

Effective 1/1/2019

## Minimum Coverage Health Plan

	Southcoast Hospitals & Physicians Network Tier 1	Preferred Providers Tier 2	Out of Network & Non Covered Steward Facilities
<b>Calendar Year (CY) Deductible (ded)</b>			
Individual	\$1,500	\$3,000	N/A
Employee +1	\$2,500	\$6,000	N/A
Family	\$2,500	\$6,000	N/A
<b>Calendar Year Out-of-Pocket Maximum (Includes Deductible)</b>			
Individual	\$3,400	\$5,150	N/A
Employee +1	\$6,800	\$10,300	N/A
Family	\$6,800	\$10,300	N/A
<b>Preventive Care</b>			
Routine pediatric care/Well visits	100% deductible waived	60% after ded.	Not covered
Routine adult exams and tests/Well visits	100% deductible waived	60% after ded.	Not covered
Routine immunizations	100% deductible waived	60% after ded.	Not covered
PSA (prostate screening)	100% deductible waived	60% after ded.	Not covered
Routine OB/GYN care	100% deductible waived	60% after ded.	Not covered
Mammogram	100% deductible waived	60% after ded.	Not covered
<b>Other Outpatient Care**</b>			
Pediatric Office visits (diagnostic exam/services)	\$40 copay	60% after ded.	Not covered
PCP Office visits (diagnostic exam/services)	\$40 copay	60% after ded.	Not covered
Maternity care	\$40 copay	60% after ded.	Not covered
Specialist Office visits (diagnostic exam/services)	\$50 copay	60% after ded.	Not covered
Physical & Occupational Therapy (100 visits per CY)	\$40 copay	60% after ded.	Not covered
Speech, Hearing and Language Disorder Treatment	\$40 copay	60% after ded.	Not covered
Urgent Care/Walk in Clinic	\$40 copay	60% after ded.	Not covered
Lab, X-ray & other diagnostic tests	80% after ded.	60% after ded.	Not covered
High Tech Imaging – CT scan, MRI, PET	80% after ded.	60% after ded.	Not covered
Colonoscopy	80% after ded.	60% after ded.	Not covered
Surgery and anesthesia in outpatient hospital department/outpatient surgical center	80% after ded.	60% after ded.	Not covered
<b>Hospital Care</b>			
**Semi-private room and board including physician in-hospital care, surgery, delivery, anesthesia	100% after ded.	60% after ded.	Not covered
Emergency Room Visit (includes all related charges) (copay waived if admitted)	\$150 copay ded. waived	\$150 copay ded. waived	Covered at Tier 2
Inpatient admission directly from Emergency Room	100% after ded.	100% after deductible	Not covered
<b>**Skilled Nursing Facility (up to 100 inpatient days per member per CY)</b>			
	N/A	60% after ded.	Not covered
<b>**Physical Rehabilitation Facility (up to 60 inpatient days per member per CY)</b>			
	100% after ded.	60% after ded.	Not covered
<b>Other Services</b>			
Ambulance (medically necessary transport only)	100% no ded.	100% no ded.	100% no ded.
Durable Medical Equipment & related supplies	N/A	60% after ded.	Not covered
**Home Health Care	100% no ded.	60% after ded.	Not covered
Telemedicine	\$10 copay	N/A	N/A
<b>Mental Health and Substance Abuse</b>			
Outpatient Services	\$40 copay	\$40 copay no ded.	Not covered
**Inpatient Services	100% no ded.	100% no ded.	Not covered

### Unlimited Lifetime Maximum

### Caremark Prescription Drug Benefit - Calendar Year Prescription Out-of-Pocket Maximum is \$2,000 per person; \$4,000 per employee +1/family.

If you elect to participate in medical coverage, you are automatically enrolled in the prescription drug program. Upon initial enrollment you will receive one combined medical and prescription ID card. 90 day supplies of maintenance medications may be filled at Southcoast Pharmacy (for the lowest cost), CVS Caremark Mail Order Service or any other network pharmacy. \*Generic Note: Some generics are available at a lower cost at Southcoast Pharmacies.

Retail	Southcoast	Retail Network	Benefit Notes:
Generic	\$10.00	\$15.00	* Out-of-network charges are paid according to allowed amount charges. ** Inpatient hospitalizations and certain outpatient procedures require pre-certification. Failure to pre-certify will result in a \$250 penalty. Visit <a href="http://www.southcoasthealthplan.org">www.southcoasthealthplan.org</a> for the current list of services requiring pre-certification. ***Health Management Programs: For services related to Oncology or Orthopedic care management, Southcoast has a care management program in place that requires a member to have a consult with a Southcoast specialist prior to beginning treatment. There is a financial penalty of \$500 when a member does not follow this process. Please contact Conifer Health Solutions at (800) 459-2110 for further details.
Preferred Brand	\$30.00	\$50.00	
Non-preferred Brand	\$75.00	\$100.00	
Mail and 90 Day	Southcoast	CVS Caremark Mail Order Service	
Generic	\$25.00	\$37.50	
Preferred Brand	\$75.00	\$125.00	
Non-preferred Brand	\$187.50	\$250.00	
Specialty	Southcoast	CVS Specialty Pharmacy	
Generic	\$50.00	\$275.00	
Preferred Brand	\$100.00	\$275.00	
Non-preferred Brand	\$250.00	\$275.00	

