choice Meets Savings..... 14-15
- Virtual Primary Care..... 16
- Get Instant, Accurate Quotes Online ..... 17
- 2024 New Hampshire Plan Offerings ..... 18-29
- Business Rules..... 30
- Important Legal Information ..... 31
- General Notice About Nondiscrimination and Accessibility Requirements ..... 32
- Language Assistance Services ..... 33
- Contact Us..... 34

# Empowering and Guiding Healthier Lives

Harvard Pilgrim offers a full range of health insurance solutions. Our plans deliver outstanding coverage, choice and value for your small group clients.



**80,000+**

DOCTORS & CLINICIANS

**150+**

HOSPITALS

## Full, tiered and virtual network plans

Our HMO, PPO\* and ElevateHealth products are built around best-in-class local providers who deliver high-quality care at an excellent value. SimplyVirtual<sup>SM</sup> HMO gives members 24/7 access to primary care through Doctor On Demand.

## New England & national coverage

Our regional network has more than 80,000 doctors and other clinicians, and more than 150 hospitals. Our PPO plans give members access to the largest national network with over 1.5 million providers and 6,700 hospitals across the United States.

\* 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.

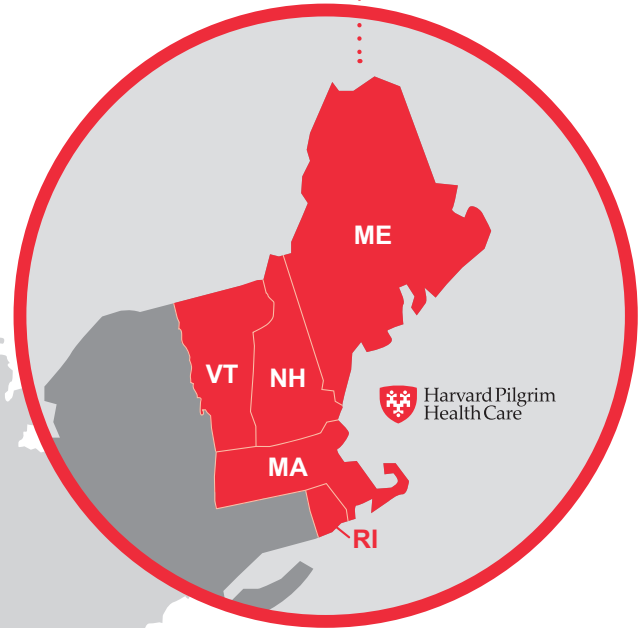


In 2023, over **\$1.4 million** was contributed to New Hampshire nonprofit organizations.

# Your Local Partner with the Strength of a National Network

## Harvard Pilgrim Health Care network

- 80,000+ doctors and clinicians
- 150+ hospitals



## National network through UnitedHealthcare

- 1.5 million providers including 200k Behavioral Health Providers
- 6,700 hospitals

# 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.

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## 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.

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## 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.

### New member communications

New members will receive a series of welcome messages from us to help them maximize their health plan benefits and get set up with key tools.

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## Digital journey

### 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.

# Core Health Plan Benefits

All Harvard Pilgrim plans offer access to comprehensive and high-quality care including some of these great benefits, programs and services.



Acupuncture and chiropractic care - unlimited visits



Pediatric dental and vision hardware - covers children up to age 19



Virtual care delivered by licensed medical and behavioral health providers



Prescription drug coverage including generic and over-the-counter medications



Emergency and urgent care



Prenatal, maternity and newborn care



Routine eye exams for adults and children



Wellness Exams, routine screenings and tests



Hospitalization - Inpatient services, such as surgery



Rehabilitative and habilitative services and devices like hospital beds, crutches and physical/occupational therapy



Laboratory, radiology and diagnostic services



Wellness-focused discounts and savings - including fitness reimbursement



Mental health and substance use disorder treatment

# Covering the Prescriptions Our Members Need

## Our prescription drug coverage focuses on choice and value.

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. OptumRx Specialty is our primary specialty pharmacy provider.

## Questions about our prescription drug program?

Visit [harvardpilgrim.org/2024CoreNH5T](https://www.harvardpilgrim.org/2024CoreNH5T) to learn more.



See which drugs are covered



Look up drug prices



Find nearby in-network pharmacies



Get details on home delivery



And more

## Helping members get the most out of their benefits

All plans include our Core NH 5-tier prescription drug coverage: The lower the tier, the less members will pay. Cost-sharing for prescriptions may include a combination of copayments, coinsurance and a deductible.

## Over-the-counter prescriptions available

We cover certain generic **over-the-counter (OTC)** drugs on all of our formularies. With a prescription from a provider, members will pay Tier 1 Rx cost sharing for certain drugs including cough, cold and allergy; dermatology; gastrointestinal; pain; and ophthalmic preparations.

## How the prescription drug tiers work

TIER	Tier 1	Tier 2	Tier 3	Tier 4	Tier 5
CORE NH 5-TIER	Lower-cost generics	Higher-cost generics	Preferred brands (some higher-cost generics)	Non-preferred brands and preferred specialty (some higher-cost generics)	Non-preferred specialty drugs, and selected brand and generic drugs

# Reduce My Costs Helps Members Save Money and Earn Rewards

When members are scheduled to receive outpatient procedures or diagnostic tests, **Reduce My Costs**<sup>1</sup> helps them find high quality cost-effective 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 cost-effective 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.<sup>2</sup>

<sup>1</sup> Certain services may require a referral and/or prior authorization before members can receive services from the cost-effective provider. To ensure the services will be covered, members should refer to their plan documents or contact Harvard Pilgrim at 888-333-4742. Members should review their plan documents to confirm whether the Reduce My Costs program is offered with their plan.

<sup>2</sup> Rewards are considered taxable income; members should consult their tax advisors.





# Know Your Care Options



## When to visit the Emergency Room

If you think you're having an emergency and your life is in danger, call 911 or go to the nearest emergency room. Common medical emergencies that should be treated in the emergency room include choking, heart attack or severe abdominal pain.



## When to see your Primary Care Provider (PCP)

For non-urgent needs such as preventive screenings, checkups, immunizations, or chronic conditions, your PCP knows your medical history and is best suited to coordinate your care. And, they may also offer virtual health care services for even greater convenience.



## When to visit an Urgent Care Center

You can stop by an urgent care center without an appointment for conditions that need immediate treatment but are not considered life-threatening. Examples include minor burns or cuts that may require stitches.



## When to go to a Retail Clinic

Retail clinics such as CVS MinuteClinic® and Walgreens Healthcare Clinic are a good option when you're experiencing mild symptoms such as an ear infection or skin conditions like poison ivy, and you want a health professional to check it out without an appointment.



## When to use virtual care, through Doctor On Demand<sup>1</sup>

You can request a virtual visit with a U.S.-based doctor 24/7 for non-emergency conditions such as upper respiratory infection, upset stomach or skin rash using live video or voice call via your smartphone, tablet or computer. You can also access confidential therapy and build an ongoing relationship with the provider of your choice.



## When to reach out to our Harvard Pilgrim Care Team

Need assistance managing a chronic condition, understanding costs related to health insurance or coordinating access to quality care? Our Care Team of registered nurses, clinical social workers and certified health coaches will answer your questions, help you navigate the health care system, and support your health and wellness goals at no cost.

<sup>1</sup> Doctor On Demand virtual care services are available to Harvard Pilgrim members including 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. 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. Doctor on Demand is not covered for Medicare Enhance members.



