

2025



Choose a better experience
with your **health insurance**

Medicare Supplement plan | PHIP

moda
HEALTH

***Welcome to
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.





A partnership you can trust

For over 30 years, Moda Health has been offering the Medicare Supplement plan to PERS members.



An Oregon-based company since 1955

70 years of offering insurance plans in the Pacific Northwest.



Nationwide coverage

With the Moda Health Medicare Supplement plan, you may see a Medicare provider anywhere in the U.S. and U.S. territories.

Explore Medicare Supplement coverage

Why should I have a supplement plan?

Medicare is your primary source for medical and hospital insurance. When you choose the Moda Health Medicare Supplement plan, you get enhanced benefits that go beyond what Medicare covers.

Original Medicare is your primary insurance:



Part A (hospital insurance)



Part B (medical insurance)



Moda Health Medicare Supplement gives you **enhanced benefits:**

No copays or coinsurance*,
 Medicare generally pays **80%**, Moda Health pays **20%** for Medicare covered services*

No primary care provider (PCP) requirements

Additional value-added services and discounts

Flexibility to see any Medicare provider nationwide

No referrals required

Travel with *peace of mind*



Medicare Supplement plans ensure your coverage is with you when you travel anywhere in the United States. Choose any Medicare-approved physician throughout the country. By selecting the Moda Health Medicare Supplement plan, you can feel secure that where Medicare coverage ends, your supplement plan coverage begins.



How do I find a provider?

Visit [Medicare.gov](https://www.medicare.gov) to find Medicare providers in your area.



Moda Health Medicare Supplement plan



|  Medicare Part A | Medicare pays | Plan pays |  You pay |
|--|---|--|---|
| Hospitalization¹ <i>Semi-private room and board, general nursing and miscellaneous services and supplies</i> | | | |
| First 60 days | All but \$1,676 | \$1,676 (Part A deductible) | \$0 |
| 61st through 90th day | All but \$419 per day | \$419 per day | \$0 |
| 91st day and after: While using 60 lifetime reserve days | All but \$838 per day | \$838 per day | \$0 |
| Once lifetime reserve days are used: | | | |
| Additional 365 days | \$0 | 100% of Medicare-eligible expenses | \$0 ² |
| Beyond the additional 365 days | \$0 | \$0 | All costs |
| Skilled nursing facility care¹ <i>You must meet Medicare's requirements, including three inpatient hospital days, prior to entering a Medicare-approved skilled nursing facility within 30 days of hospital stay</i> | | | |
| First 20 days | All approved amounts | \$0 | \$0 |
| 21st through 100th day | All but \$209.50 per day | Up to \$209.50 per day | \$0 |
| 101st day and after | \$0 | \$0 | All costs |
| Hospice care <i>Available as long as your doctor certifies you are terminally ill and you elect to receive these services</i> | | | |
| | All but limited coinsurance for outpatient drugs and inpatient respite care | Up to \$5 per outpatient prescription for pain and symptom management; 5% of the Medicare approved amount for inpatient respite care | \$0 |

1 A benefit period begins on the first day you receive services as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.



2 Notice: When your Medicare Part A hospital benefits are exhausted, the insurer stands in place of Medicare and will pay whatever amount Medicare would have paid up to an additional 365 days as provided in the policy's "core benefits." During this time, the hospital is prohibited from billing you for the balance based on any difference between its billed charges and the amount Medicare would have paid.

Moda Health Medicare Supplement plan (continued)

|  Medicare Part B | Medicare pays | Plan pays |  You pay |
|---|----------------------|------------------|---|
| Part B deductible | \$0 | \$0 | \$257 |
| After Part B deductible has been met | | | |
| Medical expenses <i>In or out of the hospital and outpatient hospital treatment, such as physician's services, inpatient and outpatient medical and surgical services and supplies, physical and speech therapy, diagnostic tests and durable medical equipment</i> | | | |
| Remainder of Medicare-approved amounts | 80% | 20% | \$0 |
| Part B excess charges (above Medicare approved amounts) | \$0 | 100% | \$0 |
| Blood | | | |
| First three pints | \$0 | 100% | \$0 |
| Additional amounts | 80% | 20% | \$0 |
| Clinical laboratory services – blood tests | | | |
| For diagnostic services | 100% | \$0 | \$0 |

|  Medicare Parts A and B | Medicare pays | Plan pays |  You pay |
|--|------------------------------------|------------------------------------|---|
| Home healthcare Medicare-approved services | | | |
| Medically necessary skilled-care services and medical supplies | 100% | \$0 | \$0 |
| Durable medical equipment | | | |
| Remainder of Medicare-approved amounts | 80% after Part B deductible is met | 20% after Part B deductible is met | \$0 after Part B deductible is met |

