



Equal Funding

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



Better value and a ***better experience***

When you choose Moda Health, you'll receive high-quality health plans, expert guidance, and curated wellness services, tools and programs.

Proven

with **70 years** of offering insurance plans in the Pacific Northwest

Easy

with **no referrals** required for specialists

Convenient

with **modern ways** to stay healthy, like texting a doctor and virtual appointments



Quality, evidence-based plans

Our flexible benefit designs support the long-term health of your clients' employees, including preventive exams, women's annual exams, well-baby care and many immunizations.



Prescriptions with choice

Your clients' employees get integrated pharmacy benefits with an open formulary design that provides them with maximum choice. Approved drug list: modahealth.com/pdl



Benefits admin, made easy

Online tools put the power in your clients' hands, so they can jump on whenever they need to make a change, run reports, access resources and manage their bill.



Founded in **1955**

we've been **helping our members** with evidence-based health plans, diverse provider networks, innovative member programs and **our signature caring customer service**.

Moda has

450,000+

members in our **medical plans**

More than

775,000

members in our standalone **pharmacy segment**



“

Not once has it felt that the Oregon Fire Chiefs Association was just another number with Moda. The team we have the pleasure to work with goes the extra mile to ensure the plan meets the group's needs, which include a variety of collective bargaining agreements that are not all uniform.

– Redmond Fire & Rescue



We know your
time is valuable.

Quick links

2025 Medical plans

Networks

About Equal Funding

How to enroll

Member perks

Contact us



Your guide to *plan management*

We want to make it easy for you and your clients to enroll and manage their account.



Enrollment, made easy

1 Confirm client's eligibility Your client's business must:

- Be in Oregon
- Have 25 or more full-time (or full-time-equivalent) employees on average during the preceding calendar year
- Have at least 25 employees enrolled on the first day of the plan year

2 Enroll by the 10th of the month

New group enrollment information must be received no later than the 10th of the month prior to the desired effective date. Late enrollment can be accommodated upon request.

3 Choose an employee-eligibility waiting period

It cannot exceed 90 days for medical plans.

4 Make changes to plans upon renewal

Changes may include, but are not limited to, eligibility waiting periods, group plan choices, employer-eligibility changes, and contribution or participation amounts.

Faster benefits administration

The Employer Dashboard was created to help your clients quickly access and manage the details of benefits administration.

It's self-service, easy-to-use and available 24/7.

- Review employee-enrollment information and history
- Generate an enrollment census of covered employees and/or dependents
- View benefit and plan details and Member Handbooks
- Manage billing with eBill
- Send secure messages
- Order ID cards



To learn more about the Employer Dashboard, contact your *Moda Health sales representative at 800-578-1402*

Flexible, cost-savings plans *with equal monthly payments*

For some employers, the benefits of self-funding their health insurance come with concerns about managing wildly fluctuating monthly costs. Moda Health's Equal Funding provides the flexibility and cost savings your clients want, with the stability of equal monthly payments they need. It's peace of mind and a great first step to becoming fully self-funded.

A three-part plan

Self-funded medical plan

Covers medical services and pharmacy expenses for your clients' employees and their dependents

Administration agreement

Covers claims processing, billing, customer service and more

Stop-loss policy

Protects your clients if claims exceed expected annual limit



Predictability, flexibility and control

Equal Funding limits your clients' risk while providing granularity on where their collective healthcare dollars are being spent. Your client pays the same every month. If claims are higher than expected, the stop-loss insurance policy will cover them. And if claims are lower than expected, your clients will receive a credit towards the next plan year's administrative fees.

Stability



Equal monthly payments
for easier cost management



Insight into plan performance
throughout the year, for more informed
decision-making at renewal time

Protection



Safety from the unexpected
whether from large catastrophic claims by covered
individual(s) or combined medical and pharmacy
claims from the entire employee population
that exceed the expected annual limit



Clients may see lower costs
with any surplus at the end of the policy
period appearing as an administrative fee
credit for the following policy year



A partner in better outcomes and **cost management**

Moda Health works closely with your clients to maximize their healthcare investment. Our Equal Funding medical plans are designed to help your clients' employees be their healthy best. Plus, we take the time to understand their clients' business – top to bottom, so you'll have the insights needed to make informed recommendations about each of our client's health plans.

