



## BRONZE PLUS

- Annual deductible of \$250 for individuals; \$500 for families
- Copayments for most office visits
- Separate annual deductibles for Tier 2 and 3 prescription drugs: \$250 for individuals; \$500 for families

## BRONZE VALUE

- Annual deductible of \$2,000 for individuals; \$4,000 for families
- Copayments for most office visits
- Separate annual deductibles for Tier 2 and 3 prescription drugs: \$250 for individuals; \$500 for families

## BRONZE SAVER\*

- Annual deductible of \$2,000 for self-only coverage; \$4,000 for family
- Coinsurance on some services
- No copayments apply until deductibles are met

\*This plan is Health Savings Account (HSA) compatible.

## LEARN MORE

Qualifying groups seeking to cover 1-5 employees must enroll in **Commonwealth Choice** through the Massachusetts Health Connector by visiting [www.mahealthconnector.org](http://www.mahealthconnector.org) or calling **866-636-4654**.

Qualifying groups seeking to cover 6-50 employees can enroll in **Employer Choice** (purchase coverage directly from us) by contacting a BMC HealthNet Plan small business representative at [directsales@bmchp.org](mailto:directsales@bmchp.org) or by calling **617-748-6105**. They can also enroll in **Commonwealth Choice** through the Massachusetts Health Connector by visiting [www.mahealthconnector.org](http://www.mahealthconnector.org) or calling **866-636-4654**.



Want additional details or enrollment information? Have questions about *Employer Choice/ Commonwealth Choice*? Contact or have your broker contact BMC HealthNet Plan at [ChooseBMCHP.com](http://ChooseBMCHP.com) or **1-800-792-4355**.



These health plans meet Minimum Creditable Coverage standards and will satisfy the individual mandate that you have health insurance. As of January 1, 2010, the Massachusetts Health Care Reform Law requires that Massachusetts residents, eighteen (18) years and older, must have health coverage that meets the minimum creditable coverage standards set by the Commonwealth Health Insurance Connector, unless waived from the health insurance requirement based on affordability or individual hardship. For more information, call the Connector at 1-877-MA-ENROLL or visit [mahealthconnector.org](http://mahealthconnector.org).

[CHOOSEBMCHP.com](http://CHOOSEBMCHP.com) | **1-800-792-4355**

## THE POWER TO CHOOSE THE BEST PLAN FOR YOUR EMPLOYEES



► *Employer Choice and Commonwealth Choice Plans*

**BMC HealthNet Plan** offers six *Employer Choice/Commonwealth Choice* plans for small businesses with 50 or fewer employees. There is no cost sharing for preventive services for all six products. Find the plan that best meets your company's needs and budget.

Here's a quick look at the cost sharing arrangements\* of all six plans:

### GOLD

- No deductibles
- Most benefits have no coinsurance
- Lowest copayments for drugs and medical services

### SILVER PLUS

- No deductibles
- Copayments apply to certain services
- 50% coinsurance on brand-name drugs

### SILVER SAVER

- Annual deductible of \$1,000 for individuals; \$2,000 for families
- Deductible does not apply to office visits

Visit [ChooseBMCHP.com](http://ChooseBMCHP.com) to view and print benefit summaries for each of our six *Employer Choice/ Commonwealth Choice* plans.

\*See brochures for each of our products at [ChooseBMCHP.com](http://ChooseBMCHP.com) for an overview of benefits and cost sharing. For full details regarding covered benefits, limitations, and exclusions for *Employer Choice/Commonwealth Choice*, see the applicable **Evidence of Coverage (EOC)** and the appropriate plan **Schedule of Benefits** at [ChooseBMCHP.com](http://ChooseBMCHP.com). These plans meet all MA requirements for participation, rating, mandatory offer/renewal and benefit mandates. There are no pre-existing condition limitations or waiting periods. Employers must comply with MA non-discrimination standards. All covered services must be medically necessary and some require prior authorization.

**ARE YOU A SMALL BUSINESS OWNER LOOKING TO PROVIDE AFFORDABLE COVERAGE TO YOUR EMPLOYEES AND THEIR FAMILIES?**

With BMC HealthNet Plan's *Employer Choice/ Commonwealth Choice* plans, you can give your employees and their families the affordable, high-quality coverage they want and deserve while meeting the state's requirements for employer coverage.

▶ *Employer Choice* and *Commonwealth Choice* plans offer identical benefits, but differ in how you enroll. See the **Learn More** section of this brochure for details.

**COVERAGE YOU CAN COUNT ON**

BMC HealthNet Plan offers a range of *Employer Choice/ Commonwealth Choice* plans specifically designed for Massachusetts small businesses looking to offer coverage to 50 or fewer employees.

