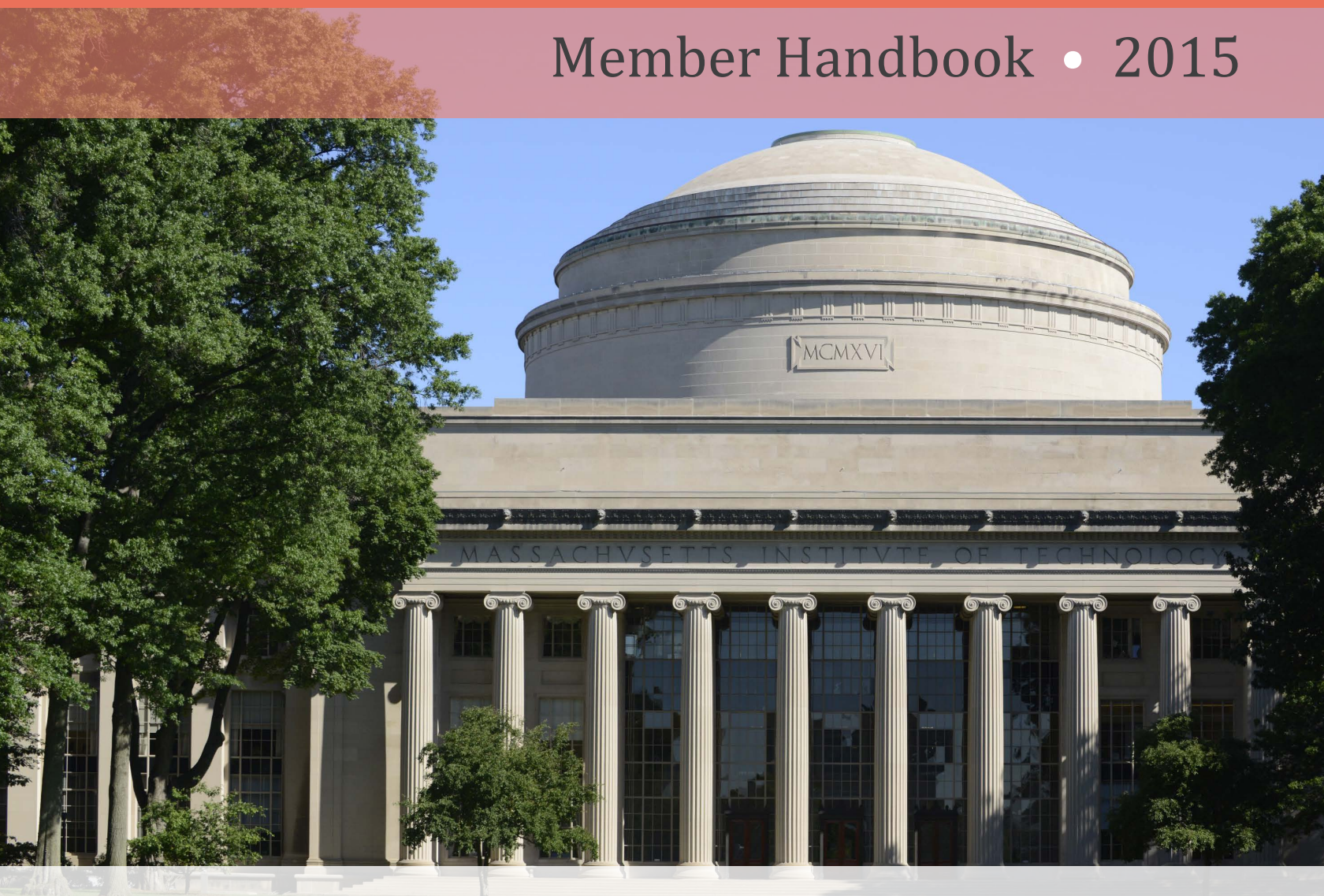


MIT Traditional Health Plan

Member Handbook • 2015



Network Blue™

A managed care plan administered by Blue Cross Blue Shield of Massachusetts



MASSACHUSETTS

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MIT Medical is accredited with commendation by the Joint Commission on the Accreditation of Healthcare Organizations, the oldest health care accrediting body in the United States.



Welcome to the Plan!

