

From the President & CEO, Tom Croswell

Dear Valued Client,

As I near the end of my first year as president and CEO of Tufts Health Plan, I'd like to offer a few thoughts on the importance of working together. Delivering high-quality health care that truly meets the needs of your employees requires a collaborative effort between our plan, our providers, and our clients.

Health care is always changing. However, through effective partnerships, we can adjust to these changes, take advantage of new opportunities and provide the services your employees need.

From experience, we know that strong alliances deliver quality results. With that in mind, I'm proud to report that, once again, Tufts Health Plan earned high marks from the National Committee for Quality and Assurance (NCQA). For 2016, we are the only plan in the country to receive a 5 out of 5 rating for both our HMO/POS and PPO Commercial plans.* Our high ratings were driven by strong member service and provider collaboration.

In this edition of **Employer Update**, you'll see many examples of collaboration at work. This issue includes articles on:

- ▶ Our Business Diversity program, which focuses on enhancing the member experience for our diverse populations
- ▶ How our care management programs deliver more value for your health care dollar
- ▶ Plan updates, as well as new state and federal requirements
- ▶ How we work to improve the health and well-being of the communities we serve

In the spirit of collaboration, we look forward to working closely with you in the year ahead. Our team at Tufts Health Plan wishes you and your team a joyous holiday season and a happy and healthy new year. Thank you for your continued business and the opportunity to serve you.

Sincerely,

Tom Croswell

*NCQA's Private Health Insurance Plan Ratings 2016-2017

Enhancing Member Experience for Diverse Communities

The demographics of our region are changing at a rapid pace. As a health plan, we must respond appropriately to fulfill our mission, which is to improve the health and wellness of the diverse communities we serve.

In Suffolk County, Mass., for example, more than half of the residents (52%) now identify themselves as ethnically diverse. Similarly, Worcester County, Mass., and Providence County, R.I., are both growing as "majority minority" communities. Across the region, businesses large and small are employing an increasingly diverse workforce. Research also demonstrates that health disparities exist within these communities.

In response, we have established a company-wide Business Diversity program to strengthen and enhance the member experience for our diverse populations. Key areas of focus include the following:

- ▶ Supporting diverse communities through corporate giving and volunteerism, such as the Road to Wellness 5K and the Tufts Health Plan 10K for Women
- ▶ Recruiting and developing a diverse workforce through mentoring programs and cultural-competence training
- ▶ Providing opportunities for certified diverse suppliers to help us deliver innovative solutions
- ▶ Establishing culturally oriented clinical programs to address health disparities, such as diabetes
- ▶ Collaborating with providers who have expertise in serving diverse patients, such as Fenway Health for LGBT health
- ▶ Improving the member experience with multilingual offerings

Here's a closer look at how our Business Diversity program is helping to improve the service we deliver:

- ▶ Over the past year, we've conducted training to advance our workforce's understanding of cultural competency. The training includes concepts in cross-cultural interaction as well as specialized topics, such as transgender health and mental health. In fact, more than 300 of our clinical and behavioral health care managers have been trained by the Fenway Health Center on transgender health.

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MEMBER EXPERIENCE

Diverse Communities — continued from page 1

- ▶ Over the past three years, we've invested more than \$15 million in diverse suppliers, and the figure is growing. Our new online registration process helps engage diverse suppliers from a variety of fields, including consulting, professional services, IT, hardware and software, printing, promotional materials, temporary staffing, building services, and translation services. (Please visit tuftshealthplan.com/supplierdiversity for the registration form and information about our supplier inclusion program.)
- ▶ We were named "Corporate Partner of the Year" by El Mundo Boston, recognizing our impact on the Latino community in 2016.
- ▶ We received the 2016 "Excellence in Diversity Award" from the Providence Business News for our efforts to promote diversity, and, in particular, to support diverse communities in Rhode Island.



Tufts Health Plan's Juan Lopera, vice president of Business Diversity, right, accepting the award from Donna Rofino, PBN Marketing & Events Manager 11/2016

PLAN UPDATES

Specialty Pharmacy and Infusion Services Consolidated with CVS Specialty™

As part of our ongoing efforts to control prescription drug costs, we have consolidated our specialty pharmacy and specialty infusion services with CVS Specialty. The change became effective with prescription fill dates on or after November 18, 2016.

The change also provides administrative simplicity and program enhancements for our members, such as "Specialty Connect," which allows members to have specialty medications shipped to their home or to a local CVS retail pharmacy for pickup.

CVS Specialty replaces Accredo® Health Group for all commercial plans in Massachusetts and New Hampshire, including Tufts Health Freedom Plan. Members in Rhode Island are not affected by this change. They may use CVS Specialty Pharmacy mail order if they choose, but are not required to do so.

Members in Massachusetts and New Hampshire will need to fill their specialty pharmacy medications through CVS Specialty Pharmacy mail order exclusively. Please note that for infertility specialty medications, the change to CVS Specialty Pharmacy mail order will become effective on January 1, 2017. As of January 1, members will no longer be able to obtain infertility specialty medications through Village Pharmacy, Freedom Drug, or Walgreen's Specialty Pharmacy.

Members of Our Out-of-Area PPO Plan Enjoy Greater Provider Access

Members of our Out-of-Area PPO Plan now have greater access to network-based care — at the in-network level of benefits — when they are outside the Tufts Health Plan service area (Massachusetts, Rhode Island and New Hampshire). That's because the Cigna PPO Network has replaced the PHCS MultiPlan Network as the out-of-area network for employer groups based in Massachusetts and Rhode Island.

This network transition supports our continuous efforts to give employer groups and their employees the greatest possible access to high-quality doctors, hospitals, and other health care providers. The Cigna PPO Network includes more than 800,000 doctors and 6,000 hospitals nationwide, from teaching hospitals to hospitals right in your own community. All Cigna PPO Network providers are selected for their quality and breadth of services.

Members can also seek services outside of the Cigna PPO Network and be covered at the out-of-network level of benefits. However, members will save money when they choose an in-network provider.

