



Mass General Brigham
Health Plan

2024 Medicare Advantage Product Training

Garity Advantage

August 2023

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

Our Organization

- Mass General Brigham is a non-profit organization committed to patient care, research, teaching, and service to the community. We are the state's largest private employer with over 80,000 employees.
- We are an integrated academic healthcare system, uniting great minds in medicine to make life-changing impact for patients in our communities and people around the world.
- We connect a full continuum of care across a system of academic medical centers, community and specialty hospitals, a health insurance plan, physician networks, community health centers, home care, and long-term care services. This includes five nationally ranked hospitals based on *U.S. News & World Report Best Hospitals for 2022-2023*.
- We are one of the nation's leading biomedical research organizations, with an annual research budget of nearly \$2 billion. We serve as a principal teaching affiliate of Harvard Medical School.



Mass General Brigham Headquarters in Somerville, MA.



Affiliate Institutions

Our affiliates include...

- Brigham and Women's Hospital
- Massachusetts General Hospital
- Mass General Brigham Health Plan
- Brigham and Women's Faulkner Hospital
- Community Physicians Organization
- Cooley Dickenson Hospital
- Martha's Vineyard Hospital
- Mass Eye & Ear
- Mass General Brigham Home Care
- MGH Institute of Health Professions
- McLean Hospital
- Nantucket Cottage Hospital
- Newton-Wellesley Hospital
- Salem Hospital
- Spaulding Rehabilitation Network
- Wentworth-Douglass Hospital



Top Left: Mass General Hospital, Top Right: Brigham and Women's Hospital, Bottom Left: Wentworth-Douglass Hospital, Bottom Right: Mass Eye & Ear