Thank you for enrolling in the MIT Traditional Health Plan. We're delighted that you chose us, whether you're new to MIT or just new to MIT Medical.

The MIT Traditional Health Plan, a comprehensive insurance plan designed around the services provided at MIT Medical, has been the MIT community's top choice for high-quality health care at a reasonable cost for more than 30 years. Most clinical services are available to enrolled MIT Traditional Health Plan members at no additional cost or with a small copay. MIT Medical is staffed by more than 50 clinicians who are among the top health care professionals in the Boston area in clinical services and specialties including:

Allergy	Laboratory
Audiology	Neurology
Cardiology	Nutrition
Community Care Center	Obstetrics
Community Wellness at MIT Medical	Optical
Dental	Occupational and Environmental Medicine
Dermatology	Orthopedics
Ear, Nose, and Throat	Pediatrics
Endocrinology	Pharmacy
Eye	Pulmonary Medicine
Gastroenterology	Radiology
Gynecology	Surgery
Health Screening	Urgent Care
Internal Medicine	Urology

All members are required to choose a primary care provider (PCP) at MIT Medical, who will be your first point of contact for any medical need. Your PCP can coordinate your health care, perform routine physical exams, and help you decide on the most appropriate services or course of treatment. Whenever possible, you are encouraged to make an appointment through your PCP's office. If you have not yet selected a PCP, follow the instructions on **medweb.mit.edu**.

Our Claims and Member Services staff can answer any questions about your health insurance. They are located on the first floor of MIT Medical/Cambridge and can be reached at 617-253-5979 or mservices@med.mit.edu. Another good source of information is the MIT Medical website at **medweb.mit.edu**, where you can find a directory of services and providers, health information, forms and publications, and more.

We look forward to serving you!

Sincerely,



William M Kettyle, M.D.
Medical Director

Getting started

Choosing your primary care provider

When you enroll in the MIT Traditional Health Plan, you must choose a primary care provider (PCP) at MIT Medical. Members of a family often have different health care needs, so each family member may choose a different PCP. Your choice determines who you will see for most of your health care. As soon as you enroll and you choose your PCP, you should make an appointment with this provider. This will give your PCP an opportunity to get to know your medical history so he or she can provide care that is tailored to your individual needs.

Need help choosing a PCP? Primary care providers at MIT Medical include both physicians and nurse practitioners. Providers in internal medicine and family practice serve as PCPs for adults; providers in pediatrics serve as PCPs for children; and providers in adolescent medicine and family practice serve as PCPs for young adults. For a complete listing of PCPs, see the directory on our website at medweb.mit.edu/directory. If you have questions about an individual clinician or how to access services, call Claims and Member Services at 617-253-5979.

To choose or change your PCP, complete the online Primary Care Provider Choice form at medweb.mit.edu/howdoi/choose.html, or call Patient Registration at 617-253-6286. The website provides information on each PCP's specialty area, education and training, languages spoken, and other biographical details.

Receiving care at MIT Medical

You and covered family members will receive comprehensive medical care at MIT Medical. This includes routine physical examinations, diagnostic testing, and treatment of illnesses or injuries, as well as urgent care from 7 a.m.–11 p.m., seven days a week (clinicians are available by phone 24 hours a day.)

MIT Medical is a large multi-specialty group practice comprised of full- and part-time physicians as well as nurse practitioners, social workers, psychologists, and many other health professionals. Within this multi-group practice, you and your covered family members will each have a PCP to coordinate and manage your health care needs. Your PCP may refer you to any of the 25 medical or surgical specialties on site, including neurology, general surgery, ENT, orthopedics, dermatology, and gynecology. A major benefit of receiving your medical care through a group practice comes from the close communication among providers in various specialties. This teamwork assures you the very best care. If you need inpatient care, your PCP will admit you to one of our Harvard Medical School-affiliated hospitals, which include some of the best hospitals in the country: Massachusetts General Hospital, Mount Auburn Hospital, and Children's Hospital Boston.

Your PCP may also request health plan approval to refer you to our network of specialists at these hospitals or other major medical centers in the Boston area. An approved referral will cover only the specific services requested by your PCP. Additional referral requests may be required if additional services are necessary.

