Welcome.

We want to make your transition to Fallon as smooth as possible.
Here are some tips that will help you get the care you need as easy as 1-2-3.

1. Fill out your enrollment form.

- List your primary care provider (PCP), your spouse's and your children's PCPs as well.
- Make sure your PCP is in your plan network by using Fallon's online "Find a doctor" tool.
- Once you've picked a PCP, call Customer Service so we can enter your PCP into our system.
- Or, go to myFallon.org, log into our secure member portal and click on the link to change your PCP.

2. Check out our online prescription drug list.

- Also called a "formulary", our online drug list will help you determine if your prescriptions are covered, what tier they are in, or if they require prior authorization from Fallon.
- Save money by using our mail-order pharmacy program.

3. Call us if you already have a doctor's appointment scheduled.

- We'll help make sure your doctor is in your plan network and that the medical services you need are covered under your plan.

Don't forget: Tell your providers your health insurance has changed, and give them your new insurance information. This will help you avoid billing problems.

Once you're enrolled, you get even more from Fallon (see other side).

fallonhealth

smooth switch

What you can expect from Fallon.

We know you expect more from your health plan, so we offer:

- **Telehealth**—members get 24/7 access to a national network of U.S. Board-Certified doctors to discuss non-emergency conditions by phone, mobile device or online.

- **myFallon**—our secure member portal allows you anytime access to see your claims, view your specific benefit information, change your PCP, print a temporary member ID card and more.

- **Fallon Health Mobile ID app**—access your member ID card on your smartphone.

- **It Fits! reimbursement program**—get reimbursed for healthy activities such as gym memberships, local school and town sports programs, yoga, race fees, new cardiovascular home fitness equipment, Peloton® subscriptions, streaming fitness programs and more.

- **The Healthy Health Plan**—A program that supports members (subscriber and spouse age 18 and over) in becoming—and staying—healthy. Simply click on the My Healthy Health Plan link on fallonhealth.org, fill out the health assessment, and then take advantage of all the tools available to help you reach your health goals.

- **Fallon SmartShopper**—online search tool offers real-time cost transparency for common health care procedures and services. If you're eligible, you can receive an incentive reward. It's available to all Fallon Commercial members. Eligibility for the incentive rewards varies by employer, plan and product.

fallonhealth.org

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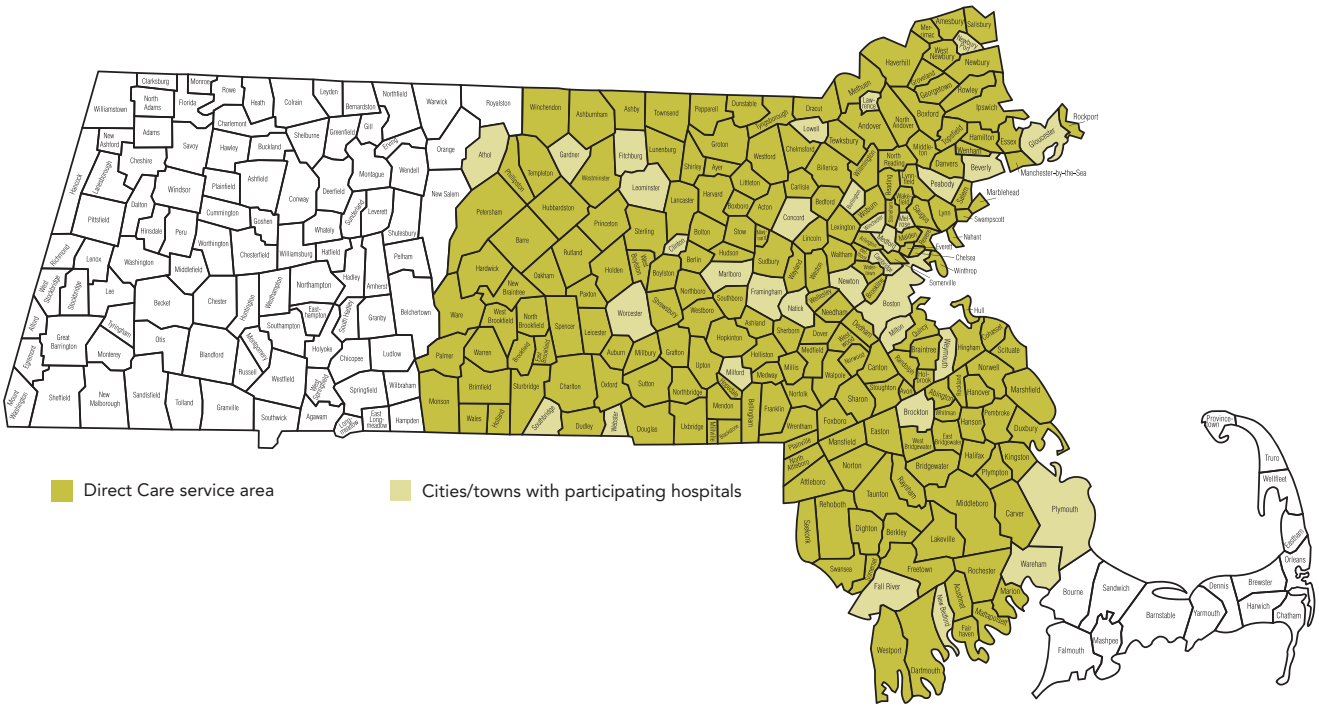
15-715-357 Rev. 07 12/19

Moving forward. Together.

Direct Care network

A health plan that works for you—the state's first limited network.



With Direct Care, you get:

- Care from doctors and hospitals close to home and work—**while spending less money out of your own pocket.**
- **Access to doctors and community-based hospitals you know and trust**—providers who are carefully chosen for their medical excellence, patient access and innovation.
- Plus, **guaranteed access for a second opinion and treatment for specialty services at select Boston teaching hospitals** with Fallon's Peace of Mind Program™.

Connect with us online and use our "Find a doctor" tool.

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Direct Care provides access to a network that is smaller than the Select Care provider network. In this plan, members have access to network benefits only from the providers in Direct Care. Please consult the Direct Care provider directory—paper copies can be requested by calling our Customer Service Department at 1-800-868-5200—or visit the provider search tool at fallonhealth.org to determine which providers are included in Direct Care.

