

A health plan that's
right for you



Table of contents

- Allies HMO , Complete HMO Plans, Complete PPO Plus Plans
- Transition of Care Support
- New Member Transition of Care Form
- Mental and Behavioral Health
- Care Complement Benefits
- Over-the-Counter Drug Benefit
- On Demand
- Pharmacy Benefit Guide
- Enhanced Rx
- Fitness and Weight Loss Benefits
- Covered Preventive Services
- EyeMed Vision Discount
- Notice of Privacy Practices
- HMO Enrollment Form
- PPO Plus Enrollment Form

Your priorities come first
in our health plans.

So which one is
right for you?

- ▶ AlliesSM HMO
- ▶ Full network HMO
- ▶ PPO Plus



No matter which plan you pick, you'll always be treated like our most important customer



A member of Mass General Brigham, we are a local and full-service health plan with over 30 years experience

Our passion for care and customer service make us one of the highest rated plans in the nation—with a 4.5 out of 5 rating in the NCOA's Commercial Health Plan Ratings 2021. As a member of Mass General Brigham, we are committed to combining the clinical expertise of one of the world's leading health care systems with great coverage to provide you with exceptional customer care and value.

Our benefit offerings:

- ▶ Benefits include medical, pharmacy, behavioral health, wellness programs, and more.
- ▶ Virtual visits with select primary care providers, specialists, and behavioral health providers are also available. 24/7 virtual urgent care visits are always available through our service, On Demand.
- ▶ There's no copayment, deductible, or coinsurance for preventive services and preventive lab tests when delivered by an in-network provider.
- ▶ Our Care Complement package removes cost sharing for certain pain and chronic condition therapies to help you save on care your doctor prescribes. Care Complement is included with all Allies plans and some full network plan options.
- ▶ For those who get their pharmacy coverage through us, our coverage gives access to thousands of participating pharmacies nationwide, including CVS Pharmacy®, independent pharmacies, and chains like Walgreens® and RiteAid

OPTION ONE:

Allies HMO



Allies is a community-based health plan developed with Mass General Brigham clinicians to make getting world-class care easier, more convenient, less costly, and less confusing.



The Allies HMO is available to employees who live in towns in the following service area:

Acton	Chelsea	Ipswich	Milton	Salem	
Andover	Concord	Lexington	Nahant	Saugus	
Arlington	Danvers	Lincoln	Natick	Sharon	
Ashland	Dedham	Lynn	Needham	Sherborn	
Bedford	Dover	Lynnfield	Newbury	Somerville	Wayland
Belmont	Essex	Malden	Newton	Southborough	Wellesley
Beverly	Everett	Manchester	Norfolk	Stoneham	Wenham
Billerica	Foxboro	Marblehead	North Andover	Stow	Westborough
Boston	Framingham	Marlborough	North Reading	Sudbury	Weston
Boxford	Franklin	Maynard	Norwood	Swampscott	Westwood
Brookline	Georgetown	Medfield	Peabody	Tewksbury	Wilmington
Burlington	Gloucester	Medford	Quincy	Topsfield	Winchester
Byfield	Hamilton	Medway	Randolph	Wakefield	Winthrop
Cambridge	Holliston	Melrose	Reading	Walpole	Woburn
Canton	Hopkinton	Middleton	Revere	Waltham	
Carlisle	Hudson	Millis	Rowley	Watertown	

Allies covers cities and towns in Greater Boston, North and South of Boston, and the Metrowest area. Is your town on this list? If so, you qualify for an Allies plan.

The Allies HMO offers a savings on premiums compared to full network plans.

IMPORTANT NOTICE: These plans provide access to networks that are smaller than AllWays Health Partners' full commercial HMO provider network. In Allies HMO plans, members have access to network benefits only from the providers in the Allies HMO network. In Allies Choice HMO plans, members have access to network benefits only from providers in the Allies Choice HMO network, and members pay different levels of copayments, coinsurance, and/or deductibles depending on the tier of the provider delivering a covered service or supply. This plan may make changes to a provider's benefit tier annually on January 1. Please consult the [Allies HMO](#) or the [Allies Choice HMO](#) provider directory to determine which providers are included in each plan's network and, if applicable, the tier of those providers.

Here's how the Allies HMO works:

- Choose a primary care provider (PCP) affiliated with Newton-Wellesley Hospital or Salem Hospital, two leading community hospitals.
- PCPs and specialists work together to ensure that you get the care you need when you need it.
- You may also be referred to world-class academic medical centers like Mass General, Brigham and Women's Hospital, Mass Eye and Ear, McLean Hospital, and Spaulding Rehabilitation Network.
- You also have access to certain Mass General Brigham specialists (from leading academic medical centers) right in your own community.
- You'll have faster access (within three business days from PCP referral) to certain specialist appointments in Dermatology, Orthopedics, Cardiology and Gastroenterology.
- You can save money with \$0 cost sharing for virtual visits for primary care, specialists, behavioral health, and 24/7 urgent care.
- For the ultimate in convenience, you can choose a virtual first primary care option.
- No matter where you travel, you're always covered for emergency and urgent care.

The Allies Choice HMO is different than the Allies HMO in one way. Allies Choice has a tiered provider network. To learn which Allies plan is being offered to you, see the Schedule of Benefits in your enrollment information or available from your employer. To learn more about Allies, visit allies.allwayshealthpartners.org.

Is your Allies option an Allies HMO or Allies Choice HMO?

Unlike Allies HMO, the Allies Choice HMO has a tiered provider network, with Tier 1 (lower cost) and Tier 2 (higher cost). Lower cost sharing applies to Tier 1 hospitals, including their affiliated facilities. They are: Newton-Wellesley Hospital, Salem Hospital, McLean Hospital, Brigham and Women's Faulkner Hospital, Martha's Vineyard Hospital, Nantucket Cottage Hospital, and Spaulding Rehabilitation Network.

Higher cost sharing applies to the following Tier 2 hospitals and their affiliated facilities only. They are: Brigham and Women's Hospital, Massachusetts Eye and Ear Infirmiry, and Massachusetts General Hospital. Please note that the following facilities affiliated with Tier 2 hospitals have Tier 1 lower cost sharing: Brigham and Women's/Mass General Health Care – Foxborough, Mass General/North Shore Center for Outpatient Care, and Mass General Waltham

To look up any network hospital's tier, visit allwayshealthpartners.org.

In addition, the tiering only applies to these services:

- Inpatient acute medical services
- Outpatient diagnostic imaging and X-ray (including ultrasound)
- Outpatient high-tech radiology (CT scans, MRIs, etc.)
- Outpatient surgery
- Outpatient short-term rehabilitation (cardiac, physical, occupational, and speech therapy)

Which plan is right for you? Talk to Hailey.

Hailey, our transition experience specialist, can answer any questions you might have and help you decide which plan is right for you.

You can talk with Hailey by emailing allies@allwayshealth.org or by calling **1-800-776-0031**.



OPTION TWO:

Full network HMO



A full network HMO plan gives access to the providers you trust and makes the important things easy



Here's how our full network HMO plan works for you

This HMO plan option provides access to an expansive network of doctors and specialists. (See right.)

With an HMO, your care starts with your primary care provider (PCP), who will treat you when you're sick or hurt, and for routine care. When you travel, you're always covered for emergency and urgent care.

When you need specialty care, your PCP will refer you to specialists to help ensure coordinated care.

Referrals are needed for certain specialty services. Some services or procedures may require a prior authorization from us.

Some full network HMO plans also include hospital tiering with different levels of cost sharing. See the Schedule of Benefits available from your employer.

Our expansive HMO network includes access to leading academic and teaching hospitals, including...

- Massachusetts General Hospital
- Brigham and Women's Hospital
- South Shore Hospital
- Beth Israel Deaconess Medical Center
- MetroWest Medical Center
- Lahey Hospital and Medical Center
- Salem Hospital
- Saint Vincent Hospital
- Beth Israel Deaconess Hospital - Plymouth

... and many more. To find doctors in our full network HMO, go to allwayshealthpartners.org. And, if you don't see your provider in our directory, please let us know.

OPTION THREE:

PPO Plus



A PPO Plus plan gives you the freedom to see any provider you wish



With the PPO Plus plan, you have access to a larger national network of providers

With the PPO Plus plan, you're covered for care across the country—from the AllWays Health Partners network locally and through a leading national network that features over a million providers. You can see any provider, and your cost sharing will depend on whether they are in or out-of-network.

You don't need referrals to see specialists. Certain services or procedures may require a prior authorization from us.

No matter where you travel, you're always covered for emergency and urgent care.

About the PPO Plus network

With our PPO Plus plan, you're covered by the AllWays Health Partners provider network in Massachusetts and New Hampshire. Some PPO plans also include hospital tiering with different levels of cost sharing. To find out which PPO Plus plan is available to you, please refer to your plan documents or ask your employer. Outside of MA and NH, you'll enjoy access to the UnitedHealthcare Options PPO network of over one million providers nationwide.

To find doctors in our PPO Plus network, go to allwayshealthpartners.org.

We're here to help, even before you're a member

Do you have any upcoming provider visits, treatments, or procedures that will start or continue into the month you become a member? Questions about your prescriptions or therapies? Call us at **866-643-8392**, or email **customerservice@allwayshealth.org** to get the answers you need.