Moda Health Medicare Supplement plan *(continued)*

|  Emergency and travel benefits | Medicare pays | Plan pays |  You pay |
|---|--|-----------|---|
| | After the Part B deductible has been met | | |
| Anywhere in the United States | | | |
| Urgent care | 80% | 20% | \$0 |
| Emergency room | 80% | 20% | \$0 |
| Ambulance – ground or air | 80% | 20% | \$0 |
| Outside the United States coverage limited to \$50,000 per member (lifetime) | | | |
| Urgent care | 0% | 80% | 20% |
| Emergency room | 0% | 80% | 20% |
| Ambulance – ground or air | 0% | 80% | 20% |

| Hearing benefits through TruHearing | | |
|--|---|--|
| Services | Cost sharing | Details |
| Hearing aid exam | \$0 copayment | One per year |
| Hearing aids | \$399 copayment per aid for TruHearing Advanced Hearing Aids \$699 copayment per aid for TruHearing Premium Hearing Aids | Two TruHearing Advanced or Premium hearing aids every year (one per ear) |

Hearing benefits offered through TruHearing include \$399 and \$699 hearing aid options, and one routine hearing exam from a TruHearing provider (per calendar year) with a \$0 copay. A rechargeable model option is also available on select styles at no additional cost.

Coverage also includes a worry-free purchase with a 60-day trial and 3-year warranty. You can find more information in your Member Handbook, or by calling TruHearing at 833-718-5798.

Vision benefits through VSP

| Services | Cost sharing |
|--|--|
| <p>WellVision Exam One exam per calendar year</p> | <p>VSP Advantage network \$15 copayment</p> <p>Out-of-network Up to \$45 reimbursement of the exam cost</p> |
| <p>Prescription Glasses Lenses, lens enhancements, frames</p> | <p>VSP Advantage network Up to \$200 allowance every 2 calendar years. A 20% discount is applied prior to the allowance</p> <p>Out-of-network Up to \$200 reimbursement every 2 calendar years</p> |
| <p>Contacts (instead of glasses) Contacts and contact lens exam (fitting and evaluation)</p> | <p>VSP Advantage network Up to \$200 allowance every 2 calendar years. A 15% discount off the contact lens exam is applied prior to the allowance</p> <p>Out-of-network Up to \$200 reimbursement every 2 calendar years</p> |

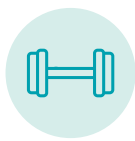
Access to high-quality eye care and eyewear is through VSP Vision Care. The plan covers vision exams and corrective lenses and frames.

You can find more information in your Member Handbook, or by calling VSP at 800-877-7195.

This policy may not fully cover all of your medical costs. Neither Moda Health nor its agents are connected with Medicare. This does not give all of the details about Medicare coverage. For a complete description of Medicare benefits, contact your local Social Security office, or refer to the "Medicare & You 2025" handbook online at [medicare.gov](https://www.medicare.gov) or by calling 800-633-4227.

This is a benefit summary only. For a more detailed description of benefits, please refer to your Member Handbook, which you can access through modahealth.com/pers.

Value-added *services and discounts*



Gym membership

Enjoy gym memberships and well-being resources from the Silver&Fit[®] program. This benefit includes:

- Access to thousands of participating fitness studios and fitness centers nationwide at no cost.
- Your choice of one Home Fitness Kit per calendar year which includes options such as a Wearable Fitness Tracker Kit, a Yoga Kit, or a Strength Kit.
- Access to on-demand workout videos through the Silver&Fit website.
- Well-Being Coaching sessions by phone, video or chat with a trained coach to discuss topics like exercise, nutrition, social isolation, and more.
- Customized Workout Plans to help you start or continue an exercise routine.
- The Well-Being Club for member connection, exclusive articles and videos, and live virtual classes and events.
- The Silver&Fit Connected![™] tool for tracking activity on 250+ wearable fitness trackers and mobile apps to earn rewards like hats and pins.
- A Premium network option that includes access to additional fitness studios, including yoga and Pilates studios, for an additional monthly fee through the Silver&Fit program.

