



State, city, and county retirees

We're here with you

October 2025



An Independent Licensee of the Blue Cross and Blue Shield Association

2026 Open Enrollment

New for 2026

EUTF Retiree Plan

- **Medical Nutrition Therapy.** Covered at 80% for in-and out-of-network after the deductible.

EUTF and HSTA VB Retiree Plans

- **Diabetes Prevention Program (DPP).** One-hundred percent in-network coverage that's not subject to the deductible. Participating programs include the KTA Puainako Pharmacy, National Kidney Foundation of Hawaii, and The Queen's Medical Center - West Oahu. Virtual classes are conducted by a lifestyle coach certified by the Centers for Disease Control and Prevention. The program consists of weekly sessions for the first four months followed by biweekly sessions (22 sessions total). Limited to once per lifetime and must be completed in 24 months.
- **Chlamydia and gonorrhea screenings.** Added coverage for men at the same benefit level as women. Limited to once per calendar year.
- **Skin cancer screening.** Added an annual preventive skin cancer screening benefit limited to one per calendar year covered at 100% in-network coverage (not subject to the deductible) and out-of-network at the same benefit level as screening services.
- **Orthodontic services for orofacial anomalies.** The maximum benefit amount per treatment phase will automatically be adjusted according to the amount set by state law and the insurance commissioner. This will be published and updated annually on hmsa.com/orofacial-anomalies.
- **Physical, occupational, and speech therapy.** Removed the developmental delay exclusion
- **Cardiac rehabilitation.** Added coverage at the same benefit level as physical and occupational therapy.
- **Out-of-network immunizations.** Removed the member cost share (up to the eligible charge) and the application of the deductible.



Aloha,

HMSA is here to support you on your health and well-being journey.

This year's open enrollment is Oct. 16-31. If you're an HMSA member and are happy with your plan, you don't need to do anything. Your plan will automatically renew for 2026. If you'd like to become an HMSA member, now's the time to switch.

With HMSA, you have continued access to quality, reliable care. You can count on:

- Your choice of doctors and specialists. Our network includes more than 10,000 doctors, specialists, and other health care providers dedicated to quality care.
- Access to Hawaii's top-rated hospitals and clinics. See page 2 to learn more about our growing network.
- Convenient after-hours care. Need care but don't need the emergency room? You can get care online, at an urgent care clinic, or at a MinuteClinic® in select Longs Drugs stores on Oahu. To learn more about your after-hours care options, see pages 4-5.
- Access to care in more places. If you need to travel to another island for medical treatment, you may be eligible for financial assistance. Learn more on page 6.
- Benefits that travel with you. Go to doctors and hospitals on the Mainland and around the world with Blue Cross Blue Shield Global® Core. See page 6 for details.
- Support for your best health and well-being. Our programs and services can help you reach your health goals at every stage of life. For details, see pages 16-17.
- Savings on health-related products and services like online fitness classes, massage therapy, gym memberships, athletic apparel, and more.

Please read this guide to learn more about the benefits and services available to you. If you have questions, we're here to help. You can call us or visit an HMSA Center. Our contact information is on the back of this brochure. Or go online to the HMSA EUTF portal at **hmsa.com/eutf**.

Thank you for learning more about HMSA. It's our privilege to care for our families, friends, and neighbors. HMSA is here with you. For the good times. For the tough times. For lifetimes.

Mahalo,

Mark M. Mugiishi, M.D., F.A.C.S.
President and Chief Executive Officer

Top-rated hospitals and clinics



With HMSA, you have access to top-rated hospitals. We're part of the Blue Cross Blue Shield Association, which recognizes Hawaii hospitals for expertise in delivering high-quality, cost-effective specialty care.

Blue Distinction Centers are hospitals recognized for their expertise in delivering specialty care. Blue Distinction Centers+, which are indicated with a +, are hospitals recognized for their expertise and efficiency in delivering specialty care.

- **Bariatric surgery**

Adventist Health Castle (adventisthealth.org)

The Queen's Medical Center (queens.org)

- **Knee and hip surgery**

Adventist Health Castle+ (adventisthealth.org)

Straub Benioff Medical Center

(hawaiiipacifichealth.org/straub)

Wilcox Medical Center+ (wilcoxhealth.org)

- **Maternity care**

Wilcox Medical Center+ (wilcoxhealth.org)

- **Spine surgery**

Adventist Health Castle (adventisthealth.org)

Kuakini Medical Center+ (kuakini.org)

Pali Momi Medical Center+ (palimomi.org)

The Queen's Medical Center+ (queens.org)

Straub Benioff Medical Center

(hawaiiipacifichealth.org/straub)

- **Substance use treatment and recovery**

The Queen's Medical Center (queens.org)

We're proud to work with these health care providers to offer you quality care:



**HAWAII
PACIFIC
HEALTH**

CREATING A HEALTHIER HAWAII

KAPI'OLANI
PALI MOMI
STRAUB BENIOFF
WILCOX



**THE QUEEN'S
HEALTH SYSTEMS**

It's easy to get the care you need

The choice is yours

With HMSA, you can choose your primary care provider (PCP), the doctor at the center of your health care team. You can see your PCP for general and preventive care needs, including health concerns and questions.

If you're happy with your PCP, you don't have to do anything differently. You can continue to see the doctor you know, trust, and rely on in times of need.

Want to choose or change your PCP? Use Find a Doctor at hmsa.com/eutf to search for a doctor by name, location, or specialty. Just remember to choose your plan before starting your search.

You can also use Find a Doctor to search for other health care providers in HMSA's network. Or call us at **(808) 948-6499** or **1 (800) 776-4672** and we can help you find a doctor based on your location and needs.

How to use HMSA's Online Care

With HMSA's Online Care®, you have access to health care providers 24 hours a day, seven days a week from anywhere in Hawaii through video chat. Online Care providers can help with:

- Common conditions like headaches, colds, or the flu.
- Sudden or acute conditions like bronchitis or ear and sinus infections.
- Improving your emotional health and well-being.

