COMMONWEALTH OF MASSACHUSETTS
Office of Consumer Affairs and Business Regulation
DIVISION OF INSURANCE
One Federal Street, Suite 700 • Boston, MA 02110
(617) 521-7794 • (877) 563-4467 • www.mass.gov/doi

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GOVERNOR

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LIEUTENANT GOVERNOR

ERIC PALEY
SECRETARY

LAYLA R. D'EMILIA
UNDERSECRETARY

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COMMISSIONER

INSURED HEALTH PLANS
AVAILABLE TO INDIVIDUALS AND SMALL GROUPS
EFFECTIVE ON OR AFTER JANUARY 1, 2026

The following provides a list of all comprehensive health insurance plans available for purchase by individuals and small groups in Massachusetts from licensed health insurance companies. Consumers and small business interested in learning more about eligibility, costs and coverage options that may fit personal needs should contact one of the listed carriers, a licensed broker or the Massachusetts Health Connector ("Connector") [1-877-MA-ENROLL or www.mahealthconnector.org] for further information.

Insured Health Plans Available to Individuals and Small Groups
Effective on or after January 1, 2026

1. Blue Cross and Blue Shield of Massachusetts HMO Blue, Inc.

101 Huntington Avenue, Suite 1300
Boston, MA 02199-7611

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

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
HEALTH MAINTENANCE ORGANIZATION			
HMO Blue and HMO Blue New England Network	HMO (1-1-22) & hSoB-0126.RANGES		
Options:			
HMO Blue Premium		Platinum	YES
HMO Blue Deductible with Copayment		Gold	YES
HMO Blue Basic		Silver	YES
HMO Blue Saver		Silver	YES[1a]
HMO Blue Basic II		Silver	YES[1b]
HMO Blue Basic Deductible		Bronze	YES
HMO Blue Value Deductible		Gold	YES
HMO Blue Essential[ii]		Catastrophic[ii]	YES
HMO Blue New England Premier Value		Gold	NO
HMO Blue New England $2,000 Deductible		Gold	NO
HMO Blue New England $1,000 Deductiblewith Copayment		Gold	NO
HMO Blue New England $1,500 Deductiblewith Copayment		Gold	NO
HMO Blue New England $2,000 Deductiblewith Copayment		Silver	NO
HMO Blue New England $3,000 Deductible		Silver	NO
HMO Blue New England $3,000 Deductiblewith Copayment		Silver	NO
HMO Blue New England $4,500 Deductible		Silver	NO
HMO Blue New England $5,000 Deductible		Silver	NO
HMO Blue New England Basic Copayment		Silver	NO
HMO Blue New England Saver $2,000		Silver	NO
HMO Blue New England Saver $3,000		Silver	NO
HMO Blue New England Saver $4,500		Silver	NO
HMO Blue New England Basic Saver		Silver	NO
HMO Blue New England Total Deductible with Rx		Gold	NO

[1a] Made available to Individuals and small groups; on the Connector only offered to small groups.
[1b] Made available to small groups; on the Connector only offered to Individuals.

i. See last page for a description of metallic level and eligibility for each plan.
ii. Eligibility for catastrophic plans are restricted to either (1) young adults under age 30 prior to the start of the plan year or (2) individuals who have been deemed exempt from the individual mandate [refer to ACA §1302(e)(2)].

Insured Health Plans Available to Individuals and Small Groups
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(Blue Cross and Blue Shield of Massachusetts HMO Blue, Inc. (cont'd))

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
HMO Blue Select Network[2]	HMO (1-1-22) & hSoB-0126.RANGES		
Options:			
HMO Blue Select $1,000 Deductible withCopayment		Gold	NO
HMO Blue Select $2,000 Deductible		Gold	NO
HMO Blue Select $2,000 Deductible with Copayment		Silver	NO
HMO Blue Select $3,000 Deductible		Silver	NO
HMO Blue Select Saver $2,000		Silver	NO
HMO Blue New England with Hospital Choice Cost Sharing Network[3]	HMO (1-1-22) & hSoB-0126.RANGES		
Options:			
HMO Blue New England $500 Deductible with HCCS		Gold	NO
HMO Blue New England $1,500 Deductible with HCCS		Gold	NO
HMO Blue New England $2,000 Deductible with HCCS		Gold	NO
HMO Blue New England $3,000 Deductible with HCCS		Silver	NO
HMO Blue New England Saver $3,000 with HCCS		Silver	NO
HMO Blue New England Options Network[4]	HMO (1-1-22) & hoptSoB-0126.RANGES		
Options:			
HMO Blue New England Options Deductible II		Gold	NO
HMO Blue New England Options Deductible III		Gold	NO

[2] The HMO Blue Select Network provides access to a network that is smaller than the HMO Blue Network; members have access to network benefits only from the Providers in the HMO Blue Select Network. Please call the carrier directly if you have any questions about whether the HMO Blue Select is specifically available in your area as well as the participation of your primarycare provider, specialist or acute care facility.

