







Quality, evidence-based plans

Our flexible benefit designs support the long-term health of your clients' employees, including preventive exams, women's annual exams, well-baby care and many immunizations.



Prescriptions with choice

Your clients' employees get integrated pharmacy benefits with an open formulary design that provides them with maximum choice.

Approved drug list: modahealth.com/pdl



Benefits admin, made easy

Online tools put the power in your clients' hands, so they can jump on whenever they need to make a change, run reports, access resources and manage their bill.



Founded in **1955**

we've been **helping our members** with evidence-based health plans, diverse provider networks, innovative member programs and **our signature caring customer service**.

Moda has

333,000+

members in our medical plans

More than

1 million

members in our standalone pharmacy segment





Not once has it felt that the Oregon Fire Chiefs Association was just another number with Moda. The team we have the pleasure to work with goes the extra mile to ensure the plan meets the group's needs, which include a variety of collective bargaining agreements that are not all uniform.

- Redmond Fire & Rescue



We know your time is valuable.

Quick links

2023 Medical plans

Networks

About Equal Funding

How to enroll

Member perks

Contact us





Your guide to plan management

We want to make it easy for you and your clients to enroll and manage their account.

Enrollment, made easy

- 1 Confirm client's eligibility Your client's business must:
 - Be in Oregon
 - Have 25 or more full-time (or full-time-equivalent) employees on average during the preceding calendar year
 - Have at least 25 employees enrolled on the first day of the plan year
- 2 Enroll by the 10th of the month

New group enrollment information must be received no later than the 10th of the month prior to the desired effective date. Late enrollment can be accommodated upon request.

3 Choose an employee eligibility waiting period

It cannot exceed 90 days for medical plans.

4 Make changes to plans upon renewal

Changes may include, but are not limited to, eligibility waiting periods, group plan choices, employer eligibility changes and contribution or participation amounts.

Faster benefits administration

The Employer Dashboard was created to help your clients quickly access and manage the details of benefits administration.

It's self-service, easy-to-use and available 24/7.

- Review employee enrollment information and history
- Generate an enrollment census of covered employees and/or dependents
- View benefit and plan details and Member Handbooks
- Manage billing with eBill
- Send secure messages
- Order ID cards





To learn more about the Employer Dashboard, contact your *Moda Health sales representative at 800-578-1402*

Experience better with Moda Health

Flexible, cost-savings plans with equal monthly payments

For some employers, the benefits of self-funding their health insurance come with concerns about managing wildly fluctuating monthly costs. Moda Health's Equal Funding provides the flexibility and cost savings your clients want, with the stability of equal monthly payments they need. It's peace of mind and a great first step to becoming fully self-funded.

A three-part plan

Self-funded medical plan

Covers medical services and pharmacy expenses for your clients' employees and their dependents

Administration agreement

Covers claims processing, billing, customer service and more

Stop-loss policy

Protects your clients if claims exceed expected annual limit



Predictability, flexibility and control

Equal Funding limits your clients' risk while providing granularity on where their collective healthcare dollars are being spent. Your client pays the same every month. If claims are higher than expected, the stop loss insurance policy will cover them. And if claims are lower than expected, your clients will receive a credit towards the next plan year's administrative fees.

Stability



Equal monthly payments

for easier cost management



Insight into plan performance

throughout the year, for more informed decision making at renewal time

Protection



Safety from the unexpected

whether from large catastrophic claims by covered individual(s) or combined medical and pharmacy claims from the entire employee population that exceed the expected annual limit



Clients may see lower costs

with any surplus at the end of the policy period appearing as an administrative fee credit for the following policy year



A partner in better outcomes and cost management

Moda Health works closely with your clients to maximize their healthcare investment. Our Equal Funding medical plans are designed to help your clients' employees be their healthy best. Plus, we take the time to understand their clients' business — top to bottom, so you'll have the insights needed to make informed recommendations about each of our client's health plan.

Supporting a healthy population



Inspiration and support

for your clients' employees to improve their health, managing chronic conditions, and navigating their plan and care options



Improved morale and productivity

from happier and healthier employees

Transparency and reporting



Identifying cost-savings opportunities

short-term trends and long-term needs with robust reporting



Personalized service and support

with industry-leading case management team

How Equal Funding works

Moda Health's Equal Funding plan allows your clients to pay for their maximum exposure **over 12 predictable monthly payments**.

Once the policy period ends, if there is a surplus between the premium amount paid and the total cost of claims for your client, an administrative fee credit will be applied to the following policy year.



Date	Sample monthly billing cycle for May
April 7	eBill generated (viewable online within 48 hours)
May 1	 May payment due May remittance pulled via Electronic Fund Transfer (EFT)
May 10	 Moda Health confirms May payment has posted If payments have not posted, all claims payments will be immediately pended
May 31	If May payment has not posted, plan will be terminated effective May 1, and May claims will be denied



If actual claims are less than expected

the plan has a surplus. Part of the surplus will go to your clients as a credit on the next plan year's administrative agreement fees.