This service is available to EUTF and HSTA VB retirees for a \$0 copayment. Online Care is available for most Apple and Android devices and tablets. To sign up, search for HMSA Online Care in the App Store or Google Play, scan the QR code or sign up at hmsaonlinecare.com.

When you register for Online Care, have your HMSA membership card handy – you'll need your HMSA subscriber ID number. Once you're registered, it'll be easy to use Online Care when you need it.



A Guide to Your HMSA Care Options

Need to see a doctor?

With HMSA, you have many options. Make the right choice to save time and money and get the right care when you need it.



Primary care provider

See your primary care provider (PCP) for routine and common medical issues like fever, minor symptoms of the flu or a cold, managing a chronic condition, medication refills, or general care.



HMSA's Online Care®

Connect with doctors and specialists online from anywhere in Hawaii, 24 hours a day, seven days a week. There's no copayment for Online Care visits.

Use Online Care when your PCP isn't available.
Go to hmsaonlinecare.com.



Urgent care providers

Go to an urgent care provider when you need care in person sooner than you can see your doctor.

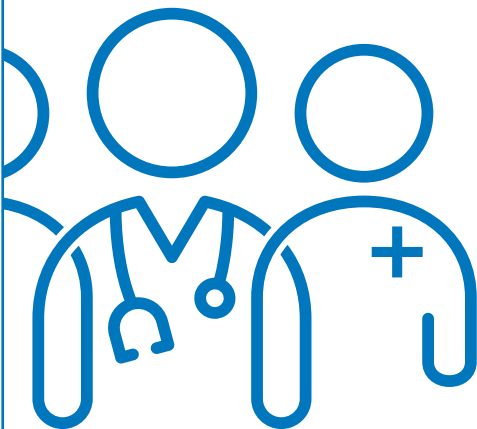
For example, you need stitches or have a high fever or sprained ankle.



Emergency room

Go to the emergency room when you have life-threatening symptoms.

For example, you have difficulty breathing or chest pain.



More tips

- ✓ Use the directory on the next page to find an urgent care provider near you. Services vary at each location, so call ahead to make sure they can provide the services you need.
- ✓ Register for Online Care now so it's easy to log in when you need it. Go to hmsaonlinecare.com to register and download the app on your smartphone.
- ✓ Follow up with your PCP after an urgent care or Online Care visit.

Participating Urgent Care Clinics

Hawaii Island

Transformation Health Network

75-5595 Kuakini Highway, Suite 513
Kailua-Kona
Ph. (808) 365-2297
M–F: 8 a.m.–6 p.m.

Hilo Urgent Care

670 Kekuanaoa St., Hilo
Ph. (808) 969-3051
M–F: 9 a.m.–7 p.m.
Sat–Sun: 8:30 a.m.–4:30 p.m.

Keaau Urgent Care

16-590 Old Volcano Road
Keaau
Ph. (808) 966-7942
M–F: 9 a.m.–7 p.m.
Sat–Sun: 8:30 a.m.–4:30 p.m.

Kohala Coast Urgent Care

62-100 Kaunaoa Drive
Kamuela
Ph. (808) 880-3321
M–F: 9 a.m.–5 p.m.
Sat: 9 a.m.–2 p.m.

Waimea Urgent Care

65-1230 Mamalahoa Highway
Suite A10, Kamuela
Ph. (808) 885-0660
M–F: 8:30 a.m.–6:30 p.m.
Sat–Sun: 8:30 a.m.–4:30 p.m.

Kauai

Kauai Urgent Care

4484 Pahee St., Lihue
Ph. (808) 245-1532
M–F: 8 a.m.–7 p.m.
Sat–Sun: 8 a.m.–4 p.m.

Makana North Shore Urgent Care

4488 Hanalei Plantation Road
Princeville
Ph. (808) 320-7300
M–F: 8 a.m.–6 p.m.
Sat: 8 a.m.–4 p.m.

Urgent Care at Poipu

2829 Ala Kalani Kaumaka St.
Suite B-201, Koloa
Ph. (808) 742-0999
M–F: 8:30 a.m.–7 p.m.
Sat–Sun: 8 a.m.–4:30 p.m.

Maui

All Access Ortho Maui

30 Kupaoa St., Suite A203, Pukalani
Ph. (808) 727-8410
M–F: 10 a.m.–6:30 p.m.
Sat: 9 a.m.–5:30 p.m.

Doctors On Call

3350 Lower Honoapiilani Road
Suite 211, Lahaina
Ph. (808) 667-7676
M–Sat: 8 a.m.–4 p.m.

Doctors On Call

The Shops at Wailea, B34 Level 1
3750 Wailea Alanui Drive, Wailea
Ph. (808) 875-7676
M–Sat: 8 a.m.–4 p.m.

Kihei-Wailea Medical Center

221 Piikea Ave., Suite A, Kihei
Ph. (808) 874-8100
M–F: 8 a.m.–6 p.m.
Sat: 8 a.m.–5 p.m.
Sun: 8 a.m.–1 p.m.

Minit Medical Urgent Care Clinic

270 Dairy Road, Suite 239, Kahului
Ph. (808) 667-6161
M–W: 8 a.m.–9 p.m.
Th–F: 8 a.m.–7 p.m.
Sat: 8 a.m.–6 p.m. Sun: 8 a.m.–4 p.m.

Minit Medical Urgent Care Clinic

2580 Kekaa Drive, Suite 111, Lahaina
Ph. (808) 667-6161
M–Sat: 8 a.m.–6 p.m.
Sun: 8 a.m.–4 p.m.

Minit Medical Urgent Care Clinic

1325 S. Kihei Road, Suite 103
Kihei Ph. (808) 667-6161
M–Sat: 8 a.m.–6 p.m.
Sun: 8 a.m.–4 p.m.

The Maui Medical Group Inc.