Direct Care participating hospitals

Addison Gilbert Hospital, Gloucester
Anna Jaques Hospital, Newburyport
Athol Memorial Hospital, Athol
Beth Israel Deaconess Hospital, Milton
Beth Israel Deaconess Hospital, Plymouth
Beverly Hospital, Beverly
Brigham and Women's Faulkner Hospital, Boston
Charlton Memorial Hospital, Fall River
Emerson Hospital, Concord
Harrington HealthCare at Hubbard, Webster
Harrington Memorial Hospital, Southbridge
Heywood Hospital, Gardner
Lahey Hospital & Medical Center, Burlington
Lahey Medical Center, Peabody
Lawrence General Hospital, Lawrence
Lawrence Memorial Hospital, Medford
Lowell General Hospital, Main Campus, Lowell
Lowell General Hospital, Saints Campus, Lowell
Massachusetts Eye & Ear Infirmary, Boston
MelroseWakefield Hospital, Melrose
MetroWest Medical Center, Framingham
MetroWest Medical Center, Natick
Milford Regional Medical Center, Milford
Mount Auburn Hospital, Cambridge
New England Baptist Hospital, Boston
Newton-Wellesley Hospital, Newton
Saint Luke's Hospital, New Bedford
Saint Vincent Hospital, Worcester
Signature Healthcare Brockton Hospital, Brockton
South Shore Hospital, Weymouth
Tobey Hospital, Wareham
Tufts Medical Center, Boston
UMass Memorial–Clinton Hospital, Clinton
UMass Memorial–HealthAlliance Hospital, Burbank Campus, Fitchburg
UMass Memorial–HealthAlliance Hospital, Leominster Campus, Leominster
UMass Memorial–Marlborough Hospital, Marlborough
Winchester Hospital, Winchester

Direct Care Peace of Mind Program™ facilities

Beth Israel Deaconess Medical Center, Boston
Boston Children's Hospital, Boston
Brigham and Women's Hospital, Boston
Dana-Farber Cancer Institute, Boston
Massachusetts General Hospital, Boston

Direct Care medical groups

Acton Medical Associates
Allied Pediatrics of Greater Brockton*
Brockton Area Primary Care, LLC *
Brockton Hospital
Cape Ann Medical Center
Cape Ann Pediatrics
Charles River Medical Associates
Community Health Connections
Greater Lawrence Family Health Center
Hallmark Health
Harbor Medical
Harrington PHO Physician Hospital Organization
HealthCare South, P.C.*
HealthFirst Family Center (Fall River)
Heywood PHO
Highland Healthcare Associates IPA
Lahey Clinic Physicians
Lawrence General IPA
Lowell General PHO
Lower Merrimack Valley PHO
Mass Bay Medical Associates, LLC*
Merrimack Valley IPA*
Metrowest Quality Care Alliance*
Milton Primary Care, LCO*
Mount Auburn Cambridge IPA
Newton-Wellesley PHO
Northeast PHO
Pediatric Associates of Brockton, Inc.*
Pentucket Medical
Plymouth Bay Primary Care, LLC*
Primary Care Medical Associates*
Reliant Medical Group
Saint Vincent Medical Group
Signature Medical Group
Southboro Medical Group
Southcoast Physicians Network
South Shore PHO
Southwest Boston Primary Care
Steward CMIPA
Tufts Medical Center Physicians Organization, Inc.*
Woburn Pediatric Associates, LLC*

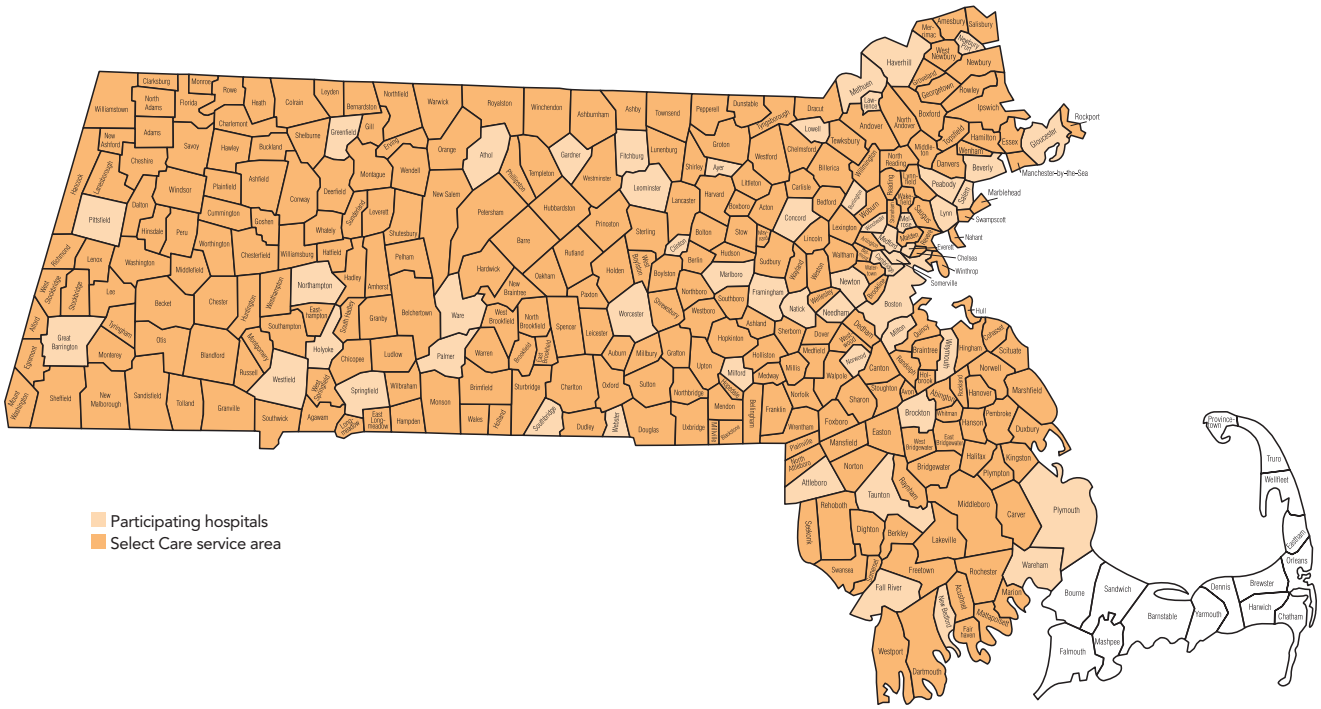
**A New England Quality Care Alliance Group*

18-715-125 Rev. 02 6/19

Moving forward. Together.

Select Care network

Access to providers throughout Massachusetts, southern New Hampshire and southwestern Vermont.



With Select Care, you get:

- **Greater choice** at a competitive price.
- Access to an expansive network that includes physician practices, community-based hospitals and medical facilities.
- Plus, **worldwide emergency coverage!**

Connect with us online and use our "Find a doctor" tool.

