



Medicare Companion Plan



COLORADO
PERA®

2027

moda
HEALTH

**Welcome to
Moda Health,**

the place you go when you want more than a health plan — because you know good health is about so much more than just the plan details.



**A partnership
you can trust**

For over 30 years, Moda Health has been offering Medicare companion plans to public retirees.



**Putting people
first since 1955**

Offering health insurance plans for 70 years.



Nationwide coverage

With the Moda Health Medicare Companion plan, you may see a Medicare provider anywhere in the U.S. and U.S. territories.

Explore Medicare Companion coverage

Why should I have a Medicare companion plan?

Medicare is your primary source for medical and hospital insurance. When you choose the Moda Health Medicare Companion plan, you get enhanced benefits that go beyond what Medicare covers.

Original Medicare is your primary insurance:



Part A (hospital insurance)



Part B (medical insurance)



Moda Health Medicare Companion plan gives you **enhanced benefits**:

No copays or coinsurance*,
Medicare generally pays **80%**, Moda Health pays **20%** for Medicare covered services*



No primary care provider (PCP) requirements

Additional value-added services

Flexibility to see any Medicare provider nationwide

No referrals required

*For full benefit details and limitations, visit modahealth.com/peracare

Travel with peace of mind

Medicare companion plans ensure your coverage is with you when you travel anywhere in the United States. Choose any physician that accepts Medicare throughout the country. By selecting the Moda Health Medicare Companion plan, you can feel secure that where Medicare coverage ends, your companion plan coverage begins.



How do I find a provider?

Visit [Medicare.gov](https://www.medicare.gov) to find Medicare providers in your area.



Moda Health Medicare Companion plan

 Medicare Part A			 You pay
	Medicare pays	Plan pays	
Hospitalization ¹	Semi-private room and board, general nursing and miscellaneous services and supplies		
First 60 days	All but \$1,736	\$1,736 (Part A deductible)	\$0
61st through 90th day	All but \$434 per day	\$434 per day	\$0
91st day and after: While using 60 lifetime reserve days	All but \$868 per day	\$868 per day	\$0
Once lifetime reserve days are used:			
Additional 365 days	\$0	100% of Medicare-eligible expenses	\$0 ²
Beyond the additional 365 days	\$0	\$0	All costs
Skilled nursing facility care ¹	You must meet Medicare's requirements, including three inpatient hospital days, prior to entering a Medicare-approved skilled nursing facility within 30 days of hospital stay		
First 20 days	All approved amounts	\$0	\$0
21st through 100th day	All but \$217 per day	Up to \$217 per day	\$0
101st day and after	\$0	\$0	All costs
Hospice care	Available as long as your doctor certifies you are terminally ill and you elect to receive these services		
	All but limited coinsurance for outpatient drugs and inpatient respite care	Up to \$5 per outpatient prescription for pain and symptom management; 5% of the Medicare approved amount for inpatient respite care	\$0

1 A benefit period begins on the first day you receive services as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

2 Notice: When your Medicare Part A hospital benefits are exhausted, the insurer stands in place of Medicare and will pay whatever amount Medicare would have paid up to an additional 365 days as provided in the policy's "core benefits." During this time, the hospital is prohibited from billing you for the balance based on any difference between its billed charges and the amount Medicare would have paid.

The cost-sharing amounts displayed are based on 2026 values and are subject to change. Updated 2027 amounts will be provided once available from CMS.

Moda Health Medicare Companion plan (continued)

 Medicare Part B			 You pay
Medicare pays	Plan pays		
Part B deductible	\$0	\$0	\$283
After Part B deductible has been met			
Medical expenses	In or out of the hospital and outpatient hospital treatment, such as physician's services, inpatient and outpatient medical and surgical services and supplies, physical and speech therapy, diagnostic tests and durable medical equipment		
Remainder of Medicare-approved amounts	80%	20%	\$0
Part B excess charges (above Medicare approved amounts)	\$0	100%	\$0
Blood			
First three pints	\$0	100%	\$0
Additional amounts	80%	20%	\$0
Clinical laboratory services – blood tests			
For diagnostic services	100%	\$0	\$0

 Medicare Parts A and B			Medicare pays	Plan pays	 You pay
Home healthcare Medicare-approved services					
Medically necessary skilled-care services and medical supplies	100%	\$0	\$0		
Durable medical equipment					
Remainder of Medicare-approved amounts	80% after Part B deductible is met	20% after Part B deductible is met	\$0 after Part B deductible is met		

Moda Health Medicare Companion plan (continued)

