Health plans for every body

Hello. Welcome to Moda Health and ODS, the place you go when you want more than a health plan – because good health is about so much more than just the plan details.

You know your health relies on quality plans, programs, online tools and, most important, partnerships to help guide you. We have all of that and a little bit more.

We’re excited to partner with PEBB and state employees and their families on a new journey to be better. You can count on us, every step of the way.

For our part, we’ll provide a network of doctors and specialists, expert health coaches, caring customer service reps and some of the greatest innovators in healthcare. For your part, we ask that you come ready to be the MVP of your health.

Because, together, we can be more. We can be better.
Resources for your health journey

Moda Health is here to help you get well sooner when you’re sick or injured and live well the rest of the time. We even have special programs and clinical teams to give you support in reaching your health goals.

Get started with myModa
You’ll love everything you can do at myModa, your personalized member website. It’s simple to access on your computer or mobile device. As a member, log in at modahealth.com/pebb to:
> See and manage your benefits
> Check claims and find claim forms
> Review electronic explanations of benefits (EOBs)
> View and download your member ID card
> Use Be Better tools to get and stay healthy
> Connect with health professionals
> Look up drug prices before you buy

Be Better tools
These handy resources let you take charge of your healthy potential. They’re free to members and come with every health plan. Use them to create a healthier you! Simply log in to myModa, your personalized member website, to get started. Here’s what you’ll find.

‘Momentum’ healthy living dashboard
Take charge of your health — and follow your progress. It’s easy with the healthy living dashboard, Momentum, powered by Moda Health. Log in to myModa and look for Momentum to:
> Take a health assessment as a Moda Health member in 2015 and see your ‘health age’
> Use healthy lifestyle apps, like Weight Tracker and Blood Pressure Tracker
> Research conditions and medications
> Set goals and track progress
> Create a Family Health Record
> Access health content and resources

Health coaching
Need a hand with your health? Our health coaches use evidence-based practices to help you set goals and feel your best. You’ll also get one-on-one support when you need it. Our nine care programs include:
> Cardiac Care
> Dental Care
> Depression Care
> Diabetes Care
> Lifestyle Coaching
> Women’s Health & Maternity Care
> Respiratory Care
> Spine & Joint Care

Care coordination and case management
When you’re sick, need hospitalization or surgery, or are seriously injured, we’ll take some of the work off your plate — so you can focus on healing. Our nurse case managers and care coordinators will help you:
> Navigate the healthcare system
> Communicate and work with your providers to support your care plan
> Understand your benefits
> Arrange medically necessary, covered services ordered by your provider
> Connect with community resources
To connect with a case manager, just call 800-592-8283.

eDoc
Email a health professional about non-urgent health concerns. eDoc keeps it private and customized to you. Connect with:
> Board-certified physicians
> Licensed psychologists
> Pharmacists
> Dentists
> Dietitians
> Fitness experts
eDocVoice — leave a message for a provider, and you’ll get a phone response within 24 hours

Nurse line
Need quick advice? The friendly nurses on our Registered Nurse Advice Line are ready for you to call, 24 hours a day. The nurses can help with basic health situations and:
> Explain symptoms
> Suggest treatment for minor injuries and burns
> Recommend home cold and flu remedies
> Advise when to make a doctor’s appointment
> Suggest when to visit urgent care or the emergency room
To talk to a registered nurse, just call 866-321-7580.

More ways to a healthy weight
Losing weight and staying on track isn’t always easy. As a Moda Health PEBB member you can participate at no cost in Weight Watchers® programs — up to four times a year:
> Attend 13-week Weight Watchers® classes in your community or at work
> Get a 3-month subscription to Weight Watchers® online tools and resources
Health Assessment
Understanding your health risks — whatever your age — can help improve your overall health. Our Health Assessment tool is a personalized online survey that helps you learn:

- Whether your health age equals your actual age
- If you are at risk for various health conditions
- Which of your habits are healthy
- What you can do to improve your health

To take the private 15-minute Health Assessment, log in to your myModa account and choose "Momentum, powered by Moda Health" then click on the Health Assessment app.

Quitting tobacco
Stop smoking or chewing tobacco for good. The Quit for Life Program makes kicking the habit a little easier. You’ll get advice from a Quit Coach and a custom quit plan that works for you.

