

Products Plans [link to packages flyer]

Your business needs a health insurance benefit plan that does more than just fit your employee's needs. It needs to be a plan that makes them feel like they are listened to and heard and cared for the way they want -- and deserve. You want them to know you respect them, and care about their health, that is why you offer them Tufts Health Plan.

We can help you find the right plan that reflects your company's goals and exceeds your employees' needs .

HMO – Coordinated care through your family doctor. My employees are comfortable with using their primary care doctor take the lead on the care they receive to keep costs lower and care in network.

PPO – Care from any doctor without need for referrals from a coordinated primary care provider. My employees want the flexibility to see the doctor they want, even if it means paying more.

Saver – Make the most of my healthcare dollars. Lower premiums means my employees don't pay for care they don't use. I understand my employees need to take a more active role in making health care decisions so they don't pay more than they should and can save for the care they do need.

Tiered – Choose providers based on different levels of cost. My employees want access to all the doctors they want to see, but I want to give them a choice to have lower costs based on the doctors they choose.

Network[link to network flyer]

We've been in business since 1978 and we have fostered a lot of relationships along the way. Our strongest and most impactful of all of those has been with our providers. We have created unprecedented care and payment models that are truly changing the way health care works.

It also says a lot that so many hospitals—28 across three states, representing 74,000 members, choose Tufts Health Plan for their employees.

Our network includes options:

Full – You have access to our full regional network of over 49,000 providers and 108 hospitals across MA, NH, RI. You can also tier our full network for added value and savings.

Limited – You and your employees live and work in an area where a limited network not only costs less, but just makes sense .

National – We know as businesses grow that often means you may have operations outside of your home state. Not to worry, we have a full national network plan, Carelink, that gives access to over 440,000 providers in and 4,300 hospitals all states outside of our network area.

Funding Options

FI – You pay the premiums, we pay the providers. Your premiums are based on your community rated risk or claims history. You pay all or a percentage of your employees premium and we pay and help manage their care.

ASO – We manage the costs and the care, you pay the providers. You are comfortable in taking on the risks and have the cash flow to manage varying monthly bills. We work with you to make sure you are getting what you need and pay for. [link to aso flyer]

ELMF (smart pay/straight rate?) – You are ready to take on a little more risk but not the monthly cash flow fluctuations. Our Straight Rate funding option allows you to be self-insured and have a premium based on your history—not the community's. You pay a monthly invoice that will be the same each month, we manage the care and pay the providers.

Pharmacy –

Think having a separate pharmacy carrier adds more value? Think again. Tufts Health Plan's pharmacy programs are industry leading and are proven to not only contain costs, but lower them and improve care for our members.

Dental

Have a dental plan? Great. Think about choosing Delta Dental (MA) (NE) and save money on your premium. We believe so strongly in our clinical collaboration between oral health and overall health that we are offering savings up front, because we know it will bring savings when employees have improved oral health.

Vision

You may not know it, but there is a vision benefit. Included in your plan is an annual vision exam and up to 25% discount on glasses and/or contacts.

The key to lower health care costs?

Better Health Care.

In 2015-2016, Tufts Health Plan received the highest possible rating by the National Committee on Quality Assurance.

The same year, our cost management programs and provider collaborations helped deliver medical and pharmacy savings of \$30M for our customers in Massachusetts.

Coincidence? We don't think so.

We bring our experience to you and your employees, we offer:

Network Savings Programs

- Out of Network Claims Pricing – we favorably reprice claims for you for out of network care
- Out of Area Network Savings - allows greater discounts for employees living out of our network area.
- National Transplant Network – access to our clinically superior and cost effective network

Health Management Programs

- Cardiac Program - Review and monitoring of members with heart disease
- Oncology Program – Personalized outreach from our nurses to develop plans that help reduce impact of treatment
- Chronic Conditions – Nurses call on members with moderate to high risk conditions to teach them techniques for self managing their condition
- Utilization Management – programs to educate and follow up with specific conditions and treatments like sleep apnea, spine surgery, high cost imaging, speciality medications, renal disease and ER usage.