[3] The HMO Blue New England with Hospital Choice Cost Sharing Network tiers general hospitals; members pay different levels of copayments and/or coinsurance depending on the tier of the hospital furnishing covered services. Please call the carrier directly if you have any questions about the participation of your acute care facility within the HMO Blue New England with Hospital Choice Cost Sharing Network.

[4] The HMO Blue New England Options Network primary care providers and general hospitals fall into different tiers; members pay different levels of copayments, coinsurance and/or deductibles depending on the tier of the provider delivering a covered service or supply. Please call the carrier directly if you have any questions about the tier level of your primary care provider or acute care facility within the HMO Blue New England Options Network.

i. See last page for a description of metallic level and eligibility for each plan.

ii. Eligibility for catastrophic plans are restricted to either (1) young adults under age 30 prior to the start of the plan year or (2) individuals who have been deemed exempt from the individual mandate [refer to ACA §1302(e)(2)].

Insured Health Plans Available to Individuals and Small Groups
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(Blue Cross and Blue Shield of Massachusetts HMO Blue, Inc. (cont'd))

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
PREFERRED PROVIDER PLAN			
Preferred Blue PPO	HMO-PPO (1-1-22) & hppoSoB-0126.RANGES		
Options:			
Preferred Blue PPO $1,500 Deductible		Silver	NO
Preferred Blue PPO $2,500 Deductible		Silver	NO
Preferred Blue PPO Saver $2,000		Silver	NO
Preferred Blue PPO Saver $3,000		Silver	NO
Preferred Blue PPO Saver $4,500		Silver	NO
Preferred Blue PPO $4,500 Deductible		Bronze	NO
Preferred Blue PPO Saver with Copayment		Silver	YES[5]
Preferred Blue PPO Hospital Choice Cost Sharing Network[6]	HMO-PPO (1-1-22) & hppoSoB-026.RANGES		
Options:			
Preferred Blue PPO $500 Deductible with HCCS		Gold	NO
Preferred Blue PPO $3,000 Deductible with HCCS		Silver	NO
Advantage Blue Preferred	HMO-EPO (1-1-23) & hepoSoB-0126.RANGES		
Options:			
Advantage Blue Preferred EPO $1,000 Deductible		Gold	NO
Advantage Blue Preferred EPO $2,000 Deductible		Silver	NO
Advantage Blue Preferred EPO $3,000 Deductible		Silver	NO
Advantage Blue Preferred EPO Saver $3,000		Silver	NO

[5] Made available to Individuals and small groups; on the Connector only offered to small groups.

[6] The Preferred Blue PPO Hospital Choice Cost Share Network tiers in-network general hospitals; members pay different levels of copayments, coinsurance and/or deductibles depending on the tier of the in-network hospital furnishing covered services.Please call the carrier directly if you have any questions about the participation of your acute care facility within the Preferred BluePPO Hospital Choice Cost Share Network.

i. See last page for a description of metallic level and eligibility for each plan.

ii. Eligibility for catastrophic plans are restricted to either (1) young adults under age 30 prior to the start of the plan year or (2) individuals who have been deemed exempt from the individual mandate [refer to ACA §1302(e)(2)].

Insured Health Plans Available to Individuals and Small Groups
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2. Boston Medical Center Health Plan, Inc.[7] (d/b/a WellSense Health Plan)

100 City Square, Suite 200
Charlestown, MA 02129 Member Services (855) 833-8120

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
HEALTH MAINTENANCE ORGANIZATION			
WellSense Health Plan - Individual	EOC Clarity - 2026		
WellSense Health Plan -Small Group[8]	EOC Clarity - 2026		
Employer Choice Direct[9]	EOC Employee Choice Direct - 2026		
Options:			
Standard Platinum: WellSense Clarity Platinum 0 Deductible [SG[8]] [Direct[9]]		Platinum	YES
Standard High Gold: WellSense Clarity Gold 1000 [SG[8]] [Direct[9]]		Gold	YES
Non-Standard Low Gold: WellSense Clarity Gold 1750 [SG[8]] [Direct[9]]		Gold	YES
Standard High Bronze HSA: WellSense Clarity Bronze HSA 3800[SG[8]] [Direct[9]]		Bronze	YES
Standard High Silver: WellSense Clarity Silver 2000 II		Silver	YES
Standard Silver A: WellSense Clarity Silver 2000 [SG[8]] [Direct[9]]		Silver	YES[10]
Non-Standard Silver B: WellSense Clarity Silver 3500 [SG[8]] [Direct[9]]		Silver	YES[10]
Standard Low Silver HSA: WellSense Clarity Silver HSA 2500 [SG[8]] [Direct[9]]		Silver	YES

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7 As permitted by law, Boston Medical Center Health Plan, Inc. d/b/a WellSense Health Plan ("WellSense") requires individuals and groups with five or fewer eligible employees to enroll through the Massachusetts Health Connector ("Connector") in the Qualified Health Plan Products.