Members who seek services in Massachusetts, New Hampshire or Rhode Island must use the Tufts Health Plan provider network to receive the in-network level of benefits. With the Tufts Health Plan provider network, members have access to more than 100 hospitals and 49,000 providers across all three states.

We are confident that your employees and their families will appreciate the expanded choice of quality health care professionals. If you have any questions about the Cigna PPO Network transition, please reach out to your Account Manager.

Prescription Drug Coverage Changes Effective January 1, 2017

We regularly review our prescription medication coverage to offer members a pharmacy benefit that is clinically appropriate and cost-effective. Based on this review and marketplace trends, we make occasional adjustments to balance cost and access to prescription medications.

The changes in prescription drug coverage listed below are effective on January 1, 2017, and apply to members of both Tufts Health Plan and Tufts Health Freedom Plan. Impacted members were notified of the changes by mail in early November 2016.

- ▶ The brand-name **Pyridium** and its generic version will no longer be covered. This medication is not FDA-approved and is available over the counter.
- ▶ **Antidepressants** — The following brand names will no longer be covered for members of large-group employers: Cymbalta, Lexapro, Remeron, Remeron Solutab, and Venlafaxine OSM 24-hour ER tablets. (These medications are already not covered for members of small-group employers.) The generic versions of these medications will remain covered for large and small groups.
 - Fluoxetine tablets will have a new Prior Authorization (PA) program, and will move from Tier 1 to Tier 2. Fluoxetine capsules will remain covered at Tier 1.
- ▶ **Oral isotretinoin (used to treat severe acne)** – The following brand names will move to non-covered: Absorica, Amnesteem, Myorisan, and Zenatane. Claravis will remain covered at Tier 1.
- ▶ **Oral antidiabetics** – The generic metformin ER (brand names Fortamet and Glumetza) will have a new PA program and will move to Tier 3. The generic metformin ER (brand-name Glucophage XL) will remain covered at Tier 1.
- ▶ **Brand anticoagulants** – The brand-names Pradaxa and Savaysa are moving to non-covered. The brand-names Eliquis and Xarelto will remain covered at Tier 2.
- ▶ **Respiratory inhalers (anticholinergics)** – The brand-name Tudorza will move to non-covered. The brand-name Spiriva will remain covered at Tier 2. Current Quantity Limits (QLs) on these medications will remain.
- ▶ **Oral erectile dysfunction** – The following brand-names will move to non-covered: Cialis 2.5, 10 and 20 mg; Levitra; Staxyn; and Stendra. Viagra will move down to Tier 2; Cialis 5 mg will remain covered at Tier 3. Current QLs on all of these medications will remain.

- ▶ **Immunobiologics** – The following brand-names will become the preferred immunobiologics for inflammatory conditions covered under the pharmacy benefit: Enbrel, Humira, Simponi, and Stelara. The brand-names Remicade and Simponi Aria will become the preferred immunobiologics for inflammatory conditions covered under the medical benefit.
 - Non-preferred immunobiologics will remain covered, but Step Therapy guidelines through at least two preferred products, when indicated, will be applied. Non-preferred agents include Actemra, Cimzia, Cosentyx, Entyvio, Kineret, Orencia, Otezla, Taltz, and Xeljanz/Xeljanz XR. There is no change in current coverage for these agents — this is only a change in the Prior Authorization (PA) criteria. The new PA criteria will only apply to members who are starting on one of these medications for the first time.

Non-Generic Prescription Drug Coverage (except for RI small groups)

In 2017, Tufts Health Plan is introducing a new generic low-cost copay program as a buy-up for all of our large-group plans. The program will also be standard with all our small-group plans except for Premier.

Under this program, a subset of generic drugs will switch to a new lower copay of \$5. Generic drugs not on this list will continue to require the higher Tier 1 copay. The 2017 formulary was displayed on our public website as of November 1, 2016, with indicators if a drug falls under this low-cost generic program.

Drugs covered under our Medical benefit, including certain injectable, infused or inhaled medications, will require a \$50 copay after the deductible has been met for deductible plans. For copay plans, the Medical drug will require a \$50 copay instead of being covered in full.

Oral chemotherapy drugs will require a \$50 copay per fill upon renewal. Please note that this class of drugs is sometimes used to treat conditions other than cancer. This change applies to all uses.

Tufts Health Plan has also made changes to prescription drug copays for some of our plans. We have removed the Generic Preferred Program and Mandatory Mail Order requirement for maintenance medications that had previously been a part of some plans. Employers are encouraged to recommend that their employees review the full Massachusetts large-group drug formulary to familiarize themselves with all tier and other pharmacy changes. This information is available in the “Pharmacy” section at tuftshealthplan.com.

PLAN UPDATES

Copayments for Medical Plans

A standard copay has been added for services such as inpatient care, outpatient care and high-tech imaging procedures (MRI, CAT scan, PET scan and nuclear imaging). For ambulance/ER transport services, a standard \$50 copay applies. For deductible plans, these copays will apply after the deductible has been met. These copays are required for small-group employers; large-group employers should contact their Account Manager if they wish to opt out. Please check your renewal documents for details.

Durable Medical Equipment (DME)

Insulin pumps may now be tracked under our DME benefit. DME is subject to any plan deductible that applies, and then 30% coinsurance. If the plan does not have a deductible, DME is subject to 30% coinsurance. (Please check your renewal documents or contact your Account Manager for details.)

Diagnostic Tests and Laboratory Tests

Currently, diagnostic tests (low-tech imaging procedures such as an X-ray) and laboratory tests are tracked together as one benefit with the same cost share. In 2017, these services may have different cost shares under the same plan. (Please check your renewal documents or contact your Account Manager for details.)

Coverage of Habilitative Services for PT, OT and ST

Effective for dates of service on or after January 1, 2017, Tufts Health Plan may cover habilitative services for physical, occupational and speech therapies with limits that are separate from the category of rehabilitative services. Habilitative services are services that help members keep, learn or improve skills and functioning for daily living. An example of a habilitative service is therapy for a child who isn't walking or talking at the expected age. Benefit and frequency limitations may apply pursuant to the member's plan benefit. (Please check your renewal documents or contact your Account Manager for details.)