Take the next step

Ready to make a selection? Follow up with your employer or HR department. If you aren't sure or need more information to help you choose which plan is right for you, connect with Hailey, our transition experience specialist, via email at **allies@allwayshealth.org** or call **1-800-776-0031**.

Once you become a member

We welcome you to join our exclusive online member community at **allwayscommunity.org**, where you can share thoughts and ideas on everything from products and services to better ways to help you access the care you need. Your insights help us to make AllWays Health Partners better for you and other members. We always want to know what's important to you.



allwayshealthpartners.org



Member of  Mass General Brigham

AllWays Health Partners includes AllWays Health Partners, Inc., and AllWays Health Partners Insurance Company.

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We're here to ensure a smooth transition to your new plan – even before your coverage starts.



We want to ensure that your care is uninterrupted and that you get all the services you need on day one.

Our trained professionals are ready to help

- Are you or a family member planning for an upcoming treatment, procedure, or surgery?
- Taking prescription drugs that require special authorization?
- Relying on durable medical equipment (DME), such as a wheelchair or sleep apnea device (CPAP)?
- Undergoing care for an illness, chronic condition, behavioral health, or special need?

Our specially trained Customer Service Professionals are available to discuss any current or planned health care needs you or your family may have.

We can help get existing approvals from your current insurer transferred to us, find you providers in our network, and ensure the continuation of your care. And don't worry—any info you share is strictly confidential. The privacy of your personal health information is very important to us.

Are you looking for providers?

To find doctors in our network, go to allwayshealthpartners.org/new and use our DoctorSmartSM tool to search among the huge network of providers available to you. If you don't see your provider in our directory, just ask us.



Of course, you can always call us at **866-643-8392**. We look forward to serving you.

Helpful self-service tools are also found on our website

Many of your questions already have answers at allwayshealthpartners.org/new

There you can:

- Find a doctor on our DoctorSmart search tool
- Look up your drug tier
- Discover member perks
- Learn more about AllWays Health Partners

New Member Transition of Care Form

We're here to help! Our Customer Service Professionals will work with you and your providers so you can access medically necessary services. For example: medication infusions, scheduled surgery.

PRINT FORM

CLEAR FORM

First and last name

Phone

Email address

Member ID number (if received)

Name of employer

To be eligible for consideration, you or your family member must:

The New Member Transition of Care Form will help us get the information we need to make your transition to AllWays Health Partners as smooth as possible.

Click the link below to view and download the form.

[New Member Transition of Care Form](#)

You can return the completed form by email, mail, or fax. A Customer Service Professional will reach out to help you to make a smooth transition to your new plan. If you have questions, you can call Customer Service directly at **866-643-8392 (Option 1)**.

Email: You can email this form to **brokeraccountsupport@allwayshealth.org**

Mail: AllWays Health Partners
Customer Service
399 Revolution Dr. Suite 820
Somerville MA 02145

Fax: 617-586-1799

Do you give us permission to leave a message? YES NO

Member signature (Parent or legal guardian for members under age 18)

Date

Return completed form by email, mail, or fax. A Customer Service Professional will get back to you to help you make a smooth transition. If you have questions, call Customer Service at **866-643-8392 (Option 1)**.

Email: You can email this form to **customerservice@allwayshealth.org**

Mail: AllWays Health Partners
Customer Service
399 Revolution Dr. Suite 820
Somerville MA 02145

Fax: 617-586-1799

**Examples of chronic medical condition that typically are not eligible for Transition of Care program (unless the condition is not stable OR the member receives IV medication infusions for a chronic condition) include arthritis, asthma, allergies, diabetes, hypertension, and COPD/emphysema.*

Get help managing your mental and behavioral health care



These resources can help you find the right care for your behavioral health needs, including provider search tools, online wellness resources, and how to access personalized help.

Search for behavioral health care providers

Visit allways.sapphirecareselect.com for the AllWays Health Partners provider directory. To find providers covered by your plan, use the Network drop-down list in the top right to choose the plan name that matches the one on your member ID card. Then use the “Browse by Category” tool to find psychiatrists, psychologists, social workers, and more in your area.

Access care and helpful resources

Optum is our partner in providing behavioral health care. Their Live and Work Well website offers self-care tools and answers to common mental health questions. You can also use their virtual visit platform to connect with many providers who can see patients both online and in-person.

Go to www.liveandworkwell.com, and create an account on the site with your member ID number to see personalized benefits or *browse as a guest* with the access code **ALLWAYSMA**.

Connect with a therapist or psychiatrist virtually with Talkspace virtual providers

Many AllWays Health Partners members have access to Talkspace, a virtual provider group that makes it easy to access virtual therapy or psychiatry online or through the Talkspace mobile app.

To see if your AllWays Health Partners plan covers access to Talkspace, visit www.talkspace.com/connect and choose the *Get Started* button under “Use my Insurance Benefits.”

Connect with support to manage your care remotely

If you need support when it comes to managing your behavioral health care, you can reach out to the licensed care managers on the Optum Telephonic Behavioral Health Care Management team.

They will conduct an assessment to help remotely coordinate your individual care needs.

Connect with the team at care.coordination@optum.com or by calling the number on the back of your ID card and asking about behavioral health care management.

More ways to support your health and wellbeing

Talk to a Health Coach about your wellness goals

If you're looking for some personal support to help you achieve your wellness goals, our Health Coaches are here to help. For no additional cost, you can talk to a health coach about any health and wellness topic that's on your mind, like how to eat more vegetables, quit tobacco, or integrate walking into your daily routine.

Just email us at HealthandWellness@allwayshealth.org or call the Customer Service number on the back of your member ID card and ask to talk to a Health Coach.

Get help addressing your complex care needs

The Your Care Circle (YCC) program is designed to help members with complex, overlapping care needs manage their physical and behavioral health at no additional cost. A team of behavioral health care managers and registered nurses will work with you to develop an appropriate care plan to address your health challenges, coordinate communication among your providers, and ensure your best health.

The YCC program also includes Peer Recovery Coaches who have lived experience with substance use disorder and can guide and support members before, during, after, and instead of treatment.

You can self-refer to this program when you email yourcarecircle@allwayshealth.org or call the number on the back of your member ID card and ask about the Your Care Circle care management program.

Get a personalized wellness plan with CaféWell

CaféWell is an interactive platform featuring a health assessment and wellness recommendations personalized to you. You'll also have access to walking challenges that connect to your personal fitness tracker, healthy living blogs written by experts, and interactive webinars. You can get started with your CaféWell account by signing in to the AllWays Member portal at allwaysmember.org.

Join our virtual wellness workshops

Our free community webinar series is focused on promoting health and wellness for the community. These workshops are open for anyone to join, not just AllWays Health Partners members. You can watch past recordings of workshops on topics like recovering from burnout, healthy eating, mindful parenting, and more at go.allwayshealthpartners.org/webinar-series.



Visit allwayshealthpartners.org/members/behavioral-health for more mental and behavioral health resources.

You have easier access to pain and chronic condition therapies at no cost to you



Care Complement benefits* make it easier for you to access the care your doctor prescribes by removing cost sharing for certain services and therapies.

Save money on treatments that lead to a healthier you

These medications and therapies are included:

- \$0 cost for first six acupuncture visits (20 visit limit)
- \$0 cost for the first six chiropractor visits
- \$0 cost for the first six physical therapy or occupational therapy visits
- \$0 cost for 11 medications that treat common chronic conditions like high cholesterol, diabetes, high blood pressure, heart disease, and depression
- \$0 cost for cardiac rehabilitation therapy
- \$0 cost for certain services that reduce the risk of complications from diabetes, including an annual routine eye exam, diabetic education, and nutritional counseling

Use these benefits to enhance your overall well-being

No cost for substance use disorder therapy

- \$0 cost for the medication-assisted therapy (MAT) office visits
- \$0 cost for certain MAT prescriptions
- Free recovery coaching for members who have developed substance use disorders

Chronic condition medications with no cost

Depression

Fluoxetine 10, 20mg capsules

Diabetes

Metformin, regular release tablets

High cholesterol

Atorvastatin tablets
Simvastatin tablets

Heart and high blood pressure

Amlodipine besylate tablets
Atenolol tablets
Furosemide tablets
Lisinopril tablets
Losartan tablets
Hydrochlorothiazide 25mg and 50mg tablets
12.5 mg capsules
Metoprolol succinate SR tablets

*These benefits are only included in plans with Care Complement in the name of the plan.

Save money at the pharmacy every day

- Members pay nothing, or only their plan's cost sharing, for many routine over-the-counter (OTC) medications with a prescription at any in-network pharmacy
- Savings on a 90-day supply of certain maintenance medications through mail order or at local participating pharmacies

Care Management teams to help those with chronic care conditions

- Our care management teams include nurses, doctors, pharmacists, social care managers, and behavioral health experts. These teams work together to deliver care that is personalized to your unique needs.

To get full details about your plan, log in to **allwaysmember.org** or call the customer service number on the back of your member ID card.

Included in your plan:
Real savings on your
medicine cabinet essentials



Pay nothing, or only your plan's cost sharing, for many routine Over-the-Counter (OTC) drugs with a prescription.

Using your OTC benefit is easy

Here's how you do it: Get a prescription for any of the products below (for a supply of up to 90 days for select drugs) from your provider. Bring your prescription to any in-network pharmacy. Your pharmacist will make sure you get the right product and price. Please note that quantity limits and age limits apply and generic products will be prescribed when available.

