

Hello

We're Tufts Health Plan.



Let's get to know each other better.

We're here to help.



We're Tufts Health Plan, and our goal is better health and wellness for you.

Thank you for taking the time to read this short overview of Tufts Health Plan. Being willing to learn about your healthcare options is the first step in getting the most out of your plan while controlling your out-of-pocket costs.

Seeing you benefit from your health plan is as important to us as it is to you. Tufts Health Plan was founded in 1979, and our mission is to improve the health and wellness of the diverse communities we serve. That means everyone. That means you.

This single-minded dedication to our members is why Tufts Health Plan is consistently recognized locally and nationally as one of the finest health plans available.

In the following pages, you'll learn about the many services we offer, and learn how to manage your plan and your costs.

The right plan can make all the difference in the world for you and your health, and Tufts Health Plan wants to make it simple for you. Simple, after all, makes us all feel better.

A few simple answers to a few simple questions.

“I’m busy. Is there a simple way to learn about my plan?”

If you’re not yet a member, you can learn more about your plan selection by visiting tuftshealthplan.com/hello or by reviewing the Summary of Benefits Coverage (SBC).

Once you become a member, you’ll receive a digital member kit. It’s interactive, concise, easy to use and easy to understand. You can also sign up for mytuftshealthplan.com (more about that in a moment), and when you’re out and about, our mobile site gives you quick access to the information you need.

“Is my doctor in the network?”

Our Doctor Search tool makes it easy to see if your doctor’s in the plan that’s being offered to you. Just visit tuftshealthplan.com, click **Find a Doctor/All Plans**, and search as a guest.

“What if I want to see a doctor out of my network?”

Tufts Health Plan has a comprehensive network of providers, but if you want to see someone out of the network, it really comes down to your plan type and what you’re willing to pay out of pocket. Call our Member Services department to see if out-of-network services are covered under your specific plan, and if so, to what extent.

“Is my prescription covered under my plan?”

You can visit [tuftshealthplan.com/I am a member/Pharmacy](https://tuftshealthplan.com/I-am-a-member/Pharmacy) to see if your drug is on one of our lists of covered drugs, which is called a formulary. The formularies will also tell you what Tier, or level, of copay is required, and whether the drug is subject to any pharmacy programs like prior authorization.

“Is there an easy way to manage my plan once I’m a member?”

When you sign up at our members-only site, mytuftshealthplan.com, you’ll have at-a-glance access to your plan. The answers to many of your questions will be at your fingertips.

“Is there a way to know how much services or treatments will cost beforehand?”

Our online treatment cost estimator, Empower Me, makes it easy for a wide variety of services. Simply look up a service or procedure to find out the treatment cost range by provider. You can also find out what is covered and where you are in your deductible.

“Will there be any break in my coverage while I’m switching health plans?”

Our goal is to ensure a smooth transition for every member. Let us know if you’re receiving ongoing treatment for a condition, and we’ll help figure out the best course of action to take.

Tufts Health Plan's Momentum.



Most people don't think of their health plan until they need it. And that's fine. But we want you to know, we're thinking of you every moment. This way of looking at your overall well-being is called Momentum. Momentum encompasses tools and programs that help you get healthy and stay healthy. Momentum helps you improve every moment, to create your own health momentum. It's momentum that begins with you and ends with a better you.

Preventive Care

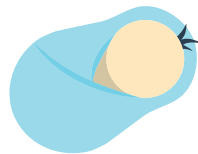
We offer guidelines and recommendations for many types of health screenings, depending on your age and lifestyle. All are designed to keep you healthy.

It's all about



Healthy Birthday

An obstetrical nurse care manager supports moms at risk for preterm labor or with underlying complex medical conditions through pregnancy and delivery, to help ensure a positive transition to home.



Priority Newborn Care

A specialty nurse care manager provides family-centered support for parents of new babies born with complex medical needs, across all care settings and at home.



Condition Management

Sometimes people with a serious illness or injury, or perhaps a chronic condition, may benefit from being more carefully managed. If you're a candidate and would like to participate, we'll assign our own nurse care manager who can assist you with education, symptom management, prescription management and much more.



Wellness Programs

Our wellness programs are designed to help you create a healthier lifestyle. We offer online tools like customized meal planning, and even personalized health coaching on certain plans.



Family Services

A family has so many different needs. Primary care, specialist care, maternity care, and of course, urgent care. Our network includes providers and services that fit your lifestyle.



