

# Tufts Health Plan Advantage HMO Select

## A Limited Provider Network Option

*Quality Coverage at a Lower Premium Cost*

### Your Advantage HMO Select Plan

Tufts Health Plan members have access to treatment within a Select Network—a limited network of 5,400 providers and 27 hospitals in Eastern Massachusetts and Worcester County. As with any HMO plan, you must select your primary care physician from the Tufts Health Plan Select Network.

With Tufts Health Plan Advantage HMO Select, many of your health care services are fully covered, or require only a copayment. Some services are subject to a deductible before your coverage applies.

### Highlights of the Plan

- Routine office visits are covered in full. Specialist consultations are covered with just a copayment. A deductible does not apply to either of these types of visits.
- Emergency room care is covered subject to the plan's deductible.\*
- A deductible applies to inpatient hospital care, day surgery, outpatient diagnostic services, and certain other health care services. Once you meet the deductible, the plan covers 100% of covered services that are subject to the deductible.

### Emergency Medical Care Is Covered

Emergency medical care is covered subject to the plan's deductible, whether or not you receive care from a provider in our network. Members do not need PCP referrals for emergency care in an emergency room or a physician's office.

In the event of a medical emergency, always seek care by going to the nearest medical facility or, if needed, call 911.

**Please note:** If you receive care in an emergency room but are not admitted as an inpatient, you or someone acting on your behalf should notify your PCP or Tufts Health Plan within 48 hours after you receive care.

### Making the Most of Your Plan

Tufts Health Plan is a national leader in innovation, patient safety, and quality. As a Tufts Health Plan member, you will have access to discounts, programs, and services that will help you reach your wellness goals, including:

- Savings on nutritional counseling, acupuncture, massage therapy, and health and wellness education
- Membership discounts at some 80 participating fitness clubs, as well as Weight Watchers®, Curves®, and the GlobalFit nationwide fitness network
- A free home visit for you and your baby following delivery or adoption
- Programs to help you manage your health
- A courteous, professional member services team ready to help with questions related to your Tufts Health Plan coverage

**Limited Network:** This plan provides access to a network that is smaller than Tufts Health Plan's standard network. In this plan, members have access to network benefits only from the providers in the Select Network. Please consult the Select Network provider directory by visiting the provider search tool at [tuftshealthplan.com](http://tuftshealthplan.com) and click on Find a Doctor to determine the providers in the Select Limited Provider Network. If you need a paper copy of the provider directory, please contact member services.

### Questions? Just Ask Us.

If you have questions, a member specialist is ready to help. Call us toll free at 800-462-0224. You can also obtain information about your Tufts Health Plan benefits, choose a Select Network physician, select a qualifying fitness center, and perform many other functions on our website, [tuftshealthplan.com](http://tuftshealthplan.com).

\* This information is effective on start or renewal for plans beginning January 1, 2012.

Tufts Health Plan's commercial Health Maintenance Organization/Point-of-Service Option (HMO/POS) combined product has been ranked No. 2 in the nation by the National Committee for Quality Assurance (NCQA).\*

\* For commercial/private plans, NCQA's Private Health Insurance Plan Rankings, 2011-2012. Visit [ncqa.org](http://ncqa.org) to see the list.

## Outpatient services not subject to deductible (copayment may apply to non-preventive care)

- ✓ 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

### Hospital care and surgery – Outpatient and Inpatient (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
- ✓ Injections
- ✓ 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 at any hospital subject to the plan's deductible.**

\*When not part of routine examination

\*\*Deductible and copayment do not apply to screening for colon or colorectal cancer in the absence of symptoms.

Note: This is 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.