



HSA



## HEALTH SERVICES ADMINISTRATORS

135 Wood Road, Braintree, MA 02184

Website: [WWW.HSAmembership.com](http://WWW.HSAmembership.com)

Guarantee yourself top-quality coverage from the carrier that is best suited for your needs.

# Available to Members of The Quincy 2000 Collaborative

*Above all, the experts at HSA recognize that you have a unique set of business needs. That's why we'll give you special "one-of-a-kind" treatment and conduct a far-reaching search for the insurance plan that best suits your particular workforce, budget, insurance history, and company profile. Here's a sampling of the plans we work with to satisfy your requirements:*

### TUFTS Health Plan

Covers all of Massachusetts  
Many HMO & PPO options available  
Premium, Value, Value Rx, Basic, Basic Rx,  
Basic \$50 Rx, Advantage PPO

### Neighborhood Health Plan

Covered for most routine, specialty and hospital care. Utilizing a variety of health centers and private physicians

### Health New England

(Western Massachusetts Only)  
7 HMO plans, one POS plan to choose from:  
options to choose from.

### fallon community health plan

Eight HMO plans to Choose from!  
Four Select and Four Direct  
Now Available Fallon PPO

### DELTA DENTAL of Massachusetts

Delta premier

### DELTA DENTAL of Massachusetts <sup>\*(NEW)</sup>

PREFERRED ONE PLAN  
Available for 1+Lives



### Harvard Pilgrim HealthCare

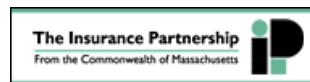
Covers all of Massachusetts  
Many HMO options available  
Premier, Value/Value Rx, Affordable/Affordable Rx  
Best Buy 500/Best Buy 500 Rx, Best Buy 1000/  
Best Buy 1000 Rx, Best Buy2000/Best Buy 2000 Rx



Four HMO plans to choose from!  
POS (for groups of 2 or more)



Covers most of Massachusetts:  
Choice plus plans – several plan



### Insurance Partnership Program

From The Commonwealth of Massachusetts



### Employee Benefits Dental

Available for 1+Lives  
No participation Limits

### Cafeteria Plan Section 125 IRS Code

Putting Tax Dollars  
in YOUR Pocket

**For rates and further detailed information, please call**

**“New England’s Leading Health Care Administrator”**

**Health Services Administrators on our Toll Free number: 877-777- 4414**

If you wish to fax group census please complete form on back/next page.



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**Confidential Quote & Fax Sheet of Eligible Employees**

Company: \_\_\_\_\_ Contact: \_\_\_\_\_ Tel. # \_\_\_\_\_

Address: \_\_\_\_\_ Fax # \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Email: \_\_\_\_\_

Nature of Business / SIC Code: \_\_\_\_\_

**The Quincy 2000 Collaborative**

PLAN CHOICE: \_\_\_Harvard Pilgrim \_\_\_Tufts \_\_\_United Health Care \_\_\_Health New England \_\_\_Neighborhood Health  
 \_\_\_Fallon \_\_\_Aetna Inc. \_\_\_Delta Dental \_\_\_Delta Dental POP \_\_\_Assurant Dental \_\_\_Ins.Part.Pro. \_\_\_Caf:Plan/Sec.125

<u>First name of the employee</u>	<u>Date of Birth</u>	<u>Individual Plan</u>	<u>Family Plan</u>	<u>*Zip Code</u>
1. _____	___/___/___	_____	_____	_____
2. _____	___/___/___	_____	_____	_____
3. _____	___/___/___	_____	_____	_____
4. _____	___/___/___	_____	_____	_____
5. _____	___/___/___	_____	_____	_____
6. _____	___/___/___	_____	_____	_____
7. _____	___/___/___	_____	_____	_____
8. _____	___/___/___	_____	_____	_____
9. _____	___/___/___	_____	_____	_____

The number of full time employees that are covered through their spouse: \_\_\_\_\_

REQUESTED EFFECTIVE DATE: \_\_\_/\_\_\_/\_\_\_

\*Employee home zip code required for Aetna Plans only.