Take advantage of these perks:

- Phone, text and online support from Quit Coaches, 24 hours a day
- Tips on dealing with cravings
- Information about medications that can help you quit
- Free tobacco cessation drugs prescribed by an in-network provider
- Useful articles, videos and online tracking tools

Dental Optimizer™
This set of online tools makes great dental health a little easier. From risk assessment quizzes to a treatment cost calculator, you can use it to:

- Ask a dentist questions
- Learn about preventing dental diseases
- Look up new and effective treatments
- Find out how to lower your costs

Drug price checker
Use this tool to find out prescription drug prices ahead of time. Simply enter the medication name and choose from the list of matching drugs to find the cost by quantity. You also can see a list of mail-order and retail pharmacies.

The drug price check tool can help you save money by showing you when a lower-cost, generic option is available. It also shows you how much is covered by your plan and what you’ll pay. Use it to get an estimated price from a specific pharmacy, too.

Treatment Cost Navigator
The Treatment Cost Navigator provides useful information about:

- Costs associated with a specific treatment
- The portion of costs covered by your plan
- Out-of-pocket cost, based on your benefits

You also can use our Treatment Cost Navigator to compare provider costs, as well as search by provider, procedure, distance, language, gender, network status or specialty.

Together, we can find a way to better health.
Access care, wherever you are

Health happens, whether you’re at home or on the road. We want to make sure you stay covered, from the valley to the mountains to the big city. So, we’ve made it easy to find in-network care through our Synergy or Summit Networks.

Enjoy more ways to feel right at home

When you choose a Summit or Synergy plan, you get you more than just coverage. You’ll also be part of a Moda Medical Home – the place you go for care and where you see your preferred doctors. Your provider team gets to know you and works together to keep you healthy. They create a strategy to support your way to wellness over time. It’s a personal touch to your healthcare that can’t be beat.

Lots of value you’ll love

Summit and Synergy plans provide great benefits with low out-of-pocket costs. For example, full-time plans* give you:

- Free in-network preventive care, including labs and screenings
- $5 in-network specialist visits
- Doctors who connect with each other to coordinate your care
- Medical $250 deductible per person
- Pharmacy benefits, including $0 copay for value medications and vaccines
- Cost-effective mail-order pharmacy options

Options near you

Depending on where you live or work, enroll in the Synergy Network/plan or Summit Network/plan. Simply select a Moda Medical Home with the doctors you like, in the network nearest you. Here’s the breakdown:

Summit Network
Live or work in eastern Oregon? This network connects you with high-quality care at an affordable cost. Members pick a Moda Medical Home from a diverse and wide selection of participating providers, including:

- Good Shepherd Medical Center
- Grande Ronde Hospital
- St. Anthony Hospital
- Lake Health District Hospital
- Harney District Hospital
- Blue Mountain Hospital
- Wallowa Memorial Hospital
- Pioneer Memorial Hospital – Heppner
- Saint Alphonsus Medical Center – Baker City, Nampa and Ontario
- Saint Alphonsus Regional Medical Center – Boise
- Trias Southridge Hospital (formally Kennewick General Hospital) and Trios Health Medical Group
- Walla Walla General Hospital and Walla Walla Clinic

This network covers these counties:
Baker, Gilliam, Grant, Harney, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wheeler

Synergy Network
If you live or work in the Portland Metro, SW Washington, Salem or Eugene areas, or parts of the North Coast or the Columbia River Gorge communities, this is your network. It connects you with high-quality care, close to home. Members choose a Moda Medical Home from a diverse and wide selection of participating providers, including:

- Oregon Health & Science University (OHSU)
- Salem Health
- Salem Clinic
- Adventist Health
- Tranquility Healthcare
- Legacy Health
- PeaceHealth
- Samaritan Health
- Tillamook Regional Medical Center
- Mid-Columbia Medical Center
- Columbia Memorial Hospital

This network covers these counties: Benton, Clackamas, Clark, Clatsop, Lane, Linn, Marion, Multnomah, Polk, Tillamook, Wasco, Washington, Yamhill

Travel with peace of mind

When you hit the road, care is never far. When traveling outside of your primary service area, members can access in-network care through the PHCS Healthy Directions Network.* So go ahead and explore.

* Part-time Summit and Synergy plan benefits differ from the full-time plans

* Our travel network, available in the United States, is not an alternative to in-network care. Traveling for the purpose of seeking care does not qualify for the travel network benefit. Members must seek in-network services whenever possible, and preauthorization is required for inpatient services.
How your health plan works

Better than anyone, you understand that knowledge is power. When you get to know your plan, you can get the most out of your benefits.

