Know Your GIC Benefits

Commonwealth of Massachusetts
Municipal Employees, Retirees & Survivors

Annual Enrollment: APRIL 6 – JUNE 1, 2020
Benefits and rates effective July 1, 2020

In response to the COVID-19 outbreak

Canceled: Benefit Fairs (public-gathering ban)
Extended: Annual Enrollment Monday, April 6 – Monday, June 1, 2020
No change: Plan design and rates effective July 1, 2020

Visit mass.gov/gic for up-to-date information.
Your Annual Enrollment Checklist

Annual Enrollment offers you the opportunity to review your benefit options and enroll in or change your coverage.

- REVIEW THIS GUIDE TO IDENTIFY WHICH HEALTH INSURANCE PRODUCTS ARE OFFERED AND WHICH ONE IS THE BEST FOR YOU.
  TIP: Use the locator map on page 5 to find which products are offered in your area. Based on that, you can use the rate chart on page 4 and the “Benefits-at-a-Glance” on pages 6-7 to determine which product is right for you.

- CHECK WITH YOUR HEALTH AND OTHER INSURANCE CARRIERS ABOUT ANY PRODUCT OR TIER CHANGES. This includes questions about network coverage, providers, drug tiers, or wellness benefits. (See page 15 for carrier contact information.)

- ATTEND A GIC BENEFIT FAIR. These events provide the chance to speak with GIC staff and carrier representatives about the products and benefits available to you. Schedule subject to change. Check our website for updates: bit.ly/gichealthfairs2020.


- TURNING 65? Check our website for a video to guide you through the next steps, whether you’re retiring or not: bit.ly/gicturning65.


If you make no changes, your current health benefits will remain in place at the new rates effective July 1, 2020.

THE GIC IS GOING DIGITAL!

THE GIC IS ALWAYS LOOKING FOR NEW WAYS TO CONNECT WITH YOU.

If you make no changes, your current health benefits will remain in place at the new rates effective July 1, 2020.

IMPORTANT REMINDERS

1. Annual enrollment is your once-a-year opportunity to change your health plan or coverage election.

2. You may make certain changes to your elections within 60 days of a qualifying event. Qualifying events include marriage, birth/adoption, involuntary loss of other coverage, spouse’s Annual Enrollment or return from an approved FMLA or military leave. Your doctor or hospital leaving a network is not a qualifying event. For complete details, go to bit.ly/giclifedevevents.

3. New hires must enroll in coverage within the first 10 days of employment.

4. Doctors and hospitals within your network may change during the year. If your doctor is no longer available, your health insurance carrier will help you find a new one.

5. When checking provider coverage and tiers, specify the health insurance product’s full name, such as “Tufts Health Plan Spirit” or “Tufts Health Plan Navigator,” and not just “Tufts Health Plan.” Your health insurance carrier is the best source for this information.

6. Do not enroll in a non-GIC Medicare Part D product. All GIC Medicare plans include Medicare Part D coverage. If you enroll in another Part D product, the Centers for Medicare and Medicaid Services will disenroll you from your GIC coverage. This means that you will lose your GIC health, behavioral health and prescription drug benefits.

You can print a copy of this guide at mass.gov/gic.
If you are a MEDICARE eligible GIC Retiree:

- No benefit changes in GIC Medicare Plans

If you are an ACTIVE or NON-MEDICARE eligible GIC Retiree:

- The GIC regularly reviews its plans to be sure they offer medical and behavioral health benefits that meet state and federal “parity” laws—in other words, that the plans treat behavioral health benefits the same as or better than the way they treat medical benefits.
- This year, you’ll see changes to the UniCare Basic, Choice and Plus behavioral health benefits that put them more in line with the medical benefits under those plans. The GIC has eliminated or reduced some copays and deductibles. For details, see the UniCare Handbooks, available no later than July 1, 2020, at mass.gov/gic.
- Check with your carrier to see if your provider is still in the network. See page 15 for carrier contact information.

GO DIGITAL!

If GIC has your email address you may use myGICLink to access enrollment forms to make Annual Enrollment changes.

- Go to bit.ly/mygiclink
- Enter your email address and DOB
- Choose your GIC form(s)
- Select Request
- Check your email for the requested form(s)
- Follow instructions for completion
- Select Submit
- Watch your email for confirmation of receipt

What’s New This Year

Non-Medicare Plan Participants Only

GIC protects you from balance billing under Massachusetts General Law Chapter 32A, §20.

