

Effective: December, 2020

Product Reference Guide

Fallon Health Member ID cards

Fallon Health is moving forward as the proud partner of providers who offer high-quality care—providers like you!

At Fallon Health, it is our goal to keep you informed about our products, policies and member benefits. This guide is designed to help you identify Fallon's member ID cards and corresponding plan details such as the referral process, copayments and deductibles. Specific plan information may vary on individual cards, but you can always access the provider tools at fallonhealth.org/providers or contact Provider Relations for further information.



fallonhealth.org/providers • 1-866-275-3247

Our PRODUCTS

The checked boxes indicate the Fallon plans you are contracted for as of ____/____/____.

Your Provider Relations Representative will mark the contracted plans and date. Please call Provider Relations at 1-866-275-3247, prompt 4 if you have additional questions.

COMMERCIAL plans:

- Direct Care 3
- Select Care 3
- Fallon Preferred Care 3
- Steward Community Care 3

CUSTOMIZED EMPLOYER GROUP* plans:

- Harrington Advantage 4
follows Select Care network
- Harrington HHCS 2 ACA 4
follows Direct Care network
- The City of Worcester Advantage—Direct Plan 4
follows Direct Care network
- The City of Worcester Advantage—Advantage Plan... 4
 Tier 1 Tier 2
follows Select Care network
- GIC—Direct Care 5
follows Direct Care network
- GIC—Select Care 5
follows Select Care network

INDIVIDUAL plans:

- Fallon Health Connector options 5
 - Direct Care Select Care
 - Community Care

MASSHEALTH ACCOUNTABLE CARE ORGANIZATION (ACO) plans:

- Berkshire Fallon Health Collaborative (BFHC) 6
- Fallon 365 Care 6
- Wellforce Care Plan 6

MEDICARE plans:

- Fallon Medicare Plus™ Central HMO 6
- Fallon Medicare Plus™ HMO 7
- Fallon Medicare Plus™ Central Premier HMO 7
- Fallon Medicare Plus™ Premier HMO 7
- Fallon Medicare Plus™ Supplement 7
- Fallon Medicare Plus™ Freedom 7

MASSHEALTH STANDARD eligible seniors:

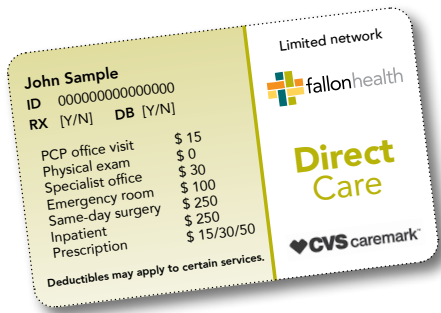
- NaviCare® HMO SNP 8
- NaviCare® SCO 8

PACE program:

- Summit ElderCare® 8

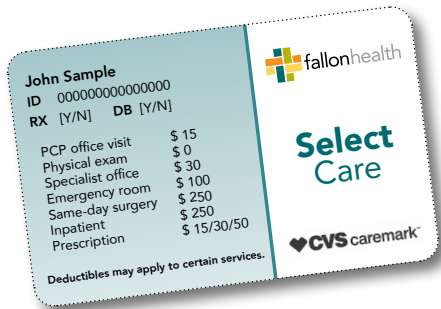
*Administrative services only (ASO) plans.

COMMERCIAL plans



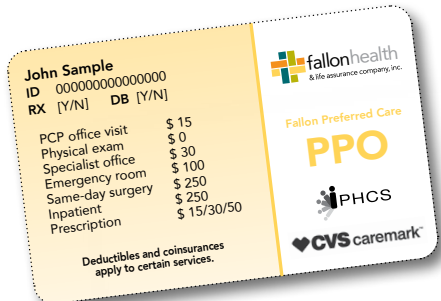
Direct Care

- Members must choose a PCP from the Direct Care network.
- PCP referral is required for in-network specialty care. Out-of-network specialty care requires prior authorization.
- Members are eligible for Fallon's Peace of Mind Program™.



