2015 Hampshire College Benefit Plans

November 21, 2014
Welcome!

2015 Open Enrollment Presentation
What is new for 2015

- **Transgender Services** – Based on guidance from the DOI relating to coverage of transgender services, we will now cover certain medically necessary transgender services with prior authorization if the services meet our medical necessity guidelines.

- **Out-of-Pocket Maximum Requirement**: Prescription drug copayments will also be subject to the out-of-pocket maximum limits.

- **Employer Shared Responsibility Dependent Requirement**: Effective on January 1, 2015, dependent coverage will be extended to the end of the month for dependents turning age 26.

- **New ID Cards to be Issued**: New identification cards will be issued at renewal to all members that reflect our current vendor relationships and administrative processes. Members are encouraged to dispose of old cards and replace them with the new versions.
HMO Plan Design Review
What is an HMO

- Tufts Health Plan offers a comprehensive network of quality primary care providers (PCPs), specialists, and hospitals. The HMO plans give you access to our full network of providers.*

- You must choose a primary care physician (PCP) from our network. This physician will coordinate all of your care, including referrals to specialists.

- Emergency care services, both in and out-of-network, are covered without a referral.

- There is no out-of-pocket cost for preventive care.

* HMO members must stay in network to have benefits covered.
Advantage HMO $500 Plan

- Deductible: $500 Person/$1,000 Family:
  - Services not covered at a copay are covered at 100% after deductible is satisfied.
  - Inpatient, day surgery, physical therapy, high tech imaging, diagnostic services, chiropractic services are some examples of deductible type expenses.

- Office visit copay: $20 PCP and $30 Specialist

- Emergency Room: $100 copay

- All services accumulate towards the out of pocket maximum (deductibles, coinsurance, prescriptions and medical copayments) of $1,500 Person/$3,000 family.

- Retail RX: $100/$200 deductible, $10/$25/$35 copays & Mail order RX: $10/$25/$35 copays (no deductible for mail order).

- Routine eye exam through an Eyemed provider – 1 visit every 24 months, $20 copay applies

- Routine exams: covered in full including most preventative screenings. (Please note: some services performed during a routine office visit may be subject to the deductible).

*Rule of Thumb: Anything diagnostic in nature will be subject to the deductible.*
HMO Choice Copay Plan

- Deductible: No Deductible
- Office visit copay: $15 PCP, and $25 specialist
- Outpatient Surgery copay of $150 and Inpatient Hospitalization of $250
- Emergency Room: $75 copay
- All services accumulate towards the $1,000 Person/$2,000 Family out of pocket maximum (deductibles, coinsurance, prescriptions and medical copayments).
- Retail RX: $100/$200 deductible, $10/$20/$35 copays
- Mail order RX: $10/$20/$35 copays (no deductible for mail order)
- Routine eye exam through an Eyemed provider – 1 visit every 24 months, $15 copay applies
- Routine physical exams: covered in full
Advantage PPO Plan Design Review
What is Advantage PPO

- The *Advantage PPO* plan gives you access to our full network of providers and a national provider network through PHCS (Private Health Care Systems). To locate providers you would select the PHCS Link Network on the doctor search tool at [www.tuftshealthplan.com](http://www.tuftshealthplan.com).

- The PPO has no PCP or referral requirements and in and out of network level of benefits. You will typically pay a deductible (amount you must first pay out-of-pocket before any coverage is available) and coinsurance (a percentage of the covered medical costs you are responsible for paying) for out of network services until you reach the out of pocket maximum.

- Emergency care services, both in and out-of-network, are covered at the in-network level of benefits.

- Routine physical exams in network: covered in full including most preventative screenings. (some services performed during a routine visit may be subject to the deductible)
## 2014 Plan vs. 2015 Plan

<table>
<thead>
<tr>
<th>Benefit</th>
<th>2014 PPO Value</th>
<th>2015 ADV. PPO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In-Network</td>
<td>Out-of-Network</td>
</tr>
<tr>
<td><strong>Deductible</strong></td>
<td>N/A</td>
<td>$250/$500</td>
</tr>
<tr>
<td><strong>Out-of-Pocket Maximum</strong></td>
<td>$1,000/$2,000</td>
<td>$1,250/$2,500</td>
</tr>
<tr>
<td><strong>Preventive Services</strong></td>
<td>Covered in full</td>
<td>20% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Non-Routine Primary Care &amp; Specialist Office Visits</strong></td>
<td>$15 copayment</td>
<td>20% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Laboratory &amp; Diagnostic Services</strong></td>
<td>Covered in full</td>
<td>20% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Outpatient Surgeries</strong></td>
<td>$150 copayment</td>
<td>20% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Inpatient Hospital Services</strong></td>
<td>$250 copayment</td>
<td>20% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>High-Tech Imaging (MRIs, CT Scans, PET Scans)</strong></td>
<td>Covered in full</td>
<td>20% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Emergency Room</strong></td>
<td>$75 copayment</td>
<td>$75 copayment</td>
</tr>
<tr>
<td><strong>Rehabilitation Services (PT, ST &amp; OT)</strong></td>
<td>$15 copayment</td>
<td>20% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Prescription drugs</strong></td>
<td>$100/$200 deductible</td>
<td>Not covered</td>
</tr>
</tbody>
</table>

- 10% copayment for retail and 90-day mail order.
Making the Most of Your Plan
Reducing Your Out-of-Pocket Costs for Procedures

- **Use Free Standing Centers**

  - **Day Surgery**
    - Colonoscopy
    - Endoscopy
    - Cataract Surgery

  - **High Tech Imaging***
    - MRIs
    - Computer Tomography Scans (CT)
    - PET Scans
    - Nuclear Radiology

- If you choose to have these services in a hospital, or a hospital-affiliated medical facility, you will likely pay more out of pocket than if you receive them in a non-hospital setting.

