

\$0 for preventive care*

With most of our plans, we do not require a deductible, copayment or coinsurance for many in-plan preventive care services. We cover the following preventive care services at 100% – members pay nothing.*

- One annual physical exam for adolescents and adults
- One well-child exam annually
- Annual routine gynecological exam
- Routine prenatal care
- Annual routine vision exam
- Preventive cancer screenings, including breast, cervical, colorectal, and prostate
- Childhood and adult preventive immunizations
- Flu vaccines

**Not all self-funded employer groups participate in the same preventive care coverage.*

No referrals for all in-plan specialty services!

Health New England members do not need a referral to see an in-plan specialist.

Health New England supports the role of the primary care provider (PCP) in coordinating care, and we encourage our members to discuss treatment options with their PCP.

Prior Approval is still required for certain services and Out-of-Plan care. Services that need prior approval are listed in the member agreement. Any benefit limits and cost sharing requirements (copayments, deductibles, coinsurance) apply as well.

*For a listing of preventive care services, visit:
healthnewengland.org/preventive-care-chart*



Worldwide emergency coverage

We cover medical emergencies, urgent care, and prescription drugs outside of the Health New England service area.

Our worldwide emergency coverage includes stabilization care and post-stabilization care at the direction of your treating physician.

We also cover ambulance transportation if other means of transport would endanger your health.



Student out-of-area coverage

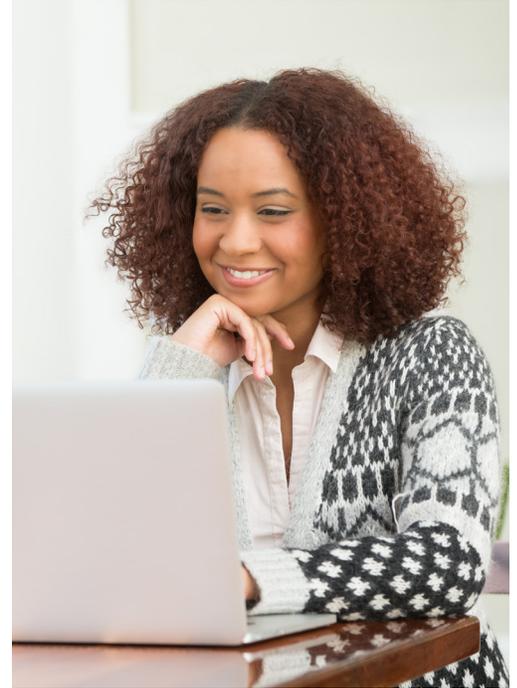
Dependents attending school outside of the Health New England Service Area are covered* for:

- Follow-up visit after an ER or urgent care visit
- Non-routine medical office visit
Includes Diagnostic Lab and X-ray
- Allergy injections
- Outpatient behavioral health visits
- Outpatient short-term rehabilitation services

**All services require prior approval and are subject to the terms of your Explanation of Coverage (EOC). Routine care, medical evacuation and repatriation are not covered.*

A Better Way to Manage Your Benefits Online

As a Health New England member, you can use Health New England's secure online Member Portal to manage your health care benefits in one convenient location. Register for the Member Portal and take advantage of the following helpful features:

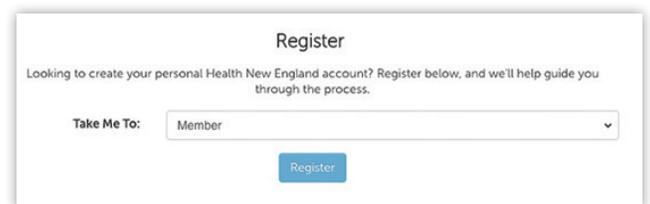


- Benefits documents and coverage information
- Dashboard with recent claims, payments, spending summary, annual deductible levels, and links to your Explanation of Benefits (EOB)
- Your personal Pharmacy Benefits:*
 - Access the Rx Savings Solutions portal for cost savings
 - Manage mail-order prescriptions
 - Look up drugs and pharmacies
- Access to the Cost of Care Calculator, Teladoc®, and the Healthy Directions portal
- A directory to locate providers in the network
- Links to important forms, like Wellness and Massage reimbursement forms (*depending on your plan*)
- Option to request a new ID card or download and print on your own
- Manage how you prefer to receive information about claims/EOBs
- Secure portal inbox for contacting Member Services

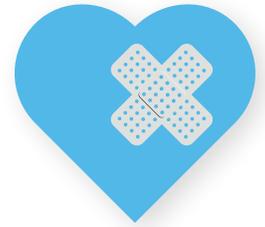
*Applicable to members enrolled in a Health New England plan with prescription benefits.