Your fitness center must be participating in the Silver&Fit program for this benefit to apply. To learn more, visit SilverandFit.com or call 800-872-1414.



Health and wellness services from ChooseHealthy™

- Discounts of up to 50% on popular health and fitness brands, including Garmin®, Vitamix®, PRO Compression® and Fitbit®
- Savings of up to 25% on services including acupuncture, chiropractic, physical therapy, therapeutic massage, occupational therapy, nutrition and podiatry. You will need to see providers who are in the ChooseHealthy network.
- Access to no-cost online health classes

To access these services, log in to your Member Dashboard account at modahealth.com/pers or call 877-335-2746 to learn more.



Travel Assist

Receive travel assistance when more than 100 miles from home, through Assist America. You can call Assist America for emergency medical assistance and much more, including:

- Medical consultations
- Foreign hospital admission help
- Prescription assistance

Learn more at assistamerica.com, or contact Assist America at 800-872-1414.





To learn more, access our formulary at modahealth.com/pers/pharmacy



Part D Pharmacy *benefits*

Moda Health has over 63,000 participating pharmacies nationwide, giving you a vast number of pharmacies to choose from.

Did you know you can get a 93-day supply of Tier 1 (preferred generic) or Tier 2 (generic) medications through our mail order program for only 2x the copay, instead of 3x at your retail pharmacy? Call us toll-free at 888-786-7509 for more information. We're here to help.

|  |  You pay | | | |
|---|---|--------------------------------|-----------------------|--------------------|
| | 1-31 day supply | 32-62 day supply | 63-93 day supply | |
| | Retail pharmacy and mail order | Retail pharmacy and mail order | Retail pharmacy | Mail order |
| Tier 1 Preferred generics | Up to an \$8 copay | Up to a \$16 copay | Up to a \$24 copay | Up to a \$16 copay |
| Tier 2 Generics | Up to a \$15 copay | Up to a \$30 copay | Up to a \$45 copay | Up to a \$30 copay |
| Tier 3* Preferred brands | 40% up to a \$250 max | 40% up to a \$500 max | 40% up to a \$750 max | |
| Tier 4* Non-preferred drugs | 40% up to a \$250 max | 40% up to a \$500 max | 40% up to a \$750 max | |
| Tier 5 Specialty | 40% up to a \$250 max | NA | NA | |
| Tier 6 Part D covered vaccines | \$0 | NA | NA | |

For 2025, the calendar year out-of-pocket maximum for the Part D prescription drug benefit is \$2,000 per member.

* You won't pay more than \$35.00 per month supply of each covered insulin product on this tier.

Tools for your *healthy journey*

Your plan comes with **programs, care teams, tools and resources** designed to help you manage your well-being. Using your Member Dashboard, you can locate a pharmacy near you, work with health coaches, compare medication prices, view your explanation of benefits and more.



Prescription price check

See prescription medication costs and how much you would pay at an in-network pharmacy.

You can also compare pricing estimates from various in-network pharmacies and see generic and lower-cost options to discuss with your doctor.



Care coordination and case management

When you're sick, need hospitalization, surgery, or are seriously injured, we'll give you support – so you can focus on healing.

Our care coordinators and case managers can help you understand and utilize all of your benefits, communicate with your providers, arrange care ordered by your provider, and help you find community resources.



Health coaching

Need a hand with your health? A Moda Health coach will use evidence-based practices to help you set goals and feel your best.

To contact a health coach by phone, call us toll-free at 855-466-7155 (TTY users, please dial 711). Email a health coach at healthcoachteam@modahealth.com.



Nurse advice line

Need quick advice? You can use our Nurse Advice Line to talk with a registered nurse about any health matter, 24/7, 365 days a year at no cost. The nurse will give you advice about treatment, which may include a home remedy or seeking other care.

Please call 800-501-5046 to talk with a registered nurse. TTY users, dial 711. Your call will always be confidential.



Simply log in to your Member Dashboard at modahealth.com/memberdashboard to use these care resources to be your healthy best!

