



# 2022 Small Employer Plans

STANDARD S CHOICE C EDGE C PREMIER O PRIME C PRIME

# Neighborhood **Health Plan of Rhode Island:** Health insurance that's right for you and your business

Small employers (2-50 employees) are the backbone of Rhode Island, anchoring our communities and economy. We understand you want to offer high-quality health insurance at the best value for your employees. Every business is unique and deserves the personal attention we provide.

### Neighborhood has seven small business plans for you to choose from. With Neighborhood you:

- May be eligible for special perks and rewards for healthy living such as gift cards, fitness center discounts and more.\*
- Can access a member portal to view and print temporary ID cards, view claims with authorizations, and more.
- Can access a medication price checker and behavioral health portal helpful tools to make your health care easy!

#### To learn more contact us:



🔇 1-855-321-9244, option 6 🔲 www.nhpri.org

\*Restrictions Apply



### **NEW for 2022!**

- \$0 copay for hypertension medications in tiers 1-4
- \$40 cap for 30-day supply of insulin

### Support for a Healthy Pregnancy

- New covered benefit: Doula Services
- New pregnancy wellbeing program: LunaYou pregnancy. With LunaYou, you get personalized coaching, access to a health app, a community of support and more.
- Bright Start Program rewards for prenatal and postpartum provider visits
- Educational resources and more!

### Neighborhood provides high-quality, affordable coverage through HealthSource RI

All Neighborhood plans offer comprehensive benefits and services, including:

- Advanced Imaging/X-ray and Diagnostic Imaging
- Asthma Education
- Childbirth Education
- Chiropractic Care
- Colonoscopy Screening
- Contraceptives
- Emergency
  Transportation/Ambulance
- Gynecological Annual Exams
- Habilitation Services
- Home Health Care Service
- Hospital Emergency Room Services

- Immunizations and Vaccines
- Inpatient Hospital Services
- Laboratory Outpatient Services
- Laboratory Tests
- Lactation Consultant Counseling
- Lead Screening
- Mammogram Screening
- Mental/Behavioral Health and Substance Use Inpatient Services
- Mental/Behavioral Health and Substance Use Outpatient Services
- Newborn Services

- Nutritional Counseling and Classes
- Outpatient Facility
- Outpatient Rehabilitation Services
- Parenting Classes
- PCP Annual Exam
- Pediatric Development and Autism Screening
- Pediatric Preventive Care
- Primary Care Visit to Treat an Injury or Illness
- Prostate Cancer Screening
- Skilled Nursing Facility
- Smoking Cessation Services
- Telemedicine Services
- Urgent Care Facilities





Having Neighborhood PRIME enables a small organization like College Visions to offer a platinum rated plan to our staff members at a considerable savings for our organization.

Joshua Greenberg Deputy Director, College Visions

## **Benefits and Cost-Sharing**

PLAN NAME								
Plan Type	Platinur	Platinum - POS		Gold - POS				
HSA-Qualified*	N	No	No					
DEDUCTIBLES, CO-INSURANC	DEDUCTIBLES, CO-INSURANCE AND OUT-OF-POCKET MAXIMUMS (PER BENEFIT YEAR)							
Individual Plan Deductible	In-network	Out-of-network	In-network	Out-of-network				
Family Plan Deductible	\$500 \$1,000	\$5,000 \$10,000	\$2,300 \$4,600	\$6,900 \$13,800				
<b>Co-insurance</b>	0% after deductible	50% after deductible	0% after deductible	50% after deductible				
Individual Out-of-Pocket Maximum	\$1,500	\$10,000	\$5,500	\$16,500				
Family Out-of-Pocket Maximum	\$3,000	\$20,000	\$11,000	\$33,000				
MEDICAL SERVICES COST-SH	MEDICAL SERVICES COST-SHARING							
Preventive Care Visit	In-network	Out-of-network	In-network	Out-of-network				
Preventive Care visit	No Charge	50% co-insurance after deductible	No Charge	50% co-insurance after deductible				
Primary Care Visit	\$10 co-payment	50% co-insurance after deductible	\$20 co-payment	50% after deductible				
Specialty Care Visit	\$30 co-payment	50% co-insurance after deductible	\$55 co-payment	50% co-insurance after deductible				
Urgent Care	\$30 co-payment	50% co-insurance after deductible	\$55 co-payment	50% co-insurance after deductible				
Emergency Room	\$100 co-payment	\$100 co-payment	\$250 co-payment	\$250 co-payment				
Inpatient Hospital	Only deductible applies	50% co-insurance after deductible	Only deductible applies	50% co-insurance after deductible				
Outpatient Hospital	Only deductible applies	50% co-insurance after deductible	Only deductible applies	50% co-insurance after deductible				
Imaging Services	Only deductible applies	50% co-insurance after deductible	Only deductible applies	50% co-insurance after deductible				
Laboratory Services	Only deductible applies	50% co-insurance after deductible	Only deductible applies	50% co-insurance after deductible				
Behavioral Health Care - Outpatient	\$10 co-payment	50% after deductible	\$20 co-payment	50% after deductible				
Behavioral Health Care - Inpatient	Only deductible applies	50% after deductible	Only deductible applies	50% after deductible				
Rehabilitation Services	\$30 co-payment	50% co-insurance after deductible	\$55 co-payment	50% co-insurance after deductible				
PRESCRIPTION DRUG COVERA	PRESCRIPTION DRUG COVERAGE							
Tier 1	\$5 co-payment	Not Covered	\$5 co-payment	Not Covered				
Tier 2	\$10 co-payment	Not Covered	\$10 co-payment	Not Covered				
Tier 3	\$35 co-payment	Not Covered	\$35 co-payment	Not Covered				
Tier 4	\$50 co-payment	Not Covered	\$50 co-payment	Not Covered				
Tier 5	\$100 co-payment	Not Covered	\$200 co-payment	Not Covered				
Tier 6	\$100 co-payment	Not Covered	\$200 co-payment	Not Covered				