# 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 emergency room 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.<sup>1</sup>

Members enrolled in non-HSA plans are not required to pay cost-sharing for urgent care virtual visits with Doctor On Demand providers. Members on HSA plans will be responsible for the cost of the visit, up to the deductible.



Get care from licensed medical doctors, psychologists and psychiatrists<sup>2</sup>



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.

<sup>1</sup> 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.

<sup>2</sup> 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

Our clinical care team of nurses, social workers, pharmacists and health coaches connects with and guides members to better health.

### Chronic care support

- Diabetes
- COPD
- Asthma
- Heart disease

### Specialty care support

- Rare diseases
- Transgender care
- Oncology care
- Chronic kidney disease

### 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 [harvardpilgrim.org/clinicalcareteam](https://www.harvardpilgrim.org/clinicalcareteam) to learn more.



## Whole-Person Care

### A New Integrated Approach to Behavioral Health

Harvard Pilgrim members can access a comprehensive network of medical and behavioral health care providers, along with innovative programs and services, to improve both physical and mental well-being in traditional and virtual settings. Our dedicated team will guide you from the first phone call to aftercare planning, to ensure that you receive "whole-person" care through an integrated approach.

#### Behavioral health service navigation

Our specially trained service navigators provide personalized help to navigate the complex health care system, locate providers, connect to internal supports and programs, and learn more about innovative tools and services.

#### Care management programs

Our licensed care managers work with you and your providers to ensure optimal health and functioning through a variety of care management programs, including care coordination, complex care, addiction recovery, transition to home, emergency department readmission diversion, supportive care, post facility discharge and peer support.

#### Behavioral health programs and services

Harvard Pilgrim offers innovative behavioral health programs and services for children, adolescents, and adults:

- Virtual therapy services
- Quick and easy access to specialty providers

Substance use treatment services are available through multiple network providers, including Better Life Partners. Members are supported after inpatient treatment by our internal Addiction Recovery Care Management Team.

Better Life Partners services are available in Massachusetts, New Hampshire, Maine and Vermont. Member cost sharing may apply. Members should refer to their plan documents for specific details regarding their coverage and benefits.

For assistance with accessing these innovative programs and services, please call the number on the back of your member ID card.

If you're experiencing a crisis or emergency, you should always call 911 or go to the nearest emergency facility right away. Harvard Pilgrim, a Point32Health company, complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Por servicio de traducción gratuito en español, llame al número de su tarjeta de miembro. 若需免費的中文版本, 請撥打ID卡上的電話號碼。



## 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:**  
Well-being activities with built-in incentives to encourage healthy actions
- **Living Well at Home:**  
Online wellness classes

### Living Well<sup>SM</sup> Workplace

Everything an employer needs to start a wellness program, all in one place. Visit [harvardpilgrim.org/wellnessprogram](https://harvardpilgrim.org/wellnessprogram) to check out our turnkey toolkit, online engagement platform and popular buy-up programs.

### Living Well Everyday<sup>SM</sup>

Our free online community is packed with activities, tracking tools, well-being challenges and more. Earn points and entries for monthly gift card drawings. Visit [harvardpilgrim.org/wellbeingforall](https://harvardpilgrim.org/wellbeingforall) today. And be sure to check out [harvardpilgrim.org/livingwellathome](https://harvardpilgrim.org/livingwellathome) for our online wellness classes.

### Discounts and savings

- Vision and hearing
- Fitness and workout gear
- Complementary and alternative medicine

### Fitness reimbursement

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!



## Family-Centered Care

Designed to offer access to complementary services and support that aim to improve our members' overall health and well-being.

### Included Health

Included Health's LGBTQ+ Health offers whole-person care focused on LGBTQ+ members and their needs while working within their health plan ecosystem to ensure members feel safe, understood and supported:

- Gender Affirming Care
- Family Building
- Benefits Navigation
- Provider Matching
- Community Support
- Mental Well being

### Care Concierge

Helping families get things done. Dedicated, hands-on support from experts who get to know each family and tackle their to-dos

### Care Dashboard

Helping families plan and learn. Comprehensive care planning tools and resources in one centralized, accessible place

### Wellthy

Wellthy helps members tackle the logistical and administrative tasks of caring for the ones they love, including themselves, across a wide array of needs

- Aging
- Childcare Needs
- Mental Health
- Health Concerns
- Financial Hardship
- Veteran Support

### Wellthy Community

Helping families feel less alone. Peer-to-peer platform where family caregivers can find support and exchange knowledge

Visit [Includedhealth.com/harvardpilgrim](https://includedhealth.com/harvardpilgrim) to learn more.



## 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**)
- 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

[harvardpilgrim.org/familyhealth](https://www.harvardpilgrim.org/familyhealth) to learn more.

<sup>1</sup> 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.

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# 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

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

# Help Your Members Choose a Plan

## When choosing a plan, your clients should consider a number of factors:

- Do they frequently go to the doctor or need medical treatment?
- Is having the flexibility to see doctors outside the network important to them?
- Do they regularly take medication?  
Or take several medications?
- Do they prefer a higher premium and lower payments when they receive treatment?

## Types of plans:

### HMO/HMO OA

- Care within Harvard Pilgrim's network
- HMO members select a PCP and get referrals for specialist visits
- Virtual PCP plans available
- HMO Open Access members select a PCP but no referrals are required

### PPO<sup>1</sup>

- Covered in-network (includes our national network)
- Option to go out-of-network and pay more
- No PCP selection or referrals required

### Select network plan (ElevateHealth)

- Care within the select HMO network only
- Authorization required for other Harvard Pilgrim providers and hospitals<sup>2</sup>
- Any provider or hospital in a medical emergency

### Tiered network plan (ElevateHealth Options)

- Full network HMO plan option
- Tier 1 = Lower cost-sharing
- Tier 2 = Higher cost-sharing

### Qualified high deductible plan

- HMO + PPO
- Meet a deductible before we pay for services
- Some employers may offer an HRA or HSA to help members meet their deductible

### Medicare Enhance

- This plan pays your Medicare-approved deductible and coinsurance amounts (less any applicable cost-sharing amounts)
- You can visit any doctor or care provider in the U.S. that accepts Medicare
- No referrals or authorizations are required

## Help clients find the plan that best meets their needs

### X marks the spot

	HMO	PPO	Select	Tiered	Qualified high deductible	Medicare Enhance
Their doctors participate in the plan network; client does not want to spend more money out-of-pocket	X		X	X	X	
Wants the freedom to see any doctor		X			X (PPO only)	X
Wants to save on premium (money paid up front for health coverage)			X	X	X	
Wants services to be covered up front and doesn't mind a higher premium	X	X		X		X
Prefers to budget and keep track of health care expenses			X	X	X	X
Wants a plan that lets them save money with specified providers				X		

<sup>1</sup> PPO plans are underwritten by HPHC Insurance Company.

<sup>2</sup> Care outside of the ElevateHealth HMO Network must be authorized by Harvard Pilgrim.

