Our HMO Choice Copay plan is a high-quality managed care plan that is simple to use. There are no claim forms to fill out—most services are covered with just a copayment. Choice Copay works like a traditional HMO plan, but members pay different copayments for services depending on where they receive care.

The HMO Choice Copay plan features:

- Emergency and urgent care coverage anywhere in the world, 24 hours a day, seven days a week.
- Comprehensive disease management and wellness programs at no extra charge.
- Discounts on fitness club memberships, acupuncture, massage, and more.

How the Plan Works

HMO Choice Copay members must choose a primary care provider (PCP), who must provide or authorize all care. Simply present your ID card and pay a copayment when you visit the PCP. When you need specialty care, the PCP will refer you to a specialist within our network. You will need a referral in order to receive coverage for the specialist’s services.

Members pay a lower copayment for PCP office visits and a higher copayment for specialist office visits.

For inpatient hospital care, HMO Choice Copay members pay a lower copayment when admitted to a community hospital and a higher copayment when admitted to generally more expensive tertiary hospitals.

Pharmacy Coverage

With the optional pharmacy benefit, members will pay a copayment for each prescription, according to our three-tier pharmacy copayment program:

- Tier 1: Lowest copayment; includes most generic drugs
- Tier 2: Middle copayment; includes many brand-name drugs
- Tier 3: Highest copayment; includes the most costly covered brand-name drugs not included in other tiers.