If actual claims are higher than expected

the stop-loss policy will cover these costs. Your clients will not be required to pay more.

Let's look at the components of a premium



Member perks to improve health and save

Our comprehensive wellness programs have something for every employee, supporting their work toward better health with exclusive discounts, programs and tools.





Discounts

- Gym memberships 🛂
- Acupuncture, chiropractic, therapeutic massage (once alternative care benefit limit has been reached)
- Hearing aids and exams
- Popular health and fitness brands (Vitamix® and Garmin®)



Tools

- Health assessments
- Prescription price check
- Text a doctor 24/7 🛂
- Employee Assistance Program 💆
- Identity protection services



Coaching and care

- Health coaching
- Care coordination
- Diabetes management
- Tobacco cessation
- Emergency medical assistance when traveling
- Kidney care



Mental health support

12 weeks of mobile therapy for your clients' employees from a private therapist through their smartphone

Life's **better** in the network

We've carefully selected a community of primary care providers (PCPs), specialists and partner health systems, so you'll have better value and better care.







Moda Select

Network

Helps employees residing in these counties manage their health in close partnership with their primary care provider (PCP) and the rest of their care team. In addition to OHSU, *Moda Select* gives members access to a community of quality providers, including Hillsboro Medical Center and Adventist Health Portland.











When clients want our broadest selection of providers across Oregon, **Connexus Network** has them covered. Clients located anywhere in Oregon can choose a plan with this network. Members can see in-network providers in all counties in Oregon and some areas in Washington and Idaho.

















Adventist Health Portland • Asante • Bay Area Hospital • Blue Mountain Hospital District CHI St. Anthony Hospital • Columbia Memorial Hospital • Good Shepherd Healthcare System Grande Ronde Hospital • Harney District Hospital • Hillsboro Medical Center Kadlec Regional Medical Center • Lake Health District Hospital • Legacy Silverton Hospital Pioneer Memorial Hospital - Heppner • Samaritan Health Services • Santiam Hospital Sky Lakes Medical Center • St. Luke's Hospital • Tillamook Regional Medical Center • Trios Health Wallowa County Healthcare District • Willamette Valley Medical Center



Aetna® PPO Network through **Aetna Signature Administrators®**

For care outside of Oregon, members can see providers in the Aetna® PPO Network.

Plan name	C	Calendar year c	osts				ervices			
	Annual deductible per person / family	Coinsurance	Annual OOP maximum per person / family	PCP visits	Specialist visits	Emergency room visits	Virtual office visits	Mental health & substance use disorder office visits	Outpatient rehabilitation	Acupuncture & spinal manipulations
	Ir	n-network member	pays				In-network me	ember pays		
POS_\$250_\$2500_\$20/\$40_10%	\$250 / \$500	10%	\$2,500 / \$5,000	\$O ¹	\$40	\$200 then 10% after deductible	\$O ¹	\$0 first 3 visits, then \$20	\$40	\$20
POS_\$250_\$3000_\$25/\$45_10%	\$250/\$500	10%	\$3,000 / \$6,000	\$0 ²	\$45	\$200 then 10% after deductible	\$0 ²	\$0 first 3 visits, then \$25	\$45	\$25
POS_\$500_\$3000_\$25/\$45_10%	\$500 / \$1,000	10%	\$3,000 / \$6,000	\$O ²	\$45	\$200 then 10% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25
POS_\$500_\$3000_\$20/\$40_20%	\$500 / \$1,000	20%	\$3,000 / \$6,000	\$O ¹	\$40	\$200 then 20% after deductible	\$O ¹	\$0 first 3 visits, then \$20	\$40	\$20
POS_\$500_\$3500_\$20/\$40_20%	\$500 / \$1,000	20%	\$3,500 / \$7,000	\$O ¹	\$40	\$200 then 20% after deductible	\$O ¹	\$0 first 3 visits, then \$20	\$40	\$20
POS_\$500_\$4000_\$25/\$45_20%	\$500 / \$1,000	20%	\$4,000 / \$8,000	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25
POS_\$500_\$5000_\$25/\$45_20%	\$500 / \$1,000	20%	\$5,000 / \$10,000	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25
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POS_\$500_\$7150_\$25/\$45_20%	\$500 / \$1,000	20%	\$7,150 / \$14,300	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25
POS_\$500_\$7150_\$35/\$55_30%	\$500 / \$1,000	30%	\$7,150 / \$14,300	\$O ³	\$55	\$200 then 30% after deductible	\$O ³	\$0 first 3 visits, then \$35	\$55	\$35
POS_\$1000_\$3500_\$25/\$45_20%	\$1,000 / \$2,000	20%	\$3,500 / \$7,000	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25
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POS_\$1000_\$5500_\$25/\$45_20%	\$1,000 / \$2,000	20%	\$5,500 / \$11,000	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25
POS_\$1000_\$5500_\$35/\$55_30%	\$1,000 / \$2,000	30%	\$5,500 / \$11,000	\$O ³	\$55	\$200 then 30% after deductible	\$O ³	\$0 first 3 visits, then \$35	\$55	\$35
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POS_\$1500_\$4000_\$25/\$45_20%	\$1,500 / \$3,000	20%	\$4,000 / \$8,000	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25
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POS_\$1500_\$6000_\$25/\$45_20%	\$1,500 / \$3,000	20%	\$6,000 / \$12,000	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25
POS_\$1500_\$6000_\$35/\$55_30%	\$1,500 / \$3,000	30%	\$6,000 / \$12,000	\$O ³	\$55	\$200 then 30% after deductible	\$O ³	\$0 first 3 visits, then \$35	\$55	\$35
POS_\$1500_\$7150_\$25/\$45_20%	\$1,500 / \$3,000	20%	\$7,150 / \$14,300	\$0 ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25
POS_\$1500_\$7150_\$35/\$55_30%	\$1,500 / \$3,000	30%	\$7,150 / \$14,300	\$O ³	\$55	\$200 then 30% after deductible	\$O ³	\$0 first 3 visits, then \$35	\$55	\$35
POS_\$2000_\$4500_\$25/\$45_20%	\$2,000 / \$4,000	20%	\$4,500 / \$9,000	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25
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POS_\$2500_\$5000_\$25/\$45_20%	\$2,500 / \$5,000	20%	\$5,000 / \$10,000	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25
POS_\$2500_\$5000_\$35/\$55_30%	\$2,500 / \$5,000	30%	\$5,000 / \$10,000	\$O ³	\$55	\$200 then 30% after deductible	\$O ³	\$0 first 3 visits, then \$35	\$55	\$35
POS_\$2500_\$7500_\$25/\$45_20%	\$2,500 / \$5,000	20%	\$7,500 / \$15,000	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25