Saver Plans

Some of our Saver plans can now support an embedded deductible for family plans. This caps a member's deductible level within a family plan at the individual deductible level for that specific plan. Please reference your plan documents to see if your Saver plan has this feature.

Pediatric-Dental Carrier Change (MA & RI Small-Group Employers only)

Effective January 1, 2017, Tufts Health Plan's pediatric dental coverage will now be administered by DentaQuest. (Altus was the previous administrator.) All benefits will remain the same. However, covered employees need to make sure their current dental provider is contracted with DentaQuest for Rhode Island and Delta Dental for Massachusetts.

Why an Integrated HRA/HSA/FSA Solution Makes Sense

Have you considered the advantages of a Health Reimbursement Arrangement (HRA), Health Savings Account (HSA), or Flexible Spending Account (FSA) for your organization? These products can help you manage benefit costs, and help your employees feel like they have more "skin in the game." Our integrated HRA/HSA/FSA solution makes it easy for you to find and implement the right solution.

We have a partnership with HealthEquity, one of the nation's largest health savings custodians. Working together, we can help you:

- ▶ Pair High-Deductible Health Plans with consumer accounts from HealthEquity to reduce benefits costs and empower employees to make smarter health care decisions.
- ▶ Streamline your administration by having eligibility, claims, pharmacy and other data imported directly to HealthEquity's proprietary online system. Eligibility data is updated daily, while claims data is updated weekly.
- ▶ Take advantage of online support tools through our enhanced member portal, including deductible status. From there, your employees can link to HealthEquity's site for educational resources and 24/7 account support.

HealthEquity's website makes it easy for members to manage their account by filtering and sorting claims by payment status, date range, claim type, patient or provider. Plus, members can select the "resolve" option to quickly settle a claim.

To find out more about our integrated HRA/HSA/FSA solution, please contact your Account Manager or HealthEquity at salesupport@healthequity.com or 877.949.6727.

PLAN UPDATES

Retirees Have Questions about Health Care. We Have Answers.

We understand that retirement can be a time of uncertainty for many employees, raising important questions about health care coverage for the future. To that end, we would like to offer support to our customers and their agents/brokers. There are a number of ways we can help Human Resources departments and employees who are approaching retirement.

Medicare 101: An Informative Discussion

For example, we are available to present a Medicare informational session at your workplace. Our speaker will present information and answer any questions that your employees may have about Medicare.

Topics include:

- ▶ How Medicare Works
- ▶ When and How to Enroll
- ▶ Medicare Parts A, B, C & D

HR Support

A Tufts Health Plan representative is available to meet with your Human Resources staff to discuss other custom solutions for providing Medicare information to retirees. In addition, we have educational materials about Medicare that can help upcoming retirees with their health care decisions.

If you are interested in finding out more about these options, or have other retiree health care questions, please contact Steve Hamerski by email at **Steve_Hamerski@Tufts-Health.com**, or contact your broker/agent.

MARKET EXPANSION

Expanding Our Provider Network in Rhode Island

Tufts Health Plan's network of providers continues to expand in Rhode Island, allowing us to provide a wider range of services to our members at in-network level benefits. From 2015 to 2016, Tufts Health Plan increased its provider network by more than 15% in the state, jumping from 4,644 providers to 5,371. At the same time, our network of behavioral health providers grew by nearly 25%. In addition, Tufts Health Plan now contracts with every hospital in Rhode Island.

Tufts Health Plan and Industry Leaders Tackle Health Care Reform at Providence Summit

On October 20, 2016, health care leaders from around the region came together at the Providence Business News Summit on Health Care Reform. Participants from Tufts Health Plan, Blue Cross and Blue Shield of Rhode Island, Lifespan, United Healthcare and other organizations addressed a range of topics, including health care data delivery, payment, rising costs and how technology can make health care more secure and efficient.

At the summit, the president of Tufts Health Plan's Commercial Products division, Marc Spooner, took part in a panel discussion that looked into ways of increasing the number of insured residents in Rhode Island. Citing his experience in Massachusetts, Spooner said that many individuals who qualify for subsidies still have trouble

affording coverage, and that cultural and language issues can create barriers that prevent people from signing up for care. In his remarks, he praised the work of Rhode Island's Free Clinic, an organization long supported by Tufts Health Plan.

Spooner's panel also discussed ways of reaching out to health care consumers in the millennial generation. This group, he stated, wants digital capabilities from health care providers, including access to electronic health records. He also said that millennials demand cost information when shopping for care, along with tools and apps to manage their health.

Tufts Health Plan was a Partner Sponsor of the event.



Tufts Health Plan's Marc Spooner, president of Commercial Products, left, and Eric Swain of UnitedHealthcare participated in the PBN Summit on Health Care Reform panel discussion 10/2016

MARKET EXPANSION

London Health: New Third Party Administrator for HRA, HSA and FSA Accounts

London Health is our newest Third Party Administrator for Health Reimbursement Arrangements (HRAs), Health Savings Accounts (HSAs), and Flexible Spending Accounts (FSAs) in Rhode Island. By partnering with this vendor, we will be able to provide claims feeds directly to London Health, streamlining the process and making it easier for clients to utilize HRAs, HSAs and FSAs. The new partnership with London Health is part of our ongoing effort to provide superior services to our customers.

Tufts Health Freedom Plan and Northeast Delta Dental Announce New Partnership



Northeast Delta Dental

Supports improved health for members, cost savings for employers

To improve the oral and overall health of its members, Tufts Health Freedom Plan is partnering with Northeast Delta Dental to identify opportunities for better care coordination. Through this unique arrangement, Tufts Health Freedom Plan members who are at risk for dental disease will receive additional dental care to help prevent chronic conditions like diabetes and heart disease.

In addition, employers who choose to combine medical benefits from Tufts Health Freedom Plan and dental coverage from Northeast Delta Dental will receive a reduced premium. That's because we're confident that our collaborative population health management approach can help lower medical and dental expenses over time. Numerous studies have concluded that medical health and dental health are linked, especially for specific higher-risk populations, and that coordinated management of both medical and dental care can result in improved overall health.