Supporting a healthy population



Inspiration and support
for your clients' employees to improve their
health, managing chronic conditions, and
navigating their plan and care options



Improved morale and productivity
from happier and healthier employees

Transparency and reporting



Identifying cost-savings opportunities
short-term trends and long-term needs
with robust reporting



Personalized service and support
with industry-leading case management team

How Equal Funding *works*

Moda Health's Equal Funding plan allows your clients to pay for their maximum exposure **over 12 predictable monthly payments**.

Once the policy period ends, if there is a surplus between the premium amount paid and the total cost of claims for your client, an administrative fee credit will be applied to the following policy year.

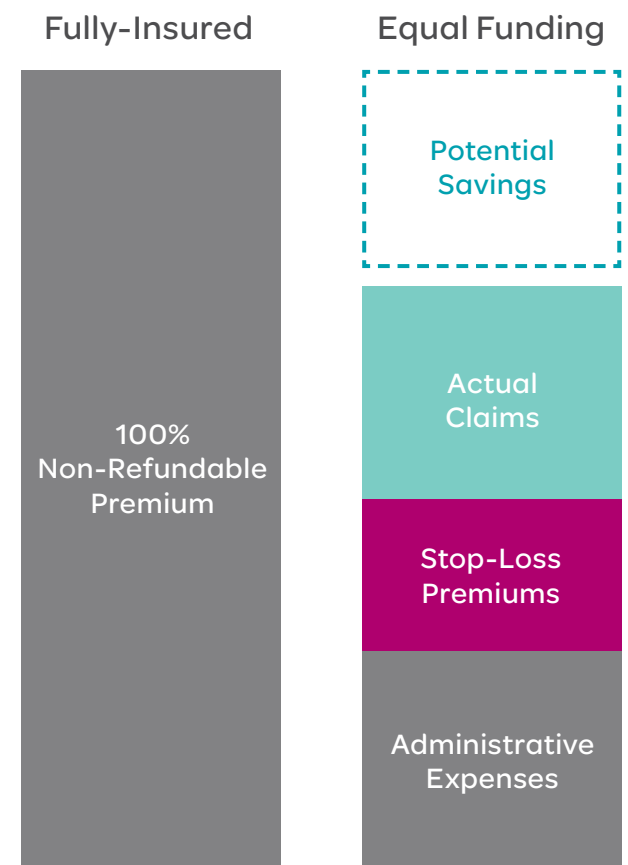


Date	Sample monthly billing cycle for May
April 7	eBill generated (viewable online within 48 hours)
May 1	<ul style="list-style-type: none"> May payment due May remittance pulled via Electronic Fund Transfer (EFT)
May 10	<ul style="list-style-type: none"> Moda Health confirms May payment has posted If payments have not posted, all claims payments will be immediately pended
May 31	If May payment has not posted, plan will be terminated effective May 1, and May claims will be denied

↓ If actual claims are **less than expected**
 the plan has a surplus. Part of the surplus will go to your clients as a credit on the next plan year's administrative agreement fees.