Maternity Care

We go the extra mile. Literally. Once your baby (or babies!) arrives, our Tufts Health Plan newborn health professional is available to make a house visit, just to make sure everything is fine and to answer any questions you may have.

Support you.



Behavioral Health

Your plan may also include behavioral health benefits administered by Tufts Health Plan. If so, in instances where someone is suffering because of symptoms related to autism, substance abuse, psychological issues, neurophysical issues or another aspect of mental health, we have programs, resources and a comprehensive network of mental health professionals ready to help.



24-Hour Nurse Hotline

Tufts Health Plan offers members access to our 24-Hour Nurse Hotline. Registered nurses are available 24 hours a day, 7 days a week to answer your questions, and we offer translators in more than 170 languages.



Vision Care

When you need eye exams or other related vision care, Tufts Health Plan offers access to the EyeMed Vision Care network, which features more than 24,000 eye care providers that can offer discounts on prescription glasses, contact lenses, LASIK surgery and more.

Finding specific information about your specific plan.

We work with employers to help tailor the plans they offer their employees. There are a variety of plans to choose from, and details about your plan type and costs can be found in what is called a Summary of Benefits and Coverage, or SBC. Some of the details you'll find in your SBC include deductibles, copays, and what is covered by your specific plan.

You'll receive your SBC when you receive your plan information, and you can also access it online when you sign up at mytuftshealthplan.com.

Take a look at your SBC, and learn all about your plan design and its benefits. And be sure to call us with any questions.

Welcome to Tufts Health Plan. We're looking forward to a long and healthy relationship with you.



About your Summary of Benefits and Coverage (SBC).

Your SBC has plan information such as copay amounts and any deductibles, and is provided to you in a government-mandated format that allows you to easily compare different plans side by side. Combined with the provider network and additional plan information on our website, you'll have a clear picture of your benefits.

Simple ways to get a simple overview.

While you'll find your plan type and detailed cost information in your SBC, you can get a simple overview of your plan by previewing your digital member kit. Simply scan the QR code at the bottom of this page, or visit tuftshealthplan.com/hello.

Now that you know about us, we'd love to get to know you better.

We'd love to answer any questions you might have, so please feel free to ask. We take great pride in providing our members with the plans, information and ease of use they need in order to be healthy and stay healthy. As we have since 1979, and as we'll continue to do in the future.

Massachusetts

Member Services

customercare@tufts-health.com

(800) 462-0224

(800) 868-5850 TDD

Monday – Thursday, 8 a.m. – 7 p.m.

Friday, 10 a.m. – 5 p.m.

Rhode Island

Member Services

customercare@tufts-health.com

(800) 682-8059

(800) 868-5850 TDD

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Translation Available: With the help of AT&T Language Line, Tufts Health Plan speaks 170 languages.

Please Note: E-mail may not be encrypted and may be accessed and viewed by other Internet users without your knowledge while in transit to us. For that reason, please do not submit confidential health care or personal information to us via e-mail.



tuftshealthplan.com/hello

TUFTS Health Plan

705 Mt. Auburn Street, Watertown, MA 02472

tuftshealthplan.com

You may obtain a summary of Tufts Health Plan's key Utilization Management/Case Management procedures and Tufts Health Plan's privacy practices at [tuftshealthplan.com/Hello](http://tuftshealthplan.com>Hello).

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The Tufts Health Plan pharmacy benefit explained.

Everything we do at Tufts Health Plan is designed to benefit you. That means making things as simple as possible.



**First things first.
Find out if your drug is covered.**

The fastest and easiest way to find out if your drug is covered is to visit our website. Go to tuftshealthplan.com/Members/Pharmacy, and check to see if your drug is on one of our lists of covered drugs. These lists are called formularies.

If there are 1-50 employees in your employer group, check the small group formulary. If there are 51 or more employees in your employer group, the large group formulary applies to you.

If you see any of the terms below in connection with your prescription, be sure to take any action necessary in order to ensure your prescription is filled in a timely manner.

PA: Prior Authorization

Some drugs must meet certain criteria before they're covered. Ask the provider who has written your prescription. If your provider believes a drug with a prior authorization is necessary for your treatment, the provider should submit a request for coverage by faxing a Universal Pharmacy Medical Review Request Form to Tufts Health Plan. The form is available at tuftshealthplan.com. Go to www.tuftshealthplan.com/providers, then click Forms from the menu on the left, then click Authorization Forms on the right. You'll see the Universal Pharmacy Form PDF in the list. If the drug meets our medical necessity coverage guidelines, your request will be approved, and we will cover the drug. If for some reason it is not approved, you always have the option of appealing the decision.