2180 Main St., Wailuku
Ph. (808) 249-8080
M–F: 8 a.m.–8 p.m.
Sat–Sun: 8 a.m.–4 p.m.

The Maui Medical Group Inc.

5095 Napili Hau St., Suite 114
Lahaina Ph. (808) 249-8080
Temporary hours M–F: 8 a.m.–5 p.m.

Molokai

Molokai Family Health Center

39 Ala Malama Ave.
Kaunakakai
Ph. (808) 553-5353
M–F: 9 a.m.–5 p.m.
Sat: 9 a.m.–2 p.m.

Oahu

Adventist Health Castle Kailua Urgent Care

660 Kailua Road, Kailua
Ph. (808) 263-2273
M–F: 7 a.m.–7 p.m.
Sat–Sun: 8 a.m.–6 p.m.

Adventist Health Castle Urgent Care Kapolei

91-0710 Farrington Highway
Suite A100, Kapolei
Ph. (808) 521-2273
M–Sun: 7 a.m.–7 p.m.

Adventist Health Castle Urgent Care Pearl City

1245 Kuala St., Suite 103, Pearl City
Ph. (808) 456-2273
M–F: 7 a.m.–7 p.m.
Sat–Sun: 8 a.m.–6 p.m.

All Access Ortho

1401 S. Beretania St., Suite 102
Honolulu
Ph. (808) 356-5699
M–F: 8 a.m.–8 p.m.
Sat–Sun: 9 a.m.–5 p.m.

All Access Ortho

4850 Kapolei Parkway, Bldg. F
Kapolei
Ph. (808) 356-5699
M–F: 8 a.m.–8 p.m.
Sat–Sun: 9 a.m.–5 p.m.

All Access Ortho

95-1830 Meheula Parkway
Suites C10 and 11, Mililani
Ph. (808) 356-5699
M–F: 8 a.m.–8 p.m.
Sat–Sun: 9 a.m.–5 p.m.

Braun Urgent Care Kailua

130 Kailua Road, Suite 111, Kailua
Ph. (808) 261-4411
M–F: 8 a.m.–8 p.m.
Sat–Sun: 8 a.m.–5 p.m.

Doctors of Waikiki

120 Kaiulani Ave., Wing 10 and 11
Honolulu
Ph. (808) 922-2112
Daily: 8 a.m.–10 p.m.

Kalihi Kai Urgent Care

2070 N. King St., Suite A1, Honolulu
Ph. (808) 841-2273
M–F: 8 a.m.–4 p.m.
Sat–Sun: 9 a.m.–1 p.m.

Kunia Urgent Care

94-673 Kupuohi St., Suite C201
Waipahu
Ph. (808) 983-1671
Daily: 8:30 a.m.–7 p.m.

NIU Health

1441 Pali Highway, Honolulu
Ph. (808) 888-4800
Daily: 8 a.m.–6 p.m.

Queen's Island Urgent Care Ewa Kapolei

91-6390 Kapolei Parkway, Ewa Beach
Ph. (808) 735-0007
Daily: 8 a.m.–8 p.m.

Queen's Island Urgent Care Kahala

1215 Hunakai St., Honolulu
Ph. (808) 735-0007
Daily: 8 a.m.–8 p.m.

Queen's Island Urgent Care Kakaako

400 Keawe St., Suite 100, Honolulu
Ph. (808) 735-0007
Daily: 8 a.m.–8 p.m.

Queen's Island Urgent Care Kapahulu

449 Kapahulu Ave., Suite 104
Honolulu
Ph. (808) 735-0007
Daily: 8 a.m.–8 p.m.

Queen's Island Urgent Care Pearl Kai

98-199 Kamehameha Highway
Bldg. F, Aiea
Ph. (808) 735-0007
Daily: 8 a.m.–8 p.m.

Straub Benioff Kapolei Clinic & Urgent Care

91-5431 Kapolei Parkway, Suite 1706
Kapolei
Ph. (808) 426-9300
Daily: 10 a.m.–8 p.m.

Straub Benioff Doctors On Call

2255 Kalakaua Ave., Manor Wing
Shop No. 1, Honolulu
Ph. (808) 971-6000
Daily: 10 a.m.–8 p.m.

Straub Benioff Kahala Clinic & Urgent Care

4210 Waiialae Ave., Suite 501
Honolulu
Ph. (808) 462-5300
Daily: 10 a.m.–8 p.m.

Straub Benioff Ward Village Clinic & Urgent Care

1001 Queen St., Suite 102, Honolulu
Ph. (808) 462-5200
Daily: 10 a.m.–8 p.m.

Windward Urgent Care

46-001 Kamehameha Highway
Suite 107, Kaneohe
Ph. (808) 234-1094
Daily: 8 a.m.–7 p.m.