If you receive covered, medically necessary medical care in Massachusetts, doctors, hospitals, and other medical providers may only collect the amount covered by your GIC plan. You are still responsible for your share of the plan’s copays, deductibles, and any other eligible medical out-of-pocket costs, but not any excess.

Always compare bills to the Explanation of Benefits (EOB) statement provided by your GIC health carrier. If you are not sure your invoice is a balance bill, call your health carrier. If it is a balance bill, advise your provider that as a GIC member, you are not liable for their excess compensation. If your provider persists in efforts to collect, contact the Group Insurance Commission.

Avoid the Retail Refill Penalty!

If you or a family member is taking a long-term medication—such as for high cholesterol or high blood pressure—you will receive a letter from Express Scripts asking you to tell them how you wish to receive your future refills—by mail or at your local CVS pharmacy.

If you choose to have your medication delivered to your home, your copay is lower. You can still pick up your medication at your local CVS pharmacy, but you’ll pay a higher copay*.

Make sure you respond to that letter from Express Scripts before your third refill, or you will be charged a significant penalty.

*If you choose the Express Scripts Pharmacy or a CVS™ pharmacy, you will pay one mail order copay for a 90-day supply of medication. If you use a non-CVS pharmacy, you will pay one retail copay for a 30-day supply of medication.

What You Need to Know
**Monthly Full Cost Rates**

**Effective July 1, 2020**

Full cost rates include the 0.35% administrative fee. You do not pay the full cost rate. Your share of the cost depends on your city or town cost-sharing arrangement. Contact your local benefit coordinator for information on your premiums.

### Employee and Non-Medicare Retiree/Survivor Health Insurance Products

*Check pages 5-8 for product details*

<table>
<thead>
<tr>
<th>Health Insurance Products</th>
<th>Product Category</th>
<th>Product Type</th>
<th>Individual Coverage</th>
<th>Family Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>UniCare State Indemnity Plan/Basic</td>
<td>National Network</td>
<td>Indemnity</td>
<td>$1,163.76</td>
<td>$2,582.71</td>
</tr>
<tr>
<td>with CIC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniCare State Indemnity Plan/Basic</td>
<td>National Network</td>
<td>Indemnity</td>
<td>$1,107.42</td>
<td>$2,454.41</td>
</tr>
<tr>
<td>without CIC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniCare State Indemnity Plan/PLUS</td>
<td>Broad Network</td>
<td>PPO-Type</td>
<td>$723.74</td>
<td>$1,722.50</td>
</tr>
<tr>
<td>Tufts Health Plan Navigator</td>
<td>Broad Network</td>
<td>POS</td>
<td>$799.04</td>
<td>$1,951.46</td>
</tr>
<tr>
<td>Fallon Health Select Care</td>
<td>Broad Network</td>
<td>HMO</td>
<td>$836.19</td>
<td>$2,033.04</td>
</tr>
<tr>
<td>Harvard Pilgrim Independence Plan</td>
<td>Regional Network</td>
<td>POS</td>
<td>$917.18</td>
<td>$2,239.19</td>
</tr>
<tr>
<td>Health New England</td>
<td>Regional Network</td>
<td>HMO</td>
<td>$594.29</td>
<td>$1,414.80</td>
</tr>
<tr>
<td>AllWays Health Partners Complete HMO</td>
<td>Regional Network</td>
<td>HMO</td>
<td>$687.87</td>
<td>$1,789.45</td>
</tr>
<tr>
<td>UniCare State Indemnity Plan/Community</td>
<td>Limited Network</td>
<td>PPO-Type</td>
<td>$552.57</td>
<td>$1,368.05</td>
</tr>
<tr>
<td>Choice</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tufts Health Plan Spirit</td>
<td>Limited Network</td>
<td>HMO-Type</td>
<td>$606.68</td>
<td>$1,461.55</td>
</tr>
<tr>
<td>Fallon Health Direct Care</td>
<td>Limited Network</td>
<td>HMO</td>
<td>$618.59</td>
<td>$1,561.48</td>
</tr>
<tr>
<td>Harvard Pilgrim Primary Choice Plan</td>
<td>Limited Network</td>
<td>HMO</td>
<td>$665.43</td>
<td>$1,697.02</td>
</tr>
</tbody>
</table>