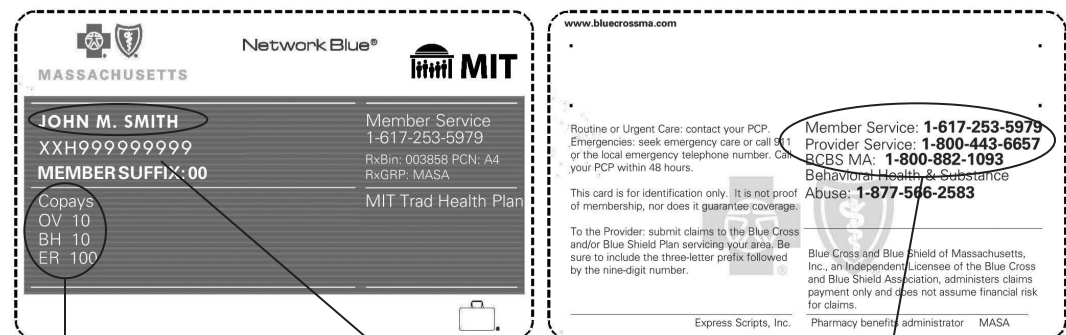
Health plan enrollment and service areas

As a member of the MIT Traditional Health Plan, you must receive your medical care at the Cambridge or Lexington MIT Medical facilities, and you must live within the approved enrollment area (Massachusetts, Maine, New Hampshire, and Rhode Island). The plan's service area includes all cities and towns in the Commonwealth of Massachusetts. The plan does not provide coverage for health care services or supplies you receive outside the MIT Traditional Health Plan service area, except for emergency medical care and urgent care. Please see page 9 for insurance coverage outside the service area.

If you and/or your family members live (or move permanently) outside the enrollment area or are away from the enrollment area for more than 90 days for sabbaticals, employment, school, leaves of absence, extended vacations, or other reasons, you are not eligible for membership in the MIT Traditional Health Plan. In these circumstances, you may have the option to enroll in another insurance plan. For more information on other health insurance options, contact your benefits office.

Health plan identification card

After enrolling in the MIT Traditional Health Plan, you will receive a Blue Cross Blue Shield of Massachusetts (BCBSMA) identification card, which will identify you as being eligible for the coverage described in this booklet. It generally takes 2-3 weeks from initial enrollment to receive your card. You must be prepared to show your health plan ID card to a health care provider before receiving covered services. If your health plan ID card is lost or stolen, you must contact the BCBSMA customer service office to request a new card, or use the BCBSMA online member self-service option at www.bluecrossma.com.



Copays:
These numbers indicate that the member is responsible for copayments of \$10 for office visits, \$10 for behavioral health visits, and \$100 for emergency room visits. However, these are not the only services for which copays are required; see the benefits summary on page 14 for other copay amounts.

Member number:
Always include the three-letter prefix when filling out forms.

Member service:
Phone number for MIT Health Plan

Provider service:
This is a number for non-MIT health care providers to call for coverage verification or authorization if you're out of your service area.

BCBS MA:
Phone number for customer service at Blue Cross Blue Shield of Massachusetts.

Appointments

Hours and locations

MIT Medical/Cambridge is located in Building E23 at 25 Carleton St. in Cambridge, just steps from the Kendall Square T station. Except for holidays, MIT Medical offers regular appointments from 8:30 a.m.–5 p.m. Monday through Friday, though some services have extended hours (see page 7).

MIT Medical/Lexington, located near the Wood Street gate at MIT's Lincoln Laboratory, offers regular appointments from 8:30 a.m.–5 p.m. Monday through Friday. Internal medicine and pediatric physicians and nurse practitioners are available on site. Same day appointments are usually available for urgent care needs.

Specialty and urgent care is available at our Cambridge location. Urgent medical care is available at MIT Medical/Cambridge seven days a week from 7 a.m.–11 p.m. Visit or call Urgent Care at 617-253-4481; the phone line is staffed 24 hours a day. For more information about MIT Medical/Lexington, call 781-981-7080. All MIT Medical facilities are wheelchair accessible.

Parking

When you have a medical appointment at MIT Medical/Cambridge, you may park free for up to two hours (space permitting) in the Hayward parking lot across Carleton Street. The entrance to the parking lot is on Hayward Street. Just tell the parking attendant you have a medical appointment, and then have your parking slip validated at the desk. Be sure to allow enough time to find alternate parking if the patient parking area is full.

