Active State, city, and county workers

HMSA is here with you

April 2021
Aloha,

Staying healthy is more important than ever. With HMSA, you have access to health care you can count on with:

- **Your choice of doctors and specialists.** Our network includes 7,500 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 see a doctor online, at an urgent care clinic, or at a CVS/minuteclinic® in selected Longs Drugs stores on Oahu.

- **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 8.

- **Benefits that travel with you.** Go to doctors and hospitals on the Mainland and around the world with Blue Cross Blue Shield Global® Core.

- **Support for your best health and well-being.** Our programs and services can help you reach your health goals at every stage of life.

- **Savings on your health and fitness.** Members can save on health-related products and services like online fitness classes, massage therapy, gym memberships, athletic apparel, and more.

This year’s open enrollment is April 1 to 30, 2021. If you have questions, we’re happy to help. Call or visit us at an HMSA Center or office. Our phone numbers, locations, and hours are listed on the back of this guide.

Thank you for choosing HMSA. We look forward to supporting you in your good health.

Sincerely,

Mark M. Mugiishi, M.D., F.A.C.S.
President and Chief Executive Officer
Here’s what’s new with your benefits in 2021

- For EUTF actives, Nutritional Counseling is now Medical Nutrition Therapy (MNT). HSTA VB members now have access to MNT at standard plan benefit rates. This benefit is available to members with an expanded list of conditions as of July 1, 2021.

- For EUTF PPO plans, mammograms from nonparticipating providers will apply to the plan’s deductible as of July 1, 2021.

- For EUTF 75/25 PPO plan members, bariatric surgery will be a plan benefit only if it’s performed by a participating provider as of July 1, 2021.

- EUTF and HSTA VB members will pay their plan’s standard coinsurance for the Ornish Lifestyle Medicine™ program beginning Jan. 1, 2022. To enroll, members will need to meet CMS eligibility requirements.

For more information, check your Guide to Benefits.
Top-rated hospitals and clinics

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

- **Bariatric surgery**
  Adventist Health Castle (adventisthealth.org)

- **Cardiac care**
  Straub Medical Center (straubhealth.org)

- **Knee and hip surgery**
  Adventist Health Castle
  Straub Medical Center
  Wilcox Medical Center (wilcoxhealth.org)

- **Maternity care**
  Kapi'olani Medical Center for Women & Children (kapiolani.org)
  Wilcox Medical Center

- **Spine surgery**
  Adventist Health Castle
  Pali Momi Medical Center (palimomi.org)
  The Queen’s Medical Center (queens.org)
  Straub Medical Center

- **Substance use treatment and recovery**
  The Queen’s Medical Center
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 the Find a Doctor tool on 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 the Find a Doctor tool to search for other health care providers in HMSA’s network.

Get after-hours care

An emergency room visit can be expensive and isn’t necessary for minor illnesses and injuries. But where can you go if your doctor’s office is closed and you need treatment? You can save money and get the care you need with these after-hours options.

• Connect with a doctor on your computer or mobile device from anywhere in Hawaii with HMSA’s Online Care®. Online Care doctors are available 24 hours a day, seven days a week. This benefit is available at no cost for EUTF members. Download Online Care from the App Store or Google Play and register or visit hmsaonlinecare.com.

• See a doctor at the urgent care clinics in our network, which are listed on page 7. To search for urgent care providers, go to hmsa.com/urgentcare.

• See a doctor or nurse practitioner at CVS/minuteclinic, the medical clinic in selected Longs Drugs stores on Oahu. To find a CVS/minuteclinic, use the Find a Doctor tool on hmsa.com/eutf.

American Well® is an independent company providing hosting and software services for HMSA’s Online Care platform on behalf of HMSA.
Save time and money by choosing the right care. Remember that emergency room visits are expensive and aren’t necessary for illnesses or injuries that aren’t life threatening. Use this guide to help you get the right care when you need it.

Primary care provider
See your PCP for routine and preventive care that isn’t an emergency. Your PCP may offer telehealth options such as a video visit or email check-in.

For example, your ankle is swollen but isn’t painful.

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 for the same reasons you’d see your PCP.

Urgent care providers
Go to an urgent care provider if you have a health concern that isn’t an emergency but needs attention sooner than you can see your doctor.

For example, your knee is swollen and painful but you can walk with some assistance.

Emergency room
Go to the emergency room if you need immediate care in a hospital setting and/or you’re experiencing a life-threatening symptom.

For example, you think you’re having a heart attack.