### Medicare Health Insurance Products

*Check pages 9-11 for product details*

<table>
<thead>
<tr>
<th>Health Insurance Products</th>
<th>Product Category</th>
<th>Product Type</th>
<th>Per Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tufts Health Plan Medicare Preferred</td>
<td>Medicare Advantage</td>
<td>HMO</td>
<td>$325.13</td>
</tr>
<tr>
<td>Tufts Health Plan Medicare Complement</td>
<td>Medicare Advantage</td>
<td>HMO</td>
<td>$383.88</td>
</tr>
<tr>
<td>UniCare State Indemnity Plan/</td>
<td>Medicare</td>
<td>Indemnity</td>
<td>$399.86</td>
</tr>
<tr>
<td>Medicare Extension (OME) with CIC</td>
<td>Medicare</td>
<td>Indemnity</td>
<td>$388.80</td>
</tr>
<tr>
<td>(Comprehensive)</td>
<td>Medicare</td>
<td>Indemnity</td>
<td>$388.80</td>
</tr>
<tr>
<td>UniCare State Indemnity Plan/</td>
<td>Medicare</td>
<td>Indemnity</td>
<td>$404.04</td>
</tr>
<tr>
<td>Medicare Extension (OME) without CIC</td>
<td>Medicare</td>
<td>Indemnity</td>
<td>$404.80</td>
</tr>
<tr>
<td>(Non-Comprehensive)</td>
<td>Medicare</td>
<td>Indemnity</td>
<td>$404.80</td>
</tr>
<tr>
<td>Harvard Pilgrim Medicare Enhance</td>
<td>Medicare</td>
<td>Indemnity</td>
<td>$404.04</td>
</tr>
<tr>
<td>Health New England Medicare</td>
<td>Medicare</td>
<td>Indemnity</td>
<td>$404.80</td>
</tr>
<tr>
<td>Supplement Plus</td>
<td>Medicare</td>
<td>Indemnity</td>
<td>$404.80</td>
</tr>
</tbody>
</table>
Is the Health Product Available Where You Live?

**BARNSTABLE**
Independence, AllWays Complete, Navigator, Spirit, Basic, Community Choice, PLUS

**BERKSHIRE**
Select, Independence, Primary Choice, HNE, Navigator, Spirit*, Basic, Community Choice, PLUS

**BRISTOL**
Direct, Select, Independence, Primary Choice, AllWays Complete, Navigator, Spirit, Basic, Community Choice, PLUS

**DUKES**
Independence, AllWays Complete, Navigator, Basic, PLUS

**ESSEX**
Direct, Select, Independence, Primary Choice, AllWays Complete, Navigator, Spirit, Basic, Community Choice, PLUS

**FRANKLIN**
Select, Independence, Primary Choice, HNE, Navigator, Spirit, Basic, Community Choice, PLUS

**HAMPDEN**
Direct*, Select, Independence, Primary Choice, HNE, Navigator, Spirit*, Basic, Community Choice, PLUS

**HAMPDEN**
Select, Independence, Primary Choice, HNE, Navigator, Spirit, Basic, Community Choice, PLUS

**HAMPDEN**
Direct*, Select, Independence, Primary Choice, HNE, Navigator, Spirit*, Basic, Community Choice, PLUS

**MIDDLESEX**
Direct, Select, Independence, Primary Choice, AllWays Complete, Navigator, Spirit, Basic, Community Choice, PLUS

**NANTUCKET**
Independence, AllWays Complete, Navigator, Basic, PLUS

**NORFOLK**
Direct, Select, Independence, Primary Choice, AllWays Complete, Navigator, Spirit, Basic, Community Choice, PLUS

**PLYMOUTH**
Direct, Select, Independence, Primary Choice, AllWays Complete, Navigator, Spirit, Basic, Community Choice, PLUS

**SUFFOLK**
Direct, Select, Independence, Primary Choice, AllWays Complete, Navigator, Spirit, Basic, Community Choice, PLUS

**WORCESTER**
Direct, Select, Independence, Primary Choice, HNE, AllWays Complete, Navigator, Spirit, Basic, Community Choice, PLUS

*Not every city and town is covered in this county or state; contact the health insurance carrier to find out if you live in the service area. The product also has a limited network of providers in this county or state; contact the health insurance carrier to find out which doctors and hospitals participate.
### Benefits-at-a-Glance: ACTIVE & NON-MEDICARE

