



A health plan  
that's right for you

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# Ranked #1 in Member Satisfaction among commercial health plans in Massachusetts by J.D. Power

We earned the **top ranking** across several categories:

- Product/coverage offerings
- Resolving problems or complaints
- Helping to save time or money
- Ease of doing business
- **Level of trust**

For J.D. Power 2024 award  
information, please visit  
[jdpower.com/awards](https://jdpower.com/awards)

**2 years  
in a row!**





# Welcome to Mass General Brigham Health Plan

Discover the benefits of choosing a health plan supported by the world's top academic medical system.

HMO

Your health  
is everything  
to us.



## Mass General Brigham Health Plan offers innovative benefits that support your best health.

Our health plan offerings include routine check ups and more, helping members reach their physical and mental health goals. Whether you need help finding a primary care provider, a specialist, starting therapy, help managing a chronic condition, or building better nutritional habits—our team is ready to connect you with resources that will support you along your health journey.

We can also connect you with our health coaches if you'd like to discuss wellness goals that are specific to you, whether you're trying to eat more healthy foods, quit smoking, or relieve stress.

### We're here to help, even before your plan starts

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?

To live chat with us, visit [MassGeneralBrighamHealthPlan.org/new](https://MassGeneralBrighamHealthPlan.org/new).

Or call us at **866-643-8392**.



# A health plan that supports the whole you



## Access to a wide network of doctors and specialists at world-class hospitals

Mass General Brigham Health Plan strives to use industry-leading experience to advance coverage and the health of our members.

As a member of our health plan, you'll have access to our expansive network of world-class doctors, specialists, and hospitals in Massachusetts. Our network also extends to parts of New Hampshire and Rhode Island.

All of our members plans include access to Optum's national network of high-quality, accessible behavioral health services. Optum, our behavioral health partner, offers one of the largest behavioral health networks in the nation.



### Find providers in our network

Visit our website at  
**[MassGeneralBrighamHealthPlan.org](https://MassGeneralBrighamHealthPlan.org)**.

If you don't see your provider in our directory, please let us know by contacting customer service at **866-643-8392**.

## More coverage, better care

Your benefits are made to support every area of wellness that lead to a healthier, whole you. This can include medical, pharmacy,\* behavioral health, wellness programs, and more.

## Valuable benefits, perks, and discounts to make the best of your plan

- Fitness reimbursement: Up to \$150 for individual coverage or \$300 for family coverage per calendar year, including small group personal training through SplitFit and virtual subscriptions<sup>†</sup>
- Flexible one- to six-month weight-loss program benefit through WW<sup>®</sup>, Jenny Craig<sup>®</sup>, or Noom<sup>®†</sup>
- Diabetic eye exam at no cost in network<sup>\*\*</sup>
- Discounted eyewear powered by EyeMed
- Free tobacco cessation program and coverage for nicotine replacement<sup>\*\*</sup>
- Up to \$130 reimbursement for childbirth education
- Reimbursement for breastfeeding classes
- Discounts or partial reimbursements on home safety products and bike helmets

\* Some employers do not offer pharmacy coverage through Mass General Brigham Health Plan.

\*\* Does not apply to HSA plans. <sup>†</sup> Terms and conditions apply.



### Accessing care with your plan

HMO coverage starts with your primary care provider for routine care. When you need specialty care, your provider will refer you to specialists to help ensure coordinated care. Referrals are needed for certain specialty services. In addition, certain services or procedures may require a prior authorization.

## Money-saving pharmacy coverage

Our FlexRx<sup>SM</sup> pharmacy coverage\* offers:

- Access to thousands of participating pharmacies nationwide, including CVS Pharmacy®, independent pharmacies, and chains like Walgreens® and Rite Aid®
- 90-day supply of certain maintenance medications through mail order or at local participating pharmacies
- Lower- or no-cost coverage for many over-the-counter (OTC) drugs with a prescription at a participating pharmacy

## DoctorSmart<sup>SM</sup> rewards you with \$25 – \$500 for choosing high-value care

Our DoctorSmart online tools make it easy for you to find doctors, estimate costs for procedures, and even receive \$25 – \$500 cash rewards for having certain services with high-quality, lower-cost providers.