8 Made available to Individuals and small groups via the Massachusetts Health Connector. WellSense Clarity Silver HSA 2500 made available to small groups via the Massachusetts Health Connector.

9 Made available to Individuals via the Massachusetts Health Connector.

10 Made available to Individuals off exchange via Health Services Administrators and small groups via the Massachusetts Health Connector.

i. See last page for a description of metallic level and eligibility for each plan.

ii. Eligibility for catastrophic plans are restricted to either (1) young adults under age 30 prior to the start of the plan year or (2) individuals who have been deemed exempt from the individual mandate [refer to ACA §1302(e)(2)].

Insured Health Plans Available to Individuals and Small Groups
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3. Fallon Community Health Plan, Inc.[11]

1 Mercantile St., Ste. 400
Worcester, MA 01608-2810

Merged Market Unit:
(800) 333-2535 x79097
(508) 799-2100 x79097

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
HEALTH MAINTENANCE ORGANIZATION			
FCHP Community Care Network[12]	24-670-018		
Options:			
Community Care Connector Platinum		Platinum	YES
Community Care Connector High Gold		Gold	YES
Community Care Connector Low Gold		Gold	YES
Community Care Connector High Silver II		Silver	YES[13]
Community Care Connector High Silver		Silver	YES[14]
Community Care Connector Low Silver HSA		Silver	YES[14]
Community Care Connector Bronze #1		Bronze	YES

[11] As allowed by law, Fallon requires groups with five or fewer eligible employees as well as individuals to enroll through the Massachusetts Health Connector (877) 623-6765.

[12] Fallon Health Community Care Network is available in Berkshire, Bristol, Hampden, Middlesex, Plymouth and Worcester counties, and parts of Norfolk County; members have access to network benefits only from the Providers in the FCHP Community Care Network. Please call the carrier directly if you have any questions about whether the FCHP Community Care Network is specifically available in your area as well as the participation of your primary care provider, specialist or acute care facility.

[13] Made available to individuals and small groups; on the Connector only offered to individuals.

[14] Made available to individuals and small groups; on the Connector only offered to small groups.

[i] See last page for a description of metallic level and eligibility for each plan.

ii Eligibility for catastrophic plans are restricted to either (1) young adults under age 30 prior to the start of the plan year or (2)individuals who have been deemed exempt from the individual mandate [refer to ACA §1302(e)(2)].

Insured Health Plans Available to Individuals and Small Groups
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4. Harvard Pilgrim Health Care, Inc. (a Point32Health company)[15]

1 Wellness Way
Canton, MA 02021

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

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
TRADITIONAL HMO			
CLOSED NETWORK PRODUCTS			
Harvard Pilgrim Health Care Network			
THE HARVARD PILGRIM HMO Benefit Handbook	**2544_12**		
[THE HARVARD PILGRIM HMO FOR INDIVIDUAL MEMBERS Benefit Handbook	**1120-23**		
Options:			
Standard Platinum Flex	SOB 3021	Platinum	YES
HMO 25 - Flex	SOB 1565_16	Platinum	NO
Standard High Gold	SOB 3022	Gold	YES
HMO 1000 - Flex	SOB 1565_16	Gold	NO
HMO 1500 – Flex	SOB 1565_16	Gold	NO
HMO 2000 – Flex	SOB 1565_16	Gold	NO
HMO 2000 Value II - Flex	SOB 3031	Gold	YES
HMO 2500 - Flex	SOB 1565_16	Silver	NO
Standard Silver	SOB 3023	Silver	YES
Standard Silver II	SOB 3024	Silver	YES
HMO 2000 Value - Flex	SOB 1565_16	Silver	NO
HMO 3000 - Flex	SOB 1565_16	Silver	NO
HMO 3500 - Flex	SOB 3033	Bronze	YES
HMO 4000 Flex	SOB 1565_16	Bronze	NO
HMO 5000 Flex	SOB 1565_16	Silver	NO
Standard ConnectorCare 1	SOB 3025	Silver-CSR	YES[16]
Standard ConnectorCare 2	SOB 3026	Silver-CSR	YES[16]
Standard ConnectorCare 3	SOB 3027	Silver-CSR	YES[16]
Standard High Bronze - Flex	SOB 3030	Bronze	YES[16]

[15] As allowed by law, Harvard Pilgrim Health Care, Inc. ("HPHC") requires groups with five or fewer eligible employees to enroll through the Massachusetts Health Connector or the following intermediaries: Health Services Administrators ("HSA") (781) 848-4950 and Small Business Service Bureau (508) 756-3513.