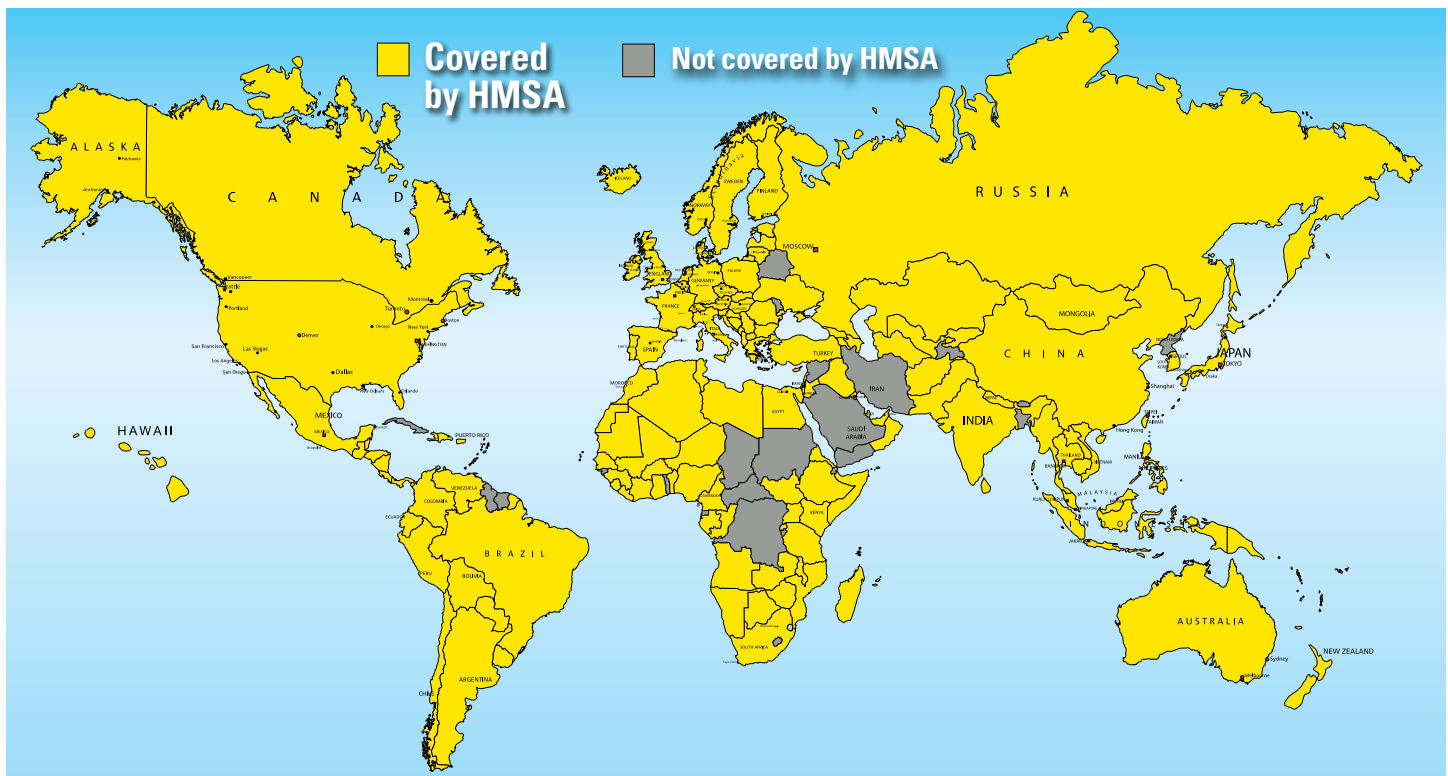
Hours and locations may change.
Please call the clinic for the latest
information and urgent care
availability.

For a current list of participating
urgent care providers, visit
hmsa.com/urgentcare.

These options aren't a substitute for
emergency care. If you experience life-
threatening conditions such as a stroke
or difficulty breathing, call 911 or go to
the emergency room immediately.

Most urgent care clinics are closed
on Thanksgiving Day, Christmas Day,
and New Year's Day. Services vary by
location. Call the clinic to ask about
specific services.

Get care when you travel

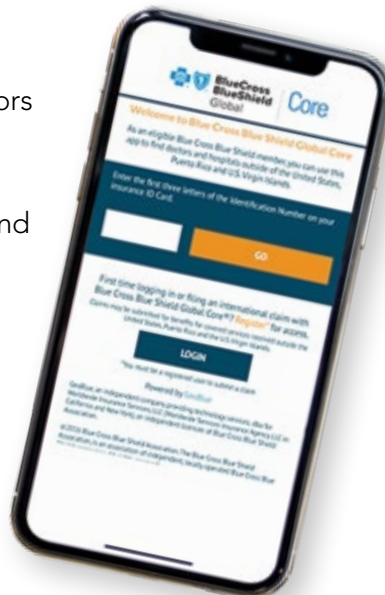


How it works

HMSA is part of the Blue Cross Blue Shield network, giving you access to 1.7 million doctors and hospitals nationwide and in 190 countries and territories worldwide.

Looking for a doctor or hospital on the Mainland or while traveling abroad? Go to **bcbs.com**.

Traveling internationally? Download the Blue Cross Blue Shield Global® mobile app for Apple and Android devices or scan the QR code. Use the app to search for providers when you travel. To learn more, go to **bcbsglobalcore.com**.



Be prepared

- Before you go, make sure you have your current HMSA membership card with you. Your card will help providers file your claims.
- You can also call **1 (800) 810-BLUE (2583)** for the names of participating doctors and hospitals in the area you'll be visiting. The number is also on the back of your HMSA membership card.



Care Access Assistance Program

If you need to travel to another island for medical treatment, you may be eligible for financial assistance if your care isn't available from a participating provider on your home island or you can't get an appointment soon enough.

Call us at
1 (844) 357-0726
to learn more about this program for EUTF retiree PPO plan members.

You can use the EUTF portal to:

- Search for a doctor.
- Learn more about well-being programs available to you and your family.
- View helpful videos for EUTF and HSTA VB members.
- Find health and fitness discounts with HMSA365, the Active&Fit Direct™ program, and the ChooseHealthy® program.
- Find information and resources related to frequently asked questions.



My Account

As an HMSA member, you can view all your health plan information and member benefits online on My Account at **hmsa.com/eutf**.

Use My Account to:

- View your claims.
- See where you are with reaching your annual maximum out-of-pocket and deductible, if applicable.
- Download your plan's *Guide to Benefits* for details about your HMSA plan.
- Print or request another HMSA membership card.
- Submit an inquiry or request through the secure AskHMSA web form.

Active&Fit Direct and the Active&Fit Direct logos are trademarks of American Specialty Health and used with permission herein. Additional terms and conditions apply. The Active&Fit Direct program is provided by American Specialty Health Fitness Inc., a subsidiary of American Specialty Health Inc. American Specialty Health is an independent company providing chiropractic, acupuncture, fitness programs, and/or massage therapy services on behalf of HMSA.