## Three no-cost pediatric sick and behavioral health visits

This parent and wallet-friendly benefit covers the first 3 sick in-network primary care provider visits and 3 in-network behavioral health visits for members age 18 and younger at no member cost sharing, per benefit period.\*\*

## Wellness tools and resources

- Our health and wellness tools offer personalized recommendations to improve your health
- Use any one of our free, healthy living programs, including live interactive webinars, a health library, and online communities
- Free one-on-one health coaching is available via phone or email

\* Some employers do not offer pharmacy coverage through Mass General Brigham Health Plan.

\*\* Does not apply to HSA plans.

## Use our member portal for quick access

Sign up for the Mass General Brigham Health Plan member portal to start managing your account and to access claims history, deductibles, and billing.

## Download the Mass General Brigham Health Plan app

The mobile member app is an easy-to-use tool that gets you the information you need, when you need it, on your smartphone or tablet. You can download the app for Android and iOS on Google Play and the App Store to start viewing plan details, download a copy of your ID card, search for providers, and more!

## Connect with fellow members through our member feedback forum

Join our online Mass General Brigham Health Plan member community to share your experience with products and services. We use your insight to inform future offerings, always aiming to actively enhance the member experience.

## Peace of mind anywhere you travel

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

## Urgent care when you need it

As a member of Mass General Brigham Health Plan, you'll have access to urgent care centers and retail walk-in clinics, a 24/7 nurse advice line, and 24/7 interactive video visits. With On Demand, members can also access convenient, interactive virtual visits for minor illnesses and injuries—anytime, anywhere in the U.S.

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



When you're a member, you can download our mobile app for iPhone and Android to access your ID card and plan information.





# Your care is powered by a world-class healthcare system

Even if your doctor isn't a Mass General Brigham provider

## A member of Mass General Brigham

As a member of one of America's most respected health care leaders, we are in a unique position to improve care and coverage together. We think of all our members as patients, too, whether they're patients of Mass General Brigham providers or of any other provider in our strong network.

## Access to Down Syndrome Clinic to You (DSC2U.org)

Members with Down syndrome and their caregivers get no-cost access to a virtual service created by experts that provides personalized care reports, recommended tests and labs, nutrition suggestions, and other wellness resources. Developed by teams at the Down Syndrome Program and Lab of Computer Science at Massachusetts General Hospital and Harvard Medical School.

## Your Care Circle

A care management program that offers select members of Mass General Brigham Health Plan a team of experts who develop an appropriate care plan. Your Care Circle team works with you to address your health challenges, ensure communication among your providers, and promote your best health.



Members of Mass General Brigham Health Plan have unique access to top-notch providers, leading some of the world's most advanced healthcare research.



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**[MassGeneralBrighamHealthPlan.org/new](https://MassGeneralBrighamHealthPlan.org/new)**

Mass General Brigham Health Plan includes Mass General Brigham Health Plan, Inc. and Mass General Brigham Health Insurance Company.

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If you're currently  
receiving care,  
we have answers,  
services, and  
clinical support



We want to ensure that your care is uninterrupted and that you get all the services you need on day one. Simply complete and submit the Transition of Care form online to get started!

### Our trained professionals are ready to help

- 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 healthcare needs you or your family may have.

We can help get existing authorizations from your providers submitted to us, find your providers in our network, and ensure the transition 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 [MassGeneralBrighamHealthPlan.org/new](https://MassGeneralBrighamHealthPlan.org/new) and use our DoctorSmart<sup>SM</sup> tool to search among the expansive network of providers available to you. If you don't see your provider in our directory, just ask us.

### Helpful self-service tools are also found on our website

Many of your questions already have answers at [MassGeneralBrighamHealthPlan.org/new](https://MassGeneralBrighamHealthPlan.org/new)

#### There you can:

- Find a doctor with our DoctorSmart search tool
- Fill out a Transition of Care form
- Look up your drug tier
- Discover member perks
- Learn more about Mass General Brigham Health Plan



### If you have any questions

contact our Customer Service team by email at [HealthPlanCustomerService-Members@mgb.org](mailto:HealthPlanCustomerService-Members@mgb.org) or call us at 866-643-8392. We're open Monday through Friday from 8 a.m. to 6 p.m. and Thursdays from 8 a.m. to 8 p.m.