[16] On the Connector only offered to individuals.

[i] See last page for a description of metallic level and eligibility for each plan.

[ii] Eligibility for catastrophic plans are restricted to either (1) young adults under age 30 prior to the start of the plan year or (2)individuals who have been deemed exempt from the individual mandate [refer to ACA §1302(e)(2)].

Insured Health Plans Available to Individuals and Small Groups
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(Harvard Pilgrim Health Care, Inc. (cont'd))

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
[THE HARVARD PILGRIM BEST BUY HSA HMO FOR INDIVIDUAL Handbook	**1469_23**		
Options:			
Standard High Bronze HSA Flex	3029	Bronze	YES[17]
HMO HSA 2000 - Flex	1611-15	Silver	NO
HMO HSA 3000 - Flex	1611_15	Silver	NO
HMO HSA 3400 - Flex	1611_15	Silver	NO
HMO HSA 4000 – Flex	1611_15	Bronze	NO
Standard Low Silver HSA - Flex	3028	Silver	YES[17]
Harvard Pilgrim Health Care Focus Network[18]			
THE HARVARD PILGRIM FOCUS [HSA] HMO Handbook	**2546_12**		
[THE HARVARD PILGRIM FOCUS [HSA] HMO FOR INDIVIDUAL MEMBERS Handbook	**1269_24**		
Options:			
Focus HMO 1000	SOB 2842_05	Gold	NO
Focus HMO 2000	SOB 2842_05	Gold	NO
Focus HMO 3000	SOB 2842_05	Silver	NO
Focus HMO HSA 3400	SOB 1566_15	Silver	NO

[17] Made available to individuals and small groups; on the Connector only offered to small groups.
[18] The Harvard Pilgrim Focus Network – MA is different than the Harvard Pilgrim Network. Please call the carrier directly if you have any questions about whether the Harvard Pilgrim Focus Network – MA is specifically available in your area and whether your primary care provider, specialist or acute care facility participates in the Harvard Pilgrim Focus Network – MA.

[i] See last page for a description of metallic level and eligibility for each plan.
ii Eligibility for catastrophic plans are restricted to either (1) young adults under age 30 prior to the start of the plan year or (2)individuals who have been deemed exempt from the individual mandate [refer to ACA §1302(e)(2)].

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(Harvard Pilgrim Health Care, Inc. (cont'd))

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
Harvard Pilgrim Health Care National Access EPO			
THE HARVARD PILGRIM National Access EPO [HSA] Handbook	**3020**		
[THE HARVARD PILGRIM National Access EPO [HSA] FOR INDIVIDUAL MEMBERS Handbook	**3035**		
Options:			
National Access EPO 2000	SOB 3036	Silver	NO
National Access EPO 3000	SOB 3036	Silver	NO
National Access EPO HSA 4000	SOB 3037	Bronze	NO

[i] See last page for a description of metallic level and eligibility for each plan.
ii Eligibility for catastrophic plans are restricted to either (1) young adults under age 30 prior to the start of the plan year or (2)individuals who have been deemed exempt from the individual mandate [refer to ACA §1302(e)(2)].

Insured Health Plans Available to Individuals and Small Groups
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(Harvard Pilgrim Health Care, Inc. (cont'd))

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
PREFERRED PROVIDER PLAN PRODUCTS			
THE HARVARD PILGRIM PPO PLAN Handbook	**2547_12**		
[THE HARVARD PILGRIM PPO PLAN FOR INDIVIDUAL MEMBERS Handbook	**1138_24**		
Options:			
PPO Access 25 - Flex	SOB 1569_15	Platinum	NO
PPO Access 1000 - Flex	SOB 1569_15	Gold	NO
PPO Access 1500 – Flex	SOB 1569_15	Gold	NO
PPO Access 2000 - Flex	SOB 1569_15	Gold	NO
PPO Access 2000 Value – Flex	SOB 1569_15	Silver	NO
PPO Access 3000 – Flex	SOB 1569_15	Silver	NO
PPO Access 4000 – Flex	SOB 1569_15	Bronze	NO
THE HARVARD PILGRIM PPO **HSA PLAN Handbook**	**1824_17**		
THE HARVARD PILGRIM PPO HSA PLAN **FOR INDIVIDUAL MEMBERS Handbook**	**1829_17**		
Options:			
PPO Access HSA 2500 - Flex	SOB 3032	Silver	YES[19]
PPO Access HSA 3000 - Flex	SOB 1826_14	Silver	NO
PPO Access HSA 5000 - Flex	SOB 1826_14	Bronze	NO

[19] Made available to individuals and small groups; on the Connector only offered to small groups.