The ChooseHealthy program is provided by American Specialty Health Group Inc. and ASH Technologies Inc. (dba ASH Technologies of Delaware Inc. in the state of Pennsylvania); all are subsidiaries of American Specialty Health Incorporated (ASH). The ChooseHealthy program is an independent specialty health organization that provides discounts on health, fitness, and wellness products to HMSA members.

Your plan benefits

EUTF HMSA 90/10 PPO Plan Summary

Annual Deductible	\$100 per person \$300 per family
Annual Copayment Maximum	\$2,500 per person \$7,500 per family
Services by participating providers	MEMBER PAYS
Office Visits	10%*
Advance Care Planning	\$0*
Physical Exams	\$0*
Outpatient Surgery	10%*
Outpatient Diagnostic Testing, Lab, and X-ray Services	20%*
Emergency Room ¹	10%*
Ambulance (air and ground)	20%
Hospital Stay	10%*
Hearing Aid One per ear every 60 months	20%
Inpatient Mental Health	10%*
Outpatient Mental Health	10%*
Preventive Screenings	20%*
Injections	20%
Immunizations	\$0

*Deductible doesn't apply.

¹ Physician visits are covered separately from facility services.

HSTA VB HMSA 90/10 PPO Plan Summary

(A plan for HSTA members who enrolled before 3/1/2006.)

Annual Deductible	None (when seeing a participating provider)
Annual Copayment Maximum	\$2,000 per person \$6,000 per family
Lifetime Maximum	\$2,000,000
Services by participating providers	MEMBER PAYS
Office Visits	10%
Advance Care Planning	\$0
Physical Exams	Plan pays up to: <ul style="list-style-type: none"> • \$90 ages 7-12 • \$115 ages 13-18 • \$180 ages 19-39 • \$245 ages 40+
Outpatient Surgery	10%
Outpatient Diagnostic Testing, Lab, and X-ray Services	10%
Emergency Room ¹	10%
Ambulance (air and ground)	10%
Hospital Stay	10%
Hearing Aid One per ear every 60 months	10%
Inpatient Mental Health	10%
Outpatient Mental Health	10%
Chiropractic Treatments	\$12 per visit (limit 20 per year)
Preventive Screenings	10%
Injections	10%
Immunizations	\$0

This comparison is a condensed explanation of in-network plan benefits. Certain limitations, restrictions, and exclusions may apply. Please refer to the plan *Guide to Benefits* or certificate, which may be obtained from your employer, for complete information on benefits and provisions. If there's a discrepancy between this comparison and the *Guide to Benefits* or certificate, the *Guide to Benefits* or certificate will take precedence. Cost shares shown are for services received from network providers. Cost for services received from out-of-network providers may be higher.

Coordination of Medicare benefits

For retirees with Medicare Part A and Part B who are enrolled in the EUTF HMSA 90/10 PPO Plan, coordination of benefits is available when services are received from an HMSA participating provider who also accepts Medicare assignments.

To help with the coordination, show your providers your Medicare and EUTF plan membership cards whenever you receive services.

Here are examples of how EUTF's medical plans coordinate with Medicare.

Example 1: Medicare/HMSA Coordination with Medicare Part B Annual Deductible

Claim #1: Member received services from an HMSA participating provider who accepts Medicare assignment. There will be no payment by Medicare as Medicare will apply \$257 toward the annual Medicare Part B deductible*. HMSA will process the office visit claim at 90% of eligible charge and the outpatient diagnostic test claim at 80% of eligible charge. The member will owe the 10% balance of the office visit claim and the 20% balance of the outpatient diagnostic claim plus any noncovered charges such as taxes.

Claim	Service	Date of Service	Charge	Medicare Part B Payment	HMSA 90/10 PPO Plan Payment	Member Owes
#1	Office Visit	01/03/2026	\$110	\$0	\$99	\$11
	DiagnosticTest (outpatient)	01/03/2026	\$147	\$0	\$117.60	\$29.40
			\$257* deductible met	\$0	\$216.60	\$40.40
#2	Office Visit	02/03/2026	\$110	\$88	\$22	\$0

Claim #2: The annual Medicare Part B deductible was met with the previous claim (claim #1), therefore Medicare will apply plan benefits and HMSA will coordinate payment of the remaining balance of eligible charges. Although member owes a zero balance in eligible charges, the member may be responsible for any noncovered charges such as taxes.

Example 2: Medicare/HMSA Coordination with Medicare Part A Hospital Deductible

Claim #3: Member received services from an HMSA participating facility that accepts Medicare assignment. Member has not had any previous inpatient visits in the last 60 days. Medicare Part A will process 100% of facility charges less the Medicare Part A deductible of \$1,676*. HMSA pays 90% of the hospital charge up to \$13,500 which covers the Part A deductible. Although member owes a zero balance in eligible charges, the member may be responsible for any noncovered charges such as taxes.

Claim	Service	Date of Service	Charge	Medicare Part A	HMSA 90/10 PPO Plan Payment	Member Owes
#3	Inpatient Hospital Room & Board	02/20/2026	\$15,000	\$13,234	\$1,676	\$0

Example 3: Medicare/HMSA Coordination with HMSA Annual Deductible

Claim #4: Member received services from an HMSA participating provider who accepts Medicare assignment. The annual Medicare Part B deductible was met with the previous claim (claim #1), therefore Medicare will apply plan benefits. Durable medical equipment benefits under the EUTF HMSA 90/10 PPO plan is subject to a \$100 annual deductible* and therefore \$100 is applied to the HMSA deductible. Member owes \$100 in addition to any noncovered charges such as taxes.

Claim	Service	Date of Service	Charge	Medicare Part B Payment	HMSA 90/10 PPO Plan Payment	Member Owes
#4	Prosthesis	02/20/2026	\$500	\$400	\$0*	\$100

*Note: Used for illustrative purposes only since Medicare deductibles and benefits are subject to change.