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

**To be eligible for consideration, you or your dependent must:**

- Be receiving ongoing care for specific health conditions\* (See section 1 for typical medical conditions)
- Be receiving care that started prior to enrollment with Mass General Brigham Health Plan

**Member information:**

First name (Member receiving care)	Last name
Phone	Email address
Member ID number (if received)	Name of employer

**Contact preferences:**

1. What's the best way to reach you during business hours? ☐ Email ☐ Telephone
2. Do you give us permission to leave a message? ☐ Yes ☐ No

**SECTION 1: Medical services**

**To request Transition of Care support for medical services, please select one or more of the following conditions:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Pregnancy  | <input type="checkbox"/> Recent heart attack                         | <input type="checkbox"/> Specialty pharmacy/home infusion                               |
| <input type="checkbox"/> Sick newborn requiring intensive care                    | <input type="checkbox"/> Specialty referral                          | <input type="checkbox"/> Enrollment in a care management/<br>disease management program |
| <input type="checkbox"/> Rare medical condition<br>(please specify details below) | <input type="checkbox"/> Scheduled or approved<br>outpatient surgery | <input type="checkbox"/> Cancer: newly diagnosed/ongoing<br>cancer treatment            |

*\*Examples of chronic medical conditions 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.*

**Please provide full Provider contact information for conditions and treatment indicated above, next scheduled office visit(s), procedure or scheduled follow up appointment dates.**

1. What is the name of the provider(s) you or your dependent receive care from?

Provider name	Phone	Provider address
Provider name	Phone	Provider address
Provider name	Phone	Provider address

2. When was the last time you or your dependent saw this provider(s) for the conditions noted?

3. When is the next office visit, scheduled procedure, or follow up appointment with this provider(s)?



4. Please complete the section below with any other relevant information that may help us better understand and support you with coordinating the medical care that you need.

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## SECTION 2: Prescription (RX) services

To request Transition of Care support for prescription services, please specify the medications that you or your dependent take and the frequency with which they are taken:

Medication name	Dosing/frequency	Last fill date
Medication name	Dosing/frequency	Last fill date
Medication name	Dosing/frequency	Last fill date
Medication name	Dosing/frequency	Last fill date

## SECTION 3: Behavioral health services

To request Transition of Care support for outpatient behavioral health services with a provider that does not participate within our behavioral health provider network, please list your provider(s) below:

Provider name	Phone	Provider address
Provider name	Phone	Provider address
Provider name	Phone	Provider address

1. Do you receive care with this provider(s) in-person or virtually via Telehealth? ☐ In-Person ☐ Telehealth
2. How often do you see this provider(s) for care? ☐ Weekly ☐ Monthly ☐ Other

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:** [HealthPlanCustomerService-Members@mgb.org](mailto:HealthPlanCustomerService-Members@mgb.org)

**Fax:** 617-586-1799

**Mail:** Mass General Brigham Health Plan  
Customer Service  
399 Revolution Drive, Suite 820  
Somerville, MA 02145

**[MassGeneralBrighamHealthPlan.org](https://www.massgeneralbrigham.org)**

Mass General Brigham Health Plan includes Mass General Brigham Health Plan, Inc.  
and Mass General Brigham Health Insurance Company

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## Take charge of your mental health

Mental health is a key part of your overall well-being—and we're here to help. Below you'll find useful resources, support, programs, coaching, information, and more.

### Lyra mental health support

- Lyra's full range of remote, in-person and self-guided mental health services are available on an easy-to-navigate platform. Access Lyra's services by logging in to the member portal at [Member.MassGeneralBrighamHealthPlan.org](https://Member.MassGeneralBrighamHealthPlan.org).
- Get personalized recommendations for the care that's right for you.
- Schedule virtual or in-person appointments online with therapists, health coaches, or others, often within 1-3 days.
- Access support for the whole family, including children and adolescents.

### Behavioral health resources by Optum

Optum behavioral health benefits are available to you and your covered family members.

- Search for providers who offer treatments including mental healthcare, outpatient services, day programs, residential programs, autism care and support, substance use and recovery services, and more.
- Browse Optum's [www.liveandworkwell.com](https://www.liveandworkwell.com) website for articles, self-care tools, providers and other mental health and substance use disorder resources. Create an account with your member ID number or browse as a guest with access code: **MGBHPMA**.

