



Product Information

	Member selects Primary Care Physician (PCP)	Referrals required for Specialty Care	Member has open access to Specialty Care providers. <i>*Specialists may serve as a PCP if the specialist and member eligibility is met.</i>	Member has open access to Behavioral/Mental Health	Member has Out-of-Network Benefits
COMMERCIAL					
Fully Funded HMO	YES	YES. PCP must coordinate all specialty care and document all referrals in the patient's chart. Prior authorization must be submitted to The Health Plan for any out-of-network care.	Yes, for in-network specialist physician.	YES. Refer to Directory for participating providers.	NO
Fully Insured POS	YES	YES. PCP must coordinate all specialty care and document all referrals in the patient's chart. Prior authorization must be submitted to The Health Plan for any out-of-network care.	Yes, for in-network specialist physician.	YES. Refer to Directory for participating providers.	YES
Fully Insured PPO	NO	NO. Member may self-refer to any network specialist to receive in-network benefits.	Yes, for in-network specialist physician.	YES. Refer to Directory for participating providers.	YES
MEDICARE ADVANTAGE					
SecureCare HMO	YES	YES. PCP must coordinate all specialty care and document all referrals in the patient's chart. Prior authorization must be submitted to The Health Plan for any out-of-network care.	Yes, for in-network specialist physician.	YES. Refer to Directory for participating providers.	NO
SecureChoice PPO	NO	NO	Yes, for in-network specialist physician.	YES. Refer to Directory for participating providers.	YES
SecureCare D-SNP	YES	YES. PCP must coordinate all specialty care and document all referrals in the patient's chart. Prior authorization must be submitted to The Health Plan for any out-of-network care.	Yes, for in-network specialist physician.	YES. Refer to Directory for participating providers.	NO
MOUNTAIN HEALTH TRUST					
WV Medicaid Expansion/SSI/WVCHIP	YES	YES	Yes, for in-network specialist physician.	YES. Refer to Directory for participating providers.	NO
SELF-FUNDED/ASO *CONTACT THE HEALTH PLAN TO CONFIRM BENEFITS					
Self-Funded/ASO HMO, PPO, POS	PPO: NO HMO, POS: YES	PPO: NO. HMO, POS: YES. Services requiring referral/prior authorization may differ by plan sponsor.	Determined by specific employer benefits.	Determined by specific employer benefits.	Determined by specific employer benefits.
To verify eligibility or benefit information, visit the provider portal at myplan.healthplan.org .					



West Virginia Medicaid Mountain Health Trust

Medicaid is a federal and state government program that helps with medical costs for individuals with limited incomes and resources. Mountain Health Trust (MHT) is a West Virginia managed care program established by the Bureau for Medical Services (BMS). BMS is contracted with THP for the provision of Medicaid medically necessary services for eligible West Virginia residents.

Within the MHT product are four (4) plans:

1. **Temporary Assistance for Needy Families (TANF)** covers eligible individuals under age 19, adults that are a parent/caretaker with low or no income, and most pregnant women.
2. Under the Affordable Care Act, **Expansion** covers eligible individuals aged 19-64 with incomes up to 138% of the federal poverty level.
3. **Supplemental Security Income (SSI)** covers eligible individuals that are recipients of SSI payments and those that are aged, blind, or disabled.
4. **Children's Health Insurance Program (CHIP)** covers eligible individuals under age 19 that have incomes greater than 138% of the federal poverty level but less than 300% and pregnant women aged 19 and up that are between 185% and 300% of the federal poverty level

Commercial Fully Insured

Commercial plans are fully insured by a Health Insuring Corporation (HIC). Employers contract with THP to provide a health insurance benefit plan and pre-pay a monthly premium to cover eligible employees.

Individuals employed through the state of West Virginia covered by the Public Employees Insurance Agency (PEIA) plan are included in the Commercial product.

Within the Commercial product are three (3) plan types:

1. **Health Maintenance Organization (HMO)**
 - **West Virginia Public Employees Insurance Agency (PEIA)**
2. **Point of Service (POS)**
3. **Preferred Provider Organization (PPO)**



Medicare Advantage

Medicare is the federal health insurance program for individuals 65 years of age or older and under age 65 with certain disabilities. Medicare Advantage is a Centers for Medicare and Medicaid Services (CMS) approved product that provides eligible individuals additional benefits to original Medicare. THP is contracted with CMS to provide healthcare services to individuals eligible for Medicare and that choose THP as their Medicare Advantage Managed Care Organization (MCO).

Within the Medicare Advantage product are three plans:

1. **SecureCare Health Maintenance Organization (HMO)** covers eligible individuals for all Part A and B services. Cost sharing and provider access differ from original Medicare.
2. **SecureCare Health Maintenance Organization (HMO) Special Needs Plan (SNP)** covers Medicare beneficiaries who are also eligible for Medicaid.
3. **SecureChoice Preferred Provider Organization (PPO)** covers eligible individuals for all Part A and B services. Cost sharing and provider access differ from original Medicare.

Self-Funded/Administrative Services Only

THP contracts with employer groups to offer Administrative Services Only (ASO) that include administering the employers benefit plan, processing of claims, clinical management, etc. Employer group participation includes predictable, fixed monthly payments with composite rating.

The employer groups cover the employees' medical costs that are enrolled in the Self-Funded plan and THP operates as the Third-Party Administrator (TPA) to manage the plan.

For small employers, the Multiple Employer Welfare Agreement (MEWA) includes the Chamber Benefits Plan for eligible employers domiciled in West Virginia. For eligible employers domiciled in Missouri, MEWA includes the Missouri Chamber Federation Benefit Plan.

*To learn about benefits and more information for each plan above, visit the applicable chapter:

Chapter 4 – Commercial Fully Funded and Self-Funded/Administrative Services Only

Chapter 5 – Mountain Health Trust

Chapter 6 – Medicare Advantage