

December 18, 2009

RE: Important Changes to Your Plan—Effective February 1, 2010

Dear Member:

We are writing to let you know about benefit changes to your Navigator by Tufts Health Plan coverage that will become effective February 1, 2010.

Copayment Changes

This chart illustrates changes to copayments for certain services.

Service	Current Copayment (until January 31, 2010)	New Copayment (Effective February 1, 2010)
PCP Office Visit	\$15	\$20
Specialist Office Visit Tier-1	\$20	\$25
Specialist Office Visit Tier-2	\$30	\$35
Specialist Office Visit Tier-3	\$40	\$45
Retail Clinic	\$15	\$20
Emergency Room	\$75	\$100
High-Tech Imaging	\$75	\$100
Outpatient Mental Health, including Substance Abuse	\$15	\$20

New In-Network Deductible

Effective February 1, 2010, your coverage will include an **in-network deductible** as follows:

- \$250 for individual plans
- \$500 for family plans with only two members
- \$750 for family plans with three or more members

The **in-network deductible** will apply to some services that also require a copayment. Copayments do not apply to the deductible. The in-network deductible runs on a calendar year basis. In 2010, this deductible begins on February 1 and ends on December 31.

In the following chart, “X” indicates whether a copayment and/or the in-network deductible will apply to the service. Please note that this is not a complete list of services—it is meant only as a reference to help you understand how the in-network deductible will work.

(OVER)

Service	Copayment Applies	In-Network Deductible Applies	Covered In Full
PCP Office Visits	X		
Specialist Office Visits Tier-1	X		
Specialist Office Visits Tier-2	X		
Specialist Office Visits Tier-3	X		
Retail Clinic	X		
Outpatient Mental Health, including Substance Abuse	X		
Physical, Occupational, or Speech Therapy	X		
Chiropractic Care	X		
Prescription Drugs	X		
Colonoscopies with Polyp Removal	X (day surgery copayment)		
Colonoscopies without Polyp Removal			X
Emergency Room	X	X	
High-Tech Imaging	X	X	
Inpatient Hospital	X	X	
Day Surgery	X	X	
Ambulance		X	
Lab Work and Blood Tests		X	
X-rays		X	
Mammograms			X
Pap Smears			X
Electrocardiograms			X

There may also be circumstances where you receive multiple services and will be responsible for both a copayment and the in-network deductible. For example, if you have an office visit with your PCP and receive a blood test, your PCP visit will require a copayment and the blood test will count toward your in-network deductible.

Check Your Mail

You will receive an amendment to your Member Handbook that will explain these changes in greater detail. You can expect to receive it in January, 2010.

Contact Information

You can review all of your benefits online at tuftshealthplan.com/gic. If you haven't already registered for a secure My Wellness Plan account, we recommend that you do so. You'll have instant access to your account after a few simple steps.

Thank you for your membership. If you have questions about your Navigator by Tufts Health Plan benefits, please contact a GIC Member Specialist at (800) 870-9488.

Sincerely,



Stephanie C. Chrobak
Director, Member and Provider Services