### 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](mailto: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 with a recovery coach

Recovery isn't something to face alone. Our recovery coaches understand the hurt caused by stigma and shame and can thoughtfully act as guides, mentors, and advocates. Recovery coaching is available to all plan members.

### Talk with 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 **HealthPlanHealthandWellness@mgb.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 **HealthPlanYourCareCircle@mgb.org** or call the number on the back of your member ID card and ask about the Your Care Circle care management program.

### Start your very own personalized wellness plan with Virgin Pulse

- Virgin Pulse can provide you with a unique, personalized experience that maps to your goals and encourages you every step of the way. Challenges help you track your journey and get encouragement and support. Get started by filling out the health assessment in the member portal at **Member.MassGeneralBrighamHealthPlan.org**.
- Start a health journey that connects to your personal fitness tracker.
- Engage with wellness challenges that help you eat better, become more active, improve sleep, quit smoking, lose weight, cope with grief, reduce alcohol or tobacco use, and more.
- Join an online community to connect with others on similar wellness journeys.

### Join our virtual wellness workshops

Our free webinar series is focused on promoting health and wellness for the community. These workshops are open for anyone to join, not just the Plan members. You can watch past recordings of workshops on topics like recovering from burnout, healthy eating, mindful parenting, and more at our Youtube channel. Search for Mass General Brigham Health Plan at youtube.com.



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

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



Care Complement benefits give you access to better, more affordable care options by removing cost sharing for certain services and therapies. Only available in plans with Care Complement in the plan name.

#### 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

#### Get expanded access to substance use disorder therapies

- \$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

#### No cost for chronic condition medications:

##### Depression

- Fluoxetine 10, 20mg capsules

##### Diabetes

- Metformin, regular release tablets

##### High cholesterol

- Atorvastatin tablets
- Simvastatin tablets

##### Heart and high blood pressure

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



## 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 can help if you have a chronic 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 [Member.MassGeneralBrighamHealthPlan.org](https://Member.MassGeneralBrighamHealthPlan.org) or call the customer service number on the back of your member ID card.

No member cost for pediatric benefits designed for the health of the whole family



This family-friendly benefit is available to each child (age 18 and younger) on your plan, per benefit period. It is included on most plans, but does not apply to Health Savings Account (HSA)-compliant plans.

### 3 sick child PCP visits at no cost to members

To help parents save money and relieve stress during an already stressful time, most of our plans include \$0 cost sharing for the first three sick child office visits with an in-network PCP. This benefit is designed to make getting care easier and more affordable, at a time when it is needed most.

### 3 behavioral health visits at no cost to members

\$0 cost sharing for the first three child office visits with an in-network behavioral health provider. After all, good mental health is a priority. It makes sense to remove the worry from seeking the care you need.

#### Sample savings for a family of four

Break down of the savings to a family of four whose year includes 2 strep throats, an earache, a skin rash, a stomach bug (both kids), and visits with an in-network behavioral health provider to stay on top of anxiety and depression.

#### Savings in copays for two children

##### Child one:

3 sick child visits x \$20 copay = \$60

3 behavioral health visits x \$20 = \$60

##### Child two:

3 sick child visits x \$20 copay = \$60

3 behavioral health visits x \$20 = \$60

**Total family savings = \$240 per benefit period**



For more information, visit [MassGeneralBrighamHealthPlan.org](https://MassGeneralBrighamHealthPlan.org), email [HealthPlanCustomerService-Members@mgb.org](mailto:HealthPlanCustomerService-Members@mgb.org), or call us at **866-643-8392**.

# 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 <sup>1</sup> , tablets
	Antihistamines	diphenhydramine (Benadryl) liquid, capsules, syrup chlorpheniramine (Chlor-Trimeton) tablets, syrup
DME Products	Humidifiers/Vaporizers	Humidifiers and vaporizers <sup>3</sup>
	Asthma	Peak flow meters
		Spacers
	Diabetes	Select diabetic testing supplies <sup>4</sup>

### 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 <sup>2</sup> , ODT
		loratadine-pseudoephedrine (Claritin-D) tablets
		cetirizine (Zyrtec) tablets, syrup <sup>2</sup> , chewables
		cetirizine-pseudoephedrine (Zyrtec-D) tablets
	Nasal Sprays	triamcinolone (Nasacort Allergy 24hr) nasal spray
		cromolyn (Nasalcrom) nasal spray
		saline (Ocean Nasal) spray 0.65%
		budesonide (Rhinocort) nasal allergy spray
		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.