An Independent Licensee of the Blue Cross and Blue Shield Association

Coordination of Benefits Form

If you and your dependents are covered under multiple health plans, this form will help us process your claims quickly and accurately. You can also fill this form out by logging into **members.hmsa.com**.

If you, your spouse, and your dependents are only covered by your HMSA plan, complete section 1.

If you, your spouse, or any of your dependents are covered by your HMSA plan and: Complete sections:

- ☐ Another health insurance plan..... 1 and 2
- ☐ Medicare..... 1 and 3
- ☐ Another health insurance plan and Medicare 1, 2, and 3

PLEASE PRINT

Section 1 – HMSA Subscriber Information

HMSA subscriber's name: _____ Birth date: _____

Employment status: ☐ Active ☐ Retired

Retirement date (if applicable): _____

HMSA subscriber ID: _____ Social Security number: _____ - _____ - _____

Phone number: (_____) _____

I certify that the information I've provided on this form is true and correct. I agree to inform HMSA of any changes.

HMSA subscriber's signature: _____ Date: _____

Section 2 – Other Coverage Information

Policyholder's name: _____

Sex: ☐ Male ☐ Female

Birth date: _____ Social Security number: _____ - _____ - _____

Relationship to you: _____

Other health plan's name: _____

Policyholder identification number: _____

Other health plan's address: _____

Phone number: (_____) _____

Employment status: ☐ Active ☐ Retired

Employer's name: _____

Retirement date (if applicable): _____

Type of coverage	<input type="checkbox"/> Medical	<input type="checkbox"/> Drug	<input type="checkbox"/> Dental	<input type="checkbox"/> Vision
Effective date				
Cancellation date				

Please list any other dependents who are on this other plan.

1. First and last names: _____
Relationship to you: _____
2. First and last names: _____
Relationship to you: _____
3. First and last names: _____
Relationship to you: _____
4. First and last names: _____
Relationship to you: _____
5. First and last names: _____
Relationship to you: _____
6. First and last names: _____
Relationship to you: _____
7. First and last names: _____
Relationship to you: _____
8. First and last names: _____
Relationship to you: _____

Section 3 – Medicare Coverage Information

Medicare beneficiary's name: _____

Social Security number: ____ - ____ - ____

Medicare number: _____

Type of coverage	Effective date
Part A (Hospital)	
Part B (Medical)	
Part D (Drug)	

Medicare eligibility due to:

- ☐ Age
☐ Disability
☐ End-stage renal disease
- Initial dialysis

Date: _____

Medicare beneficiary's name: _____

Social Security number: ____ - ____ - ____

Medicare number: _____

Type of coverage	Effective date
Part A (Hospital)	
Part B (Medical)	
Part D (Drug)	

Medicare eligibility due to:

- ☐ Age
☐ Disability
☐ End-stage renal disease
- Initial dialysis

Date: _____

Please return your completed Coordination of Benefits Form to:

HMSA
MS Primacy
P.O. Box 860
Honolulu, HI 96808-0860

Preventive care services

Preventive care is the best way to stay healthy. Many preventive care services are available at no cost to HMSA members. Check your health plan benefits to be sure.

On this form, "Gender" refers to the gender HMSA has on file for you at this time. Transgender and nonbinary members with questions can call the number on the back of their HMSA membership card for more information.

Updated Aug. 1, 2024.

Preventive visits for adults

Adults: Age 22 and older except as noted			
Preventive visit	Frequency	Gender	
Annual Preventive Health Evaluation May include: • Height, weight, blood pressure, and body mass index measurement • Screening for anxiety, depression, unhealthy alcohol use (18 and older), unhealthy drug use (18 and older), tobacco use, and interpersonal and domestic violence	Once a year Consult your doctor for screenings	M	F
Well-woman exam	Once a year		F

Screening and counseling for adults			
Screening and counseling	Frequency	Gender	
Abdominal aortic aneurysm screening	Ages 65 to 75 who have never smoked: One-time screening	M	
BRCA screening and genetic counseling	Any woman with increased risk from family history: Once per lifetime		F
Blood pressure screening	Age 18 and older: Once every 12 months	M	F
Breast cancer screening	Age 40 and older: Once every 12 months		F
Colorectal cancer screening • Stool-based tests • Sigmoidoscopy • Colonoscopy	Ages 45 to 75 at average risk for colorectal cancer	M	F
Cervical cancer screening • Pap smear	Ages 21 to 65: Every three years		F
Counseling: healthy diet, physical activity, obesity, fall prevention, skin cancer and safety, sexually transmitted infections, contraceptive methods, tobacco use, intimate partner violence	Consult your doctor	M	F
Cholesterol screening	Once every 12 months	M	F
Diabetes screening	Ages 35 to 70: Once every 12 months	M	F
Hepatitis B screening	Once a year	M	F
Hepatitis C screening	Ages 18 to 79: Once a year	M	F
Human papillomavirus (HPV) screening	Age 30 and older: Once every three years		F
Lung cancer screening	Ages 50 to 80 with 20 pack-year* history. Once every 12 months for current smokers or former smokers who quit within past 15 years.	M	F
Obesity screening	Ages 40 to 60 with normal or overweight body mass index		F
Osteoporosis screening	Age 65 and older, younger if at increased risk		F
Sexually transmitted infection screenings • Chlamydia • Gonorrhea • HIV • Syphilis	Once every 12 months	M	F
Tuberculosis screening	Up to two tests a year	M	F

* Pack-year is calculated by multiplying the number of cigarettes smoked per day by the number of years a person has smoked. For example, a 30 pack-year history is a pack a day for 30 years or two packs a day for 15 years.



