

Health plans
for every body



moda

Formerly ODS Health

modahealth.com/oebb

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Oregon



Better health starts here

Hello. Welcome to Moda Health Plan, Inc. (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.

You know your health relies on quality plans, programs, online tools and, most importantly, partnerships that help you along the way.

At Moda Health, we have all of that and then a little bit more . . . we're just that excited about helping you on your journey to be better.

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 journey

Our Be Better tools provide individualized support to help you improve your health and live a more productive life. Included as part of all medical plans, our Be Better tools are available through your personalized member website. To log on, please visit modahealth.com/oebb.

myModa

Manage your benefits and get the most from your health plan with myModa. Once you create an account, you'll be able to:

- › View benefit eligibility and history
- › Review prescription history and pharmacy benefits, including medication pricing information
- › View account details and enrollment information
- › Access your digital ID card as either a PDF or as a smartphone application
- › Check the status of pending claims, view claim history and access claim forms
- › Receive and view electronic Explanation of Benefits (EOBs)

ODS eDoc

This service helps you understand your symptoms and make informed health decisions. You can email a specialized health professional at any time of day and get preventive care advice, answers to questions, home remedies, information on common procedures and conditions, help with diet and exercise, and more. ODS eDoc gives you access to:

- › Board-certified physicians
- › Licensed psychologists
- › Pharmacists
- › Dentists
- › Dietitians
- › Fitness experts

Nurse line

The Moda Health Registered Nurse Advice Line allows you to get answers and information about your health over the phone any time, day or night. While the nurses usually cannot make a diagnosis or prescribe medication, they can help you make informed decisions about basic health-related situations:

- › Understanding symptoms
- › Treatment for minor injuries and burns
- › Home cold and flu remedies
- › When it's time to make a doctor's appointment
- › Whether you should go to urgent care or the emergency room

To talk to a registered nurse, call the hotline at 866-321-7580.

Health coaching

If you are dealing with a chronic health condition, we offer in-depth care programs. As a member, you have access to tools and resources that emphasize maintaining a healthy lifestyle, such as individual health coaches who provide you with one-on-one support. These specialized programs include:

- > Cardiac Care
- > Dental Care
- > Depression Care
- > Diabetes Care
- > Lifestyle Coaching
- > Respiratory Care
- > Spine & Joint Care
- > Weight Care
- > Women's Health & Maternity Care

Tobacco cessation

The Quit For Life™ program is available to members ages 10 and over. This evidence-based program offers:

- > One-on-one phone-based sessions
- > Toll-free telephone access to Quit For Life coaches
- > Recommendations for medications to stop smoking
- > A Quit Guide to help members stay on track between calls
- > Interactive online tools

To talk to a cessation counselor, call 866-Quit-4-life.

Health Assessment

Understanding your health risks – whatever your age – can help improve your overall health. The Moda 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 click on “Health Assessment.”

Helping you maintain a healthy weight

We know maintaining and losing weight is an ongoing struggle, and we are here to help. Your weight management benefit includes five areas of focus:

- > Annual screening and assessment
- > Online educational resources
- > Health coaching
- > Weight Watchers®
- > Gastric bypass surgery (Roux-en-Y)

Roux-en-Y surgery is available for OEBB plan subscribers 18 and over (no coverage for dependents).

Certain presurgery requirements must be met, and patients will need to use an approved Center of Excellence. To learn more about the weight management benefits and program guidelines, log on to modahealth.com/oebb.

Dental Optimizer

Dental Optimizer™ allows you to store dental health information and share it with caregivers to facilitate more coordinated and effective care.

Online tools such as risk assessment quizzes and a treatment cost calculator help you:

- Understand how to prevent dental disease
- Research new and effective treatments
- Lower out-of-pocket costs

Prescription price check tool

The prescription price check tool allows you to get information quickly and easily. 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 prescription price check tool can help you save money by showing you when a lower-cost, generic option is available.

At a simple glance, you can see how much is covered by the plan and what the remaining cost will be. You also can get an estimated price from a specific pharmacy.