^{1 \$20} after first 3 PCP or Virtual office visits for age 19+

^{2 \$35} after first 3 PCP or Virtual office visits for age 19+ 3 \$25 after first 3 PCP or Virtual office visits for age 19+

	Plan name	C	Calendar year c	osts				Care & services				
		Annual deductible per member / family	Coinsurance	Annual OOP maximum per member / family	PCP visits	Specialist visits	Emergency room visits	Virtual office visits	Mental health & substance use disorder office visits	Outpatient rehabilitation	Acupuncture & spinal manipulations	
		Ir	n-network member	pays				In-network me	mber pays			
	POS_\$2500_\$7500_\$35/\$55_30%	\$2,500 / \$5,000	30%	\$7,500 / \$15,000	\$O ³	\$55	\$200 then 30% after deductible	\$O ³	\$0 first 3 visits, then \$35	\$55	\$35	
	POS_\$3000_\$5500_\$25/\$45_20%	\$3,000 / \$6,000	20%	\$5,500 / \$11,000	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25	
	POS_\$3000_\$5500_\$35/\$55_30%	\$3,000 / \$6,000	30%	\$5,500 / \$11,000	\$O ³	\$55	\$200 then 30% after deductible	\$O ³	\$0 first 3 visits, then \$35	\$55	\$35	
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	POS_\$3000_\$8900_\$25/\$45_20%	\$3,000 / \$6,000	20%	\$8,900 / \$17,800	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25	
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200	POS_\$4500_\$7150_\$35/\$55_30%	\$4,500 / \$9,000	30%	\$7,150 / \$14,300	\$O ³	\$55	\$200 then 30% after deductible	\$O ³	\$0 first 3 visits, then \$35	\$55	\$35	
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	POS_\$7000_\$8900_\$35/\$55_30%	\$7,000 / \$14,000	30%	\$8,900 / \$17,800	\$O ³	\$55	\$200 then 30% after deductible	\$O ³	\$0 first 3 visits, then \$35	\$55	\$35	
	POS_\$8000_\$8900_\$25/\$45_20%	\$8,000 / \$16,000	20%	\$8,900 / \$17,800	\$O ²	\$45	\$200 then 20% after deductible	\$O ²	\$0 first 3 visits, then \$25	\$45	\$25	
	POS_\$8000_\$8900_\$35/\$55_30%	\$8,000 / \$16,000	30%	\$8,900 / \$17,800	\$O ³	\$55	\$200 then 30% after deductible	\$O ³	\$0 first 3 visits, then \$35	\$55	\$35	

^{1 \$20} after first 3 PCP or Virtual office visits for age 19+ 2 \$35 after first 3 PCP or Virtual office visits for age 19+