<table>
<thead>
<tr>
<th>HEALTH INSURANCE PRODUCTS</th>
<th>NATIONAL NETWORK</th>
<th>BROAD NETWORK</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PRODUCT TYPE</strong></td>
<td>INDEMNITY</td>
<td>PPO-TYPE</td>
</tr>
<tr>
<td><strong>PCP Designation Required?</strong></td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td><strong>PCP Referral to Specialist Required?</strong></td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td><strong>Out-of-pocket Maximum</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual coverage</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>Family coverage</td>
<td>$10,000</td>
<td>$10,000</td>
</tr>
<tr>
<td><strong>Fiscal Year Deductible</strong></td>
<td>$500 / $1,000</td>
<td>$500 / $1,000</td>
</tr>
<tr>
<td><strong>Primary Care Provider Office Visit</strong></td>
<td>$20 / visit</td>
<td></td>
</tr>
<tr>
<td>Tier 1 / Tier 2 / Tier 3</td>
<td>$30 / $60 / $60 / visit</td>
<td>Tier 1: $15 / visit for Centered Care PCPs; Tier 2: $10 / visit for other PCPs; Tier 3: $40 / visit</td>
</tr>
<tr>
<td>Retail Clinic and Urgent Care Center</td>
<td>$20 / visit</td>
<td>$20 / visit</td>
</tr>
<tr>
<td></td>
<td>$20 / visit</td>
<td>$20 / visit</td>
</tr>
<tr>
<td>Outpatient Behavioral Health/Substance Use Disorder Care</td>
<td>$15 or $20 / visit</td>
<td>$10 / visit</td>
</tr>
<tr>
<td></td>
<td>$10 / visit</td>
<td>$20 / visit</td>
</tr>
<tr>
<td>Emergency Room Care</td>
<td>$100 / visit (waived if admitted)</td>
<td>$100 / visit (waived if admitted)</td>
</tr>
<tr>
<td>Inpatient Hospital Care - Medical</td>
<td>Maximum one copay per person per calendar year quarter. Waived if readmitted within 30 days in the same calendar year.</td>
<td></td>
</tr>
<tr>
<td>Tier 1</td>
<td>$275 / admission no tiering</td>
<td>$275 / admission no tiering</td>
</tr>
<tr>
<td>Tier 2</td>
<td>$275 / admission $500 / $1,500 / admission</td>
<td></td>
</tr>
<tr>
<td>Tier 3</td>
<td>$275 / admission $500 / $1,500 / admission</td>
<td></td>
</tr>
<tr>
<td>Outpatient Surgery</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Eye &amp; GI procedures at freestanding facilities in Massachusetts</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>All other in Massachusetts</td>
<td>$250</td>
<td>$250</td>
</tr>
<tr>
<td>High-Tech Imaging (e.g., MRI, CT &amp; PET scans)</td>
<td>$100 / scan</td>
<td>$100 / scan</td>
</tr>
<tr>
<td>Prescription Drugs</td>
<td>Prescription Drug Deductible: $100 Individual / $200 Family</td>
<td></td>
</tr>
<tr>
<td>Retail (up to a 30-day supply)</td>
<td>$10 / $30 / $65</td>
<td>$10 / $30 / $65</td>
</tr>
<tr>
<td>Mail Order Maintenance Drugs (up to a 90-day supply)</td>
<td>$25 / $75 / $165</td>
<td>$25 / $75 / $165</td>
</tr>
</tbody>
</table>

You pay both a copay and a deductible for some services. For details, see your plan's Schedule of Benefits at mass.gov/gic.
Out-of-pocket maximums apply to medical and behavioral health benefits across all health insurance products. Prescription drug (Rx) benefits are included in the out-of-pocket maximums for all health insurance products.
Express Scripts (ESI) administers the GIC prescription drug benefit for non-Medicare health insurance products. Use your ESI ID card when filling prescriptions.

**Prescription Drug Deductible**

You pay an annual prescription drug deductible of $100/individual and $200/family, separate from your health plan deductible. Once you have paid your prescription drug deductible, your covered prescriptions are subject to a copay.

**Drug Copays**

All GIC health plans feature a three-tier copay structure. Contact ESI with questions about your specific medications.

- **Tier 1**: You pay the **lowest copay**. Most generic drugs fall into this tier.
- **Tier 2**: You pay the **mid-level copay**. Many brand-name drugs fall into this tier.
- **Tier 3**: You pay the **highest copay**. This tier includes brand-name and generic drugs that don’t fall into Tiers 1 or 2.