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Select Care participating hospitals

Massachusetts

Addison Gilbert Hospital, Gloucester
Anna Jaques Hospital, Newburyport
Athol Memorial Hospital, Athol
Baystate Franklin Medical Center, Greenfield
Baystate Mary Lane Hospital, Ware
Baystate Medical Center, Springfield
Baystate Noble Hospital, Westfield
Baystate Wing Hospital, Palmer
Berkshire Medical Center, Pittsfield
Beth Israel Deaconess Hospital, Milton
Beth Israel Deaconess Hospital, Needham
Beth Israel Deaconess Hospital, Plymouth
Beth Israel Deaconess Medical Center, Boston
Beverly Hospital, Beverly
Boston Children's Hospital, Boston
Boston Medical Center, Boston
Brigham and Women's Faulkner Hospital, Boston
Brigham and Women's Hospital, Boston
Carney Hospital, Boston
CHA Cambridge Hospital, Cambridge
CHA Everett Hospital, Everett
CHA Somerville Hospital, Somerville
Charlton Memorial Hospital, Fall River
Cooley Dickinson Hospital, Northampton
Dana-Farber Cancer Institute, Boston
Emerson Hospital, Concord
Fairview Hospital, Great Barrington
Good Samaritan Medical Center, Brockton
Harrington HealthCare at Hubbard, Webster
Harrington Memorial Hospital, Southbridge
Heywood Hospital, Gardner
Holy Family Hospital at Merrimack Valley, Haverhill
Holy Family Hospital at Methuen, Methuen
Holyoke Medical Center, Holyoke
Lahey Hospital & Medical Center, Burlington
Lahey Medical Center, Peabody
Lawrence General Hospital, Lawrence
Lawrence Memorial Hospital, Medford
Lowell General Hospital–Main Campus, Lowell
Lowell General Hospital–Saints Campus, Lowell
Massachusetts Eye & Ear Infirmary, Boston
Massachusetts General Hospital, Boston
MelroseWakefield Hospital, Melrose
Mercy Medical Center, Springfield
MetroWest Medical Center, Framingham
MetroWest Medical Center, Natick
Milford Regional Medical Center, Milford
Morton Hospital, Taunton
Mount Auburn Hospital, Cambridge
Nashoba Valley Medical Center, Ayer
New England Baptist Hospital, Boston
Newton-Wellesley Hospital, Newton
North Shore Medical Center–Salem Hospital, Salem
North Shore Medical Center–Union Hospital, Lynn
Norwood Hospital, Norwood
Saint Anne's Hospital, Fall River
Saint Elizabeth's Medical Center, Boston
Saint Luke's Hospital, New Bedford
Saint Vincent Hospital, Worcester
Signature Healthcare Brockton Hospital, Brockton
South Shore Hospital, Weymouth
Sturdy Memorial Hospital, Attleboro
Tobey Hospital, Wareham
Tufts Medical Center, Boston
UMass Memorial–Clinton Hospital, Clinton
UMass Memorial–HealthAlliance Hospital, Burbank Campus, Fitchburg
UMass Memorial–HealthAlliance Hospital, Leominster Campus, Leominster
UMass Memorial–Marlborough Hospital, Marlborough
UMass Memorial Medical Center–Memorial Campus, Worcester
UMass Memorial Medical Center–University Campus, Worcester
Winchester Hospital, Winchester

New Hampshire and Vermont

Catholic Medical Center, Manchester
Cheshire Medical Center, Keene
Elliot Hospital, Manchester
Exeter Hospital, Exeter
Mary Hitchcock Memorial Hospital, Lebanon
Parkland Medical Center, Derry
Portsmouth Regional Hospital, Portsmouth
Southern New Hampshire Medical Center, Nashua
Southwestern Vermont Medical Center, Bennington, VT

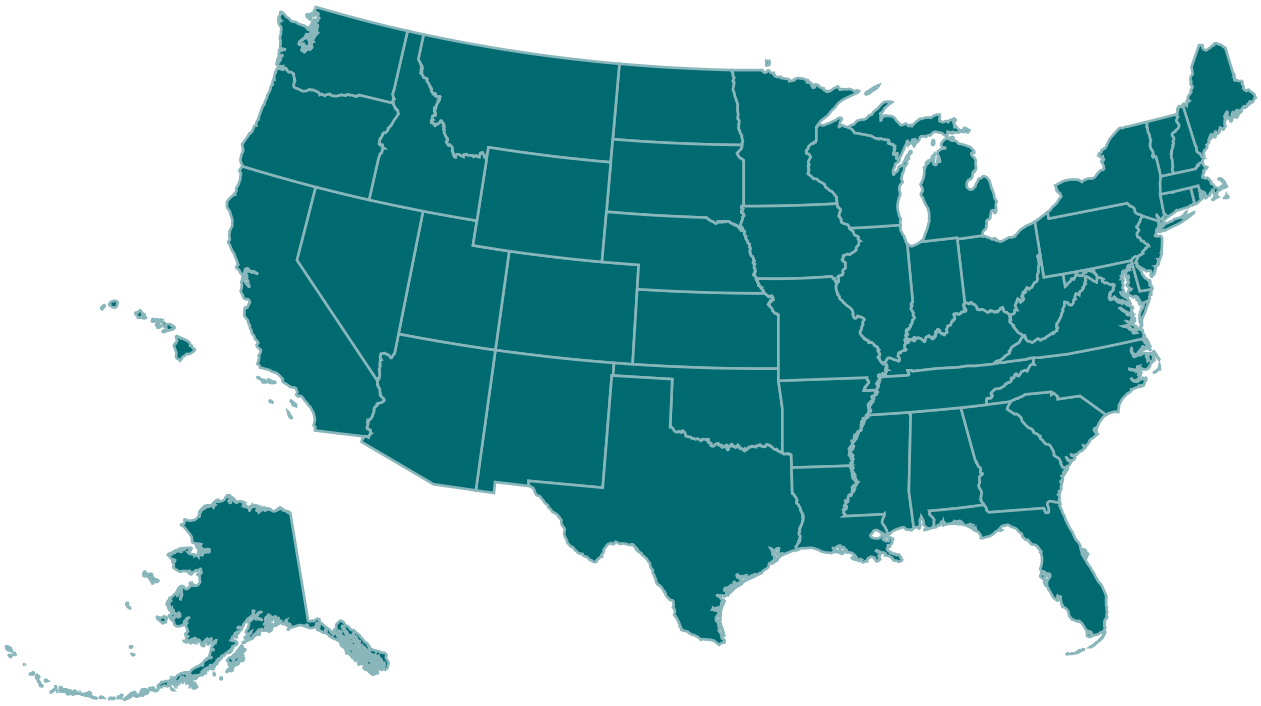
This list is current as of June 2019.