Insured Health Plans Available to Individuals and Small Groups
Effective on or after January 1, 2026

5. Health New England, Inc.[20]

One Monarch Place
Springfield MA 01144

Group Sales (800) 842-4464
Individual Sales (800) 842-4464

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
HEALTH MAINTENANCE ORGANIZATION			
HNE HMO Plans			
Options:			
HNE Platinum A	HNEHMO-06	Platinum	YES
HNE Choice Plus	HNEHMO-06	Platinum	NO
HNE Gold A	HNEHMOwithDED-06	Gold	YES
HNE Essential 500	HNEHMOwithDED-06	Platinum	NO
HNE Essential 1000	HNEHMOwithDED-06	Gold	NO
HNE Essential 2000	HNEHMOwithDED-06	Gold	NO
HNE Core 2000 Copay	HNEHMOwithDED-06	Silver	NO
HNE Core 2500	HNEHMOwithDED-06	Gold	NO
HNE Thrive Gold 2000	HNEHMOwithDED-06	Gold	YES
HNE Essential 3000	HNEHMOwithDED-06	Gold	NO
HNE Essential 4000	HNEHMOwithDED-06	Silver	NO
HNE Essential 5000	HNEHMOwithDED-06	Silver	NO
HNE Core 3000	HNEHMOwithDED-06	Silver	NO
HNE Silver A	HNEHMOwithDED-06	Silver	YES[21]
HNE Silver A II	HNEHMOwithDED-06	Silver	YES[1]
HNE Silver HDHP	HNEHMOwithHIGHDED-06	Silver	YES[22]
HNE Wise Max 2000 HDHP	HNEHMOwithHIGHDED-06	Gold	NO
HNE Wise Max 3000 HDHP	HNEHMOwithHIGHDED-06	Gold	NO
HNE Wise 3000/10% HDHP	HNEHMOwithHIGHDED-06	Silver	NO
HNE Bronze 2 HDHP	HNEHMOwithHIGHDED-06	Bronze	YES
HNE Wise Saver 3450 HDHP	HNEHMOwithHIGHDED-06	Silver	NO
HNE Thrive Bronze	HNEHMOwithDED-06	Bronze	YES
HNE Thrive Silver 3000	HNEHMOwithDED-06	Silver	NO
HNE Thrive Platinum Copay	HNEHMO-06	Platinum	NO

[20] As allowed by law, groups with five or fewer eligible employees may enroll through the Massachusetts Health Connector (877) 623-6765 (TTY: 711) or through one of the following intermediaries: Health Services Administrators (781) 228–2222 or Small Business Service Bureau (800) 472-7199. HNE requires individuals to enroll through the Massachusetts Health Connector: (877) 623-6765 (TTY: 711) or the following intermediary: Health Services Administrators (781) 228-2222.

[21] Made available to individuals and small groups; on the Connector only offered to small groups

[22] Made available to individuals and small groups; on the Connector only offered to individuals.

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(Health New England, Inc. (cont'd)

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
PREFERRED PROVIDER PLAN			
HNE PPO Plans			
Options:			
HNE PPO Core 2000 Copay National	HNE-NatPPO-06	Silver	NO
HNE PPO Essential 500 National	HNE-NatPPO-06	Platinum	NO
HNE PPO Silver A National	HNE-NatPPO-06	Silver	YES[23]
HNE PPO Essential 2000 National	HNE-NatPPO-06	Gold	NO
HNE PPO Essential 3000 National	HNE-NatPPO-06	Gold	NO
HNE PPO Essential 5000 National	HNE-NatPPO-06	Silver	NO
HNE PPO Thrive Bronze National	HNE-NatPPO-06	Bronze	NO
HNE PPO Thrive Silver 3000 National	HNE-NatPPO-06	Silver	NO
HNE PPO Wise 3000/10% HDHP National	HNE-NatPPOSaver-06	Silver	NO
HNE PPO Wise Saver 3450 HDHP National	HNE-NatPPOSaver-06	Silver	NO

[23] Made available to individuals and small groups; on the Connector only offered to small groups.