As part of the new partnership, Northeast Delta Dental becomes a minority stakeholder in Tufts Health Freedom Plan. (Tufts Health Freedom Plan is jointly owned by Tufts Health Plan and Granite Health.)

"We are pleased to partner with Tufts Health Freedom Plan to bring oral health and overall health to the forefront," said Tom Raffio, president & CEO of Northeast Delta Dental. "We know that a person's oral health is closely tied to their overall health, and we are hopeful this partnership will allow us to intercept oral disease and help those with underlying medical conditions achieve their personal best health."

"Our customers in New Hampshire will see the real benefits of this joint clinical effort, not only in improved health, but with an improved bottom line," said Brian Wells, president of Tufts Health Freedom Plan.

In 2013, Northeast Delta Dental launched the patient-centered oral health program Health through Oral Wellness® (HOW®), which empowers patients to take control of their oral health. Based on the need for care and the oral health disease risk, the HOW program provides enhanced preventive benefits, including fluoride varnishes and sealants for adults, tobacco cessation counseling, nutrition counseling, and additional dental cleanings.

"Our collaboration with Granite Health showcases our commitment to finding innovative solutions to increase care coordination and improve access to health management programs while reducing health care costs," said Wells. "Because of the success of the HOW program, a dental-medical partnership was a next logical step."

"We are excited to be partnering with Northeast Delta Dental, and continuing to contribute value to Tufts Health Freedom Plan by improving care for New Hampshire patients," said Rachel Rowe, president and CEO of Granite Health. "Because oral health and overall health are linked, especially for higher-risk populations, optimally managing both medical and dental care should result in improved overall health and cost savings."

For more information on combining medical and dental benefits through Tufts Health Freedom Plan and Northeast Delta Dental, visit **THFP.com** or call 603.228.7450.

CARE MANAGEMENT PROGRAMS

Programs Help Deliver More Value for the Health Care Dollar

At Tufts Health Plan, we're continually finding new ways to bring the most value to your employee health benefits plan. We have some of the most effective programs in the marketplace for care management and utilization management. Beginning January 1, 2017, our newest utilization management program focuses on cardiac services.

The Cardiac Management Program provides utilization management for therapeutic cardiac services and cardiac imaging services performed in an outpatient, non-emergent setting. The program aims to more effectively manage quality of care, patient safety and appropriate utilization for our members, while also improving medical trend.

Emergency Department Care Management

One of our other more recent initiatives is the Emergency Department (ED) Program. The purpose is to identify members who could most likely have sought care in a more appropriate care setting (such as an urgent care center or PCP's office) and to provide support and education related to their follow-up care.

This program started as a pilot in 2015 by identifying members with diagnoses such as ankle sprains, cough, headache, and sore throat. In the pilot program, our nurse care managers reached more than 50% of the members who were identified. Of that group, 89% became engaged in the program. The nurses educated members on appropriate use of the emergency department versus urgent care centers, connected them with a PCP if needed, and provided resources and support.

Oncology Care Management

How can Tufts Health Plan and health care providers work together to deliver better care to cancer patients? That was the question when our own physicians met in 2015 with oncologists from area hospitals and health care systems. As just one example, our nurse care managers proactively reach out to members who have a cancer diagnosis to:

- ▶ Review their care plan.
- ▶ Answer questions they may have after talking with their doctor.
- ▶ Help prepare them for common side effects of chemotherapy.
- ▶ Supplement the care they receive from oncology providers.

Such education and support can encourage members to seek follow-up care at their oncologist's office rather than going to an emergency room.

Aging Well

With the aging of the U.S. population, we recognized the need to create programs to address health care issues for our members over age 65. We have care management programs for heart disease, respiratory issues, diabetes, and cancer. Leveraging our in-house expertise of senior care professionals, our programs address issues such as muscle strength, fall prevention, and caregiver strain, just to name a few.

As an organization, we support healthy living with an emphasis on healthy aging through the Tufts Health Plan Foundation. Our foundation funds approximately \$4 million annually in community investments for nonprofits that support senior citizens in Massachusetts and Rhode Island.

WELLNESS

New Online Guides Help You Create a "Culture of Health"

Employee wellness programs have been shown to increase productivity, decrease absenteeism, and improve the health and well-being of employees. To help employers develop or administer these programs and create their own "culture of health," our staff of wellness professionals (including nurses, dietitians, and health coaches) has created guides with simple tips, which are now available at tuftshealthplan.com/cultureofhealth.

Building a "culture of health" starts at the top. Your company's leaders and managers must be on board with efforts to help boost employee wellness and help workers find an appropriate work-life balance. Once your company has committed to a "culture of health," you can offer healthy foods in your cafeteria, start a walking club, build an on-site gym, develop an incentive program to quit smoking, provide stress management resources — whatever it takes to keep your employees happy and healthy.

Continued on next page

Our new online guides can help you to create a supportive environment for the following healthy lifestyle behaviors:

- ▶ Healthy Eating
- ▶ Physical Activity
- ▶ Stress Management
- ▶ Smoking Cessation
- ▶ Weight Management

You'll also find a list of important employee wellness "do's and don'ts," along with a look at how Tufts Health Plan created a culture of health for its own employees.

You can find these helpful tools and resources by visiting tuftshealthplan.com/cultureofhealth or contacting your Account Manager for details.

Have Your Employees Received a Flu Shot?

Tufts Health Plan covers members for an annual flu shot, which everyone over six months of age should get, according to the Centers for Disease Control and Prevention. It's not too late in the flu season for your employees to get vaccinated. Most of our plans cover the flu shot 100%, so members should not have to pay any out-of-pocket cost.