# 2024 Updates

Updates	Details
<b>Pediatric Dental</b>	Beginning in 2024, all NH Small Group plans will include pediatric dental coverage.
<b>Site of Service</b>	More plans will include site of service cost-sharing in 2024. Members have lower cost-sharing for non-hospital providers for advanced radiology and PT/ST/OT.
<b>Rx Deductible</b>	More plans will include a separate Pharmacy Deductible, allowing members coverage without having to satisfy the higher medical deductible.
<b>Behavioral Health</b>	<p><b>NEW Insourced Behavioral Health Program</b></p> <p>Harvard Pilgrim health plan members (subscribers and covered family members) will gain access to new and integrated behavioral health model including a robust network of behavioral health providers, and a new member navigation resource program.</p> <p><b>Behavioral Health Programs and Services</b></p> <p>Harvard Pilgrim offers innovative behavioral health programs and services for children, adolescents, and adults:</p> <ul style="list-style-type: none"> <li>• Virtual therapy services are available 7 days/week: to support your mental health and well-being.</li> <li>• Quick and easy access to specialty providers</li> <li>• Substance use treatment services</li> </ul>
<b>EXPANDED Family-Centered Care</b>	<p><b>NEW LGBTQ+ Health from Included Health</b> offers whole person care focused on LGBTQ+ members and their needs, while working within their health plan ecosystem to ensure members feel safe, understood and supported. Wellthy connects families with dedicated care professionals to help them tackle the logistical and administrative tasks of caring for the ones they love, including themselves.</p>
Reminders	Details
<b>Harvard Pilgrim's integrated HRA</b>	We have partnered with Benefit Strategies of Manchester to offer an easy-to-implement integrated health reimbursement arrangement (HRA). Benefit Strategies manages the day-to-day administration of the HRA from start to finish. You provide the parameters for what works best for your company, and the rest is done for you.
<b>Virtual benefit fairs</b>	We'll set up an open enrollment website with information about employers' Harvard Pilgrim plan options. There's no hassle and no extra cost.
<b>Pharmacy Benefit Manager (PBM)</b>	OptumRX offers a fully integrated PBM including retail, specialty and mail order services to Harvard Pilgrim members. Members will continue to have access to a wide network of pharmacies and a cost-saving mail order program.

# Our Plans: Where Choice Meets Savings

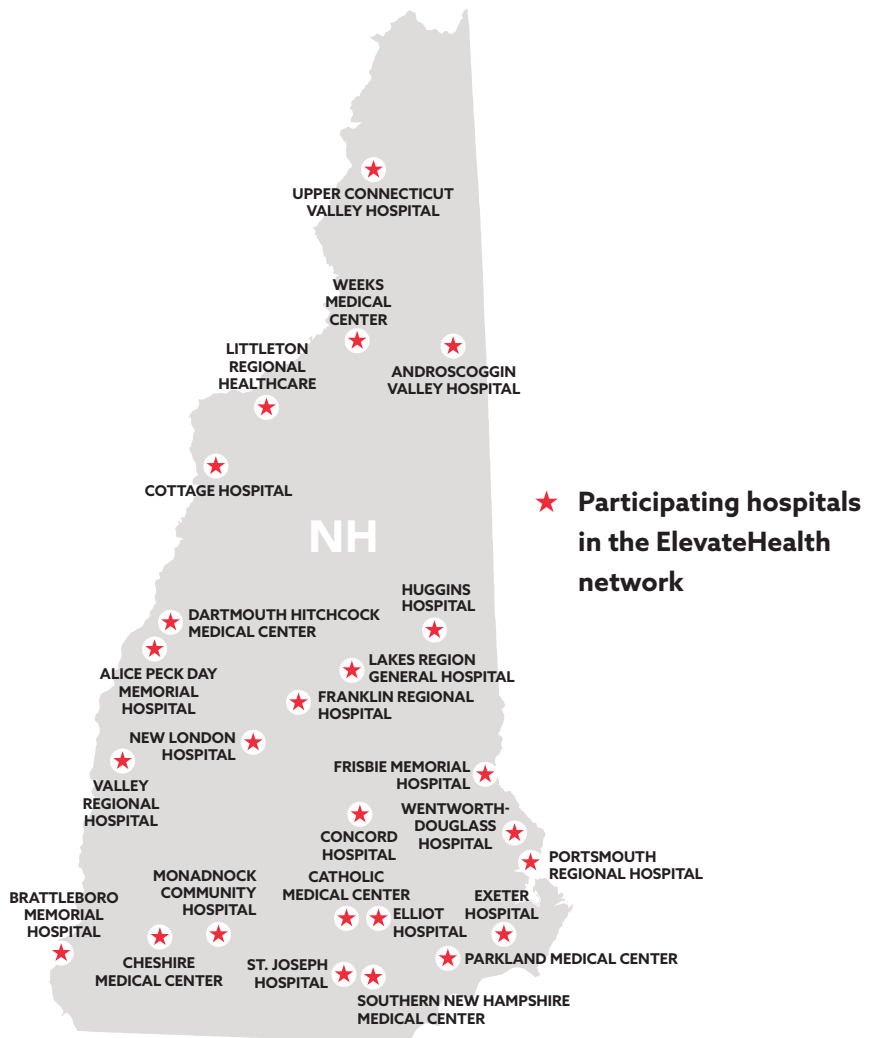
Plans offered in New Hampshire are designed to improve the quality of care and lower premiums.

	ElevateHealth HMO	ElevateHealth Options HMO
Access to the select ElevateHealth network	Yes	Yes
Access to the full Harvard Pilgrim network	No, unless authorized by Harvard Pilgrim	Yes, with the appropriate referrals
Lower member cost-sharing with Tier 1 providers	Not applicable	Yes
HSA-compatible plan design	Yes	No
Lab work	Deductible	No charge (Tier 1)

## 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).



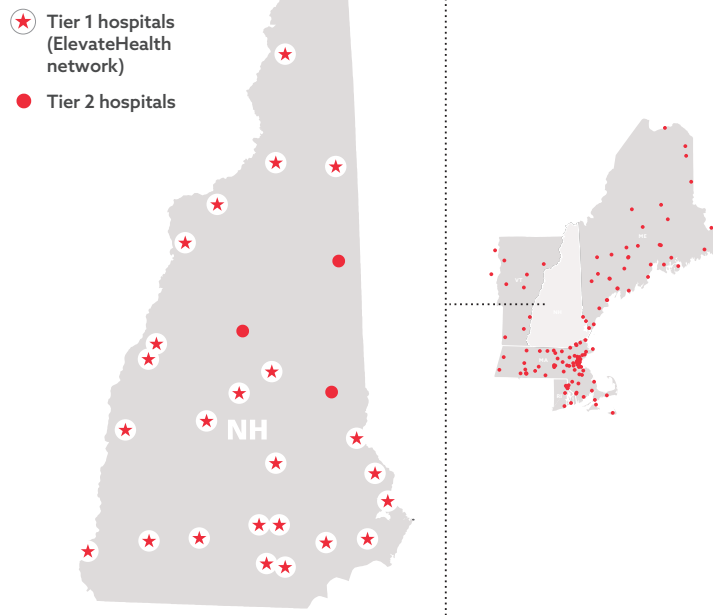
\* Changes to our network may occur at any time. For the most current information, visit the provider search tool at [harvardpilgrim.org/providerdirectory](http://harvardpilgrim.org/providerdirectory).



## ElevateHealth Options HMO

This is a full-network plan option that offers premium savings over standard full-network plans.<sup>1</sup>

- 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.
- **Applicants must reside in NH to be eligible for enrollment in the ELH plan.** However they are not available to individuals who reside in Carroll County.<sup>2</sup>



## 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.



<sup>1</sup> Changes to our network may occur at any time. For the most current information, visit the provider search tool at [harvardpilgrim.org/providerdirectory](http://harvardpilgrim.org/providerdirectory).