Insured Health Plans Available to Individuals and Small Groups
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6. Mass General Brigham Health Plan, Inc.[24]

399 Revolution Dr., Suite #810
Somerville, MA 02210-1120

Group Sales (866) 643-8392
Individual Sales (866) 643-8392

Product Name	Form	Metallic Level [i, i]	Offered thru the Connector
HEALTH MAINTENANCE ORGANIZATION			
MGBHP HMO Member Handbook	CompleteHMOMM v.4		
Options:			
Complete HMO 20/40		Platinum	YES
Complete HMO 1000 20/40		Gold	YES
Complete HMO 1000 35%		Gold	YES
Complete HMO 2000 25/60		Silver	YES[25]
Complete HMO 2000 25/60 II		Silver	YES[26]
Complete HMO HSA 2500 30/60 Enhanced FlexRx		Silver	YES[25]
Complete HMO 2900 30/65		Bronze	YES
Complete HMO 20/40 with Care Complement		Platinum	NO
Complete HMO 500 with Care Complement		Gold	NO
Complete HMO 1000 25/50/350 with Care Complement		Gold	NO
Complete HMO 1000 10%/30% with Care Complement		Gold	No
Complete HMO 1500 25/50 ER350 with Care Complement		Gold	NO
Complete HMO 2000 25/50 ER450 with Care Complement		Gold	NO
Complete HMO 2000 35/70 with Care Complement		Silver	NO
Complete HMO 2000 25/60 with Care Complement		Silver	NO
Complete HMO 2500 15%/35% with Care Complement		Silver	NO
Complete HMO 2500 30/55/500 with Care Complement		Silver	NO
Complete HMO 3000 40/55/750 with Care Complement		Silver	NO
Complete HMO 3500 45/75 with Care Complement		Silver	NO
Complete HMO 4000 35/45 ER750 10% with Care Complement		Bronze	NO
Complete HMO 5000 35/45 ER750 10% with Care Complement		Bronze	NO
Complete HMO HSA 2500 35/50 Enhanced FlexRx		Silver	NO
Complete HMO HSA 3000 35/55 Enhanced FlexRx		Silver	NO
Complete HMO HSA 3000 ER 350 Enhanced FlexRx		Silver	NO
Complete HMO HSA 3600 35/55 Enhanced FlexRx		Silver	NO
Complete HMO HSA 4200 Enhanced FlexRx		Bronze	NO

[24] As allowed by law, Mass General Brigham Health Plan, Inc. requires groups with four or fewer eligible employees to enroll through the following intermediaries: Health Services Administrators (781) 228-2222 and Small Business Service Bureau (800) 472-7199.
[25] Made available to Individuals and small groups; on the Connector only offered to small groups.
[26] Made available to Individuals and small groups; on the Connector only offered to individuals.

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(Mass General Brigham Health Plan, Inc. cont'd)

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
MGBHP HMO Member Handbook	ChoiceETHMOMM v.5		
Options:			
Choice Easy Tier HMO 500 25/45/400 with Care Complement		Gold	NO
Choice Easy Tier HMO 1000 25/50/350 with Care Complement		Gold	NO
Choice Easy Tier HMO 1500 25/50 ER350 with Care Complement		Gold	NO
Choice Easy Tier HMO 2000 25/50 ER450 with Care Complement		Gold	NO
Choice Easy Tier HMO 2500 30/50 with Care Complement		Silver	NO
Choice Easy Tier HMO 2500 15%/20%/35% with Care Complement		Silver	NO
Choice Easy Tier HMO 3000 45/55/750 with Care Complement		Silver	NO
MGBHP HMO Member Handbook	SelectHMOMM v.3		
Options:			
Select HMO 20/40		Platinum	YES[27]
Select HMO 1000 20/40		Gold	YES[27]
Select HMO 2000 25/60 II		Silver	YES[27]
Select HMO 2900 30/65		Bronze	YES[27]
MGBHP HMO Member Handbook	AlliesCHHMOMM v.3		
Options:			
Allies Choice HMO 1000 25/50/350 with Care Complement		Gold	NO
Allies Choice HMO 1500 25/50 ER350 with Care Complement		Gold	NO
Allies Choice HMO 2000 20/40/400 with Care Complement		Gold	NO
Allies Choice HMO 3000 40/55/500 with Care Complement		Silver	NO

[27] Made available to Individuals and small groups; on the Connector only offered to individuals.