18-715-126 Rev. 03 6/19

Moving forward. Together.

Preferred Care network

Freedom to choose from a nationwide network of over 1,000,000 physicians.



With Fallon Preferred Care, you get:

- High-quality health care and the option to seek care from any provider you wish—whether the provider is in the network or not!
- Access to care in Massachusetts or in one of the other 49 states—more than 4,800 facilities through the Private Healthcare Systems (PHCS)/MultiPlan and Fallon Preferred Care networks.
- Plus, you don't have to select a primary care provider (PCP), and you never need a referral. However, there may be times that you need to get permission ahead of time for a particular service—this is called prior authorization. Please see the back of this insert for a listing of services that require prior authorization.

Connect with us online and use our"Find a doctor" tool.

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& life assurance company, inc.

Fallon Preferred Care is offered through Fallon Health & Life Assurance Company, a wholly owned subsidiary of Fallon Community Health Plan.

Services that require prior authorization with Fallon Preferred Care

As a Fallon Preferred Care member, you do not need to designate a primary care provider, and you never need a referral. However, there may be times that you need to get permission ahead of time for a particular service. This is called prior authorization. To receive prior authorization, you—or someone acting on your behalf—must call Fallon Preferred Care at least five business days before the service is scheduled to take place. If you do not request and receive prior authorization, you may be responsible for the cost of the services.

The following services require prior authorization:

- Admissions to all inpatient facilities, including admissions for medical and surgical care, skilled nursing and rehabilitation, and mental health and substance abuse (including intermediate care)
- Bariatric weight loss surgery
- Brand name prescription contraceptive drugs and devices with no generic equivalent
- Enteral formulas and special medical formulas
- Gender reassignment, gender identity or gender dysphoria and related health care services
- Genetic testing
- Habilitative or rehabilitative care, including but not limited to ABA therapy
- High-tech radiology, including, but not limited to, all outpatient MRI/MRA, CT/CTA, PET and nuclear cardiology imaging studies
- Hospice care
- Infertility/assisted reproductive technology services
- Injections and injectables that are included on the formulary, that are for covered medical benefits, and that are ordered, supplied and administered by a plan provider
- Medically necessary nonemergency ambulance transport
- Neuropsychological testing
- Oral surgery (with the exception of the extraction of impacted teeth)
- Organ transplants
- Outpatient mental health services (including intermediate care), beyond eight sessions
- Outpatient surgery
- Oxygen
- Prosthetics/orthotics and durable medical equipment
- Proton beam therapy
- Pulmonary rehabilitation services for chronic obstructive pulmonary disease (COPD)
- Reconstructive and restorative services
- Sleep study and/or sleep therapy
- Speech therapy services
- Stereotactic radiosurgery and stereotactic body radiotherapy
- Therapeutic care
- Treatment of cleft lip and cleft palate

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20-713-037 Rev. 00 3/20

Moving forward. Together.

With Fallon Health, you expect more.

And you get more benefits and services at no extra charge.

It Fits!*

We reward our members just for participating in healthy activities! Our It Fits! annual fitness reimbursement program pays families and individuals each benefit year for money spent toward any brand of new cardiovascular home fitness equipment, gym memberships at the gym of their choice with no limitations, town and school sports, Weight Watchers®, ski lift passes, Peloton® subscriptions, streaming fitness programs and much more. We have one of the most flexible fitness benefits in Massachusetts.

Telehealth

Members get 24/7 access to a national network of U.S. board-certified doctors to discuss non-emergency conditions by phone, mobile device or online.

The Healthy Health Plan*

A program that supports members (subscribers and spouses age 18 and over) in becoming—and staying—healthy. Simply go to fallonhealth.org/healthyhealthplan, fill out the health assessment, and then take advantage of all the tools available to help you reach your health goals.

Vision care

Pay nothing for your annual routine eye exam. Get up to 35% off frames and discounts on contact lenses, laser vision correction and nonprescription sunglasses—at thousands of locations nationwide.

Online and in-store discounts at CVS/pharmacy

Members get a 20% discount on more than 1,500 CVS/pharmacy-brand health-related products—good at any CVS/pharmacy store or online at cvs.com.

Oh Baby!

A program that provides prenatal vitamins, a convertible toddler car seat, portable electric breast pump, and other "little extras" for expectant parents—all at no additional cost.

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Program eligibility and benefits may vary by employer, plan and product.
**It Fits! and The Healthy Health Plan may or may not be available as benefits depending upon your employer, plan and product.*

More benefits and extras for you.

Quit to Win

A free counseling program with tobacco cessation experts using text message support or telephone calls.

Mail-order Rx discounts

Members who have Fallon Rx coverage receive a 3-month supply of Tier 1 and Tier 2 maintenance medication for the cost of just two monthly copayments.

Naturally Well

Members get discounts on health care services such as acupuncture, chiropractic care and massage therapy through American Health Spcialty Networks, Inc.'s *Choose Healthy*™ program.

And don't forget ...

You also have $0 copayments for routine physicals, gynecological exams and well-child care visits.

Even more services to help you stay well!

Nurse Connect

It's three in the morning and you feel lousy, but don't think it warrants a trip to the emergency room. Still, you'd feel better if you could talk to someone with a medical background, right? Call the registered nurses at Nurse Connect. They're available by phone 24 hours a day, seven days a week.

Disease Management programs

Living with a chronic health condition takes a toll on your quality of life. If you have asthma, heart disease, diabetes, heart failure or chronic obstructive pulmonary disease (COPD), our free Disease Management programs can help you decrease hospitalizations, surgeries and emergency room visits.

Special Deliveries program

Having a high-risk pregnancy can be enormously stressful. And more stress is the last thing a mom-to-be needs. So Fallon developed the Special Deliveries program, specifically for women with high-risk, pregnancy-related health concerns.

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18-715-130 Rev. 03 12/19

Get your $100 from Fallon Health!

Just for logging into **The Healthy Health Plan** and taking the health assessment. Plus, you'll learn your health strengths and areas where you could use some help. We want you to become—and stay—healthy.

Log in at fallonhealth.org/healthyhealthplan.

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This incentive payment may be considered taxable income. Please consult your tax advisor for details. Program eligibility and benefits may vary by employer, plan and product. Subscribers and their spouses who are over 18 may participate in the program.

19-605-134 Rev. 00 12/19

It Fits!

How will you use your $400?

Fallon Health is proud to offer It Fits!, a program that pays you back for being healthy. With Fallon, you get physical and financial benefits for being active. We have one of the most flexible fitness benefits in Massachusetts, reimbursing families $400, and individuals $200, each year!