<sup>2</sup> To be eligible for coverage under this Plan, you must live, and maintain a permanent residence, within the Enrollment Area at least six months of a year. Enrollment Area: The geographic area in which you must live in order to be eligible to enroll as a Member under the Plan. The Enrollment Area includes the state of New Hampshire

# Virtual Primary Care

## Harvard Pilgrim delivers a plan with a virtual-first primary care model.

**SimplyVirtual HMO** is an innovative health care model 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.

SimplyVirtual <sup>SM</sup> HMO	
<b>PCP requirement</b>	<ul style="list-style-type: none"> <li>• Adult members age 19+ must select a PCP from Doctor On Demand<sup>2</sup></li> <li>• All members under age 19 must select a PCP from Harvard Pilgrim's HMO network and receive office-based care</li> </ul>
<b>PCP cost-sharing</b>	<ul style="list-style-type: none"> <li>• Same cost-sharing for all members, regardless of age</li> </ul>
<b>Specialists and referrals</b>	<ul style="list-style-type: none"> <li>• 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.</li> </ul>
<b>Behavioral health access</b>	<ul style="list-style-type: none"> <li>• Members may choose behavioral health providers from Doctor On Demand or from the full United Behavioral Health network</li> </ul>

### 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 SimplyVirtual<sup>SM</sup> option will:

- Register with Doctor On Demand
- Select and virtually meet their PCP<sup>1</sup>
- 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

<sup>1</sup> 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.

# Get Instant, Accurate Quotes Online

Visit the new **broker account** for online quotes, plan details and more

Small group brokers who do business in New Hampshire will manage their 2024 quoting and renewals through the new broker account. *Any remaining 2023 New Hampshire small group activity will continue to be managed in the heritage HPOQ/R account.* Easily navigate to HPOQ/R from your broker account home page.



## Online Quoting & Renewals make it easy to:

- Receive instant quotes
- PDF documentation available to email to your clients
- View product highlights or detailed Summary of Benefits and Coverage (SBCs) and Schedules of Benefits
- Manage group and census data
- Get instant rates for updated census data
- Create professional proposals

## Get started with Online Quoting and Renewals

This new tool replaces the heritage HPOQ/R platform. If you have not yet logged into your broker account on the new platform please contact your Broker Administrator to create an account.

Log in <https://brokers.point32health.org/auth/login.htm> to access your online books of business, commissions, user administration and more.

## Need help?

If you have trouble accessing the Online Quoting system or have other issues, call the Broker Service Center at **800-424-7285**.



## We have the information you need

Visit [harvardpilgrim.org/broker](https://harvardpilgrim.org/broker) for Summary of Benefits and Coverage documents, our plan comparison tool and other helpful resources.

# 2024 New Hampshire Plan Offerings

2024 New Hampshire Small Group Plans – Effective January 1, 2024, through December 31, 2024.

This is only a summary of plans. For more complete information, please refer to the Schedule of Benefits.

## For employers with 1 to 50 full time equivalent employees

Plan Name	Network Tier	Office Visit (PCP/Specialist)	Deductible (Individual/Family)	Out-of-Pocket Maximum (Individual/Family)	Coinsurance	ER <sup>1</sup>	Urgent Care		Inpatient	Day Surgery	Labs	Scans: CT, MRI, PET	PT/OT/ST	Acupuncture & Chiropractic	Rx 30-Day Retail
							Freestanding	Hospital Based							
<b>ElevateHealth HMO</b>															
<b>ElevateHealth HMO Gold 2000 with Rx Deductible</b> MD0000201066, RX0000201045	N/A	\$25/\$50	Med: \$2,000/\$4,000 Rx: \$500/member	\$8,500/\$17,000	20%	Ded then \$300	\$35	Ded then \$150	Ded then 20%	ASC: \$250 Outpt Hosp: Ded then 20%	Ded then 20%	Non-hospital based: \$250 Hospital based: Ded then 20%	Non-hospital based: \$25 Hospital based: Ded then 20%	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>
<b>ElevateHealth HMO Gold 2700 with Rx Deductible</b> MD0000201067, RX0000201046	N/A	\$25/\$50	Med: \$2,700/\$5,400 Rx: \$500/member	\$7,500/\$15,000	10%	Ded then \$300	\$35	Ded then \$150	Ded then 10%	ASC: \$250 Outpt Hosp: Ded then 10%	Ded then 10%	Non-hospital based: \$250 Hospital based: Ded then 10%	Non-hospital based: \$25 Hospital based: Ded then 10%	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>
<b>ElevateHealth HMO Silver 3000 with Rx Deductible</b> MD0000201068, RX0000201047	N/A	\$40/\$80	Med: \$3,000/\$6,000 Rx: \$500/member	\$9,100/\$18,200	35%	Ded then \$350	\$50	Ded then \$175	Ded then 35%	ASC: \$250 Outpt Hosp: Ded then 35%	Ded then 35%	Non-hospital based: \$250 Hospital based: Ded then 35%	Non-hospital based: \$40 Hospital based: Ded then 35%	\$40	\$5/\$35/Rx Ded then \$120/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>
<b>ElevateHealth HMO Silver 4000 with Rx Deductible</b> MD0000201069, RX0000201047	N/A	\$40/\$80	Med: \$4,000/\$8,000 Rx: \$500/member	\$9,100/\$18,200	35%	Ded then \$350	\$50	Ded then \$175	Ded then 35%	ASC: \$250 Outpt Hosp: Ded then 35%	Ded then 35%	Non-hospital based: \$250 Hospital based: Ded then 35%	Non-hospital based: \$40 Hospital based: Ded then 35%	\$40	\$5/\$35/Rx Ded then \$120/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>
<b>ElevateHealth HMO Silver 5000 with Rx Deductible</b> MD0000201070, RX0000201048	N/A	\$50/\$100	Med: \$5,000/\$10,000 Rx: \$500/member	\$9,100/\$18,200	30%	Ded then \$500	\$60	Ded then \$250	Ded then 30%	ASC: \$250 Outpt Hosp: Ded then 30%	Ded then 30%	Non-hospital based: \$300 Hospital based: Ded then 30%	Non-hospital based: \$50 Hospital based: Ded then 30%	\$40	\$5/\$35/\$80/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>
<b>ElevateHealth HMO Silver 6000 with Rx Deductible</b> MD0000201071, RX0000201048	N/A	\$50/\$100	Med: \$6,000/\$12,000 Rx: \$500/member	\$9,100/\$18,200	30%	Ded then \$500	\$60	Ded then \$250	Ded then 30%	ASC: \$250 Outpt Hosp: Ded then 30%	Ded then 30%	Non-hospital based: \$300 Hospital based: Ded then 30%	Non-hospital based: \$50 Hospital based: Ded then 30%	\$40	\$5/\$35/\$80/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>
<b>ElevateHealth HMO Silver 7000</b> MD0000201072, RX0000201049	N/A	\$50/\$100	\$7,000/\$14,000	\$9,100/\$18,200	30%	Ded then \$500	\$60	Ded then \$250	Ded then 30%	ASC: \$250 Outpt Hosp: Ded then 30%	Ded then 30%	Non-hospital based: \$300 Hospital based: Ded then 30%	Non-hospital based: \$50 Hospital based: Ded then 30%	\$40	\$5/\$35/\$80/Ded then 40% <sup>2</sup> /Ded then 45% <sup>2</sup>
<b>ElevateHealth HMO Bronze 9100</b> MD0000201073, RX0000201050	N/A	\$50/\$100	\$9,100/\$18,200	\$9,100/\$18,200	None	Ded then CIF	\$60	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Non-hospital based: \$75 Hospital based: Ded then CIF	\$40	Ded then CIF/CIF/CIF/CIF

<sup>1</sup> Members will pay higher cost-sharing for emergency room visits that are not considered medical emergencies.