*This isn’t a complete list of services so check your policy or plan document.*
Minimizing Your Out-of-Pocket Expense When You’re Sick or Injured

If you need immediate medical care and are unable to visit your Primary Care Provider (PCP) you have options:

<table>
<thead>
<tr>
<th>Cost</th>
<th>Convenient Care Center</th>
<th>Usage</th>
</tr>
</thead>
</table>
| $    | Retail Care Clinic     | − Diagnose and prescribe medications to treat conditions such as strep throat, pinkeye, and infections of the ears, nose and throat.  
|      |                        | − Administer routine vaccinations for flu. |
| $$$  | Urgent Care Center (Referral is required for HMO Plans) | − Diagnose and treat conditions such as head colds, ear or throat infections and minor trauma (e.g. eye injuries, cuts and burns that do not respond to basic first aid).  
Back/muscle pain, strain or sprain. |

Call 911 or go to the nearest emergency room if you think you have a medical condition that could endanger your life or limb if not treated immediately.
Managing My Plan Online and On the Go

A secure online site has been created just for your plan. Take time to sign up and you can:

✓ Check your specific plan benefits
✓ Search for a doctor in your network
✓ Find a specialist
✓ Request prescription refills
✓ Check on a claim and much more
✓ Check your deductible status (if applicable)
✓ View your ID card
Make Everyday Moments Matter

Momentum is our health and wellness program designed to help you become and stay healthier. This includes:

- Online tools and health coaching to help you live a healthy lifestyle
- Nurse to help answer your health questions
- Special programs for diabetes and heart disease, where you get support to help manage your condition
Momentum Supports You and Your Family

What happens if you have a serious condition?
Our team of nurse care managers is available to support you with one of our Care Management Programs

- **Our Chronic Condition Management Program** supports members with asthma, heart disease, and diabetes to help you manage the condition.

- **Our Complex Case Management Program** is for members (adults and children) with complex medical conditions who might benefit from working with a nurse case manager (e.g. cancer, stroke, organ transplants, cerebral palsy …)
Take a Moment to be Healthier

Lifestyle Management Program – Wellness and Prevention

- **Personal online tools** including a Personal Health Assessment (PHA)

- **Preventive care** “covered in full” for routine exams, screenings and immunizations

- **Maternity Care** includes pre-natal education and support to ensure mom and baby are healthy

- **Alternative therapy discounts** to help inspire life balance and reduce stress
Nurse Line

Nurse24\textsuperscript{SM} members can talk to a nurse 24 hours a day, seven days a week.

- Have a question about your health?
- Not sure if you should go to the doctor or ER?

*Translators are available in more than 170 languages to help you get the answers you need.*

Call 866-201-7919 today
Drive your Own
Health Momentum – Let Us Help!

<table>
<thead>
<tr>
<th>Online member</th>
<th>discounts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fitness and Exercise</strong></td>
<td>Boys &amp; Girls clubs, Curves, Appalachian Mt. Club, Fitness Network…</td>
</tr>
<tr>
<td><strong>Health and Wellness</strong></td>
<td>Mindfulness &amp; Stress Management Program, Acupuncture &amp; Massage, CVS Caremark ExtraCare Health Card, New Balance Mashpee, Choose Healthy.com</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td>Jenny Craig, Nutrisystem, Nutritional Counseling, Tufts University Health &amp; Nutritional Letter</td>
</tr>
<tr>
<td><strong>Vision</strong></td>
<td>Vision Care Network and Eyewear Discounts</td>
</tr>
</tbody>
</table>

See mytuftshealthplan.com for more details
Empower Yourself with EmpowerMe

Take advantage of EmpowerMe, our treatment cost estimator.

Get personalized cost estimates* for office visits, medical tests, lab work, surgical procedures, and more. You’ll be able to search for a doctor or service, look up treatments for a condition, and compare providers by quality, cost, and location.

EmpowerMe will help you estimate how much you’ll need to pay out-of-pocket and will be customized just for you—factoring in your specific plan benefits like any copayments, coinsurance, or deductibles that you might have. To use EmpowerMe, sign up for a secure online account at mytuftshealthplan.com.

*Estimates are generated by Castlight Health and Tufts Health Plan. The results are estimated costs, and actual costs may differ if the member receives additional services, the members’ coverage information changes, or the provider bills the service differently. The EmpowerMe tool contains important additional information and disclaimers that members should read carefully when seeking estimates.
Your Support

- **Member Services**
  800-462-0224
  Hours:
  Monday-Thursday: 8 am – 7 pm;
  Fri: 10 am – 5 pm

- Visit tuftshealthplan.com and click “Contact Us” to send an email to Member Services

- **Mental Health**
  800-208-9565
  Hours:
  Monday-Thursday: 8:30 am – 5 pm;
  Fri: 10 am – 5 pm
QUESTIONS?