

A woman with curly hair and a young girl are smiling and tending to plants in a garden. The woman is wearing a light blue sweater and the girl is wearing a grey tank top. They are surrounded by green foliage and purple flowers. The scene is captured in a circular frame.

hpi[®]

The Choice
is Yours.

Your Medical Plan Options for 2024

HPI and Boston Medical Center Health System working together for you and your family

Boston Medical Center
HEALTH SYSTEM

It's good to work together.

Health Plans, Inc. (HPI) is proud to be Boston Medical Center Health System's (BMCHS) partner for health care coverage.

Who is HPI?

We manage employee health benefit plans for employers who want the accessibility of Harvard Pilgrim's high-quality provider network with a greater level of administrative flexibility to help minimize health care costs.

HPI helps to ensure you and your family receive the right care, at the right time, in the place that's best for you—at the most affordable cost.

Your 2024 Medical Plan Options

Please read through this brochure for important highlights about your medical plan options:

- BMC Select
- BMC Tiered HMO
- HPHC (Harvard Pilgrim Health Care) PPO

Please review this brochure with other plan information, including the Schedules of Benefits in the Summary Plan Description, Summaries of Benefits and Coverage and the Boston Medical Center Medical Plan Comparison chart available in the BMCHS HR Service Center and at healthplansinc.com/BMC.

Once you have enrolled in a plan, you will receive an HPI member ID card. If you elect family coverage, your card will include the names of all your covered family members, and you will receive a card for each covered member over age 16. You may also download a temporary card online at healthplansinc.com/BMC. If you will be seeing a new doctor, it's a good idea to schedule a first visit once your coverage is effective.



If you have any questions, we're here to help.

Visit us online at healthplansinc.com/BMC or give us a call at **844-926-2262**.

What you need to know:

BMC Select

BMC Select is offered at no weekly cost to employees and is a limited network plan: You can see BMC- and BU-affiliated providers, and most providers affiliated with the Boston HealthNet Community Health Centers. All office visits are covered in full after you pay a \$7 copayment, and other services including hospitalization at BMC, are provided at no cost.

Which providers and hospitals can I visit?

You can visit BMC and most providers affiliated with the Boston HealthNet Community Health Centers. You'll go to BMC for all of your inpatient care; only emergency care is covered at other hospitals. Other than emergency care, there's no coverage for services you receive outside the BMC Select network. The BMC Select network includes a limited number of auxiliary providers for chiropractic, behavioral health, dialysis, preventive pediatric dental services, and urgent care at selected locations. Use the BMC Select online directory at healthplansinc.com/BMC to find participating providers.

Do I need a primary care provider (PCP)?

Yes. Please make sure your PCP participates in the BMC Select network and has admitting privileges at BMC by checking the BMC Select online directory. You also may call HPI at **844-926-2262**.

If you do not have a PCP when you enroll, HPI will assign one to you. You can change your BMC Select PCP for any reason by setting up a secure *My Plan* online member account at healthplansinc.com/BMC after you become enrolled in the plan. You also may call HPI at **844-926-2262**.

Can I continue to see my current PCP?

Yes, if your current PCP belongs to the BMC Select network.

What if I need care outside the BMC Select network?

While you must have your PCP coordinate your care, you can see any specialist within the BMC network. In the rare event that a BMC specialist does not have the expertise to provide the care you need, you may ask for an exception to see a provider outside the BMC Select network.

Can I go to providers and hospitals that do not belong to the BMC Select network?

No. Except in a medical emergency, or if you are granted an exception as noted in the previous question, if you go to a provider that does not belong to the BMC Select network or to a hospital other than BMC, you will be responsible for paying all charges (unless you are admitted through the emergency room).

BMC Select cost-sharing highlights	
PCP and specialist	\$7
Mental health/substance use office visits	\$7
Same-day care options (Doctor On Demand, CVS MinuteClinic, stand-alone urgent care centers)	\$7
Emergency room	\$150 (waived if admitted)
Hospital inpatient	No charge

The BMC Select Schedule of Benefits in the Summary Plan Description (SPD) has more details on benefits and cost sharing. It governs in the event that the information in this document is different.

Boston HealthNet Community Health Centers

Some providers in the Boston HealthNet Community Health Centers are part of the BMC Select network. Be sure to confirm that any providers you see at these locations are part of the BMC Select network by calling 844-926-2262 prior to your visit.

Attleboro

- Manet Community Health Center

Dorchester

- Codman Square Health Center
- DotHouse Health
- Upham's Corner Health Center
- Geiger-Gibson Community Health Center
- Neponset Health Center

East Boston

- East Boston Neighborhood Health Center

Hull

- Manet Community Health Center

Mattapan

- Mattapan Community Health Center

Plymouth

- Harbor Health

Quincy

- Manet Community Health Center (5 locations)

Roslindale

- Greater Roslindale Medical and Dental Center

Roxbury

- Dimock Center, Whittier Street Health Center

South Boston

- South Boston Community Health Center (4 locations)

South End

- South End Community Health Center
- Boston Community Pediatrics*

Taunton

- Manet Community Health Center

*standalone community health center

What you need to know:

BMC Tiered HMO

The **BMC Tiered HMO** places hospitals that belong to HPHC's network into two tiers, Core Network and High Cost Facilities. You'll pay a higher copay for inpatient hospitalizations, outpatient surgeries, and high-tech imaging such as MRIs and CT scans when performed at a high cost network hospital.