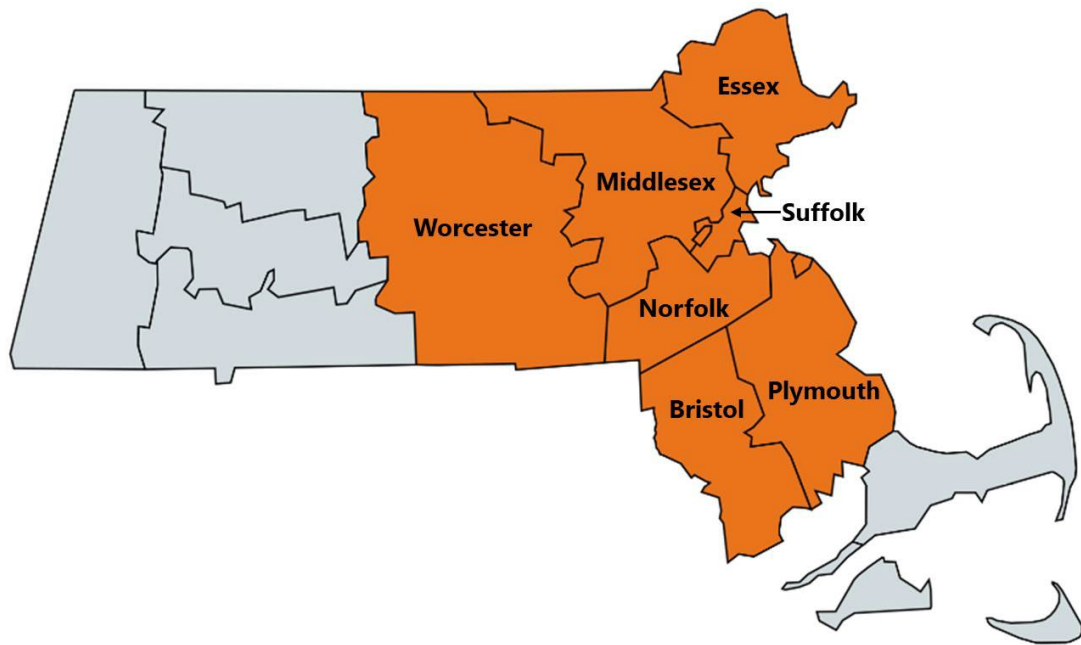


Mass General Brigham Advantage Plans

Plan	Rationale
MASS GENERAL BRIGHAM ADVANTAGE (PPO): \$0 Premium	<ul style="list-style-type: none">• Majority of growth in local market is in \$0 premium, PPO plans• Product is a 'must have' to compete
MASS GENERAL BRIGHAM ADVANTAGE SECURE (HMO-POS): \$52 Premium	<ul style="list-style-type: none">• Appeals to skeptics of \$0 premium products• Requires the selection of a PCP• Physician referrals are not required• Designed to optimize value for MGB
MASS GENERAL BRIGHAM ADVANTAGE PREMIER (PPO): \$140 Premium	<ul style="list-style-type: none">• Appeals to the Medicare Supplement purchaser• Offers freedom to see any provider• Low out of pocket costs with the added benefits of Part D• Enhanced supplemental benefit levels



Seven county service area includes 1.1 million Medicare eligible individuals



County	Medicare Eligibles	MA Enrolled	MA Penetration Rate
Bristol	125,589	37,868	30.15%
Essex	166,118	51,355	30.91%
Middlesex	281,516	87,643	31.13%
Norfolk	137,956	38,626	28.00%
Plymouth	118,553	30,683	25.88%
Suffolk	108,784	40,675	37.39%
Worcester	165,149	66,619	40.34%
TOTAL	1,103,665	353,469	32%



Plan Details



Medicare Advantage Accumulators

- No medical deductible on any plan
- No pharmacy deductible on any plan
- All plans have a maximum out of pocket
 - In network cost sharing accumulates to both in and out of network but out of network cost sharing applies only to the out of network MOOP
 - Not all cost sharing applies to the MOOP – pharmacy costs do not apply nor does any cost sharing for supplemental benefits

	Mass General Brigham Advantage Secure (HMO-POS)		Mass General Brigham Advantage (PPO)		Mass General Brigham Advantage Premier (PPO)	
	In-Network	Out of Network	In-Network	Out of Network	In-Network	Out of Network
MOOP	\$3,350	\$7,000	\$6,400	\$9,700	\$3,150	\$5,450
Rx Deductible	N/A		N/A		N/A	



Medical Product Overview – PCP and Specialist visits

- In-network PCP and Specialist cost sharing is low in all plans.
 - Limit financial barriers to access
 - Encourage preventive / primary care

	Mass General Brigham Advantage Secure (HMO-POS)		Mass General Brigham Advantage (PPO)		Mass General Brigham Advantage Premier (PPO)	
	In-Network	Out of Network	In-Network	Out of Network	In-Network	Out of Network
PCP	\$0	\$20	\$0	\$20	\$0	\$10
Specialist	\$40	\$50	\$45	\$65	\$20	\$40



Medical Product Overview - Emergency, Urgent Care and Emergency Ambulance

- Cost sharing for these benefits is the same in-network and out of network
- Prudent layperson rules apply
- Our plans allow for worldwide coverage of emergency room, urgent care and emergency ambulance – this is above and beyond what Medicare covers

	Mass General Brigham Advantage Secure (HMO-POS)		Mass General Brigham Advantage (PPO)		Mass General Brigham Advantage Premier (PPO)	
	In-Network	Out of Network	In-Network	Out of Network	In-Network	Out of Network
Emergency	\$105		\$90		\$90	
Urgent Care	\$50		\$50		\$30	
Emergency Ambulance	\$200		\$275		\$200	



Product Overview – Inpatient Hospital

- Inpatient hospitalization for medical services is unlimited.
- Inpatient hospitalization for psychiatric services differs based on place of service. Care in a psychiatric hospital follows the original Medicare rules – 190-day lifetime limit

