

PRODUCT PORTFOLIO REFERENCE GRID

# Allies<sup>SM</sup> HMO Plans for Large Group Employers

Effective November 1, 2022

Allies is designed to make getting care easier, more convenient, less costly, and less confusing

- Premium savings up to 20% compared to our full network plans
- Members get local, community-based primary and specialty care from providers affiliated with Newton-Wellesley Hospital, Salem Hospital, or South Shore Hospital
- When referred, members have access to Mass General Brigham academic medical centers and specialty hospitals
- Members also have access to Mass General Brigham specialists (from Mass General Brigham academic medical centers and specialty hospitals) right in their own community
- Health navigators and an Allies transition experience specialist help to coordinate it all and simplify getting access to care
- Members can get certain specialist appointments faster (within three business days from PCP referral) in Dermatology, Orthopedics, Cardiology, and Gastroenterology
- No cost-sharing for all virtual visits. Virtual first primary care options are available

**IMPORTANT NOTICE:** This plan includes a limited provider network called Allies HMO. This plan provides access to a network that is smaller than AllWays Health Partners full commercial HMO provider network. In this plan, members have access to network benefits only from the providers in the Allies HMO network. Please consult the provider directory or visit the provider search tool at [allwayshealthpartners.org](https://allwayshealthpartners.org) to determine which providers are included in the Allies HMO network.

# Allies HMO Plans

Effective November 1, 2022

All plans meet Medicare Part D creditable coverage requirements.  
All plans meet minimum creditable coverage requirements.

| Allies HMO plans                     | Deductible (D) Individual/Family (embedded) | Out-of-Pocket Maximum Individual/Family (embedded) | Telemedicine (Virtual Visit) with PCP, SPEC, On Demand or for MH/SU | OUTPATIENT                  |   |                                   |                     |                    | INPATIENT   | MENTAL HEALTH & SUBSTANCE USE (MH/SU)             |                               |
|--------------------------------------|---|--|---|-----------------------------|---|-----------------------------------|---------------------|--------------------|---|---|-------------------------------|
|                                      |   |  |   | Office Visit PCP/Specialist | Emergency Room (copayment waived if admitted) | Diagnostic Imaging, X-Ray and Lab | High-tech Radiology | Outpatient Surgery | Inpatient Medical, SNF (100 days/benefit period) and Rehab (60 days/benefit period) per admission | Outpatient MH/SU visits including Rehab and Detox | Inpatient MH/SU per admission |
| Allies HMO 1000 with Care Complement | \$1,000/\$2,000                             | \$4,000/\$8,000                                    | \$0   | \$20/\$20                   | \$250   | (D)                               | (D)                 | (D)                | (D)   | \$20  | (D)                           |
| Allies HMO 2000 with Care Complement | \$2,000/\$4,000                             | \$4,500/\$9,000                                    | \$0   | \$25/\$25                   | \$250   | (D)                               | (D)                 | (D)                | (D)   | \$25  | (D)                           |
| Allies HMO 3000 with Care Complement | \$3,000/\$6,000                             | \$7,000/\$14,000                                   | \$0   | \$25/\$40                   | (D) \$300                                     | (D)                               | (D)                 | (D)                | (D)   | \$25  | (D)                           |

| FlexRx <sup>SM</sup> PHARMACY OPTIONS  |  |  |  |  |
|--|--|--|--|--|
| <b>OPTION A</b><br>Cost-sharing by tiers for a 30-day supply:<br>\$5/\$15/\$35/\$60/<br>10% up to \$200 per script max/<br>20% up to \$250 per script max<br>90-day supply: \$10/\$30/\$70/\$180 | <b>OPTION B</b><br>Cost-sharing by tiers for a 30-day supply:<br>\$5/\$20/\$40/\$65/\$100/\$150<br>90-day supply: \$10/\$40/\$80/\$195 | <b>OPTION C</b><br>Cost-sharing by tiers for a 30-day supply:<br>\$5/\$25/\$50/\$100/\$150/\$200<br>90-day supply: \$10/\$50/\$100/\$300 | <b>OPTION D</b><br>Cost-sharing by tiers for a 30-day supply:<br>\$5/\$15/\$30/\$50/\$30/\$50<br>90-day supply: \$10/\$30/\$60/\$150 | <b>OPTION E</b><br>Cost-sharing by tiers for a 30-day supply:<br>\$5/\$20/\$40/\$65/\$40/\$65<br>90-day supply: \$10/\$40/\$80/\$195 |

(D) = Deductible applies.  
Cost sharing for medical, behavioral health, and pharmacy applies to the out-of-pocket maximum.

# Comprehensive benefits that elevate the health experience

## Care Complement

Care Complement™ removes cost barriers to various care options. There's no cost sharing for the following benefits:

- 11 common prescriptions to treat chronic conditions, such as depression, diabetes, high cholesterol, and high blood pressure
- Cardiac rehabilitation therapy
- Medication assisted therapy office visits and certain prescription medications
- The first 6 physical/occupational therapy and chiropractic visits
- The first 6 acupuncture visits (limit of 20 visits per benefit period)
- Diabetes education and nutritional counseling

## All Plans Include:

- Access to care from providers who are at or affiliated with Newton-Wellesley Hospital, Salem Hospital, or South Shore Hospital.
- Access to Mass General Brigham's world-class and specialty hospitals for complex care when needed and referred by an Allies HMO PCP. These hospitals include Massachusetts General Hospital, Brigham and Women's Hospital, Mass Eye and Ear, McLean Hospital, and Spaulding Rehabilitation Network
- For members age 18 and younger: The first three PCP sick office visits and behavioral health office visits at no cost to members
- Fitness reimbursement: Up to \$150 for individual coverage or \$300 for family coverage per calendar year
- Weight loss benefit: Up to 6 months of membership fees in a qualified weight-loss program\*
- No visit limits for mental health/substance use outpatient visits
- Childbirth education class reimbursement: up to \$130 per pregnancy

## Medical Benefits (Outpatient, Inpatient, Other)

- No copayment, deductible or coinsurance applies to preventive services
- Routine eye exam at no cost sharing for members diagnosed with diabetes
- Physical/occupational therapy: Coverage up to 100 combined visits per benefit period
- A referral is needed for specialty care, with the following exceptions:
  - Gynecologist or Obstetrician for routine, preventive, or urgent care
  - Family planning services
  - Outpatient and diversionary behavioral health services
  - Emergency services provided by any provider
  - Routine eye exam
  - Physical, occupational, and speech therapy

## Pharmacy Benefits

Our FlexRx™ pharmacy solutions control pharmacy costs while offering money and time savings for members:

- A low-cost generic tier
- An over-the-counter (OTC) drug benefit that covers many common OTC cough, cold, and allergy drugs and products with a prescription
- A 90-day supply of maintenance medications through mail order or retail pharmacies

## Allies HMO Side-by-Side Allowances with AllWays Health Partners plans

- Available alongside a comparable Complete or Choice Easy Tier network plan
- Available alongside Complete HMO plan high/low offering
- Available alongside Complete HMO/PPO Plus offering

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\*One per policy (either subscriber or dependent); weight loss membership benefit excludes food

Evidence of Coverage is comprised of the AllWays Health Partners Schedule of Benefits and Member Handbook.

Underwritten by AllWays Health Partners, Inc.