The high cost network for 2024 is Boston Children's Hospital, Brigham and Women's Hospital, Cape Cod Hospital, Mass General Hospital, and UMass Memorial Medical Center.

BMC Tiered HMO cost-sharing highlights		
	Tier 1 Core Network All HPHC providers not listed in Tier 2, including BMC providers	Tier 2 High Cost Network Boston Children's Hospital Brigham and Women's Hospital Cape Cod Hospital Mass General Hospital UMass Memorial Medical Center
Annual deductible	None	
PCP visits	\$25	
Specialist visits	\$30	
Mental health/substance use office visits	\$7 group \$7 individual	
Same-day care options (Doctor On Demand, CVS MinuteClinic, stand-alone urgent care centers)	\$7	
Emergency room	\$150 (waived if admitted)	
Hospital inpatient	\$250	\$1,000
Outpatient surgery	\$100	\$650
High-End Radiology Imaging	\$100 hospital-based \$50 free-standing	\$400

• The BMC Tiered HMO Schedule of Benefits in the Summary Plan Description (SPD) has more details on benefits and cost sharing. It governs in the event that the information in this document is different.

• See the BMC Tiered HMO High-End Radiology Imaging directory for a listing of lower cost facilities.

Both documents may be viewed at healthplansinc.com/BMC.

Do I need a primary care provider (PCP)?

Yes. You must have a PCP provide your care (except in emergencies) and provide a referral for most kinds of specialty care for the plan to provide coverage for services.

How can I find a new provider or find out which tier a hospital is in?

You can use the BMC Tiered HMO online directory at healthplansinc.com/BMC or call HPI at **844-926-2262**.

Do I need referrals to visit specialists?

Yes, you need your PCP's referral for most visits to specialists. Referrals are not necessary for some services, such as routine eye exams or most gynecological care.

What you need to know:

HPHC PPO

The HPHC PPO features in-network coverage for access to providers and hospitals inside HPHC's network and out-of-network coverage for access to providers and hospitals outside of HPHC's network.

Do I need a primary care provider (PCP)?

No, although we encourage you to have one to help coordinate your care.

How does in-network coverage work?

You have in-network coverage when you receive care for covered services from HPHC's participating providers and hospitals. Your out-of-pocket costs are lower when you visit a provider in the HPHC network. Hospitals and providers in the Harvard Pilgrim network (in New England) and the UnitedHealthcare Options network (outside of New England), are in-network for members on the HPHC PPO.

How does out-of-network coverage work?

You have out-of-network coverage when you receive covered services from providers and hospitals that do not belong to HPHC's network. Non-participating providers may bill you for the differences between their charges and the amount HPHC pays for covered services. This is called Balance Billing and this amount does not apply to your out-of-network out-of-pocket maximum.

Do I need referrals to go to specialists and hospitals?

No. Just keep in mind that when you're going to be admitted to the hospital, services are covered according to which providers you use.

For example, if a non-participating doctor performs your surgery at a participating hospital, you have out-of-network coverage for the doctor's services and in-network coverage for the hospital's services. Except in an emergency, you must notify HPHC in advance of a hospital admission when non-participating providers and hospitals are involved.

Please check the PPO provider directory at healthplansinc.com/BMC, or call HPI Member Services for the names of participating providers and hospitals.

Additionally, please call HPI to verify if a service requires prior authorization

How do the deductibles work?

The HPHC PPO includes separate in-network and out-of-network deductibles. Except for in-network primary care/specialist visits and some diagnostic tests, you must pay for most other services until you satisfy the required deductible amounts. After you meet the deductible, you will then be responsible for a copayment or coinsurance, depending on the type of service you receive.

HPHC PPO cost-sharing highlights		
	In-network	Out-of-network
Annual deductible	\$1,500 individual \$3,000 family	\$2,000 individual \$5,000 family
Primary care/specialist visits	\$50/\$65	30% coinsurance after deductible
Same-day care options (Doctor On Demand, CVS MinuteClinic, stand-alone urgent care centers)		\$7
Emergency room		\$150
Hospital inpatient	20% coinsurance after deductible	30% coinsurance after deductible

The PPO Schedule of Benefits in the Summary Plan Description (SPD) has more details on benefits and cost sharing. It governs in the event that the information in this document is different.

For all plans

Emergency Care

Your plan covers all medical emergencies (e.g., heart attack, stroke, shock, major blood loss, choking, severe head injury, loss of consciousness, seizures or convulsions). Just go to the nearest emergency facility or call 911 or another local emergency number. If you are hospitalized, call your PCP and HPI within 48 hours, or as soon as you can (or ask someone to do this for you).