How to Register

1. On or after your plan effective date, go to my.healthnewengland.org and select **Member** in drop-down menu.
2. Or, just **scan the QR code**.
3. Follow the prompts to enter your member information (*be sure to have your Health New England Member ID card on hand*).



If you or someone you love gets sick or injured, know your care options ahead of time.



In a Medical Emergency



Call 911 for an ambulance or go directly to an emergency room for:

- ✓ Life-threatening medical conditions that may cause loss of life
- ✓ Medical conditions that cause serious or severe symptoms
- ✓ Injuries that may cause lasting physical damage

Emergency Rooms Facts

- » Only for serious and life-threatening conditions; not for non-urgent medical issues or chronic conditions
- » Cost more—ER copays and deductibles are higher than for a doctor visit or walk-in health center
- » Have long waits, especially for non-urgent medical issues
- » Don't offer preventive care services—get those from a primary care provider or walk-in health center



Options for Non-Emergency or Non-Urgent Medical Issues

Call your doctor

Your primary care provider (PCP) can:

- ✓ Give you medical advice over the phone
- ✓ Advise you about where to get treatment
- ✓ Schedule an appointment to evaluate your medical issue
- ✓ Provide preventive care and immunizations
- ✓ Manage chronic or on-going health conditions
- ✓ Educate you about your health and wellness



Call the Nurse Advice Line

Health New England's health information line:

- ✓ Can connect you with experienced registered nurses for free health advice
- ✓ Can help you determine whether to seek additional care
- ✓ Is available 24 hours/day, 7 days/week
- ✓ Can help you get answers to your questions about your health or medications



Call **(866) 389-7613** to access our Nurse Advice Line.

See reverse for more Care Options. >>



Go to a walk-in health center

Walk-in health centers offer:

- ✓ Preventive services and physicals
- ✓ Treatment for common illnesses and injuries
- ✓ Immunizations (shots to prevent disease)
- ✓ Health evaluations
- ✓ Health education/information
- ✓ Monitoring of chronic health conditions



Go to an urgent care center

Urgent care centers have capabilities to handle some minor medical emergencies like:

- ✓ Broken bones and sprains
- ✓ Bronchitis and pneumonia
- ✓ Insect bites, rashes and more

A list of contracted urgent care facilities is available at healthnewengland.org/provider-search.

Urgent care centers are more costly than your primary care provider and wait times may also be longer.

Health New England complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. ATTENTION: If you speak any language other than English, language assistance services, free of charge, are available to you. Call ((413) 787-4004 or TTY 711. Health New England cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (413) 787-4004 o TTY 711. Health New England cumple as leis de direitos civis federais aplicáveis e não exerce discriminação com base na raça, cor, nacionalidade, idade, deficiência ou sexo. ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para (413) 787-4004 ou TTY 711.

Care Management at Health New England

Our Care Management team is here to help you make informed decisions to effectively manage your health and well-being.

Care Management is one of the most effective ways Health New England is able to help our members better manage their health. Our Care Management program is designed to address the whole individual and includes appropriate interventions for members along the entire continuum of care; reducing health risks and improving health outcomes.



Benefits of Care Management

Care Management will help you get the care and services you need to manage your health and complex medical conditions.

Care Management may also focus on specific concerns such as:

- Asthma
- Behavioral Health
- Chronic Obstructive Pulmonary Disease
- Congestive Heart Failure
- Coronary Artery Disease
- Depression
- Diabetes
- High-Risk Pregnancy
- Substance Use Disorder

We can help identify community resources for your family and caregivers, help you navigate the complexities of the care system, and help you with referrals and other common care needs to help you stay healthy.