Audit Programs

Wellness

Whether it's keeping your healthiest employees well, reducing the risk of illness for more at-risk members, or helping them navigate the maze of health-care options when dealing with an illness or chronic conditions—all our programs

- care and utilization management
- personal health coaching
- decision support
- fitness and nutrition discounts & rebates
- onsite wellness programs

All have a single aim: to set your employees on a path to their own best health.

Data Reporting

Digital Member Engagement

We know your employees are not health insurance experts, but we are.

That is why we are offering them real-time answers for real-time health care questions.

This is beyond our 24/7 Nurse care phone line or our top-rated member services call center. We serve up individualized information when and where members need it

Through our secure member portal and smartphone app, members see exactly what they have to pay for covered services and know where they are in the accumulation of their deductible as well as all of their claims, so they can see how it all adds up.

And with our online and smartphone enabled tools, your employees can compare costs across multiple providers what everything from a doctor's visit to complex treatments or surgery.

Even more impactful, they will see a timeline of care to know how long recovery will take or often a treatment is needed.

When your employees can see clear ways to save, it ultimately drives down costs for everyone. Help them make informed decisions with one of the industry's leading transparency tools.

Simple Switch

Quality

For us, quality isn't a buzzword. It's about the very real things we do to make sure you and your employees benefit from better service and more effective health care.

Tufts is the only health plan in the country to receive the highest possible ratings by the NCQA for our care delivery model for both our HMO and PPO lines of business.

Our mission is to improve the health and wellness of the many communities we serve, and it's a mission that has been translated into very real actions for our company, including

Embracing our diverse members with care programs and employee training

Active support of the diverse businesses in our communities

Advocacy and expertise to strengthen community health

Packages

You want your business to grow and be financially healthy. We want that for your business, too. That is why we do what we do. At Tufts Health Plan, we want to more than insure you, we want to partner with you and your employees to get the health plan and health care needed to thrive.

Our Advantage plans offer access to top quality doctors, and all our great health care services with a traditional deductible payment model. Your employees are covered once they meet the dollar amount you choose for them.

Our Basic plans have the same top quality doctors and services without the deductible payment model. Your employees can utilize our coverage from the start. While the premiums are higher, your employees have peace of mind should a health issue arise.

Our Saver plans are designed for lower premiums and higher deductibles that must be met before coverage pays the bills. But, employees are empowered by a savings plan that is built in—funded by you or by them—that helps them pay that deductible throughout the year.

Our Choice plans are just that. Plans that offer your employees of choice of how much they want to spend based on where they want to get their care. They have access to our full network of doctors, they choose to pay more or less depending on the tier of the doctor.

NH Large Group

Deductibles – Our premiums can be adjusted by offering higher or lower deductibles. We have a range from 500-6,000.

Site of Service – Premiums can be a little less if you choose to direct your employees to use a lab, imaging or day surgery facility rather than a non-Granite Health hospital.

Pharmacy – We have six pharmacy packages to choose from which can help control costs or provide robust drug coverage—depending on what you need.

Small Group Packages

HMO For a little lower premium and managed care through your PCP, these plans can have low or high deductibles and even tiered levels of cost sharing.

PPO For a little more premium you can go to any doctor in the network without your PCP referring you. ...

Networks

Full – Our full network of 49,000 providers and 108 hospitals is accessible to all members on all Advantage, Basic and Choice plans. Our Choice plans have tiered cost sharing so that members have a choice as to where they want to get care based on cost.

Limited – Our limited network plan, Stewart, is ideal if your employees are all in the footprint of Stewart Hospital system. Premiums are more affordable and care is well coordinated.

All States Large Group Options

Deductible

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We bring this highly personal touch to our health management program, with a deep understanding of our members that allows us to look beyond conditions and costs alone to identify risk and to tailor our approach to meet them where they are on their individual health journey—whether it's keeping your healthiest employees well, reducing the risk of illness for more at-risk members, or helping them navigate the maze of health-care options when dealing with an illness or chronic conditions.

All of our innovations and programs, from care and utilization management to personal health coaching and decision support have a single aim: to set your employees on a path to their own best health.