People at high risk for developing flu-related complications

- ▶ Children younger than age five — and especially those younger than age two
- ▶ Adults age 65 and older
- ▶ Pregnant women (and women up to two weeks postpartum)
- ▶ Residents of nursing homes and other long-term care facilities
- ▶ People who have medical conditions including but not limited to asthma, heart disease, diabetes, kidney disorders, and neurological disorders

Where your employees can get a flu shot

- ▶ Doctor's office
- ▶ Town or school clinic*
- ▶ Participating CVS MinuteClinics® in Massachusetts, New Hampshire, Rhode Island, Connecticut, and New York*
- ▶ Participating CVS pharmacy® locations in Massachusetts, Rhode Island, and New Hampshire*

- ▶ Participating pharmacies within the national CVS Caremark network® (for members who have pharmacy benefits through Tufts Health Plan)
- ▶ Any other self-pay clinic/vaccination site* (member reimbursement would apply)

Members should contact participating flu clinics ahead of time to confirm that the flu shot is available, and that they accept Tufts Health Plan insurance. If members pay for the flu shot at a location not listed above, they should submit a Member Reimbursement Medical Claim form to get reimbursed for the cost.

Important exception for children

Children between the ages of six months and eight years old, who have never had a flu shot, may need more than one dose of the vaccine in the first year they receive it. This may also apply to some children who previously have been vaccinated. Parents should check with their child's pediatrician.

If your employees have questions about this information, they should call Member Services at the number on their ID card.

*Age restrictions may apply.

Introducing DASH for Health™

Help Your Employees Lose Weight, Lower Blood Pressure, and Prevent Disease

As an employer, you know that employee wellness is critical to a productive, happy workforce. That's why we're offering DASH for Health — a new tool to help your employees directly manage their health and prevent disease.

DASH for Health is an online-based nutrition and exercise (behavior modification) program that promotes lifelong healthy habits — not just quick fixes. DASH stands for "Dietary Approaches to Stop Hypertension." The DASH Diet was initially designed to lower blood pressure, but has also been scientifically proven to reduce weight and lower cholesterol. The DASH Diet is also consistent with dietary recommendations for preventing osteoporosis, cancer, heart disease, stroke and diabetes. All of these benefits have led to the DASH Diet's #1 Overall Diet ranking by *U.S. News & World Report* for seven consecutive years. Plus, the DASH Diet is recommended by the U.S. Department of Agriculture and the American Heart Association.

What Is the DASH Diet?

The DASH eating plan is rich in fruits, vegetables, low-fat dairy, and whole grains. It also includes lean meats, fish and poultry, nuts, and beans. The DASH Diet is high in fiber; low to moderate in fat; and consistent with U.S. guidelines for sodium content, vitamins and minerals. It is designed as a flexible eating plan that meets the lifestyle and food preferences of most people.

How does DASH for Health work?

This online program is designed to help members improve their eating and exercise habits by emphasizing variety. By joining DASH for Health, your employees will:

- ▶ Use an online calculator to calculate daily calories and food groups.
- ▶ Select an easy-to-follow meal plan that is right for them (based on calorie target) and choose from hundreds of delicious, well-balanced recipes.

- ▶ Receive twice-weekly email tips on topics such as starting an exercise program, eating out in restaurants, food preparation, shopping for healthy foods, etc.
- ▶ Use online tools to track food intake, weight, blood pressure and exercise. They'll also use online reporting tools to see their progress and areas that need more attention.
- ▶ Use the DASH for Health Food Tracker App and Fitbit devices to automatically upload food and exercise tracking to the DASH for Health website.

If you're interested in having your employees participate in DASH for Health, please contact your Tufts Health Plan Account Manager for program details and discounts.

All of the information above is represented by DASH for Health and has not been independently confirmed by Tufts Health Plan.

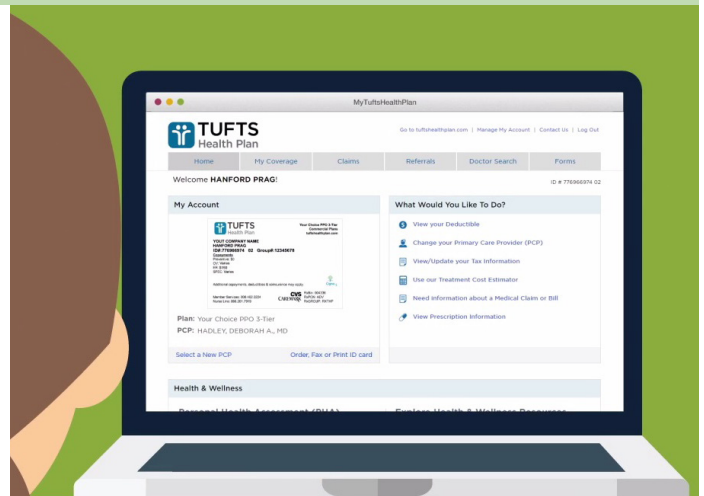
MEMBER & EMPLOYER ENGAGEMENT

Register for the Tufts Health Plan Secure Member Portal

Tufts Health Plan encourages you to remind your employees to check out the MyTuftsHealthPlan member portal. The portal makes it fast and easy for members to manage their health care plan and get the answers they need when they need them. Through the portal, members can use the Doctor Search tool to find primary care physicians, specialists, hospitals and other health care providers. In addition, MyTuftsHealthPlan offers access to claims status and important health tools.

To register for access to the portal, members should go to **MyTuftsHealthPlan.com**, click on "Register here" and follow the easy steps.

Members can view a video demonstration on the portal to learn more about the tools and resources that are available. To better serve our population's diverse needs, the video is offered in English, Spanish and closed-captioned versions.



MyTuftsHealthPlan is a one-stop destination for members to explore their benefits, track their costs and manage their plan

| Service Type | Member Responsibility |
|-------------------|--|
| Tier 1 In-Network | \$20 per Visit |
| Tier 2 In-Network | \$35 per Visit |
| Tier 3 In-Network | \$50 per Visit |
| Out-of-Network | No Copayment, then plan covers 80% per Visit (Subject to Deductible) |

Access the Provider Search to view the provider's tier. Click here.

Doctor's Office Visit - Specialist

Service Type

The portal is tailored to each member's specific plan and benefits, making it easy to find information quickly

MEMBER & EMPLOYER ENGAGEMENT

Three Important Enhancements to e-Enrollment

We're continually looking for ways to make e-Enrollment as easy for you to use as possible. You'll be pleased to know about three important enhancements that we've recently made based on your feedback:

- ▶ You can now select members from a roster for maintenance activities — including adding dependents and reinstating employees. You can also have certain member data pre-populate on the form.
- ▶ You can select "Add New Employee" and have the group number pre-populate on the form.