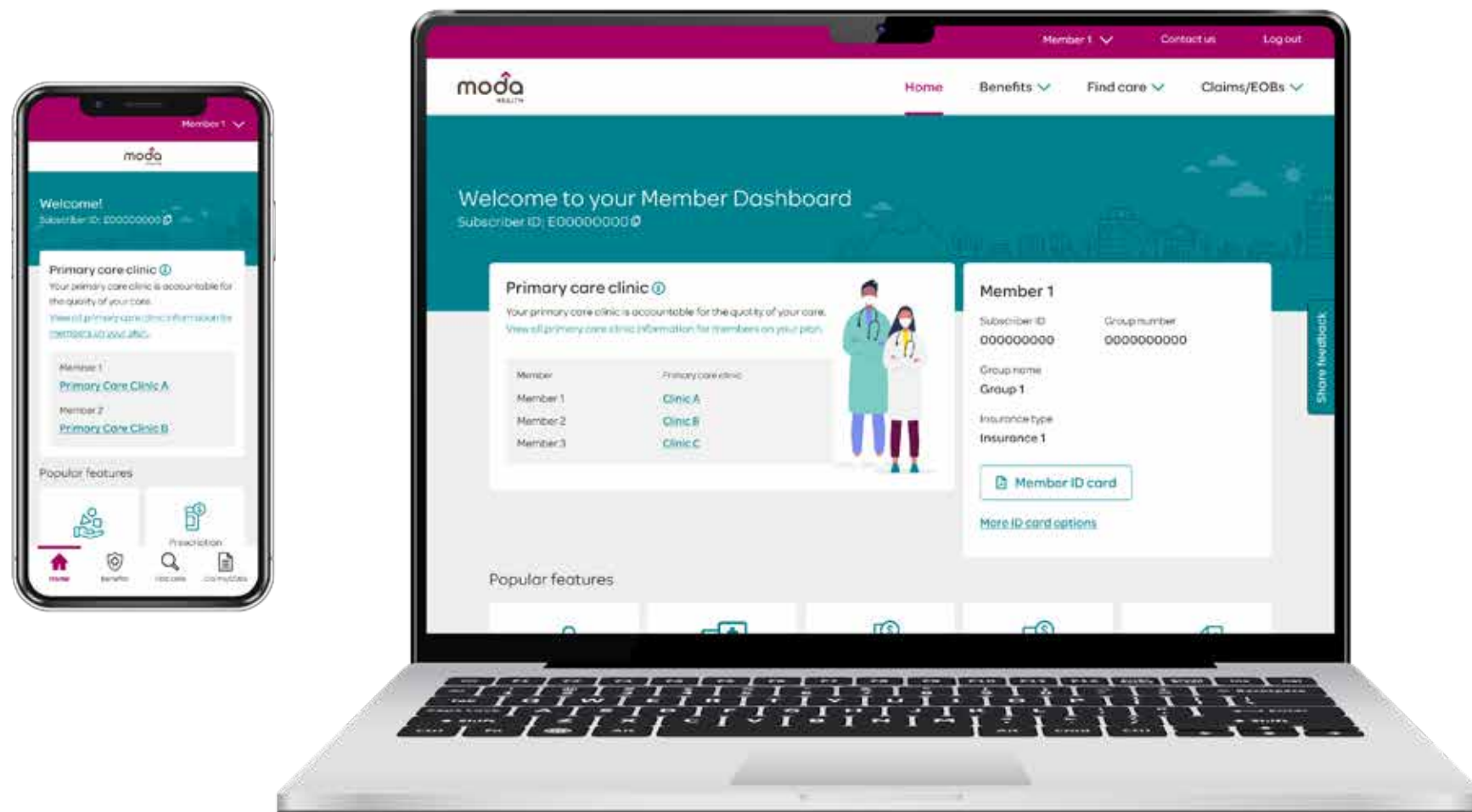
↑ If actual claims are **higher than expected**
 the stop-loss policy will cover these costs. Your clients will not be required to pay more.

Let's look at the *components of a premium*





Member perks to improve *health and save*

Our comprehensive wellness programs have something for every employee, supporting their work toward better health with exclusive discounts, programs and tools.






Discounts

- Gym memberships 
- Acupuncture, chiropractic, therapeutic massage (*once alternative care benefit limit has been reached*)
- Hearing aids and exams 
- Popular health and fitness brands (*Vitamix® and Garmin®*)






Tools

- Health assessments 
- Prescription price check
- Text a doctor 24/7 
- Employee Assistance Program 
- Identity protection services




Coaching and care

- Health coaching 
- Care coordination 
- Diabetes management
- Tobacco cessation
- Emergency medical assistance when traveling 
- Kidney care

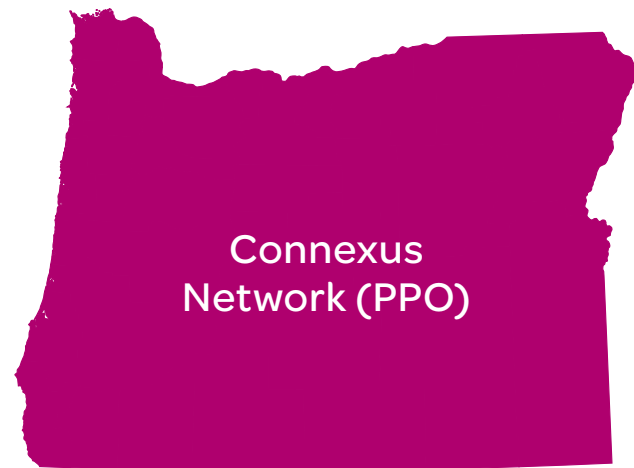


Mental health support

12 weeks of mobile therapy for your clients' employees from a private therapist through their smartphone 

Life's *better* in the network

We've carefully selected a community of primary care providers (PCPs), specialists and partner health systems, so you'll have better value and better care.