Covered drugs may change each January and July, when ESI updates its drug formulary.

**Questions?**

📞 1.855.283.7679  
🌐 express-scripts.com/gicRx
MEDICARE HEALTH LOCATOR MAP: Where You Live Determines Which Health Insurance Product You May Enroll In.

Is the MEDICARE Health Product Available Where You Live?

**BARNSTABLE**
HPME, HNEMSP, TMC, TMP, OME

**BERKSHIRE**
HPME, HNEMSP, TMC, OME

**BRISTOL**
HPME, HNEMSP, TMC, TMP, OME

**DUKES**
HPME, HNEMSP, TMC, OME

**ESSEX**
HPME, HNEMSP, TMC, TMP, OME

**FRANKLIN**
HPME, HNEMSP, TMC, OME

**HAMPDEN**
HPME, HNEMSP, TMC, TMP, OME

**HAMPShIRE**
HPME, HNEMSP, TMC, TMP, OME

**MIDDLESEX**
HPME, HNEMSP, TMC, TMP, OME

**NANTUCKET**
HPME, HNEMSP, TMC, OME

**NORFOLK**
HPME, HNEMSP, TMC, TMP, OME

**PLYMOUTH**
HPME, HNEMSP, TMC, TMP, OME

**SUFFOLK**
HPME, HNEMSP, TMC, TMP, OME

**WORCESTER**
HPME, HNEMSP, TMC, TMP, OME

OUTSIDE OF MASSACHUSETTS
Harvard Pilgrim Medicare Enhance, Health New England Medicare Supplement Plus, Tufts Health Plan Medicare Complement, and UniCare State Indemnity Plan/Medicare Extension (OME) are available throughout the country.

**CONNECTICUT**
HPME, HNEMSP, TMC, OME

**MAINE**
HPME, HNEMSP, TMC, OME

**NEW HAMPSHIRE**
HPME, HNEMSP, TMC, OME

**NEW YORK**
HPME, HNEMSP, TMC, OME

**RHODE ISLAND**
HPME, HNEMSP, TMC, OME

**VERMONT**
HPME, HNEMSP, TMC, OME

The **bold** text is a shortened version of the full product name. These names are used to indicate which product is available in each county.
Here is an overview of health insurance benefits offered through each of the GIC’s Medicare plans. Benefits are subject to definitions, conditions, limitations and exclusions as spelled out in the respective health insurance products’ documents. With the exception of emergency care, out-of-network benefits are not available through the Tufts Medicare Advantage plan.

### Benefits-at-a-Glance: MEDIcare

Here is an overview of health insurance benefits offered through each of the GIC’s Medicare plans. Benefits are subject to definitions, conditions, limitations and exclusions as spelled out in the respective health insurance products’ documents. With the exception of emergency care, out-of-network benefits are not available through the Tufts Medicare Advantage plan.

#### Health Insurance Products

<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>PCP Designation Required?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>PCP Referral to Specialist Required?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Calendar Year Deductible</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Preventive Care Office visits according to health plan’s schedule</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
</tr>
<tr>
<td>Physician’s Office Visit (except behavioral health)</td>
<td>$15 per visit</td>
<td>$15 per visit</td>
<td>$10 per visit</td>
<td>$15 per visit</td>
<td>$15 per visit</td>
</tr>
<tr>
<td>Retail Clinic</td>
<td>$15 per visit</td>
<td>$15 per visit</td>
<td>$10 per visit</td>
<td>$15 per visit</td>
<td>$15 per visit</td>
</tr>
<tr>
<td>Outpatient Behavioral Health / Substance Abuse Disorder Care</td>
<td>$15 per visit</td>
<td>$15 per visit</td>
<td>First 4 visits: no copay; visits 5 and over: $10 / visit</td>
<td>First 4 visits: no copay; visits 5 and over: $10 / visit</td>
<td>First 4 visits: no copay; visits 5 and over: $10 / visit</td>
</tr>
<tr>
<td>Inpatient Hospital Care</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
</tr>
<tr>
<td>Hospice Care</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
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<tr>
<td>Diagnostic Laboratory Tests and X-Rays</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No Copay</td>
</tr>
<tr>
<td>Surgery Inpatient and Outpatient</td>
<td>No Copay</td>
<td>No Copay</td>
<td>No copay in MA and for out-of-state providers that accept Medicare; call the plan for details if using out-of-state providers that do not accept Medicare</td>
<td>No Copay</td>
<td>No Copay</td>
</tr>
<tr>
<td>Emergency Room Care (includes out-of-area)</td>
<td>$50 per visit (waived if admitted)</td>
<td>$50 per visit (waived if admitted)</td>
<td>$50 per visit (waived if admitted)</td>
<td>$50 per visit (waived if admitted)</td>
<td>$50 per visit (waived if admitted)</td>
</tr>
<tr>
<td>Hearing Aids</td>
<td>First $500 covered at 100%; 80% coverage for the next $1,200 per person, per two-year period</td>
<td></td>
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</tr>
</tbody>
</table>