You choose

Whether you love the gym, prefer the slopes, or are the star player of your Little League team, we want to give you money to use towards a variety of different healthy activities.

Use your money toward:

- Ski mountain lift tickets and season passes!
- Local school and town sports programs
- Gym memberships– at the gym of your choice
- *New!* Streaming fitness programs
- *New!* Peloton® subscriptions
- Pilates
- Yoga
- Aerobics classes
- Weight Watchers® and Jenny Craig®
- Karate
- Sports camps
- Ski lessons
- Swim lessons
- Dance lessons
- Kickboxing
- Baseball
- Race fees, including virtual races
- Cheerleading
- Gymnastics
- Football
- Hockey
- Soccer
- And more!

Use your It Fits! dollars toward any brand of cardiovascular home fitness equipment!

Eligible equipment includes:

- Treadmills
- Bike stands (to convert road bikes to stationary cycles)
- Stair climbing machines
- Rowing machines
- Air walkers
- Elliptical machines
- Home gyms
- Total body weight resistance machines
- Stationary cycles
- Cross-country ski machines

Cardiovascular home fitness equipment must be new and purchased within the benefit year at a retail store or at Amazon– receipt and proof of payment required (excludes secondary markets such as Craigslist and eBay).

How do you get paid? Simple. Complete the It Fits! Reimbursement Form. If you need one, visit fallonhealth.org, and click on "It Fits! fitness reimbursement" under "Quick links".

For your convenience, we accept multiple receipts and requests on one form. Be reimbursed all at once!

If you have any questions about the program, give us a call at the phone number on the back of your Fallon member ID card.

fallonhealth.org

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Jenny Craig® is a registered trademark of Jenny Craig, Inc.
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15-715-338 Rev. 05 8/19

It Fits! Reimbursement Form

Subscribers and members are eligible for reimbursement during their benefit year.* **Requests must be made no later than three months following a benefit year or your last day of coverage in order to receive reimbursement.** For more information about other fitness discounts, visit fallonhealth.org. **To find your annual reimbursement amount(s), go to fallonhealth.org, log into our member portal at myfallon.org and click on "My benefits".** From there you can open the "Your benefits and covered services" document.

Two ways to get reimbursed:

1. Mail completed form to:
   Fallon Health
   P.O. Box 211308
   Eagan, MN 55121-2908
2. Email completed form to:
   reimbursements@fallonhealth.org

Subscriber information

Subscriber's last name	First name	Middle initial
Address		
City	State	ZIP
Subscriber's ID # (located on the front of your Fallon ID card)	Telephone number	

Activity/item for reimbursement**

Type of activity/item	Program/gym/name/retailer	Benefit year	Amount requested

Information needed for reimbursement

- ❑ This completed form.
- ❑ A copy of any/all applicable health club contracts, personal fitness trainer agreements or a copy of the registration form for a school/town activity. These must show the beginning and ending dates of membership activity and the names of the enrolled members.
- ❑ Dated original receipts or copies of bank/credit card statements showing the charge for membership, classes or equipment (original receipts will not be returned). These should reflect the dollar amount you are requesting. Fallon will only reimburse for the amount reflected on these receipts/statements. When paying by check, please send a copy of the front and back of the cancelled check.

Also, a brochure from the health club, facility, or program may be requested.

Certification and authorization *(This form must be signed and dated below by the subscriber.)*

Reimbursement is subject to approval by Fallon Health. *(This incentive payment may be considered taxable income. Please consult your tax advisor if you have questions.)* Please allow 4-6 weeks from receipt for reimbursements. Reimbursement check should be made to (check one):

❑ Subscriber ❑ Member _____

Agreement:
I certify that the information above is correct to the best of my knowledge. I am claiming reimbursement only for eligible expenses incurred during the applicable benefit year and for eligible members.

Subscriber's signature _____ Date _____

Program eligibility and benefits may vary by employer, plan and product. Cardiovascular home fitness equipment must be new (not used) and purchased within the benefit year at a retail store or at Amazon—receipt and proof of payment required (excludes secondary markets such as Craigslist and eBay).

**A benefit year is the 12-month period during which your annual health insurance plan design features, such as deductibles and out-of-pocket maximums, accumulate. A benefit year is often, but not always, January 1 through December 31. If you have any It Fits! reimbursement money left after you submit this form for reimbursement (during the current benefit year), you may submit a new form for reimbursement.*

***Reimbursement amounts may vary. Reimbursement is not available for camps that are not sports-dedicated, social clubs, transportation, greens fees, uniforms, meals, lodging, fitness clothing, vitamins, gift cards and donations.*

15-715-287 Rev. 04 4/18

Fallon SmartShopper

powered by Sapphire Digital

Isn't it about time you were rewarded for making smart health care choices?

Fallon SmartShopper is an incentive program created to help Fallon Health members save money on their health care choices. How do you save money? You search for the procedure or service with Fallon SmartShopper, and the program provides you with a list of cost-efficient options where you can go to receive care and qualify for an incentive reward.* To help you get started, we've listed some of the most commonly requested procedures and services and the incentive rewards for each on the table on the other side of this flyer. "$$$" provides the largest incentive rewards and "$" the lowest. Regardless of which provider you select, you will receive similar quality in care. To begin shopping smarter for health care, and to see the complete list of procedures and services and their incentives, go to fallonhealth.org/members, and click on the Fallon SmartShopper link.

1-866-228-1525 (TRS 711)

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** The Fallon SmartShopper cost transparency tool is available to all Fallon Commercial members. Eligibility for the incentive rewards varies by employer, plan and product.*

Service or procedure	Your incentive reward		
	$$$	$$	$
Bariatric surgery (lap band)	$250	$100	$50
Bariatric surgery – laparoscopic gastric bypass	$500	$250	N/A
Bone density study	$50	$25	N/A
Bone imaging	$50	$25	N/A
Cardiac echocardiogram	$75	$50	$25
Carpal tunnel	$250	$100	$50
Cataract removal	$250	$100	$50
Colonoscopy	$150	$75	$50
CT scan	$150	$75	$50
Gallbladder removal (laparoscopic)	$250	$100	$50
Knee surgery (arthroscopic)	$250	$100	$50
Lab blood draws	$25	N/A	N/A
Low back surgery	$250	$100	$50
Mammogram	$50	$25	N/A
MRI	$150	$75	$50
PET scan	$150	$75	$50
Remicade infusion therapy	$500	$250	N/A
Shoulder surgery (arthroscopic)	$250	$100	$50
Upper GI endoscopy	$250	$100	$50

1-866-228-1525 (TRS 711)

Many services require prior authorization. If you choose a facility different than where your doctor has referred you, your doctor will need to contact Fallon to receive a new prior authorization for that service/procedure at the facility you plan to go to. Call 1-866-228-1525 for more information. Receiving a cost with Fallon SmartShopper does not mean your service or procedure is authorized. You must shop prior to receiving a service or procedure and use a cost-effective selection to be eligible for an incentive reward. Allow up to eight weeks after you receive your service or procedure to receive your incentive reward check. Please note that all incentive rewards are considered taxable by the Internal Revenue Service (IRS). Fallon Smartshopper reports accumulated incentive rewards of over $600 to the IRS and will provide the appropriate tax information to you at the end of the year.