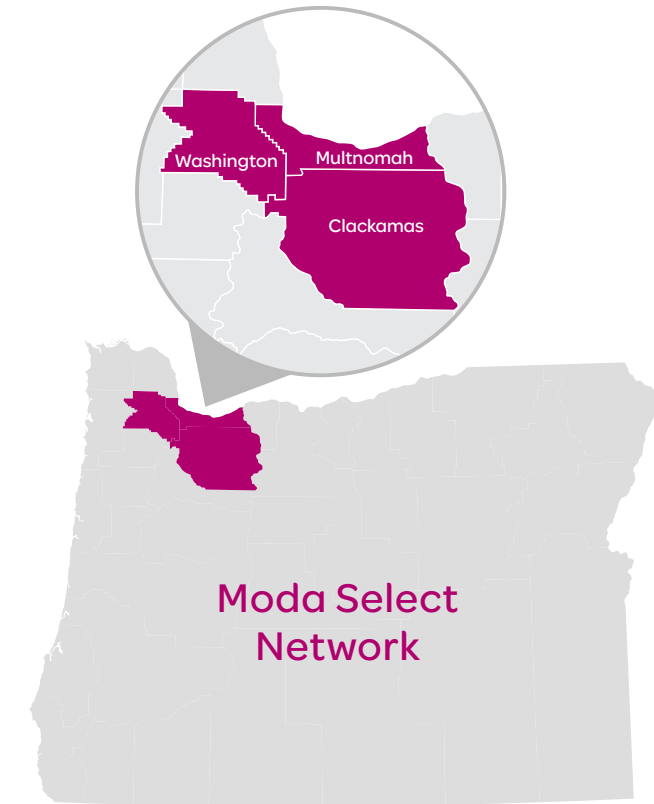


Connexus Network (PPO)

When clients want our broadest selection of providers across Oregon, **Connexus Network** has them covered. Clients located anywhere in Oregon can choose a plan with this network. Members can see in-network providers in all counties in Oregon and some areas in Washington and Idaho.



- Adventist Health Portland • Asante • Bay Area Hospital • Blue Mountain Hospital District
- CHI St. Anthony Hospital • Columbia Memorial Hospital • Good Shepherd Healthcare System
- Grande Ronde Hospital • Harney District Hospital • Hillsboro Medical Center
- Kadlec Regional Medical Center • Lake Health District Hospital • Legacy Silverton Hospital
- Pioneer Memorial Hospital - Heppner • Samaritan Health Services • Santiam Hospital
- Sky Lakes Medical Center • St. Luke's Hospital • Tillamook Regional Medical Center • Trios Health
- Wallowa County Healthcare District • Willamette Valley Medical Center



Moda Select Network

Helps employees residing in these counties manage their health in close partnership with their primary care provider (PCP) and the rest of their care team. In addition to OHSU, **Moda Select** gives members access to a community of quality providers, including Hillsboro Medical Center and Adventist Health Portland.



Adventist Health Portland • Hillsboro Medical Center



Aetna® PPO Network through Aetna Signature Administrators®

For care outside of Oregon, members can see providers in the Aetna® PPO Network.

2025 *Medical plan* benefit table

Plan name	Calendar-year costs			Care & services								
	Deductible per person / family	Coinsurance	Out-of-pocket max per person / family	PCP office visit	Specialist office visit	Emergency room visits	Virtual care office visit	Behavioral health office visit	Physical therapy	Acupuncture & spinal manipulations	Inpatient / outpatient care	
	In-network member pays			In-network member pays								
POS_\$250_\$2500_\$20/\$40_10% ¹	\$250 / \$500	10%	\$2,500 / \$5,000	\$20 per visit	\$40 per visit	\$200 then 10% after deductible	\$20 per visit	\$20 per visit	\$40 per visit	\$20 per visit	10% after deductible	
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¹First three visits are \$5 (includes PCP and behavioral health visits, in-office and virtual)

Medical disclaimer: This is a summary of the health plan benefits and is not a contract; limitations and exclusions apply. See the medical plan benefit summaries, SBCs, handbook or contract for details. If there is any discrepancy between the information in this summary and the contract, it is the contract that will control. These benefits and Moda Health policies are subject to change in order to be compliant with state and federal guidelines. This brochure 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.

