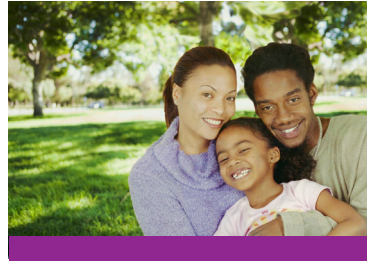


# BMC HEALTHNET PLAN BRONZE SAVER

An *Employer Choice* and *Commonwealth Choice* Plan



## COVERAGE YOU CAN COUNT ON

BMC HealthNet Plan's *Employer Choice* and *Commonwealth Choice* health plans provide affordable, high-quality healthcare coverage for eligible Massachusetts individuals, families and small business employees. As a BMC HealthNet Plan *Employer Choice* or *Commonwealth Choice* member, you can:

- Regularly visit a doctor who understands your healthcare needs
- Visit a specialist
- Go to the hospital
- Obtain prescriptions
- Access mental health and substance abuse services
- Have a routine eye exam
- See a dentist for preventive services

See the Summary of Benefits on back of this brochure for a general overview of benefits and services. For full details regarding your covered benefits and services, limitations, and exclusions, see the Evidence of Coverage (EOC) for this plan available at [bmchp.org](http://bmchp.org).

## ACCESS TO EXCEPTIONAL CARE

As a **Bronze Saver** member, you'll have access to BMC HealthNet Plan's **Select network** of primary care physicians, specialists and hospitals. Visit [ChooseBMCHP.com](http://ChooseBMCHP.com) for an up-to-date list of providers and hospitals in our **Select network**.

You'll also have access to BMC HealthNet Plan's Care Managers who can help you with special health conditions, including asthma and diabetes.

## HEALTHY EXTRAS

You'll be eligible for Healthy Extras, including fitness reimbursements, Weight Watchers® refunds and discounts, and eyewear discounts. Look on the back of this brochure for more information on Healthy Extras.

## QUALITY & MANAGED CARE EXPERTISE

When you join BMC HealthNet Plan, you'll become a member of a health plan with 15 years of managed care experience providing high-quality coverage to our members.

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.

## HEALTH SAVINGS ACCOUNT (HSA)

This plan is an HSA-compatible plan. For information on financial institutions that administer HSAs, go to [ChooseBMCHP.com](http://ChooseBMCHP.com).

## JOIN US

- **Individuals and their families** can enroll in BMC HealthNet Plan's *Commonwealth Choice* plans at [mahealthconnector.org](http://mahealthconnector.org)
- **Sole proprietors and small businesses with 50 or fewer employees** can learn more about enrollment options at [ChooseBMCHP.com](http://ChooseBMCHP.com)

## NEED HELP?

- **Not a member**, but have questions about *Employer Choice* and *Commonwealth Choice*? You or your broker can visit [ChooseBMCHP.com](http://ChooseBMCHP.com) or call us at **1-800-792-4355**
- **Already a member?** Visit [bmchp.org](http://bmchp.org) or call our Member Services team at **1-877-492-6967** (TTY **1-866-765-0055**)



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## SUMMARY OF BENEFITS AND COST SHARING

BENEFITS*	YOUR COST (Cost Sharing)
<b>Primary Care Provider Office Visits</b>	
for preventive services	\$0 copayment
to evaluate and treat illness	\$25 copayment after deductible
<b>Specialist Office Visit</b>	\$25 copayment after deductible
<b>Emergency Room (ER)</b>	\$100 copayment after deductible
<b>Preventive Dental Services for Adults and Children</b>	
Once every 12 months or 60 months depending on service	\$0
<b>Outpatient Surgery</b>	20% coinsurance after deductible
<b>Diagnostic X-Rays/Labs</b>	20% coinsurance after deductible
<b>Hospitalization</b>	20% coinsurance after deductible
<b>Prescription Drugs (Rx): 30-day supply at network retail pharmacies</b>	
Rx Tier 1	\$15 copayment after deductible
Rx Tier 2	50% coinsurance after deductible
Rx Tier 3	50% coinsurance after deductible
Discount mail service also available	
<b>Vision Services</b>	
Routine eye exam every 24 months	\$0
Non-routine exam and treatment	\$25 copayment after deductible
<b>Outpatient Mental Health</b>	\$25 copayment after deductible
<b>Deductible</b> (per benefit year) (includes Rx cost sharing)	\$2,000 self-only coverage; \$4,000 family coverage
<b>Annual Out-of-Pocket Maximum</b> (per benefit year) (includes Rx cost sharing)	\$5,000 self-coverage only; \$10,000 family coverage

### DENTAL SERVICES

- Preventive dental services once every 12 months or 60 months, depending on service

### HEALTHY EXTRAS

For details on Healthy Extras, visit [bmchp.org](http://bmchp.org)

#### Weight Watchers®

- Reimbursement of up to \$100\*\* per calendar year on your Weight Watchers® membership
- 10% discount off of Weight Watchers® regular rates

#### Fitness Reimbursements

- Get Fit! Reimbursement of up to \$200\*\* per calendar year when you join or take a class at a qualifying health club

\*\*This is the total/combined reimbursement that the subscriber plus any dependents can receive from BMC HealthNet Plan per calendar year.

#### Eyewear Discount\*\*\*

- 20% off of prescription glasses and lenses
- 15% off of contact lens fitting

\*\*\*Discounts available from Vision Services Provider network.

\*This is a summary only. See the Evidence of Coverage (EOC), including the Schedule of Benefits for your plan, available at [bmchp.org](http://bmchp.org) for full details regarding covered services, limitations, exclusions (non-covered benefits) and cost-sharing (deductibles, copayments and coinsurance), a summary of key utilization management procedures, and pharmacy programs. Please visit [ChooseBMCHP.com](http://ChooseBMCHP.com) for a summary of our privacy practices. This plan meets 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 may require prior authorization. For more information, please visit [ChooseBMCHP.com](http://ChooseBMCHP.com) or call 1-800-792-4355.



This health plan meets 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).