At MIT Medical/Lexington, ample free parking for patients is available directly in front of the Health and Wellness Center.

Making an appointment

To make an appointment with an MIT Medical provider, call his or her office directly. You can find clinician phone numbers under the Directory tab on the MIT Medical website at medweb.mit.edu.

When making an appointment, it's helpful to briefly describe the reason for the visit, so the staff can schedule an appointment of the correct length of time and make sure the appropriate resources are available. If you are sick and need to be seen that day, let the staff know. At times, it may be appropriate to communicate with your clinician by phone or **Follow My Health** prior to the appointment. This can help answer questions about urgency or whether it would be useful to gather some additional information, such as lab tests, before the visit.

Follow My Health provides MIT Medical patients with a private and secure way to request appointments, refill prescriptions, review certain parts of their health history, and ask questions of participating clinicians any time. To learn more, visit <http://medweb.mit.edu/fmh/faq> or log on at <http://medweb.mit.edu/fmh>.

Department contact

Emergencies (from campus phones)	100
Lincoln Laboratory emergency (from Lincoln Laboratory phones)	3333
MIT Medical/Cambridge Urgent Care (24-hour phone availability)	617-253-4481 (617-258-0656, TTY)
MIT Medical/Lexington	781-981-7080 (781-981-6600, TTY)
Prescription refills (24 hours)	617-253-0202
Blue Cross Blue Shield of Massachusetts customer service	800-882-1093 (800-522-1254, TTY)
Community Care Center	617-253-5486
Community Wellness at MIT Medical	617-253-1316
Environmental Medical Service	617-253-5360
Medical Records	617-253-4906
MIT Health Plans (enrollment)	617-253-1322
MIT Health Plans Claims and Member Services (coverage questions and claims inquiries)	617-253-5979
Patient Relations Coordinator	617-253-4976
Patient Billing (for services at MIT Medical)	617-258-5336

Allergy	617-253-4460
Audiology*	617-253-7870
Breastfeeding Support	617-253-1505
Cardiology*	617-253-4904
Dental (most services are not covered by the MIT Health Plan)	617-253-1501
Dermatology	617-253-4295
Ear, Nose, Throat*	617-253-7870
Endocrinology*	617-253-1681
Eye (Monday–Thursday until 6 p.m., Friday until 5:30 p.m.)	617-253-4351
Gastroenterology*	617-253-1681
Gynecology (also available in Lexington and Arlington)	617-253-1315
Health Screening*	617-253-1777
Internal Medicine (Cambridge)	617-253-4481
Internal Medicine (Lexington)	781-981-7080
Laboratory	617-253-4239
Mental Health (Monday–Thursday until 7 p.m., Friday until 5 p.m.)	617-253-2916
Neurology*	617-253-3956
Nutrition*	617-253-1546
Obstetrics	617-253-1315
Occupational Medicine	617-253-8852
Optical	617-258-LENS (5367)
Orthopedics*	617-253-2974
Pediatrics (Cambridge)	617-253-1505
Pediatrics (Lexington)	781-981-7080
Personal Assistance Program	617-253-4911
Pharmacy (Monday–Thursday 8:30 a.m.–7 p.m., Friday until 5:30 p.m.)	617-253-1324
Pulmonology*	617-253-4355
Surgery	617-253-1302
Urology*	617-253-4356
Women’s Health	617-253-5384
X-Ray/Mammography	617-253-4905

* Referral required by MIT physician or nurse practitioner

Translation services

If you or a family member needs translation services, please tell us when you make an appointment. With advance notice, we can usually arrange for foreign language or sign language interpreters at our Cambridge and Lexington centers. Some of our physicians and nurse practitioners speak other languages, and all clinicians have access to the telephone translation service. Blue Cross Blue Shield of Massachusetts (BCBSMA) can also access the telephone translation service if you request it when you call the customer service number on the back of your health plan ID card.