- ▶ You will receive a confirmation email for each enrollment change request that is submitted.

There is also one item that you should keep in mind when using e-Enrollment:

- ▶ If you are unsure whether an enrollment transaction was received and processed, please know that it takes 24 hours for the system to be updated. After 24 hours, you can check the roster to confirm that the enrollment transaction was made.

We believe these latest enhancements will help make it easier to manage enrollment for your employees. For more information, visit the secure employer portal at tuftshealthplan.com or contact your Account Manager.

INSIDE TUFTS HEALTH PLAN

Promoting Healthy Lifestyles in Our Community

The Road to Wellness 5K and the Tufts Health Plan 10K for Women

This past fall, Tufts Health Plan continued its commitment to health and well-being by supporting road races within our community. Our sponsorship of the Road to Wellness 5K event and its long-term support of the signature Tufts Health Plan 10K for Women are prime examples of how Tufts Health Plan is committed to promoting healthy lifestyles in the diverse communities that it serves.

Here is a look at the two events:

Building Healthy Communities on the Road to Wellness

The second annual Road to Wellness 5K was held on September 10 in Roxbury, Mass. Hundreds of individuals in the community participated in the 5K run or 2-mile walk. Tufts Health Plan was the Presenting Corporate Sponsor at the event, and the Presenter for the Health & Fitness Pavilion, which offered interactive health and wellness fitness activities from a variety of local organizations.

The event, hosted by The Dimock Center, HoodFit and the Boston Athletic Association, shares our goal of "building healthy communities." We look forward to seeing you at next year's Road to Wellness 5K.

Visit roadtowellness5k.com for more event details.



Tufts Health Plan's Audrey Kleinberg, sighted guide for blind or visually impaired athletes, right, crossing the finish line alongside Jen Buchanan

Celebrating Four Decades of Power, Camaraderie and Triumph

On October 10, nearly 5,000 women and men — including 525 Tufts Health Plan employees — came together to participate in the 40th running of the Tufts Health Plan 10K for Women. A celebration of women's health and fitness, this annual Columbus Day race welcomed participants of all ages and abilities, including elite athletes, wheelchair and hand cycle racers, blind and visually impaired runners, and recreational runners and walkers.

Since 1977, the Tufts Health Plan 10K for Women (formerly Bonne Bell Mini Marathon) is a signature Boston event, welcoming runners from across the country to participate. This year, 18 women ran for the 40th time.

The race also served as the 2016 U.S. 10K championship race. Emily Sisson, a 24-year-old from Providence, R.I., was this year's race winner, finishing with a time of 31:47.

Tufts Health Plan Employees Commit To End Alzheimer's

End Alzheimer's. It starts with us.

Our employees take those words to heart. For five years, they have participated in the Tufts Health Plan Walk to End Alzheimer's team, and this year were again among the top fundraising teams in the country — and #1 in Massachusetts and New Hampshire.

"Tufts Health Plan's outstanding commitment to the Walk to End Alzheimer's and the mission of the Alzheimer's Association is making a tremendous impact in the fight against this disease," said James Wessler, president and CEO of the Alzheimer's Association, Massachusetts/New Hampshire Chapter. "To be successful in our search to find effective treatments for Alzheimer's disease, we need champions to lead the charge. Tufts Health Plan makes it possible for our chapter to continue to support those impacted by Alzheimer's while funding research toward treatment and a cure."

Like millions of Americans, many Tufts Health Plan employees know or provide care for a loved one with Alzheimer's. Participation in our company-sponsored Walk team has grown steadily to include family, friends and, for the first time in 2016, our members.

"It's an honor to support the work of the Alzheimer's Association," said Patty Blake, president of the Senior Products division. "We walk for our families, our neighbors, and our friends. We walk to show our commitment to finding a cure, but also to show our support for those living with the disease."

The 2016 Tufts Health Plan team comprised 295 people who participated in events in Andover, Boston/Cambridge, Foxboro, Worcester, and Manchester, N.H. In total, our team raised \$291,000 this year, which included a match from the Tufts Health Plan Foundation. Over the past five years, the Tufts Health Plan team and Tufts Health Plan Foundation have contributed nearly \$500,000 to the Walk to End Alzheimer's.

Tufts Health Plan has been a long-time leader in the fight to end Alzheimer's, and an innovator in developing

programs to support those living with the disease.

We serve one of the largest populations of older adults in New England, and a significant percentage of our members are affected by Alzheimer's.

In 2013, we launched an integrated care management program for Medicare Advantage members living with Alzheimer's and their families. Through this program, the member and the primary caregiver are assigned a dementia care consultant—a social worker who collaborates with them and the primary care physician to design a plan and help them access community services.

The idea is to help those with Alzheimer's live well at home for as long as possible, and provide support for caregivers. The program has helped more than 1,500 members to date, and is now available to all Tufts Health Plan members.

Tufts Health Plan Foundation also supports initiatives that help families living with Alzheimer's, including critical enhancements to the Alzheimer's Association helpline. The 24/7 Helpline (800.272.3900) fields almost 9,000 calls each year, providing caregivers free access to information, referrals, support groups, and other valuable resources.

And the City of Boston partners with the Alzheimer's Association through a Tufts Health Plan Foundation grant that enables outreach to health care systems and community health centers, and provides training for city employees, families, and community partners. The goal is to promote education about brain health, healthy aging, and caregiving — and to change traditional approaches to dementia care.

"This work is so important," said Tom Croswell, CEO of Tufts Health Plan. "Our employees are working every day to help people living with Alzheimer's. They know the challenges of family caregivers and the need for support and understanding — and their support for the Walk to End Alzheimer's is truly inspiring."



