



	Gold plan	Silver plan	Bronze plan
	Moda Pathways Oregon Gold 1500	Moda Pathways Oregon Silver 5000	Moda Pathways Oregon Bronze 9000
What you pay for the <i>in-network</i> care you receive each year			
Deductible per person	\$1,500	\$5,000	\$9,000
Deductible per family	\$3,000	\$10,000	\$18,000
Out-of-pocket max per person	\$8,500	\$10,000	\$12,000
Out-of-pocket max per family	\$17,000	\$20,000	\$24,000
Out-of-network benefits available*	✕	✕	✕
Benefits that make up your plan and what you pay			
Primary Care Provider (PCP) office visit	\$15 per visit	\$15 per visit	\$80 per visit
Specialist office visit	\$30 per visit	\$70 per visit	\$135 per visit
Urgent care visit	\$30 per visit	\$70 per visit	\$135 per visit
Virtual care visit	\$10 per visit	\$10 per visit	\$10 per visit
Outpatient diagnostic X-ray & lab	20% after deductible	20% after deductible	20% after deductible
Emergency room visit	20% after deductible	20% after deductible	20% after deductible
Acupuncture and spinal manipulation services	\$15 per visit	\$15 per visit	\$80 per visit
Behavioral health office visit	\$15 per visit	\$15 per visit	\$80 per visit
Physical, speech or occupational therapy visit	\$30 per visit	\$70 per visit	\$135 per visit
Inpatient/outpatient care	20% after deductible	20% after deductible	20% after deductible
Prescription medications ¹			
Value	\$15	\$15	\$15
Select	\$15	\$20	\$15
Preferred	40%	40%	40% after deductible
Non-Preferred	50%	50% after deductible	50% after deductible
Preferred Specialty	45%	45% after deductible	45% after deductible
Non-Preferred Specialty	50%	50% after deductible	50% after deductible
Things to consider when choosing your plan			
Features and special benefits included in your plan	  	  	   

¹ One copay per 30-day supply. \$35 maximum per 30-day supply of insulin

Plan highlights

 **Choose a primary care group**
To help you manage your health, you will be required to select an in-network primary care group.

 **EPO plans**
Providers outside of the Moda Pathways Network are not covered, and you will be responsible for the full cost of out-of-network care, except for the following: medical emergency services, retail pharmacy services and services at an in-network facility when you cannot choose an in-network provider.

* Some exceptions do apply.
Scan the QR code, then click on Oregon to view Summaries of Benefits and Coverage (SBCs) with detailed information on each plan.



 **Health savings account (HSA)**
Our HSA-compatible bronze plan gives you flexibility and choice. Once you have set up an HSA with the financial institution of your choice or our partner, BenefitHelp Solutions, you can use HSA tax-free dollars to pay for deductibles, coinsurance and other qualified expenses not covered by your health plan.

 Included with *all* plans:

-  Unlimited behavioral health in-person office visits¹
-  Up to 30 outpatient rehabilitation and 30 habilitation visits in a calendar year
-  Up to 12 acupuncture and 20 spinal manipulation visits in a calendar year
-  Pediatric vision under age 19, including vision exam, glasses, lenses or contacts once per calendar year

These benefits and Moda Health Plan policies are subject to change in order to be compliant with state and federal guidelines. This document 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. Limitations and exclusions apply. See member handbook for details.

	Moda Pathways Oregon Silver 5000		
	73% CSR	87% CSR	94% CSR
What you pay for the <i>in-network</i> care you receive each year			
Deductible per person	\$2,500	\$500	\$300
Deductible per family	\$5,000	\$1,000	\$600
Out-of-pocket max per person	\$9,000	\$3,400	\$1,800
Out-of-pocket max per family	\$18,000	\$6,800	\$3,600
Out-of-network benefits available*	✕	✕	✕
Benefits that make up your plan and what you pay			
Primary Care Provider (PCP) office visit	\$15 per visit	\$15 per visit	\$10 per visit
Specialist office visit	\$70 per visit	\$40 per visit	\$20 per visit
Urgent care visit	\$70 per visit	\$40 per visit	\$20 per visit
Virtual care visit	\$10 per visit	\$10 per visit	\$10 per visit
Outpatient diagnostic X-ray & lab	20% after deductible	20% after deductible	20% after deductible
Emergency room visit	20% after deductible	20% after deductible	20% after deductible
Acupuncture and spinal manipulation services	\$15 per visit	\$15 per visit	\$10 per visit
Behavioral health office visit	\$15 per visit	\$15 per visit	\$10 per visit
Physical, speech or occupational therapy visit	\$70 per visit	\$40 per visit	\$20 per visit
Inpatient/outpatient care	20% after deductible	20% after deductible	20% after deductible
Prescription medications ¹			
Value	\$15	\$10	\$5
Select	\$20	\$10	\$5
Preferred	40%	40%	40%
Non-Preferred	50% after deductible	50% after deductible	50% after deductible
Preferred Specialty	45% after deductible	45% after deductible	45% after deductible
Non-Preferred Specialty	50% after deductible	50% after deductible	50% after deductible
Things to consider when choosing your plan			
Features and special benefits included in your plan	! PCP +	! PCP +	! PCP +

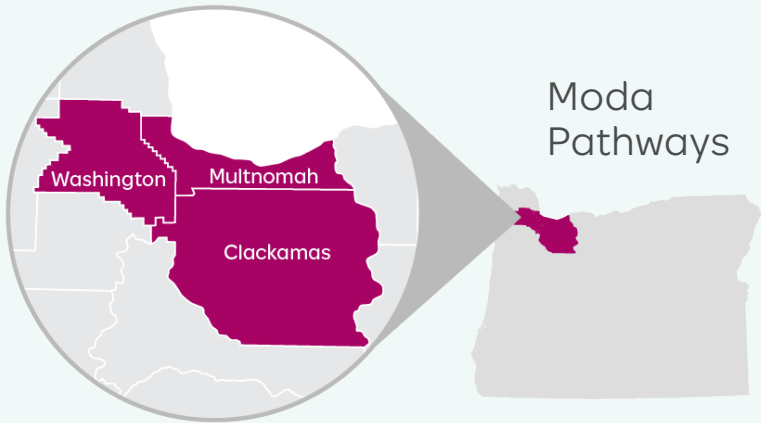
1 One copay per 30-day supply. \$35 maximum per 30-day supply of insulin

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Care starts with the right network

Moda Pathways Network

With the **Moda Pathways Network**, you'll enjoy access to the Providence Health System of trusted providers and facilities. Your Moda Pathways plan provides access to all of your plan benefits close to home but does not include full coverage statewide.



The **Moda Pathways Network** is for residents of the following counties:

Clackamas Multnomah Washington

Members have access to:



Care when inside of Oregon: When you are outside of the tri-county area, you will only have coverage for urgent and emergency care through the Moda Select Pathways travel network.

Care when outside of Oregon: When you're traveling outside of Oregon, you will only have coverage for urgent and emergency care through the Aetna® PPO Network (Aetna Signature Administrators®).

To get started, go to modahealth.com/find-care and select your network.

For plan highlights and symbol key, please refer to the reverse side of the placemat →