Urgent care

MIT Medical is open for urgent care every day from 7 a.m.–11 p.m. Conditions requiring urgent care may include high fever, earaches, sprains, and lacerations that require stitches. If the situation is urgent but not life-threatening:

1. Call MIT Medical's Urgent Care line at 617-253-4481 (617-258-0656, TTY) 24 hours a day to find out what to do first. A triage nurse, physician, or nurse practitioner will speak with you to determine the best course of action:
 - There may be things you should do immediately at home to feel better.
 - We may ask you to come in right away if Urgent Care is open.
 - We may direct you to the nearest emergency room. When you arrive at the hospital, be sure to present your BCBSMA ID card.
2. Even if you don't call ahead, you will always be seen at MIT Medical when Urgent Care is open, but you may have to wait. Of course, the most urgent cases are always seen first. Before coming in with a pediatric patient, always call first to find out if a pediatric clinician is available.
3. For non-urgent problems or conditions that have been present for a long time, please schedule an appointment during regular weekday hours (usually 8:30 a.m.–5 p.m., though some services have extended hours; see page 7).

What to do in a life-threatening emergency

1. If you believe a situation is life threatening, call 911 or the local medical emergency number in your area, or seek treatment at the nearest hospital emergency room. Life-threatening emergencies include chest pain, shock, poisonings, unconsciousness, uncontrollable bleeding, or serious injuries or burns.
2. Present your BCBSMA ID card at the hospital. Be sure to notify your MIT Medical PCP within the first 48 hours, or the first business day if the emergency occurs over a weekend. See details on page 9 under "Urgent and emergency care outside the service area."

Care outside MIT Medical

Referrals

A key advantage of the Traditional MIT Health Plan is the wide range of medical specialties under one roof. MIT Medical offers more than 25 medical services and specialties in one building, and most do not need a referral. However, when your primary care provider (PCP) determines that you need medical services that are not available at MIT Medical, he or she will refer you to an HMO Blue network provider who is appropriate for treating your condition. HMO Blue is part of Blue Cross Blue Shield of Massachusetts (BCBSMA). Referrals are limited to a participating HMO Blue provider in Massachusetts. MIT Medical providers may also work with BCBSMA to help you take advantage of BCBSMA's case-management and disease-management programs. To receive coverage for most specialty care outside MIT Medical, you must have an approved referral from your PCP before receiving the specialty care.

The network specialist will give your PCP the necessary clinical and administrative information on a regular basis. A referral authorizes specific services (and may authorize a specific number of visits) that are needed to diagnose, evaluate, or treat your condition. It's your responsibility to comply with any limits specified in the MIT Traditional Health Plan referral approval letter. If additional referrals are needed, it's up to you and your network provider to get approvals from the MIT Health Plan office for those related services.

Approved referrals outside MIT Medical will be limited to a specific number of visits that must occur within one year of the referral date, and there are usually limits on the types of services authorized. If a year has passed but you still have approved referral visits, be sure to get another referral from your PCP before having the visits because the original referral is no longer valid. Referrals for short-term rehabilitation (physical therapy, occupational therapy, and speech therapy) are valid for 60 days. All short-term rehabilitation referrals need to be renewed each calendar year if you have visits remaining. If you have any questions about referral limits, contact Claims and Member Services at 617-253-5979 or mservices@med.mit.edu.

Urgent and emergency care outside the service area

Your health plan covers urgent and emergency care when you are temporarily outside the service area.

In an urgent-care situation outside the service area, you should contact BCBS within 48 hours of receiving care. You can get help finding a health care provider anywhere in the U.S. by calling 800-810-BLUE (24 hours a day). Have your BCBSMA ID card ready when you call, and be sure to tell the representative that you're looking for health care providers who participate in the local Blue Cross and/or Blue Shield Plan. You may also use the online BlueCard Doctor and Hospital Finder at <http://provider.bcbs.com>.

You do not need a referral from your PCP or approval from BCBSMA for emergency care, no matter where you are. If you have a situation that in your judgment requires emergency medical care, go to the nearest emergency room, or dial 911 or the local emergency medical service phone number.

To ensure coverage for urgent care, Traditional MIT Health Plan members must notify their PCP (for services received in Massachusetts) or BCBSMA (for services received outside Massachusetts) within 48 hours of receiving care. Call BCBSMA customer service at the toll-free phone number on the back of your BCBSMA ID card if you're outside Massachusetts. Your health plan will provide coverage for one follow-up visit, if you need it. That follow-up visit does not require a referral from your PCP or prior approval from Blue Cross and Blue Shield as long as you are still outside the service area, but any subsequent visits must be coordinated by your PCP at MIT Medical.