Preventive care for pregnant people

Preventive care	Gender	
Anxiety screening		F
Bacteriuria screening		F
Chlamydia screening		F
Comprehensive lactation support and counseling from a physician or midwife during pregnancy and or postpartum. Includes breastfeeding equipment.		F
Counseling for alcohol and tobacco use and depression		F
Gestational diabetes screening		F
Gonorrhea screening		F
Hepatitis B screening and immunization		F
HIV screening		F
Rh (D) incompatibility screening		F
Smoking cessation counseling		F
Syphilis screening		F
Prenatal and postpartum depression screening		F



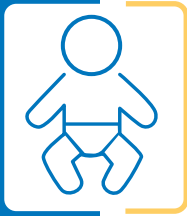
Preventive drugs and treatments for adults

Preventive drugs and treatment		Gender	
Aspirin	Pregnant people at risk for preeclampsia		F
Breast cancer preventive medications	People who are at increased risk for breast cancer without a cancer diagnosis		F
Contraceptive methods	People with reproductive capacity		F
Folic acid supplementation	People planning to or who could become pregnant: Daily supplement containing 0.4 to 0.8 mg folic acid		F
Preexposure prophylaxis	Treatment using preexposure prophylaxis (PrEP) with effective antiretroviral therapy. Consult your doctor for guidelines.	M	F
Statin preventive medication	Ages 40 to 75 years with one or more cardiovascular disease risk factors and have a calculated 10-year risk of a cardiovascular event of 10% or greater	M	F
Tobacco cessation	Adults who use tobacco products	M	F



Immunizations for adults

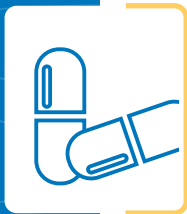
- Chickenpox
- COVID-19
- Flu
- *Haemophilus influenzae* type B (Hib)
- Hepatitis A
- Hepatitis B
- Human papillomavirus (HPV)
- Measles, mumps, rubella (MMR)
- Meningococcal meningitis
- Pneumococcal conjugate
- Pneumonia
- Respiratory syncytial virus (RSV)
- Shingles
- Tetanus, diphtheria, pertussis (Tdap or Td)
- Travel immunizations



Preventive care for children

Birth to 21 Years

- Well-child visits
- Alcohol misuse screening
- Anxiety screening for adolescent girls
- Behavioral/Social/Emotional screening
- Contraceptive methods and counseling for adolescent girls
- Depression and suicide screening
- Dyslipidemia screening
- Hearing loss screening
- Hepatitis B (HBV) screening
- Human immune-deficiency virus (HIV) screening
- Interpersonal and domestic violence screening for adolescent girls
- Lead screening
- Newborn bilirubin screening
- Newborn blood screening
- Newborn screening for metabolic diseases and hemoglobinopathies
- Obesity screening
- Skin cancer screening
- Sudden cardiac arrest and sudden cardiac death screening
- Syphilis, chlamydia, and gonorrhea screening
- Tobacco use and tobacco-caused disease interventions and counseling
- Visual acuity screening



Preventive drugs and treatment for children

- Gonorrhea prophylactic medication
- HIV preexposure prophylactic medication
- Prevention of dental caries, oral fluoride



Immunizations for children

- Chickenpox
- COVID-19
- Flu
- *Haemophilus influenzae* type B (Hib)
- Hepatitis A
- Hepatitis B
- Human papillomavirus (HPV)
- Measles, mumps, rubella (MMR)
- Meningococcal meningitis
- Pneumonia
- Polio
- Respiratory syncytial virus (RSV)
- Rotavirus
- Tetanus, diphtheria, pertussis (Tdap or Td)
- Travel immunizations

This is a reference tool to help you plan your preventive care. It lists items and services that are required under the Affordable Care Act. This list is subject to change as it's periodically reviewed and updated based on recommendations from the United States Preventive Services Task Force, the Health Resources Services Administration, the Centers for Disease Control and Prevention, and HMSA. Some services may require prior authorization. If you have questions about prior authorizations or your health plan benefits, please call the number on the back of your HMSA membership card.

Be well, be strong

With HMSA, there are many ways to take care of your health and well-being. Here are some of the benefits and programs available to you at little or no cost. Go to hmsa.com/eutf to learn more.

This is an overview of HMSA's well-being programs and services. Check your *Guide to Benefits* for your plan's specific benefits.



Lifestyle resources

American Specialty Health Group, Inc. (ASH Group) provides access to 20 medically necessary chiropractic visits per calendar year for HSTA VB retirees when they go to an ASH Group network chiropractic provider.

Health and fitness discounts

- **Active&Fit Direct** offers discounted fitness center memberships and more.
- **ChooseHealthy** gives members discounts on health and fitness products such as apparel, home exercise and gym equipment, smartwatches, and more.
- **HMSA365** is a member savings program for fitness, healthy living, and well-being products and services.

Go to hmsa.com/eutf and click Well-being Resources to learn more.

Island Scene is a health and well-being magazine that we mail to members. Read it online at islandscene.com.



Health resources

Blue Cross Blue Shield Global Core gives members access to care on the Mainland and in many places around the world.

Caregiver resources are offered to members who are caring for a loved one.

MinuteClinic are medical clinics in selected Longs Drugs stores on Oahu.

Find a Doctor on hmsa.com/eutf helps members find a doctor or other health care provider.

Hawai'i Tobacco Quitline supports members who want to quit tobacco for good. Talk to your PCP and call **1 (800) QUIT-NOW (784-8669)** to get started.

Health coaching is available to help members reach their health goals. Call **1 (855) 329-5461** to connect with an HMSA health coach.

HMSA's Online Care connects members to doctors and specialists from a computer, tablet, or smartphone from anywhere in Hawaii.

My Account is an online portal that members can use to view their claims, details about their health plan, and more.

Urgent care clinics are usually open after hours and on the weekends. They're recommended for treating minor illnesses and injuries that aren't an emergency but can't wait until the next day.



Medical Resources

Advance care planning is a process that documents your health care wishes so that your doctors know how you want to be cared for if you can't make decisions for yourself.