2025 *Medical plan* benefit table

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POS_-\$6000_-\$8900_-\$35/\$55_30% ¹	\$6,000 / \$12,000	30%	\$8,900 / \$17,800	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible	
POS_-\$7000_-\$8900_-\$25/\$45_20% ¹	\$7,000 / \$14,000	20%	\$8,900 / \$17,800	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible	
POS_-\$7000_-\$8900_-\$35/\$55_30% ¹	\$7,000 / \$14,000	30%	\$8,900 / \$17,800	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible	
POS_-\$8000_-\$8900_-\$25/\$45_20% ¹	\$8,000 / \$16,000	20%	\$8,900 / \$17,800	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible	
POS_-\$8000_-\$8900_-\$35/\$55_30% ¹	\$8,000 / \$16,000	30%	\$8,900 / \$17,800	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible	

¹ First three visits are \$5 (includes PCP and behavioral health visits, in-office and virtual)

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2025 *Medical plan* benefit table

	Plan name	Calendar-year costs			Care & services							
		Deductible per person / family	Coinsurance	Out-of-pocket max per person / family	PCP office visit	Specialist office visit	Emergency room visits	Virtual care office visit	Behavioral health office visit	Physical therapy	Acupuncture & spinal manipulations	Inpatient / outpatient care
		In-network member pays			In-network member pays							
Moda Select Network HDHP	HDHP_-\$3300_-\$3300_0% ¹	\$3,300 / \$6,600	0%	\$3,300 / \$6,600	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible
	HDHP_-\$2800_-\$5000_20% ^{1,2}	\$2,800 / \$5,600	20%	\$5,000 / \$10,000	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible
	HDHP_-\$2800_-\$5000_30% ^{1,2}	\$2,800 / \$5,600	30%	\$5,000 / \$10,000	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible
	HDHP_-\$3300_-\$5000_20% ¹	\$3,300 / \$6,600	20%	\$5,000 / \$10,000	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible
	HDHP_-\$5000_-\$5000_0% ¹	\$5,000 / \$10,000	0%	\$5,000 / \$10,000	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible
	HDHP_-\$3300_-\$7000_30% ¹	\$3,300 / \$6,600	30%	\$7,000 / \$14,000	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible

¹ First three visits are \$0 after deductible (includes PCP and behavioral health visits, in-office and virtual)

² For coverage with two or more members, the entire family deductible must be met before benefits are payable for anyone