Refer to your plan documents for specifics.

<sup>2</sup>\$550 coinsurance maximum per script.

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							Freestanding	Hospital Based								
<b>ElevateHealth HMO HSA</b>																
<b>ElevateHealth HMO HSA Silver 3500 with Preventive Rx</b> MD0000201074, RX0000201051	N/A	Ded then 20%	\$3,500/\$7,000	\$7,000/\$14,000	20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then \$5/20%/25%/30%/30%
<b>ElevateHealth HMO HSA Silver 5000 with Preventive Rx</b> MD0000201075, RX0000201052	N/A	Ded then 10%	\$5,000/\$10,000	\$7,500/\$15,000	10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then \$5/20%/20%/30%/30%
<b>ElevateHealth HMO HSA Bronze 7500 with Preventive Rx</b> MD0000201076, RX0000201053	N/A	Ded then CIF	\$7,500/\$15,000	\$7,500/\$15,000	None	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF/CIF/CIF/CIF/CIF
<b>ElevateHealth Options HMO</b>																
<b>ElevateHealth Options HMO Gold 1000 with Rx Deductible</b> MD0000201077, RX0000201045	1	\$25/\$50	Med: \$1,000/\$2,000 Rx: \$500/member	\$8,500/\$17,000	10%	Ded then \$300	\$35	Ded then \$150	Ded then 10%	ASC: \$250 Outpt Hosp: Ded then 10%	CIF	Ded then 10%	Non-hospital based: \$25 Hospital based: Ded then 10%	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>	
	2	Ded then 30%	Med: \$4,000/\$8,000		30%	Same as T1		Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%		Acupuncture: \$25 Chiro: Ded, then 30%
<b>ElevateHealth Options HMO Silver 3000 with Rx Deductible</b> MD0000201078, RX0000201054	1	\$40/\$80	Med: \$3,000/\$6,000 Rx: \$500/member	\$9,100/\$18,200	15%	Ded then \$350	\$50	Ded then \$175	Ded then 15%	ASC: \$250 Outpt Hosp: Ded then 15%	CIF	Ded then 15%	Non-hospital based: \$40 Hospital based: Ded then 15%	\$40	\$5/\$35/Rx Ded then \$80/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>	
	2	Ded then 35%	Med: \$6,000/\$12,000		35%	Same as T1		Ded then 35%	Ded then 35%	Ded then 35%	Ded then 35%	Ded then 35%	Ded then 35%	Ded then 35%		Acupuncture: \$40 Chiro: Ded, then 35%
<b>ElevateHealth Options HMO Silver 4000 with Rx Deductible</b> MD0000201079, RX0000201054	1	\$40/\$80	Med: \$4,000/\$8,000 Rx: \$500/member	\$9,100/\$18,200	20%	Ded then \$350	\$50	Ded then \$175	Ded then 20%	ASC: \$250 Outpt Hosp: Ded then 20%	CIF	Ded then 20%	Non-hospital based: \$40 Hospital based: Ded then 20%	\$40	\$5/\$35/Rx Ded then \$80/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>	
	2	Ded then 40%	Med: \$7,000/\$14,000		40%	Same as T1		Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%		Acupuncture: \$40 Chiro: Ded, then 40%

<sup>1</sup> Members will pay higher cost-sharing for emergency room visits that are not considered medical emergencies.

Refer to your plan documents for specifics.

<sup>2</sup>\$550 coinsurance maximum per script.

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							Freestanding	Hospital Based							
<b>HMO-LP</b>															
<b>HMO Gold 1000 - LP with Rx Deductible</b> MD0000201080, RX0000201045	N/A	\$25/\$50	Med: \$1,000/\$3,000 Rx: \$500/member	\$8,500/\$17,000	20%	Ded then \$300	\$35	Ded then \$150	Ded then 20%	Select LP: \$250 Others: Ded then 20%	Select LP: CIF Others: Ded then 20%	Non-hospital based: \$250 Hospital based: Ded then 20%	Non-hospital based: \$25 Hospital based: Ded then 20%	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>
<b>HMO Gold 1500 - LP with Rx Deductible</b> MD0000201081, RX0000201045	N/A	\$25/\$50	Med: \$1,500/\$3,000 Rx: \$500/member	\$8,500/\$17,000	20%	Ded then \$300	\$35	Ded then \$150	Ded then 20%	Select LP: \$250 Others: Ded then 20%	Select LP: CIF Others: Ded then 20%	Non-hospital based: \$250 Hospital based: Ded then 20%	Non-hospital based: \$25 Hospital based: Ded then 20%	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>
<b>HMO Gold 2000/0% - LP with Rx Deductible</b> MD0000201082, RX0000201046	N/A	\$25/\$50	Med: \$2,000/\$4,000 Rx: \$500/member	\$7,500/\$15,000	None	Ded then \$300	\$35	Ded then \$150	Ded then CIF	Select LP: \$250 Others: Ded then \$250	Select LP: CIF Others: Ded then CIF	Non-hospital based: \$250 Hospital based: Ded then \$250	Non-hospital based: \$25 Hospital based: Ded then CIF	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>
<b>HMO Gold 2000/10% - LP</b> MD0000201083, RX0000201055	N/A	\$25/\$50	\$2,000/\$4,000	\$8,500/\$17,000	10%	Ded then \$300	\$35	Ded then \$150	Ded then 10%	Select LP: \$250 Others: Ded then 10%	Select LP: CIF Others: Ded then 10%	Non-hospital based: \$250 Hospital based: Ded then 10%	Non-hospital based: \$25 Hospital based: Ded then 10%	\$25	\$2/\$25/\$65/Ded then 35% <sup>2</sup> /Ded then 40% <sup>2</sup>
<b>HMO Gold 2000/20% - LP with Rx Deductible</b> MD0000201084, RX0000201045	N/A	\$25/\$50	Med: \$2,000/\$4,000 Rx: \$500/member	\$8,500/\$17,000	20%	Ded then \$300	\$35	Ded then \$150	Ded then 20%	Select LP: \$250 Others: Ded then 20%	Select LP: CIF Others: Ded then 20%	Non-hospital based: \$250 Hospital based: Ded then 20%	Non-hospital based: \$25 Hospital based: Ded then 20%	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>
<b>HMO Gold 3000/0% - LP</b> MD0000201085, RX0000201060	N/A	\$25/\$50	\$3,000/\$6,000	\$8,500/\$17,000	None	Ded then \$300	\$35	Ded then \$150	Ded then CIF	Select LP: \$250 Others: Ded then \$250	Select LP: CIF Others: Ded then CIF	Non-hospital based: \$250 Hospital based: Ded then \$250	Non-hospital based: \$25 Hospital based: Ded then CIF	\$25	\$2/\$25/\$65/Ded then 35% <sup>2</sup> /Ded then 40% <sup>2</sup>
<b>HMO Gold 2700/10% - LP with Rx Deductible</b> MD0000201086, RX0000201046	N/A	\$25/\$50	Med: \$2,700/\$5,400 Rx: \$500/member	\$7,500/\$15,000	10%	Ded then \$300	\$35	Ded then \$150	Ded then 10%	Select LP: \$250 Others: Ded then 10%	Select LP: CIF Others: Ded then 10%	Non-hospital based: \$250 Hospital based: Ded then 10%	Non-hospital based: \$25 Hospital based: Ded then 10%	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>
<b>HMO Silver 3000 - LP with Rx Deductible</b> MD0000201087, RX0000201047	N/A	\$40/\$80	Med: \$3,000/\$6,000 Rx: \$500/member	\$9,100/\$18,200	35%	Ded then \$350	\$50	Ded then \$175	Ded then 35%	Select LP: \$250 Others: Ded then 35%	Select LP: CIF Others: Ded then 35%	Non-hospital based: \$300 Hospital based: Ded then 35%	Non-hospital based: \$40 Hospital based: Ded then 35%	\$40	\$5/\$35/Rx Ded then \$120/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>
<b>HMO Silver 4000 - LP with Rx Deductible</b> MD0000201088, RX0000201047	N/A	\$40/\$80	Med: \$4,000/\$8,000 Rx: \$500/member	\$9,100/\$18,200	20%	Ded then \$350	\$50	Ded then \$175	Ded then 20%	Select LP: \$250 Others: Ded then 20%	Select LP: CIF Others: Ded then 20%	Non-hospital based: \$300 Hospital based: Ded then 20%	Non-hospital based: \$40 Hospital based: Ded then 20%	\$40	\$5/\$35/Rx Ded then \$120/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>
<b>HMO Gold 3500 - LP with Rx Deductible</b> MD0000201089, RX0000201056	N/A	\$25/\$50	Med: \$3,500/\$7,000 Rx: \$500/member	\$7,000/\$14,000	None	Ded then \$300	\$35	Ded then \$150	Ded then CIF	Select LP: \$250 Others: Ded then \$250	Select LP: CIF Others: Ded then CIF	Non-hospital based: \$250 Hospital based: Ded then \$250	Non-hospital based: \$25 Hospital based: Ded then CIF	\$25	\$2/\$25/\$50/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>
<b>HMO Silver 5000 - LP with Rx Deductible</b> MD0000201090, RX0000201048	N/A	\$50/\$100	Med: \$5,000/\$10,000 Rx: \$500/member	\$9,100/\$18,200	30%	Ded then \$500	\$60	Ded then \$250	Ded then 30%	Select LP: \$250 Others: Ded then 30%	Select LP: CIF Others: Ded then 30%	Non-hospital based: \$300 Hospital based: Ded then 30%	Non-hospital based: \$50 Hospital based: Ded then 30%	\$40	\$5/\$35/\$80/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>
<b>HMO Silver 6000 - LP with Rx Deductible</b> MD0000201091, RX0000201048	N/A	\$50/\$100	Med: \$6,000/\$12,000 Rx: \$500/member	\$9,100/\$18,200	30%	Ded then \$500	\$60	Ded then \$250	Ded then 30%	Select LP: \$250 Others: Ded then 30%	Select LP: CIF Others: Ded then 30%	Non-hospital based: \$300 Hospital based: Ded then 30%	Non-hospital based: \$50 Hospital based: Ded then 30%	\$40	\$5/\$35/\$80/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>
<b>HMO Silver 7000 - LP</b> MD0000201092, RX0000201049	N/A	\$50/\$100	\$7,000/\$14,000	\$9,100/\$18,200	30%	Ded then \$500	\$60	Ded then \$250	Ded then 30%	Select LP: \$250 Others: Ded then 30%	Select LP: CIF Others: Ded then 30%	Non-hospital based: \$300 Hospital based: Ded then 30%	Non-hospital based: \$50 Hospital based: Ded then 30%	\$40	\$5/\$35/\$80/Ded then 40% <sup>2</sup> /Ded then 45% <sup>2</sup>