Our program offers a team-based, member-centered approach, comprised of licensed nurses and social workers acting as clinical advocates. Programs are available for all of our members, regardless of age or type of health plan. We address cultural backgrounds and offer multilingual services when required.

How it Works

We identify members for our Care Management programs through claims data, physician referrals and/or self-referrals. When you are referred* to our program, a Care Coordinator or Care Manager will reach out to you to determine your care needs. Once you are enrolled into a program, your Care Manager will develop an individualized care plan specific to your unique care needs and help you manage your health conditions and risk factors through regular phone calls and check-in appointments.

Getting Started

If you or any of your family members are interested in Care Management, help is only a call away. You can enroll by calling our Care Management team today at (800) 842-4464 or (413) 787-4000, ext. 3940. You can also enroll by completing our **Care Management Referral Form** found at healthnewengland.org/forms. Click Providers Tab, then click Clinical Request Forms drop-down. Submission instructions by U.S. mail or fax are on the form.

**Care Management is not mandatory. If you receive a call from a Care Manager, you have the ability to opt out of the program. We encourage you to take advantage of this resource to help you manage your health and well-being.*



We Have A 24-Hour Nurse Advice Line For You!

Speak directly to a nurse

Health New England wants to make sure you have the answers you need when you need them. Our nurse advice line is available 24 hours a day, 7 days a week, and 365 days a year. It is offered to you at no additional cost because you are a member of our plan. Our experienced Registered Nurses are ready to help you any time of the day or night.

Immediate answers to your health questions

If your doctor's office is closed, call the 24-hour nurse advice line for questions about health concerns or health-related topics. We are here to help with things such as:

- Symptoms you cannot or do not know how to manage
- Proper dosage of medications
- Questions about pregnancy

Our team of medical professionals give helpful advice that is easy to follow. They can also help determine if you need to visit your doctor or an urgent care center.*

Help is just a phone call away

For questions about your symptoms and care, call 1-866-389-7613 (TTY/TDD: 711). Nurse advice staff speak English and Spanish. For additional languages, please ask for a translator when you are connected.



Health concerns can happen at any time. Our 24-hour nurse advice line from Health New England is always available to provide help right over the phone.

* If you or a family member is having a life-threatening condition, immediately call 911 or go to the emergency room.

Save Time and Make Fewer Trips to the Pharmacy with Health New England's Access 90 Program

Under Health New England's Access 90 Program, you can save on trips to the pharmacy. Now you can order your prescriptions once every three months instead of monthly. Many maintenance drugs (drugs that need to be taken daily) are part of this program.

We offer the Access 90 Program for your convenience. Your pharmacy copay applies to each 30-day supply of medication. When filling a 90-day supply, three copays apply.

The Health New England Access 90 Program does not apply:

- To drugs that do not qualify under the program
- To prescriptions filled at our specialty vendor
- If prohibited by law

Signing up is easy

1. Go to healthnewengland.org/Access-90 to see if your drugs qualify.
2. Ask your doctor for a prescription for a 90-day supply of your drugs.
3. Bring your prescription to a participating pharmacy.

(All in-network pharmacies participate in the Access 90 Program.)

For a list of pharmacies near you and to learn more, visit healthnewengland.org/pharmacy.



ENROLL NOW to get all the benefits of medication home delivery.

OptumRx home delivery is safe and reliable.



Cost savings

You may pay less for your medication with a three-month supply through OptumRx[®].



Convenience

Get free standard shipping on medications delivered to your mailbox.



24/7 access and reminders

Speak to a pharmacist who can answer your questions any time, any day. You can also sign up for text message reminders, letting you know when to take or refill your medications.

Whether you have a new prescription or need to transfer an existing one, it's easy to get started with OptumRx.

Here's how:



ePrescribe

Ask your doctor to send an electronic prescription to OptumRx.



Online

Visit **optumrx.com** or use the OptumRx[®] app. From there, you can fill new prescriptions, transfer others to home delivery and more.



Phone

Call the toll-free number on your member ID card to speak to a customer service advocate.