Preventive care
Preventive care refers to measures taken to prevent or avoid diseases or injuries. Preventive care includes the following:
- Periodic health exams
- Well-baby exams
- Routine women’s exams and mammography
- Routine immunizations
- Colorectal cancer screening

Additional Cost Tier
The Additional Cost Tier (ACT) refers to select procedures, including spine procedures, knee and hip replacement, arthroscopies (knee and shoulder), bariatric surgery, spinal injections for pain, upper GI Endoscopy, bunionectomy and sinus surgery.

The ACT is designed to encourage exploration of less invasive treatment alternatives. It is important to understand and consider all factors — including additional costs — as you discuss treatment options with your provider.

Professional services
Professional services are primary care and specialist office visit services performed by a licensed healthcare provider. When you see a participating Moda Health medical home provider, you will have a better benefit for chronic and primary care office visits.

Chronic care services
Chronic care services are office visits to help you manage certain conditions, including asthma, heart conditions, cholesterol, high blood pressure and diabetes.

Moda Health medical homes
Our medical homes consist of local primary care providers who deliver high-quality, individualized care and integrated support. Medical home providers are encouraged to obtain or be working toward recognition as a Patient-Centered Primary Care Home (PCPCH) through the state-run PCPCH program. PCPCHs are clinics that have been recognized for their commitment to a patient-centered approach to care.

When you seek primary care from a Moda Health medical home provider, you’ll have lower coinsurance. Learn more at modahealth.com/pebb.

Choosing a Moda Medical Home provider
Both Summit and Synergy Networks have lots of great doctors who are part of a Moda Medical Home. After you are enrolled with Moda Health, you’ll choose a Moda Medical Home provider. Each of your covered family members can pick the same provider, or a different one — it’s up to each of you.

After you receive your Moda Health ID card, follow the steps in your member handbook to let us know which provider you have chosen.

To find a provider, visit modahealth.com and use our Find Care tool. Just search as a guest and choose the Summit or Synergy Network. Then locate medical home providers near you. Be sure to check back often, since we add new providers all the time.
Rx from your head to your toes

As the administrator of the Oregon Prescription Drug Program (OPDP), we take pride in actively managing your pharmacy benefits. We do our best to provide quality, comprehensive coverage that reflects the most up-to-date industry standards and the changes occurring in the marketplace.

We understand that each member is unique. Through the prescription program, you can access an open formulary with options under the value, generic and brand tiers.

**Pharmacy plan savings**

There are a few ways to save on prescription medication costs. Use your 90-day mail-order benefit through Postal Prescription Services (PPS). You can receive significant savings by using the mail-order benefit. You also can fill a 90-day prescription at select Choice 90 retail pharmacies.

Get more savings options through our preferred pharmacy partners. Just visit modahealth.com/pebb and use Find Care to locate a pharmacy near you.

**Value medications**

Value medications include commonly prescribed products used to treat chronic medical conditions and preserve health. They are identified — based on the latest clinical information and medical literature — as being safe, effective, cost-preferred treatment options.

The value tier includes products for the following health issues:
- Asthma
- Heart, cholesterol, high blood pressure
- Diabetes
- Osteoporosis
- Depression

For a list of medications included under the value tier, visit modahealth.com/pebb.

**Get vaccinated**

Vaccinations not only protect adults and children from developing a potentially serious disease, but they also protect the community by reducing the spread of infectious disease. If enough people are immunized, diseases are less likely to be transmitted through a population.

Through your Moda Health pharmacy benefit, you can receive convenient immunization services at in network retail pharmacies for no copayment.

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Dental plans details

Healthy teeth are happy teeth. And, protecting your oral health is good for your whole body. With ODS dental coverage, you’ll have access to Delta Dental, the nation’s largest dental network. Your smile will thank you, wherever you roam.

**Dental plan highlights**

- Freedom to choose your dentist
- Filed-fee savings from participating dentists
- Predetermination of benefits if requested in a pretreatment plan
- No claim forms
- Fast and accurate claims payments
- Superior customer service

**Is my dentist in the network?**

With our big dental networks, chances are good your dentist participates. To find out, visit modahealth.com and use our Find Care tool. Choose a dental network and then search for participating dentists near you. You can look up:
- Delta Dental Premier dentists
- Delta Dental PPO dentists
- Delta Dental dentists nationwide

**Pick from two plans**

Both our PPO and Premier dental plans have participating providers who will not charge more than ODS’ allowed amount. However, you will pay less with participating in-network providers on the PPO plan.

