Tufts Health Plan’s HMO is a high-quality managed care plan that is simple to administer. Members choose a Primary Care Provider (PCP) from our extensive network throughout Massachusetts, Rhode Island and New Hampshire. In addition, there are no claim forms to fill out—most services are covered with just a copayment.

**The HMO 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 members must choose a PCP from our network of providers, who will provide or authorize all of the member’s care. Then, the member presents his or her ID card at each office visit, and pays the applicable copayment.

For care from a specialist, the PCP will refer the member to a specialist within our network. A member is required to obtain a referral in order to receive coverage for the specialist’s services.

Our network includes approximately 29,000 providers and 91 hospitals throughout Massachusetts, Rhode Island, and southern New Hampshire.

**Pharmacy Coverage**

If your plan includes 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.

**Superior Customer Service**

Our Member Services department offers your employees a staff of highly trained professionals. One phone call is all it takes to reach our Member Specialists. They are available to answer members’ questions about the plan and their benefits. We also offer language-translation services and TTY capabilities as needed.

**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.

For more information, contact your sales office:

Watertown 800-208-8013 | Worcester 800-208-9545 | Providence 800-455-2012

Tufts Health Plan’s HMO is a high-quality managed care plan that is simple to administer. Members will choose a Primary Care Provider (PCP) from our extensive network throughout Massachusetts, Rhode Island and New Hampshire. In addition, there are no claim forms to fill out—most services are covered with just a copayment.

**The HMO 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 members must choose a PCP from our network of providers, who will provide or authorize all of the member’s care. Then, the member presents his or her ID card at each office visit, and pays the applicable copayment.

For care from a specialist, the PCP will refer the member to a specialist within our network. A member is required to obtain a referral in order to receive coverage for the specialist’s services.
Our network includes approximately 29,000 providers and 91 hospitals throughout Massachusetts, Rhode Island, and southern New Hampshire.

**Pharmacy Coverage**

If your plan includes 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.

**Superior Customer Service**

Our Member Services department offers your employees a staff of highly trained professionals. One phone call is all it takes to reach our Member Specialists. They are available to answer members’ questions about the plan and their benefits. We also offer language-translation services and TTY capabilities as needed.

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.

For more information, contact your sales office:
Watertown 800-208-8013 | Worcester 800-208-9545 | Providence 800-455-2012