	Mass General Brigham Advantage Secure (HMO-POS)		Mass General Brigham Advantage (PPO)		Mass General Brigham Advantage Premier (PPO)	
	In-Network	Out of Network	In-Network	Out of Network	In-Network	Out of Network
General Hospital	\$230 copay per day for days 1-5 \$0 copay per day for days 6+	30% coinsurance per admission	\$335 copay per day for days 1-5 \$0 copay per day for days 6+	40% coinsurance per admission	\$125 copay per day for days 1-3 \$0 copay per day for days 4+	20% coinsurance per admission
Psychiatric Department of General Hospital	\$230 copay per day for days 1-5 \$0 copay per day for days 6+	30% coinsurance per admission	\$335 copay per day for days 1-5 \$0 copay per day for days 6+	40% coinsurance per admission	\$125 copay per day for days 1-3 \$0 copay per day for days 4+	20% coinsurance per admission
Psychiatric Hospital (190-day lifetime limit, then not covered)	\$230 days 1-6; \$0 days 6-90 then \$0 during CMS Lifetime Reserve Days (60)	30% coinsurance per admission	\$335 days 1-5; \$0 days 7-90 then \$0 during CMS Lifetime Reserve Days (60)	40% coinsurance per admission	\$125 days 1-3; \$0 days 4-90 then \$0 during CMS Lifetime Reserve Days (60)	20% coinsurance per admission



Product Overview – Skilled Nursing Facility

- Our plans do not require the three-day hospital stay that original Medicare requires
- We do follow the Medicare standard 100 days per benefit period

	Mass General Brigham Advantage Secure (HMO-POS)		Mass General Brigham Advantage (PPO)		Mass General Brigham Advantage Premier (PPO)	
	In-Network	Out of Network	In-Network	Out of Network	In-Network	Out of Network
Skilled Nursing Facility	\$0 copay per day days 1-20 \$160 copay per day days 21-44 \$0 copay per day days 45-100	30% coinsurance per admission	\$0 copay per day days 1-20 \$160 copay per day days 21-44 \$0 copay per day days 45-100	40% coinsurance per admission	\$0 copay per day days 1-20 \$160 copay per day days 21-44 \$0 copay per day days 45-100	20% coinsurance per admission



Product Overview – Outpatient Hospital, Ambulatory Surgical Center (ASC), Observation

	Mass General Brigham Advantage Secure (HMO-POS)		Mass General Brigham Advantage (PPO)		Mass General Brigham Advantage Premier (PPO)	
	In-Network	Out of Network	In-Network	Out of Network	In-Network	Out of Network
Outpatient Hospital	\$0 - 200 copay	30% coinsurance	\$0 - 300 copay	40% coinsurance	\$0 -125 copay	20% coinsurance
ASC	\$0 - 200 copay	30% coinsurance	\$0 - 300 copay	40% coinsurance	\$0 -125 copay	20% coinsurance
Observation	\$0 copay	30% coinsurance	\$0 copay	40% coinsurance	\$0 copay	20% coinsurance



Product Overview – Lab and Radiology

	Mass General Brigham Advantage Secure (HMO-POS)		Mass General Brigham Advantage (PPO)		Mass General Brigham Advantage Premier (PPO)	
	In-Network	Out of Network	In-Network	Out of Network	In-Network	Out of Network
Lab	\$0 copay	20% coinsurance	\$0 copay	40% coinsurance	\$0 copay	\$10 copay
X-ray	\$10 copay	20% coinsurance	\$15 copay	40% coinsurance	\$0 copay	\$10 copay
CT Scans, MRIs, PET Scans	\$75 - 160 copay	20% coinsurance	\$75 - 160 copay	40% coinsurance	\$75 - 150 copay	20% coinsurance



Product Overview – Outpatient Therapies

	Mass General Brigham Advantage Secure (HMO-POS)		Mass General Brigham Advantage (PPO)		Mass General Brigham Advantage Premier (PPO)	
	In-Network	Out of Network	In-Network	Out of Network	In-Network	Out of Network
Outpatient physical, occupational and speech therapy	\$15 copay	\$50 copay	\$40 copay	\$65 copay	\$20 copay	\$40 copay
Medicare-covered chiropractic services	\$15 copay	\$50 copay	\$15 copay	\$65 copay	\$20 copay	\$40 copay