Diabetes education provides information and resources for members living with diabetes.

Health and well-being support provides outreach and coaching for members with chronic health conditions.

HMSA Behavioral Health Program provides referrals to providers who can assist members with their emotional health.

HMSA's Care Access Assistance Program provides financial assistance for eligible members who need to travel for specialty care that isn't available or isn't available soon enough on their home island. Mentioned on page 6.

HMSA Supportive Care helps members manage the symptoms and stresses of serious illnesses.



Preventive Care

Annual visits with a PCP

- A **physical exam** is the annual health assessment for all EUTF and HSTA VB retiree plan members.
- See **preventive care services** on page 13 for recommended screenings and tests.

Health education workshops are fun, interactive ways for members to learn about health and well-being topics including:

- Disease awareness.
- General health and fitness.
- Injury prevention.
- Nutrition.
- Stress management.
- Weight awareness.

Diabetes Prevention Program for a healthier lifestyle through CDC-recognized tools and resources to prevent the onset of type 2 diabetes.

GET STARTED

Interested in health management programs or advanced care planning? Talk to your PCP. For health and well-being discounts, go to hmsa.com/eutf and log in to your account.

To learn more, visit hmsa.com/well-being.

Questions? Call us at (808) 948-6499 or 1 (800) 776-4672 or visit us at an HMSA Center.

Quick reference guide for preventive screenings



Blood pressure check

A blood pressure check is recommended for everyone. A blood pressure plan is recommended for people whose most recent blood pressure test was high.

Body mass index

BMI is a number calculated from your weight and height. It's an indicator of body fat and is used to screen for excess weight that may lead to health problems.

Breast cancer screening

A mammogram is recommended for women ages 40 and older, with one baseline screening between ages 35 to 39. The test looks for abnormal cells in breast tissue that could lead to cancer.

Cervical cancer screening

These tests are recommended for women ages 21 to 65. There are two tests. A Pap smear looks for abnormal changes in cells in the cervix that could lead to cancer. An HPV test looks for a virus that causes cervical cancer.

Colorectal cancer screening

A colorectal cancer screening is recommended for people ages 45 to 75. This screening looks for abnormal cells and polyps in the colon and rectum that could lead to cancer. Since there are different tests, your doctor can recommend which test is right for you.

Diabetes checkup

- **Blood sugar test**

High blood sugar can lead to heart attack, stroke, nerve damage, poor circulation, sexual dysfunction, kidney failure, and blindness.

- **Dilated retinal exam**

This exam is different than a regular eye exam. This exam looks for damage to the eye caused by high blood sugar and high blood pressure.

- **Kidney function test**

This test looks at your kidneys' ability to filter blood. It's recommended for people with diabetes ages 18 to 75.

Health care terms

Claim

A request for payment for health care services you've received.

Coinsurance

Your share of the cost for health care services. It's usually a percentage of the amount charged for services. You start paying coinsurance after you've paid the deductible.

Copayment

The dollar amount you pay out of pocket for medical services and products that are benefits of your HMSA plan.

Covered services

These are health care services that HMSA pays for based on your plan benefits. If your HMSA plan covers a service, you may still have to pay a copayment, coinsurance, or deductible.

Deductible

The amount you pay each calendar year before your HMSA plan starts paying for covered services or products.

Drug formulary

A list of generic and brand-name prescription drugs that your drug plan pays for.

Eligible charge

The amount that participating providers agree to charge for covered services or products.

Health maintenance organization

A type of health plan that lets you pick one health center and a PCP in that health center to provide all of your care.

Network

The group of providers that participate in a health plan. As an HMSA member, you have access to the providers in the HMSA network of providers.

Nonparticipating provider

A doctor, hospital, pharmacy, lab, or health center that doesn't have a contract with HMSA to charge set rates. Using these providers almost always costs more than using participating providers.



Out-of-pocket maximum

The most you'll have to pay per calendar year for covered health care services. Once you reach the out-of-pocket maximum, your plan pays 100% of the allowed amount for covered services excluding taxes.

Participating provider

Providers in our network who agree to charge members a set amount for covered services.

Preferred provider organization

A type of health plan that lets you see any provider in HMSA's network.

Primary care provider

Your main doctor who coordinates your care.

Provider

A health care professional such as a physician, nurse, physical therapist, physician's assistant, or lab technician.

NOTES

We're here with you

Call **(808) 948-6499** or **1 (800) 776-4672** Monday through Friday, 7 a.m. to 7 p.m. and Saturday, 9 a.m. to 1 p.m.

Or meet with knowledgeable, experienced health plan advisers. We'll answer questions about your health plan, give you general health and well-being information, and more. Hours of operation may change. Please go to **hmsa.com/contact** before your visit.

HMSA Center in Honolulu

818 Keeaumoku St.

Monday–Friday, 8 a.m.–5 p.m. | Saturday, 9 a.m.–2 p.m.

HMSA Center in Pearl City

Pearl City Gateway | 1132 Kuala St., Suite 400

Monday–Friday, 9 a.m.–6 p.m. | Saturday, 9 a.m.–2 p.m.

HMSA Center in Hilo

Waiakea Center | 303A E. Makaala St.

Monday–Friday, 9 a.m.–6 p.m. | Saturday, 9 a.m.–2 p.m.

HMSA Center in Kahului

Puunene Shopping Center | 70 Hookele St., Suite 1220

Monday–Friday, 8 a.m.–5 p.m. | Saturday, 9 a.m.–1 p.m.

HMSA Center in Lihue

Kuhio Medical Center | 3-3295 Kuhio Highway, Suite 202

Monday–Friday, 8 a.m.–4 p.m.

hmsa.com/eutf

     **@hmsahawaii**



Scan the QR code for more information about HMSA EUTF Retiree health plans.

Together, we improve the lives of our members and the health of Hawaii. Caring for our families, friends, and neighbors is our privilege.