^{3 \$25} after first 3 PCP or Virtual office visits for age 19+

Experience better with Moda Health

Connexus Network

Plan name		Calendar year c	osts		Care & services					
	Annual deductible per person / family	Coinsurance	Annual OOP maximum per person / family	PCP visits	Specialist visits	Emergency room visits	Virtual office visits	Mental health & substance use disorder office visits	Outpatient rehabilitation	Acupuncture & spinal manipulations
	1	n-network member	pays		'	In-network member pays				
VBC_\$250_\$2500_\$20/\$40_10%	\$250/\$500	10%	\$2,500 / \$5,000	\$20	\$40	\$200 then 10% after deductible	\$20	\$20	\$40	\$20
VBC_\$250_\$3000_\$25/\$45_10%	\$250/\$500	10%	\$3,000 / \$6,000	\$25	\$45	\$200 then 10% after deductible	\$25	\$25	\$45	\$25
VBC_\$500_\$3000_\$25/\$45_10%	\$500 / \$1,000	10%	\$3,000 / \$6,000	\$25	\$45	\$200 then 10% after deductible	\$25	\$25	\$45	\$25
VBC_\$500_\$3000_\$20/\$40_20%	\$500 / \$1,000	20%	\$3,000 / \$6,000	\$20	\$40	\$200	\$20	\$20	\$40	\$20
VBC_\$500_\$3000_\$25/\$40_20%	\$500 / \$1,000	20%	\$3,000 / \$6,000	\$25	\$40	\$200	\$15	\$25	\$40	\$25
VBC_\$500_\$3500_\$20/\$40_20%	\$500 / \$1,000	20%	\$3,500 / \$7,000	\$20	\$40	\$200	\$20	\$20	\$40	\$20
VBC_\$500_\$4000_\$25/\$45_20%	\$500 / \$1,000	20%	\$4,000 / \$8,000	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$500_\$5000_\$25/\$45_20%	\$500 / \$1,000	20%	\$5,000 / \$10,000	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$500_\$5000_\$35/\$55_30%	\$500 / \$1,000	30%	\$5,000 / \$10,000	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$500_\$7150_\$25/\$45_20%	\$500 / \$1,000	20%	\$7,150 / \$14,300	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$500_\$7150_\$35/\$55_30%	\$500 / \$1,000	30%	\$7,150 / \$14,300	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$500_\$5000_\$30/\$45_20%	\$500 / \$1,000	20%	\$5,000 / \$10,000	\$30	\$45	\$200	\$20	\$30	\$45	\$30
VBC_\$1000_\$3000_\$25/\$40_20%	\$1,000 / \$2,000	20%	\$3,000 / \$6,000	\$25	\$40	\$200	\$15	\$25	\$40	\$25
VBC_\$1000_\$3500_\$25/\$45_20%	\$1,000 / \$2,000	20%	\$3,500 / \$7,000	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$1000_\$4500_\$25/\$45_20%	\$1,000 / \$2,000	20%	\$4,500 / \$9,000	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$1000_\$5500_\$25/\$45_20%	\$1,000 / \$2,000	20%	\$5,500 / \$11,000	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$1000_\$5500_\$35/\$55_30%	\$1,000 / \$2,000	30%	\$5,500 / \$11,000	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$1000_\$7150_\$25/\$45_20%	\$1,000 / \$2,000	20%	\$7,150 / \$14,300	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$1000_\$7150_\$35/\$55_30%	\$1,000 / \$2,000	30%	\$7,150 / \$14,300	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$1000_\$5000_\$25/\$40_20%	\$1,000 / \$2,000	20%	\$5,000 / \$10,000	\$25	\$40	\$200	\$15	\$25	\$40	\$25
VBC_\$1000_\$3000_\$30/\$45_20%	\$1,000 / \$2,000	20%	\$3,000 / \$6,000	\$30	\$45	\$200	\$20	\$30	\$45	\$30
VBC_\$1000_\$5000_\$30/\$45_20%	\$1,000 / \$2,000	20%	\$5,000 / \$10,000	\$30	\$45	\$200	\$20	\$30	\$45	\$30
VBC_\$1000_\$3000_\$35/\$50_20%	\$1,000 / \$2,000	20%	\$3,000 / \$6,000	\$35	\$50	\$200	\$25	\$35	\$50	\$35
VBC_\$1000_\$5000_\$35/\$50_20%	\$1,000 / \$2,000	20%	\$5,000 / \$10,000	\$35	\$50	\$200	\$25	\$35	\$50	\$35
VBC_\$1500_\$3000_\$25/\$40_20%	\$1,500 / \$3,000	20%	\$3,000 / \$6,000	\$25	\$40	\$200	\$15	\$25	\$40	\$25
VBC_\$1500_\$4000_\$25/\$45_20%	\$1,500 / \$3,000	20%	\$4,000 / \$8,000	\$25	\$45	\$200	\$15	\$25	\$45	\$25
VBC_\$1500_5000_\$25/\$45_20%	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$25	\$45	\$200	\$15	\$25	\$45	\$25
VBC_\$1500_\$6000_\$25/\$45_20%	\$1,500 / \$3,000	20%	\$6,000 / \$12,000	\$25	\$45	\$200	\$45	\$25	\$45	\$25
VBC_\$1500_\$6000_\$35/\$55_30%	\$1,500 / \$3,000	30%	\$6,000 / \$12,000	\$35	\$55	\$200	\$55	\$35	\$55	\$35
VBC_\$1500_\$7150_\$25/\$45_20%	\$1,500 / \$3,000	20%	\$7,150 / \$14,300	\$25	\$45	\$200	\$45	\$25	\$45	\$25
VBC_\$1500_\$7150_\$35/\$55_30%	\$1,500 / \$3,000	30%	\$7,150 / \$14,300	\$35	\$55	\$200	\$55	\$35	\$55	\$35
VBC_\$1500_\$5000_\$25/\$40_20%	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$25	\$40	\$200	\$15	\$25	\$40	\$25
VBC_\$1500_\$3000_\$30/\$45_20%	\$1,500 / \$3,000	20%	\$3,000 / \$6,000	\$30	\$45	\$200	\$20	\$30	\$45	\$30
VBC_\$1500_\$5000_\$30/\$45_20%	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$30	\$45	\$200	\$20	\$30	\$45	\$30
VBC_\$1500_\$3000_\$35/\$50_20%	\$1,500 / \$3,000	20%	\$3,000 / \$6,000	\$35	\$50	\$200	\$25	\$35	\$50	\$35
VBC_\$1500_\$5000_\$35/\$50_20%	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$35	\$50	\$200	\$25	\$35	\$50	\$35