Healthcare lingo *explained*

We realize that health plans can be confusing, so we've made a glossary to help you understand some healthcare lingo.

Coinsurance

The percentage you normally pay for a covered healthcare service after you meet your deductible. With the Moda Health Medicare Supplement plan, once your Part B deductible is met, Medicare pays 80% coinsurance for Medicare covered services, and the plan pays the remaining 20% coinsurance.

Copay (copayment)

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

Formulary

A list of covered prescription drugs.

Medicare Part A deductible

The amount normally due upon first admission to a hospital in each benefit period, before benefits are available under Part A of Medicare.

Medicare Part B deductible

The amount you must pay each calendar year before Medicare pays benefits for Medicare Part B expenses.

Member Handbook

Describes what is covered and how your plan works.



Nondiscrimination notice



We follow federal civil rights laws. We do not discriminate based on race, religion, color, national origin, age, disability, gender identity, sex or sexual orientation.

We provide free services to people with disabilities so that they can communicate with us. These include sign language interpreters and other forms of communication.

If your first language is not English, we will give you free interpretation services and/or materials in other languages.

If you need any of the above, call:

Medicare Customer Service,
800-962-1533 (TDD/TTY 711)

Pharmacy Customer Service,
888-786-7509 (TDD/TTY 711)

Dental Customer Service,
844-827-7379 (TDD/TTY 711)

If you think we did not offer these services or discriminated, you can file a written complaint.

Please mail or fax it to:

Moda Health Plan, Inc.
Attention: Appeal Unit
601 SW Second Ave.
Portland, OR 97204
Fax: 503-412-4003

If you need help filing a complaint, please call Customer Service.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services Office for Civil Rights at ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone:

U.S. Department of Health
and Human Services
200 Independence Ave. SW, Room 509F
HHH Building, Washington, DC 20201
800-368-1019, 800-537-7697 (TDD)

You can get Office for Civil Rights complaint forms at hhs.gov/ocr/office/file/index.html.

Scott White coordinates our nondiscrimination work:

Scott White,
Compliance Officer
601 SW Second Ave.
Portland, OR 97204
855-232-9111
compliance@modahealth.com

modahealth.com/pers

Moda Health Plan, Inc. is a PPO and PDP with Medicare contracts. Enrollment in Moda Health Plan, Inc. depends on contract renewal.



ATENCIÓN: Si habla español, hay disponibles servicios de ayuda con el idioma sin costo alguno para usted. Llame al 1-877-605-3229 (TTY: 711).

CHÚ Ý: Nếu bạn nói tiếng Việt, có dịch vụ hỗ trợ ngôn ngữ miễn phí cho bạn. Gọi 1-877-605-3229 (TTY:711)

注意：如果您說中文，可得到免費語言幫助服務。請致電1-877-605-3229（聾啞人專用：711）

주의: 한국어로 무료 언어 지원 서비스를 이용하시려면 다음 연락처로 연락해주시기 바랍니다. 전화 1-877-605-3229 (TTY: 711)

PAUNAWA: Kung nagsasalita ka ng Tagalog, ang mga serbisyong tulong sa wika, ay walang bayad, at magagamit mo. Tumawag sa numerong 1-877-605-3229 (TTY: 711)

تنبيه: إذا كنت تتحدث العربية، فهناك خدمات مساعدة لغوية متاحة لك مجانًا. اتصل برقم (الهاتف النصي: 711) 1-877-605-3229

بولتے ہیں تو سانی (URDU) توجہ دیں: اگر آپ اردو اعانت آپ کے لیے بلا معاوضہ دستیاب ہے۔ پر کال کریں 1-877-605-3229 (TTY: 711)

ВНИМАНИЕ! Если Вы говорите по-русски, воспользуйтесь бесплатной языковой поддержкой. Позвоните по тел. 1-877-605-3229 (текстовый телефон: 711).