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
Nutrients	Poison Ivy	hydrocortisone cream, lotion, ointment, solutions
	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 <sup>1</sup> , drops <sup>2</sup>
		ferrous gluconate tablets
	Electrolytes	Electrolyte solutions <sup>2</sup>
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	Dry Eye	artificial tears eye drops
Preparations	Allergy	ketotifen (Zaditor OTC) 0.025% drops

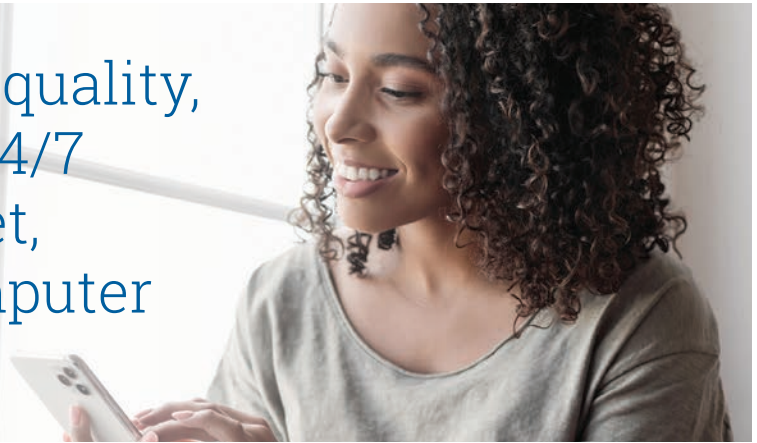
The brand name listed in parenthesis is for reference only, brand name medications are not covered when there is a generic available.

**Check your plan documents on [member.massgeneralbrighamhealthplan.org](https://member.massgeneralbrighamhealthplan.org) for your specific cost-sharing amounts**

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

### How does it work?

Access the secure On Demand website or app via:

**[Member.MassGeneralBrighamHealthPlan.org](https://Member.MassGeneralBrighamHealthPlan.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.

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



FlexRx<sup>SM</sup> 6-Tier

# Pharmacy benefit guide

# Welcome to FlexRx

**The FlexRx<sup>SM</sup> program is built for choice, savings, and convenience—with benefits that include:**

- Low-cost drug tier for many common medications
- Lower- or no-cost coverage for many over-the-counter (OTC) drugs with a prescription at a participating pharmacy
- Savings on a 90-day supply of certain maintenance medications 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 [Member.MGBHealthPlan.org](https://Member.MGBHealthPlan.org) at any time to find complete information about their pharmacy benefits:

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

Not a member yet? Visit [MGBHP.org/new](https://MGBHP.org/new) for more information and to access our drug lookup tool.

## 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 a.m. to 6 p.m. and Thursday 8 a.m. to 8 p.m. 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 Optum Rx® to manage pharmacy benefits for our members. Mass General Brigham Health Plan and Optum Rx 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 most major chains (including CVS Pharmacy®, Walgreens®, and Rite Aid®), grocery store pharmacies, and many other independent pharmacies throughout the United States. Use our pharmacy locator tool on [MGBHP.org/pharmacy](https://MGBHP.org/pharmacy) to find the closest pharmacy to you.

### Covered medications

Use the Mass General Brigham Health Plan 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 pharmacy benefit places all covered drugs into tiers.

Tier 1 – includes lower cost generic drugs. Generic drugs contain the same active ingredients as their brand name counterparts.

Tier 2 – includes other generics and may include some brand name drugs.

Tier 3 – includes high cost generics and preferred brand name drugs.

Tier 4 – includes higher cost generics and non-preferred brand name drugs.

Tier 5 – includes generic specialty and preferred specialty drugs.

Tier 6 – includes non-preferred specialty drugs.

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 [Member.MGBHealthPlan.org](https://Member.MGBHealthPlan.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

### 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 [Member.MGBHealthPlan.org](https://Member.MGBHealthPlan.org).

### 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

Mass General Brigham Health Plan 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 Mass General Brigham Health Plan 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 drug lookup tool online.

