



**COMMONWEALTH OF MASSACHUSETTS**  
**Office of Consumer Affairs and Business Regulation**  
**DIVISION OF INSURANCE**

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**CARRIERS OFFERING HEALTH BENEFIT PLANS WITH  
LIMITED, REGIONAL OR TIERED PROVIDER NETWORKS**

*(Pursuant to the Commissioner's authority under Chapters 288 and 359 of the Acts of 2010)*

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**CARRIERS OFFERING HEALTH BENEFIT PLANS WITH  
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**PROVIDER NETWORK TYPE\***

**General Provider Network:** The most comprehensive provider network offered by a Carrier in its Massachusetts Service Area.

**Limited Provider Network:** A reduced or selective Provider Network, not a Regional Provider Network, which is smaller than a Carrier's General Provider Network and from which the Carrier may choose to exclude from participation other Providers who participate in the Carrier's Regional Provider Network or General Provider Network.

**Regional Provider Network:** A Provider Network for a defined geographic area within Massachusetts that is smaller than the Carrier's Service Area and includes only those Providers that have agreed to participate in the Carrier's plan in a limited geographic area within the Commonwealth of Massachusetts, A Regional Provider Network may be a geographic subset of the Carrier's General Provider Network.

**Tiered Provider Network:** A Provider Network in which a Carrier assigns Providers to different benefit tiers based on the Carrier's assessment of a Provider's relative cost and, where available, quality and in which Insureds pay the cost-sharing (copayment, coinsurance or deductible) associated with a Provider's assigned benefit tiers.

**NOTE:**

HEALTH PLANS WITH LIMITED, REGIONAL OR TIERED PROVIDER NETWORKS ARE DIFFERENT THAN A CARRIER'S GENERAL PROVIDER NETWORK. PLEASE BE SURE TO CALL THE CARRIER DIRECTLY IF YOU HAVE ANY QUESTIONS ABOUT WHETHER A CARRIER'S PROVIDER NETWORK IS AVAILABLE IN YOUR AREA AND WHETHER YOUR PRIMARY CARE PROVIDER, SPECIALIST OR ACUTE CARE FACILITY PARTICIPATES IN THE CARRIER'S LIMITED NETWORK.

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*(Pursuant to the Commissioner's authority under Chapters 288 and 359 of the Acts of 2010)*

**1. Aetna Life Insurance Company**

151 Farmington Avenue, MB58  
Hartford, CT 06156

Attn: Mr. Stephen Halloran  
Product and Regulatory Affairs  
(860) 273-9875

<b>Product Name</b>	<b>Network Name</b>	<b>Form #</b>	<b>Network Type*</b>
Savings Plus Plan	Savings Plus Network	GR-9N et al.	Tiered

**2. Blue Cross and Blue Shield of Massachusetts HMO Blue, Inc.**

401 Park Drive, Landmark Center  
Boston, MA 02215

Group Sales (800) 262-BLUE  
Individual Sales (800) 422-3545

<b>Product Name</b>	<b>Network Name</b>	<b>Form #</b>	<b>Network Type*</b>
HMO Blue Options <sup>SM</sup>	HMO Blue Options Network	HMO (9-25-2010)	Tiered
HMO Blue New England Options <sup>SM</sup>	HMO Blue New England Options Network	HMO (9-25-2010)	Tiered
The Hospital Choice Cost-Share Option	General Network	HMO (9-25-2010)	Tiered
Preferred Blue PPO <sup>SM</sup> Options	Preferred Blue PPO Options Network	HMO-PPO (9-25-2010)	Tiered
HMO Blue Select	HMO Blue Select	HMO (1-1-2013) Jan 1, 2016 w/ hseISoB- 0117.ranges	Limited

**3. Blue Cross and Blue Shield of Massachusetts, Inc.**

401 Park Drive, Landmark Center  
Boston, MA 02215

Group Sales (800) 262-BLUE  
Individual Sales (800) 422-3545

<b>Product Name</b>	<b>Network Name</b>	<b>Form #</b>	<b>Network Type*</b>
The Hospital Choice Cost-Share Option	General Network	BCBS-PPO (01-01-12)	Tiered

**4. CIGNA Health and Life Insurance Company**

900 Cottage Grove Road  
Hartford, CT 06152

Sales and Marketing (860) 226-6000

<b>Product Name</b>	<b>Network Name</b>	<b>Form #</b>	<b>Network Type*</b>
Medical LocalPlus [PPO]	LocalPlus Network	HC-CER1	Limited
Medical LocalPlus In-Network [EPO]	LocalPlus Network	HC-CER1	Limited

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**5. Fallon Community Health Plan, Inc.**

10 Chestnut Street  
Worcester, MA 01608-2810

Merged Market (888) 797-3247  
Unit (800) 333-2535 x79097  
(508) 799-2100 x79097

<b>Product Name</b>	<b>Network Name</b>	<b>Form #</b>	<b>Network Type*</b>
FCHP Direct Care	Direct Care	12-730-66	Limited
FCHP Steward Community Care Plan	FCHP Steward Community Care	12-730-068	Limited
FCHP Select Care GIC Tiered Plan	Select Care	11-715-097	Tiered
FCHP Tiered Choice	FCHP Tiered Choice	13-670-040	Tiered
FCHP Tiered Choice [Municipal Option]	FCHP Tiered Choice	13-670-040	Tiered
FCHP Community Care	Community Care	14-670-060	Regional

