# **Our Offerings**



As of January 1, 2022

#### **Medicaid Plans**

Plans for individuals and families who qualify for Medicaid.

Plan Name Line of Business Serves		Serves	Member Services	
ACCESS 🕜	Rite Care	Children and Families	1-800-459-6019 (TTY 711)	
	Medicaid (MED)	<ul> <li>Children up to age 19, income up to 261% FPL (including lawfully present immigrants here &lt;5 yr); Parents up to 141% FPL (lawfully present &gt;= 5 yr)</li> </ul>		
	Extended Family Planning     (EFP)	<ul> <li>Pregnant women up to 253% FPL, 60 days postpartum or 60 days post loss of pregnancy</li> </ul>		
	<ul> <li>Children with Special Health Care Needs (CSN)</li> </ul>	Children with special health care needs (up to 21 yr)		
	Substitute Care (SUB)	Youth in DCYF care up to age 26 who were enrolled in DCYF at age 18		
TRUST 🏠		Adults		
	Rhody Health Partners (RHP)	21 yr or older, receive SSI or income up to 100% FPL, not enrolled in Medicare, no long-term services and supports (LTSS)		
	Rhody Health Partners Expansion (RHE)	<ul> <li>19-64 yrs, no dependents, not pregnant at time of enrollment, income up to 133% FPL, not eligible for Medicaid or Medicare Part A and Part B (RI resident, lawfully present &gt;5 yr)</li> </ul>		

### Medicare-Medicaid Plan

A plan for individuals who are eligible for full benefit Medicare and Medicaid (dual eligibles).

Plan Name	Line of Business	Serves	Member Services
INTEGRITY () Medicare-Medicaid Plan (MMP)	Medicare-Medicaid Plan (MMP)	Adults • 21 yr or older, permanent Rhode Island resident; entitled to Medicare Part A, enrolled in Medicare Part B, and eligible to enroll in Medicare Part D; and are receiving full Medicaid benefits	1-844-812-6896 (TTY 711)

# **Commercial Plans: Individual Market**

Plans with comprehensive coverage for individuals without access to employer-sponsored insurance.

Plan Name	Line of Business	Premium Cost	Cost Sharing	Network	Member Services
ECONOMY Ø	Bronze HSA	\$	\$\$\$\$	HMO-In Network	1-855-321-9244 (TTY 711)
INNOVATION 🕖	Bronze	\$	\$\$\$\$	HMO-In Network	
	Silver HSA – Base only	\$\$	\$\$\$	HMO-In Network	
PLUS 🗘	Gold	\$\$\$	\$	HMO-In Network	
ESSENTIAL ()	Gold	\$\$\$	\$	HMO-In Network	
VALUE 🕐	Silver	\$\$\$	\$\$	HMO-In Network	

# Commercial Plans: Small Business Health Options Program (SHOP)

Plans with comprehensive coverage for small businesses with up to 50 employees.

Plan Name	Line of Business	Premium Cost	Cost Sharing	Network	Member Services
	Bronze HSA	\$	\$\$\$\$	HMO-In Network	1-855-321-9244 (TTY 711)
	Silver	\$\$	\$\$\$	HMO-In Network	
EDGE 🔁	Gold	\$\$	\$\$	HMO-In Network	
PREMIER 🕖	Gold	\$\$	\$	HMO-In Network	
PRIME 😰	Platinum	\$\$	\$	HMO-In Network	
	Gold	\$\$\$	\$	POS- Out of Network Option	]
PRIME	Platinum	\$\$\$	\$	POS- Out of Network Option	