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

In addition, our Treatment Cost Navigator lets you compare costs for different providers, as well as search by provider, procedure, distance, language, gender, network status or specialty.

It's easy to find care wherever you are

Health happens, whether you're at home or on the road. We want to make sure you stay covered, no matter where you are. So we've made it easy to find in-network coverage in your hometown and across the country.

Moda Medical Home

The Moda Medical Home consists of local primary care providers who deliver high-quality, individualized care and integrated support. To achieve Medical Home status, providers must obtain recognition as a Patient-Centered Primary Care Home (PCPCH), through the state-run PCPCH program. These are clinics that have been recognized for their commitment to a patient-centered approach to care.

When you seek care from a Moda Medical Home provider, you will receive a higher benefit level. More information on participating providers can be found at modahealth.com/oebb under the Medical Home tab.

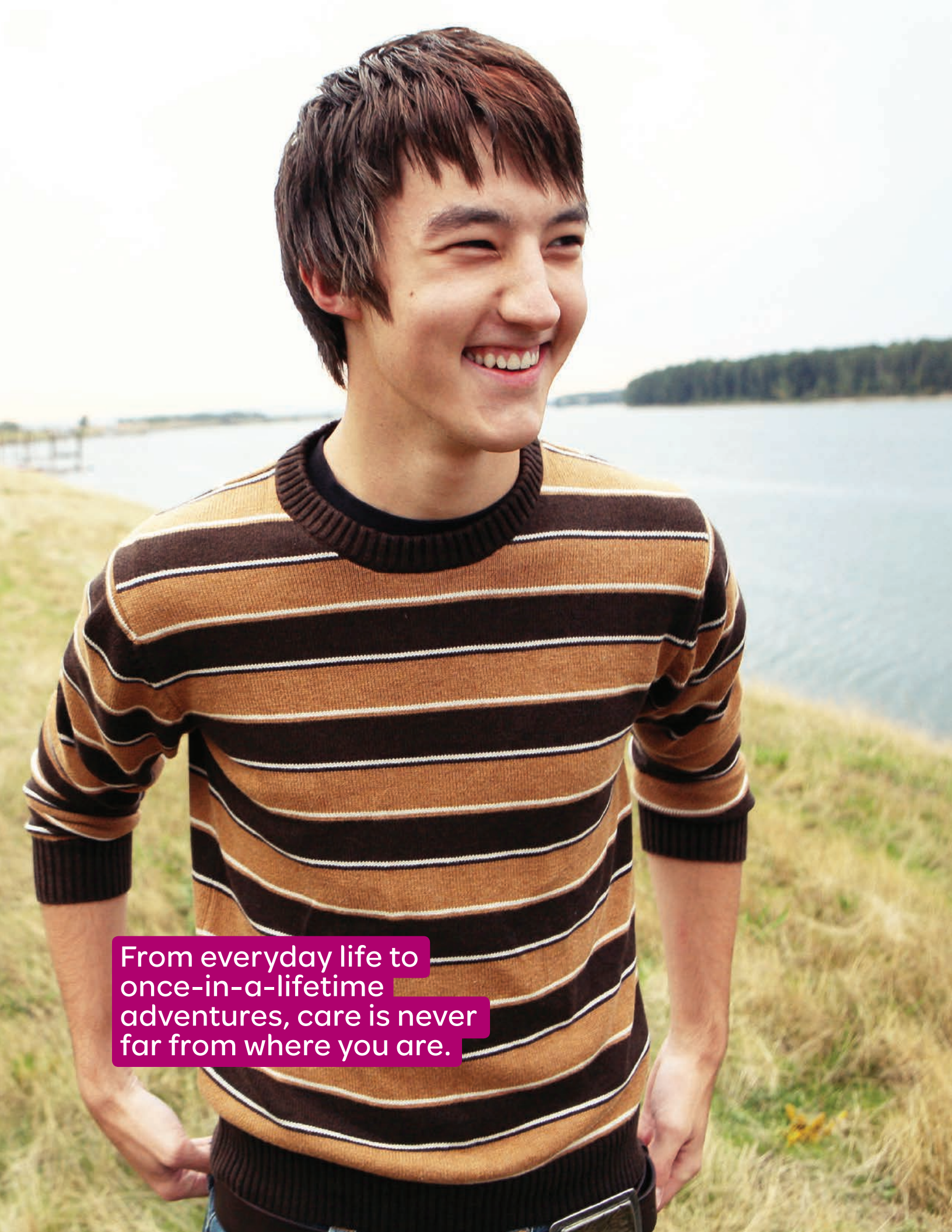
ODS Plus Network

At Moda, we want to make healthcare easy, accessible and convenient. The ODS Plus Network is one of the largest directly contracted PPO networks in Oregon and includes Legacy Health System, Oregon Health & Science University (OHSU), Providence Health & Services and Adventist Health. The ODS Plus Network provides access to more than 20,000 providers, 83 hospitals and 64,000 pharmacies in Oregon, Idaho, Southern Washington and Northern California.

Travel network

The Moda Travel Network allows medical plan members to receive emergency and nonemergency care outside of their primary service area while traveling. As an eligible member seeking care through a PHCS Healthy Directions provider, you will receive in-network benefits.* If you have dependents living outside of the primary network area, your dependents also can use the Moda Travel Network to receive care at an in-network benefit level.

* The Moda Travel Network is not an alternative primary network. Members must seek in-network services whenever possible, and preauthorization is required for inpatient services.



From everyday life to
once-in-a-lifetime
adventures, care is never
far from where you are.

Important aspects of your health plan

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 the following:

- › Spine surgery
- › Knee and hip replacement
- › Arthroscopies (knee and shoulder)
- › Advanced imaging
- › Sleep studies
- › Upper endoscopies

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 refer to primary and specialist office visit services performed by a licensed healthcare provider. When you see a participating Moda Medical Home provider, you will have a better benefit for incentive and primary care office visits on plans A-G.