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 HMSA’s 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.
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 at locations. Call the clinic to ask about specific services. Current as of January 2021.

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

With HMSA, you and your eligible dependents can get care on the Mainland and in many international locations.

How it works
HMSA is part of the Blue Cross and Blue Shield Association network, which includes 95% of doctors and 96% of hospitals on the Mainland. Your HMSA plan will also protect you in nearly 190 countries and territories around the world.

Looking for a doctor or hospital on the Mainland? Go to bcbs.com.

Traveling internationally? Download the Blue Cross Blue Shield Global Core mobile app for Apple and Android devices. You can 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.

Learn more about our Care Access Assistance Program
If you need to travel to another island for medical treatment, you may be eligible for financial assistance if 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 toll-free for more information.
You can use the EUTF portal to:

- Search for a doctor.
- Find health and fitness discounts with HMSA365, the Active&FitDirect™ program, and the ChooseHealthy® program.
- View helpful videos for EUTF and HSTA VB members.
- Learn more about well-being programs available to you and your family.
- Find information and resources related to COVID-19.

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.
- Use an annual maximum out-of-pocket calculator to see the most you’ll pay for benefits in a plan year.
- See where you are with reaching your deductible, if applicable.
- Download your plan’s Guide to Benefits for details about your HMSA plan.
- Print or request another HMSA membership card.

The Active&Fit Direct program is provided by American Specialty Health Fitness, Inc. and the ChooseHealthy program is provided by ChooseHealthy, Inc., both subsidiaries of American Specialty Health Incorporated (ASH), a national provider of fitness, health education, musculoskeletal provider networks and health management programs. Active&Fit Direct and ChooseHealthy are trademarks of ASH and used with permission herein.
EUTF health plan comparison

Which plan works best for you? Use this chart to compare the plans and choose the one that fits your health and budget needs. Use the plan calculator at hmsa.com/eutf to calculate your maximum out-of-pocket costs and deductible.

<table>
<thead>
<tr>
<th>PLAN BENEFITS</th>
<th>EUTF</th>
<th>HSTA VB</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANNUAL OUT-OF-POCKET MAXIMUM (The most you pay out of pocket in a calendar year.)</td>
<td>$2,000 per person, $4,000 maximum per family</td>
<td>$2,000 per person, $4,000 maximum per family</td>
</tr>
<tr>
<td>ANNUAL DEDUCTIBLE (The amount you pay out of pocket in a calendar year before your plan pays.)</td>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>

In-network Services

<table>
<thead>
<tr>
<th></th>
<th>YOU PAY</th>
<th>YOU PAY</th>
<th>YOU PAY</th>
<th>YOU PAY</th>
<th>YOU PAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Visits</td>
<td>10%</td>
<td>20%</td>
<td>25%</td>
<td>$15</td>
<td>$10</td>
</tr>
<tr>
<td>Annual Preventive Health Evaluation</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Physical Exams</td>
<td>10%</td>
<td>20%</td>
<td>25%*</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Hospital Room and Board</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Maternity Care</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Surgical Procedures (outpatient surgery)</td>
<td>10%</td>
<td>20%</td>
<td>25%*</td>
<td>$0 (outpatient surgical center)</td>
<td>$15 (professional charges)</td>
</tr>
<tr>
<td>Diagnostic Tests</td>
<td>10%</td>
<td>20%</td>
<td>25%*</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Outpatient Laboratory</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Outpatient X-ray and Other Radiology</td>
<td>10%</td>
<td>20%</td>
<td>25%*</td>
<td>$15 per X-ray</td>
<td>$15 per X-ray</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Ambulance (ground)</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Chiropractic Services

| | $15 copayment per visit for up to 20 medically necessary visits per calendar year when you see an ASH in-network provider | $15 copayment per visit for up to 20 medically necessary visits per calendar year when you see an ASH in-network provider | $15 copayment per visit for up to 20 medically necessary visits per calendar year when you see an ASH in-network provider | $15 copayment per visit for up to 20 medically necessary visits per calendar year when you see an ASH in-network provider | $12 copayment per visit for up to 20 medically necessary visits per calendar year when you see an ASH in-network provider |

Please note that HSTA VB plans are closed plans. Active HSTA VB employees with these plans can switch to another HMSA EUTF plan, but can’t re-enroll in these plans once they switch.

* Annual deductible applies.
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 to confirm 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 when you go to an ASH Group network chiropractic provider. Visit ashlink.com/ash/hmsa or call ASH Group Customer Service at 1 (888) 981-2746 toll-free to find a participating ASH Group network chiropractor. See your Guide to Benefits to learn more.