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(Mass General Brigham Health Plan, Inc. cont'd)

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
INSURED PREFERRED PROVIDER PLAN			
MGBHP PPO Member Handbook	CompletePPOPLUSMM_v4		
Options:			
Complete PPO Plus 500 with Care Complement		Gold	NO
Complete PPO Plus 1000 10%/30% with Care Complement		Gold	NO
Complete PPO Plus 1000 25/50/350 with Care Complement		Gold	NO
Complete PPO Plus 1500 25/50 ER350 with Care Complement		Gold	NO
Complete PPO Plus 2000 25/50 ER450 with Care Complement		Gold	NO
Complete PPO Plus 2000 25/60 with Care Complement		Silver	YES[28]
Complete PPO Plus 2000 35/70 with Care Complement		Silver	NO
Complete PPO Plus 2500 30/55/500 with Care Complement		Silver	NO
Complete PPO Plus 2500 15%/35% with Care Complement		Silver	NO
Complete PPO Plus 3000 40/55/750 with Care Complement		Silver	NO
Complete PPO Plus 3500 45/75 with Care Complement		Silver	NO
Complete PPO Plus 4000 35/45 ER750 10% with Care Complement		Bronze	NO
Complete PPO Plus 5000 35/45 ER750 10% with Care Complement		Bronze	NO
Complete PPO Plus HSA 2500 35/50 Enhanced FlexRx		Silver	NO
Complete PPO Plus HSA 3000 35/55 Enhanced FlexRx		Silver	NO
Complete PPO Plus HSA 3600 35/55 Enhanced FlexRx		Silver	NO
Complete PPO Plus HSA 4200 Enhanced FlexRx		Bronze	NO
MGBHP PPO Member Handbook	ChoiceETPPOPLUSMM_v5		
Options:			
Choice Easy Tier PPO Plus 500 25/45/400 with Care Complement		Gold	NO
Choice Easy Tier PPO Plus 1000 25/50/350 with Care Complement		Gold	NO
Choice Easy Tier PPO Plus 1500 25/50 ER350 with Care Complement		Gold	NO
Choice Easy Tier PPO Plus 2000 25/50 ER450 with Care Complement		Gold	NO
Choice Easy Tier PPO Plus 2500 15%/20%/35% with Care Complement		Silver	NO
Choice Easy Tier PPO Plus 3000 45/55/750 with Care Complement		Silver	NO
EXCLUSIVE PROVIDER ORGANIZATION			
MGBHP EPO Member Handbook	CompleteAccessEPOMM v.1		
Options:			
Complete Access EPO 2000 25/50 ER450 with Care Complement		Gold	NO
Complete Access EPO 3000 40/55/750 with Care Complement		Silver	NO
Complete Access EPO HSA 3000 35/55 Enhanced FlexRx		Silver	NO

[28] Made available to Individuals and small groups; on the Connector only available to small groups.

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7. Tufts Health Public Plans, Inc. (a Point32Health company)[29]

1 Wellness Way
Canton, MA 02021

Member Services (888) 257-1985

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
HEALTH MAINTENANCE ORGANIZATION			
Tufts Health Direct Network	EOC-Direct-001 Ed. 1-2026		
Tufts Health Direct Platinum		Platinum	YES
Tufts Health Direct Gold 1000		Gold	YES
Tufts Health Direct Gold 1600		Gold	YES
Tufts Health Direct Silver 2000 – Small Group		Silver	YES
Tufts Health Direct Silver 2000 – Individual		Silver	NO
Tufts Health Direct Silver 2500 HSA – Small Group		Silver	YES
Tufts Health Direct Silver 2500 HSA – Individual		Silver	NO
Tufts Health Direct Silver 2000 II – Small Group		Silver	NO
Tufts Health Direct Silver 2000 II – Individual		Silver	YES
Direct Bronze 2900		Bronze	YES
Tufts Health Direct Catastrophic[ii]		Catastrophic[ii]	YES

[29] As allowed by law, Tufts Health Public Plans, Inc. requires groups with five or fewer eligible employees to enroll through the Massachusetts Health Connector or the following intermediaries: Health Services Administrators ("HSA") (781) 848-4950 and Small Business Service Bureau (508) 756-3513. Please call the carrier directly if you have any questions about whether the Tufts Health Direct Network is specifically available in your area and whether your primary care provider, specialist or acute care facility participates in the network.

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8. UnitedHealthcare Insurance Company