All of our *Employer Choice/ Commonwealth Choice* plans provide healthcare coverage that meets Minimal Creditable Coverage guidelines. This means you can offer your employees coverage that meets the state healthcare coverage mandate for individuals. Your employees will be able to\*:

- Select and regularly visit a doctor who understands their healthcare needs
- Visit a specialist
- Go to the hospital, including the emergency room
- Obtain prescriptions
- Access mental health and substance abuse services
- Have a routine eye exam

\*See brochures for each of our products at ChooseBMCHP.com for an overview of benefits and cost sharing. For full details regarding covered benefits, limitations, and exclusions for *Employer Choice/ Commonwealth Choice*, see the applicable **Evidence of Coverage (EOC)** and the appropriate plan **Schedule of Benefits** at ChooseBMCHP.com. These plans meet all MA requirements for participation, rating, mandatory offer/renewal and benefit mandates. There are no pre-existing condition limitations or waiting periods. Employers must comply with MA non-discrimination standards. All covered services must be medically necessary and some require prior authorization.



**EASY FOR YOU**

Whether you're choosing a plan for the first time or transitioning from another plan, BMC HealthNet Plan works with you every step of the way:

- Choosing coverage
- Signing up for a plan
- Making sure your employees with special needs find a provider who can help them manage their condition

If your employee needs to find a new healthcare provider because their provider is not currently in our **Select network**, our Member Services and Care Management teams can help identify an appropriate one. And, there are certain instances\* where the Plan may provide coverage for services provided by a new member's non-participating healthcare provider.

▶ Small businesses who qualify can get a federal tax credit up to 35% of their healthcare coverage annual premium costs (25% for tax-exempt employers).

\*Please read the Continuation of Care section of the *Employer Choice* or *Commonwealth Choice Evidence of Coverage (EOC)*. Examples where services received from your employee's existing, non-network healthcare provider might be covered include: 1) through first postpartum visit, if your employee is in her second or third trimester of pregnancy; 2) as long as required, if an employee has a terminal illness with life expectancy of 6 months or less; 3) for up to 30 days from coverage effective date, if you as an employer, don't offer any other health plan options that include an employee's physician or nurse practitioner in their network and the physician or nurse practitioner is either providing an ongoing course of treatment or is the employee's primary care provider.

**EASY FOR YOUR EMPLOYEES**

BMC HealthNet Plan maintains a dedicated customer care phone line for *Employer Choice/ Commonwealth Choice* members who have access to:

- Our outstanding Member Services representatives who are well-versed on the program's coverage and help members get the most from their benefits.
- Interpreters who are available to assist in many languages.
- A TTY number for members with hearing loss.

BMC HealthNet Plan also offers members a free 24/7 Nurse Advice phone line for medical concerns and a 24/7 behavioral health phone line for mental health and substance abuse concerns.

In addition, members can use the Plan's online self-service portal – 24/7 – to electronically submit address changes and PCP change requests or to look up claims history.

**PROGRAMS TO HELP YOUR EMPLOYEES GET AND STAY HEALTHY**

BMC HealthNet Plan can help your employees get and stay healthy with **Healthy Extras**:

- A \$100 per year reimbursement on Weight Watchers® memberships\*
- A \$200 per year reimbursement for joining a qualified health club/fitness center\*
- Eyewear discounts

Your employees can also take advantage of comprehensive **health and wellness tools** at bmchp.org:

- Our Wellness Center offers tips and tools for achieving wellness goals.
- Our Health Education Center provides information on specific diseases and conditions.
- Our Care Management Web pages address special health conditions.

\*Some limits apply. Visit ChooseBMCHP.com for details.

**ACCESS TO EXCEPTIONAL CARE**

*Employer Choice/ Commonwealth Choice* members have access to BMC HealthNet Plan's **Select network** of healthcare providers, including primary care physicians, specialists, and hospitals in the Eastern Massachusetts area.

They can also contact **BMC HealthNet Plan's Care Managers** who can help them with special health conditions, including asthma, diabetes, and pregnancy/postpartum.



**QUALITY AND MANAGED CARE EXPERTISE**

As BMC HealthNet Plan members, your employees are joining a health plan with 15 years of managed care experience, recognized nationally for quality.

BMC HealthNet Plan is one of America's **top five** Medicaid health plans, according to the National Committee for Quality Assurance's (NCQA) Medicaid Health Insurance Plan Rankings, 2011-2012. Our Medicaid plan has achieved Excellent Accreditation status from NCQA **four times in a row**.