<sup>1</sup> Members will pay higher cost-sharing for emergency room visits that are not considered medical emergencies. Refer to your plan documents for specifics.

<sup>2</sup>\$550 coinsurance maximum per script.

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Plan Name	Network Tier	Office Visit (PCP/Specialist)	Deductible (Individual/Family)	Out-of-Pocket Maximum (Individual/Family)	Coinsurance	ER <sup>1</sup>	Urgent Care		Inpatient	Day Surgery	Labs	Scans: CT, MRI, PET	PT/OT/ST	Acupuncture & Chiropractic	Rx 30-Day Retail	
							Freestanding	Hospital Based								
<b>HMO-LP Open Access</b>																
<b>HMO Platinum 250 - LP Open Access</b> MD0000201100, RX0000201061	N/A	\$20/\$40	\$250/\$750	\$3,500/\$7,000	10%	Ded then \$300	\$30	Ded then \$150	Ded then 10%	Select LP: \$250 Others: Ded then 10%	Select LP: CIF Others: Ded then 10%	Non-hospital based: \$250 Hospital based: Ded then 10%	Non-hospital based: \$20 Hospital based: Ded then 10%	\$20	\$2/\$25/\$65/Ded then 35% <sup>2</sup> /Ded then 40% <sup>2</sup>	
<b>HMO Gold 2500 - LP Open Access with Rx Deductible</b> MD0000201101, RX0000201062	N/A	\$25/\$50	Med: \$2,500/\$5,000 Rx: \$500/member	\$8,500/\$17,000	10%	Ded then \$300	\$35	Ded then \$150	Ded then 10%	Select LP: \$250 Others: Ded then 10%	Select LP: CIF Others: Ded then 10%	Non-hospital based: \$250 Hospital based: Ded then 10%	Non-hospital based: \$25 Hospital based: Ded then 10%	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>	
<b>HMO Silver 3500 - LP Open Access with Rx Deductible</b> MD0000201102, RX0000201063	N/A	\$40/\$80	Med: \$3,500/\$7,000 Rx: \$500/member	\$8,700/\$17,400	35%	Ded then \$350	\$50	Ded then \$175	Ded then 35%	Select LP: \$250 Others: Ded then 35%	Select LP: CIF Others: Ded then 35%	Non-hospital based: \$300 Hospital based: Ded then 35%	Non-hospital based: \$40 Hospital based: Ded then 35%	\$40	\$5/\$35/\$100/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>	
<b>HMO Silver 4500 - LP Open Access with Rx Deductible</b> MD0000201103, RX0000201063	N/A	\$40/\$80	Med: \$4,500/\$9,000 Rx: \$500/member	\$8,700/\$17,400	20%	Ded then \$350	\$50	Ded then \$175	Ded then 20%	Select LP: \$250 Others: Ded then 20%	Select LP: CIF Others: Ded then 20%	Non-hospital based: \$300 Hospital based: Ded then 20%	Non-hospital based: \$40 Hospital based: Ded then 20%	\$40	\$5/\$35/\$100/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>	
<b>HMO and HMO HSA</b>																
<b>HMO Bronze 9100</b> MD0000201093, RX0000201050	N/A	\$50/\$100	\$9,100/\$18,200	\$9,100/\$18,200	None	Ded then CIF	\$60	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Non-hospital based: \$75 Hospital based: Ded then CIF	\$40	Ded then CIF/CIF/CIF/CIF/CIF
<b>HMO HSA Silver 3500 with Preventive Rx</b> MD0000201094, RX0000201051	N/A	Ded then 20%	\$3,500/\$7,000	\$7,000/\$14,000	20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then \$5/20%/25%/30%/30%
<b>HMO HSA Silver 4000 with Preventive Rx</b> MD0000201095, RX0000201057	N/A	Ded then 10%	\$4,000/\$8,000	\$7,000/\$14,000	10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then \$5/20%/20%/30%/30%
<b>HMO HSA Silver 5000 with Preventive Rx</b> MD0000201096, RX0000201052	N/A	Ded then 10%	\$5,000/\$10,000	\$7,500/\$15,000	10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then \$5/20%/20%/30%/30%
<b>HMO HSA Bronze 7500 with Preventive Rx</b> MD0000201097, RX0000201053	N/A	Ded then CIF	\$7,500/\$15,000	\$7,500/\$15,000	None	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF/CIF/CIF/CIF/CIF
<b>Simply Virtual HMO</b>																
<b>SimplyVirtual HMO Gold 3000 with Rx Deductible</b> MD0000201098, RX0000201058	N/A	\$10/\$40	Med: \$3,000/\$6,000 Rx: \$500/member	\$7,700/\$15,400	10%	Ded then \$300	\$35	Ded then \$150	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	\$40	\$10	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>	
<b>SimplyVirtual HMO Silver 4000</b> MD0000201099, RX0000201059	N/A	\$10/\$80	\$4,000/\$8,000	\$9,100/\$18,200	35%	Ded then \$350	\$50	Ded then \$175	Ded then 35%	Ded then 35%	Ded then 35%	Ded then 35%	\$80	\$10	\$5/\$35/\$80/Ded then 40% <sup>2</sup> /Ded then 45% <sup>2</sup>	