ATTENTION : si vous êtes locuteurs francophones, le service d'assistance linguistique gratuit est disponible. Appelez au 1-877-605-3229 (TTY : 711)

توجه: در صورتی که به فارسی صحبت می کنید، خدمات ترجمه به صورت رایگان برای شما موجود است. با تماس بگیرد. (TTY: 711) 1-877-605-3229

ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपको भाषाई सहायता बिना कोई पैसा दिए उपलब्ध है। 1-877-605-3229 पर कॉल करें (TTY: 711)

Achtung: Falls Sie Deutsch sprechen, stehen Ihnen kostenlos Sprachassistentendienste zur Verfügung. Rufen sie 1-877-605-3229 (TTY: 711)

注意:日本語をご希望の方には、日本語サービスを無料で提供しております。1-877-605-3229 (TTY、テレタイプライターをご利用の方は711)までお電話ください。

အကူအညီ: ဤ တံခါး (ဇာလီ တံခါး) အဖွဲ့ (အဖွဲ့) ဝါဒီ ဝါဒီ တံခါး တံခါး မာတီ ဝါဒီ မူလ ဝါဒီ ဝါဒီ ဝါဒီ 1-877-605-3229 (TTY: 711) ပဲ ဝါဒီ ဝါဒီ

ໂປດຊາບ: ຖ້າທ່ານເວົ້າພາສາລາວ, ການຊ່ວຍເຫຼືອດ້ານພາສາແມ່ນມີໃຫ້ທ່ານໂດຍບໍ່ເສຍຄ່າ. ໂທ 1-877-605-3229 (TTY: 711)

УВАГА! Якщо ви говорите українською, для вас доступні безкоштовні консультації рідною мовою. Зателефонуйте 1-877-605-3229 (TTY: 711)

ATENȚIE: Dacă vorbiți limba română, vă punem la dispoziție serviciul de asistență lingvistică în mod gratuit. Sunați la 1-877-605-3229 (TTY 711)

THOV CEEB TOOM: Yog hais tias koj hais lus Hmoob, muaj cov kev pab cuam txhais lus, pub dawb rau koj. Hu rau 1-877-605-3229 (TTY: 711)

ត្រូវចងចាំ៖ បើអ្នកនិយាយភាសាខ្មែរ ហើយ ត្រូវការសេវាកម្មជំនួយផ្នែកភាសាដោយ ឥតគិតថ្លៃ គឺមានផ្តល់ជូនលោកអ្នក។ សូមទូរស័ព្ទ ទៅកាន់លេខ 1-877-605-3229 (TTY: 711)

HUBACHIISA: Yoo afaan Kshtik kan dubbattan ta'e tajaajiloonni gargaarsaa isiniif jira 1-877-605-3229 (TTY:711) tiin bilbilaa.

โปรดทราบ: หากคุณพูดภาษาไทย คุณสามารถใช้บริการช่วยเหลือด้านภาษาได้ฟรี โทร 1-877-605-3229 (TTY: 711)

FA'AUTAGIA: Afai e te tautala i le gagana Samoa, o loo avanoa fesoasoani tau gagana mo oe e le togotia. Vala'au i le 1-877-605-3229 (TTY: 711)

IPANGAG: Nu agsasaoka iti llocano, sidadaan ti tulong iti lengguahe para kenka nga awan bayadna. Umawag iti 1-877-605-3229 (TTY: 711)

UWAGA: Dla osób mówiących po polsku dostępna jest bezpłatna pomoc językowa. Zadzwoń: 1-877-605-3229 (obsługa TTY: 711)

Questions? *We're here to help.*

Medical questions for the Moda Health Medicare Supplement plan:

Toll-free: 800-962-1533 | (TTY): 711

Customer service is available from 7:30 a.m. to 5:30 p.m. Pacific Time, Monday through Friday. Calls are forwarded to voicemail on Saturdays, Sundays and holidays and are returned the next business day.

Moda Health Pharmacy Program:

Toll-free: 888-786-7509 | (TTY): 711

Pharmacy customer service is available from 7:00 a.m. to 8:00 p.m. Pacific Time, seven days a week from October 1 to March 31. After March 31, calls are forwarded to voicemail on Saturdays, Sundays and holidays and are returned the next business day.

PERS Health Insurance Program (PHIP):

In Portland: 503-224-7377

Toll-free: 800-768-7377 | (TTY): 711

Customer service is available from 7:30 a.m. to 5:30 pm, Monday through Friday. Calls are forwarded to voicemail on Saturdays, Sundays and holidays and are returned the next business day.

Learn more at modahealth.com/pers



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.