Experience better with Moda Health

Connexus Network

Plan name	(Calendar year c	osts				Care & se	ervices		
	Annual deductible per person / family	Coinsurance	Annual OOP maximum per person / family	PCP visits	Specialist visits	Emergency room visits	Virtual office visits	Mental health & substance use disorder office visits	Outpatient rehabilitation	Acupuncture & spinal manipulations
	II	n-network member	pays				In-network me	ember pays		
VBC_\$2000_\$4000_\$25/\$40_20%	\$2,000 / \$4,000	20%	\$4,000 / \$8,000	\$25	\$40	\$200	\$15	\$25	\$40	\$25
VBC_\$2000_\$6000_\$25/\$40_20%	\$2,000 / \$4,000	20%	\$6,000 / \$12,000	\$25	\$40	\$200	\$15	\$25	\$40	\$25
VBC_\$2000_\$4000_\$30/\$45_20%	\$2,000 / \$4,000	20%	\$4,000 / \$8,000	\$30	\$45	\$200	\$20	\$30	\$45	\$30
VBC_\$2000_\$6000_\$30/\$45_20%	\$2,000 / \$4,000	20%	\$6,000 / \$12,000	\$30	\$45	\$200	\$20	\$30	\$45	\$30
VBC_\$2000_\$4000_\$35/\$50_20%	\$2,000 / \$4,000	20%	\$4,000 / \$8,000	\$35	\$50	\$200	\$25	\$35	\$50	\$35
VBC_\$2000_\$6000_\$35/\$50_20%	\$2,000 / \$4,000	20%	\$6,000 / \$12,000	\$35	\$50	\$200	\$25	\$35	\$50	\$35
VBC_\$2000_\$4500_\$25/\$45_20%	\$2,000 / \$4,000	20%	\$4,500 / \$9,000	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$2000_\$5500_\$25/\$45_20%	\$2,000 / \$4,000	20%	\$5,500 / \$11,000	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$2000_\$5500_\$35/\$55_30%	\$2,000 / \$4,000	30%	\$5,500 / \$11,000	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$2000_\$7150_\$25/\$45_20%	\$2,000 / \$4,000	20%	\$7,150 / \$14,300	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$2000_\$7150_\$35/\$55_30%	\$2,000 / \$4,000	30%	\$7,150 / \$14,300	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$2500_\$5000_\$25/\$45_20%	\$2,500 / \$5,000	20%	\$5,000 / \$10,000	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$2500_\$5000_\$35/\$55_30%	\$2,500 / \$5,000	30%	\$5,000 / \$10,000	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$2500_\$7500_\$25/\$45_20%	\$2,500 / \$5,000	20%	\$7,500 / \$15,000	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$2500_\$7500_\$35/\$55_30%	\$2,500 / \$5,000	30%	\$7,500 / \$15,000	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$3000_\$5000_\$25/\$40_20%	\$3,000 / \$6,000	20%	\$5,000 / \$10,000	\$25	\$40	\$200	\$15	\$25	\$40	\$25
VBC_\$3000_\$7000_\$25/\$40_20%	\$3,000 / \$6,000	20%	\$7,000 / \$14,000	\$25	\$40	\$200	\$25	\$25	\$40	\$25
VBC_\$3000_\$5000_\$30/\$45_20%	\$3,000 / \$6,000	20%	\$5,000 / \$11,000	\$30	\$45	\$200	\$20	\$30	\$45	\$30
VBC_\$3000_\$5500_\$25/\$45_20%	\$3,000 / \$6,000	20%	\$5,500 / \$11,000	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$3000_\$5500_\$35/\$55_30%	\$3,000 / \$6,000	30%	\$5,000 / \$10,000	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$3000_\$7000_\$30/\$45_20%	\$3,000 / \$6,000	20%	\$7,000 / \$14,000	\$30	\$45	\$200	\$25	\$30	\$45	\$30
VBC_\$3000_\$5000_\$35/\$50_20%	\$3,000 / \$6,000	20%	\$5,000 / \$10,000	\$35	\$50	\$200	\$25	\$35	\$50	\$35
VBC_\$3000_\$7000_\$35/\$50_20%	\$3,000 / \$6,000	20%	\$7,000 / \$14,000	\$35	\$50	\$200	\$20	\$35	\$50	\$35
VBC_\$3000_\$5000_\$30/\$45_30%	\$3,000 / \$6,000	30%	\$5,000 / \$10,000	\$30	\$45	\$200	\$25	\$30	\$45	\$30
VBC_\$3000_\$5000_\$35/\$50_30%	\$3,000 / \$6,000	30%	\$5,000 / \$10,000	\$35	\$50	\$200	\$20	\$35	\$50	\$35
VBC_\$3000_\$7000_\$35/\$50_30%	\$3,000 / \$6,000	30%	\$7,000 / \$14,000	\$35	\$50	\$200	\$25	\$35	\$50	\$35
VBC_\$3000_\$7150_\$25/\$45_20%	\$3,000 / \$6,000	20%	\$7,150 / \$14,300	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$3000_\$7150_\$35/\$55_30%	\$3,000 / \$6,000	30%	\$7,150 / \$14,300	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$3000_\$8900_\$25/\$45_20%	\$3,000 / \$6,000	20%	\$8,900 / \$17,800	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$3000_\$8900_\$35/\$55_30%	\$3,000 / \$6,000	30%	\$8,900 / \$17,800	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$3500_\$7150_\$25/\$45_20%	\$3,500 / \$7,000	20%	\$7,150 / \$14,300	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$3500_\$7150_\$35/\$55_30%	\$3,500 / \$7,000	30%	\$7,150 / \$14,300	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$3500_\$8900_\$25/\$45_20%	\$3,500 / \$7,000	20%	\$8,900 / \$17,800	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$3500_\$8900_\$35/\$55_30%	\$3,500 / \$7,000	30%	\$8,900 / \$17,800	\$35	\$55	\$200	\$35	\$35	\$55	\$35
VBC_\$4000_\$7150_\$25/\$45_20%	\$4,000 / \$8,000	20%	\$7,150 / \$14,300	\$25	\$45	\$200	\$25	\$25	\$45	\$25
VBC_\$4000_\$7150_\$35/\$55_30%	\$4,000 / \$8,000	30%	\$7,150 / \$14,300	\$35	\$55	\$200	\$55	\$35	\$55	\$35