Once OptumRx receives your complete order for a new prescription, your medication should arrive within seven business days. Completed refill orders should arrive in about four business days.

We look forward to serving you.

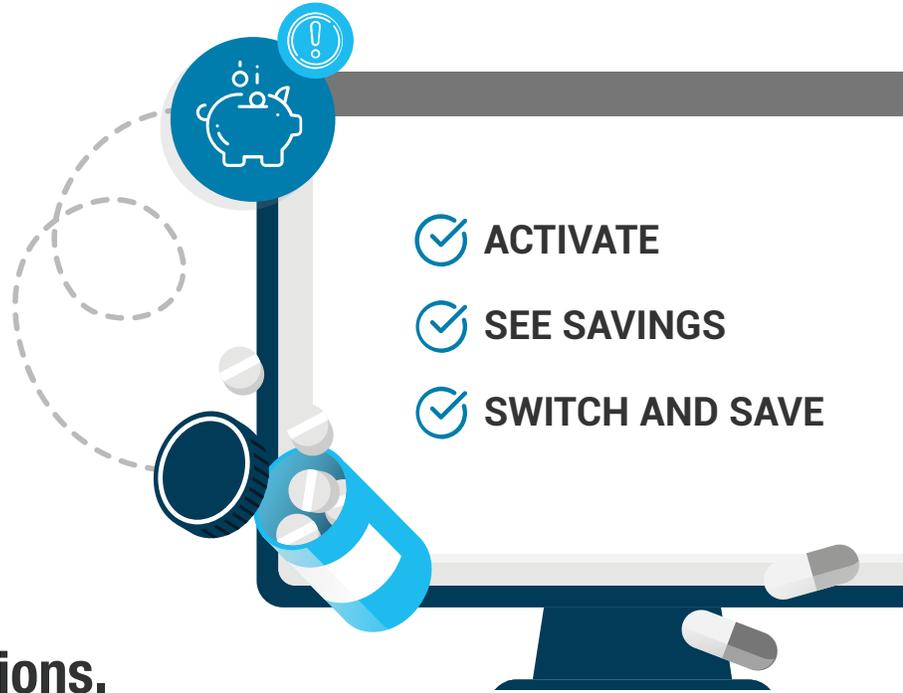
Need your medication right away?

Ask your doctor for a one-month supply that can be immediately filled at a participating retail pharmacy.

Stop overpaying for your prescriptions

Introducing Rx Savings Solutions.

A new way to help lower your prescription drug costs.



How it Works

- 1 Rx Savings Solutions uses software connected to your health plan.** It looks at the medications you take and finds options that may save you money.
- 2 Your online account shows which lower-cost prescriptions are available and lets you compare prices.** It also automatically lists any medications you've filled so everything's in one place. It's like having your own personal pharmacist right at your side.
- 3 Rx Savings Solutions will contact you anytime you're spending too much on prescriptions** you're currently taking or new ones you're prescribed in the future.
- 4 Switching to a more affordable prescription is easy.** Rx Savings Solutions will consult with your doctor to get their approval on any changes and take care of all the other details—no effort required from you.



Activate your account now to pay less for prescriptions.

Call 1-800-268-4476

Visit <https://myrxss.com/hne>

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Frequently Asked Questions

Check out these commonly asked questions to learn more about Rx Savings Solutions. For more information visit <https://myrxss.com/hne>.

How does this work with my health insurance and pharmacy benefit?

Rx Savings Solutions offers a service, brought to you by Health New England, that helps lower your prescription drug costs. This service doesn't change anything about your current insurance plan, pharmacy preferences or other benefits. Rx Savings Solutions uses software that is linked to your health insurance plan to find customized ways to lower your out-of-pocket prescription drug costs.

How can Rx Savings Solutions save me money?

Rx Savings Solutions finds all the lower-cost medication options that treat your condition and are covered by your insurance. You and your doctor can decide what's best for your health and budget. Here are just a few ways you might be able to save money:

- Generic forms of name-brand drugs
- Better prices at different pharmacies or through mail-order
- Equally effective medications that treat the same condition but cost less than your current prescription

How does this service work with my doctor?