OTC drugs you can get at **no cost** with a prescription:

Therapy	Drug Class	Drug Name
Cough, Cold, and Allergy	Antitussive	guaifenesin DM (Robitussin DM) syrup, liquid
	Expectorant	guaifenesin (Robitussin) syrup, liquid
	Nasal Decongestant	pseudoephedrine (Sudafed) syrup ¹ , tablets
	Antihistamines	diphenhydramine (Benadryl) liquid, capsules, syrup chlorpheniramine (Chlor-Trimeton) tablets, syrup
DME Products	Humidifiers/Vaporizers	Humidifiers and vaporizers ³
	Asthma	Peak flow meters
		Spacers
Diabetes	Select diabetic testing supplies ⁴	

OTC drugs you can get at **tier one** cost sharing with a prescription:

Therapy	Drug Class	Drug Name
Cough, Cold, and Allergy	Antihistamines	loratadine (Claritin) tablets, syrup ² , ODT
		loratadine-pseudoephedrine (Claritin-D) tablets
		cetirizine (Zyrtec) tablets, syrup ² , chewables
		cetirizine-pseudoephedrine (Zyrtec-D) tablets
	Nasal Sprays	triamcinolone (Nasacort Allergy 24hr) nasal spray
		cromolyn (Nasal crom) nasal spray
		saline (Ocean Nasal) spray 0.65%
		budesonide (Rhinocort) nasal allergy spr
		fluticasone (Flonase) nasal spray

The brand name listed in parenthesis is for reference only, brand name medications are not covered when there is a generic available.

Back to table of contents

Therapy	Drug Class	Drug Name
Dermatologicals	Antifungals	clotrimazole cream, vaginal cream/inserts
		miconazole cream, vaginal cream/inserts
		tolnaftate cream, gel, solution, aerosol
	Dry Skin Preparations	AmLactin 12% lotion
	Poison Ivy	hydrocortisone cream, lotion, ointment, solutions
Nutrients	Vitamins (generic only)	Prenatal vitamin tablets 27/1 mg, 27/0.8 mg, 28/0.8 mg
		Multi-vitamins liquid, chewables, drops
		Multi-vitamins with iron tablets, liquid, chewables, drop
		niacin (Nictonic Acid)
		vitamin B6 (Pyridoxine) tablets
	Minerals	magnesium oxide
		calcium carbonate and citrate tablets and chewables
		calcium carbonate and citrate + vitamin D tablets
		oyster shell calcium tablets
		oyster shell calcium + vitamin D tablets
potassium-sodium phosphate (Neutra-phos-K) powder		
Trace Elements	ferrous sulfate tablets, elixer ¹ , drops ²	
	ferrous gluconate tablets	
Electrolytes	Electrolyte solutions ²	
Gastrointestinal	Antiparasites	pinworm (Reese's Pinworm) tablet, suspension
	H2-blockers	famotidine (Pepcid) tablets
		cimetidine (Tagamet) tablets
	Laxatives	polyethylene glycol 3350 (Miralax OTC) oral powder
		magnesium citrate
		psyllium (Metamucil) powder 28.3%, 30.9%, 58.6%
		bisacodyl (Ducolax) tablets, suppositories
		saline (Fleet) enema
	senna (Senokot) tablets 8.6 mg	
Pain	Anti-inflammatory	ibuprofen suspension 100 mg/5 mL
Respiratory	Diluents	sodium chloride
Ophthalmic Preparations	Dry Eye	artificial tears eye drops
	Allergy	ketotifen (Zaditor OTC) 0.025% drops

The brand name listed in parenthesis is for reference only, brand name medications are not covered when there is a generic available.



Check your plan documents on allwaysmember.org for your specific cost-sharing amounts

¹ Age limit applies: covered for children under 12 years old. ² Age limit applies: covered for children under 6 years old. ³ For a list of specific covered products, please contact AllWays Health Partners Customer Service. ⁴ For a list of covered diabetic testing supplies, please contact AllWays Health Partners Customer Service.

Easy access to high-quality, virtual urgent care 24/7 right from your tablet, smart phone, or computer



On Demand makes it easy for you to get high-quality, virtual urgent care for minor illness and injuries without the need for travel or referrals. You can do it 24/7, and right from the comfort of your home, office, or anywhere in the U.S.

It's convenient, stress-free, and available 24/7

The provider you see during your interactive video visit can diagnose, offer treatment, and even send a prescription to an in-network pharmacy, if necessary. For members three and older, for issues like:

- Upper respiratory infections/flu/cough/cold
- Sinus symptoms
- Eye irritation/conjunctivitis
- Allergies
- Rashes
- Urinary symptoms (painful urination, yeast infections—adults only)
- Other minor injuries and minor illness

On Demand is NOT for medical emergencies. For medical emergencies, call 911.

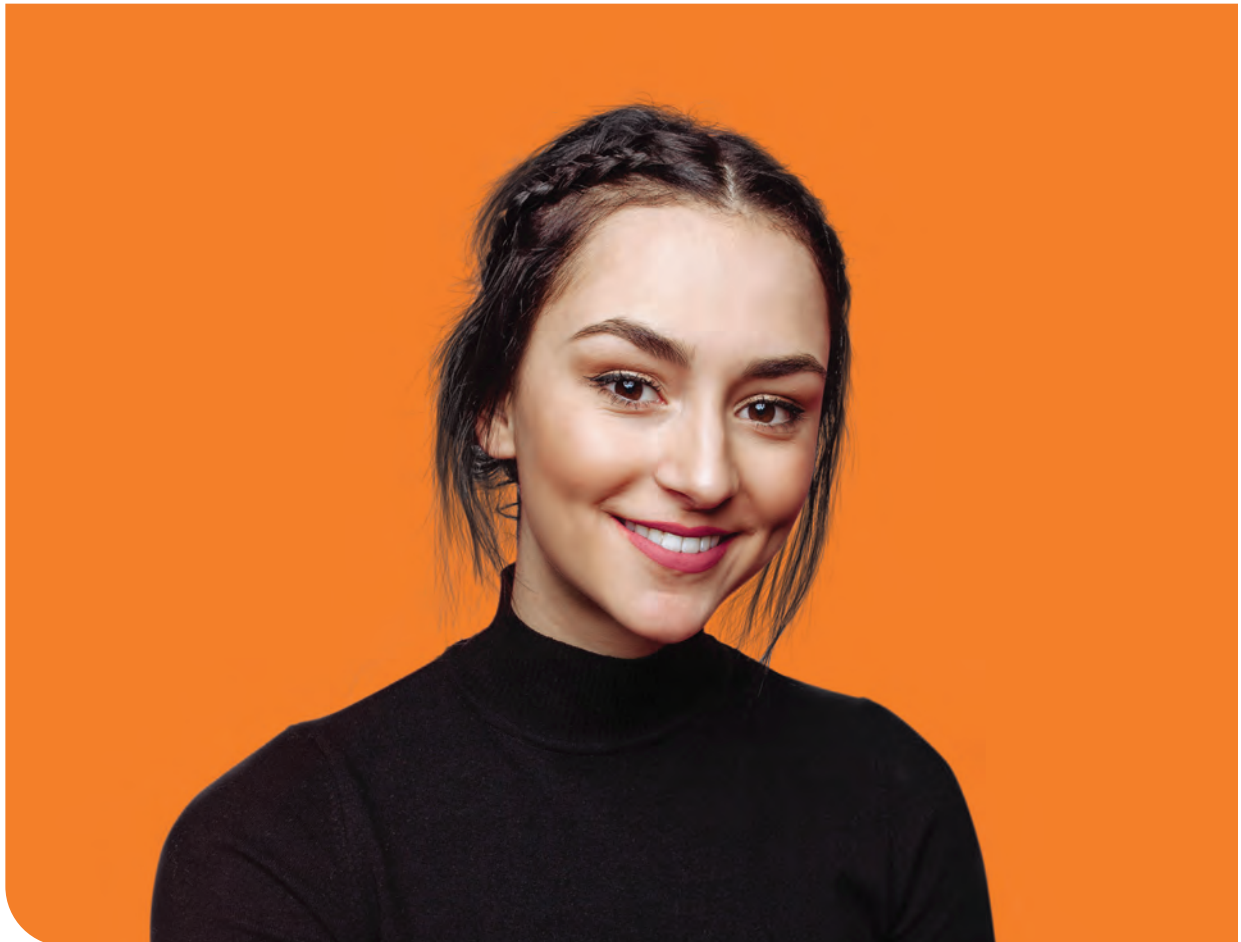
How does it work?

Access the secure On Demand website or app via allwaysmember.org. For your first visit, you'll need to create an account with your member ID number. Registration is quick and 100% secure. Once you're registered, you'll be able to see the next available provider.



FlexRxSM 6-Tier

Pharmacy Benefit Guide





Welcome to FlexRx

The AllWays Health Partners FlexRxSM program is built for choice, savings, and convenience with benefits including:

- Low-cost drug tier for many common medications
- Coverage for many common over-the-counter drugs
- Savings on a 90-day supply of certain maintenance medications at participating retail pharmacies or by mail-order, depending on your benefit plan
- Online tools to help you manage your plan and save money

Questions?