14-715-323 Rev. 09 12/19

Talk to a doctor. Anytime. Anywhere.

Getting sick isn't something you plan for. At Fallon Health, we get it. That's why we offer a telehealth benefit to our members.

What is telehealth?

Telehealth is a service that gives our members 24/7 access to doctors on the phone, online or through a mobile device. This means you can get advice or treatment from a doctor when you need it, and you don't have to leave your home. It doesn't matter if it's a weekend, the middle of the night or a holiday—when you aren't feeling well, a doctor is available to help you.

What type of care can I get with telehealth?

You can use telehealth for non-emergency medical concerns. Doctors can provide advice, prescriptions and treatment for things like:

- Cold and flu symptoms
- Rashes
- Sore throat
- Allergies
- Sinus and skin problems
- Pink eye
- Respiratory infection
- And more

Why telehealth?

It's convenient. Get a diagnosis or treatment from the comfort of your home, anytime you need it.

It's fast. Doctors typically respond to your request within 10 minutes. No long waits like those you may have at the Emergency Room (ER) or an urgent care center.

It's affordable. You pay the same cost for telehealth as you pay for a PCP visit, and it saves you money when compared to the cost of a visit to the ER.

How can I get in touch with a doctor?

It's easy. Doctors are available to provide advice or treatment to you by phone, video or mobile app. If you have access to a phone or the internet, you can access one of the program's doctors.

–over please–

fallonhealth

Get started today.

When you aren't feeling well, you want answers right away. That's why it's important that Fallon Health members register with our telehealth partner, Teladoc®, before treatment is needed.

Getting started is simple. If you're a Fallon Health member, just follow these steps:

1. Set up your account by phone, mobile app or online:

Call 1-800-835-2362 (TRS 711).
Or text "Get Started" to 1-469-844-5637.

Go to www.teladoc.com/fallon and choose "Setup your account".

Download the app and click "Activate account".

2. Provide medical history.

This information is secure and confidential. It will be used to help doctors make an accurate diagnosis.

3. Speak with a doctor.

Once your account is set up, you can request to speak with a doctor anytime you need care. Interpreter services are available, if needed.

1-800-Teladoc (835-2362)

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18-715-195 Rev. 01 6/19

“I prefer to get my answers online. Can I do that with Fallon?”

Fallon Health’s website, fallonhealth.org, makes it easy for you to find tools, resources and information to help you get the most out of your health insurance coverage. At fallonhealth.org, you can search for doctors in our different networks, get information on prescription drug coverage, access essential health tools and more!

Download or request forms.

Need a form for a prescription mail-order or It Fits! reimbursement? Download them directly from fallonhealth.org/memberforms, along with many other forms and helpful materials.

Find a provider in our HMO and PPO networks.

- Go to fallonhealth.org/findphysician.
- Click on Search our regional networks or Search our national PPO network.
- Enter a provider’s last name. (Be sure to spell it correctly.)
- If name is unknown, you can use the Advanced Search to search by ZIP code.
- You may also do an advanced search when looking for specialists.

Searching our online drug formulary

- Go to fallonhealth.org/drugformulary.
- Follow the directions on how to choose your plan’s formulary.
- You may search two different ways: by the drug class or by the drug name.

If you search by the drug class, drugs are listed alphabetically. Some prescriptions require prior authorization by your provider. Please look for PA for prior authorization, ST for step therapy, or QL for quantity limits.

Get the benefits of your Fallon ID card without having to carry it with you.

You can get your mobile Fallon member ID card, as well as a spouse’s or child’s card, for your iPhone or Android. Download for free in the iTunes App store or Google Play. Go to fallonhealth.org/mobileid for more information.

myFallon.org

Our secure member portal where you can access our online tools:

- Check your claims and update your account information.
- Set your communications preferences.
- View your benefits and plan documents online.
- Plus you’ll find links to more helpful online tools to manage your account and your health.

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13-715-174 Rev. 09 10/18

Member Transaction Form

Fallon Health
Fallon Health & Life Assurance Co., Inc.

THE FOLLOWING SECTION IS TO BE FILLED OUT BY THE EMPLOYER:

Group number	Group name	Effective date: (MM/DD/YYYY)

Please check off the reason you are filling out this form:

Adding coverage: ❑ New hire ❑ Annual open enrollment ❑ Other (Please explain in the Remarks section below.)

Ending coverage:
❑ Termination of employment ❑ Change to other insurance (Please provide the name of the other insurance in the Remarks section below.)
❑ Other (Please explain in the Remarks section below.)

Changes to existing coverage: (Please choose an option and explain in the Remarks section below.)
Change to: ❑ Individual plan ❑ Family plan ❑ COBRA ❑ Other
❑ Addition of a dependent (Please complete the dependent section of this form.) Date of qualifying event:† _____
❑ Removal of a dependent ❑ Proof of qualifying event documentation included
❑ Change in name, address or other application information ❑ Other

Remarks:

This form is not complete without an authorized employer signature on page 2.

THE FOLLOWING SECTIONS ARE TO BE FILLED OUT BY THE EMPLOYEE (subscriber):

Please complete all applicable fields in this section.

Provider network: ❑ Direct Care* ❑ Select Care ❑ Fallon Preferred Care ❑ Steward Community Care*

Plan name: _____

First name	Middle initial (MI)	Last name	Gender ❑ Male ❑ Female
Maiden name	Primary language	Birth date (MM/DD/YYYY)	
Street address			
City	State	ZIP code	
Mailing address *(if different from street above)*			
City	State	ZIP code	
Would you be interested in receiving communications from Fallon via email? If so, please check the box and provide your email address: ❑		Home phone	
		Mobile phone	
Social Security number** __ __ __ - __ __ - __ __ __ __	Date hired (MM/DD/YYYY)	Work phone	

Race (please choose one) ❑ White ❑ Black ❑ Hispanic ❑ Asian/Pacific Islander ❑ American Indian/Alaskan Native ❑ Other

Ethnicity	Work status (please choose one) ❑ Full time ❑ Part time ❑ Retired ❑ COBRA

Average # of hours worked weekly	Department #	Employee #

Does your spouse have health insurance from another source? ❑ Yes ❑ No

Please provide the name of your selected primary care provider (PCP). Is this your current PCP? ❑ Yes ❑ No

First name MI Last name

†Documentation required for qualifying event.