Rx Savings Solutions finds ways to save and provides information you can discuss with your doctor to help make more informed decisions. If you decide to switch to a lower-cost prescription, you can even have Rx Savings Solutions contact your doctor directly to get their approval.

Can dependents on my health plan use Rx Savings Solutions?

Yes! Your Rx Savings Solutions online account will automatically show prescription drug information for any minor-age dependents on your health plan. Adult dependents are required to activate their own Rx Savings Solutions account and can then give you access to view their information.

How is this different from a coupon or discount program for prescription drugs?

Since Rx Savings Solutions is linked to your health plan, everything is personalized for you. They know the details of your prescription drug benefits and use that information to find the lowest-cost options covered by your insurance plan.

How will I know if I can save money?

There are two easy ways to see if you can save money on your prescriptions.

1. Your Rx Savings Solutions account will always show any savings opportunities you may have on your current prescriptions. Anytime you start taking a new prescription that's covered by your insurance plan, it will automatically show up on your account with any options you might have to save. Plus, you can use your account to proactively search for pricing on any medication before your doctor gives you a prescription.
2. Rx Savings Solutions will contact you if there's a way to lower your prescription drug costs. You'll receive these messages—email, phone, text, letter—if there's a chance to save money on current prescriptions or new ones you start taking in the future.

How do I use Rx Savings Solutions when I'm prescribed a new medicine?

Anytime you start taking a new prescription that's covered by your insurance plan, it will automatically show up on your online Rx Savings Solutions account (unless you use a coupon card that takes you outside of insurance). You'll be able to see any options you might have to save money, and you'll receive a message if you're paying too much. Your account also has a search feature to compare pricing options on medications before your doctor writes a new prescription.

**Real People.
Real Savings.**

“My new medication works just the same, and my savings (\$1,397 per fill) wouldn't have been possible without your help. Thanks Rx Savings Solutions.”

Curt
Rx Savings Solutions
member



Questions?

Call 1-800-268-4476
or email
support@rxsavingsolutions.com

Rx Savings Solutions has a team of certified pharmacy technicians ready to help. No robots. No phone mazes. Just real pharmacy experts.

Helping you get the right care for the best value

When choice is an option, being informed about cost can make a big difference in that decision. Health New England's Cost of Care Calculator helps members make affordable health care choices more easily.

Members are able to search for specific treatments or services, such as an MRI; browse by topic, from inpatient and outpatient procedures to vaccines and immunizations; and compare costs among providers.



Getting started: Log into your member portal account at my.healthnewengland.org.

You can access the tool in two easy steps:



On the Coverage page, scroll down and click **"Cost of Care Calculator"** icon.

Cost of Care Calculator



Click the **"Get Started"** button.

Using the Cost of Care Calculator

The Cost of Care Calculator uses your plan benefits and coverage to estimate your share of costs for many common conditions, and matches those costs to qualified providers in your area.

Use the search bar to look up a condition, procedure or service, or click on a topic.



Welcome.

Find cost estimate by

Treatment
 Physician
 Medical Facility

from Springfield, MA 01144 [Change](#)

 [SEARCH](#)

Browse by

Health Topics	A-Z List of Everything
Diagnostic Tests & X-rays	Diseases & Conditions
Inpatient Procedures	Lab Tests
Office Visits	Outpatient Procedures
Vaccines & Immunizations	

Popular Searches

Pregnancy	Baby Delivery
Colonoscopy	Office Visit, Established Patient
Knee Surgery	MRI
Back Surgery	CT Scan
X-Ray	

How We Calculate Your Cost Estimates

	+		=	
Your Benefits		Local Costs		Your Estimate
Your healthcare coverage, remaining deductible, and remaining out-of-pocket for the year.		Average cost of medical treatments in your area.		Your estimated out-of-pocket expense.

My Benefit Summary

Health Plan: HNE WISE MAX 3000 HDHP-LGE GRP

	Deductible	Out-of-Pocket Max
Plan Coverage:	\$ 6,000	\$ 6,000
Year-to-Date Spend:	\$ 3,711	\$ 671
Remaining:	\$ 2,289	\$ 5,329

Tips on keyword search...

As you enter search terms, you'll see a list of services that match what you're typing.