Incentive services

Incentive services are exams performed to help you manage certain conditions, including the following:

- › Asthma
- › Heart conditions
- › Cholesterol
- › High blood pressure
- › Diabetes

Medical plans	Plan A		Plan B		Plan C
	In-network	Out-of-network ²	In-network	Out-of-network ²	In-network
Annual deductible – individual (family = 3x individual)	\$200		\$350		\$500
Annual out-of-pocket maximum – individual (family = 3x individual)	\$2,000	\$4,000	\$2,400	\$4,800	\$2,600
Preventive care					
Moda Medical Home wellness visit (ages 21 and over)	\$0 ¹	N/A	\$0 ¹	N/A	\$0 ¹
Periodic health exams; routine women’s exams; annual obesity screening; immunizations	\$0 ¹	50%	\$0 ¹	50%	\$0 ¹
Incentive care					
Moda Medical Home incentive care	\$10 copay ¹	50%	\$10 copay ¹	50%	\$10 copay ¹
Incentive office and home visits (for asthma, heart conditions, cholesterol, high blood pressure, diabetes)	20% ¹	50%	20% ¹	50%	20% ¹
Professional services					
Moda Medical Home primary care office visits	\$20 copay ¹	50%	\$20 copay ¹	50%	\$20 copay ¹
Primary care and specialist office visits	20%	50%	20%	50%	20%
Mental health office visits	\$20 copay ¹	50%	\$20 copay ¹	50%	\$20 copay ¹
Chemical Dependency Services	\$0 ¹	50%	\$0 ¹	50%	\$0 ¹
Alternative care services (\$2,000 combined max)					
Acupuncture/chiropractic/naturopathic office visits	20%	50%	20%	50%	20%
All other services (e.g., labs, diagnostics, etc.)	20%	50%	20%	50%	20%
Maternity care					
Physician or midwife services and hospital stay	20%	50%	20%	50%	20%
Outpatient and hospital services					
Inpatient care and outpatient hospital/facility care	20%	50%	20%	50%	20%
Skilled nursing facility care (60 days per plan year)	20%	50%	20%	50%	20%
Surgery	20%	50%	20%	50%	20%
ACT 100: Sleep studies, specified imaging (MRI, CT, PET), upper endoscopy, spinal injections, viscosupplementation	\$100 copay + 20%	\$100 copay + 50%	\$100 copay + 20%	\$100 copay + 50%	\$100 copay + 20%
ACT 500: Spine surgery, knee and hip replacement, knee and shoulder arthroscopy	\$500 copay + 20%	\$500 copay + 50%	\$500 copay + 20%	\$500 copay + 50%	\$500 copay + 20%
Gastric bypass (Roux-en-Y) ³	\$500 copay + 20%	N/A	\$500 copay + 20%	N/A	\$500 copay + 20%
Emergency care					
Urgent care visit	\$50 ¹		\$50 ¹		\$50
Emergency room (copay waived if admitted)	\$100 copay + 20%		\$100 copay + 20%		\$100 copay
Ambulance	20%		20%		20%
Other covered services					
Hearing aids and bone-anchored hearing aids – \$4,000 max/48 months	10%	50%	10%	50%	10%
Physical, occupational and speech therapy – 30 days per plan year/60 for spinal or head injury	20%	50%	20%	50%	20%
Outpatient diagnostic lab and X-ray	20%	50%	20%	50%	20%
Durable medical equipment	20%	50%	20%	50%	20%