 Emergency and travel benefits			 You pay
	Medicare pays	Plan pays	
After the Part B deductible has been met			
Anywhere in the United States			
Urgent care	80%	20%	\$0
Emergency room	80%	20%	\$0
Ambulance – ground or air	80%	20%	\$0
Outside the United States coverage limited to \$50,000 per member (lifetime)			
Urgent care	0%	80%	20%
Emergency room	0%	80%	20%
Ambulance – ground or air	0%	80%	20%

This policy may not fully cover all of your medical costs. Neither Moda Health nor its agents are connected with Medicare. This does not give all of the details about Medicare coverage. For a complete description of Medicare benefits, contact your local Social Security office, or refer to the “Medicare & You 2027” handbook online at [medicare.gov](https://www.medicare.gov) or by calling 800-633-4227.

This is a benefit summary only. For a more detailed description of benefits, please refer to your Member Handbook, which you can access through modahealth.com/peracare.

The cost-sharing amounts displayed are based on 2026 values and are subject to change. Updated 2027 amounts will be provided once available from CMS.

Tools for your healthy journey

Your plan comes with **programs, care teams, tools and resources** designed to help you manage your well-being. Using your Member Dashboard, you can work with health coaches, view your explanation of benefits and more.



Care coordination and case management

When you're sick, need hospitalization, surgery, or are seriously injured, we'll give you support – so you can focus on healing.

Our care coordinators and case managers can help you understand and utilize all of your benefits, communicate with your providers, arrange care ordered by your provider, and help you find community resources.



Health coaching

Need a hand with your health? A Moda Health coach will use evidence-based practices to help you set goals and feel your best.

To contact a health coach by phone, call us toll-free at 855-466-7155 (TTY users, please dial 711). Email a health coach at healthcoachteam@modahealth.com.



Nurse advice line*

Need quick advice? You can use our Nurse Advice Line to talk with a registered nurse about any health matter, 24/7, 365 days a year at no cost. The nurse will give you advice about treatment, which may include a home remedy or seeking other care.

Please call 800-501-5046 to talk with a registered nurse. TTY users, dial 711. Your call will always be confidential.



Log in to your Member Dashboard at modahealth.com/memberdashboard to use these care resources to be your healthy best!

Value-added *services and discounts*



Gym Membership*

Enjoy gym memberships and well-being resources from One Pass®. This benefit includes:

- 28,000+ gyms and studios nationwide, including YMCAs and boutique locations (Core & Premium network included).
- Multi-location access and free caregiver participation.
- 42,000+ on-demand and livestream fitness classes to use at home or while traveling.
- 90,000+ free social and wellness activities including yoga, balance training, and education events
- One Home Workout Kit annually if you prefer to exercise at home.
- Healthy meal delivery and brain training programs to support whole-body wellness.

Your fitness center must be participating in the One Pass® program for this benefit to apply. To learn more or enroll visit YourOnePass.com or call 877-504-6830.



Travel Assist*

Receive travel assistance when more than 100 miles from home, through Assist America. These services include, but are not limited to:

- Medical consultation, evaluation and referral
- Foreign hospital admission assistance
- Lost luggage and document assistance
- Interpreter and legal referral

Learn more at assistamerica.com, or contact Assist America at 800-872-1414.

**These additional service are a complement to the Medicare Companion plan, but are not insurance. They may not be available in all areas and may be changed or discontinued with 30 days advance notice.*



Healthcare lingo

explained

We realize that health plans can be confusing, so we’ve made a glossary to help you understand some healthcare lingo.

Coinsurance

The percentage you normally pay for a covered healthcare service after you meet your deductible. With the Moda Health Medicare Companion plan, once your Part B deductible is met, Medicare pays 80% coinsurance for Medicare covered services, and the plan pays the remaining 20% coinsurance.

Copay (copayment)

The fixed amount you pay for a specific covered healthcare service, product or treatment, usually at the time of receiving it.

Medicare Part A deductible

The amount normally due upon first admission to a hospital in each benefit period, before benefits are available under Part A of Medicare.

Medicare Part B deductible

The amount you must pay each calendar year before Medicare pays benefits for Medicare Part B expenses.

Member Handbook

Describes what is covered and how your plan works.

ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-877-605-3229 (TTY: 711) or speak to your provider.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 1-877-605-3229 (TTY: 711) o hable con su proveedor.

LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số (Người khuyết tật: 1-877-605-3229 (TTY: 711) hoặc trao đổi với người cung cấp dịch vụ của bạn.

주의: 한국어를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 1-877-605-3229 (TTY: 711)번으로 전화하거나 서비스 제공업체에 문의하십시오.

ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 1-877-605-3229 (TTY: 711) или обратитесь к своему поставщику услуг.