ST^{PA}: Step Therapy Prior Authorization

You may be required to try a certain drug to treat a specific medical condition before Tufts Health Plan will approve the coverage of another drug to treat the same condition. Check the step therapy document in the Pharmacy section at tuftshealthplan.com/members to confirm your drug's step. If you have not previously taken the steps required by our pharmacy coverage guidelines, and your provider believes the drug prescribed for you is medically necessary, he or she may submit a request for coverage by faxing a Universal Pharmacy Medical Review Request Form. If you are a new member, please call us and let us know if you are currently taking a step therapy drug from another plan.

NTM: New-To-Market Drug Evaluation

In an effort to ensure the new-to-market prescriptions we cover are safe, effective and affordable, we delay coverage of many new drug products until our Pharmacy and Therapeutics (P&T) Committee and physician specialist review them. These drugs require prior authorization.

QL: Quantity Limitation

There may be a limit on how much of a drug you can get for a specific time period. You're covered for up to the quantity posted in our list of covered drugs. If your provider believes it's necessary for you to take more than the quantity limit posted on the list, he or she may submit a Universal Pharmacy Medical Review Request Form to request coverage.

SP: Designated Specialty Pharmacy

We've designated special pharmacies to supply a select number of medications used in the treatment of complex disease states. These pharmacies specialize in providing these medications and are staffed with nurses, coordinators and pharmacists to provide support services for members. Call the designated specialty pharmacy provider indicated in your search results of covered drugs, or contact the Tufts Health Plan Member Services Department at the number on your ID card. We want to make sure you receive your drug without interruption.

NC: Non-Covered

There are thousands of drugs listed on the Tufts Health Plan covered drug list. In fact, most drugs are covered. There is, however, a list of drugs that Tufts Health Plan currently does not cover. In many cases, these drugs are not covered by Tufts Health Plan because there are safe, comparably effective, and cost-effective alternatives available. Our goal is to keep pharmacy benefits as affordable as possible.

If your provider believes a non-covered drug is necessary for your treatment, he or she may submit a request for coverage by faxing a Universal Pharmacy Medical Review Request Form. If the drug meets our medical necessity coverage guidelines, your request will be approved, and we will cover the drug. If it is not approved, you always have the option of appealing the decision.



Find out what it costs.

Not every drug is priced the same. There is a copay associated with every prescription, and your copay is determined by the drug prescribed. When you check your formulary, you'll see that there are four tiers, or levels of drugs. Be sure to check our website each time you need a prescription for the most updated formularies and tiers.



Tier 1:

Includes most generic drugs, and is the lowest copay.



Tier 2:

Includes many generic and brand-name drugs, and is the next-highest copay.



Tier 3:

Includes the most expensive generic and brand-name drugs, and is the highest copay.



Tier 4 (optional):

When this tier is chosen by employers, this becomes the highest copay tier.



Have your prescription filled via pharmacy or mail-order.

You can have your prescription filled either through a pharmacy or, if your drug qualifies, through the mail.

If your prescription has a supply of less than 90 days, you would typically have it filled at a pharmacy. You can go to any of the nearly 68,000 pharmacies that are part of the CVS Caremark network. Just to be clear, the CVS Caremark network includes more than just CVS pharmacies. In fact, the vast majority of pharmacies in the U.S. are part of the CVS Caremark network, including most national retail chains and independent pharmacies.

If your drug is a Tier 4 drug, you must have it filled at a participating designated specialty pharmacy.

If your prescription is ongoing and has a supply of 90 days or more, such as for a chronic condition like asthma or diabetes, mail order is typically recommended. That option typically saves you money, and your medication arrives automatically so you don't run out.

You can use the CVS Caremark mail order pharmacy service. Be sure you have any necessary approvals in place, then call CVS Caremark Customer Service at **1-800-581-5300**. If your medication doesn't need approval, you'll be transferred to CVS Caremark FastStart.™ Once your account is set up, you can easily order refills online or by phone. Be sure to have the following ready:

- Your Tufts Health Plan ID Card
- Your medication name
- Your physician's name and phone number
- Your shipping address
- Your credit card

Our goal is to make the Tufts Health Plan pharmacy benefit simple to use. If you have any questions at all, please don't hesitate to contact us. We're here to help.

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