**Delta Dental PPO Network**

The preferred provider option (PPO) gives you access to the largest PPO network in Oregon and across the country. Members will enjoy better benefits seeing dentists in the PPO network. It includes more than 1,100 participating providers in Oregon.

**Delta Dental Premier Network**

The Premier option connects you with the largest dental network in Oregon and nationally. It includes more than 2,300 providers in Oregon. If you have the Delta Dental Premier plan, you can save money by seeing dentists in the Premier Network.

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* You can enroll in ODS dental coverage even if you are not enrolled in a Moda Health medical plan. Waiting periods may apply to certain ODS enrollees.
Full-time plans at-a-glance

### Medical plan

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Out-of-network, you pay</th>
<th>In-network, you pay</th>
<th>Full-time</th>
<th>Part-time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan-year costs</td>
<td>Deductible per person 1</td>
<td>$250</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td></td>
<td>Deductible per family 1</td>
<td>$750</td>
<td>$1,500</td>
<td>$1,500</td>
</tr>
<tr>
<td></td>
<td>Out-of-pocket max per person</td>
<td>$1,500</td>
<td>$2,500</td>
<td>$2,500</td>
</tr>
<tr>
<td></td>
<td>Out-of-pocket max per family</td>
<td>$5,000</td>
<td>$7,500</td>
<td>$7,500</td>
</tr>
<tr>
<td>Preventive care</td>
<td>Deductible per person (includes medical and pharmacy)</td>
<td>$2,500</td>
<td>$2,500</td>
<td>$2,500</td>
</tr>
<tr>
<td></td>
<td>Deductible per family (includes medical and pharmacy)</td>
<td>$7,500</td>
<td>$7,500</td>
<td>$7,500</td>
</tr>
<tr>
<td></td>
<td>Maximum cost share (per person), includes preventive care</td>
<td>$1,500</td>
<td>$2,500</td>
<td>$2,500</td>
</tr>
<tr>
<td></td>
<td>Maximum cost share (per family), includes preventive care</td>
<td>$4,500</td>
<td>$7,500</td>
<td>$7,500</td>
</tr>
</tbody>
</table>

1. Deductible for observation and inpatient hospital services is $50 per day, up to $250 per admission.
2. Preventive and diagnostic services covered in full.
3. Out-of-pocket maximums do not apply to preventive care.

### Pharmacy plan

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Full-time</th>
<th>Part-time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan-year costs</td>
<td>Deductible per person</td>
<td>$50</td>
</tr>
<tr>
<td></td>
<td>Deductible per family</td>
<td>$150</td>
</tr>
<tr>
<td></td>
<td>Out-of-pocket max per person</td>
<td>$1,000</td>
</tr>
<tr>
<td></td>
<td>Out-of-pocket max per family</td>
<td>$3,000</td>
</tr>
<tr>
<td>Value 1</td>
<td></td>
<td>$0</td>
</tr>
<tr>
<td>Generic</td>
<td></td>
<td>$10</td>
</tr>
<tr>
<td>Brand</td>
<td></td>
<td>$30</td>
</tr>
</tbody>
</table>

1. Brand costs are reimbursed at a lower benefit level.

### Dental plans

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Full-time</th>
<th>Part-time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan-year costs</td>
<td>Deductible per person</td>
<td>$50</td>
</tr>
<tr>
<td></td>
<td>Deductible per family</td>
<td>$150</td>
</tr>
<tr>
<td></td>
<td>Benefit maximum</td>
<td>$1,750</td>
</tr>
<tr>
<td>Preventive and diagnostic services 1</td>
<td></td>
<td>Covered in full</td>
</tr>
<tr>
<td>X-rays</td>
<td></td>
<td>Covered in full</td>
</tr>
<tr>
<td>Fissure sealants</td>
<td></td>
<td>Covered in full</td>
</tr>
</tbody>
</table>

1. Preventive and diagnostic services covered in full.

### Durable medical equipment & supplies

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Full-time</th>
<th>Part-time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life support equipment</td>
<td>Covered in full</td>
<td>N/A</td>
</tr>
<tr>
<td>Other durable medical equipment and supplies</td>
<td>Covered in full</td>
<td>N/A</td>
</tr>
</tbody>
</table>