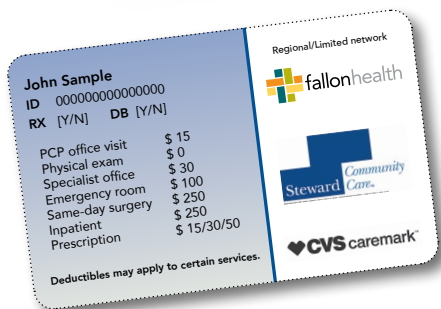
Select Care

- Members must choose a PCP from the Select Care network.
- PCP referral is required for in-network specialty care. Out-of-network specialty care requires prior authorization.



Fallon Preferred Care

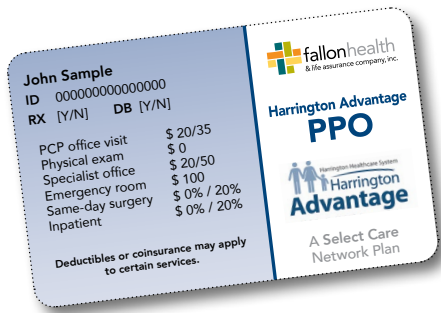
- Preferred provider organization (PPO) product.
- Members have nationwide access to hospitals and physicians available through the Fallon Preferred Care and PHCS/MultiPlan networks.
- Offers in-network and out-of-network benefit levels.



Steward Community Care

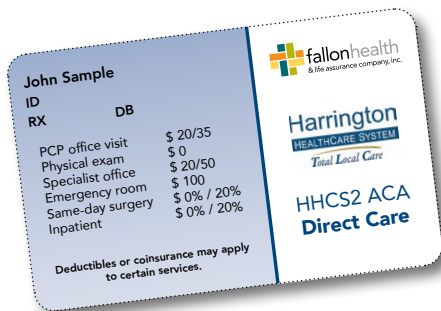
- Members must choose a PCP from the Steward Community Care network.
- PCP referral is required for in-network specialty care. Out-of-network specialty care requires prior authorization.

CUSTOMIZED EMPLOYER GROUP plans



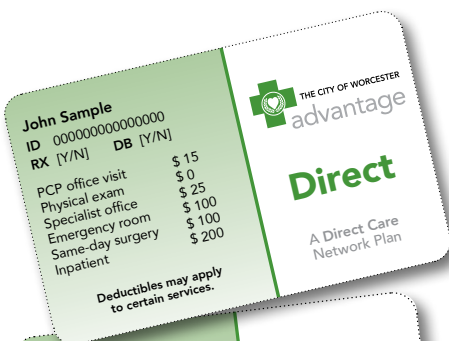
Harrington Advantage

- Preferred provider organization (PPO) product.
- Offers in-network and out-of-network benefit levels.
- Members are not required to designate a PCP, and PCP referrals are not needed for specialty care.
- In-network providers are categorized into two tiers.
- Cost-sharing varies by tier. Members who see a Tier 1 provider will pay a lower cost-sharing amount than when they see a Tier 2 or out-of-network provider.



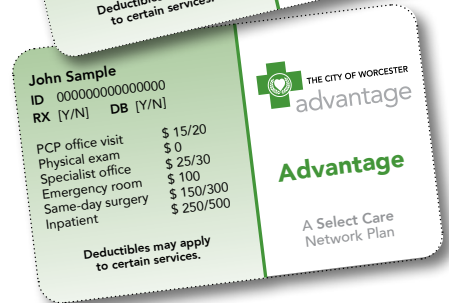
Harrington HHCS 2 ACA

- Members must choose a PCP from the HHCS 2 ACA plan network, which is based on Fallon's Direct Care network.
- PCP referral is required for in-network specialty care. Out-of-network specialty care requires prior authorization.
- Members of HHCS 2 ACA are eligible for the Peace of Mind Program™.