Members can log in to allwaysmember.org at any time to find complete information about their pharmacy benefits:

- Searchable drug lookup tool
- A list of medications in the Maintenance 90 program
- Information about mail order
- And more

Not a member yet? Visit allwayshealthpartners.org for more information and to access our drug lookup tool.

AllWays Health Partners Customer Service

To speak with a Customer Service professional, please call the number on the back of your member ID card.

Representatives are available Monday through Friday 8:00 AM to 6:00 PM, Thursday 8:00 AM to 8:00 PM. Service is available 24/7 for pharmacy issues. Just select “pharmacy” when prompted.

The proper names of medications mentioned in this publication are used for informational purposes only and are trademarks or registered trademarks of their respective companies. FlexRx applies to commercial and Health Connector plans.

Our Pharmacy Benefit

We partner with CVS Caremark® to manage pharmacy benefits for our members.

AllWays Health Partners and CVS Caremark offer online tools to help you find pharmacies, estimate your costs, search for medications, and more.

Filling prescriptions

You may fill your prescription medications at any pharmacy in our national network, which comprises tens of thousands of pharmacies including independent pharmacies and major chain pharmacies such as CVS Pharmacy, Walgreens®, Rite Aid®, Stop & Shop Pharmacy®, Walmart Pharmacy®, and more.

Covered medications

Use the AllWays Health Partners drug lookup tool online to check if a medication is covered.

Our Pharmacy Formulary

Our pharmacy formulary is the complete list of prescription medications covered under your pharmacy benefit. It was developed by doctors, pharmacists, and other experts who review clinical drug studies and determine the most reasonably priced medications that have been approved as safe and effective by the Food and Drug Administration (FDA).

You can search our formulary online. If you have questions about non-covered medications, call Customer Service.

6-Tier Placement

The AllWays Health Partners pharmacy benefit places all covered drugs into tiers.

TIER 1 — includes lower cost generic medications. Generic drugs contain the same active ingredients as their brand name counterparts.

TIER 2 — includes other generics and may include some brand name medications.

TIER 3 — includes high costing generic and preferred brand name medications.

TIER 4 — includes higher cost generics and non-preferred brand name medications.

TIER 5 — includes generic specialty and preferred specialty medications.

TIER 6 — includes non-preferred specialty medications.

Each tier has a level of cost sharing. **Cost sharing** is the amount you have to pay for your medical services, medications, or equipment. Cost sharing may include deductibles, coinsurance, and copayments. Premiums and costs for non-network providers or non-covered services are not part of cost sharing. Members can log in to allwaysmember.org to view plan documents and learn about cost-sharing responsibilities.

Doctors and pharmacists have reviewed all medications in our formulary for safety, quality, and effectiveness. You can determine what tier your drug is in by using the drug lookup tool available online.



How You Can Help Reduce Your Costs

Maintenance 90-day Supply

If you take certain maintenance medications, the AllWays Health Partners Maintenance 90 program requires you to get a 90-day supply to ensure you always have your most important medications on hand. Your cost sharing may also be lower when you fill a 90-day prescription. Maintenance medications treat chronic conditions such as high blood pressure and diabetes. Short-term medications do (for example, pain medication and antibiotics) not have this requirement.

To see if a medication is considered a maintenance medication, use the drug lookup tool.

How can I get a 90-day supply of my maintenance medication?

Access90

Fill your 90-day prescriptions at your local participating pharmacy with our Access90 program. Simply bring a 90-day prescription for your maintenance medication to a participating retail pharmacy.

Mail order

Sign up for a 90-day supply through the mail on allwaysmember.org.

Over-the-counter drug benefit

Some over-the-counter medications, including cough syrup, allergy medication, and nicotine replacements, are covered by your AllWays Health Partners pharmacy benefit with a valid prescription from your doctor.

Cost sharing may vary depending on the drug prescribed. Members can check allwaysmember.org to see which over-the-counter medications are covered along with cost-sharing information.

Therapeutic Class

A “therapeutic class” is a group of medications used to treat the same medical condition. For example, medications that treat high cholesterol are all in the same therapeutic class.

When a brand name medication does not have a covered generic equivalent, it may have covered generic alternatives in the same therapeutic class. Generic alternatives contain different active ingredients but treat the same condition.

The Value of Generic Medications

Mandatory generic substitution*

Generic medications have the same active ingredients, quality, and results as brand name drugs, and they are approved by the U.S. Food and Drug Administration (FDA). Inactive ingredients like colorings and fillers, which also must meet FDA guidelines, are usually the only differences between generic and brand name medications. For this reason, our mandatory generic substitution requires you to try a generic medication before the brand name medication is considered for coverage.

Prior authorization is required for an exception to our mandatory generic medication pharmacy benefit.

Our Pharmacy Management Program

AllWays Health Partners has programs in place to help our members use medications safely and effectively. These programs are managed by practicing doctors and pharmacists.

Prior authorization

Prior authorization (a clinical review of medical necessity) is sometimes required before a specific medication may be dispensed. We review and use criteria developed and approved by the AllWays Health Partners Pharmacy & Therapeutics Committee.

The clinical review process may take up to 48 hours after we have received complete information. We will notify both you and your doctor as soon as we make a decision.

You can find out if your medication requires prior authorization by searching our covered drug list online.

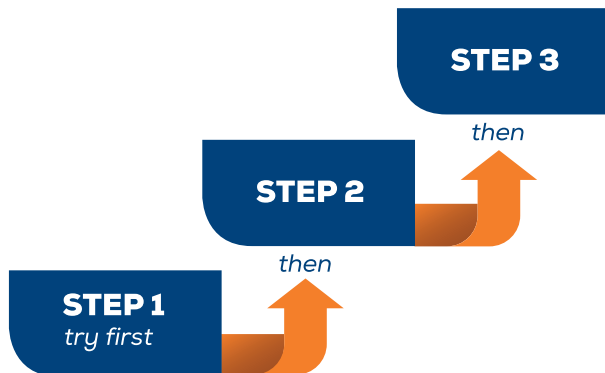
Quantity limit

AllWays Health Partners may limit the number of units (tablet, capsule, or liquid) for a specific medication you may receive in a given time period to ensure safe and appropriate use. These limits are based on recommended dosing schedules and the availability of several strengths of the medication. Quantity limits automatically apply at the time the prescriptions are purchased. AllWays Health Partners requires prior authorization for exceptions to our quantity limits.

*Exceptions may apply.

Step therapy program

The step therapy program helps provide you with the most appropriate and affordable drug treatment plan. Before filling a prescription for certain costly second-step medications, we require that you first try an effective but less expensive first-step medication.



If you have already tried a first-step medication and your doctor prescribes a second-step treatment, we automatically approve coverage for that alternative in most cases.

If your prescription records do not indicate the use of a first-step medication, or if you are a newly enrolled member with no prescription history, your doctor may contact AllWays Health Partners to request an exception to the step therapy program

Specialty pharmacy program

We partner with a select group of specialty pharmacies to provide medications for complex medical conditions. Search the covered drug list online to see what medications are included in the specialty pharmacy program.

Specialty pharmacies have expertise in the delivery of the medications they provide and offer services not available at a traditional retail pharmacy including:

- All necessary medication and supplies for administration (at no additional charge)
- Convenient delivery options to your home or office with overnight or same-day delivery available when medically necessary
- 24/7 access to nurses, pharmacists, and care coordinators specializing in the treatment of your condition
- Refill reminders by phone to help you stay on your medication
- Educational resources regarding medication use, side effects, and injection administration

If your prescription is included in the specialty pharmacy program, please contact your doctor, who can submit a new prescription referral form to the correct specialty pharmacy. For additional assistance, or if you have any questions about our specialty pharmacy program, please call Customer Service.

Exclusions

AllWays Health Partners covers medications only that are medically necessary for preventive care or for treating illness, injury, or pregnancy. The following medications or services are excluded from our covered drug list:

- Dietary supplements¹
- Therapeutic devices or appliances (except where noted)¹
- Biologicals, immunization agents, or vaccines obtained through the medical benefit
- Blood or blood plasma²
- Medications which are to be taken by or administered to an individual, in whole or in part, while he or she is a patient in a licensed Hospital, nursing home, or similar institution which operates on its premises or allows to be operated on its premises, a facility for dispensing pharmaceuticals
- Charges for administration or injection of any drug²
- If an FDA approved generic drug is available the brand name equivalent is not covered
- Progesterone supplements
- Fluoride supplements /vitamins for members more than age 13 except for prenatal vitamins
- Drugs whose sole purpose is to promote or stimulate hair growth or for cosmetic purposes only
- Drugs labeled “Caution—limited by federal law to investigational use” or experimental drugs even though a charge is made to the individual

¹ Covered in certain circumstances under the durable medical equipment (DME) benefit.

² Covered under the medical benefit.

- Medications for which the cost is recoverable under Worker's Compensation or Occupational Disease Law or any state or government agency or medication furnished by any other drug or medical service for which no charge is made to the member
- Any prescription refilled in excess of the number of refills specified by the physician or any refill dispensed after one year from the physician's original order
- Drugs that are not FDA approved
- Schedule 1 controlled substances (for example, marijuana)

Exceptions

You or your provider may request an exception for coverage of any drug that is excluded or limited. Exceptions will be granted only for clinical reasons. For additional information, call AllWays Health Partners Customer Service.

Frequently Asked Questions

Can I go only to CVS pharmacies to fill prescriptions?