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							Freestanding	Hospital Based							
<b>PPO-LP</b>															
<b>PPO Platinum 250 - LP</b> MD0000201110, RX0000201061	In-Network	\$20/\$40	\$250/\$750	\$3,500/\$7,000	10%	IN Ded then \$300	\$30	Ded then \$150	Ded then 10%	Select LP: \$250 Others: Ded then 10%	Select LP: CIF Others: Ded then 10%	Non-hospital based: \$250 Hospital based: Ded then 10%	Non-hospital based: \$20 Hospital based: Ded then 10%	\$20	\$2/\$25/\$65/IN Ded then 35% <sup>2</sup> /IN Ded then 40% <sup>2</sup>
	Out-of-Network	Ded then 30%	\$2,000/\$4,000	\$7,000/\$14,000	30%		Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	
<b>PPO Gold 1500 - LP with Rx Deductible</b> MD0000201104, RX0000201045	In-Network	\$25/\$50	Med: \$1,500/\$3,000 Rx: \$500/member	\$8,500/\$17,000	20%	IN Ded then \$300	\$35	Ded then \$150	Ded then 20%	Select LP: \$250 Others: Ded then 20%	Select LP: CIF Others: Ded then 20%	Non-hospital based: \$250 Hospital based: Ded then 20%	Non-hospital based: \$25 Hospital based: Ded then 20%	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>
	Out-of-Network	Ded then 40%	\$3,000/\$6,000	\$8,500/\$17,000	40%		Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	
<b>PPO Gold 2000 - LP with Rx Deductible</b> MD0000201105, RX0000201045	In-Network	\$25/\$50	Med: \$2,000/\$4,000 Rx: \$500/member	\$8,500/\$17,000	20%	IN Ded then \$300	\$35	Ded then \$150	Ded then 20%	Select LP: \$250 Others: Ded then 20%	Select LP: CIF Others: Ded then 20%	Non-hospital based: \$250 Hospital based: Ded then 20%	Non-hospital based: \$25 Hospital based: Ded then 20%	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>
	Out-of-Network	Ded then 40%	\$4,000/\$8,000	\$10,000/\$20,000	40%		Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	
<b>PPO Gold 2700 - LP with Rx Deductible</b> MD0000201106, RX0000201046	In-Network	\$25/\$50	Med: \$2,700/\$5,400 Rx: \$500/member	\$7,500/\$15,000	10%	IN Ded then \$300	\$35	Ded then \$150	Ded then 10%	Select LP: \$250 Others: Ded then 10%	Select LP: CIF Others: Ded then 10%	Non-hospital based: \$250 Hospital based: Ded then 10%	Non-hospital based: \$25 Hospital based: Ded then 10%	\$25	\$2/\$25/\$65/Rx Ded then 35% <sup>2</sup> /Rx Ded then 40% <sup>2</sup>
	Out-of-Network	Ded then 35%	\$6,000/\$12,000	\$12,000/\$24,000	35%		Ded then 35%	Ded then 35%	Ded then 35%	Ded then 35%	Ded then 35%	Ded then 35%	Ded then 35%	Ded then 35%	
<b>PPO Silver 4000 - LP with Rx Deductible</b> MD0000201107, RX0000201047	In-Network	\$40/\$80	Med: \$4,000/\$8,000 Rx: \$500/member	\$9,100/\$18,200	20%	IN Ded then \$350	\$50	Ded then \$175	Ded then 20%	Select LP: \$250 Others: Ded then 20%	Select LP: CIF Others: Ded then 20%	Non-hospital based: \$300 Hospital based: Ded then 20%	Non-hospital based: \$40 Hospital based: Ded then 20%	\$40	\$5/\$35/Rx Ded then \$120/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>
	Out-of-Network	Ded then 40%	\$8,000/\$16,000	\$16,000/\$32,000	40%		Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	
<b>PPO Silver 5000 - LP with Rx Deductible</b> MD0000201108, RX0000201048	In-Network	\$50/\$100	Med: \$5,000/\$10,000 Rx: \$500/member	\$9,100/\$18,200	30%	IN Ded then \$500	\$60	Ded then \$250	Ded then 30%	Select LP: \$250 Others: Ded then 30%	Select LP: CIF Others: Ded then 30%	Non-hospital based: \$300 Hospital based: Ded then 30%	Non-hospital based: \$50 Hospital based: Ded then 30%	\$40	\$5/\$35/\$80/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>
	Out-of-Network	Ded then 60%	\$10,000/\$20,000	\$20,000/\$40,000	60%		Ded then 60%	Ded then 60%	Ded then 60%	Ded then 60%	Ded then 60%	Ded then 60%	Ded then 60%	Ded then 60%	
<b>PPO Silver 6000 - LP with Rx Deductible</b> MD0000201109, RX0000201048	In-Network	\$50/\$100	Med: \$6,000/\$12,000 Rx: \$500/member	\$9,100/\$18,200	30%	IN Ded then \$500	\$60	Ded then \$250	Ded then 30%	Select LP: \$250 Others: Ded then 30%	Select LP: CIF Others: Ded then 30%	Non-hospital based: \$300 Hospital based: Ded then 30%	Non-hospital based: \$50 Hospital based: Ded then 30%	\$40	\$5/\$35/\$80/Rx Ded then 40% <sup>2</sup> /Rx Ded then 45% <sup>2</sup>
	Out-of-Network	Ded then 60%	\$12,000/\$24,000	\$24,000/\$48,000	60%		Ded then 60%	Ded then 60%	Ded then 60%	Ded then 60%	Ded then 60%	Ded then 60%	Ded then 60%	Ded then 60%	

<sup>1</sup> Members will pay higher cost-sharing for emergency room visits that are not considered medical emergencies. Refer to your plan documents for specifics.

<sup>2</sup>\$550 coinsurance maximum per script.



This is only a summary of plans. For more complete information, please refer to the Schedule of Benefits.