¹ Deductible waived. All amounts reflect member responsibility.

² Out-of-network coinsurance based on MPA for these services.

³ This benefit is only for the plan subscriber.

Deductibles and copayments do not apply to the annual out-of-pocket maximum.

For limitations and exclusions visit modahealth.com/oebb/members and refer to your Member Handbook.

C	Plan D		Plan E		Plan F		Plan G		
	Out-of-network ²	In-network	Out-of-network ²	In-network	Out-of-network ²	In-network	Out-of-network ²	In-network	Out-of-network ²
	\$750		\$1,000		\$1,250		\$1,500		
	\$5,200	\$2,800	\$5,600	\$3,000	\$6,000	\$4,000	\$8,000	\$5,000	\$10,000
	N/A	\$0 ¹	N/A	\$0 ¹	N/A	\$0 ¹	N/A	\$0 ¹	N/A
	50%	\$0 ¹	50%	\$0 ¹	50%	\$0 ¹	50%	\$0 ¹	50%
	50%	\$15 copay ¹	50%	\$15 copay ¹	50%	\$15 copay ¹	50%	\$15 copay ¹	50%
	50%	20% ¹	50%	20% ¹	50%	20% ¹	50%	20% ¹	50%
	50%	\$30 copay ¹	50%	\$30 copay ¹	50%	\$30 copay ¹	50%	\$30 copay ¹	50%
	50%	20%	50%	20%	50%	20%	50%	20%	50%
	50%	\$30 copay ¹	50%	\$30 copay ¹	50%	\$30 copay ¹	50%	\$30 copay ¹	50%
	50%	\$0 ¹	50%	\$0 ¹	50%	\$0 ¹	50%	\$0 ¹	50%
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	50%	20%	50%	20%	50%	20%	50%	20%	50%
	\$100 copay + 50%	\$100 copay + 20%	\$100 copay + 50%	\$100 copay + 20%	\$100 copay + 50%	\$100 copay + 20%	\$100 copay + 50%	\$100 copay + 20%	\$100 copay + 50%
	\$500 copay + 50%	\$500 copay + 20%	\$500 copay + 50%	\$500 copay + 20%	\$500 copay + 50%	\$500 copay + 20%	\$500 copay + 50%	\$500 copay + 20%	\$500 copay + 50%
	N/A	\$500 copay + 20%	N/A	\$500 copay + 20%	N/A	\$500 copay + 20%	N/A	\$500 copay + 20%	N/A
	\$50 ¹	\$50 ¹	\$50 ¹	\$50 ¹	\$50 ¹	\$50 ¹	\$50 ¹	\$50 ¹	\$50 ¹
	\$100 copay + 20%	\$100 copay + 20%	\$100 copay + 20%	\$100 copay + 20%	\$100 copay + 20%	\$100 copay + 20%	\$100 copay + 20%	\$100 copay + 20%	\$100 copay + 20%
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	50%	20%	50%	20%	50%	20%	50%	20%	50%