### Quantity limit

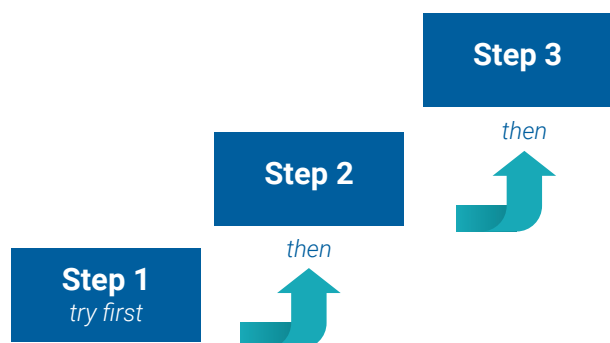
Mass General Brigham Health Plan may limit the number of units (tablet, capsule, or liquid) for a specific medication you may receive in a given time period to ensure safe and appropriate use. These limits are based on recommended dosing schedules and the availability of several strengths of the medication. Quantity limits automatically apply at the time the prescriptions are purchased. Mass General Brigham Health Plan 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 Mass General Brigham Health Plan 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 drugs 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
- Compliance monitoring, adherence counseling, and clinical follow-up
- Educational resources regarding medication use, side effects, and injection administration

Specialty Medications are limited to a 30-day supply, unless otherwise noted. 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

Mass General Brigham Health Plan covers only medications 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 supplements\*
- Therapeutic devices or appliances (except where noted)\*
- Biologicals, immunization agents, or vaccines obtained through the medical benefit
- Blood or blood plasma<sup>†</sup>
- 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<sup>†</sup>
- Charges for administration or injection of any drug<sup>†</sup>
- If an FDA approved generic drug is available, the brand name equivalent is not covered unless medically necessary
- Drugs that are not FDA-approved
- Progesterone supplements
- Fluoride supplements / vitamins for members older 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

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

<sup>†</sup> 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
- Schedule 1 controlled substances (for example, marijuana)
- Products and/or kits co-packaged with OTC products

## Frequently asked questions

### **My doctor has prescribed a medication that is not listed in the Mass General Brigham Health Plan 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. The request will be reviewed to determine if it meets medical necessity.

### **How does Mass General Brigham Health Plan 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 Mass General Brigham Health Plan members?**

Newly approved medications are reviewed by our 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 lookup tool 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 pharmacy* tool at [MGBHP.org/pharmacy](https://MGBHP.org/pharmacy) 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.











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. 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 for 3 months or longer to qualify for reimbursement.*

#### 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 on our website under Member Resources.



#### How do I get reimbursed?

The quickest way to submit your request is through the member portal at [Member.MassGeneralBrighamHealthPlan.org](https://Member.MassGeneralBrighamHealthPlan.org) or in the Health Plan app.

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

## 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 [MassGeneralBrighamHealthPlan.org](https://www.massgeneralbrigham.org/healthplan) 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 50-80 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 50 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 (age 65 to 75)

## 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 eye of all newborns
- Hearing screening
- Hemoglobinopathies or sickle cell screening for newborns
- Phenylketonuria (PKU) screening

Mass General Brigham Health Plan  
Vision Discount



## See the most out of life with more from your Mass General Brigham Health Plan

Your 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 plan<sup>1</sup> includes:

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

To learn more call the EyeMed automated service line at 866-723-0391. If you use a TTY/TDD call 711.



LENSCRAFTERS®



<sup>1</sup> Discount plan does not apply to members up to age 19 with Mass General Brigham Health Plan coverage that includes the ACA-required Pediatric Vision benefit. Please see your Schedule of Benefits.

<sup>2</sup> Items purchased separately will be discounted 20% off the retail price.



## 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. Mass General Brigham Health Plan provides health insurance coverage to you. Because you get health benefits from Mass General Brigham Health Plan, we have protected health information (PHI) about you. By law, Mass General Brigham Health Plan must protect the privacy of your health information.

### **This notice explains:**

- When Mass General Brigham Health Plan may use and share your health information.
- What your rights are regarding your health information.