The CVS Caremark network comprises tens of thousands of pharmacies nationwide including independent pharmacies and major chain pharmacies such as CVS Pharmacy, Walgreens, Rite Aid, Stop & Shop Pharmacy, Walmart Pharmacy, and more.

My doctor has prescribed a medication that is not listed in the AllWays Health Partners covered drug list. What should my doctor do to request an exception?

When a covered alternative is not medically appropriate for you, your doctor may request coverage of a non-covered medication. CVS Caremark will review the request and determine if the request meets medical necessity.

How does AllWays Health Partners decide what medications to cover?

Our Pharmacy & Therapeutics (P&T) Committee is responsible for reviewing medications included in our covered drug list. The committee of doctors and pharmacists reviews medications for clinical appropriateness, safety, and side effects.

How soon do new medications approved by the FDA become available to AllWays Health Partners members?

Newly approved medications are reviewed by the AllWays Health Partners P&T Committee regularly. During the period when a new medication is being reviewed, it is not covered by your pharmacy benefit; however, as with other non-covered medications, your doctor can request an exception when there is no other medically appropriate alternative available to you.

How do I find out which tier my medication is in?

Search our covered drug list online to see what tier your medications are in.

How do I refill a prescription while on vacation?

If you are traveling in the U.S., ask your doctor for a prescription to take with you. Fill it at any participating pharmacy in our nationwide network.

Members can use the find-a-doctor tool on allwaysmember.org to search for a participating pharmacy.

Is my pharmacy benefit available across the U.S.?

Your pharmacy benefit is available in all 50 states. You can fill your prescriptions at any participating pharmacy in our nationwide network.



allwayshealthpartners.org



AllWays Health Partners includes AllWays Health Partners, Inc., and AllWays Health Partners Insurance Company.

The Enhanced Preventive Drug Benefit

A special benefit for members enrolled in an HSA-compliant plan

Your prescription drug coverage includes an expanded list of preventive medications that are not subject to your deductible. This lets you get the most out of your FlexRxSM benefits from your very first day of coverage. When you fill a prescription for the drugs listed below, you'll pay only the applicable copay and/or coinsurance, depending on your plan.

You can get the most up-to-date list of qualifying drugs—along with personalized cost-sharing information—on the member portal at allwaysmember.org.

Drug List

Anaphylaxis/Adrenergic Agents

Epinephrine Injections
Epinephrine Solutions

Anticoagulants

Aspirin/Dipyridamole Cap
Eliquis Tab

Enoxaparin Inj
Warfarin Tab

Xarelto Tab

Antimalarial

Atovaquone-Proguanil
Chloroquine Phosphate

Mefloquine
Primaquine Phosphate

Antineoplastics

Anastrozole
Exemestane

Letrozole
Tamoxifen Citrate

Antisera

Cytomegalovirus Immune Globulin
Hepatitis B Immune Globulin
Immune Globulin

Oseltamivir Phosphate
Rabies Immune Globulin
Relenza Diskhaler

Rimantadine Hydrochloride
Varicella-Zoster Immune Globulin

Continued

Drug List

Asthma/COPD

Advair HFA Aer	Daliresp Tab	Symbicort Aer
Albuterol HFA Aer	Flovent Disk Aer	Terbutaline Tab
Albuterol Neb	Flovent HFA Aer	Theo-24 Cap CR
Albuterol Syp	Formoterol Neb	Theophylline Sol
Albuterol Tab	Incruse Ellipta Inh	Theophylline Tab ER
Albuterol Tab ER	Ipratropium Sol Inh	Trelegy Ellipta
Anoro Ellipta Aer	Ipratropium/Albuterol Sol	Zafirlukast Tab
Arcapta Cap	Metaproterenol Tab	
Arnuity Ellipta Inh	Montelukast Chew	
Atrovent HFA Aer	Pulmicort Inh	
Breo Ellipta Inh	Qvar Redihaler	
Brovana Neb	Serevent Dis Aer	
Budesonide Sus	Spiriva Aer	
Combivent Aer	Stiolto Aer	
Cromolyn Sod Neb	Striverdi Aer	

Depression

Amitriptyline Tab	Fluoxetine Cap	Phenelzine Tab
Amoxapine Tab	Fluvoxamine Tab	Protriptyline Tab
Bupropion Tab	Imipramine Hcl Tab	Sertraline Tab
Bupropion Tab ER	Imipramine Pam Cap	Tranylcypromine Tab
Citalopram Tab	Lithium Carbonate Cap	Trazodone Tab
Clomipramine Cap	Maprotiline Tab	Trimipramine Cap
Desipramine Tab	Mirtazapine Tab	Venlafaxine Cap ER
Desvenlafaxine Tab ER	Mirtazapine Tab ODT	Venlafaxine Tab
Doxepin hcl Cap	Nefazodone Tab	
Duloxetine Cap	Nortriptyline Cap	
Escitalopram Sol	Paroxetine	

Diabetes

Acetone (Urine) Test Strip	Glipizide Tab	Insulin Pen Needles
Alogliptin Tab	Glipizide/Metformin Tab	Insulin Syringe/Needles
Alogliptin/Metformin Tab	Glucose Blood Test Strip	Humalog Inj
Alogliptin/Pioglitazone Tab	Glucose Urine Test-	Humalog KwikPen Inj
Blood Glucose Calibration-Liquid	(Glucose Oxidase) Strip	Humalog Mix Susp
Blood Glucose Monitoring Kit	Glyburide micronized Tab	Humulin Inj
with Device	Glyburide Tab	Humulin N Inj
Farxiga	Glyburide/Metformin Tab	Humulin R Inj
Glimepiride Tab	Glyxambi Tab	Janumet Tab
Glipizide ER Tab	Insulin Infusion Disposable Pump Kit	Janumet XR Tab

Drug List

Diabetes (continued)

Januvia Tab	Metformin Tab	Toujeo Solostar Inj
Jardiance Tab	Metformin Tab ER	Trulicity Inj
Lancets	Nateglinide Tab	Urine Glucose- Ketones Test Strips
Lancet Devices	Ozempic Inj	Victoza Inj
Lancets Kit	Pioglitazone Tab	Xigduo
Lancets Misc.	Repaglinide Tab	
Lantus Inj	Synjardy tab	
Lantus Inj Solostar	Synjardy XR tab	

Folic Acid

Folic Acid

High Blood Pressure

Acebutolol Cap	Hydralazine Tab	Pindolol Tab
Amlodipine Tab	Irbesartan/Hctz Tab	Prazosin Hcl Cap
Amlodipine/Atorvastatin Tab	Irbesartan Tab	Propranolol Cap ER
Amlodipine/Benazpril Cap	Isradipine Cap	Propranolol Tab
Amlodipine/Valsartan/Hctz Tab	Labetalol Tab	Propranolol/Hctz Tab
Atenolol Tab	Lisinopril Tab	Quinapril Tab
Atenolol/Chlorthalidone Tab	Lisinopril/Hctz Tab	Quinapril/Hctz Tab
Benazepril Tab	Losartan Pot Tab	Ramipril Cap
Benazepril/Hctz Tab	Losartan/Hct Tab	Sotalol Hcl Tab
Betaxolol Tab	Matzim LA Tab	Taztia Xt Cap
Bisoprol Fum Tab	Methyldopa Tab	Telmisartan Tab
Bisoprolol/Hctz Tab	Methyldopa/Hctz Tab	Telmisartan/Amlodipine Tab
Bystolic Tab	Metoprol Succinate Tab ER	Telmisartan/Hctz Tab
Candesartan Tab	Metoprol Tartrate Tab	Terazosin Cap
Candesartan/Hctz Tab	Metoprolol/Hctz Tab	Trandolapril Tab
Captopril Tab	Metyrosine Cap	Trandolapril/Verapamil Tab ER
Cartia Xt Cap	Minoxidil Tab	Valsartan Tab
Carvedilol Tab	Moexipril Tab	Valsartan/Hctz Tab
Clonidine Tab	Moexipril/Hctz Tab	Verapamil Tab
Diltiazem Cap ER	Nadolol Tab	
Diltiazem Tab	Nicardipine Cap	
Doxazosin Tab	Nifedipine Cap	
Enalapril Tab	Nifedipine Tab ER	
Enalapril/Hctz Tab	Nimodipine Cap	
Eplerenone Tab	Nisoldipine Tab ER	
Eprosartan Tab	Olmесartan Tab	
Felodipine Tab ER	Olmесartan/Amlodipine/Hctz Tab	
Fosinopril Tab	Olmесartan/Hctz Tab	
Fosinopril/Hctz Tab	Perindopril Tab	
Guanfacine Tab	Phenoxybenza Cap	

Continued

Drug List (continued)

High Cholesterol

Atorvastatin Tab	Fenofibrate Cap	Niacin ER Tab
Cholestyramine Pow	Fenofibric Cap	Pravastatin Tab
Colesevelam Tab	Fluvastatin Cap	Rosuvastatin Tab
Colestipol Tab	Fluvastatin ER tab	Simvastatin Tab
Ezetimibe Tab	Gemfibrozil Tab	
	Lovastatin Tab	

Osteoporosis

Alendronate Tab	Ibandronate Tab	Tymlos Inj
Calcitonin Spr	Raloxifene Tab	Zoledronic Inj
Forteo Sol	Risedronate Tab	

Prenatal Vitamins

Generic Prenatal Vitamins

Vaccines

Anthrax Vaccine	Human Papillomavirus (HPV)	Rabies Vaccine
Cholera Vaccine	Influenza Virus	Rotavirus Vaccine
Diph, Acellular Pert & Tet Tox Inj	Influenza Virus Vaccine	Tetanus-Diphtheria Toxoids (TD)
Diph-Tetanus	Japanese Encephalitis Vaccine	Tet Tox-Diph-Acell Pertuss Ad Inj
Diphtheria-Tetanus Tox	Measles, Mumps & Rubella Virus	Typhoid
Haemophilus B Polysaccharide Conj	Vaccines	Varicella Virus Vaccine
Vaccine	Meningococcal	Yellow Fever Vaccine
Hepatitis A	Pneumococcal	Zoster Vaccine
Hepatitis B	Poliovirus Vaccine	

This list is subject to change. Check the drug look-up tool for coverage.

