

Harvard Pilgrim PPO Plans – *Massachusetts*

The Harvard Pilgrim PPO plans are among the most flexible options you can choose for your health care needs.

- ▶ You can receive care from virtually any doctor or hospital — in Massachusetts or across the nation.
- ▶ You are not required to have a primary care physician or get referrals for care.
- ▶ You can receive in-network services from thousands of providers that belong to Harvard Pilgrim's network—or out-of-network services from those that do not.
- ▶ When you travel and need unforeseen care, your coverage travels with you.

In-network services

In-network services are covered services you receive from Harvard Pilgrim **participating providers**. Typically, receiving in-network services means **lower out-of-pocket costs**. Many services are covered after you pay a **copayment** at the doctor's office. Some plans may require you to pay **coinsurance** for certain covered services that you receive inside our network.

Thousands of doctors participate in the Harvard Pilgrim provider network — so it's easy for you to get the care you need. To find a participating doctor or hospital:

- use our online directory (updated weekly) at www.harvardpilgrim.org
- call one of our representatives (See "Questions?" at the end of this document for phone numbers.)
- use our printed *Provider Directory* (Your employer may have a copy, or you can call Harvard Pilgrim to request one.)

Outside of Massachusetts, Maine, New Hampshire and Rhode Island, Harvard Pilgrim participating providers include the Private Healthcare Systems (PHCS) network of nearly 540,000 providers and 4,000 facilities across the United States.

This means you can get care from a PHCS provider outside the Harvard Pilgrim service area and still receive in-network coverage from a participating provider.¹

Out-of-network services

Out-of-network services are covered services you receive from **non-participating providers**.

Receiving out-of-network services typically means **higher out-of-pocket costs**. All services you receive outside our network are subject to a yearly **deductible**. This means you may be required to pay all or part of a bill for services, until you have paid your total deductible amount. After you have paid your total deductible amount for the year, you typically pay **coinsurance** for services you receive outside our network. You may need to submit claim forms to Harvard Pilgrim to be reimbursed for covered services. In addition, a non-participating provider may bill you for the difference between his or her charges and the amount Harvard Pilgrim pays for that service.



¹ Please note: PHCS providers are not participating providers for behavioral health services. If your employer offers behavioral health coverage through Harvard Pilgrim, and you live or are traveling outside of Massachusetts, Maine, New Hampshire or Rhode Island, please call (888) 777-4742 for the names of participating behavioral health providers near you.

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GLOSSARY

PARTICIPATING PROVIDERS: Doctors, hospitals and other medical professionals that are contracted to care for our members and belong to Harvard Pilgrim's provider network.

NON-PARTICIPATING PROVIDERS: Doctors, hospitals and other medical professionals that do not belong to Harvard Pilgrim's provider network.

COPAYMENT: A dollar amount you pay for in-network services. The copayment is due at the time of the visit or when the provider bills you. Copayments are always fixed dollar amounts.

DEDUCTIBLE: A dollar amount you must pay each calendar year before services are covered under your health plan.

COINSURANCE: A percentage of the cost of covered services that you must pay, where applicable.

See the *Schedule of Benefits* or *Summary of Benefits* for more detailed information on copayments, deductibles and coinsurance, and the services to which they apply.

Going to the hospital

When you're going to be admitted to the hospital, services are covered according to what combination of providers you use. Suppose that you are being sent to a participating hospital by a non-participating doctor. In this case your hospital visit is covered at the in-network benefit level, and the doctor's services are covered at the out-of-network benefit level. You must notify Harvard Pilgrim in advance of a hospital admission when non-participating providers are involved.

² PHCS providers are not participating providers for behavioral health services. Please see the note on the front.

You're covered when you're traveling . . .

If you seek care for covered services while traveling, they will be covered at the in-network benefit level when you visit participating providers, and at the out-of-network level when you visit non-participating providers. Services you receive from PHCS providers will be covered at the in-network benefit level.² Emergency services (see below) are covered at the in-network benefit level as well.

And in an emergency

Harvard Pilgrim covers all medical emergencies (e.g., heart attack, stroke, choking, loss of consciousness or seizures) at the in-network benefit level. Just go to the nearest emergency facility or call 911 or another local emergency number.

If you are hospitalized, you must call Harvard Pilgrim within 48 hours, or as soon as you can (or ask someone to do this for you).

Stay healthy and save money

Enjoy fitness, nutrition and eyewear discounts with Harvard Pilgrim's *Your Member Savings* program. Visit www.harvardpilgrim.org/savings for a complete list of program offerings and details.

Questions?

If you're already a member, call Member Services with questions at **(888) 333-4742**. For TTY service, call (800) 637-8257. Representatives are available weekdays from 8:00 a.m. – 5:30 p.m., and until 7:30 p.m. on Monday and Wednesday evenings.

If you're not yet a member, call **(800) 848-9995** on weekdays from 8:30 a.m. – 5:00 p.m.

To learn more about Harvard Pilgrim in general, visit www.harvardpilgrim.org.