### **Mass General Brigham Health Plan 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 Mass General Brigham Health Plan (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, Mass General Brigham Health Plan will follow the stricter law. Except as described above, Mass General Brigham Health Plan 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, Mass General Brigham Health Plan is prohibited from using or disclosing any genetic information.

Mass General Brigham Health Plan 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. Mass General Brigham Health Plan may charge you to cover certain costs, such as copying and postage.
- Ask Mass General Brigham Health Plan 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 Mass General Brigham Health Plan to limit its use or sharing of your health information. You must ask for this in writing. Mass General Brigham Health Plan may not be able to grant this request.
- Ask Mass General Brigham Health Plan 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 Mass General Brigham Health Plan 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, Mass General Brigham Health Plan must give you notice explaining that we protect your health information, and that we must follow the terms of this notice. If Mass General Brigham Health Plan 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 Mass General Brigham Health Plan has about you. Mass General Brigham Health Plan 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 Mass General Brigham Health Plan has violated your privacy rights, contact our Privacy Officer in writing at the following address:

Mass General Brigham Health Plan 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

Mass General Brigham Health Plan will not retaliate against you if you file a complaint either with Mass General Brigham Health Plan 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

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

- Mass General Brigham Health Plan 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.
- Mass General Brigham Health Plan 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 Mass General Brigham Health Plan or as otherwise required by law.

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

**Please use a ball point pen  
and press down firmly.**

**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  
☐ Adoption of child\*  
☐ Divorce  
☐ Left employment  
☐ Reached age 65
- ☐ Add disabled dependents  
☐ Moved out of service area  
☐ Voluntary  
☐ Loss of dependent eligibility  
☐ Death, exact date \_\_\_\_\_

**Group Information**Mass General Brigham Health Plan  
group numberEmployer  
name

Date of employment

Month

Day

Year

Effective  
Date

Month

Day

Year

Plan  
design**Intermediary**

- ☐ Group  
☐ Non-group

**Employee Information**

Last name

First name

M.I.

Date of birth (mm/dd/yy)

Social Security Number

Sex (m/f/u)

Home phone – include area code

Email address

Street mailing address

Apt.

P.O. Box

City

State

Zip code

For help finding an in-network PCP, please go to [MassGeneralBrighamHealthPlan.org](https://MassGeneralBrighamHealthPlan.org) and search our Find a Doctor tool. Then, select the product you are enrolling in from the drop down list. You may change your PCP at any time.

**PCP and Site Information**Primary  
care siteYour Primary Care Physician  
(Last name, First, M.I.)

Existing patient?

- ☐ Yes ☐ No

**Language**

What language do you speak most often? Please check (✓) the appropriate box. Knowing the main language spoken by you and your family members will help us to better serve your needs.

- ☐ English ☐ Spanish ☐ Sign Language ☐ Arabic ☐ Cantonese ☐ Cape Verdean Creole ☐ Chinese ☐ French ☐ Haitian Creole ☐ Mandarin ☐ Portuguese ☐ Russian ☐ Vietnamese  
☐ Other, please specify \_\_\_\_\_

What language do you write with most often? Please check (✓) the appropriate box. Knowing the main language spoken by you and your family members will help us to better serve your needs.

- ☐ English ☐ Spanish ☐ Sign Language ☐ Arabic ☐ Cantonese ☐ Cape Verdean Creole ☐ Chinese ☐ French ☐ Haitian Creole ☐ Mandarin ☐ Portuguese ☐ Russian ☐ Vietnamese  
☐ Other, please specify \_\_\_\_\_

**Confidential Personal Info**

What is your race?

- ☐ Black or African American ☐ White ☐ American Indian or Alaska Native ☐ Asian ☐ Native Hawaiian or Other Pacific Islander ☐ Some Other Race (please specify) \_\_\_\_\_  
☐ I choose not to answer ☐ I am not sure / Don't know

How well do you speak English?

- ☐ Very well ☐ Well ☐ Not well ☐ Not at all ☐ I choose not to answer ☐ I am not sure / Don't know

What is your Hispanic Ethnicity?

- ☐ Hispanic or Latino ☐ Not Hispanic or Latino ☐ I choose not to answer ☐ I am not sure / Don't know

What is your ethnicity?