#### Prescription Drugs

<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Retail (up to a 30-day supply)</td>
<td>Tier 1 / Tier 2 / Tier 3</td>
<td>Tier 1 / Tier 2 / Tier 3</td>
<td>Tier 1 / Tier 2 / Tier 3</td>
<td>Tier 1 / Tier 2 / Tier 3</td>
<td>Tier 1 / Tier 2 / Tier 3</td>
</tr>
<tr>
<td>Mail Order</td>
<td>Maintenance Drugs (up to a 90-day supply)</td>
<td>Tier 1 / Tier 2 / Tier 3</td>
<td>Tier 1 / Tier 2 / Tier 3</td>
<td>Tier 1 / Tier 2 / Tier 3</td>
<td>Tier 1 / Tier 2 / Tier 3</td>
</tr>
</tbody>
</table>

* Without CIC, deductibles are higher and coverage is only 80% for some services. Contact UniCare for details.
CVS Silverscript administers the prescription drug benefit for all GIC Medicare health insurance products. Your prescription drug benefit is called an Employer Group Waiver Plan (EGWP). It combines a standard Medicare Part D drug plan with additional coverage provided by the GIC.

**Drug Copays**

All GIC health products feature a three-tier copay structure. Contact CVS SilverScript with questions about your specific medications.

- **Tier 1:** You pay the lowest copay. Most generic drugs fall into this tier.
- **Tier 2:** You pay the mid-level copay. Many brand-name drugs fall into this tier.
- **Tier 3:** You pay the highest copay. This tier includes brand-name and generic drugs that don’t fall into Tiers 1 or 2.

**Questions?**

- **Phone:** 1.877.876.7214
- **Website:** gic.silverscript.com

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**MEDICARE PART D PRESCRIPTION DRUG COVERAGE**

**IMPORTANT**

- **Do not enroll in a non-GIC Medicare Part D product.** All GIC Medicare plans include Medicare Part D coverage. If you enroll in another Part D product, the Centers for Medicare and Medicaid Services will disenroll you from your GIC coverage. This means that you will lose your GIC health, behavioral health and prescription drug benefits.

- **A “Notice of Creditable Coverage” is located in your plan handbook.** It provides proof that you have comparable or better coverage than Medicare Part D. If you should later enroll in an individual Medicare drug plan because of changed circumstances, you must show the Notice of Creditable Coverage to the Social Security Administration to avoid paying a penalty.

- **If you have extremely limited income and assets,** contact the Social Security Administration to find out about subsidized Part D coverage.

- **If your adjusted gross income, as reported on your federal tax return, exceeds a certain amount,** Social Security will impose a monthly additional fee called IRMAA (Income-Related Monthly Adjustment Amount). Visit medicare.gov for more information. Social Security will notify you if this applies to you.
Have You Had Any Personal or Family Information Changes?

Have you experienced any of these events?

- Marriage or remarriage
- Legal separation
- Divorce
- Address change
- Birth or adoption of a child
- Legal guardianship of a child
- Remarriage of a former spouse
- Dependent age 19 to 26
- Dependent other than full-time student who has moved out of your health plan’s service area
- Death of a covered spouse, dependent or beneficiary
- You have GIC COBRA coverage and become eligible for other coverage

Questions?

1.617.727.2310, TDD/TTY 711

bit.ly/gicqualifyingevents

Mass4You: Employee Assistance Program (EAP)

The Mass4You Employee Assistance Program (EAP) is available to all active, state and municipal employees and their families who are eligible for GIC benefits, to help achieve better work/life balance.

