



MASSACHUSETTS

HEALTH FINANCIAL ACCOUNT PAIRINGS AND FUNDING OPTIONS

Engage your employees and build a sustainable health care solution, through the powerful combination of our health financial accounts and medical plans.

Below, you'll find information about medical plans that are eligible to be paired with a health savings account (HSA) or health reimbursement arrangement (HRA). Our health financial account administrator partners listed on page 2 can provide health financial accounts, using our weekly claim file to enhance the customer experience.

Health financial account funding options

Deductible

- Up to 50% of the deductible may be funded by the employer if the employer is funding the front end of the deductible. For example, the employer pays the first \$500 of a \$1,000 deductible.
- Up to 75% of the deductible may be funded by the employer if the employer is funding the back end of the deductible. For example, the employee pays the first \$250 of a \$1,000 deductible and the employer pays the remaining \$750.
- Up to 100% of the deductible may be funded by the employer for **HSA offerings only**.

Employee cost

Applies to copayments and/or co-insurance

- 50% of the member's copayment and/or co-insurance liability that isn't subject to deductible can be funded by the employer.
- 75% of the member's copayment and/or co-insurance liability after deductible can be funded by the employer.
- 100% of the member's copayment and/or co-insurance liability after deductible can be funded by the employer for **HSA offerings only**.

Note: Employers should confirm what specifically can be administered with their contracted vendor(s). Some vendors may have limitations.

Hospital Choice Cost-Sharing (HCCS) products

- Deductible can be funded as outlined at left.
- Non-HCCS cost can be funded as outlined at left.
- Funding of the HCCS employee cost share (copayments or co-insurance) isn't allowed.

Blue Options network products

Funding of Blue Options plans isn't allowed — except for the deductible on Blue Options III plans, as outlined in this section. (Additional funding for all other employee costs isn't allowed.)

Important notes

- Requests to fund higher amounts than outlined in this section will require underwriting approval and should be directed to your account or sales executive.
- Health financial account funding options apply to all sizes of accounts, both fully insured and self-insured.
- Accounts that received underwriting approval to fund above the required limits in previous years are grandfathered from year to year, if they renew as is. If an account changes products or benefits, underwriting approval will be required if the account requests to fund higher amounts than outlined in this section.

Health financial account administrators

Fidelity Investments®	HealthEquity®	HRC Total Solutions	London Health Administrators
TASC®	Voya®	WEX®	

	Deductible options (individual/family)	Funding vehicle options	Group size
Health Maintenance Organization (HMO) plans			
HMO Blue Select Deductible	\$1,000/\$2,000	HRA	51 or more
	\$2,000/\$4,000		2 or more
	\$3,000/\$6,000		
HMO Blue Select Deductible with Copayment	\$1,000/\$2,000 \$2,000/\$4,000	HRA	99 or fewer
HMO Blue Select Saver \$2,000	\$2,000/\$4,000	HRA/HSA	50 or fewer
HMO Blue New England Deductible	\$1,000/\$2,000 \$1,500/\$3,000	HRA	51 or more
	\$2,000/\$4,000 \$3,000/\$6,000		2 or more
	\$4,500/\$9,000 \$5,000/\$10,000		2 to 50
HMO Blue New England Deductible II	\$4,000/\$8,000 \$5,000/\$10,000	HRA	51 or more
HMO Blue New England Deductible with HCCS	\$1,000/\$2,000	HRA	51 or more
	\$1,500/\$3,000		2 or more
	\$2,000/\$4,000 \$3,000/\$6,000		
HMO Blue New England Basic Copayment	\$2,000/\$4,000	HRA	2 or more
HMO Blue New England Basic Co-insurance	\$2,000/\$4,000	HRA	100 or more
HMO Blue New England Premier Value	\$1,000/\$2,500 (inpatient only)	HRA	2 or more
HMO Blue New England Premier Value with Co-insurance	\$1,000/\$2,500 (inpatient only)	HRA	100 or more
HMO Blue New England \$1,000 Deductible with Co-insurance	\$1,000/\$2,000	HRA	51 or more
HMO Blue New England Deductible with Copayment	\$1,500/\$3,000 \$3,000/\$6,000	HRA	2 to 50
	\$1,000/\$2,000 \$2,000/\$4,000		2 to 99
HMO Blue New England Basic Saver	\$3,350/\$6,550	HRA/HSA	2 to 50