Outside the U.S. — Urgent and emergency care services outside the U.S. are also covered. Members must contact Blue Cross and Blue Shield Worldwide (800-810-2583) for any inpatient admissions. For more information, see <http://www.bluecardworldwide.com>. Members of the Traditional MIT Plan are also entitled to assistance through International SOS when traveling abroad for work or personal reasons. Members are encouraged to register with ISOS prior to departure. For more information, see vpf.mit.edu/site/insurance/policies_procedures/international_sos. Employees of Whitehead Institute should check with their benefits office for information on international assistance programs.

Mental health and/or substance abuse treatment — If you are traveling outside the service area and need urgent care for a mental health condition, you must call the BCBSMA Behavioral Health and Substance Abuse referral phone number on the back of your health plan ID card. You may call 24 hours a day, seven days a week.

Member rights & responsibilities

MIT Traditional Health Plan membership eligibility

Benefit eligible employees of MIT, Lincoln Laboratory, and Whitehead Institute may join the MIT Traditional Health Plan. For definitions of the different eligibility categories, review the Benefit Description at medweb.mit.edu/healthplans/employee/traditional.html. You may choose the appropriate contract type to cover yourself and eligible dependents. Eligible dependents include:

- Your spouse or your same-sex or opposite-sex spousal equivalent, if your employer provides this coverage. For more information, check with your benefits office.
- Your unmarried dependent children, until the end of the month of their 26th birthday. Dependent children of one of your dependent children, but only as long as the dependent parent is eligible and remains on your contract.
- Your unmarried children over age 26 who are unable to earn their own living due to a physical or cognitive disability. You must apply for this special coverage through the Traditional MIT Health Plan before the child's 26th birthday. For details, call your benefits office or the MIT Health Plan at 617-253-1322.

MIT, Lincoln Laboratory, and Whitehead Institute have certain rules about when employees may begin, end, or change health insurance and who may enroll as an eligible dependent. For more information, contact your employer's benefits office.

If you are pregnant and have an individual (or employee-plus-spouse) contract with the Traditional MIT Health Plan, you must change to a family contract within 31 days of the child's birth so both you and your baby have adequate coverage for the hospitalization associated with the birth. If you need to change your contract outside the year-end open enrollment period because of a life event such as a new family member or change in employment situation, contact your benefits office.

If you are divorced, please contact your benefits office for information regarding coverage for your former spouse.

Your rights as a member

Respect for your individual needs and rights underlies our commitment to quality care. Our entire staff supports your right to be fully informed about your medical condition and to participate in decisions about your care. Massachusetts state law and federal HIPAA (Health Insurance Portability and Accountability Act) regulations safeguard many provisions of our patient rights policy. If you receive care from any of our health care providers, you have the right to request certain information about your treatment, our records, and your bill. You are also entitled to privacy during treatment and to the confidentiality of your medical records. You can download a complete summary of MIT Medical's privacy policies and information about patient rights and responsibilities at medweb.mit.edu/about/privacy.

As a patient at MIT Medical, you have the right to:

- Freedom of choice in selecting a care provider at MIT Medical (except in an emergency), if the physician is able to accommodate you.
- The name and specialty of the physician or other person responsible for your care or for coordinating your care, if you request it.
- Prompt life-saving treatment in an emergency without harmful delay to discuss payment and without discrimination based on economic status or payment source.
- Informed consent to the extent provided by law and, in the case of breast cancer, complete information on all alternative treatments that are medically viable.
- Prompt and adequate responses to all reasonable requests, within MIT Medical's capacity.
- Refuse to be examined, observed, or treated by trainees, students, or any other staff member without fear of jeopardizing your access to medical care and attention.
- Refuse to serve as a research subject and to refuse any care or examination when the primary purpose is educational and informational rather than therapeutic.
- An explanation of the relationship, if any, of MIT Medical or any physician at MIT Medical, to any other health care facility or educational institution if this relates to your care or treatment, if you request it.