Effective January 1, 2021

Get fit, lose weight, and
enjoy the endorphin rush
of getting reimbursed for it!



Our fitness and weight loss benefits help you feel good, live a healthy life, and make it easier to access the fitness facilities, programs/subscriptions and activities you enjoy.

Fitness reimbursement: Get up to \$150 for individual coverage or \$300 for family coverage

If you belong to a qualified fitness facility or engage in a qualified fitness program/subscription or activity, we'll reimburse you up to \$150 (for an individual policy) or up to \$300 (for a family policy)—just to help you feel and be your best.

Weight loss reimbursement: Get up to six months free with Jenny Craig®, WW®, or Noom®.

See details below.

Our weight loss benefit gives you a little extra motivation—and money—when you join Jenny Craig, WW, or Noom (new as of 1/1/2022). We will reimburse you for up to six full months of membership fees for you or one of your enrolled dependents.*

Terms and conditions apply. If your plan includes a fitness and weight loss benefit, you must be a member of AllWays Health Partners for 3 months or longer to qualify for reimbursement.

* The weight loss benefit does not cover food, nutritional supplements, or enrollment/registration fees.

What qualifies for a fitness reimbursement?

- Health clubs/gyms
- SplitFit
- Virtual Fitness Subscriptions
- ClassPass memberships
- Pilates
- Yoga
- Zumba®
- Aerobics
- Peloton Subscription
- Mirror Subscription
- Beachbody On Demand
- and more

How can I learn more?

More info is available at allwayshealthpartners.org under Member Resources.

How do I get reimbursed?

The quickest way to submit your request is through the member portal at allwaysmember.org or in the AllWays Member app.

Routine healthcare services delivered by network providers at no cost sharing



The listed preventive services, as required by the Affordable Care Act (ACA), reflect routine health care that includes screenings, check-ups, and patient counseling to prevent illnesses, disease, or other health problems. You do not have to pay for these covered services when delivered by a network provider. Additional services may be added.

Please refer to allwayshealthpartners.org for the most up-to-date listing.

Adults and Children

- Alcohol and substance misuse screening and counseling
- Alcohol and drug use assessment
- Cholesterol screening
- Depression screening
- Hepatitis B screening
- Hepatitis C screening
- HIV screening and counseling
- Immunizations and vaccines, including flu shots
- Pre-exposure prophylaxis (or PrEP) for members who are at very high risk of getting HIV to prevent HIV infection
- Sexually transmitted disease (STD) prevention, screening, and counseling (including gonorrhea, chlamydia, and syphilis)
- Tobacco use screening and counseling
- Tuberculosis infection screening for all patients at higher risk
- Weight management screening and counseling
- Well visits and regular preventive care (medical history and physical examination) including blood pressure screening, height, weight, and body mass index (BMI), screening and counseling for interpersonal and domestic violence

Adults Only

- Aspirin use counseling at your well visit, for members at risk of heart disease or colon cancer
- Colorectal cancer screenings (including lab testing, sigmoidoscopy, or colonoscopy)
- Diabetic screening
- For members 65 and older: fall-prevention counseling at your well visit and vitamin D supplements through your pharmacy benefit
- Intensive behavioral counseling about diet and physical activity for adults who are overweight and have other risk factors for cardiovascular disease
- Lung cancer screening for adults age 55-80 at risk of developing lung cancer
- Tobacco use nicotine replacement therapy
- Type 2 diabetes screening for adults with high blood pressure

Women Only

- Annual GYN exam including screening for urinary incontinence
- Aspirin use for preeclampsia prevention through your pharmacy benefit
- Bacteriuria screening for pregnant women
- Breast cancer chemoprevention counseling for women at higher risk
- Breastfeeding support, breast pump, supplies, and counseling
- Cervical cancer screening including human papilloma virus (HPV) testing
- Diabetes screening for women during and after pregnancy
- FDA-approved contraceptive methods and counseling (contraceptives covered with no member cost sharing include: generics, brand name drugs with no generic alternative, and emergency contraceptives)
- Folic acid supplements for women who may become pregnant, through your pharmacy benefit
- Hepatitis B screening for pregnant women
- Osteoporosis screening for women 65 and older and for younger women with increased risk of fracture
- Rh incompatibility screening for all pregnant women and follow-up testing for women at higher risk
- Screening mammogram, ultrasound or MRI for breast cancer screening. Counseling and BRCA genetic testing
- Sterilization procedures

Men Only

- Abdominal aortic aneurysm: one-time screening for men of specified ages who have ever smoked

Children Only

- Behavioral assessments throughout childhood (includes depression screening)
 - Developmental screening and surveillance throughout childhood
 - Fluoride varnish for children ages 6 months to 18 years
 - Hearing screening for children up to 21*
 - Hematocrit or hemoglobin screening for children
 - Iron supplements for children ages 6 to 12 months at risk for anemia (over the counter with prescription) and high blood pressure
 - Lead screening for children at risk of exposure
 - Oral fluoride supplements for children without fluoride in their water (over the counter with prescription)
 - Oral health risk assessment for young children
 - Vision screening for all children**
- *This service is not the same as a hearing exam.*
- **This service is not the same as a routine or comprehensive eye exam.*

Newborn Screening and Tests

- Congenital hypothyroidism screening for newborns
- Gonorrhea preventive medication for the eyes of all newborns
- Hearing screening
- Hemoglobinopathies or sickle cell screening for newborns
- Phenylketonuria (PKU) screening

See the most out of life with more from your AllWays Health Partners plan

Your AllWays Health Partners plan includes discounts on vision care and services, with access to one of the nation's largest networks of independent providers and top retail providers such as LensCrafters®, Pearle VisionSM, and Target OpticalSM.

The vision discount plan¹ includes:

THIS IS NOT INSURANCE	
Complete pair of glasses purchase ² : frame, lenses and lens options must be purchased in the same transaction to receive the full discount	
Standard plastic lenses:	
Single vision	\$50
Bifocal	\$70
Trifocal	\$105
Frames:	
Any frame available at provider location	40% off retail price
Lens options:	
UV coating	\$15
Tint (solid and gradient)	\$15
Standard scratch-resistance	\$15
Standard polycarbonate	\$40
Standard progressive (add-on to Bifocal)	\$65
Standard anti-reflective coating	\$45
Other add-ons and services	20% discount
Contact lens materials: (applied to materials only)	
Disposable	0% off retail price
Conventional	15% off retail price
Laser vision correction:	
Lasik or PRK	15% off retail price - or - 5% off promotional price
Frequency:	
Frame	Unlimited
Lenses	Unlimited
Contact lenses	Unlimited

Learn more at allwayshealthpartners.org or call the EyeMed automated service line at 866-723-0391. If you use a TTY/TDD call 711.



LENSCRAFTERS®



¹ Discount plan does not apply to members up to age 19 with AllWays Health Partners coverage that includes the ACA-required Pediatric Vision benefit. Please see your Schedule of Benefits.

² Items purchased separately will be discounted 20% off the retail price.

Back to table of contents

Notice of Privacy Practices

This notice describes how health information about you may be used and disclosed, and how you can get access to this information. Please review it carefully. AllWays Health Partners provides health insurance coverage to you. Because you get health benefits from AllWays Health Partners, we have protected health information (PHI) about you. By law, AllWays Health Partners must protect the privacy of your health information.

This notice explains:

- When AllWays Health Partners may use and share your health information.
- What your rights are regarding your health information.

AllWays Health Partners may use or share your health information:

- When the U.S. Department of Health and Human Services needs it to make sure your privacy is protected.
- When required by law or a law enforcement agency.
- For payment activities, such as checking if you are eligible for health benefits, and paying your healthcare Providers for services you get.
- To operate programs, such as evaluating the quality of healthcare services you get, providing care management and disease management services and performing studies to reduce healthcare costs.
- With your healthcare Providers to coordinate your treatment and the services you get.
- With health-oversight agencies, such as the Federal Centers for Medicare and Medicaid Services, and for oversight activities authorized by law, including fraud and abuse investigations.
- For health research.
- With government agencies that give you benefits or services.
- With plan sponsors of employer group health plans, but only if they agree to protect that information.
- To prevent or respond to an immediate and serious health or safety emergency.
- To remind you of appointments, benefits, treatment options or other health-related choices you have.
- With entities that provide services or perform functions on behalf of AllWays Health Partners (Business Associates), provided that they have agreed to safeguard your information.