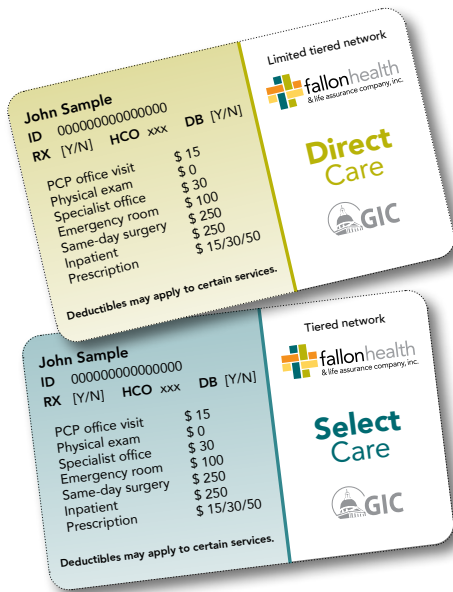


The City of Worcester Advantage— Direct Plan and Advantage Plan

- Direct Plan members must choose a PCP from The City of Worcester Advantage Direct network, based on Fallon's Direct Care network.
- Advantage Plan members must choose a PCP from The City of Worcester Advantage network, a tiered network based on Fallon's Select Care network.
- PCP referral is required for in-network specialty care. Out-of-network specialty care requires prior authorization.
- Direct Plan members are eligible for Fallon's Peace of Mind Program™.
- Advantage Plan providers are categorized into 1 of 2 tiers. Cost-sharing varies by tier.



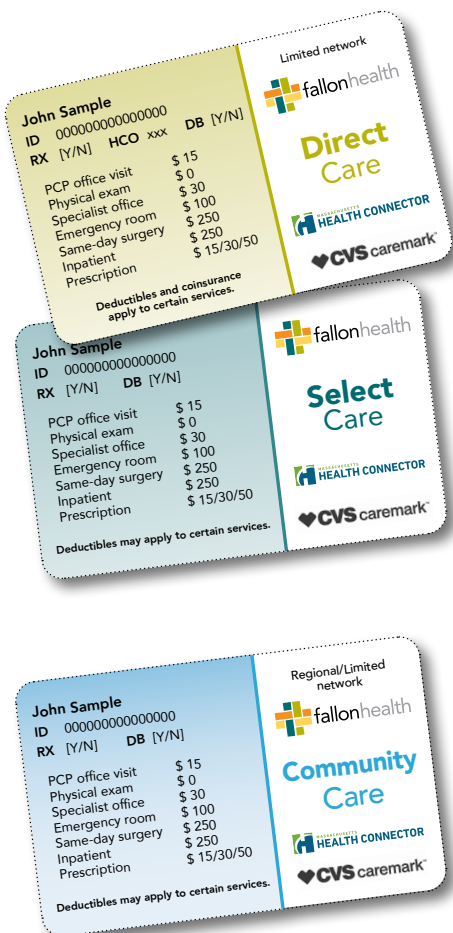
CUSTOMIZED EMPLOYER GROUP plans, *continued*



Commonwealth of Massachusetts Group Insurance Commission (GIC)—Direct Care and Select Care

- Direct Care members must choose a PCP from Fallon’s Direct Care network. Specialist only cost-sharing varies by tier.
- Select Care members must choose a PCP from Fallon’s Select Care network. Specialist and hospital cost-sharing varies by tier.
- PCP referral is required for in-network specialty care. Out of network specialty care requires prior authorization.
- Direct Care members are eligible for Fallon’s Peace of Mind Program™.

INDIVIDUAL HEALTH plans



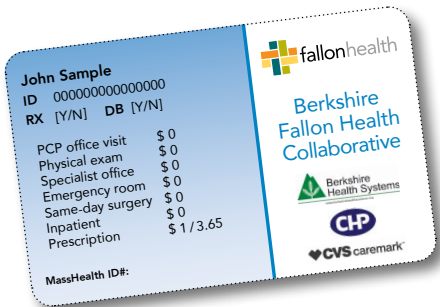
Fallon Health Connector options

- Card will specify plan name: *Direct Care* or *Select Care*.
- Members must choose a PCP within their plan’s network.
- All standard features and programs included.
- PCP referral is required for in-network specialty care. Out-of-network specialty care requires prior authorization.
- Members of Direct Care are eligible for the Peace of Mind Program™.

Community Care

- Members must choose a PCP from the Community Care network.
- PCP referral is required for in-network specialty care. Out-of-network specialty care requires prior authorization.
- All standard features and programs included.

MASSHEALTH ACCOUNTABLE CARE ORGANIZATION (ACO) plans



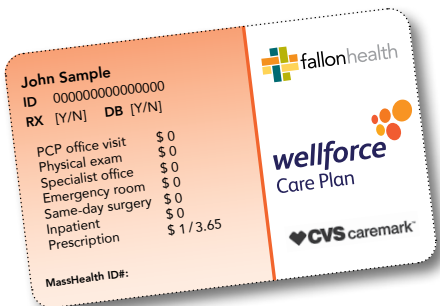
Berkshire Fallon Health Collaborative (BFHC)

- Members must choose a PCP from the Berkshire Fallon Health Collaborative (BFHC) network.
- PCP referrals are not required for specialty care when referred to a BFHC Core provider.
- PCP referrals are required for BFHC Affiliate providers.
- Out-of-network services, including specialty care visits, require prior authorization from the Plan.
- Members are not eligible for It Fits! or infertility treatment.