GIC health insurance coverage is not required to access the many Mass4You EAP work/life and other support services. Through Mass4You, GIC benefits-eligible employees and their families can find easy access to a comprehensive suite of free, confidential support available 24/7, including:

- Three in-person or Tele-EAP (virtual) counseling visits per issue per year—at no cost
- 30-minute telephonic or in-person legal or mediation consultation per issue per year—at no cost
- Guidance from a financial advisor to help with debt, foreclosure, financial planning and more
- Referrals for a variety of Work-Life convenience services: child care, elder care and more
- Access to Optum’s 24/7 confidential Substance Abuse Treatment Helpline and a licensed clinician

No formal enrollment is required. Contact Mass4You to learn more:

1.844.263.1982
TTY Support: 711 +1.844.263.1982
Substance Use Treatment Helpline: 1.855.780.5955
The GIC Retiree Dental Plan is provided through MetLife.

You can get reimbursed up to $1,250 a year for cleanings, fillings, crowns and other dental services. You pay less if you receive care from one of 370,000 participating dentists nationwide. You pay more if you receive care from a non-participating dentist.

You pay the full cost of this voluntary coverage.

Eligibility

Retirees and survivors from the following municipalities that have elected to offer the plan are eligible:

- City of Melrose
- Town of Ashland
- Town of Bedford
- Town of Brookline
- Town of Holbrook
- Town of Marblehead
- Town of Middleborough
- Town of Millis
- Town of North Andover
- Town of Randolph
- Town of Swampscott
- Town of Weston
- Town of Westwood
- Athol Roylston School District
- Northeast Metropolitan Regional Vocational School District

If your municipality is not listed, you are not eligible for GIC Retiree Dental benefits. Contact your municipal benefits office for additional information.

Enrollment

Eligible retirees and survivors may join during Annual Enrollment, or within 60 days of a qualifying status change, such as when COBRA dental coverage ends, when you become a survivor of a GIC member, or at retirement.

If you drop GIC Retiree Dental coverage, you may never re-enroll.

MONTHLY GIC PLAN RATES – EFFECTIVE JULY 1, 2020

Includes 0.35% Administrative Fee

$1,250 Maximum Annual Benefit per Member

<table>
<thead>
<tr>
<th>COVERAGE TYPE</th>
<th>RETIREE PAYS MONTHLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>$29.92</td>
</tr>
<tr>
<td>Family</td>
<td>$72.07</td>
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</tbody>
</table>

For information, contact MetLife:

1.866.292.9990  metlife.com/gic
<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
</table>
| FRIDAY, APRIL 10  | 10:00 – 2:00 PM | BERKSHIRE COMMUNITY COLLEGE  
                               Paterson Field House  
                               1350 West Street – PITTSFIELD |
| MONDAY, APRIL 13  | 11:00 – 3:00 PM | UMASS AMHERST  
                               Campus Center Auditorium  
                               1 Campus Center Way – AMHERST |
| TUESDAY, APRIL 14 | 11:00 – 3:00 PM | HAMPDEN COUNTY SHERIFF’S DEPT.  
                               Hampden County Pre-Release Center  
                               627 Randall Road – LUDLOW |
| THURSDAY, APRIL 16| 11:00 – 3:00 PM | QUINSGAMOND COMMUNITY COLLEGE  
                               Harrington Learning Ctr., Rooms 109 AB  
                               670 West Boylston Street – WORCESTER |
| SATURDAY, APRIL 18| 10:00 – 2:00 PM  | SALEM STATE UNIVERSITY  
                               O’Keefe Sports Complex, Twohig Gymnasium  
                               225 Canal Street – SALEM |
| TUESDAY, APRIL 21 | 11:00 – 3:00 PM | STATE TRANSPORTATION BUILDING  
                               2nd Floor, Conference Rooms 1, 2, 3  
                               10 Park Plaza – BOSTON |
| FRIDAY, APRIL 24  | 10:00 – 3:00 PM | MCCORMACK STATE OFFICE BUILDING  
                               21st Floor  
                               One Ashburton Place – BOSTON |
| SATURDAY, APRIL 25| 10:00 – 2:00 PM | MASS MARITIME ACADEMY  
                               Gymnasium  
                               101 Academy Drive – BUZZARDS BAY |
| MONDAY, APRIL 27  | 11:00 – 3:00 PM | WRENTHAM DEVELOPMENTAL CENTER  
                               Graves Auditorium  
                               7 Littlefield Road – WRENTHAM |

If you require disability-related accommodations, contact the GIC’s ADA Coordinator at least two weeks prior to the fair you wish to attend:

1.617.727.2310  gic.ada.requests@mass.gov

*Subject to Change: Please watch mass.gov/gic for updates
Contact Information

Whom to Contact if You Have a Question About...