Plan Details – Part D Prescription Coverage



Part D benefit structure

	MASS GENERAL BRIGHAM ADVANTAGE (PPO)	MASS GENERAL BRIGHAM ADVANTAGE SECURE (HMO-POS)	MASS GENERAL BRIGHAM ADVANTAGE PREMIER (PPO)
Deductible	No Deductible	No Deductible	No Deductible
Tier 1 Preferred Generic	\$0	\$0	\$0
Tier 2 Generic	\$3	\$3	\$3
Tier 3 Preferred Brand	\$37	\$37	\$37
Tier 4 Non-Preferred Drugs	\$100	\$100	\$100
Tier 5 Specialty Tier	33%	33%	33%



Supplemental Benefits



Overview of Mass General Brigham Medicare Advantage supplemental benefits

Benefit	Vendor	MASS GENERAL BRIGHAM ADVANTAGE (PPO)	MASS GENERAL BRIGHAM ADVANTAGE SECURE (HMO-POS)	MASS GENERAL BRIGHAM ADVANTAGE PREMIER (PPO)
Routine and Comprehensive Dental	Liberty Dental	\$1,500	\$2,000	\$2,500
Routine Eye Exams and Eyewear	EyeMed	\$0 / \$200	\$0 / \$250	\$0 / \$300
Routine Hearing Exams and Hearing Aids	TruHearing	\$0 / \$699-\$999	\$0 / \$699-\$999	\$0 / \$699-\$999
OTC Drugs and Supplies	Convey Health Solutions	\$85/quarter	\$95/quarter	\$120/quarter
Post-Discharge Meals	Community Servings	Up to 10 meals per week for 2 weeks	Up to 10 meals per week for 2 weeks	Up to 10 meals per week for 2 weeks
Fitness Reimbursement	N/A	\$300	\$300	\$300
Weight Loss Reimbursement	N/A	\$150	\$150	\$150
Worldwide Emergency/Urgent/Ambulance	N/A	\$90/\$50/\$275	\$105/\$50/\$200	\$90/\$30/\$200
Annual Physical Exam	N/A	✓	✓	✓
Waiver of First 3 Pints of Blood Deductible	N/A	✓	✓	✓
Additional Inpatient Acute Days	N/A	✓	✓	✓



Supplemental dental benefit offered through Liberty Dental

Covered benefits at a \$0 copay:

- Covered preventive services per calendar year:
 - 2 cleanings
 - 2 set of x-rays
 - 2 oral evaluation visits
 - 2 fluoride treatments

Calendar-year maximum benefit amounts:

- Mass General Brigham Advantage (PPO): **\$1,500**
- Mass General Brigham Advantage Secure (HMO-POS): **\$2,000**
- Mass General Brigham Advantage Premier (PPO): **\$2,500**

Covered comprehensive services up to the plan-specific calendar year maximum benefit amount:

- Restorative services – e.g., crowns, fillings
- Endodontics services – e.g., root canals
- Periodontal services – e.g., treatment for gum disease
- Prosthodontic services – e.g., dentures
- Oral and Maxillofacial Services – e.g., tooth extraction



Supplemental vision benefit offered through EyeMed

- All of our Medicare Advantage plans include a supplemental vision benefit
 - Members may receive 1 routine vision exam through a EyeMed provider per calendar year at a \$0 copay
 - \$40 member reimbursement for OON routine vision exams
 - Each plan includes an allowance for prescription eyeglasses or contact lenses per calendar year

Mass General Brigham Advantage (PPO)	Mass General Brigham Advantage Secure (HMO-POS)	Mass General Brigham Advantage Premier (PPO)
\$200	\$250	\$300



Supplemental hearing benefit offered through TruHearing

How does the benefit work?