注：日本語を話される場合、無料の言語支援サービスをご利用いただけます。アクセシブル（誰もが利用できるよう配慮された）な形式で情報を提供するための適切な補助支援やサービスも無料にご利用いただけます。1-877-605-3229 (TTY: 711) までお電話ください。または、ご利用の事業者にご相談ください。

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistentendienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 1-877-605-3229 (TTY: 711) an oder sprechen Sie mit Ihrem Provider.

PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 1-877-605-3229 (TTY: 711) o makipag-usap sa iyong provider.

УВАГА: Якщо ви розмовляєте українська мова, вам доступні безкоштовні мовні послуги. Відповідні допоміжні засоби та послуги для надання інформації у доступних форматах також доступні безкоштовно. Зателефонуйте за номером 1-877-605-3229 (TTY: 711) або зверніться до свого постачальника».

ማሳሰቢያ፡- አማርኛ የሚናገሩ ከሆነ፣ የቋንቋ ድጋፍ አገልግሎት በነፃ ይቀርብልዎታል። መረጃን በተደራሽ ቅርጸት ለማቅረብ ተገቢ የሆኑ ተጨማሪ አገዛዎች እና አገልግሎቶች እንዲሁ በነፃ ይገኛሉ። በስልክ ቁጥር 1-877-605-3229 (TTY: 711) ይደውሉ ወይም አገልግሎት አቅራቢዎን ያናግሩ።

FIIRO GAAR AH: Haddaad ku hadasho Soomaali, adeegyo kaalmada luuqadda ah oo bilaash ah ayaad heli kartaa. Qalab caawinaad iyo adeegyo oo habboon si loogu bixiyo macluumaadka qaabab la adeegsan karo ayaa sidoo kale bilaa lacag heli karaa. Wac 1-877-605-3229 (TTY: 711) ama la hadal bixiyaahaaga.

ATTENTION : Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-877-605-3229 (TTY: 711) ou parlez à votre fournisseur.

注意：如果您说中文，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。致电（文本电话：1-877-605-3229 (TTY: 711) ）或咨询您的服务提供商。

ເຊີນຊາບ: ຖ້າທ່ານເວົ້າພາສາ ລາວ, ຈະມີບໍລິການຊ່ວຍດ້ານພາສາແບບບໍ່ເສຍຄ່າໃຫ້ທ່ານ. ມີເຄື່ອງຊ່ວຍ ແລະ ການບໍລິການແບບບໍ່ເສຍຄ່າທີ່ເໝາະສົມເພື່ອໃຫ້ຂໍ້ມູນໃນຮູບແບບທີ່ສາມາດເຂົ້າເຖິງໄດ້. ໂທຫາເບີ 1-877-605-3229 (TTY: 711) ຫຼື ສົມກັບຜູ້ໃຫ້ບໍລິການຂອງທ່ານ.

หมายเหตุ: หากคุณใช้ภาษาไทย เรามีบริการความช่วยเหลือด้านภาษาฟรี นอกจากนี้ ยังมีเครื่องมือและบริการช่วยเหลือเพื่อให้ข้อมูลในรูปแบบที่เข้าถึงได้โดยไม่เสียค่าใช้จ่าย โปรดโทรติดต่อ 1-877-605-3229 (TTY: 711) หรือปรึกษาผู้ให้บริการของคุณ

توجه دیں: اگر آپ اردو بولتے ہیں، تو آپ کے لیے زبان کی مفت مدد کی خدمات دستیاب ہیں۔ قابل رسائی فارمیٹس میں معلومات فراہم کرنے کے لیے مناسب معاون امداد اور خدمات بھی مفت دستیاب ہیں۔ - (TTY: 711) 1-877-605-3229 پر کال کریں یا اپنے فراہم کنندہ سے بات کریں۔"

LUS CEEV TSHWJ XEEB: Yog hais tias koj hais Lus Hmoob muaj cov kev pab cuam txhais lus pub dawb rau koj. Cov kev pab thiab cov kev pab cuam ntxiv uas tsim nyog txhawm rau muab lus qhia paub ua cov hom ntaub ntauv uas tuaj yeem nkag cuag tau rau los kuj yeej tseem muaj pab dawb tsis xam tus nqi dab tsi ib yam nkaus. Hu rau 1-877-605-3229 (TTY: 711) los sis sib tham nrog koj tus kws muab kev saib xyuas kho mob.