If you have concerns about your care

If you have concerns with your care or any aspect of our service, we encourage you to speak directly with the people involved in your care. If the outcome of this discussion is not satisfactory, or if you prefer to discuss the issue with someone else, our Patient Relations Coordinator can listen to your concerns and explore possible courses of action to resolve the issue. You do not need to identify yourself when you contact the Patient Relations Coordinator. Any information you provide is confidential, and your privacy will be protected. Call 617-253-4976 or email advocate@med.mit.edu.

Claims, billing, or privacy concerns

If you have a concern involving billing or claims for services provided by MIT Medical, do not call the Patient Relations Coordinator. For questions about eligibility, claims, or what's covered under the MIT Traditional Health Plan, you may contact Patient Billing at 617-258-5336, or Claims and Member Services at 617-253-5979 or mservices@med.mit.edu. For concerns involving privacy and access to your medical records, contact a privacy officer at privacy@med.mit.edu or 617-258-6896.

Resolving disputes

Most problems or concerns can be handled with just one phone call or email to the Claims and Members Services office at 617-253-5979 or mservices@med.mit.edu. An MIT Health Plans representative will work with you to help you understand your benefits or resolve your problem as quickly as possible. The MIT Health Plans and/or Blue Cross Blue Shield of Massachusetts (BCBSMA) will consider all aspects of any particular case, including the terms of your benefits as described in the Benefit Description, BCBSMA policies and procedures that support the administration of these benefits, the care provider's input, and your

understanding and expectation of benefits. The MIT Health Plans and/or BCBSMA will make every reasonable effort to find a solution that makes sense for all parties and may use an individual case-management approach.

You may request a final review by submitting a written complaint to the MIT Health Plans Clinical Appeal Board. Include in your correspondence all steps previously taken as well as the reasons for further appeal. The MIT Health Plans Clinical Appeal Board will notify you in writing of the decision within 20 business days of receiving all necessary information. To request a formal review, send your request in writing to:

Administrator, Claims and Member Services
MIT Health Plans, E23-305
77 Massachusetts Ave.
Cambridge, MA 02139

Your request for a formal review should include:

- The name and the BCBSMA identification number of the member asking for the review
- A description of the problem
- All relevant dates
- Names of health care providers or administrative staff involved
- Details and any supporting documentation of attempts that have been made to resolve the problem, including any documentation submitted to, or received from, BCBCMA

When your request is received, the MIT Health Plans will research the case in detail and ask for more information as needed. Once the review is completed, we will let you know the decision or outcome of the review in writing. All requests must be received by the MIT Health Plans within one year of the date of the relevant treatment, event, or circumstance—for example, within a year of the date you were told of the service denial or claim denial.

Limitations and Exclusions

For a complete list of covered services, and limitations and exclusions, refer to the Traditional Health Plan Summary of Benefits and Benefits Description.

Please note: Blue Cross Blue Shield of Massachusetts administers claims payment only and does not assume financial risk for claims.

Further questions

If you have questions about any aspect of your membership, visit Claims and Member Services on the first floor of MIT Medical (E23-191), call 617-253-5979, or send an email to mservices@med.mit.edu. The office is open Monday through Friday (except holidays) from 8:30 a.m.–5 p.m. for telephone questions, and from 9:30 a.m.–5 p.m. for walk-ins.