Fallon 365 Care

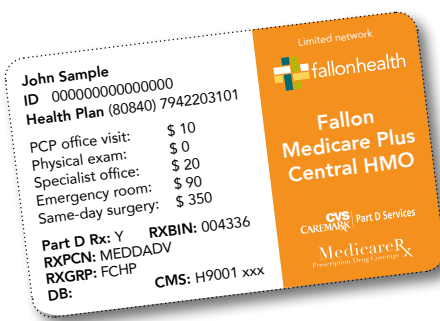
- Members must choose a PCP from the Fallon 365 Care network.
- PCP referral is not required for specialty care within Reliant Medical Group or Southboro Medical Group.
- PCP referral is required for specialty care outside of Reliant Medical Group and Southboro Medical Group, even if the provider is a contracted Fallon 365 Care network provider.
- Out-of-network authorization is required for all out-of-network services including specialist visits.
- Members are not eligible for It Fits! or infertility treatment.



Wellforce Care Plan

- Members must choose a PCP from the Wellforce Care Plan network.
- PCP referrals are required for all specialist visits in the Wellforce Care Plan network and specialist visits to any Wellforce Care Plan affiliates.
- Out-of-network authorization is required for all out-of-network services.
- Members are not eligible for It Fits! or infertility treatment.

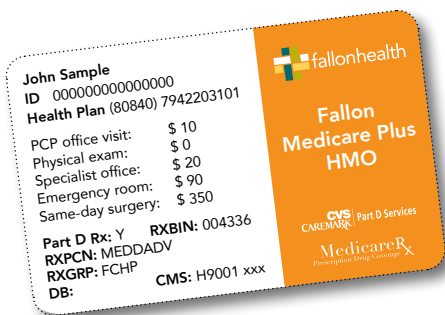
MEDICARE plans



Fallon Medicare Plus™ Central HMO

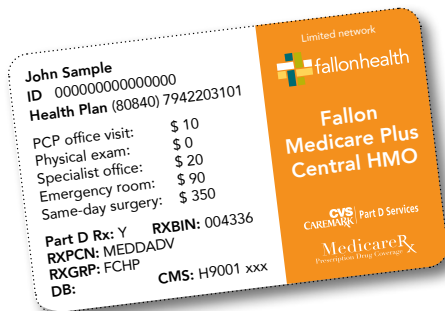
- For individual consumers who are Medicare-eligible and live in Worcester County.
- Includes Medicare Part D prescription drug coverage (MAPD).
- Members must choose a PCP from the Fallon Medicare Plus Central HMO network.
- Members must receive all care and services from a tailored selection of providers.
- PCP referral is required for some in-network specialty care. Out-of-network specialty care requires prior authorization.
- Note: card color may be orange, green or blue based on plan benefits.

MEDICARE plans, *continued*



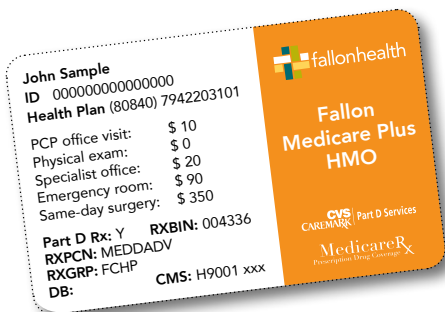
Fallon Medicare Plus™ HMO

- For individual consumers who are Medicare-eligible.
- All but one plan includes Medicare Part D prescription drug coverage (MAPD).
- Members must choose a PCP from the Fallon Medicare Plus HMO network.
- PCP referral is required for some in-network specialty care. Out-of-network specialty care requires prior authorization.
- Note: card color may be orange, green or blue based on plan benefits.