Blue Zones Project® is a communitywide well-being improvement initiative that helps make healthy choices easier.

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, smart-watches, 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 Member Resources to learn more.

*Island Scene* is a health and well-being magazine for members. Read it at home or 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.

**CVS/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.

**Hawaii Tobacco Quitline** provides support for members who want to quit tobacco for good. Talk to your PCP and call 1 (800) QUIT-NOW (784-8669) toll-free to get started.

**Health coaching** is available to help members reach their health goals. Call 1 (855) 329-5461 toll-free 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.

---

American Specialty Health Group, Inc. (ASH Group) is an independent company providing chiropractic, acupuncture, and/or massage therapy services on behalf of HMSA.

Blue Zones Project® is a trademark of Blue Zones, LLC. All rights reserved.
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.

HMSA Pregnancy and Postpartum Support Program provides eligible members with personalized prenatal care support for a healthy pregnancy and six months after delivery.

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

Ornish Lifestyle Medicine™ is a nine-week program that helps eligible members reverse the effects of heart disease and reduce risk factors for health conditions like hypertension, prediabetes, diabetes, and early-stage prostate cancer.*

*See page 1 for upcoming changes to this benefit.

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

Preventive Care

Annual visits with a PCP

- An annual preventive health evaluation is an annual health assessment for EUTF Active plan members.

- A physical exam is the annual health assessment for HSTA VB Active plan members.

- See the personal screening checklist on page 14 for recommended screenings and tests for adults ages 21 to 65.

Online health education workshops are fun, interactive ways for members to learn about health and well-being topics.

HMSA Diabetes Prevention Program helps eligible members who are at risk for prediabetes prevent the onset of type 2 diabetes through lifestyle and diet changes, exercise, and group support.

Worksite well-being programs encourage people to engage in healthy habits at work.

GET STARTED

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

Questions? Call us at 948-6499 on Oahu or 1 (800) 776-4672 toll-free or visit us at an HMSA Center or office.
ADULTS AGES 21 TO 65
PERSONAL SCREENING CHECKLIST

Here are preventive health screening recommendations for:

Member’s name: ___________________________________________________________

Note: If you’re over 65, check hmsa.com/eutf for a personalized screening checklist. This checklist isn’t a substitute for your doctor’s advice. Your doctor may recommend more or less frequent screenings based on your individual needs.

<table>
<thead>
<tr>
<th>Recommended Screening</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood pressure</td>
<td>If you have hypertension (high blood pressure) or diabetes and your last blood pressure reading was too high, at every visit.</td>
</tr>
<tr>
<td></td>
<td>If you don’t have high blood pressure, every one to three years depending on your last blood pressure reading.</td>
</tr>
<tr>
<td>Body mass index</td>
<td>Everyone at least every two years.</td>
</tr>
<tr>
<td>Breast cancer screening</td>
<td>If you’re a woman 50-74 years old, at least every other year.</td>
</tr>
<tr>
<td>Cervical cancer screening</td>
<td>If you’re a woman 21-65 years old, a Pap smear every three years. If you’re over 30, you could have a Pap smear combined with an HPV test every five years instead.</td>
</tr>
<tr>
<td>Colorectal cancer screening</td>
<td>If you’re 50-75 years old (man or woman), every one to 10 years depending on the test used.</td>
</tr>
<tr>
<td>Diabetes test</td>
<td>If you have diabetes:</td>
</tr>
<tr>
<td></td>
<td>• A blood sugar test called a hemoglobin A1c test every six months.</td>
</tr>
<tr>
<td></td>
<td>• A kidney disease (nephropathy) test every year.</td>
</tr>
<tr>
<td></td>
<td>• A retinal eye exam every year or every other year if there were no problems with your last test.</td>
</tr>
</tbody>
</table>
|                               | If you don’t have diabetes and you’re 40 years old or older or if you’re younger but overweight or in poor health, you should get screened for diabetes every three years.

Your PCP

It’s important to work with a PCP to take care of your health.

If you have a PCP: Schedule your next appointment now.