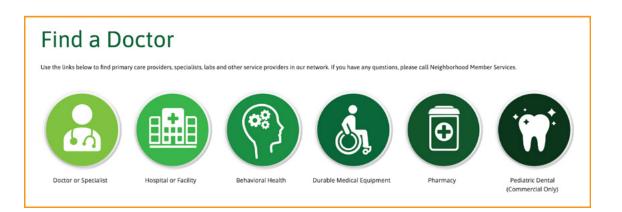
\* Health Savings Account Qualified Plan: Pursuant to Internal Revenue Code § 223, this plan qualifies as a High Deductible Health Plan, which is suitable for use with a Health Savings Account (HSA). This plan may be used in conjunction with an HSA but it is not an HSA itself.

PRIME 🖗	PREMIER	EDGE 🔂		
Platinum - HMO	Gold - HMO	Gold - HMO	Silver - HMO	Bronze - HMO
No	No	No	No	Yes
\$500	\$2,300	\$3,200	\$3,875	\$6,350
\$1,000	\$4,600	\$6,400	\$7,750	\$12,700
0% after deductible	0% after deductible	15% after deductible	30% after deductible	20% after deductible
\$1,500	\$5,500	\$6,950	\$8,550	\$6,900
\$3,000	\$11,000	\$13,900	\$17,100	\$13,800
No Charge	No Charge	No Charge	No Charge	No Charge
\$10 co-payment	\$20 co-payment	\$25 co-payment	\$30 co-payment	20% co-insurance after deductible
\$30 co-payment	\$55 co-payment	\$55 co-payment	\$60 co-payment	20% co-insurance after deductible
\$30 co-payment	\$55 co-payment	\$55 co-payment	\$60 co-payment	20% co-insurance after deductible
\$100 co-payment	\$250 co-payment	15% co-insurance after deductible	30% co-insurance after deductible	20% co-insurance after deductible
Only deductible applies	Only deductible applies	15% co-insurance after deductible	30% co-insurance after deductible	20% co-insurance after deductible
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\$30 co-payment	\$55 co-payment	15% co-insurance after deductible	\$60 co-payment	20% co-insurance after deductible
\$5 co-payment	\$5 co-payment	\$5 co-payment	\$10 co-payment	\$10 co-payment after deductible
\$10 co-payment	\$10 co-payment	\$10 co-payment	\$15 co-payment	\$15 co-payment after deductible
\$35 co-payment	\$35 co-payment	\$40 co-payment	\$40 co-payment	\$40 co-payment after deductible
\$50 co-payment	\$50 co-payment	\$55 co-payment	\$55 co-payment	\$55 co-payment after deductible
\$100 co-payment	\$200 co-payment	30% co-insurance after deductible	30% co-insurance after deductible	20% co-insurance after deductible
\$100 co-payment	\$200 co-payment	30% co-insurance after deductible	30% co-insurance after deductible	20% co-insurance after deductible

# Neighborhood knows how important your doctor is to you!

Checking to see if your provider is in our network is easy. Follow these steps:

- Visit www.nhpri.org/find-a-doctor
- 2 Choose "Doctor or Specialist"



- 3 Use the search form to find your provider or look for a new provider. You can search in many ways, by Provider's Name, Location, and Specialty. Remember: if you are looking for your Primary Care Provider, select that filter. If you are looking for a new doctor who is accepting new patients, select that filter.
- Call our friendly and helpful Sales Team if you need help searching for a provider at 1-855-321-9244, option 6. We are here for you.

#### About Neighborhood

Neighborhood Health Plan of Rhode Island offers high-quality, affordable health insurance through HealthSource RI to the employees of small businesses (2-50 employees). Our plans offer comprehensive benefits and services and top-notch customer service.

### Ready to enroll? We're here to help.



For a no-obligation quote:

🔇 1-855-321-9244, option 6

groupquotes@nhpri.org

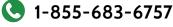


For questions about the enrollment process:

- Contact your broker.
- Don't have a broker? We can connect you with one. Call us at 1-855-321-9244, option 6.



To enroll today, or for questions about your employer account, premium payment, or adding/dropping an employee, contact HealthSource RI for Employers:



Healthsourceri.com/employers/employers

For questions about your plan benefits after you enroll, contact Member Services:

🔇 1-855-321-9244



www.nhpri.org/contact-us/



#### We Love Saving you Money!

That's why we make it our goal to keep your premiums as low as possible. For eight consecutive years, Neighborhood has offered the lowest-priced plans in the market and has maintained a strong network of providers.

#### We offer two types of small business plans to meet the needs of you and your employees:

- (1) Health Maintenance Organization (HMO) Plan Rhode Island only provider network. We offer five HMO plans.
- (2) Point of Service (POS) Plan Provides out of network coverage, covered with separate cost sharing. We offer two POS plans. With a POS plan, members will be required to have an in-network Primary Care Provider.



1-855-321-9244 | www.nhpri.org

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