Anything related to: ENROLLMENT OR ELIGIBILITY

For example:
- How do I enroll?
- How do I change my plan?
- Where should I send my forms?
- Problems filling out the form

Contact the Group Insurance Commission or your GIC Coordinator
1.617.727.2310, TDD/TTY 711
mass.gov/gic-annual-enrollment

Anything related to: HEALTH INSURANCE PRODUCT AND COVERAGE

For example:
- Changes in coverage
- Finding a provider
- Tiered doctor & hospital lists
- What tele-health options are offered?
- Fitness and wellness programs offered

Contact your health insurance carrier

<table>
<thead>
<tr>
<th>HEALTH INSURANCE CARRIERS</th>
<th>PHONE</th>
<th>WEBSITE</th>
</tr>
</thead>
<tbody>
<tr>
<td>AllWays Health Partners</td>
<td>1.866.567.9175</td>
<td>allwayshealthpartners.org/gic-members</td>
</tr>
<tr>
<td>Fallon Health</td>
<td>1.866.344.4442</td>
<td>fallonhealth.org/gic</td>
</tr>
<tr>
<td>Harvard Pilgrim Health Care</td>
<td>1.800.542.1499</td>
<td>harvardpilgrim.org/gic</td>
</tr>
<tr>
<td>Health New England</td>
<td>1.800.842.4464</td>
<td>healthnewengland.org/gic</td>
</tr>
<tr>
<td>Tufts Health Plan</td>
<td>1.800.870.9488</td>
<td>tuftshealthplan.com/gic</td>
</tr>
<tr>
<td>Medicare Products:</td>
<td>1.888.333.0880</td>
<td></td>
</tr>
<tr>
<td>UniCare State Indemnity Plan</td>
<td>1.800.442.9300</td>
<td>unicarestateplan.com</td>
</tr>
<tr>
<td>Medicare plans</td>
<td>1.833.663.4176</td>
<td></td>
</tr>
<tr>
<td>Non-Medicare plans</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pharmacy Benefits Manager</td>
<td>1.855.283.7679</td>
<td>express-scripts.com/gicRx</td>
</tr>
<tr>
<td>Express Scripts</td>
<td>1.877.876.7214</td>
<td>gic.silverscript.com</td>
</tr>
<tr>
<td>SilverScript</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GIC Retiree MetLife Dental Plan</td>
<td>1.866.292.9990</td>
<td>metlife.com/gic</td>
</tr>
<tr>
<td>Social Security Administration</td>
<td>1.800.772.1213 or your local Social Security Office</td>
<td>ssa.gov</td>
</tr>
<tr>
<td>Medicare</td>
<td>1.800.633.4227</td>
<td>medicare.gov</td>
</tr>
</tbody>
</table>
COMMONWEALTH OF MASSACHUSETTS

Charles D. Baker, Governor
Karyn Polito, Lieutenant Governor
Matthew Veno, Executive Director
Group Insurance Commission
19 Staniford Street, 4th Floor
Boston, Massachusetts

Telephone: 1.617.727.2310
TDD/TTY: 711

Mailing Address:
Group Insurance Commission
P.O. Box 556
Randolph, MA 02368

Website: mass.gov/gic

Commissioners
*Current as of March 2020.
For more information, visit mass.gov/gic.
Valerie Sullivan (Public Member), Chair
Bobbi Kaplan (NAGE), Vice Chair
Michael Heffernan, Secretary for Administration and Finance, ex officio
Gary Anderson, Commissioner of Insurance, ex officio
Elizabeth Chabot (NAGE)
Adam Chapdelaine (Massachusetts Municipal Association)
Christine Hayes-Clinard, Esq. (Public Member)
Tamara P. Davis (Public Member)
Kevin Drake (Council 93, AFSCME, AFL-CIO)
Jane Edmonds (Retiree Member)
Joseph Gentile (AFL-CIO, Public Safety Member)
Patricia Jennings (Public Member)
Eileen P. McAneny (Public Member)
Melissa Murphy-Rodrigues (Massachusetts Municipal Association)
Anna Sinaiko, MPP, PhD (Health Economist)
Timothy D. Sullivan, Ed.D. (Massachusetts Teachers’ Association)

Website: mass.gov/gic