



**CHOICES  
THAT  
MATTER**



## Medical Plan Offerings— Harvard Pilgrim Healthcare 2025\*

\*Carrier availability is based on client headquartered location, as well as client selection.

Information shown in this document does not include all plan details or changes. Refer to the Carrier Certificate on TriNet ([login.TriNet.com](https://login.TriNet.com)).

# CHOICES THAT MATTER

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## Harvard Pilgrim Healthcare Plan Details: **New Plans**

There are no **new** Harvard Pilgrim plans for the 2025 benefits plan year.

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## Harvard Pilgrim Healthcare: Current Plans

HPHC HMO 20	Current Plan for 2025
HPHC HMO 30	Current Plan for 2025
HPHC PPO 500	Current Plan for 2025
HPHC PPO 1000	Current Plan for 2025
HPHC PPO 2000	Current Plan for 2025
HPHC PPO/HDHP 3500	Current Plan for 2025

The current Harvard Pilgrim plans for the 2025 benefits plan year are listed on the following pages.



Harvard Pilgrim  
Health Care

Side-by-side Medical Plan Comparison  
2025 Benefits Plan Year

a Point32Health company

Benefits	HMO 20	HMO 30	PPO 500	PPO 1000
<b>Network Name</b>	HMO or HMO Open Access	HMO or HMO Open Access	Access America or Access America Value	Access America or Access America Value
<b>Single Deductible</b>	\$0	\$1,000	\$500	\$1,000
<b>Family Deductible</b>	\$0	\$2,000	\$1,000	\$2,000
<b>Single Deductible Out-of-Network</b>	Not Covered	Not Covered	\$500	\$1,000
<b>Family Deductible Out-of-Network</b>	Not Covered	Not Covered	\$1,000	\$2,000
<b>Single Out-of-Pocket Max</b>	\$3,000	\$3,000	\$1,500	\$2,000
<b>Family Out-of-Pocket Max</b>	\$6,000	\$6,000	\$3,000	\$4,000
<b>Single Out-of-Pocket Max Out-of-Network</b>	Not Covered	Not Covered	\$1,500	\$2,000
<b>Family Out-of-Pocket Max Out-of-Network</b>	Not Covered	Not Covered	\$3,000	\$4,000
<b>Co-Insurance</b>	0%	0%	10%	20%
<b>Co-Insurance Out-of-Network</b>	Not Covered	Not Covered	30%	40%
<b>Doctor Visits</b>	\$20	\$30	\$20	\$30
<b>Specialist Visits</b>	\$35	\$45	\$20	\$30
<b>Lab &amp; X-Ray</b>	0%	0% after ded	10% after ded	20% after ded
<b>Emergency Room Visits</b>	\$100	\$150	\$100	\$100
<b>Urgent Care Visits</b>	\$35	\$45	\$20	\$30
<b>Outpatient Facility</b>	0%	0% after ded	10% after ded	20% after ded
<b>Outpatient Surgery</b>	0%	0% after ded	10% after ded	20% after ded
<b>Hospital Inpatient</b>	\$250	0% after ded	10% after ded	20% after ded
<b>Rx Deductible (Non-Generic)</b>	N/A	N/A	N/A	N/A
<b>Generic Rx (Tier 1)</b>	\$10	\$20	\$15	\$15
<b>Brand Rx (Tier 2)</b>	\$30	\$30	\$30	\$30
<b>Non-Formulary Rx (Tier 3)</b>	\$45	\$45	\$50	\$50



Harvard Pilgrim  
Health Care

Side-by-side Medical Plan Comparison  
2025 Benefits Plan Year

a Point32Health company

Benefits	PPO 2000	PPO/HDHP 3500
<b>Network Name</b>	Access America or Access America Value	Access America or Access America Value
<b>Single Deductible</b>	\$2,000	\$3,500
<b>Family Deductible</b>	\$4,000	\$7,000
<b>Single Deductible Out-of-Network</b>	\$2,000	\$7,000
<b>Family Deductible Out-of-Network</b>	\$4,000	\$14,000
<b>Single Out-of-Pocket Max</b>	\$6,000	\$7,000
<b>Family Out-of-Pocket Max</b>	\$12,000	\$14,000
<b>Single Out-of-Pocket Max Out-of-Network</b>	\$6,000	\$13,000
<b>Family Out-of-Pocket Max Out-of-Network</b>	\$12,000	\$26,000
<b>Co-Insurance</b>	20%	35%
<b>Co-Insurance Out-of-Network</b>	40%	55%
<b>Doctor Visits</b>	\$40	35% after ded
<b>Specialist Visits</b>	\$40	35% after ded
<b>Lab &amp; X-Ray</b>	20% after ded	35% after ded
<b>Emergency Room Visits</b>	\$250	35% after ded
<b>Urgent Care Visits</b>	\$40	35% after ded
<b>Outpatient Facility</b>	20% after ded	35% after ded
<b>Outpatient Surgery</b>	20% after ded	35% after ded
<b>Hospital Inpatient</b>	20% after ded	35% after ded
<b>Rx Deductible (Non-Generic)</b>	N/A	Integrated w/Med
<b>Generic Rx (Tier 1)</b>	\$20	\$15
<b>Brand Rx (Tier 2)</b>	\$40	\$30
<b>Non-Formulary Rx (Tier 3)</b>	\$80	\$50

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## Harvard Pilgrim Healthcare: Eliminated Plan

For 2025, the following plans will no longer be offered:

Tufts Advantage HMO 2000	ELIMINATED for 2025
Tufts Advantage HMO 2000 MA	ELIMINATED for 2025