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	In-network member pays			In-network member pays							
VBC_\$250_\$2500_\$20/\$40_10% ¹	\$250 / \$500	10%	\$2,500 / \$5,000	\$20 per visit	\$40 per visit	\$200 then 10% after deductible	\$20 per visit	\$20 per visit	\$40 per visit	\$20 per visit	10% after deductible
VBC_\$250_\$3000_\$25/\$45_10% ¹	\$250 / \$500	10%	\$3,000 / \$6,000	\$25 per visit	\$45 per visit	\$200 then 10% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	10% after deductible
VBC_\$500_\$3000_\$25/\$45_10% ¹	\$500 / \$1,000	10%	\$3,000 / \$6,000	\$25 per visit	\$45 per visit	\$200 then 10% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	10% after deductible
VBC_\$500_\$3000_\$25/\$40_20% ¹	\$500 / \$1,000	20%	\$3,000 / \$6,000	\$25 per visit	\$40 per visit	\$200	\$15 per visit	\$25 per visit	\$40 per visit	\$25 per visit	20% after deductible
VBC_\$500_\$5000_\$30/\$45_20% ¹	\$500 / \$1,000	20%	\$5,000 / \$10,000	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	20% after deductible
VBC_\$500_\$3000_\$20/\$40_20% ¹	\$500 / \$1,000	20%	\$3,000 / \$6,000	\$20 per visit	\$40 per visit	\$200 then 20% after deductible	\$20 per visit	\$20 per visit	\$40 per visit	\$20 per visit	20% after deductible
VBC_\$500_\$3500_\$20/\$40_20% ¹	\$500 / \$1,000	20%	\$3,500 / \$7,000	\$20 per visit	\$40 per visit	\$200 then 20% after deductible	\$20 per visit	\$20 per visit	\$40 per visit	\$20 per visit	20% after deductible
VBC_\$500_\$4000_\$25/\$45_20% ¹	\$500 / \$1,000	20%	\$4,000 / \$8,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$500_\$5000_\$25/\$45_20% ¹	\$500 / \$1,000	20%	\$5,000 / \$10,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$500_\$5000_\$35/\$55_30% ¹	\$500 / \$1,000	30%	\$5,000 / \$10,000	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$500_\$7150_\$25/\$45_20% ¹	\$500 / \$1,000	20%	\$7,150 / \$14,300	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$500_\$7150_\$35/\$55_30% ¹	\$500 / \$1,000	30%	\$7,150 / \$14,300	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$1000_\$3000_\$25/\$40_20% ¹	\$1,000 / \$2,000	20%	\$3,000 / \$6,000	\$25 per visit	\$40 per visit	\$200	\$15 per visit	\$25 per visit	\$40 per visit	\$25 per visit	20% after deductible
VBC_\$1000_\$5000_\$25/\$40_20% ¹	\$1,000 / \$2,000	20%	\$5,000 / \$10,000	\$25 per visit	\$40 per visit	\$200	\$15 per visit	\$25 per visit	\$40 per visit	\$25 per visit	20% after deductible
VBC_\$1000_\$3000_\$30/\$45_20% ¹	\$1,000 / \$2,000	20%	\$3,000 / \$6,000	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	20% after deductible
VBC_\$1000_\$5000_\$30/\$45_20% ¹	\$1,000 / \$2,000	20%	\$5,000 / \$10,000	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	20% after deductible
VBC_\$1000_\$3000_\$35/\$50_20% ¹	\$1,000 / \$2,000	20%	\$3,000 / \$6,000	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	20% after deductible
VBC_\$1000_\$5000_\$35/\$50_20% ¹	\$1,000 / \$2,000	20%	\$5,000 / \$10,000	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	20% after deductible
VBC_\$1000_\$3500_\$25/\$45_20% ¹	\$1,000 / \$2,000	20%	\$3,500 / \$7,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$1000_\$4500_\$25/\$45_20% ¹	\$1,000 / \$2,000	20%	\$4,500 / \$9,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$1000_\$5500_\$25/\$45_20% ¹	\$1,000 / \$2,000	20%	\$5,500 / \$11,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$1000_\$5500_\$35/\$55_30% ¹	\$1,000 / \$2,000	30%	\$5,500 / \$11,000	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$1000_\$7150_\$25/\$45_20% ¹	\$1,000 / \$2,000	20%	\$7,150 / \$14,300	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$1000_\$7150_\$35/\$55_30% ¹	\$1,000 / \$2,000	30%	\$7,150 / \$14,300	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$1500_\$3000_\$25/\$40_20% ¹	\$1,500 / \$3,000	20%	\$3,000 / \$6,000	\$25 per visit	\$40 per visit	\$200	\$15 per visit	\$25 per visit	\$40 per visit	\$25 per visit	20% after deductible
VBC_\$1500_\$5000_\$25/\$40_20% ¹	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$25 per visit	\$40 per visit	\$200	\$15 per visit	\$25 per visit	\$40 per visit	\$25 per visit	20% after deductible
VBC_\$1500_\$3000_\$30/\$45_20% ¹	\$1,500 / \$3,000	20%	\$3,000 / \$6,000	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	20% after deductible
VBC_\$1500_\$5000_\$30/\$45_20% ¹	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	20% after deductible
VBC_\$1500_\$3000_\$35/\$50_20% ¹	\$1,500 / \$3,000	20%	\$3,000 / \$6,000	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	20% after deductible
VBC_\$1500_\$5000_\$35/\$50_20% ¹	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	20% after deductible