Summary of your medical benefits

Outpatient care	Your cost
Emergency room visits	\$100 per visit (waived if admitted)
Well-child care visits (MIT Medical only)	No cost
Routine adult physical exams, including related tests (MIT Medical only)	No cost
Routine vaccines and immunizations, including Gardasil (MIT Medical only)	No cost
Travel and special vaccines (MIT Medical only)	\$25 per injection
Routine hearing exams (MIT Medical only)	No cost
Routine vision exams (MIT Medical only)	\$10 per visit
Family planning office visits (MIT Medical only)	No cost
Ambulance services (up to 1,000 miles per trip)	No cost
Office visits at MIT Medical or with referral to HMO Blue network provider	\$10 per visit
Short-term physical and occupational rehabilitation therapy (up to a combined total of 60 visits per calendar year)*	\$10 per visit
Allergy serums and injections	No cost
Diagnostic X-rays, lab tests and other tests (excluding CT scans, MRIs and PET scans)	No cost
CT scans, MRIs and PET scans	\$50 per category per date of service
Home health care, including hospice services	No cost
Oxygen and respiratory therapy	No cost
Durable medical equipment and repairs (wheelchairs, hospital beds, crutches, etc.)	10% coinsurance (waived for insulin pumps)
Prosthetic devices and repairs	No cost
Surgery and related anesthesia	No cost
Chiropractic care	\$10 per visit
Inpatient care (including maternity care)	Your cost
General hospital care (as many days as medically necessary, prior authorization required)	No cost
Rehabilitation hospital care (up to 60 days per calendar year, prior authorization required)	No cost
Skilled nursing facility (up to a maximum of 100 days per calendar year, prior authorization required)	No cost
Prescription drugs	Your cost
At MIT Pharmacy (up to a 30-day formulary supply for each prescription or refill, though you can obtain a three-month supply for some medications with a two-month copay)	\$0 for Tier 1 contraceptives \$5 for Tier 1 medications \$15 for Tier 2 medications \$40 for Tier 3 medications
At a designated Express Scripts pharmacy other than the MIT Pharmacy (up to a 30-day formulary supply for each prescription or refill)	\$0 for Tier 1 contraceptives \$8 for Tier 1 medications \$25 for Tier 2 medications \$40 for Tier 3 medications
Mail order through Express Scripts (up to a 90-day supply for each prescription or refill)	\$0 for Tier 1 contraceptives \$16 for Tier 1 medications \$50 for Tier 2 medications \$80 for Tier 3 medications
Mental health and substance abuse treatment	Your cost
Inpatient admissions to a general hospital or mental hospital (as many days as medically necessary, prior authorization required)	No cost
Inpatient admissions in a substance abuse treatment facility (as many days as medically necessary, prior authorization required)	No cost
Outpatient visits <ul style="list-style-type: none"> To a network mental health provider: To a non-network mental health provider (maximum benefit \$60 per visit): 	<ul style="list-style-type: none"> \$10 per visit All charges beyond the \$60-per-visit allowance

* No visit limit applies when short-term rehabilitation therapy is provided as part of covered home health care.

Other wellness benefits and discounts	Your cost
Living Healthy Babies program (www.livinghealthybabies.com)	No cost
Fitness benefit toward membership at MIT's Department of Athletics, Physical Education, and Recreation or other qualifying health club*	\$150 per year, per individual or family
Discount on eyeglass lenses and frames at MIT Optical	25%
Discount on classes offered by Community Wellness at MIT Medical	Discounts vary
Weight loss benefit (Weight Watchers traditional or at-work program)	\$150 per year, per individual or family
Living Healthy Vision program (discounts on eyeglass frames, lenses, and supplies, plus laser vision correction surgery)	Discount varies
Safe Beginnings discounts on safety items	Discount varies
Blue Care Line to answer your health care questions 24 hours a day at 888-247-BLUE (2583)	No cost
Living Healthy Naturally program (discounts on various complementary and alternative medicine services such as acupuncture, massage therapy, nutritional counseling, personal training, Pilates, tai chi, and yoga)	Up to a 30% discount
Web site with information on family health and fitness	www.ahealthyme.com

* See details at medweb.mit.edu/healthplans/employee/fitness.html.

Questions?

- Call MIT Health Plan Claims and Member Services at 617-253-5979 or email mervices@med.mit.edu.
- For details and links to documents, including a benefit description, go to **medweb.mit.edu/healthplans/employee/traditional.html**.
- For questions about claims or for information about Blue Cross Blue Shield of Massachusetts, call 800-882-1093 or go to **www.bluecrossma.com**.

Online Access

MIT Medical's Follow My Health gives patients a private and secure way to request appointments, refill prescriptions, review certain parts of their health history, and ask questions of participating clinicians at any time online. All you need to do is register in person for a Follow My Health account. To learn more, visit **<http://medweb.mit.edu/fmh/faq>** or log on at **<http://medweb.mit.edu/fmh>**.

Benefit Description

The Benefit Description, the official description of the MIT Traditional Health Plan, is available online at **medweb.mit.edu/healthplans/employee/traditional.html**. If there is a conflict between this member handbook and the Benefit Description, the Benefit Description governs.