MRI of Leg or Hip Without Dye

Description

(Procedure code: 73721) This test takes pictures of a joint in a lower limb. MRI uses powerful magnets and radio waves, not radiation. Lower limb joints include those in the hip, knee, ankle, and foot.
[Learn more](#)

Diagnostic Tests & X-rays

Your likely out-of-pocket cost: \$732

Based on average costs for in-network healthcare providers in Massachusetts (excl. Boston area).

Estimated Total Cost: \$732

Professional: \$0 | Technical Component: \$732

Depending on which in-network provider you choose, your out-of-pocket estimate may range from: **\$423 - \$732**

Plan Share: \$0
Out-of-Pocket Estimate: \$732
Deductible: \$732 | Copay: \$0 | Co-insurance: \$0

Where You Can Go For Care

Explore your place of service options to see how they impact your estimated cost.

- Office Or Imaging Center
- Outpatient Hospital : +\$227

Cost Savings Tip...

Radiology procedures done in a provider's office or a freestanding imaging center often cost less than in a hospital department. Be sure to consider these options.

Things to consider...

Our goal is to connect you with the highest quality and most affordable healthcare. Check out Healthcare Compass for more information on how providers in Massachusetts rate on patient experience and clinical quality.

> HOW WE CALCULATED YOUR COST ESTIMATE

Compare providers for a better estimate

Now that you have a general idea of what your out-of-pocket costs might be, you should compare providers to get a more specific estimate.

View detailed cost estimates.

Compare costs for qualified providers and make the most informed decision.

Compare providers for a better estimate

Now that you have a general idea of what your out-of-pocket costs might be, you should compare providers to get a more specific estimate.

Physician Facility

Provider Search

9 Facilities found near Springfield, MA

25 mile from Springfield, MA 01144 [Change](#)

[SEARCH](#)

Enter a facility name

> Filter

Sort by: Your Out-of-Pocket Estimate - Low

	<p>GREATER SPRINGFIELD MRI Imaging Center Location GREATER SPRINGFIELD MRI LIMITED PARTNERSHIP MERCY MEDICAL CENTER 271 CAREW ST SPRINGFIELD, MA 01101 1.0 Miles Map/Directions</p>	In-network	Outpatient Hospital	<p>Out-of-Pocket Estimate: \$422 Estimated Total Cost: \$422 Compare</p>
	<p>WESTERN MASS MRI SERVICES Imaging Center Location WESTERN MASS MRI SERVICES SERVICES 444 MONTGOMERY ST CHICOPPEE, MA 01020 4.9 Miles Map/Directions</p>	In-network	Office Or Imaging Center	<p>Out-of-Pocket Estimate: \$423 Estimated Total Cost: \$423 Compare</p>
	<p>CHELMSFORD MRI Radiology Imaging Center Location CHELMSFORD MRI PC MRI CTR FOR DIAG IMAG 3640 MAIN ST SPRINGFIELD, MA 01107 2.1 Miles Map/Directions</p>	In-network	Outpatient Hospital	<p>Out-of-Pocket Estimate: Estimate not available Low volume of claims data \$520 Estimated Total Cost: \$520 Compare</p>

Health New England Discount Programs



As a Health New England member, you get more than just great health coverage, you get great value, too. The HNEPlus Discount program helps you make healthy lifestyle choices. The program provides discounts on products and services from local vendors not covered under your Health New England health plan. With HNEPlus, achieving good health is easier – and more affordable. You are also able to access the Working Advantage discount program as a member of Health New England.

Working Advantage Program

Save up to 60% on tickets, travel and shopping with Working Advantage!

Save on movie tickets, theme parks, ski resorts, hotels, museums, zoos, attractions, aquariums and more!

You will also find great seats and super deals on Broadway shows, family events, concerts, and sporting events worldwide.

Working Advantage has also partnered with favorite online retailers to bring you excellent discounts on apparel, books, music, electronics and more.



Register for your FREE account today!

Please call (800) 565-3712 and inform them you are affiliated with Health New England.

workingadvantage.com

No paperwork and no added fees with HNEPlus!