Medical plans	Plan H (HSA-compliant PPO plan)	
	In-network	Out-of-network ²
Annual deductible	\$1,500 individual/ \$3,000 family ^{4,5}	
Annual out-of-pocket maximum	\$5,000 individual/ \$10,000 family ^{4,5}	
Preventive care		
Moda Medical Home wellness visit (ages 21 and over)	\$0 ¹	N/A
Periodic health exams; routine women's exams; annual obesity screening; immunizations	\$0 ¹	50%
Incentive care		
Moda Medical Home incentive care	20%	50%
Incentive office and home visits (for asthma, heart conditions, cholesterol, high blood pressure, diabetes)	20%	50%
Professional services		
Moda Medical Home primary care office visits	20%	50%
Primary care and specialist office visits	20%	50%
Mental health and chemical dependency services	20%	50%
Alternative care services (\$2,000 combined max)		
Acupuncture/chiropractic/naturopathic office visits	20%	50%
All other services (e.g., labs, diagnostics, etc.)	20%	50%
Maternity care		
Physician or midwife services and hospital stay	20%	50%
Outpatient and hospital services		
Inpatient care and outpatient hospital/facility care	20%	50%
Skilled nursing facility care (60 days per plan year)	20%	50%
Surgery	20%	50%
ACT 100: Sleep studies, specified imaging (MRI, CT, PET), upper endoscopy, spinal injections, viscosupplementation	20%	50%
ACT 500: Spine surgery, knee and hip replacement, knee and shoulder arthroscopy	20%	50%
Gastric bypass (Roux-en-Y) ³	\$500 copay + 20%	N/A
Emergency care		
Urgent care visit	20%	
Emergency room (copay waived if admitted)	20%	
Ambulance	20%	
Other covered services		
Hearing aids and bone-anchored hearing aids – \$4,000 max/48 months	20%	50%
Physical, occupational and speech therapy – 30 days per plan year/60 for spinal or head injury	20%	50%
Outpatient diagnostic lab and X-ray	20%	50%
Durable medical equipment	20%	50%
Major medical prescription coverage	20%	
Value tier	\$0 ¹	

¹ Deductible waived. All amounts reflect member responsibility.

² Out-of-network coinsurance based on MPA for these services.

³ This benefit is only for the plan subscriber.

⁴ Individual deductible and out-of-pocket apply only if employee is enrolling in the plan with no other family members.

⁵ Family deductible and out-of-pocket can be met by one or more family members – This deductible must be met before benefits will be paid. Plan H's deductible and copayments apply toward the plan year OOP maximum.

For limitations and exclusions visit modahealth.com/oebb/members and refer to your Member Handbook.

Plan H – HSA-compliant PPO plan

A Moda Health HSA-compliant, high-deductible health plan allows you to use tax-free funds for eligible healthcare expenses. To enjoy the benefits of an HSA-compliant plan, you can simply contact a bank to set up an account.*

You can use HSA tax-free dollars to pay for deductibles, coinsurance and other qualified expenses not covered by your health plan. HSA members enjoy a number of tax advantages, including:

- > Contributions made on a tax-advantaged basis
- > Unused funds carried over from year to year, growing tax-deferred
- > Tax-free withdrawal of funds to pay for qualified medical expenses

Eligibility

To be eligible to participate in an HSA plan, you must:

- > Be covered by a qualified high-deductible health plan
- > Not be covered under another non-HSA-compliant medical plan (including your spouse's plan)
- > Not be enrolled in Medicare
- > Not be claimed as a dependent on someone else's tax return

Prescriptions

Your pharmacy benefit is covered under the medical portion of plan H. The Plan includes select value tier medications that waive your annual deductible – and your benefits will process at a participating pharmacy as long as you present your ID card.

*OEBB has chosen U.S. Bank as the preferred administrator of the HSA plan.

Moda Rx offers quality options

As the administrator of the Oregon Prescription Drug Program (OPDP), Moda takes pride in actively managing your pharmacy benefits to ensure that the OEGB program provides quality, comprehensive coverage and remains current with industry standards and the changes occurring in the marketplace.