My PCP’s name: ______________________________________________________________________________________

Make appointment by: ________________________________________________________________________________

If you don’t have a PCP:

• Visit hmsa.com/eutf and click Find a Doctor.
• If you need help, call us at 948-6499 on Oahu or 1 (800) 776-4672 toll-free on the Neighbor Islands and Mainland, Monday through Friday, 7 a.m.-7 p.m., or Saturday, 9 a.m.-1 p.m.
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)
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 50 to 74. 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 50 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
A blood sugar test is recommended for people with diabetes. High blood sugar can lead to heart attack, stroke, nerve damage, poor circulation, sexual dysfunction, kidney failure, and blindness.

Diabetes checkup: Eye exam
A dilated retinal eye exam (which is different from a regular eye exam) is recommended for people with diabetes. This exam looks for damage to the eye caused by high blood sugar and high blood pressure.

Diabetes checkup: Kidney function test
A kidney function test is recommended for people with diabetes ages 18 to 75. This test looks at your kidneys’ ability to filter blood.
Health care terms

**Claim**
An invoice that includes information about the 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. Sometimes, if your HMSA plan covers a service, you may have to pay a copayment 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 (HMO)**
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 (PPO)**
A type of health plan that lets you see any provider in HMSA’s network.

**Primary care provider (PCP)**
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.
HMSA complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. HMSA does not exclude people or treat them differently because of things like race, color, national origin, age, disability, or sex.

Services that HMSA provides
Provides aids and services to people with disabilities to communicate effectively with us, such as:
- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides language services to people whose primary language is not English, such as:
- Qualified interpreters
- Information written in other languages

If you need these services, please call 1 (800) 776-4672 toll-free; TTY 711

How to file a discrimination-related grievance or complaint
If you believe that we’ve failed to provide these services or discriminated against you in some way, you can file a grievance in any of the following ways:
- Phone: 1 (800) 776-4672 toll-free
- TTY: 711
- Email: Compliance_Ethics@hmsa.com
- Fax: (808) 948-6414 on Oahu
- Mail: 818 Keeaumoku St., Honolulu, HI 96814

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, in any of the following ways:
- Online: ocrportal.hhs.gov/ocr/portal/lobby.jsf
- Phone: 1 (800) 368-1019 toll-free; TDD users, call 1 (800) 537-7697 toll-free

For complaint forms, please go to hhs.gov/ocr/office/file/index.html.


Bisaya: ATENSYON: Kung nagsultí ka og Cebuano, aduna kay magamit nga mga serbisyo sa tabang sa lengguwahe, nga walay bayad. Tawag sa 1 (800) 776-4672 nga walay toll. TTY 711.

Chinese: 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1 (800) 776-4672。

Filipino: PAKDAAR: Nu saritaem ti Ilocano, ti serbisyo para ti baddang ti lengguwahe nga awanan bayadna, ket sidadaan para kenyam. Awagan ti 1 (800) 776-4672 toll-free. TTY 711.

Japanese: 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

Laotian: ระวังโปรด:

Marshallese: LALE: Ñe kwój kônono Kajin Majól, kwomaroñ bök jerbal in jipañ lilo kajin ne am ejjelok wonán. Kaalok 1 (800) 776-4672 tollfree, enaj ejjelok wonaan. TTY 711.


Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1 (800) 776-4672. TTY 711.


We’re here with you

hmsa.com/eutf

Call 948-6499 on Oahu or 1 (800) 776-4672 toll-free on the Neighbor Islands or Mainland Monday through Friday, 7 a.m.-7 p.m. and Saturday, 9 a.m.-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. Due to COVID-19, hours of operation may change. Please go to hmsa.com/contact before your visit.

HMSA Center @ Honolulu
818 Keeaumoku St.
Monday through Friday, 8 a.m.-5 p.m. | Saturday, 9 a.m.-2 p.m.

HMSA Center @ Pearl City
Pearl City Gateway | 1132 Kuala St., Suite 400
Monday through Friday, 9 a.m.-6 p.m. | Saturday, 9 a.m.-2 p.m.

HMSA Center @ Hilo
Waiakea Center | 303A E. Makaala St.
Monday through Friday, 9 a.m.-6 p.m. | Saturday, 9 a.m.-2 p.m.

HMSA Center @ Kahului
Puuunene Shopping Center | 70 Hookele St., Suite 1220
Monday through Friday, 9 a.m.-6 p.m. | Saturday, 9 a.m.-2 p.m.

Customer Relations representatives are also available in person at our Neighbor Island offices, Monday through Friday, 8 a.m.-4 p.m.:

Kailua-Kona, Hawaii Island
75-1029 Henry St., Suite 301 | Phone: 329-5291

Lihue
4366 Kukui Grove St., Suite 103 | Phone: 245-3393

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