- ☐ African ☐ African American ☐ American ☐ Asian Indian ☐ Brazilian ☐ Cambodian ☐ Cape Verdean ☐ Caribbean Islander ☐ Central American ☐ Chinese ☐ Colombian  
☐ Cuban ☐ Dominican ☐ Eastern European ☐ European ☐ Filipino ☐ Guatemalan ☐ Haitian ☐ Honduran ☐ Japanese ☐ Korean ☐ Laotian/Lao ☐ Mexican  
☐ Middle Eastern or North African ☐ Portuguese ☐ Puerto Rican ☐ Russian ☐ Salvadoran ☐ South American ☐ Vietnamese ☐ My ethnicity is not listed (please specify) \_\_\_\_\_  
☐ I choose not to answer ☐ I am not sure / Don't know

What is your gender identity?

- ☐ Female ☐ Male ☐ Transgender ☐ Genderqueer ☐ Intersex ☐ Unspecified ☐ My gender identity is not listed (please specify) \_\_\_\_\_ ☐ I choose not to answer  
☐ I am not sure / Don't know

What are your personal pronouns?

- ☐ He/Him ☐ She/Her ☐ They/Them ☐ Other (please specify) \_\_\_\_\_ ☐ I choose not to disclose

What is your sexual orientation?

- ☐ Bisexual ☐ Lesbian or gay or homosexual ☐ Queer, pansexual, and/or questioning ☐ Straight or heterosexual ☐ My sexual orientation is not listed (please specify) \_\_\_\_\_  
☐ I choose not to answer ☐ I am not sure / Don't know

Are you deaf or do you have difficulty hearing?

- ☐ Yes ☐ No ☐ I choose not to answer ☐ I am not sure / Don't know

Are you blind or do you have serious difficulty seeing, even when wearing glasses?

- ☐ Yes ☐ No ☐ I choose not to answer ☐ I am not sure / Don't know

Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions? (5 years old or older)

- ☐ Yes ☐ No ☐ I choose not to answer ☐ I am not sure / Don't know

Do you have difficulty walking or climbing stairs?

- ☐ Yes ☐ No ☐ I choose not to answer ☐ I am not sure / Don't know

Do you have difficulty dressing or bathing? (5 years old and older)

- ☐ Yes ☐ No ☐ I choose not to answer ☐ I am not sure / Don't know

Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping? (15 years old and older)

- ☐ Yes ☐ No ☐ I choose not to answer ☐ I am not sure / Don't know

Group Coverage

Type of Mass General Brigham Health Plan coverage (check only one)		In addition to Mass General Brigham Health Plan, my spouse or children are covered by a health plan offered by:				
<input type="checkbox"/> Self <input type="checkbox"/> Individual & spouse <input type="checkbox"/> Individual & child/children <input type="checkbox"/> Family		Employer		Insurance co. name	Policy #	Effective date
Are you and/or your spouse eligible for Medicare?	Self <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, are you enrolled in <input type="checkbox"/> Medicare Part A <input type="checkbox"/> Medicare Part B			Your Medicare policy number	
	Spouse <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, is your spouse enrolled in <input type="checkbox"/> Medicare Part A <input type="checkbox"/> Medicare Part B			Your spouse's Medicare policy number	

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

Spouse last name		First name		M.I.	Primary care site	Existing patient?
Date of birth	Social Security Number	Sex (m/f/u)	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		M.I.	Primary care site	Existing patient?
Date of birth	Social Security Number	Sex (m/f/u)	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		M.I.	Primary care site	Existing patient?
Date of birth	Social Security Number	Sex (m/f/u)	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		M.I.	Primary care site	Existing patient?
Date of birth	Social Security Number	Sex (m/f/u)	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		M.I.	Primary care site	Existing patient?
Date of birth	Social Security Number	Sex (m/f/u)	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 Mass General Brigham Health Plan 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 Mass General Brigham Health Plan 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 Mass General Brigham Health Plan 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 (asignmos) beneficios a Mass General Brigham Health Plan 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 Mass General Brigham Health Plan y sus Proveedores de Cuidado de Salud afiliados pueden obtener o divulgar mi (nuestra) información médica, incluyendo registros medicos, 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 Mass General Brigham Health Plan tenga vigencia para la obtención de suministros médicos, toda la atención y todos los suministros deben ser autorizados y proporcionados por un medico de cuidado primario participante autorizado (segun 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: _____