सावधान: यदि तपाईं नेपाली भाषा बोल्नुहुन्छ भने तपाईंका लागि नि:शुल्क भाषिक सहायता सेवाहरू उपलब्ध छन्। पहुँचयोग्य ढाँचाहरूमा जानकारी प्रदान गर्न उपयुक्त सहायता र सेवाहरू पनि नि:शुल्क उपलब्ध छन्। 1-877-605-3229 (TTY: 711) मा फोन गर्नुहोस् वा आफ्नो प्रदायकसँग कुरा गर्नुहोस्।

ശ്രദ്ധിക്കുക: നിങ്ങൾ മലയാളം ഭാഷ സംസാരിക്കുമെങ്കിൽ, സൗജന്യ ഭാഷാ സഹായ സേവനങ്ങൾ നിങ്ങൾക്ക് ലഭ്യമാണ്. ആകസ്മികച്ചായവുന്ന ഫോർമാറ്റുകളിൽ വിവരങ്ങൾ നൽകാനുള്ള ഉചിതമായ അനുബന്ധ സഹായങ്ങളും സേവനങ്ങളും കൂടെ സൗജന്യമായി ലഭ്യമാണ്. 1-877-605-3229 (TTY: 711) ലേക്ക് വിളിക്കുക അല്ലെങ്കിൽ നിങ്ങളുടെ ദാതാവിനോട് സംസാരിക്കുക.

PANANGIKASO: No agsasaoka iti Ilocano, magun-odmo dagiti libre a serbisio ti tulong iti pagsasao. Libre met laeng a magun-odan dagiti maitutop a katulongan ken serbisio a mangipaay iti impormasion kadagiti ma-akses a pormat. Awagan ti 1-877-605-3229 (TTY: 711) wenno makisarita iti mangipapaay kenka.

ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए नि:शुल्क भाषा सहायता सेवाएं उपलब्ध होती हैं। सुलभ प्रारूपों में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएँ भी नि:शुल्क उपलब्ध हैं। 1-877-605-3229 (TTY: 711) पर कॉल करें या अपने प्रदाता से बात करें।

సావధానం: మీరు తెలుగు మాట్లాడితే, మీకు ఉచిత భాషా సహాయ సేవలు అందుబాటులో ఉంటాయి. యాక్సెస్ చేయగల ఫార్మాట్‌లలో సమాచారాన్ని అందించడానికి తగిన సహాయక సహాయాలు మరియు సేవలు కూడా ఉచితంగా అందుబాటులో ఉంటాయి. 1-877-605-3229 (TTY: 711) కి కాల్ చేయండి లేదా మీ ప్రొవైడర్‌తో మాట్లాడండి.

تنبيه: إذا كنت تتحدث اللغة العربية، فستوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على الرقم 877-605-3229 (TTY: 711) أو تحدث إلى مقدم الخدمة".

AKIYESI: Ti o ba sọ Yorùbá, awọn işe iranlọwọ ede ọfẹ wa fun ọ. Awọn iranlọwọ iranlọwọ ti o yẹ ati awọn işe lati pese alaye ni awọn ọna kika wiwọle tun wa laisi idiyele. Pe 1-877-605-3229 (TTY: 711) tabi sọrọ si olupese rẹ.

MAKINIKA: Ikiwa wewe huzungumza Kiswahili, msaada na huduma za lugha bila malipo unapatikana kwako. Vifaa vya usaidizi vinavyofaa na huduma bila malipo ili kutoa taarifa katika mifumo inayofikiwa pia inapatikana bila malipo. Piga simu 1-877-605-3229 (TTY: 711) au zungumza na mtoa huduma wako.

ATENÇÃO: Se você fala Português do Brasil, serviços gratuitos de assistência linguística estão disponíveis para você. Auxílios e serviços auxiliares apropriados para fornecer informações em formatos acessíveis também estão disponíveis gratuitamente. Ligue para 1-877-605-3229 (TTY: 711) ou fale com seu provedor.

Questions? *We're here to help.*

**Medical questions for the Moda Health
Medicare Companion plan:**

Toll-free: 833-599-7482 | (TTY): 711

Customer service is available from 8:30 a.m. to 6:30 p.m. Mountain Time, Monday through Friday. Calls are forwarded to voicemail on Saturdays, Sundays and holidays and are returned the next business day.

Colorado PERA:

Toll-free: 800-759-PERA (7372)

copera.org

Customer Service Center Phone Hours (Mountain time)

7:00 a.m.–5:30 p.m. Monday–Thursday

7:00 a.m.–4:30 p.m. Friday

Learn more at modahealth.com/peracare



Not connected with or endorsed by the U.S. Government or the federal Medicare program. These benefits and Moda Health policies are subject to change in order to be compliant with state and federal guidelines. Health plans administrated by Moda Health Plan, Inc.