Urgent/Sick Care

For non-emergency care (like a sore throat, earache or flu), you should call your doctor's office and ask for a same-day appointment. If your doctor is unavailable, you may be directed to a covering clinician or an urgent care facility. These visits cost a \$7 copay, regardless of which medical plan you choose. Visit healthplansinc.com/BMC for a list of Same Day Care providers where your care will be covered.

Emergency and Sick Care While Traveling

In addition to emergencies, if you become sick or injured outside of the HPHC service area, we will cover any unforeseen care you may need—whether you're in another part of the country or another part of the world. Call HPI Member Services for payment and claims information at **844-926-2262**.

Dependent Coverage Requirements

Please contact HPI Member Services:

- If you have a disabled child over the age of 26 on your medical plan, as recertification may be required. A reminder that a dependent child must be deemed disabled by HPI while actively enrolled prior to turning age 26.
- To register your dependent child (up to age 26) for coverage if he or she is living out of the medical plan's Enrollment Area and learn how he or she will be covered on your medical plan. This step is required only for BMC Select and BMC Tiered HMO members.

Medication Guidance

WithMe Health offers personalized prescription assistance to plan members. This virtual resource is available 24/7 and provides guidance, addresses side effects, and reviews your medications to help improve your health outcomes and lower the cost of your prescriptions. A WithMe "guide" may contact you to discuss your prescriptions. Download the "WithMe Health" app to get started.

Lyra Health

Lyra Health provides access to mental health coaching, therapy, and medication management via live video, messaging, phone, or in-person care. Additional mental health care through self-guided exercises are also available. To get started, visit bmc.lyrahealth.com and use Learning Code "#bmchs123".



For all plans



Enjoy great prescription savings with BMC Pharmacies and Express Scripts

If you need prescriptions, you can purchase them at the BMC Pharmacies or through pharmacies that belong to the Express Scripts network. You can save 60% off your copayments when you get your prescriptions through the BMC Pharmacies including the home delivery pharmacy, Cornerstone.

30-day supply				
	Rx Tier 1	Rx Tier 2	Rx Tier 3	Rx Tier 4
BMC Pharmacy	\$7	\$15	\$25	\$30
Express Scripts Pharmacies	\$20	\$40	\$80	20%, up to \$250

90-day supply				
	Rx Tier 1	Rx Tier 2	Rx Tier 3	Rx Tier 4
BMC Pharmacy/BMC Mail Order	\$14	\$30	\$75	\$90
Express Scripts Mail Order	\$40	\$80	\$240	20%, up to \$750

Which plan is right for you?

	BMC Select Plan	BMC Tiered HMO	HPHC PPO
Choose this plan if you would prefer to...	Pay no premium and will be sure to use only BMC network providers and BMC for hospital care (unless an emergency or noted exception)	Pay a higher premium to see providers and hospitals in the HPHC network	Pay a higher premium and pay deductibles to see providers and hospitals inside and outside the BMC and HPHC networks
Do I need a PCP?	Yes	Yes	No
Do I need referrals from my PCP to see specialists?	No	Yes	No
Which providers and hospitals can I visit?	BMC and some providers affiliated with BU and the Boston HealthNet Community Health Centers	HPHC	HPHC <i>plus</i> Providers and hospitals outside the HPHC network
Office visit copayments	\$7	\$25 primary care \$30 specialists	In-network: \$50 primary care/\$65 specialists Deductible and coinsurance in-network and out-of-network

Save time, save money



Same-day care options for convenience and urgent care needs

If your primary care provider isn't available and you or one of your covered family members has a minor illness or injury that needs to be treated quickly (e.g., ear infection, rash, sprained ankle), you have the option of using Doctor On Demand or going to a convenience care clinic or an urgent care clinic* instead of the emergency room (ER). Your wait may be shorter, and your copay will be \$7 instead of the \$150 ER copay.

Visit healthplansinc.com/BMC for a list of convenience and urgent care clinic locations.

**A freestanding facility not at a hospital.*



Medication savings at the BMC pharmacies

When you fill a prescription at one of the BMC pharmacies, you can save 60% off the copayment compared to having it filled at a retail pharmacy. For example, a 30-day supply of a Tier 2 drug would be just \$15 at a BMC pharmacy instead of \$40 at a retail pharmacy.

Email DG-EmployeePharmacyServices@bmc.org or stop by a BMC pharmacy to transfer a current prescription, pick up a 30-day or a 90-day supply, purchase low-cost over-the-counter medications or ask a pharmacist questions about medications.



Save money with discounts

Could you use a new pair of sneakers? What about eyeglasses? Want to get started on a weight loss plan? Want to get reimbursement for your health and fitness club membership? Count on HPHC and HPI to help you save money on products and services that can help you live a healthy life. To learn more, visit healthplansinc.com/BMC.



Contact Us.

HPI Member Services:
844-926-2262

Visit us online:
healthplansinc.com/BMC

Mail claims to:
PO Box 5199, Westborough, MA 01581

For pharmacy questions, call Express Scripts:
877-861-0376

Visit Express Scripts online:
www.express-scripts.com