### Miscellaneous

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Full-time</th>
<th>Part-time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic services</td>
<td>Oral Surgery (surgical extractions)</td>
<td>1st year – 20%</td>
</tr>
<tr>
<td></td>
<td>2nd year – 10%</td>
<td>10%</td>
</tr>
<tr>
<td></td>
<td>3rd year – Covered in full</td>
<td>Covered in full</td>
</tr>
<tr>
<td>Endodontic (pulp therapy &amp; root canal filling)</td>
<td></td>
<td>20%</td>
</tr>
<tr>
<td>Periodontics (treatment of tissues supporting the teeth)</td>
<td></td>
<td>20%</td>
</tr>
<tr>
<td>Orthodontic services</td>
<td></td>
<td>20%</td>
</tr>
<tr>
<td>Implants</td>
<td></td>
<td>20%</td>
</tr>
<tr>
<td>Crowns</td>
<td></td>
<td>50%</td>
</tr>
<tr>
<td>Cost restorations</td>
<td></td>
<td>50%</td>
</tr>
<tr>
<td>Dentures and Bridge Work (construction or repair of fixed bridges, partials, and complete dentures)</td>
<td></td>
<td>50%</td>
</tr>
</tbody>
</table>

For limitations and exclusions, visit modahealth.com/pebb and refer to your Member Handbook.

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1: Deductible: $250/individual, $300/family applies for non-HEM participant.
2: Deductible waived on first 4 PCP visits in plan, per calendar year.
3: Preventive and diagnostic services covered in full.
4: Certain preventive and diagnostic services, including vaccines and mammograms, are covered in full.
5: Benefit payments increase by 10% each plan year provided the individual has visited the dentist at least once during the previous plan year.
6: Out-of-network services are reimbursed at a lower benefit level.
Part-time plans at-a-glance

<table>
<thead>
<tr>
<th>Medical plan</th>
<th>Summit or Synergy plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Plan-year costs</strong></td>
<td>In-network, you pay</td>
</tr>
<tr>
<td>Deductible per person</td>
<td>$50</td>
</tr>
<tr>
<td>Deductible per family</td>
<td>$1,500</td>
</tr>
<tr>
<td>Out-of-pocket max per person</td>
<td>$4,500</td>
</tr>
<tr>
<td>Out-of-pocket max per family</td>
<td>$13,500</td>
</tr>
<tr>
<td>Maximum cost share (per person), includes medical and pharmacy</td>
<td>$6,350</td>
</tr>
<tr>
<td>Maximum cost share (per family), includes medical and pharmacy</td>
<td>$12,700</td>
</tr>
</tbody>
</table>

**Preventive care**
- Periodic health exams, well-baby care, routine women’s exams, immunizations & hearing screenings: Covered in full
- Prostate screening exam & colorectal cancer screenings (sigmoidoscopy, colonoscopy): Covered in full
- Nutritional counseling (limited to four visits per calendar year): Covered in full

**Professional Services**
- Primary care (medical home) & specialist (referral required) office visits: $30/visit, 50%
- Chronic condition office visits: Covered in full, 50%
- Inpatient physician services (including surgery and anesthesia): $30/visit, 50%
- Allergy shots, serums & injectible medications: $0/visit, 50%
- ACT 100: Bunionectomy, hammertoe surgery, knee viscosupplementation, Morton’s neuroma, spinal injections for pain & upper GI endoscopy: $100, then 50% for $500, then 50%
- ACT 500: Knee arthroscopy, knee/hip replacement and resurfacing, shoulder arthroscopy, sinus surgery, spine procedures, bariatric surgery: $500, then 50% for $500, then 50%
- Mental health: $30/visit, 50%
- Chemical dependency treatment: Covered in full, 50%

**Alternative care services**
- Acupuncture/chiropractic/naturopathic visits ($1,000 per year maximum spinal manipulation/acupuncture combined): $30/visit, 50%

**Maternity care services**
- Physician or midwife services: Covered in full, 50%
- Hospital stay: $500 per admission, 50%

**Hospital services**
- Inpatient care, observation care, rehabilitative care (30 days per calendar year; 60 days head or spinal cord injuries), skilled nursing facility (180 days per calendar year): $500 per admission, 50%
- Bariatric surgery: $500 per admission, Not covered

**Emergency care**
- Urgent care visits: $30/visit, $301/visit
- Emergency room (copay waived if admitted): $100/visit, $100/visit
- Ambulance: $75/trip

**Other covered services**
- Outpatient diagnostic lab & X-ray: Quest - $0, deductible waived, Other providers - 20%, 50%
- Imaging services (such as PET, CT, MRI): $100, then 20% for $100, then 50%
- Outpatient rehabilitative services (60 visits per calendar year): $30/visit, 50%
- Outpatient surgery, dialysis, infusion, chemotherapy & radiation therapy: $30/visit, 50%
- Durable medical equipment & supplies: 20%, 50%
- Diabetic supplies & insulin: Covered in full, Covered in full