### NOTES-

- This Summary provides you with an overview of your Plan benefits and is not a complete statement of all Plan provisions, limitations and exclusions. Please refer to your Plan Document and amendments for complete details. In the event of any inconsistency between this Summary and your Plan Document, the Plan Document and any applicable amendments will govern.
- Once the calendar year out-of-pocket maximum has been met, claims will be paid at 100% by the Plan.
- The calendar year out-of-pocket maximum includes Emergency Room and Office visit copays, deductible, medical copays and coinsurance. Prescription drug copays accumulate towards a separate per member calendar year out-of-pocket maximum.
- Covered diagnostic/high-tech imaging tests furnished by Shields MRI of New Bedford and/or Shields MRI of Dartmouth will be paid at the Tier 1 benefit level.
- If you or your providers have questions, contact the Plan between 8:00AM and 5:00PM at 877-234-5550 or visit [www.southcoasthealthplan.org](http://www.southcoasthealthplan.org)

## Hospital Tiering Effective 1/1/2019

### Tier 1 Hospitals: Southcoast Health System - Lowest member out-of-pocket costs

Charlton Memorial Hospital (MA) Southcoast Behavioral Health (MA)	St. Luke's Hospital (MA)	Tobey Hospital (MA)	Boston Children's Hospital (MA)
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### Tier 2 Hospitals: Harvard Pilgrim and other preferred provider networks - Moderate member out-of-pocket costs

Addison Gilbert Hospital (MA)	Elliot Hospital (NH)	Massachusetts Eye And Ear Infirmary (MA)	Roger Williams Medical Center (RI)
Alice Peck Day Memorial Hospital (NH)	Emerson Hospital (MA)	Melrose Wakefield Hospital (MA)	Saint Joseph Health Services (RI)
Anna Jaques Hospital (MA)	Exeter Hospital (NH)	Memorial Hospital (RI)	Saint Vincent Hospital (MA)
Athol Memorial Hospital (MA)	Falmouth Hospital (MA)	Mercy Medical Center (MA)	Saints Medical Center (MA)
Baystate Medical Center (MA)	Franklin Regional Hospital (NH)	MetroWest Medical Center (MA)	Somerville Hospital (MA)
Beth Israel Deaconess Hospital (MA)	Frisbie Memorial Hospital (NH)	Milford Regional Hospital (MA)	Southern New Hampshire Medical Center (NH)
Beth Israel Needham Campus (MA)	Harrington Memorial (MA)	Milton Hospital (MA)	South County Hospital (RI)
Beth Israel Plymouth Campus (MA)	Hasbro Children's Hospital (RI)	Miriam Hospital (RI)	Spere Memorial Hospital (NH)
Beverly Hospital (MA)	HealthAlliance Burbank Hospital (MA)	Monadnock Community Hospital (NH)	St. Joseph Hospital (NH)
Boston Medical Center (MA)	Heywood Hospital (MA)	Mt. Auburn Hospital (MA)	Tufts Medical Center (MA)
Bradley Hospital (RI)	Holyoke Hospital Inc. (MA)	New London Hospital (NH)	The Westerly Hospital (RI)
Brockton Hospital (MA)	Huggins Hospital (NH)	Newport Hospital (RI)	Wentworth-Douglass Hospital (NH)
Butler Hospital (RI)	Kent Hospital (RI)	Newton Wellesley Hospital (MA)	Whidden Memorial Hospital (MA)
Cambridge Hospital (MA)	Lahey Medical Center (MA)	Noble Hospital (MA)	Winchester Hospital (MA)
Cape Cod Hospital (MA)	Lakes Regional General Hospital (NH)	North Adams Regional Hospital (MA)	Wing Memorial (MA)
Catholic Medical Center (NH)	Landmark Medical Center (RI)	North Shore Medical (Salem or Union) (MA)	Women & Infants Hospital (RI)
Cheshire Medical Center (NH)	Lawrence General Hospital (MA)	Parkland Medical Center (NH)	
Clinton Hospital/UMASS Health System (MA)	Lawrence Memorial Hospital (MA)	Rehabilitation Hospital of Rhode Island (RI)	
Concord Hospital (NH)	Lowell General Hospital (MA)	Rhode Island Hospital (RI)	
Cottage Hospital (NH)	Marlborough Hospital (MA)		
Dana-Farber Cancer Institute (MA)	Mary Hitchcock Memorial Hospital (NH)		
	Mary Lane Hospital (MA)		

### Non-Covered Hospitals

Androscoggin Valley Hospital (NH)	Franklin Medical Center (MA)	Nantucket Cottage Hospital (MA)	St. Elizabeth's Hospital (MA)
Berkshire Medical Center (MA)	Good Samaritan Hospital (MA)	Nashoba Valley Medical Center (MA)	South Shore Hospital (MA)
Brigham & Women's Hospital (MA)	Holy Family Hospital (MA)	New England Baptist Hospital (MA)	Sturdy Memorial Hospital (MA)
Carney Hospital (MA)	Littleton Regional Hospital (NH)	New England Sinai (MA)	UMass Memorial Medical Center (MA)
Cooley Dickinson Hospital (MA)	Martha's Vineyard Hospital (MA)	Norwood Hospital (MA)	Upper CT Valley Hospital (NH)
Duncan Lodge (RI)	Massachusetts General Hospital (MA)	Portsmouth Regional Hospital (NH)	Valley Regional Hospital (NH)
Eleanor Slater Hospital (RI)	Memorial Hospital (NH)	Providence VA Medical Center (RI)	Weeks Medical Center (NH)
Fairview Hospital (MA)	Merrimack Valley Hospital (MA)	Quincy Medical Center (MA)	
Faulkner Hospital (MA)	Morton Hospital (MA)	St. Anne's Hospital (MA)	

*Note: The plan's tiering structure uses quality and cost-efficiency measures to tier providers and takes into consideration the local marketplace and service needs of Southcoast employees and their family. A hospital's tier may change annually on January 1st.*