**6. Harvard Pilgrim Health Care, Inc.**

93 Worcester Street  
Wellesley, MA 02481-9181

Group Sales (800) 848-9995  
Individual Sales (800) 848-9995

<b>Product Name</b>	<b>Network Name</b>	<b>Form #</b>	<b>Network Type*</b>
The Harvard Pilgrim Focus Network <sup>SM</sup> – MA HMO Massachusetts (Group)	Focus Network – MA	1268 Amendment 1359C	Limited
Schedule of Benefit Options –			
• Best Buy		1304	
• Tiered Copayment		1305	
• HMO Massachusetts		1365	
• Core Coverage		1366	
The Harvard Pilgrim Focus Network <sup>SM</sup> – MA HMO for Individual Members Massachusetts		1269 Amendment 1359	Limited
Schedule of Benefit Options –			
• Best Buy		1304	
• Tiered Copayment		1305	
• HMO Massachusetts		1365	
• Core Coverage		1366	
ChoiceNet 1000 HMO	ChoiceNet HMO	1376/1377; 1375	Tiered
ChoiceNet 1000 HMO with coinsurance		1376/1377; 1375	
Hospital Prefer <sup>SM</sup>	Hospital Prefer		Tiered
Hospital Prefer <sup>SM</sup> Best Buy HMO Massachusetts (Group)		1456 & SOB1455	
Hospital Prefer <sup>SM</sup> Best Buy HMO For Individual Members Massachusetts (Individual)		1459 & SOB1455	

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**7. HPHC Insurance Company, Inc.**

93 Worcester Street  
Wellesley, MA 02481-9181

Group Sales (800) 848-9995  
Individual Sales (800) 848-9995

<b>Product Name</b>	<b>Network Name</b>	<b>Form #</b>	<b>Network Type*</b>
Harvard Pilgrim ChoiceNet <sup>SM</sup> Best Buy Tiered Copayment PPO Options:	ChoiceNet	1379/1383/1533; SOB 1378 1379/1383/1533; SOB 1132	Tiered
Harvard Pilgrim ChoiceNet <sup>SM</sup> Best Buy Tiered Copayment PPO For Individual Members Plan	ChoiceNet	1380; SOB 1378	Tiered
Hospital Prefer <sup>SM</sup> Hospital Prefer <sup>SM</sup> Best Buy PPO Plan Massachusetts (Group)	Hospital Prefer	1458 & SOB1457	Tiered
Hospital Prefer <sup>SM</sup> Best Buy PPO Plan For Individual Members Massachusetts (Individual)		1460 & SOB1457	

**8. Health New England, Inc.**

One Monarch Place  
Springfield MA 01144

Member Services (413) 787-4004  
(800) 310-2835

<b>Product Name</b>	<b>Network Name</b>	<b>Form #</b>	<b>Network Type*</b>
Member Handbook For the Commonwealth of Massachusetts	General Network	HNE/GICActive-11	Tiered

**9. Neighborhood Health Plan, Inc.**

253 Summer Street  
Boston, MA 02210-1120

Customer Care (800) 462-5449

<b>Product Name</b>	<b>Network Name</b>	<b>Form #</b>	<b>Network Type*</b>
NHPCare HMO Plan for GIC Members	General Network	NHPGICEOC-11v1.0	Tiered

**10. Tufts Associated Health Maintenance Organization, Inc.**

(d/b/a) Tufts Health Plan)  
705 Mount Auburn Street  
Watertown, MA 02472-1508

Group Sales (800) 208-8013  
Individual Sales (800) 957-6596

<b>Product Name</b>	<b>Network Name</b>	<b>Form #</b>	<b>Network Type*</b>
Steward Community Choice HMO - Stewart Community Choice HMO Copay Stewart Community Choice HMO Deductible	Steward Community Choice Network	EC-MASSHMO-002 Ed. 1-2012	Limited
Select Network Plans - HMO Select 15 & HMO Select 20 Advantage HMO Select 750 Advantage HMO Select 2000	Select Network	EC-MASSHMO-002 Ed. 1-2012	Limited
Your Choice Plan HMO Options – HMO Choice Copay Your Choice HMO Two Tier & Three Tier	Your Choice Network	EC-MASSHMO-002 Ed. 1-2012	Tiered

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**11. Tufts Insurance Company**

705 Mount Auburn Street  
Watertown, MA 02472-1508

Group Sales (800) 208-8013  
Individual Sales (800) 957-6596

<b>Product Name</b>	<b>Network Name</b>	<b>Form #</b>	<b>Network Type*</b>
Navigator By Tufts Health Plan	Navigator By Tufts Health Plan Network	MA-TICOPPO-001 Ed. 1-2012	Tiered
Your Choice Plan PPO Options - Your Choice PPO Two Tier Your Choice PPO Three Tier	Your Choice Network	MA-TICOPPO-001 Ed. 1-2012	Tiered