When a federal or state privacy law provides for stricter safeguards of your PHI, AllWays Health Partners will follow the stricter law. Except as described above, AllWays Health Partners cannot use or share your health information with anyone without your written permission. You may cancel your permission at any time, as long as you tell us in writing. Please note: We cannot take back any health information we used or shared when we had your permission.

For purposes of underwriting, AllWays Health Partners is prohibited from using or disclosing any genetic information.

AllWays Health Partners does not use your health information for any marketing purposes and will not sell your health information to anyone.

You have the right to:

- See and get a copy of your health information that is contained in a “designated record set.” You must ask for this in writing. To the extent your information is held in an electronic health record, you may be able to receive the information in electronic form. In some cases, we may deny your request to see and get a copy of your health information. AllWays Health Partners may charge you to cover certain costs, such as copying and postage.
- Ask AllWays Health Partners to change your health information that is in a “designated record set” if you think it is wrong or incomplete. You must tell us in writing which health information you want us to change, and why. If we deny your request, you may file a statement of disagreement with us that will be included in any future disclosures of the disputed information.
- Ask AllWays Health Partners to limit its use or sharing of your health information. You must ask for this in writing. AllWays Health Partners may not be able to grant this request.
- Ask AllWays Health Partners to get in touch with you in some other way, if by contacting you at the address or telephone number we have on file, you believe you would be harmed.

- Get a list of when and with whom AllWays Health Partners has shared your health information. You must ask for this in writing.
- Be notified in the event that we or one of our Business Associates discovers a breach of your protected health information.
- Get a paper copy of this notice at any time.

These rights may not apply in certain situations.

This notice, effective as of April 17, 2019, will remain in effect until we change it. By law, AllWays Health Partners must give you notice explaining that we protect your health information, and that we must follow the terms of this notice. If AllWays Health Partners does make important changes, we will send you a new notice and post an updated notice on our website. That new notice will apply to all of the health information that AllWays Health Partners has about you. AllWays Health Partners takes your privacy very seriously. If you would like to exercise any of the rights we describe in this notice, or if you feel that AllWays Health Partners has violated your privacy rights, contact our Privacy Officer in writing at the following address:

AllWays Health Partners Privacy Officer
399 Revolution Drive, Suite 810
Somerville, MA 02145

Filing a Complaint or exercising your rights will not affect your benefits. You may also file a Complaint with the U.S. Secretary of Health and Human Services at:

The U.S. Department of Health and Human Services
200 Independence Avenue, SW Washington, DC 20201
Toll Free: 877-696-6775

AllWays Health Partners will not retaliate against you if you file a complaint either with AllWays Health Partners or the U.S. Secretary of Health and Human Services. For more information, or if you need help understanding this notice, call our Member Service Center at 800-462-5449 or TTY 711, Monday through Friday between 8:00 a.m. and 6:00 p.m. (Thursdays from 8:00 a.m. to 8:00 p.m.)

Confidentiality

AllWays Health Partners takes seriously our obligation to protect your personal and health information. To help in maintaining your privacy, we have instituted the following practices:

- AllWays Health Partners employees do not discuss your personal information in public areas such as the cafeteria, on elevators or when outside of the office.
- Electronic information is kept secure through the use of passwords, automatic screen savers and limiting access to only those employees with a “need to know.”
- Written information is kept secure by storing it in locked file cabinets, enforcing “clean-desk” practices and using secured shredding bins for its destruction.
- All employees, as part of their initial orientation, receive training on our confidentiality and privacy practices. In addition, as part of every employee’s annual performance appraisal, they are required to sign a statement affirming that they have reviewed and agree to abide by our confidentiality policy.
- All providers and other entities with whom we need to share information are required to sign agreements in which they agree to maintain confidentiality.
- AllWays Health Partners only collects information about you that we need to have in order to provide you with the services you have agreed to receive by enrolling in AllWays Health Partners or as otherwise required by law.

In accordance with state law, AllWays Health Partners takes special precautions to protect any information concerning mental health or substance abuse, HIV status, sexually transmitted diseases, pregnancy or termination of pregnancy.

Notificación de prácticas de privacidad

En este aviso se describe cómo se puede utilizar y divulgar su información médica y cómo puede obtener acceso a ella. Léalo detenidamente. AllWays Health Partners le proporciona cobertura de seguro médico. Debido a que usted obtiene beneficios de salud por parte de AllWays Health Partners, tenemos su información médica protegida (Protected Health Information, PHI). Por ley, AllWays Health Partners debe proteger la privacidad de su información médica.

Este aviso explica lo siguiente:

- En qué casos AllWays Health Partners podrá usar y compartir su información médica.
- Cuáles son sus derechos en lo que respecta a su información médica.

AllWays Health Partners podrá usar y compartir su información médica en los siguientes casos:

- Cuando el Departamento de Salud y Servicios Humanos de los Estados Unidos la necesite para garantizar la protección de su privacidad.
- Cuando lo exijan las leyes o una agencia de orden público.
- Para actividades de pago, como verificar si usted es elegible para recibir beneficios de salud y para pagarles a sus proveedores de atención médica por los servicios que usted reciba.
- Para administrar programas, como evaluar la calidad de los servicios de atención médica que usted recibe, brindar servicios de administración de la atención y manejo de enfermedades, y llevar a cabo estudios para reducir los costos de la atención médica.
- Con sus proveedores de atención médica, para coordinar los tratamientos y servicios que recibe.
- Con agencias de supervisión de la salud, como los Centros Federales para los Servicios de Medicare y Medicaid, y para actividades de supervisión autorizadas por la ley, incluidas las investigaciones de fraude y abuso.
- Para investigaciones sobre salud.
- Con agencias gubernamentales que le brindan servicios o beneficios.
- Con patrocinadores de planes de salud grupales del empleador, pero solo si aceptan proteger esa información.
- Para prevenir una emergencia inminente de seguridad o de salud grave, o bien para responder ante dicha emergencia.
- Para recordarle citas, beneficios, opciones de tratamiento u otras opciones relacionadas con la salud a su disposición.
- Con entidades que brindan servicios o desempeñan funciones en nombre de AllWays Health Partners (asociados comerciales), siempre y cuando hayan aceptado proteger su información.

Cuando una ley de privacidad federal o estatal establezca medidas de seguridad más estrictas en relación con su PHI, AllWays Health Partners seguirá la ley más estricta. A excepción de lo que se describe anteriormente, AllWays Health Partners no puede usar ni compartir su información médica con ninguna persona sin obtener su permiso por escrito. Usted puede cancelar su permiso en cualquier momento, pero debe informarlo por escrito. Tenga en cuenta lo siguiente: no podemos recuperar la información médica que hemos usado o compartido con su permiso.

Para fines de contratación de seguro, AllWays Health Partners tiene prohibido usar o divulgar información genética.

AllWays Health Partners no usa su información médica para fines de comercialización y no se la venderá a nadie.

Usted tiene derecho a lo siguiente:

- A ver y obtener una copia de su información médica que se encuentre en un "conjunto de registros designados". Debe pedirlo por escrito. En la medida en que su información se guarde en una historia clínica electrónica, usted puede recibir la información en forma electrónica. En algunos casos, es posible que deneguemos su solicitud de ver y obtener una copia de su información médica. AllWays Health Partners podrá cobrarle para cubrir determinados costos, como el copiado y el envío por correo.
- A pedirle a AllWays Health Partners que cambie su información médica que esté en un "conjunto de registros designados" si piensa que contiene errores o está incompleta. Debe decirnos por escrito qué información médica desea que cambiemos y por qué. Si denegamos su solicitud, usted puede presentar una declaración de desacuerdo ante nosotros que se incluirá en las futuras divulgaciones de la información en disputa.
- A pedirle a AllWays Health Partners que limite el uso o la divulgación de su información médica. Debe pedirlo por escrito. Es posible que AllWays Health Partners no pueda acceder a esta solicitud.

- A pedirle a AllWays Health Partners que se comunique con usted de alguna otra manera si cree que al comunicarnos con usted en la dirección o al número de teléfono que tenemos registrados podemos perjudicarle.
- A obtener una lista de cuándo y con quién AllWays Health Partners compartió su información médica. Debe pedirlo por escrito.
- A ser notificado si descubrimos o uno de nuestros socios comerciales descubre cualquier incumplimiento referente al uso de su información médica protegida.
- A obtener una copia impresa de este aviso en cualquier momento.

Es posible que estos derechos no se apliquen en ciertas situaciones.

Este aviso, efectivo desde el 17 de abril de 2019, permanecerá vigente hasta que lo cambiemos. Por ley, AllWays Health Partners debe darle aviso explicándole que protegemos su información médica y que debemos cumplir con los términos de este aviso. Si AllWays Health Partners hace cambios importantes, le enviaremos un nuevo aviso y publicaremos un aviso actualizado en nuestro sitio web. Ese nuevo aviso se aplicará a toda la información médica que AllWays Health Partners tenga sobre usted. AllWays Health Partners toma muy en serio su privacidad. Si desea ejercer alguno de los derechos que describimos en este aviso, o si piensa que AllWays Health Partners ha violado sus derechos de privacidad, comuníquese con el Funcionario de Privacidad de AllWays Health Partners por escrito a la siguiente dirección:

AllWays Health Partners Privacy Officer
399 Revolution Drive, Suite 810
Somerville, MA 02145

Presentar una queja o ejercer sus derechos no afectará sus beneficios. También puede presentar una queja ante la Secretaría de Salud y Servicios Humanos de los EE. UU. (U.S. Secretary of Health and Human Services) en la siguiente dirección:

The U.S. Department of Health and Human Services
200 Independence Avenue, SW Washington, DC 20201
Línea gratuita: 877-696-6775

AllWays Health Partners no tomará represalias en su contra si usted presenta una queja ante AllWays Health Partners o la Secretaría de Salud y Servicios Humanos de los EE. UU. Para obtener más información, o si necesita ayuda para comprender este aviso, llame a nuestro Centro de servicios al miembro al 800-462-5449 o TTY 711, de lunes a viernes entre las 8:00 a. m. y las 6:00 p. m. (los jueves, de 8:00 a. m. a 8:00 p. m.).