- TruHearing Advanced hearing aids:
 - \$699 copay per aid
- TruHearing Premium hearing aids:
 - \$999 copay per aid
- Initial routine hearing exam:
 - \$0 copay in network
- Members are eligible to receive 2 hearing aids every year (most will replace every 3 years).
- Specific copay levels for the exam and hearing aids can be found in the member's Evidence of Coverage and will also be communicated when they call TruHearing

Hearing aids cost an average of \$4,672/pair and members save an average of \$2,642/pair with TruHearing



TruHearing member experience

Step 1:

Member calls TruHearing:

Member will speak with a TruHearing Hearing Consultant who will

- Verify eligibility
- Explain the program
- Schedule an exam with a local TruHearing provider
- Send an appointment confirmation
- Call with a reminder the day before the appointment

Step 2:

Member visits a TruHearing network provider for a hearing exam

At the TruHearing provider's office

- Member receives an audiogram
- Provider asks questions about social life, activity levels, hobbies, and more
- Provider and member discuss options:
 - Technology
 - Style
 - Color
 - Price
- Provider orders hearing aids from TruHearing
- Member sets follow-up appointment for fitting

Step 3:

Member attends fitting appointment at the TruHearing provider's office:

- Provider programs aids according to findings on audiogram prior to appointment
- Provider fits aids to member
- Provider trains member on all aspects of use and care:
 - Adjustments
 - Cleaning
 - Changing of batteries o Storage
 - Installation and functionality of TruHearing app



Supplemental benefit for post-inpatient meals through Community Servings

Meal Programs

Members are eligible for 20 meals over a 10-day period. Community Servings delivers five days' worth of food each week in one weekly meal delivery. Weekly meals include five (5) lunches (combination of soups, stews, salads), five (5) dinner entrees, milk, fruit, desserts, and snacks.

The medically tailored meals provide roughly 2/3 of a member's daily caloric needs (about 1,340 calories) based on a 2,000 calorie per day diet. There are fifteen (15) different meal selections to choose from:

- Cardiac
- Diabetic
- High Calorie/Protein
- Low Fiber
- Low Lactose
- Mild (low in spice & acid)
- No Fish
- No Nuts
- No Red Meat
- Pescatarian
- Renal
- Soft
- Vegetarian
- Wellness



2023 to 2024 Benefit Improvements

Plan(s)	Benefit	2023	2024
\$0 PPO	Annual Maximum (MOOP)	\$8,300/\$10,000	\$6,400/\$9,700
HMO-POS	Annual Maximum (MOOP)	\$3,450/\$7,000	\$3,350/\$7,000
Premier PPO	Annual Maximum (MOOP)	\$3,450/\$5,450	\$3,150/\$5,450
\$0 PPO	Outpatient Lab services	\$5 copay	\$0 copay
\$0 PPO	Cardiac Rehab	\$20 copay	\$0 copay
\$0 PPO & HMO-POS	Rx Deductible Tiers 3-5	\$275 (\$0 PPO) \$200 (HMO-POS)	No Deductible
All	Observation stay	\$175-\$300	\$0 copay
All	Formulary	Standard	Custom
All	Supplemental OTC <i>Increase quarterly allowance</i>	\$50, \$60, \$75	\$85, \$95, \$120
All	Nurse Advice Line	N/A	Add to all plans
All	Comprehensive dental <i>Increase annual max</i>	\$750, \$250 quarter, \$1,500	\$1,500, \$2,000, \$2,500
All	<i>Diabetic Supplies</i>	20%	\$0
All	<i>Mental Health/Substance Abuse</i>	\$40/\$30/\$20	\$30/\$20/\$10



Network Information



Hospitals by County Overview

County	PAR Hospitals	Non-Par Hospitals
Bristol	Steward Health Care: <ul style="list-style-type: none"> • Saint Anne's Hospital • Morton Hospital 	SouthCoast Health <ul style="list-style-type: none"> • Charlton Memorial • St. Luke's Hospital Sturdy <ul style="list-style-type: none"> • Sturdy Memorial Hospital
Plymouth	Signature Health: <ul style="list-style-type: none"> • Signature Healthcare Brockton Hospital Steward Health Care: <ul style="list-style-type: none"> • Good Samaritan Medical Center 	Beth Israel Lahey: <ul style="list-style-type: none"> • Beth Israel Deaconess Hospital- Plymouth Southcoast Hospitals <ul style="list-style-type: none"> • Tobey Hospital