Benefits administrator: Please mail two copies of this form to: Fallon Health Enrollment Operations, 10 Chestnut St., Worcester, MA 01608. The first copy is for the employee. Or email form to: EnrollmentRequests@fallonhealth.org Or fax form to: 1-508-831-1136.

DEPENDENT SECTION:

In this section, please list all dependents covered under this plan. If you need more room, please use an additional Member Transaction Form.

Dependent 1: First name | MI | Last name (include maiden name if applicable) | Gender ❑ Male ❑ Female

Relation to you | Social Security number** ___ ___ ___ - ___ ___ - ___ ___ ___ ___

Primary language | Race | Ethnicity | Birth date (MM/DD/YYYY)

Street address (if different from subscriber's)

Please provide the name of this dependent's primary care provider (PCP). Is this the dependent's current PCP? ❑ Yes ❑ No

First name | MI | Last name

Dependent 2: First name | MI | Last name (include maiden name if applicable) | Gender ❑ Male ❑ Female

Relation to you | Social Security number** ___ ___ ___ - ___ ___ - ___ ___ ___ ___

Primary language | Race | Ethnicity | Birth date (MM/DD/YYYY)

Street address (if different from subscriber's)

Please provide the name of this dependent's primary care provider (PCP). Is this the dependent's current PCP? ❑ Yes ❑ No

First name | MI | Last name

Dependent 3: First name | MI | Last name (include maiden name if applicable) | Gender ❑ Male ❑ Female

Relation to you | Social Security number** ___ ___ ___ - ___ ___ - ___ ___ ___ ___

Primary language | Race | Ethnicity | Birth date (MM/DD/YYYY)

Street address (if different from subscriber's)

Please provide the name of this dependent's primary care provider (PCP). Is this the dependent's current PCP? ❑ Yes ❑ No

First name | MI | Last name

Dependent 4: First name | MI | Last name (include maiden name if applicable) | Gender ❑ Male ❑ Female

Relation to you | Social Security number** ___ ___ ___ - ___ ___ - ___ ___ ___ ___

Primary language | Race | Ethnicity | Birth date (MM/DD/YYYY)

Street address (if different from subscriber's)

Please provide the name of this dependent's primary care provider (PCP). Is this the dependent's current PCP? ❑ Yes ❑ No

First name | MI | Last name

Dependent 5: First name | MI | Last name (include maiden name if applicable) | Gender ❑ Male ❑ Female

Relation to you | Social Security number** ___ ___ ___ - ___ ___ - ___ ___ ___ ___

Primary language | Race | Ethnicity | Birth date (MM/DD/YYYY)

Street address (if different from subscriber's)

Please provide the name of this dependent's primary care provider (PCP). Is this the dependent's current PCP? ❑ Yes ❑ No

First name | MI | Last name

I understand that my signature below means that I have read and I understand the contents of this form, and that I agree to the terms and conditions located on page 3.

X _____ _____

Employee signature *(REQUIRED)* | Print name here | Date

X _____ _____

Employer signature *(REQUIRED)* | Print name here | Date

Group name (please print) _____

* Direct Care and Steward Community Care provide access to networks that are smaller than the Select Care network. In these plans, members have access to network benefits only from the providers in their respective network. Please consult the respective provider directory—paper copies can be requested by calling our Customer Service Department at 1-800-868-5200—or visit the provider search tool at fallonhealth.org to determine which providers are included in Direct Care and Steward Community Care.

**Required for tax purposes

Welcome!

Thank you for choosing us to provide your health coverage. You will soon receive a New Member Kit in the mail. This kit will include information about your membership and your membership card(s). Also included in your New Member Kit will be information on how to obtain a *Member Handbook/Evidence of Coverage*, which defines your benefits and regulates benefit decisions. If you, or a dependent, need to seek medical services or fill a prescription before you receive your Member ID card in the mail, all you have to do is give us a call. A member of our Customer Service team can help you. Simply ask for the following information:

1. Your Member ID number
2. If you need to fill a prescription, ask for your BIN number, and your PCN number. These are codes that your pharmacy will need to ensure that your drugs are covered, and that you pay the right out-of-pocket cost-sharing amount.

If you are a Direct Care, Select Care or a Steward Community Care plan member:

You must choose a primary care provider (PCP):
Each person covered under one of these contracts must choose a PCP. A PCP is a doctor of internal medicine or family practice for adults and a pediatrician or family practice doctor for children. Please refer to fallonhealth.org or your plan's *Provider Network* directory for a complete list of providers and their locations. You must make these selections now and list your choices on this Membership Transaction Form. Informing Fallon of your PCP selection(s) as soon as possible will help ensure that any bills for health services you receive from your PCP are processed as quickly as possible.

Worldwide emergency care: *Emergency services do not require referral or authorization.* When you have an emergency medical condition, you should go to the nearest emergency department or call your local emergency communications system (police, fire department or 911). For more information on emergency benefits and plan procedures for emergency services, consult your *Member Handbook/Evidence of Coverage*.

Out-of-area urgent care: When you are out of the service area, you are covered for any unexpected illness or injury that needs prompt medical attention and can go to the nearest medical facility for care. You will need to contact your PCP to coordinate all follow-up care, including any additional care you require outside of the service area.

Remember: Fallon will not pay for any services that are not provided or appropriately arranged by Fallon Health, except in life-threatening emergencies in the area or any emergencies out of the service area.

Questions? Call Fallon Customer Service at 1-800-868-5200 (TRS 711), or visit our website at fallonhealth.org.

If you are a Fallon Preferred Care PPO plan member:

Fallon Preferred Care is a preferred provider organization (PPO) plan that offers you access to a network of more than 1,000,000 participating providers across the country. The network of participating providers includes the Private Healthcare Systems (PHCS) network as well as the Fallon Preferred Care providers. PHCS has created one of the largest proprietary PPO networks in the country, and received endorsements of quality from both the National Committee for Quality Assurance and URAC. You may elect to obtain health care services, including specialty care, from any provider with no referral requirements. However, you may need to receive prior authorizations from the Plan for certain services. Additionally, when you seek care out of the network, you will share a larger portion of the cost.

