



HEALTH SERVICES ADMINISTRATORS

135 Wood Road, Braintree, MA 02184

Website: WWW.HSAmembership.com

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

Available to Members of The Massachusetts Speech-Language-Hearing Association, Inc.

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 ^{*(NEW)}

PREFERRED ONE PLAN
Available for 1+Lives



Harvard Pilgrim HealthCare

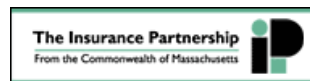
Covers all of Massachusetts
Many HMO options available
Premier, Value/Value Rx, Affordable/Affordable Rx
Best Buy 500/Best Buy 500 Rx, Best Buy 1000/
Best Buy 1000 Rx, Best Buy2000/Best Buy 2000 Rx



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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135 Wood Road, Braintree, MA 02184
Telephone: 877-777-4414 ~ Fax: 781-843-5001
Website: WWW.HSAmembership.com

Confidential Quote & Fax Sheet of Eligible Employees

Company: _____ Contact: _____ Tel. # _____

Address: _____ Fax # _____

City: _____ Zip Code: _____ Email: _____

Nature of Business / SIC Code: _____

The Massachusetts Speech-Language-Hearing Association, Inc.

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.