2023 *Medical plan* benefit table

	Plan name	С	alendar year c	osts				Care & se	ervices		
		Annual deductible per person / family	Coinsurance	Annual OOP maximum per person / family	PCP visits	Specialist visits	Emergency room visits	Virtual office visits	Mental health & substance use disorder office visits	Outpatient rehabilitation	Acupuncture & spinal manipulations
		In	n-network member	pays				In-network me	ember pays		
	VBC_\$4000_\$8900_\$25/\$45_20%	\$4,000 / \$8,000	20%	\$8,900 / \$17,800	\$25	\$45	\$200	\$25	\$25	\$45	\$25
	VBC_\$4000_\$8900_\$35/\$55_30%	\$4,000 / \$8,000	30%	\$8,900 / \$17,800	\$35	\$55	\$200	\$35	\$35	\$55	\$35
	VBC_\$4500_\$7150_\$25/\$45_20%	\$4,500 / \$9,000	20%	\$7,150 / \$14,300	\$25	\$45	\$200	\$25	\$25	\$45	\$25
	VBC_\$4500_\$7150_\$35/\$55_30%	\$4,500 / \$9,000	30%	\$7,150 / \$14,300	\$35	\$55	\$200	\$35	\$35	\$55	\$35
	VBC_\$4500_\$8900_\$25/\$45_20%	\$4,500 / \$9,000	20%	\$8,900 / \$17,800	\$25	\$45	\$200	\$25	\$25	\$45	\$25
	VBC_\$4500_\$8900_\$35/\$55_30%	\$4,500 / \$9,000	30%	\$8,900 / \$17,800	\$35	\$55	\$200	\$35	\$35	\$55	\$35
	VBC_\$5000_\$7150_\$25/\$45_20%	\$5,000 / \$10,000	20%	\$7,150 / \$14,300	\$25	\$45	\$200	\$25	\$25	\$45	\$25
	VBC_\$5000_\$7150_\$35/\$55_30%	\$5,000 / \$10,000	30%	\$7,150 / \$14,300	\$35	\$55	\$200	\$35	\$35	\$55	\$35
Connexus Network	VBC_\$5000_\$8150_\$30/\$45_20%	\$5,000 / \$10,000	20%	\$8,150 / \$16,300	\$30	\$45	\$200	\$25	\$30	\$45	\$30
ΕW	VBC_\$5000_\$8550_\$35/\$50_20%	\$5,000 / \$10,000	20%	\$8,550 / \$17,100	\$35	\$50	\$200	\$20	\$35	\$50	\$35
e. Z	VBC_\$5000_\$8550_\$30/\$45_30%	\$5,000 / \$10,000	30%	\$8,550 / \$17,100	\$30	\$45	\$200	\$25	\$30	\$45	\$30
Sr	VBC_\$5000_\$8550_\$35/\$50_30%	\$5,000 / \$10,000	30%	\$8,550 / \$17,100	\$35	\$50	\$200	\$25	\$35	\$50	\$35
IXa	VBC_\$5000_\$8900_\$25/\$45_20%	\$5,000 / \$10,000	20%	\$8,900 / \$17,800	\$25	\$45	\$200	\$25	\$25	\$45	\$25
иu	VBC_\$5000_\$8900_\$35/\$55_30%	\$5,000 / \$10,000	30%	\$8,900 / \$17,800	\$35	\$55	\$200	\$35	\$35	\$55	\$35
Ö	VBC_\$6000_\$7150_\$25/\$45_20%	\$6,000 / \$12,000	20%	\$7,150 / \$14,300	\$25	\$45	\$200	\$25	\$25	\$45	\$25
	VBC_\$6000_\$7150_\$35/\$55_30%	\$6,000 / \$12,000	30%	\$7,150 / \$14,300	\$35	\$55	\$200	\$35	\$35	\$55	\$35
	VBC_\$6000_\$8900_\$25/\$45_20%	\$6,000 / \$12,000	20%	\$8,900 / \$17,800	\$25	\$45	\$200	\$25	\$25	\$45	\$25
	VBC_\$6000_\$8900_\$35/\$45_30%	\$6,000 / \$12,000	30%	\$8,900 / \$17,800	\$35	\$45	\$200	\$35	\$35	\$45	\$35
	VBC_\$6000_\$8900_\$35/\$45_30%	\$6,000 / \$12,000	30%	\$8,900 / \$17,800	\$35	\$45	\$200	\$35	\$35	\$45	\$35
	VBC_\$7000_\$8900_\$25/\$45_20%	\$7,000 / \$14,000	20%	\$8,900 / \$17,800	\$25	\$45	\$200	\$25	\$25	\$45	\$25
	VBC_\$7000_\$8900_\$35/\$55_30%	\$7,000 / \$14,000	30%	\$8,900 / \$17,800	\$35	\$55	\$200	\$35	\$35	\$55	\$35
	VBC_\$8000_\$8900_\$25/\$45_20%	\$8,000 / \$16,000	20%	\$8,900 / \$17,800	\$25	\$45	\$200	\$25	\$25	\$45	\$25
	VBC_\$8000_\$8900_\$35/\$55_30%	\$8,000 / \$16,000	30%	\$8,900 / \$17,800	\$35	\$55	\$200	\$35	\$35	\$55	\$35