Simply look through our online directory to find participating vendors in your area. You must show your Health New England ID card at the time of purchase or service to receive your discount. Take advantage of these discounts and see how much you save while improving your health!

For more information, visit us online at healthnewengland.org/hneplus or contact Health New England Member Services at (413) 787-4004 or (800) 310-2835, Monday through Friday from 8:00 a.m. to 6:00 p.m.

Please note:

The vendor may limit the quantity and type of service to which the discount may be applied.

What if I decline coverage how can I get it later? (Special Enrollment Rights)

If you are declining enrollment for yourself or your dependents including your spouse, because of other health insurance coverage, you may in the future, be able to enroll within 30 days after your other coverage ends. In addition, if you have a new dependent as a result of a marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your dependents, provided that you request enrollment within 30 days after the marriage, birth, adoption or placement for adoption.

How do I get Urgent Care?

We require doctor's offices to have 24-hour phone coverage. Your doctor or someone covering will help you decide what to do – whether you should get care right away or wait to see your own doctor.

Health New England also has a 24-hour nurse line. If you can't reach your doctor, call us at (413) 787-4000 or toll free (800) 842-4464. An experienced nurse will listen to your concerns and help you choose the care that's right for you.

Finally, we contract with a number of Urgent Care Centers. You can find an Urgent Care Center near you on our website, healthnewengland.org. Just click on Find a Provider at the top of the page. In general, Urgent Care Centers have a Specialist copay, not an ER copay, so you'll save time. Please coordinate any follow up visits with your Primary Care Physician.

How do I get covered Durable Medical Equipment and supplies?

Health New England partners with Northwood, Inc., a nationally recognized durable medical equipment benefit manager, to manage most Durable Medical Equipment and Supplies. Examples of what Northwood manages include wheelchairs, oxygen and other kinds of respiratory equipment, nebulizers, prosthetics, orthotics, wigs, speech devices and other medical supplies (diabetic, ostomy, urological, incontinence and wound care). Some equipment and supplies are still managed by Health New England.

Please note: All DMEPOS services require prior approval. It is your health care provider's responsibility to prescribe, get prior approval and make any necessary arrangements with Northwood or Health New England for medically necessary equipment and supplies.

What services are not covered by Health New England?

We cover services that are medically necessary for the prevention or treatment of illnesses or injury – as long as you follow Plan procedures. Here are some general exclusions that you should know about.

- If you have an HMO plan, care by out-of-plan providers is not covered unless it's emergency care or it is pre-authorized by the Plan.
- A small number of services require prior approval by the Plan (see the description of

Utilization Management). If you sign up for an HMO plan, and you don't get prior approval for a service that requires it, we will not cover that service. For PPO plans, coverage for that service may be either denied or reduced, depending on the type of service.

We do not cover:

- Care or treatment provided by a family member
- Cosmetic surgery or procedures
- Custodial care
- Dental services, except as described in the Summary of Benefits.
- Educational services or testing
- Experimental or investigational medical services
- Holistic treatments
- Services for the personal comfort or convenience of the member
- Services required by third parties (e.g., school, camp, work physical)
- Services that should be covered by another insurer (like Workers' Compensation)
- Veterans Administration services for service-connected disabilities

Your membership materials will include a more complete listing of specific benefits, exclusions and limitations.

Important Note: *By enrolling in the Plan, or receiving benefits or coverage under the plan, you agree to accept all of the plan terms, which we describe in your member agreement.*

At Health New England, we believe that medical decisions should be made by you and your doctor.

Like any insurer, we do have coverage requirements – such as, you need to get prior approval to see a doctor who is not part of your plan. Coverage decisions are made based on all the available information, and if necessary, discussed with your doctor.

This is an important part of our Utilization Management(UM) Program.

Purpose

Through this program, we gather information on treatment and services and review certain claims. In this way, we determine if the services are **covered benefits** and whether treatment and services are **medically necessary** and **appropriate**. Our medical director oversees the process and supervises all activities.

How it Works

We use nationally recognized guidelines and resources which measure the intensity of service along with the severity of illness or disease. If we let other provider groups perform UM functions, we approve any criteria they use. In all cases, we base decisions on whether treatment and services are medically necessary and appropriate.