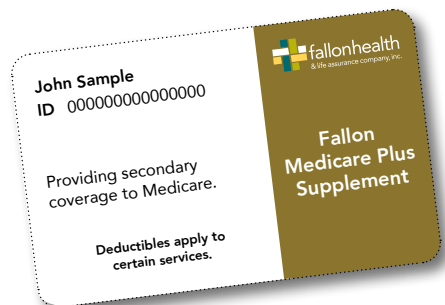
Fallon Medicare Plus™ Central Premier HMO

- For Medicare-eligibles with retiree coverage through an employer group or union and who live in Worcester County.
- Includes Medicare Part D prescription drug coverage (MAPD).
- Members must choose a PCP from the Fallon Medicare Plus™ Central Premier HMO network.
- Members must receive all care and services from a tailored selection of providers.
- PCP referrals are required for some in-network specialty care. Out-of-network specialty care requires prior authorization.



Fallon Medicare Plus™ Premier HMO

- For Medicare-eligibles with retiree coverage through an employer or union group.
- Includes Medicare Part D prescription drug coverage (MAPD).
- Members must choose a PCP from the Fallon Medicare Plus Premier HMO network.
- PCP referral is required for some in-network specialty care. Out-of-network specialty care requires prior authorization.



Fallon Medicare Plus™ Supplement

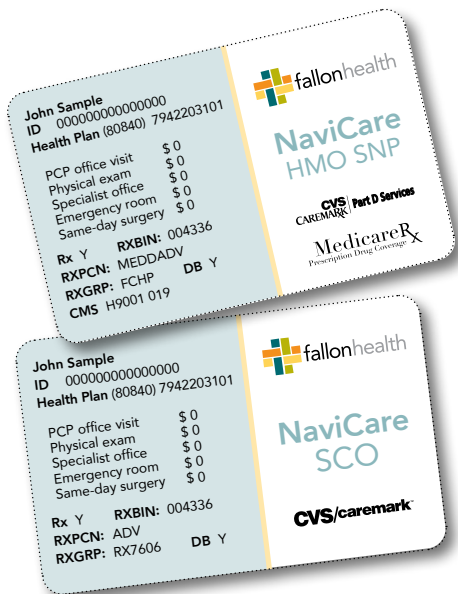
- For individual consumers who are Medicare-eligible.
- Excludes Medicare Part D prescription drug coverage.
- Members are not required to choose a PCP.
- Members may see any provider they choose who accepts Medicare.
- Referrals and prior plan authorizations are not required.



Fallon Medicare Plus™ Freedom

- For Medicare-eligibles with retiree coverage through an employer.
- Plans available with and without prescription coverage.
- Members are not required to choose a PCP.
- Members may see any provider, anywhere in the U.S., who accepts Medicare.
- Referrals and prior plan authorizations are not required.

MASSHEALTH STANDARD ELIGIBLE SENIORS



NaviCare® HMO SNP and NaviCare® SCO

- NaviCare HMO SNP is for Medicare and Medicaid (MassHealth Standard) eligibles.
- NaviCare SCO is for Medicaid (MassHealth Standard) eligibles. (May have Medicare Part A or B, but not required.)
- Includes all Medicaid (MassHealth Standard) benefits as well as Medicare Parts A, B and D (Rx) covered benefits, items and services.
- Members must choose a PCP from the NaviCare network.
- PCP referral is required for some in-network specialty care. Out-of-network specialty care requires prior authorization.
- No copayments, no coinsurance and no premium.
- Includes a Navigator who serves as the primary contact and guide for NaviCare enrollees. The Navigator ensures ongoing service provision and care coordination, consistent with the member's care plan.

PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)



Summit ElderCare®

- Summit ElderCare is for any person who is 55 years of age or older, lives in the service area, meets the Medicaid nursing facility clinical criteria and is able to live safely in the community as determined by the Summit ElderCare Interdisciplinary Care Team.
- All care must be received from providers who have a contract with Summit ElderCare—except emergency care, or if authorized by the Care Team.
- Most participants receive their needed care and services at the Summit ElderCare PACE center, where medical, nursing, rehabilitation, social supports and personal care services are coordinated. However, depending on the individualized plan of care, some participants may receive their care and services in their homes in the community.
- All specialty care (in-network and out-of-network) requires provider referral and prior approval from the Summit care team. .
- Participants receive 100% coverage for all medically necessary services and care, including hospitalizations and prescription drugs.



Program eligibility and benefits may vary by employer, plan and product. To verify if a service requires prior authorization, please refer to our website at fallonhealth.org/providers and use the procedure code look-up tool.