Medical disclaimer: This is a summary of the health plan benefits and is not a contract; limitations and exclusions apply. See the medical plan benefit summaries, SBCs, handbook or contract for details. If there is any discrepancy between the information in this summary and the contract, it is the contract that will control. These benefits and Moda Health policies are subject to change in order to be compliant with state and federal guidelines. This brochure provides summaries of various health plans and is not a contract. If there is any discrepancy between the summaries and the contract, it is the contract that will control.

	Plan name	С	alendar year c	osts				Care & se	rvices		
		Annual deductible per person / family	Coinsurance	Annual OOP maximum per person / family	PCP visits	Specialist visits	Emergency room visits	Virtual office visits	Mental health & substance use disorder office visits	Outpatient rehabilitation	Acupuncture & spinal manipulations
		ln	-network member	pays				In-network me	mber pays		
	PPO_\$500_\$3000_\$25_20%	\$500 / \$1,000	20%	\$3,000 / \$6,000	\$25	\$25	\$15	\$20	\$25	\$25	\$25
	PPO_\$500_\$5000_\$30_20%	\$500 / \$1,000	20%	\$5,000 / \$10,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
	PPO_\$1000_\$3000_\$25_20%	\$1,000 / \$2,000	20%	\$3,000 / \$6,000	\$25	\$25	\$15	\$20	\$25	\$25	\$25
	PPO_\$1000_\$5000_\$25_20%	\$1,000 / \$2,000	20%	\$5,000 / \$10,000	\$25	\$25	\$15	\$20	\$25	\$25	\$25
	PPO_\$1000_\$3000_\$30_20%	\$1,000 / \$2,000	20%	\$3,000 / \$6,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
	PPO_\$1000_\$5000_\$30_20%	\$1,000 / \$2,000	20%	\$5,000 / \$10,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
	PPO_\$1500_\$3000_\$25_20%	\$1,500 / \$3,000	20%	\$3,000 / \$6,000	\$25	\$25	\$15	\$20	\$25	\$25	\$25
	PPO_\$1500_\$5000_\$25_20%	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$25	\$25	\$15	\$20	\$25	\$25	\$25
	PPO_\$1500_\$3000_\$30_20%	\$1,500 / \$3,000	20%	\$3,000 / \$6,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
논	PPO_\$1500_\$5000_\$30_20%	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
Network	PPO_\$2000_\$4000_\$25_20%	\$2,000 / \$4,000	20%	\$4,000 / \$8,000	\$25	\$25	\$15	\$20	\$25	\$25	\$25
Vet	PPO_\$2000_\$6000_\$25_20%	\$2,000 / \$4,000	20%	\$6,000 / \$12,000	\$25	\$25	\$15	\$20	\$25	\$25	\$25
	PPO_\$2000_\$4000_\$30_20%	\$2,000 / \$4,000	20%	\$4,000 / \$8,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
Connexus	PPO_\$2000_\$6000_\$30_20%	\$2,000 / \$4,000	20%	\$6,000 / \$12,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
nu	PPO_\$1500_\$3000_\$30_30%	\$1,500 / \$3,000	30%	\$3,000 / \$6,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
ပိ	PPO_\$1500_\$5000_\$30_30%	\$1,500 / \$3,000	30%	\$5,000 / \$10,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
	PPO_\$2000_\$4000_\$30_30%	\$2,000 / \$4,000	30%	\$4,000 / \$8,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
	PPO_\$2000_\$6000_\$30_30%	\$2,000 / \$4,000	30%	\$6,000 / \$12,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
	PPO_\$3000_\$5000_\$30_20%	\$3,000 / \$6,000	20%	\$5,000 / \$10,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
