

2026 plan changes for direct small groups

What to know about our small group product portfolio for 2026

Federal out-of-pocket maximum (OOPM) changes

- ✓ ACA-mandated OOPM for non-HSA increased to \$10,600/\$21,200
- ✓ IRS-mandated OOPM for HSA increased to \$8,500/\$17,000

Medicare Part D Creditable Coverage and Massachusetts (MA) Minimum Creditable Coverage

All 2026 Merged Market plans meet the Medicare Part D Creditable Coverage and MA Minimum Creditable Coverage as noted on the [Product portfolio grid](#).

2026 portfolio changes

The following changes are part of an integrated approach to provide affordable coverage and a variety of options to support our members' health needs.

GLP-1:

Effective January 1, 2026, we will continue to provide coverage of GLP-1 medications for individual and small group commercial members only for type 2 diabetes. GLP-1 medications (e.g., Wegovy, Zepbound, Saxenda) that share an indication of obesity/weight management will not be covered. To learn more, please visit our webpage on [GLP-1 coverage](#).

Medical drugs, radiation, and chemotherapy:

Upon renewal, medical drugs that cannot be self-administered will follow the plan's tier 4 Rx cost share. Radiation and chemotherapy will take a standard \$75 copayment per visit at an outpatient setting on non-HSA plans. A copay will apply per script when purchased through the pharmacy. On HSA plans, the deductible will continue to apply.

Choice Easy Tier

Beginning with renewals on or after January 1, 2026, a new tier 3 will be added as the highest cost-sharing level. Some hospitals and affiliated facilities will change tiers. Please see the [2026 Choice Easy Tier brochure](#) that provides details on how hospitals and their affiliated facilities are tiered as well as their specific tiers for 2026. Visit our [Find a doctor](#) tool to see the 2026 Choice Easy Tier directory.

Value-added benefits

- **Care Complement benefits** waive cost-sharing for certain services, such as chiropractic care and acupuncture, to provide flexibility to try alternative treatments for pain management and chronic conditions. A list of in-network benefits covered at \$0 cost sharing can be found [here](#).
- **Mental health support** includes Lyra's behavioral health platform that provides fast and easy access to coaching, therapists, and a self-guided care resource center—*now with expanded options for teens, families, and employees*. This is in addition to our Optum network of providers. Find an overview of all our [behavioral health benefits](#).



- **Our comprehensive women's health portfolio** provides resources for women at every stage of their healthcare journey and comprises pregnancy, postpartum and loss support, menopause, and pelvic health. Learn more about [women's health resources](#).
- **Rx Savings Solutions** provides ways for members to save on prescription drug costs. This program is founded and led by pharmacists who offer clinical expertise to reduce prescription drug costs for members by offering alternative, lower-cost options. [See how it works](#).

Plan changes

The following outlines member cost-sharing changes for our 2026 product portfolio, excluding the changes noted above. The changes also apply to the comparable PPO Plus plan versions.

Increase on out-of-pocket maximum:

2025 plan name	2026 plan name	Metallic tier
Complete HMO 2500 15%/35% with Care Complement	Complete HMO 2500 15%/35% with Care Complement	Silver
Complete HMO 2500 30/55/500 with Care Complement	Complete HMO 2500 30/55/500 with Care Complement	Silver
Complete HMO 4000 35/45 ER750 10% with Care Complement	Complete HMO 4000 35/45 ER750 10% with Care Complement	Bronze

Increase on prescription drug tier 2:

2025 plan name	2026 plan name	Metallic tier
Complete HMO 1500 25/50 ER350 with Care Complement	Complete HMO 1500 25/50 ER350 with Care Complement	Gold

Increases on out-of-pocket maximum and emergency room:

2025 plan name	2026 plan name	Metallic tier
Complete HMO 3000 40/55/500 with Care Complement	Complete HMO 3000 40/55/750 with Care Complement	Silver
Complete Access EPO 3000 with Care Complement	Complete Access EPO 3000 40/55/750 with Care Complement	Silver

Increases on specialty office visits* and prescription drug tier 2:

2025 plan name	2026 plan name	Metallic tier
Complete HMO 2000 25/40 ER450 with Care Complement	Complete HMO 2000 25/50 ER450 with Care Complement	Gold
Complete Access EPO 2000 with Care Complement	Complete Access EPO 2000 25/50 ER450 with Care Complement	Gold

Increase on out-of-pocket maximum and addition of tier 3 cost sharing for tiered services:

2025 plan name	2026 plan name	Metallic tier
Choice Easy Tier HMO 500 25/45 with Care Complement	Choice Easy Tier HMO 500 25/45/400 with Care Complement	Gold

Increases on out-of-pocket maximum and prescription drug tiers 2 and 3:

2025 plan name	2026 plan name	Metallic tier
Complete HMO 3500 45/75 with Care Complement	Complete HMO 3500 45/75 with Care Complement	Silver

Increases on out-of-pocket maximum, PCP/BH office visits, and prescription drug tier 4:

2025 plan name	2026 plan name	Metallic tier
Complete HMO 5000 30/45 with Care Complement	Complete HMO 5000 35/45 ER750 10% with Care Complement	Silver

Increases on out-of-pocket maximum and prescription drug tier 2 and addition of tier 3 cost sharing for tiered services:

2025 plan name	2026 plan name	Metallic tier
Choice Easy Tier HMO 1000 25/50 with Care Complement	Choice Easy Tier HMO 1000 25/50/350 with Care Complement	Gold
Choice Easy Tier HMO 1500 25/50 with Care Complement	Choice Easy Tier HMO 1500 25/50 ER350 with Care Complement	Gold

Increases on out-of-pocket maximum and prescription drug tier 3 and addition of tier 3 cost sharing for tiered services:

2025 plan name	2026 plan name	Metallic tier
Choice Easy Tier HMO 3000 45/55 with Care Complement	Choice Easy Tier HMO 3000 45/55/750 with Care Complement	Silver

Increases on out-of-pocket maximum, specialty office visits,* high-tech radiology, and prescription drug tier 3:

2025 plan name	2026 plan name	Metallic tier
Complete HMO HSA 3600 35/50/600 Enhanced FlexRx	Complete HMO HSA 3600 35/55 Enhanced FlexRx	Silver

Increases on out-of-pocket maximum, specialty office visits,* emergency room, high-tech radiology, and prescription drug tier 3:

2025 plan name	2026 plan name	Metallic tier
Complete HMO HSA 3000 35/50/450 Enhanced FlexRx	Complete HMO HSA 3000 35/55 Enhanced FlexRx	Silver
Complete Access EPO HSA 3000 Enhanced FlexRx	Complete Access EPO HSA 3000 35/55 Enhanced FlexRx	Silver

Increases on out-of-pocket maximum, PCP/BH office visits, specialty office visits,* outpatient surgery, and high-tech radiology:

2025 plan name	2026 plan name	Metallic tier
Complete HMO 2000 30/60 ER1000 with Care Complement	Complete HMO 2000 35/70 with Care Complement	Silver

Increases on out-of-pocket maximum, specialty office visits,* lab, prescription drug tier 2 and 3 and addition of tier 3 cost sharing for tiered services:

2025 plan name	2026 plan name	Metallic tier
Choice Easy Tier HMO 2000 25/45 with Care Complement	Choice Easy Tier HMO 2000 25/50 ER450 with Care Complement	Gold

Increases on out-of-pocket maximum and emergency room; decreases on tier 2 services — high-tech radiology, outpatient surgery, and inpatient medical; addition of tier 3 cost sharing for tiered services:

2025 plan name	2026 plan name	Metallic tier
Choice Easy Tier HMO 2500 15%/35% with Care Complement	Choice Easy Tier HMO 2500 15%/20%/35% with Care Complement	Silver

Increases on deductible, out-of-pocket maximum, PCP/BH office visits, specialty office visits, lab, diagnostic, imaging and X-ray, and prescription drug tier 2:

2025 plan name	2026 plan name	Metallic tier
Complete HMO HSA 4000 Enhanced FlexRx	Complete HMO HSA 4200 Enhanced FlexRx	Bronze

Increases on out-of-pocket maximum, PCP/BH office visits, specialty office visits,* emergency room, lab, diagnostic, imaging and X-ray, high-tech radiology, and prescription drug tier 3:

2025 plan name	2026 plan name	Metallic tier
Complete HMO HSA 2500 30/45/450 Enhanced FlexRx	Complete HMO HSA 2500 35/50 Enhanced FlexRx	Silver

*Specialty office visits include, but are not limited to, acupuncture and physical/occupational/speech therapy. Please see the Schedule of Benefits for details.

Have questions or want more information?

Please contact your account or sales executive or email HealthPlanBrokers@mgb.org.