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	In-network member pays			In-network member pays								
VBC_\$1500_\$4000_\$25/\$45_20% ¹	\$1,500 / \$3,000	20%	\$4,000 / \$8,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible	
VBC_\$1500_\$5000_\$25/\$45_20% ¹	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible	
VBC_\$1500_\$6000_\$25/\$45_20% ¹	\$1,500 / \$3,000	20%	\$6,000 / \$12,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible	
VBC_\$1500_\$6000_\$35/\$55_30% ¹	\$1,500 / \$3,000	30%	\$6,000 / \$12,000	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible	
VBC_\$1500_\$7150_\$25/\$45_20% ¹	\$1,500 / \$3,000	20%	\$7,150 / \$14,300	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible	
VBC_\$1500_\$7150_\$35/\$55_30% ¹	\$1,500 / \$3,000	30%	\$7,150 / \$14,300	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible	
VBC_\$2000_\$4000_\$25/\$40_20% ¹	\$2,000 / \$4,000	20%	\$4,000 / \$8,000	\$25 per visit	\$40 per visit	\$200	\$15 per visit	\$25 per visit	\$40 per visit	\$25 per visit	20% after deductible	
VBC_\$2000_\$6000_\$25/\$40_20% ¹	\$2,000 / \$4,000	20%	\$6,000 / \$12,000	\$25 per visit	\$40 per visit	\$200	\$15 per visit	\$25 per visit	\$40 per visit	\$25 per visit	20% after deductible	
VBC_\$2000_\$4000_\$30/\$45_20% ¹	\$2,000 / \$4,000	20%	\$4,000 / \$8,000	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	20% after deductible	
VBC_\$2000_\$6000_\$30/\$45_20% ¹	\$2,000 / \$4,000	20%	\$6,000 / \$12,000	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	20% after deductible	
VBC_\$2000_\$4000_\$35/\$50_20% ¹	\$2,000 / \$4,000	20%	\$4,000 / \$8,000	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	20% after deductible	
VBC_\$2000_\$6000_\$35/\$50_20% ¹	\$2,000 / \$4,000	20%	\$6,000 / \$12,000	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	20% after deductible	
VBC_\$2000_\$4500_\$25/\$45_20% ¹	\$2,000 / \$4,000	20%	\$4,500 / \$9,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible	
VBC_\$2000_\$5500_\$25/\$45_20% ¹	\$2,000 / \$4,000	20%	\$5,500 / \$11,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible	
VBC_\$2000_\$5500_\$35/\$55_30% ¹	\$2,000 / \$4,000	30%	\$5,500 / \$11,000	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible	
VBC_\$2000_\$7150_\$25/\$45_20% ¹	\$2,000 / \$4,000	20%	\$7,150 / \$14,300	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible	
VBC_\$2000_\$7150_\$35/\$55_30% ¹	\$2,000 / \$4,000	30%	\$7,150 / \$14,300	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible	
VBC_\$2500_\$5000_\$25/\$45_20% ¹	\$2,500 / \$5,000	20%	\$5,000 / \$10,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible	
VBC_\$2500_\$5000_\$35/\$55_30% ¹	\$2,500 / \$5,000	30%	\$5,000 / \$10,000	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible	
VBC_\$2500_\$7500_\$25/\$45_20% ¹	\$2,500 / \$5,000	20%	\$7,500 / \$15,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible	
VBC_\$2500_\$7500_\$35/\$55_30% ¹	\$2,500 / \$5,000	30%	\$7,500 / \$15,000	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible	
VBC_\$3000_\$5000_\$25/\$40_20% ¹	\$3,000 / \$6,000	20%	\$5,000 / \$10,000	\$25 per visit	\$40 per visit	\$200	\$15 per visit	\$25 per visit	\$40 per visit	\$25 per visit	20% after deductible	
VBC_\$3000_\$7000_\$25/\$40_20% ¹	\$3,000 / \$6,000	20%	\$7,000 / \$14,000	\$25 per visit	\$40 per visit	\$200	\$15 per visit	\$25 per visit	\$40 per visit	\$25 per visit	20% after deductible	
VBC_\$3000_\$5000_\$30/\$45_20% ¹	\$3,000 / \$6,000	20%	\$5,000 / \$10,000	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	20% after deductible	
VBC_\$3000_\$7000_\$30/\$45_20% ¹	\$3,000 / \$6,000	20%	\$7,000 / \$14,000	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	20% after deductible	
VBC_\$3000_\$5000_\$35/\$50_20% ¹	\$3,000 / \$6,000	20%	\$5,000 / \$10,000	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	20% after deductible	
VBC_\$3000_\$7000_\$35/\$50_20% ¹	\$3,000 / \$6,000	20%	\$7,000 / \$14,000	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	20% after deductible	
VBC_\$3000_\$5000_\$30/\$45_30% ¹	\$3,000 / \$6,000	30%	\$5,000 / \$10,000	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	30% after deductible	
VBC_\$3000_\$5000_\$35/\$50_30% ¹	\$3,000 / \$6,000	30%	\$5,000 / \$10,000	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	30% after deductible	
VBC_\$3000_\$7000_\$35/\$50_30% ¹	\$3,000 / \$6,000	30%	\$7,000 / \$14,000	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	30% after deductible	

