

2026 Medical plan benefit summary

● Moda Select Texas Standard Gold

	In network you pay	Out-of-network you pay
Calendar year costs		
Deductible per person	\$2,000	Not covered
Deductible per family	\$4,000	Not covered
Out-of-pocket max per person	\$8,200	Not covered
Out-of-pocket max per family	\$16,400	Not covered
Care & services		
Preventive care visit	\$0 per visit	Not covered
Primary care provider (PCP) office visit	\$30 per visit	Not covered
Specialist office visit <i>Hearing exam is subject to \$45/visit.</i>	\$60 per visit	Not covered
Urgent care visit	\$45 per visit	Not covered
Virtual care visit - CirrusMD	\$30 per visit	Not covered
Other providers	\$30 per visit	Not covered
Outpatient diagnostic X-ray & lab	25% after deductible	Not covered
Emergency room visit	25% after deductible	25% after deductible
Ambulance	25% after deductible	25% after deductible
Inpatient/outpatient Care	25% after deductible	Not covered
Mental health/ substance use disorder office visit	\$30 per visit	Not covered
Physical, speech or occupational therapy and spinal manipulation visit	\$30 per visit	Not covered
Dental services for under age 19	Not covered	Not covered
Vision exam for under age 19	\$0 per visit	Not covered
Vision hardware for under age 19	0%	Not covered
Adult vision exam	\$10 per visit	Not covered
Prescription medications	Copay amounts are per 30-day supply. Insulin \$25 maximum cost share for a 30-day supply.	
Value	\$15	\$15
Select	\$15	\$15
Preferred	\$30	\$30
Non-Preferred	\$60	\$60
Preferred Specialty	\$250	Not covered
Non-Preferred Specialty	\$250	Not covered
Features		
Metallic level	● Gold	
Exchange	On and Off	
Medicare Part D creditable	Creditable	
Provider network	Moda Select	
Travel network	First Health	
Service area	Hays, Travis, Williamson	

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