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<table>
<thead>
<tr>
<th>Pharmacy plan</th>
<th>Retail</th>
<th>Mail order &amp; preferred retail</th>
<th>Specialty</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Plan-year costs</strong></td>
<td>$50</td>
<td>$5</td>
<td>$10</td>
</tr>
<tr>
<td>Deductible per person</td>
<td>$50</td>
<td>$5</td>
<td>$10</td>
</tr>
<tr>
<td>Deductible per family</td>
<td>$150</td>
<td>$15</td>
<td>$10</td>
</tr>
<tr>
<td>Out-of-pocket max per person</td>
<td>$1,000</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>Out-of-pocket max per family</td>
<td>$3,000</td>
<td>$3,000</td>
<td>$3,000</td>
</tr>
<tr>
<td>Value 1</td>
<td>$0</td>
<td>$0</td>
<td>N/A</td>
</tr>
<tr>
<td>Generic</td>
<td>$20</td>
<td>$50</td>
<td>$100</td>
</tr>
<tr>
<td>Brand</td>
<td>$50</td>
<td>$125</td>
<td>$100</td>
</tr>
</tbody>
</table>

1 Not subject to deductible.
2 When out of network, member pays any difference between the in-network rate and the billed amount.

<table>
<thead>
<tr>
<th>Dental plan</th>
<th>Delta Dental Premier Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Plan-year costs</strong></td>
<td>$50</td>
</tr>
<tr>
<td>Deductible per person</td>
<td>$50</td>
</tr>
<tr>
<td>Benefit maximum</td>
<td>$50</td>
</tr>
</tbody>
</table>

**Preventive and diagnostic services**
- Exam and prophylaxis/cleanings: Covered in full
- X-rays: Covered in full
- Fissure sealants: Covered in full
- Restorative Dentistry (treatment of tooth decay with amalgam or composite): 50%
- Oral Surgery (surgical extractions & certain minor surgical procedures): 50%
- Endodontics: (pulp therapy & root canal filling): 50%
- Periodontics: (treatment of tissues supporting the teeth): 50%
- Inpatient services: 50%
- crowns: 50%
- Cost restorations: 50%
- Dentures and Bridge Work: 50%

For limitations and exclusions, visit modahealth.com/pebb and refer to your Member Handbook.
Alternative care
Eligible chiropractic, acupuncture and naturopathic services.

Balance billing
Charges for out-of-network care beyond what your health plan allows. Out-of-network providers may bill you the difference between the maximum plan allowance and their billed charges. In-network providers can't do this.

Coinsurance
The percentage of allowable charges for which the patient is responsible.

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

Deductible
The amount you pay for covered healthcare services in a calendar year before the health plan starts paying for treatment. Fixed dollar copayments, prescription medications out-of-pocket costs and disallowed charges may not apply toward the deductible.

Maximum cost share
This is different from the out-of-pocket maximum. It is the annual limited amount you pay for covered in-network services that qualify as essential health benefits under the Affordable Care Act (ACA). This includes pharmacy and medical deductibles and all eligible copayments and coinsurance (including amounts that may not have counted towards the out-of-pocket maximum). Once the cost share maximum is reached, the plan pays 100% for covered essential health benefits.

Out-of-pocket maximum
The total amount of copayments and coinsurance that a member must pay in a calendar year before the plan begins to pay 100% for covered services. It does not include deductibles, disallowed charges or balance billing amounts for out-of-network providers. Please refer to the member handbook for additional information.

Preferred provider
A provider contracted within a network. By choosing a preferred provider, members’ out-of-pocket expenses will be less than if they choose a provider outside the network.

Primary care provider (PCP)
A PCP can be an M.D. (Doctor of Medicine), a D.O. (Doctor of Osteopathic Medicine), a nurse practitioner or a physician’s assistant. These providers practice primary care in the specialties of internal medicine, family medicine, general practice, geriatric medicine, pediatrics, obstetrics/gynecology and women’s health.

Specialty medications
Members with complex chronic health conditions may need to take specialty medications. These medications often require special handling, administration and ordering. You must have prior authorization to get these medications.

Glossary of terms
Healthcare lingo, explained
We realize that the words used in health plan brochures can be confusing, so we’ve made you a cheat sheet of sorts.
Questions?
We’re here to help. Just call one of our customer service teams.
Medical Customer Service, call 844-776-1593.
TTY users, please call 711.