Tufts Health Plan’s Advantage HMO is a deductible plan that offers comprehensive coverage at a competitive price. Like a traditional HMO, members choose a Primary Care Provider (PCP) from our extensive network throughout Massachusetts, Rhode Island, and New Hampshire for their care and specialist referrals. Advantage HMO is easy to administer and use, with no claim forms to fill out—plus it is designed to deliver value for employers and plan members alike.

The Advantage HMO features:

- A deductible that applies for inpatient hospital care, day surgery, outpatient diagnostic, and certain other services. After a member meets the deductible, services subject to the deductible are covered in full.
- Preventive/routine services covered with no member cost sharing.
- Office visits and specialist consultations are covered with a copayment for each visit. Services to diagnose, treat, or monitor health conditions are subject to the deductible.
- Emergency and urgent care coverage anywhere in the world, 24 hours a day, seven days a week with just a copayment—deductible does not apply.
- Wellness and disease-management programs to help keep members healthy while controlling costs.
- Discounts on fitness club memberships, Weight Watchers®, acupuncture, massage, and more.

How the Plan Works

Advantage HMO members select a PCP to provide and coordinate his or her care. At each office visit, a member presents his or her ID card and pays the applicable copayment. Deductible and coinsurance may apply. Once members reach the out-of-pocket maximum, they are covered at 100%.

For care from a specialist, a member’s selected PCP will refer the member to a specialist within our network. A member is required to obtain a referral in order to receive coverage for the specialist’s services.

After a member satisfies the deductible, services that were subject to the deductible are covered in full.

Pharmacy Coverage

If your plan includes the optional pharmacy benefit, members will pay a copayment for each prescription, according to our three-tier pharmacy copayment program:

- **Tier 1:** Lowest copayment; includes most generic drugs
- **Tier 2:** Middle copayment; includes many brand-name drugs
- **Tier 3:** Highest copayment; includes the most costly covered brand-name drugs not included in other tiers.

*continued on reverse*
### Outpatient services not subject to deductible (copayment may apply)

- Routine physical and OB/Gyn exams including most preventive screenings
- Preventive mammograms and Pap smears
- Sutures in office
- Blood draws (act of drawing the blood only)
- Substance abuse treatment and detoxification
- Mental health care
- Preventive immunizations (act of giving the shot)
- Outpatient maternity care
- Specialist consultations
- Preventive blood sugar and cholesterol screenings

### Services subject to deductible

#### Diagnostic X-rays and lab tests

- Urinalysis*
- Pregnancy test
- Throat culture
- Allergy test
- X-ray
- Ultrasound
- Upper and lower GI
- Cardiac stress test
- EEG
- EKG
- CAT scan
- PET scan
- Diagnostic mammograms and Pap smears
- MRI
- Blood work to diagnose or monitor a condition
- Diagnostic blood sugar and cholesterol screenings

#### Inpatient hospital care and surgery (may also require a copayment)

- Day surgery
- Acute care for illness, injury, and maternity services

#### Treatments/Procedures

- Setting of bones/casts
- Spinal manipulation
- Speech therapy
- Short-term occupational and physical therapy
- Chemotherapy
- Radiation therapy
- Injectons
- Dialysis
- Vasectomy
- Infertility/impotence
- Cortisone injections
- Trigger point therapy
- Swallow studies
- Sleep studies
- Colonoscopy with surgical intervention
- Sigmoidoscopy

#### Other Services

- Visiting nurse

### Emergency room care is covered with just a copayment at any hospital.

*When not part of routine examination

Note: This a summary of the plan features. Please refer to the benefit document for a detailed explanation of coverage. If there is a difference between the information in this document and the benefit document, the terms of the benefit document will govern.

### Superior Customer Service

Our Member Services department offers your employees a staff of highly trained professionals. One phone call is all it takes to reach our Member Specialists. They are available to answer members’ questions about the plan and their benefits. We also offer language-translation services and TTY capabilities as needed.