	PPO_\$3000_\$7000_\$30_20%	\$3,000 / \$6,000	20%	\$7,000 / \$14,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
	PPO_\$3000_\$5000_\$25_30%	\$3,000 / \$6,000	30%	\$5,000 / \$10,000	\$25	\$25	\$15	\$20	\$25	\$25	\$25
	PPO_\$3000_\$7000_\$25_30%	\$3,000 / \$6,000	30%	\$7,000 / \$14,000	\$25	\$25	\$15	\$20	\$25	\$25	\$25
	PPO_\$3000_\$5000_\$30_30%	\$3,000 / \$6,000	30%	\$5,000 / \$10,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
	PPO_\$3000_\$7000_\$30_30%	\$3,000 / \$6,000	30%	\$7,000 / \$14,000	\$30	\$30	\$20	\$20	\$30	\$30	\$30
	PPO_\$5000_\$8550_\$25_30%	\$5,000 / \$10,000	30%	\$8,550 / \$17,100	\$25	\$25	\$15	\$20	\$25	\$25	\$25
	HDHP_\$3000_\$3000_0%	\$3,000 / \$6,000	0%	\$3,000 / \$6,000	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible
s ct	HDHP_\$2800_\$5000_20%	\$2,800 / \$5,600	20%	\$5,000 / \$10,000	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible
Sele Sele ork	HDHP_\$2800_\$5000_30%	\$2,800 / \$5,600	30%	\$5,000 / \$10,000	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible
Connexus & Moda Select Networks	HDHP_\$3000_\$5000_20%	\$3,000 / \$6,000	20%	\$5,000 / \$10,000	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible
S & Z	HDHP_\$5000_\$5000_0%	\$5,000 / \$10,000	0%	\$5,000 / \$10,000	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible
	HDHP_\$3000_\$7000_30%	\$3,000 / \$6,000	30%	\$7,000 / \$14,000	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible

2023 **Pharmacy** benefit table

	Value	Select	Preferred	Non-preferred	Specialty	Non-preferred specialty
R1.OR.23 \$2/\$10/\$30/\$50/\$150/30%	\$2	\$10	\$30	\$50	\$150	30%
R2.OR.23 \$2 / \$15 / \$45 / \$75 / \$225 / 30%	\$2	\$15	\$45	\$75	\$225	30%
R3.OR.23 \$2 / \$20 / \$60 / 50% / \$180 / 50%	\$2	\$20	\$60	50%	\$180	50%
R4.OR.23 \$2 / \$15 / 50%	\$2	\$15	\$20	NA	NA	NA

^{*} For POS, Value and PPO Plans: Deductible does not apply on standalone pharmacy options for all tiers. For HDHPs, deductible applies to all pharmacy except Value tier.

Expect quality pharmacy benefits

Quality prescription coverage is at the heart of a great health plan. We're here to support the pharmacy needs of your clients' employees, every step of the way.

Members have access to comprehensive prescription drug benefits through the Navitus pharmacy network. The Navitus Network includes over 90% of pharmacies in Oregon, plus more than 58,000 pharmacies nationwide.

This means they can fill prescriptions almost anywhere, including these local and national drug store chains:

 Safeway and Albertsons

CVS

- Costco
- Walgreens
- Fred Meyer
- Walmart
- Rite Aid

We also offer mail-order pharmacy services through Postal Prescription Services (PPS) and Costco.







Ready to choose better health *for your clients?*

Questions?

Contact your Moda Health Sales representative

- quotes@modahealth.com
 - 800-578-1402 | TTY users, please call 711
- modahealth.com

Portland office (corporate headquarters)
601 SW Second Ave., Portland, OR 97204-3156

For a list of medical plan exclusions, any reduction or limitations, contact Moda Health. These benefits and Moda Health policies are subject to change in order to be compliant with state and federal guidelines. Health plans provided by Moda Health Plan, Inc.