We understand that each member is unique. Through the prescription program you are offered an open formulary with options under the value, select generic, preferred and non-preferred tiers.

Pharmacy plan savings

You have access to a 90-day mail-order benefit through Postal Prescription Services (PPS). You can receive significant savings by using the mail-order benefit.

Beginning Oct. 1, 2013, you will also be able to fill a 90-day prescription for value and select generic medications at a retail pharmacy.

Additional savings options may be available through our Preferred pharmacy partners. A list of our partners is available on the Pharmacy Locator under Find Care.

Value tier medications

Value medications have been identified through a review process that evaluates prescription products based on the latest clinical information and medical literature as providing safe, effective, cost-preferred treatment options for common chronic health conditions.

The Moda Health OEGB Value Tier includes products used to treat the following health issues:

- > Asthma
- > Heart, cholesterol, high blood pressure
- > Diabetes
- > Osteoporosis
- > Depression*
- > Pain/arthritis*

A list of medications included under the value tier can be found on the pharmacy tab at modahealth.com/oebb.

* To remain HSA-compliant, medications for certain conditions are not included in the Plan H value tier.

Prescription drug plan	Retail	Mail-order	Specialty
	31-day supply ¹	90-day supply	31-day supply
Value ¹	\$0	\$0	N/A
Select generic ¹	\$8	\$16	\$16
Preferred ^{2,3}	25%, up to \$50 max	25%, up to \$100 max	25%, up to \$100 max
Non-preferred brand ³	50%, up to \$150 max	50%, up to \$300 max	50%, up to \$300 max

¹ A 90-day supply for value and select generic medications is available at retail pharmacies for three times the 31-day copay.

² This benefit level includes select generic medications that have been identified as having no more favorable outcomes from a clinical perspective than other cost-effective generics.

³ Copay maximum is per prescription.

For limitations and exclusions visit modahealth.com/oebb/members and refer to your Member Handbook.

Bringing it all into focus

Vision plan	Plan 1	Plan 2	Plan 3	Plan 4
Plan-year benefit maximum	\$250	\$350	\$450	\$600
Eye examinations (including refraction) <i>Frequency: Once per plan year</i>	100% (subject to plan maximums)			
Lenses – single vision, bifocal, trifocal or contacts <i>Frequency: Contacts (including disposable contacts) or one pair of lenses per plan year</i>	100% (subject to plan maximums)			
Frames <i>Frequency: One pair per plan year for members under 17 years old. One pair every two plan years for members 17 and older.</i>	100% (subject to plan maximums)			

Vision exam and hardware benefits are all subject to the plan-year benefit maximum.

Percentages shown reflect the benefit amounts for covered vision exam, frames and lenses.

Noncovered excluded services are the member's responsibility and do not apply toward plan-year maximum.

For limitations and exclusions visit modahealth.com/oebb/members and refer to your Member Handbook.

Keeping you smiling

Oral care is important for keeping your teeth and mouth healthy, but it's also an important part of your overall health. It's easy to find a dentist.

Delta Dental Premier Network

This network offers you access to the largest dental network available in Oregon and across the nation. You'll save money by seeking care from participating Delta Dental Premier providers.

Delta Dental dentists have agreed to accept contracted fees as full payment for services. That means you usually pay less for each visit and are protected from balance billing – the difference between what Moda pays and the dentist's fee – which will cut down on your out-of-pocket costs.

Oral Health, Total Health

Oral health research has shown a strong link between oral health and overall health. Moda believes that when you see a dentist regularly and maintain a healthy mouth, it can help keep the rest of your body healthy, too. Through our Oral Health, Total Health program, Moda offers additional preventive benefits to members with diabetes and pregnant women in their third trimester. Moda also provides other evidence-based dental benefits, including routine oral cancer screenings with every exam. If, during an exam, additional screening is required, Moda covers brush biopsy, a nonsurgical method of detecting abnormal cells in the mouth.