	Deductible options (individual/family)	Funding vehicle options	Group size
HMO plans (continued)			
HMO Blue New England Saver	\$2,000/\$4,000 \$3,000/\$6,000 \$4,500/\$9,000	HRA/HSA	2 to 50
HMO Blue New England Total Deductible with Rx	\$3,500/\$7,000	HRA	2 to 50
HMO Blue New England Value Copayment*	No deductible	HRA	51 or more
HMO Blue New England Options Deductible III	\$2,000/\$4,000	HRA	2 or more
Open-Access HMO plans			
Access Blue New England Basic \$2,000	\$2,000/\$4,000	HRA	100 or more
Access Blue New England Basic Saver	\$3,000/\$5,950	HRA/HSA	100 or more
Access Blue New England Basic Saver II	\$3,300/\$6,450	HRA/HSA	51 or more
Access Blue New England Saver	\$1,600/\$3,200 \$2,000/\$4,000 \$2,500/\$5,000 \$3,000/\$6,000	HRA/HSA	51 or more
Access Blue New England Saver II	\$4,000/\$8,000 \$5,000/\$10,000	HRA/HSA	51 or more
Access Blue New England Total Saver	\$3,550/\$7,100	HRA/HSA	51 or more
Exclusive Provider Organization plans			
Advantage Blue® Preferred Deductible	\$2,000/\$4,000 \$3,000/\$6,000 \$1,500/\$3,000	HRA	2 to 50 51 or more
Advantage Blue® Preferred Saver	\$3,000/\$6,000 \$2,000/\$4,000	HRA/HSA	2 to 50 51 or more
Advantage Blue® Preferred Saver with Co-insurance	\$3,000/\$6,000	HRA/HSA	51 or more
Advantage Blue® Preferred Deductible with Co-insurance	\$3,000/\$6,000	HRA/HSA	51 or more

*This Predictable Copayment plan doesn't have a deductible. In an effort to keep premiums more affordable, the copayments are higher for certain services. To help balance out-of-pocket costs, this plan can be paired with a Health Reimbursement Arrangement (HRA) of up to \$2,000 per member/\$4,000 per family (per Underwriting guidelines).

	Deductible options (individual/family)	Funding vehicle options	Group size
Preferred Provider Organization (PPO) plans			
Preferred Blue® PPO Deductible	\$1,500/\$3,000 \$2,500/\$5,000 \$4,500/\$9,000	HRA	2 to 50
	\$1,000/\$2,000 \$2,000/\$4,000		51 or more
	\$3,000/\$7,500		100 or more
Preferred Blue® PPO Deductible II	\$4,000/\$8,000 \$5,000/\$10,000	HRA	51 or more
Preferred Blue® PPO Deductible with HCCS	\$1,000/\$2,500	HRA	51 to 99
	\$2,000/\$4,000		51 or more
	\$3,000/\$7,500		2 or more (not available to 51-99)
Preferred Blue® PPO Basic \$2,000	\$2,000/\$4,000	HRA	100 or more
Preferred Blue® PPO Basic Copayment	\$2,000/\$4,000	HRA	51 or more
Preferred Blue® PPO Basic Saver	\$3,300/\$6,450	HRA/HSA	51 or more
Preferred Blue® PPO Saver	\$2,000/\$4,000 \$3,000/\$6,000 \$4,500/\$9,000	HRA/HSA	2 to 50
	\$4,000/\$8,000 \$5,000/\$10,000		51 or more
	\$2,000/\$4,000		51 or more
Preferred Blue® PPO Saver II	\$4,000/\$8,000 \$5,000/\$10,000	HRA/HSA	51 or more
Preferred Blue® PPO Options Deductible III	\$2,000/\$4,000	HRA	51 or more
Blue Care Elect Deductible	\$1,000/\$2,500 \$1,500/\$3,750 \$2,000/\$4,000	HRA	100 or more
	\$3,000/\$7,500 \$4,500/\$9,000		51 or more
	\$1,600/\$3,200 \$2,000/\$4,000 \$2,700/\$5,400		HRA/HSA
Blue Care Elect Saver	\$1,600/\$3,200 \$2,000/\$4,000 \$2,700/\$5,400	HRA/HSA	100 or more
Blue Care Elect Saver 90	\$1,600/\$3,200	HRA/HSA	100 or more
Blue Care Elect Value Copayment*	No deductible	HRA	51 or more

*This Predictable Copayment Plan doesn't have a deductible. In an effort to keep premiums more affordable, the copayments are higher for certain services. To help balance out-of-pocket costs, this plan can be paired with a Health Reimbursement Arrangement (HRA) of up to \$2,000 per member/\$4,000 per family (per Underwriting guidelines).