Nearly 300 Tufts Health Plan employees, members, family, and friends participated in Walks to End Alzheimer's in Andover, Boston, Foxboro, Manchester (NH), and Worcester. Pictured here is the Boston Walk team

Bringing the Arts to Boston's Neighborhoods

Tufts Health Plan is proud to serve as the producing sponsor of Neighborhood Arts Program to enhance the vibrancy of urban neighborhoods in Boston. Part of the Celebrity Series of Boston, the Neighborhood Arts Program brings the joy of live performances to people of all ages and abilities. Entering its fifth season, the Neighborhood Arts Program will present more than 90 events, including interactive and hands-on workshops for youths, artist residencies with youth ensembles, and free concerts in venues within six Boston neighborhoods: Dorchester, Hyde Park, Mattapan, Roslindale, Roxbury, and the South End. Please visit celebrityseries.org/neighborhoodarts for the schedule of upcoming concerts.

Volunteer Day Sets a Record for Community Service

A record 328 employees completed more than 940 hours of community service during Tufts Health Plan Volunteer Day this year. The overall participation rate rose 51%, making it possible for us to double the number of volunteer service hours given to our community.

On Volunteer Day, employees volunteered on 10 different projects — ranging from sorting food for distribution to local pantries to creating literacy kits for children to improving access to transportation and wellness activities for people with disabilities. Teams supported Community Rowing Inc., The Dimock Center, Ethos and The LGBT Aging Project, Mass Audubon Habitat Education Center and Wildlife Sanctuary, Perkins School for the Blind, The Greater Boston Food Bank, The Home for Little Wanderers, United Way, and the Waltham Boys & Girls Club.

"The passion, energy, and commitment we see from employees on this day of service and year-round is incredible," said Nora Moreno Cargie, vice president of Corporate Citizenship. "It is a testament to Tufts Health Plan's values and our culture of giving back to our communities."



Tufts Health Plan employees completed landscaping projects at Dimock Community Health Center on Volunteer Day in June, 2016

What It Means to Be a Good Corporate Citizen

At Tufts Health Plan, corporate citizenship is more than grant investments and community service. As a health care company, we commit to improving the health and wellness of our members, our employees, our communities, and our planet. Being a good corporate citizen goes hand in hand with providing high-quality health care coverage. To underscore this, we pursue business practices that promote environmental sustainability, employee health and wellness, and diversity and inclusion.

Environmental sustainability

- ▶ Our entire campus in Watertown, Mass., is ENERGY STAR certified. Our main offices at 705 Mount Auburn Street have had this recognition for the past 10 years, while our nearby location at 64 Grove Street was first recognized last year.

- ▶ An effort is underway to install energy-efficient LED lighting throughout the campus. This is estimated to reduce annual electricity consumption by over 500,000 kilowatt hours.
- ▶ Employees receive incentives to carpool. Carpooling assistance, bicycle parking, preferred parking for hybrid vehicles, and electric car charging stations are available to help reduce carbon emission.

Employee health and wellness

- ▶ Employees have access to a 12,000-square-foot onsite fitness facility with state-of-the-art training equipment, or they can walk the indoor or outdoor walking paths.
- ▶ Healthy food options are subsidized at our on-site café. CookingWell demonstrations and free monthly nutrition education seminars also are offered to employees.
- ▶ The onsite BeWell Center has office hours and preventive services with a nurse practitioner and medical assistant available during the workday.

INSIDE TUFTS HEALTH PLAN

What It Means to Be a Good Corporate Citizen — Continued from page 12

Diversity and inclusion

- ▶ Consistently named one of The Boston Globe's Top Places to Work, we raised our hourly base pay rate last year to \$15 to positively impact the financial security of our employees.
- ▶ We have an inclusive and respectful workplace culture that attracts and retains employees from a diverse range of racial and ethnic backgrounds, as well as people under-represented in the workplace. These include older adults, veterans, or those with disabilities. In 2016, 65% of new hires represented diverse backgrounds.
- ▶ Earlier this year, Tufts Health Plan signed a voluntary pledge taken by employers committed to creating pay equity in their organizations.

Tufts Health Plan Foundation Invests \$2.9 Million in Community Organizations

Promoting Health and Wellness in Diverse Communities in Massachusetts, New Hampshire and Rhode Island

This year, the Tufts Health Plan Foundation provided \$2.9 million in funding to 41 organizations, engaging more than 500 community partners in Massachusetts, New Hampshire and Rhode Island. "The initiatives we support are inclusive, led by community, and represent true cross-sector collaboration," stated Nora Moreno Cargie, president of Tufts Health Plan Foundation and vice president of Corporate Citizenship. "By leveraging Foundation resources, grantees can implement promising practices and proven strategies that accelerate progress."

Established in 2008, Tufts Health Plan Foundation supports organizations that improve healthy living with an emphasis on older adults. In less than a decade, the Foundation has awarded more than \$24 million to nonprofit organizations that are working to "move the needle" on the health and engagement of older adults in their community.

One initiative supported by the Foundation is the Healthy Living Center of Excellence (HLCE), an integrated chronic disease management network of providers that creates links between medical providers and community-based social service organizations. The HLCE offers programs for patients with diabetes, high blood pressure and other chronic diseases and to connect to the traditional medical system. With a system of more than 90 community partners statewide, the HLCE makes it possible for medical providers to refer patients to these programs — improving the health, autonomy, and wellness of older adults.

Healthy aging initiatives in the Berkshires, Boston, Martha's Vineyard, Rhode Island, Southern New Hampshire, Yarmouth and other communities across the region offer another approach. Each initiative identifies ways to make their communities more age-friendly by reflecting the characteristics and needs of the community. They bring together civic and municipal leaders, business owners, health care professionals, older adults and others to collaborate on ways to make their unique communities more age-friendly — from improved access to transportation and affordable housing to enhanced sidewalks and crosswalks to programs that encourage social inclusion and civic engagement.

"Public policy and systems change is critical to making communities better places to grow up and grow old," said Cargie. "We are supporting the development of policy recommendations that will make communities more vibrant and livable for everyone."

About Our Grant Program

The Foundation awards grants in three areas:

- ▶ Systems and Best Practices grants support nonprofit organizations in their work to improve systems and best practices that influence and ultimately result in healthy communities and age-friendly cities. The Foundation funds activities in "Health and Wellness," "Workforce Development," "Purposeful Engagement," and "Field and Capacity Building."
- ▶ Policy and Advocacy grants support initiatives that promote coalitions and strategies to bring government, community organizations and older adults together to create a vision for the future of their communities.
- ▶ The James Roosevelt, Jr., Leadership Fund supports community leaders in their work with multiple stakeholders toward a common community goal.