Dental plans	Plan 1 ²	Plan 2 ²	Plan 3 ²	Plan 4 ³	Plan 6 ³
Deductible	\$50	\$50	\$50	\$50	\$50
Plan-year benefit maximum	\$2,200	\$1,500	\$1,500	\$1,500	\$1,200
Preventive and diagnostic services ¹					
Exam and prophylaxis/cleanings (once every 6 months)	70%+10%	70%+10%	70%+10%	100%	100%
Bitewing X-rays (once every 12 months)	70%+10%	70%+10%	70%+10%	100%	100%
Topical fluoride application (ages 18 and under)	70%+10%	70%+10%	70%+10%	100%	100%
Sealants and space maintainers	70%+10%	70%+10%	70%+10%	100%	100%
Restorative services					
Fillings (posterior teeth paid to amalgam fee)	70%+10%	70%+10%	70%+10%	80%	80%
Inlays (amalgam reimbursement fee)	70%+10%	70%+10%	70%+10%	80%	80%
Oral surgery and extractions	70%+10%	70%+10%	70%+10%	80%	80%
Endodontics and periodontics	70%+10%	70%+10%	70%+10%	80%	80%
Major restorative services					
Gold or porcelain crowns	70%+10%	70%+10%	70%+10%	80%	50%
Onlays	70%+10%	70%+10%	70%+10%	80%	50%
Prosthodontics services					
Implants	70%+10%	70%+10%	50%	50%	50%
Dentures and partial dentures	70%+10%	70%+10%	50%	50%	50%
Bridges	70%+10%	70%+10%	50%	50%	50%
Orthodontic services ^{1,4}					
Lifetime maximum – \$1,800	80%	80%	80%	80%	N/A

¹ Deductible waived.

² Under this incentive plan, benefits start at 70 percent for your first plan year of coverage. Thereafter, benefit payments increase by 10 percent each plan year (up to a maximum benefit of 100 percent) provided the individual has visited the dentist at least once during the previous plan year. Failure to do so will cause a 10 percent reduction in benefit payment the following plan year, although payment will never fall below 70 percent.

³ Moving from a constant benefit plan (4 or 6) to an incentive benefit plan (1, 2 or 3) will cause the benefit level to start at 70 percent.

⁴ Orthodontic services do not apply toward the plan year benefit maximum.

For limitations and exclusions visit modahealth.com/oebb/members and refer to your Member Handbook.

Percentages shown reflect the benefit amount that Moda covers for in-network providers.

Healthcare lingo, explained

Here's a short glossary of commonly used insurance terms, which should help make choosing medical and dental plans a little easier. For more detailed information, visit modahealth.com/oebb.

Coinsurance

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

Copay or copayment

The insured patient's share of the bill, expressed as a specific dollar amount paid for a given service, product or treatment. For example, the patient might pay \$25 for each primary care office visit. The patient is usually responsible for payment at the time of the treatment or service.

Deductible

The portion of an individual's applicable healthcare expenses that must be paid by the member in the plan year before the insurance plan will start paying for treatment.

Out-of-pocket maximum

A specified amount of applicable claims expenses in a plan year that must be met before benefits are paid in full. Once members have met their out-of-pocket maximum, the plan begins covering eligible expenses at 100 percent. The out-of-pocket maximum starts over every plan year.

PPO

A preferred provider organization (PPO) is a panel of providers contracted with Moda Health to provide in-network benefits at agreed upon rates.

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 physician outside the network.

Primary care provider

The term primary care provider refers to an M.D. (Doctor of Medicine), a D.O. (Doctor of Osteopathic Medicine), a nurse practitioner or a physician assistant who practices primary care in the specialties of internal medicine, family medicine, general practice, geriatric medicine, pediatrics, obstetrics/ gynecology or women's health.

Medical/Vision Customer Service

503-265-2909 or 866-923-0409

Dental Customer Service

503-265-2910 or 866-923-0410

Pharmacy Customer Service

503-265-2911 or 866-923-0411

Health Coaching

503-243-3957 or 800-913-4957

Care Coordination and Case Management

503-948-5561 or 800-592-8283

Behavioral Health

503-382-5323 or 877-796-3223