Plan Name	Network Tier	Office Visit (PCP/Specialist)	Deductible (Individual/Family)	Out-of-Pocket Maximum (Individual/Family)	Coinsurance	ER <sup>1</sup>	Urgent Care		Inpatient	Day Surgery	Labs	Scans: CT, MRI, PET	PT/OT/ST	Acupuncture & Chiropractic	Rx 30-Day Retail
							Freestanding	Hospital Based							
<b>PPO HSA</b>															
<b>PPO HSA Silver 3500 with Preventive Rx</b> MD0000201111, RX0000201051	In-Network	Ded then 20%	\$3,500/\$7,000	\$7,000/\$14,000	20%	IN Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	IN Ded then \$5/20%/25%/30%/30%
	Out-of-Network	Ded then 30%	\$7,000/\$14,000	\$12,000/\$24,000	30%		Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	
<b>PPO HSA Silver 4000 with Preventive Rx</b> MD0000201112, RX0000201057	In-Network	Ded then 10%	\$4,000/\$8,000	\$7,000/\$14,000	10%	IN Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	IN Ded then \$5/20%/20%/30%/30%
	Out-of-Network	Ded then 30%	\$8,000/\$16,000	\$16,000/\$32,000	30%		Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	
<b>PPO HSA Silver 5000 with Preventive Rx</b> MD0000201113, RX0000201052	In-Network	Ded then 10%	\$5,000/\$10,000	\$7,500/\$15,000	10%	IN Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	Ded then 10%	IN Ded then \$5/20%/20%/30%/30%
	Out-of-Network	Ded then 30%	\$10,000/\$20,000	\$20,000/\$40,000	30%		Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	Ded then 30%	
<b>PPO HSA Bronze 7500 with Preventive Rx</b> MD0000201114, RX0000201053	In-Network	Ded then CIF	\$7,500/\$15,000	\$7,500/\$15,000	None	IN Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	IN Ded then CIF/CIF/CIF/CIF/CIF
	Out-of-Network	Ded then 40%	\$14,000/\$28,000	\$25,000/\$50,000	40%		Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	

<sup>1</sup> Members will pay higher cost-sharing for emergency room visits that are not considered medical emergencies. Refer to your plan documents for specifics.

<sup>2</sup>\$550 coinsurance maximum per script.

# Business Rules

**Harvard Pilgrim reserves the right to change premium rates at any time before the effective date of the policy if there is a change in applicable state laws or regulations. Changes to rates after the effective date of coverage are governed by the employer agreement.**

**All 2024 small group plans are calendar year.**

## **Minimum number of participating subscribers**

75% of those employees eligible for health benefits must participate in a Harvard Pilgrim Health Care group health plan sponsored by the employer on a sole source basis and 37.5% of such eligible employees must participate in a Harvard Pilgrim Health Care group health plan sponsored by the employer if not on a sole source basis.

## **Side-by-side rule**

Accounts may offer any three plans side-by-side.

## **ElevateHealth HMO Availability**

In New Hampshire, ElevateHealth plans provide access to a limited network of high-quality and efficient providers that is smaller than Harvard Pilgrim's full provider network. This excludes the ElevateHealth Options plans, which are tiered network plans that include Harvard Pilgrim's full provider network.

## **Extraterritorial locations**

All quotes are contingent upon state eligibility requirements concerning employee residency and employer office locations. For each new group enrollment or annual renewal, employers must disclose to Harvard Pilgrim Health Care all out-of-state office locations and the state residency for each subscriber at those locations.

## **Preventive medications with a high deductible health plan**

For members with a high deductible health plan, the deductible will not apply to certain medications used for preventive care. However, a member will be required to pay the applicable copayment or coinsurance amount for the drug. The plan may change the listing of designated preventive medications from time to time. For a current list of designated preventive medications, please visit our website at [harvardpilgrim.org](https://www.harvardpilgrim.org).

## **Essential health benefit pediatric dental coverage**

Pediatric dental services are required by the Patient Protection and Affordable Care Act. Beginning in 2024, all Harvard Pilgrim small group plans in New Hampshire will include pediatric preventive dental coverage.

## **Embedded deductibles**

Embedded deductible refers to a family plan that has two deductible components, an individual deductible and a family deductible. The maximum contribution by an individual toward the family deductible is limited to the individual deductible amount and allows for the individual to receive benefits before the family component is met. When any number of members collectively meet the family deductible, services for the entire family are covered for the remainder of the year.

# Important Legal Information

## What's not covered on our NH small 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 members diagnosed with diabetes or systemic circulatory diseases
- 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
- Wigs and scalp hair prostheses when hair loss is due to male pattern baldness, female pattern baldness, or natural or premature aging
- 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
- Private duty nursing
- Vision services, except as described in the policy
- Services that are not medically necessary
- Transportation, except as outlined in your benefit handbook
- (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
- Over the counter hearing aids
- Services provided by a Doula
- Services provided under an individualized education program (IEP) delivered by school personnel, contractor, or vendor.
- Any service, supply or medication when there is a less intensive Covered Benefit or more cost-effective alternative that can be safely and effectively provided.

## Limitations for New Hampshire small group plans

- Early intervention — 40 visits per year
- Therapy services — Physical therapy, speech therapy and occupational therapy — 60 combined visits per year
- Skilled nursing facility — 100 days per year
- Inpatient rehabilitation — 100 days per year
- Routine eye exam (up to age 19) — 1 exam per year
- Routine eye exam (adult) — 1 exam every 2 years

# General Notice About Nondiscrimination and Accessibility Requirements

**Harvard Pilgrim Health Care and its affiliates as noted below (“HPHC”) comply with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity. Harvard Pilgrim Health Care does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.**

## **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 (see below for contact information).

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, sex, sexual orientation, or gender identity, 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](mailto: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 <https://ocrportal.hhs.gov/ocr/smartscreen/main.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

[hhs.gov/ocr/office/file/index.html](https://hhs.gov/ocr/office/file/index.html).

# 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).

**Português (Portuguese)** ATENÇÃO: Se você fala português, encontram-se disponíveis serviços linguísticos gratuitos. Ligue para 1-888-333-4742 (TTY: 711).

**Kreyòl Ayisyen (French Creole)** ATANSYON: Si nou palé Kreyòl Ayisyen, gen asistans 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)。

**Tiếng Việt (Vietnamese)** CHÚ Ý: Nếu quý vị nói Tiếng Việt, dịch vụ thông dịch của chúng tôi sẵn sàng phục vụ quý vị miễn phí. Gọi số 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).

**العربية (Arabic)**

انتباه: إذا أنت تتكلم اللغة العربية، خدمات المساعدة اللغوية متوفرة لك مجاناً. إتصل على 1 888-333-4742 (TTY: 711)

**ខ្មែរ (Cambodian)** សំនួរដំណឹង: បើអ្នកនិយាយភាសាខ្មែរ, យើងមានសេវាកម្មបកប្រែ ជូនលោកអ្នកដោយឥតគិតថ្លៃ។ ចូរ ទូរស័ព្ទ 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).

**हिंदी (Hindi)** ध्यान दीजिए: अगर आप हिंदी बोलते हैं तो आपके लिये भाषाकी सहायता मुफ्त में उपलब्ध है. जानकारी के लिये फोन करे. 1-888-333-4742 (TTY: 711)

**ગુજરાતી (Gujarati)** ધ્યાન આપો : જો તમે ગુજરાતી બોલતા હો તો આપને માટે ભાષાકીય સહાય તદ્દન મફત ઉપલબ્ધ છે. વિશેષ માહિતી માટે ફોન કરો. 1-888-333-4742 (TTY: 711)

**ພາສາລາວ (Lao)** ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ຄ່າມີພ້ອມໃຫ້ທ່ານ. ໂທ 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).

# Contact us

Already a member?

**855-565-9923** (Renewing your coverage)

**877-907-4742** (Benefit questions)

Not yet a member?

**844-213-1591**

TTY: **711**

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

**650 Elm Street, Floor 2, Manchester, NH 03101**

**[myserviceteam@harvardpilgrim.org](mailto:myserviceteam@harvardpilgrim.org)**

**[harvardpilgrim.org](http://harvardpilgrim.org)**

Brokers: **800-424-7285**

Employers: **800-637-4751**