How are grants awarded?

Tufts Health Plan Foundation reviews grant applications twice a year. Interested organizations can submit a letter of inquiry (LOI) using the online system at **tuftshealthplanfoundation.org**. After LOIs are reviewed, staff invites full proposals to organizations most aligned with their strategies. Systems and Best Practices grants are announced in June. Policy and Advocacy grants are announced in December.

Visit **tuftshealthplanfoundation.org** to learn more about the Foundation and view a full list of grantees.

FEDERAL AND STATE REGULATIONS

ACA Small Group Definition

The federal full-time equivalent (FTE) counting methodology is now being used to determine the number of employees for group size purposes. This methodology, which was adopted by the Massachusetts Division of Insurance on August 10, 2016, addresses full-time employees working, on average, 30 hours or more per week, and part-time employees.

2017 Requirement on Cost Sharing

Through the 2017 Notice of Benefit and Payment Parameters, the U.S. Health and Human Services Department has established out-of-pocket maximum amounts based on two-year estimated premium adjustment percentages. The out-of-pocket maximum for in-network services for plans other than High Deductible Health Plans (HDHPs) for 2017 is \$7,150 for self-only coverage and \$14,300 for other than self-only coverage.

Reminder: Annual Reporting for Minimum Essential Coverage

As was the case last year, health insurance issuers that provide coverage through fully insured group health plans must report information to the IRS and to covered individuals on Form 1095-B so that the individuals may report on their income tax statements that they had qualifying health coverage, also referred to as minimum essential coverage (MEC). Under the Affordable Care Act, uninsured individuals may be subject to financial penalty.

By January 31, 2017, we will mail Form 1095-B to fully insured subscribers for federal income tax filing. Massachusetts residents will also receive in the same envelope a Form 1099-HC for state income tax filing.

Tufts Health Plan considers MEC reporting to be an employer responsibility for self-insured groups. Self-insured plan sponsors that are employers subject to the Employer Shared Responsibility provisions must report the coverage on Form 1095-C, and other plan sponsors (such as sponsors of multiemployer plans) must report the coverage on Form 1095-B.

For self-insured groups that request MEC information, we will be able to provide a standard file with the same reporting requirements that are used of our fully insured groups. Please note that report requests we receive after January 1, 2017, will show all active members from the 2016 calendar year.

Collection of Subscribers' Social Security Numbers

As part of the reporting requirement for MEC, we will again solicit missing Social Security Numbers (SSNs) or Tax Identification Numbers (TINs) for our fully insured subscribers. This process will take place in December 2016. The IRS will use the SSNs/TINs in 2017 to verify an individual's health coverage for the previous year.

Please note: we are not soliciting SSNs/TINs from self-insured groups because we are not reporting MEC for these groups.

FEDERAL AND STATE REGULATIONS

Member Communications Now Include Nondiscrimination Notice

Reflecting our corporate commitment to diversity, and in compliance with a federal ruling, we now include a nondiscrimination notice as part of our member communications. The notice states: “Tufts Health Plan complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.”

The U.S. Department of Health and Human Services Office of Civil Rights issued a final rule on nondiscrimination in health programs and activities as part of the Affordable Care Act earlier this year. Under the ruling, health insurers are required to add the nondiscrimination notice and tagline.

Our nondiscrimination notice also explains that Tufts Health Plan:

- ▶ Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Written information in other formats (large print, audio, accessible electronic formats, and other formats)
- ▶ Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If members believe that we have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, our nondiscrimination notice explains how they can file a grievance with our Legal department and with the U.S. Department of Health and Human Services.

HIV-Associated Lipodystrophy Mandate (Massachusetts)

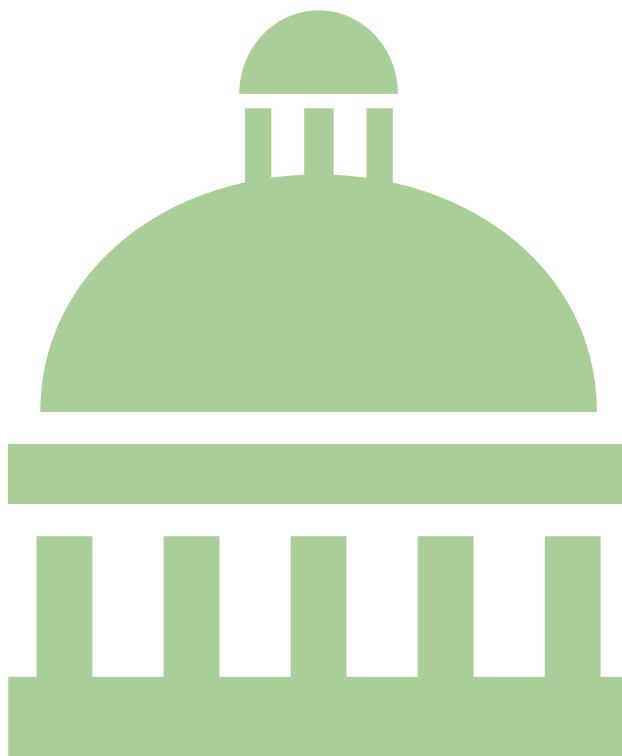
As of November 8, 2016, Tufts Health Plan covers medical or drug treatments to correct or repair disturbances of body composition caused by HIV-associated lipodystrophy syndrome for fully insured Massachusetts-based plans.

Treatment of Lyme Disease (Massachusetts)

As of August 1, 2016, Tufts Health Plan covers long-term antibiotic therapy of Lyme disease for fully insured Massachusetts-based plans when the therapy is determined to be medically necessary.

Oral chemotherapy drugs mandate (New Hampshire)

Effective upon renewal or new sale on or after January 1, 2017, for all fully insured New Hampshire-based plans, oral chemotherapy drugs will require, at the most, a \$200 copayment per prescription fill, limited to a 30-day supply. Please note that this class of drugs is sometimes used to treat conditions other than cancer, and this change applies to all uses.





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