Worldwide emergency care: *Emergency services do not require referral or authorization.* When you have an emergency medical condition, you should go to the nearest emergency department or call your local emergency communications system (police, fire department or 911). If you are admitted, Fallon Preferred Care requires that you notify Fallon within 72 hours or as soon as medically possible. For more information on benefits and procedures for emergency services, consult your Fallon Preferred Care *Member Handbook/Evidence of Coverage*.

Questions? Call Fallon Preferred Care Customer Service at 1-888-468-1541 (TRS 711) or visit our website at fallonhealth.org.

Consent: Submission of this form indicates that you authorize anyone who provides medical services to you, your spouse or dependents to release to the plan any health information or medical records relating to those services for such routine needs as coordination of benefits, disease management programs, quality management, coordination of care, health services management, accreditation, processing and payment of related claims.

Agreement: I am employed by the company named on this form, working at least 30 hours per week, full time, or 20 hours part time, and I receive employer contribution to health insurance coverage (or I am otherwise eligible for the named company's health insurance coverage, e.g., as a former employee covered under COBRA). I hereby authorize my employer to deduct from my wages (if necessary) the amount I am responsible for contributing for the Fallon Health/FHLAC coverage I have selected. I understand that Fallon Health is a Health Maintenance Organization (Fallon Preferred Care is a Preferred Provider Organization) and that membership becomes effective in accordance with the Fallon Health Group Service Agreement and the *Member Handbook/Evidence of Coverage*. I have read this Member Transaction Form and understand how to obtain and use services under my Fallon Health/FHLAC coverage. I certify that all information is correct to the best of my knowledge. NOTE: The requested effective date may not be the actual effective date if it is not in accordance with the Fallon Health Group Service Agreement and your plan's *Member Handbook/Evidence of Coverage*.

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19-715-047 Rev. 00 4/19

Mail-order pharmacy program

When you use the CVS Caremark Mail Service Pharmacy, you don't have to leave the house to get your prescription–it's delivered right to your door. The shipping is free to anywhere in the United States.

Who can use our mail-order pharmacy program?

You must have prescription drug benefits through Fallon Health to use the mail-order pharmacy program. You can use mail-order if you've been on the same medication for several months with no change in dose, and you plan on being on the same medication and dose for a while.

How to fill new prescriptions using mail-order

- **Ask your doctor** to fax or electronically send a new prescription to CVS Caremark Mail Service Pharmacy. This is just like when your provider calls it into your regular pharmacy. As long as your provider is contracted with the plan, they will have all of the information they need to do this.
- **Call CVS Caremark** at the number on your member ID card and they will ask you for your medication and prescriber information, and other information they may need to process your prescription.
- **Go online to caremark.com.** Register (if you haven't already) and once you log in, click on request a new prescription.
- **By mail.** If you already use mail-order for other prescriptions, you can use the order form and return envelope you received with your other prescription to order a new prescription, as long as you have the paper prescription to mail in.

Make sure your doctor writes your mail-order prescription for a 90-day supply, and you must provide CVS Caremark with a credit or debit card to make your experience as smooth as possible.

How to get refills

We suggest that you request a refill within 7–10 business days from the day you are going to run out of your medication. There are three different ways you can order refills through mail-order:

1. **Online.** Visit caremark.com. From there you can enter your information to request a refill. Just enter your date of birth and Rx number, which should be on your current medication bottle.
2. **By phone.** Call 1-888-543-5919. This is a 24-hour automated refill system. You will need your prescription information, found on your medication bottle.
3. **By mail.** Included with each mail-order prescription you receive will be an order form and a return envelope which can be used to refill or order a new prescription.

fallonhealth.org

fallonhealth

16-715-001 Rev. 03 4/19

For your information

Receive a description of Fallon Health benefits and operating procedures

Utilization management procedures

- Pre-service review
- Urgent concurrent review
- Post-service review
- Filing an appeal

Case Management qualifications and support

Disease Management programs

Behavioral health services

Pharmaceutical management procedures

- Pharmaceutical restrictions
- How to obtain pharmaceutical management procedures
- Checking coverage regarding a medication

Collection, use and disclosure of personal health information

- Routine notification of privacy practices
- The right to approve the release of information (use of authorizations)
- Access to medical records
- Protection of oral, written and electronic information across the organization
- Information for employers

Visit us at fallonhealth.org and search for **"Additional information about our health plan benefits and policies."**
If you would like a printed copy, please call Fallon Customer Service.

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16-623-001 Rev. 01 9/16

Notice of nondiscrimination

Fallon Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Fallon does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Fallon Health:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
    - Qualified sign language interpreters
    - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
    - Qualified interpreters
    - Information written in other languages

If you need these services, contact Customer Service at the phone number on the back of your member ID card, or by email at cs@fallonhealth.org.

If you believe that Fallon Health has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Compliance Director
Fallon Health
10 Chestnut St.
Worcester, MA 01608

Phone: 1-508-368-9988 (TRS 711)
Email: compliance@fallonhealth.org

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, the Compliance Director is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue SW., Room 509F, HHH Building
Washington, D.C., 20201

Phone: 1-800-368-1019 (TDD: 1-800-537-7697)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

If you, or someone you're helping, has questions about Fallon Health, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 1-800-868-5200.

Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de Fallon Health, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 1-800-868-5200.

Se você, ou alguém a quem você está ajudando, tem perguntas sobre o Fallon Health, você tem o direito de obter ajuda e informação em seu idioma e sem custos. Para falar com um intérprete, ligue para 1-800-868-5200.

如果您，或是您正在協助的對象，有關於[插入項目的名稱 Fallon Health 方面的問題，您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員，請撥電話 [在此插入數字 1-800-868-5200.

Si oumenm oswa yon moun w ap ede gen kesyon konsènan Fallon Health, se dwa w pou resevwa asistans ak enfòmasyon nan lang ou pale a, san ou pa gen pou peye pou sa. Pou pale avèk yon entèprèt, rele nan 1-800-868-5200.

Nếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về Fallon Health, quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, xin gọi 1-800-868-5200.

Если у вас или лица, которому вы помогаете, имеются вопросы по поводу Fallon Health, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону 1-800-868-5200.

إن كان لديك أو لدى شخص تساعده أسئلة بخصوص Fallon Health، فلديك الحق في الحصول على المساعدة والمعلومات

الضرورية بلغتك من دون اية تكلفة. للتحدث مع مترجم اتصل ب 1-800-868-5200.

ប្រសិនបើអ្នក ឬនរណាម្នាក់ដែលអ្នកកំពុងដែជួយ ម្នាសំណួរអ្នំពី Fallon Health បេ, អ្នកម្នាសិ១ធិ១១០ួលជំនួយនិងព័ ១០ ០ ម្នាន បៅ០ក្នុងភាសា ១ស់អ្នក

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