Hospitals by County Overview

County	PAR Hospitals	Non-Par Hospitals
Suffolk	<p>Mass General Brigham:</p> <ul style="list-style-type: none"> Brigham And Women's Faulkner Hospital Brigham And Women's Hospital Massachusetts Eye And Ear Infirmary Massachusetts General Hospital <p>Dana-Farber:</p> <ul style="list-style-type: none"> Dana-Farber Cancer Institute <p>Steward Health Care:</p> <ul style="list-style-type: none"> Carney Hospital St. Elizabeth's Medical Center 	<p>Beth Israel Lahey</p> <ul style="list-style-type: none"> Beth Israel Deaconess Medical Center New England Baptist Hospital <p>Boston Medical Center</p> <ul style="list-style-type: none"> Boston Medical Center <p>Tufts Medicine (formerly Wellforce)</p> <ul style="list-style-type: none"> Tufts Medical Center



Hospitals by County Overview

County	PAR Hospitals	Non-Par Hospitals
Worcester	<p>Heywood Health:</p> <ul style="list-style-type: none"> • Athol Memorial Hospital • Heywood Hospital <p>Milford Regional:</p> <ul style="list-style-type: none"> • Milford Regional Medical Center <p>UMASS Memorial Health:</p> <ul style="list-style-type: none"> • Burbank Hospital • UMASS Memorial – Health Alliance – Clinton Hospital • UMASS Memorial Health Alliance – Leominster Hospital • UMASS Memorial Medical Center – Memorial and University Campus • Harrington Memorial Hospital 	<p>Tenet Health Care</p> <ul style="list-style-type: none"> • Saint Vincent Hospital



Hospitals by County Overview

County	PAR Hospitals	Non-Par Hospitals
Middlesex	<p>Mass General Brigham:</p> <ul style="list-style-type: none"> Newton-Wellesley Hospital <p>Emerson Hospital:</p> <ul style="list-style-type: none"> Emerson Hospital <p>Steward Health Care:</p> <ul style="list-style-type: none"> Nashoba Valley Medical Center <p>UMASS Memorial Health:</p> <ul style="list-style-type: none"> Marlborough Hospital 	<p>Tufts Medicine (formerly Wellforce)</p> <ul style="list-style-type: none"> Lawrence Memorial Hospital Of Medford Melrose-Wakefield Hospital Lowell General - Saints Campus Lowell General Hospital <p>Tenet Health Care</p> <ul style="list-style-type: none"> MetroWest Medical Center MetroWest Medical Center-Leonard Morse Campus <p>Beth Israel Lahey</p> <ul style="list-style-type: none"> Lahey Hospital & Medical Center Mount Auburn Hospital Winchester Hospital <p>Cambridge Health Alliance</p> <ul style="list-style-type: none"> CHA Cambridge Hospital CHA Everett Hospital CHA Somerville Hospital



Hospitals by County Overview

County	PAR Hospitals	Non-Par Hospitals
Norfolk	South Shore Health: <ul style="list-style-type: none"> South Shore Hospital Steward Health Care: <ul style="list-style-type: none"> Steward Norwood Hospital (Temporarily Closed) 	Beth Israel Lahey: <ul style="list-style-type: none"> Beth Israel Deaconess Hospital- Milton Beth Israel Deaconess Hospital-Needham
Essex	Mass General Brigham: <ul style="list-style-type: none"> North Shore Medical Center - Salem Campus Steward Health Care: <ul style="list-style-type: none"> Steward Holy Family Hospital (Haverhill) Steward Holy Family Hospital, Inc Lawrence General Hospital: <ul style="list-style-type: none"> Lawrence General Hospital 	Beth Israel Lahey: <ul style="list-style-type: none"> Addison Gilbert Hospital Anna Jaques Hospital Beverly Hospital Lahey Medical Center - Peabody





Mass General Brigham
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