475 Kilvert Street
Warwick, RI 02886-1392

Group & Individual (888) 735-5842
Sales Office

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
EXCLUSIVE PROVIDER ORGANIZATION (EPO)			
Navigate Plan	IEXPOL26.I.2018.MA, IEXSBN26.NAV.I.2018.MA, COC26.INS.2018.SG.MA & SBN26.NAVNXS.I.2018.SG.MA		
Options:			
Standard Platinum UHC Navigate Platinum 0		Platinum	YES
UHC Navigate Platinum 0		Platinum	NO
UHC Navigate Platinum 1000		Platinum	NO
Standard High Gold: UHC Navigate Gold 1000		Gold	YES[30]
UHC Navigate Gold 1500		Gold	NO
UHC Navigate Gold 2000		Gold	NO
UHC Navigate Gold 3000		Gold	NO
Low Gold: UHC Navigate Gold 2000		Gold	YES[31]
Non-Standard Low Gold: UHC Navigate Gold 2000		Gold	YES[30]
Standard High Silver: UHC Navigate Silver 2000		Silver	YES[31]
Standard Silver: UHC Navigate Silver 2000		Silver	YES[30]
UHC Navigate Silver 2000		Silver	NO
UHC Navigate HSA Silver 2500		Silver	NO
UHC Navigate Silver 4500		Silver	NO
Standard Low Silver HSA: UHC Navigate HSA Silver 2500		Silver	YES[31]
Standard High Bronze HSA: UHC Navigate HSA Bronze 3800		Expanded Bronze	YES
UHC Navigate HSA Bronze 3800		Expanded Bronze	NO
Choice Plan	IEXPOL26.I.2018.MA, IEXSBN26.CHC.I.2018.MA, COC26.INS.2018.SG.MA & SBN26.CHC.I.2018.SG.MA		
Options:			
Standard High Gold: UHC Choice Gold 1000		Gold	YES[31]
UHC Choice Gold 0		Gold	NO
UHC Choice Gold 1000		Gold	NO
UHC Choice Gold 2000		Gold	NO
UHC Choice Gold 2500		Gold	NO
UHC Choice Gold 3000		Gold	NO
UHC Choice HSA Silver 3500		Silver	NO
UHC Choice Silver 4750		Silver	NO
UHC Choice Silver 5500		Silver	NO

[30] Made available to individuals and small groups; on the Connector only offered to individuals.
[31] Made available to individuals and small groups; on the Connector only offered to small groups.

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(UnitedHealthcare Insurance Company cont'd))

Product Name	Form	Metallic Level [i, ii]	Offered thru the Connector
NexusACO R Plan	COC26.INS.2018.SG.MA & SBN26.NAVNXS.I.2018.SG.MA		
Options:			
UHC NexusACO R Gold 2000		Gold	NO
UHC NexusACO R Gold 3000		Gold	NO
UHC NexusACO R Silver 6000		Silver	NO
PREFERRED PROVIDER ORGANIZATION (EPO)			
Choice Plus Plan	IEXPOL26.I.2018.MA, IEXSBN26.CHP.I.2018.MA, COC26.INS.2018.SG.MA & SBN26.CHP.I.2018.SG.MA		
Options:			
UHC Choice Plus Platinum 0		Platinum	NO
UHC Choice Plus Platinum 500		Platinum	NO
Standard High Gold UHC Choice Plus Gold 1000		Gold	YES[32]
UHC Choice Plus Gold 1000		Gold	NO
UHC Choice Plus Gold 1500		Gold	NO
UHC Choice Plus HSA Gold 2000		Gold	NO
UHC Choice Plus Gold 2000		Gold	NO
UHC Choice Plus Gold 3000		Gold	NO
UHC Choice Plus Gold 5000		Gold	NO
UHC Choice Plus HSA Silver 3000		Silver	NO
UHC Choice Plus HSA Silver 4000		Silver	NO
UHC Choice Plus Silver 4000		Silver	NO
UHC Choice Plus HSA Silver 4500		Silver	NO
UHC Choice Plus Silver 6500		Silver	NO
UHC Choice Plus HSA Bronze 5000		Expanded Bronze	NO

[32] Made available to individuals and small groups; on the Connector only offered to small groups.

i See last page for a description of metallic level and eligibility for each plan.

ii Eligibility for catastrophic plans are restricted to either (1) young adults under age 30 prior to the start of the plan year or (2)individuals who have been deemed exempt from the individual mandate [refer to ACA §1302(e)(2)].

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Metallic Level (actuarial value categories)

The federal Affordable Care Act ("ACA") requires that individual and small group market plans be within specific actuarial value categories. Actuarial value measures the percentage of total overall health care costs for the essential benefits covered by the health plan (what you will pay compared to how much the health plan pays). The lower your premium, the more you pay in cost sharing. ACA identifies specific actuarial value categories as "metal levels" specified as bronze, silver, gold and platinum.

Coverage levels are as follows:

Bronze 56-65 percent of the actuarial value;
Silver 66-72 percent of the actuarial value;
Gold 76-82 percent of the actuarial value; and
Platinum 86-92 percent of the actuarial value.

Catastrophic plans are not required to meet actuarial value targets but must have actuarial values below bronze. Eligibility is restricted to either (1) young adults under age 30 prior to the start of the plan year or (2) individuals who have been deemed exempt from the individual mandate. [Refer to ACA §1302(e)(2)].

i See last page for a description of metallic level and eligibility for each plan.

ii Eligibility for catastrophic plans are restricted to either (1) young adults under age 30 prior to the start of the plan year or (2)individuals who have been deemed exempt from the individual mandate [refer to ACA §1302(e)(2)].