Confidencialidad

AllWays Health Partners se toma muy en serio la obligación de proteger su información médica y personal. Para ayudar a mantener su privacidad, hemos instituido las siguientes prácticas:

- Los empleados de AllWays Health Partners no hablan sobre su información personal en áreas públicas como la cafetería, los ascensores o fuera de la oficina.
- Se protege la información electrónica mediante el uso de contraseñas, protectores de pantalla automáticos y acceso limitado solo a los empleados que tengan la necesidad de conocerla.
- Se protege la información escrita a través de su almacenamiento en archivadores cerrados, prácticas para mantener los escritorios ordenados y trituradoras seguras para su destrucción.
- Todos los empleados, como parte de su orientación inicial, reciben capacitación sobre nuestras prácticas de confidencialidad y privacidad. Además, como parte de la evaluación de desempeño anual de cada empleado, los empleados deben firmar una declaración en la que manifiestan que revisaron nuestra política de confidencialidad y aceptan cumplirla.
- Todos los proveedores y las demás entidades con las que necesitamos compartir información deben firmar acuerdos en los que aceptan mantener la confidencialidad.
- AllWays Health Partners solo recopila información sobre usted que debemos tener para proporcionarle los servicios que ha aceptado recibir al inscribirse en AllWays Health Partners o que requiere la ley.

De acuerdo con la ley estatal, AllWays Health Partners toma precauciones especiales para proteger cualquier información relacionada con la salud mental, el consumo de sustancias, la situación de VIH, las enfermedades de transmisión sexual, el embarazo o la interrupción del embarazo.

Application for Enrollment

- New employee
 - Annual enrollment
 - COBRA Continuation
 - Involuntary loss of prior group coverage*
 - Other _____
- *Documentation required

Change In Enrollment

- Add dependents
- Remove dependents
- PCP/Site change
- Termination
- Employee/dependent demographics
- Other _____

Reason for Change In Enrollment

- Marriage
- Birth of child
- Adaption of child*
- Divorce
- Left employment
- Reached age 65
- Add disabled dependents
- Moved out of service area
- Voluntary
- Loss of dependent eligibility
- Death, exact date _____

Please use a ball point pen and press down firmly.

Group Information				Employer Information			
AllWays Health Partners group number				Employer name			
Date of employment	Month	Day	Year	Effective Date	Month	Day	Year
							Plan design

Intermediary

- Group
- Non-group

Employee Information

Last name _____
Date of birth _____
Street mail _____

The HMO Enrollment Form will give us the information we need to enroll you and your dependents in an AllWays Health Partners HMO plan.

Click the link below to view and download the form.

HMO Enrollment Form

You can return the completed form by email or mail.

Email: You can email this form to enrollment@allwayshealth.org

Mail: AllWays Health Partners
Member Enrollment
399 Revolution Dr. Suite 810
Somerville MA 02145

Please provide ALL information below for any eligible dependents you wish to enroll:

Spouse last name				First name		ML	Primary care site		Existing patient?
Date of birth	Social Security Number		Gender (m/f)	Other Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No			Primary care physician (last name, first name, M.I.)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent last name				First name		ML	Primary care site		Existing patient?
Date of birth	Social Security Number		Gender (m/f)	Other Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No			Primary care physician (last name, first name, M.I.)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent last name				First name		ML	Primary care site		Existing patient?
Date of birth	Social Security Number		Gender (m/f)	Other Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No			Primary care physician (last name, first name, M.I.)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent last name				First name		ML	Primary care site		Existing patient?
Date of birth	Social Security Number		Gender (m/f)	Other Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No			Primary care physician (last name, first name, M.I.)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent last name				First name		ML	Primary care site		Existing patient?
Date of birth	Social Security Number		Gender (m/f)	Other Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No			Primary care physician (last name, first name, M.I.)		<input type="checkbox"/> Yes <input type="checkbox"/> No

Acknowledgement: The information supplied on this form is true and complete. I assign benefits to AllWays Health Partners for the cost of services when the liability for payment is the responsibility of another plan/HMO, worker's compensation plan or other coverage. I (we) agree that AllWays Health Partners and its affiliated health care providers may obtain or release my (our) medical information including medical records, medical coverage available or other medical data for the purposes of administering benefits, evaluating medical care provided, conducting quality assurance reviews and analysis, conducting medical research, and/or as required by law. I (we) understand that for AllWays Health Partners coverage to be in effect when medical care supplies are obtained, all care and supplies must be authorized and provided by participating care physicians (as listed above).

Acuerdo: La información proporcionada en esta forma es veraz y completa. Asigno (asignamos) beneficios a AllWays Health Partners por el costo de servicios cuando la responsabilidad del pago sea de otro plan de salud/HMO, plan de compensación para trabajadores o otro tipo de cobertura. Estoy (estamos) de acuerdo que AllWays Health Partners y sus Proveedores de Cuidado de Salud afiliados pueden obtener o divulgar mi (nuestra) información médica, incluyendo registros médicos, cobertura médica disponible o otra información médica, con el propósito de administrar beneficios, evaluar la atención médica proporcionada, realizar revisiones y análisis de control de calidad, realizar investigaciones médica y/o cuando es requerida por la ley. Yo entiendo (entendemos) que para que la cobertura de AllWays Health Partners tenga vigencia para la obtención de suministros médicos, toda la atención y todos los suministros deben ser autorizados y proporcionados por un médico de cuidado primario participante autorizado (según se indica arriba).

All information must be completed and form signed before processing can begin

Employer contact name (please print): _____ Phone: _____ Employee's signature: _____ Date: _____

Employer's signature: _____ Date: _____

Back to table of contents

Application for Enrollment

- New employee
- Annual enrollment
- COBRA Continuation
- Involuntary loss of prior group coverage*
- Other _____

*Documentation required

Change in Enrollment

- Adding dependents
- Remove dependents
- Termination
- Employee/dependent demographics
- Other _____

Reason for Change in Enrollment

- Marriage
- Birth of child
- Adoption of child*
- Divorce
- Left employment
- Reached age 65
- Adding disabled dependents
- Voluntary
- Loss of dependent eligibility
- Death, exact date _____

Please use a ball point pen and press down firmly.

Group Information									
AllWays Health Partners group number					Employer name				
Date of employment	Month	Day	Year	Effective Date	Month	Day	Year	Plan design	

Employee									
Last name									
Date of birth									
Street mail									
Language									
What language (English/OK)									
Group Code (type of AllW)									
<input type="checkbox"/> Self <input type="checkbox"/>									
Are you and/or your spouse eligible for Medicare?									
Please provide spouse last									
Date of birth									

The PPO Plus Enrollment Form will give us the information we need to enroll you and your dependents in an AllWays Health Partners PPO Plus plan.

Click the link below to view and download the form.

PPO Plus Enrollment Form

You can return the completed form by email or mail.

Email: You can email this form to enrollment@allwayshealth.org

Mail: AllWays Health Partners Enrollment
399 Revolution Dr. Suite 810
Somerville MA 02145

Dependent last name				First name		ML	Primary care site		Existing patient?
Date of birth	Social Security Number		Gender (m/f)	Other insurance?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Primary Care Provider (Last name, First name, ML)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent last name				First name		ML	Primary care site		Existing patient?
Date of birth	Social Security Number		Gender (m/f)	Other insurance?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Primary Care Provider (Last name, First name, ML)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent last name				First name		ML	Primary care site		Existing patient?
Date of birth	Social Security Number		Gender (m/f)	Other insurance?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Primary Care Provider (Last name, First name, ML)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent last name				First name		ML	Primary care site		Existing patient?
Date of birth	Social Security Number		Gender (m/f)	Other insurance?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Primary Care Provider (Last name, First name, ML)		<input type="checkbox"/> Yes <input type="checkbox"/> No

Acknowledgement: The information supplied on this form is true and complete. I assign benefits to AllWays Health Partners (or the cost of service when the liability for payment is the responsibility of another plan, worker's compensation plan or other coverage). I (we) agree that AllWays Health Partners and its affiliated PPO network providers may obtain or release my (our) medical information including medical records, medical coverage and/or other medical data for the purpose of administering benefits, evaluating medical care provided, conducting quality assurance reviews and analysis, conducting medical research, and/or as required by law. For further information on how AllWays Health Partners may use your information, refer to AllWays Health Partners' Notice of Privacy Practices.

All information must be completed and form signed before processing can begin.

Employer contact name (please print) _____ Phone _____

Employee's signature _____ Date _____

Employer's signature _____ Date _____

Back to table of contents