Our evaluation involves a number of components:

Pre-certification / Pre-authorization - We collect information from doctors and members before they begin an inpatient hospital stay or undergo certain outpatient procedures and services.

This allows us to determine eligibility and coverage in advance and establish open, honest communications with members and their doctors. It also makes it easier to coordinate transition to the next level of care. For example, we may elect to move members into programs for chronic diseases such as asthma; register them for a prenatal program; or, initiate case management for complex situations. We make this decision based on the information available at the time service is requested.

Concurrent review - We speak with providers and facilities to help determine whether services are covered and medically necessary; identify case management opportunities; and, begin to plan discharge.

Discharge planning - We help coordinate a member's transition from the inpatient setting to the next level of care.

Retrospective review - After members have received care, we may speak with providers and facilities to determine whether services are covered and medically necessary. We base our determination on whether members received treatment and services appropriate for their needs at the time of service.

Making the Decision

If we determine that a service is not covered or medically necessary, coverage for the service could be denied. Only our medical directors make decisions to deny coverage for reasons of medical necessity. We notify members and providers in writing and include information about the reasons for the determination (including the clinical rationale); how to

initiate an appeal; and the clinical review criteria used in the decision.

Health New England does not:

- pay employees, providers, or others involved in utilization management for denials of coverage or service
- use incentives to reward inappropriate restrictions of care

How We Protect Your Privacy

Health New England is committed to protecting your privacy. We keep members' protected health information (PHI) confidential according to our policies and state and federal law, including the Health Insurance Portability and Accountability Act (HIPAA). Our Notice of Privacy Practices contains more detailed information about our policies and practices regarding the collection, use, and disclosure of your PHI. It also sets forth your rights with respect to your PHI. You can request a complete copy of our Notice of Privacy Practices by contacting Health New England Member Services.

How does Health New England protect my PHI?

We have a detailed policy on confidentiality. This policy applies to all oral, written, and electronic information that we have about you. All Health New England employees are required to protect the confidentiality of your PHI. An employee may only access, use, or disclose your information when he or she has an appropriate reason to do so. Each employee or temporary employee must sign a statement that he or she has read and understands the policy. Once a year, we send a notice to employees to remind them of this policy. Any employee who violates the policy is subject to discipline and may be fired. You may request a copy of our Privacy Policy from Health New England Member Services. We also include confidentiality provisions in all of its contracts with Plan Providers. Finally, we maintain physical, electronic, and procedural safeguards to protect your information.

How does Health New England use and disclose my PHI?

HIPAA and other laws allow or require us to use or disclose your PHI for many different reasons. Health New England may use and disclose your information in connection with your treatment, the payment for your health care, and our health care operations, including our quality and utilization management activities. We also can disclose your information to providers and other health plans that have a relationship with you for their treatment, payment and some limited health care operations. In addition, federal law allows or requires us to use or disclose your PHI to serve other purposes, such as for public health activities, or when we are required by law to disclose the information. We do not need your authorization for these purposes.

For other uses and disclosures of your information, we must get your written authorization. A written authorization request will specify the purpose of the requested disclosure, the persons or class of persons to whom the information may be given, and an expiration date for the authorization. If you do provide a written authorization, you generally have the right to revoke it.

Will Health New England disclose my PHI to anyone outside Health New England?

We may share your PHI with affiliates and third party "business associates" (such as consultants and auditors) that perform various activities for us. Whenever such an arrangement involves the use or disclosure of your PHI, we will have a written contract that contains the terms

designed to protect the privacy of your PHI.

Can I get a copy of my medical records?

Health New England does not provide medical care. Members receive care and treatment from providers based in their own facilities. Under Massachusetts law, you have a right to obtain a copy of your medical records. To obtain a copy, contact your health care provider directly.

You also have the right to see and get a copy of some of the records that Health New England maintains, such as your enrollment, payment, claims, case of medical management records, and any other records that we use to make decisions about you. Requests for access to copies of these records must be in writing and sent to the Health New England Legal Department. Please provide us with the specific information we need to fulfill your request. We may charge a reasonable fee for the cost of producing and mailing the copies.