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	In-network member pays			In-network member pays							
VBC_\$3000_\$5500_\$25/\$45_20% ¹	\$3,000 / \$6,000	20%	\$5,500 / \$11,000	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$3000_\$5500_\$35/\$55_30% ¹	\$3,000 / \$6,000	30%	\$5,500 / \$11,000	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$3000_\$7150_\$25/\$45_20% ¹	\$3,000 / \$6,000	20%	\$7,150 / \$14,300	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$3000_\$7150_\$35/\$55_30% ¹	\$3,000 / \$6,000	30%	\$7,150 / \$14,300	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$3000_\$8900_\$25/\$45_20% ¹	\$3,000 / \$6,000	20%	\$8,900 / \$17,800	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$3000_\$8900_\$35/\$55_30% ¹	\$3,000 / \$6,000	30%	\$8,900 / \$17,800	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$3500_\$7150_\$25/\$45_20% ¹	\$3,500 / \$7,000	20%	\$7,150 / \$14,300	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$3500_\$7150_\$35/\$55_30% ¹	\$3,500 / \$7,000	30%	\$7,150 / \$14,300	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$3500_\$8900_\$25/\$45_20% ¹	\$3,500 / \$7,000	20%	\$8,900 / \$17,800	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$3500_\$8900_\$35/\$55_30% ¹	\$3,500 / \$7,000	30%	\$8,900 / \$17,800	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$4000_\$7150_\$25/\$45_20% ¹	\$4,000 / \$8,000	20%	\$7,150 / \$14,300	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$4000_\$7150_\$35/\$55_30% ¹	\$4,000 / \$8,000	30%	\$7,150 / \$14,300	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$4000_\$8900_\$25/\$45_20% ¹	\$4,000 / \$8,000	20%	\$8,900 / \$17,800	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$4000_\$8900_\$35/\$55_30% ¹	\$4,000 / \$8,000	30%	\$8,900 / \$17,800	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$4500_\$7150_\$25/\$45_20% ¹	\$4,500 / \$9,000	20%	\$7,150 / \$14,300	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$4500_\$7150_\$35/\$55_30% ¹	\$4,500 / \$9,000	30%	\$7,150 / \$14,300	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$4500_\$8900_\$25/\$45_20% ¹	\$4,500 / \$9,000	20%	\$8,900 / \$17,800	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$4500_\$8900_\$35/\$55_30% ¹	\$4,500 / \$9,000	30%	\$8,900 / \$17,800	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$5000_\$8150_\$30/\$45_20% ¹	\$5,000 / \$10,000	20%	\$8,150 / \$16,300	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	20% after deductible
VBC_\$5000_\$8550_\$35/\$50_20% ¹	\$5,000 / \$10,000	20%	\$8,550 / \$17,100	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	20% after deductible
VBC_\$5000_\$8550_\$30/\$45_30% ¹	\$5,000 / \$10,000	30%	\$8,550 / \$17,100	\$30 per visit	\$45 per visit	\$200	\$20 per visit	\$30 per visit	\$45 per visit	\$30 per visit	30% after deductible
VBC_\$5000_\$8550_\$35/\$50_30% ¹	\$5,000 / \$10,000	30%	\$8,550 / \$17,100	\$35 per visit	\$50 per visit	\$200	\$25 per visit	\$35 per visit	\$50 per visit	\$35 per visit	30% after deductible
VBC_\$5000_\$7150_\$25/\$45_20% ¹	\$5,000 / \$10,000	20%	\$7,150 / \$14,300	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$5000_\$7150_\$35/\$55_30% ¹	\$5,000 / \$10,000	30%	\$7,150 / \$14,300	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$5000_\$8900_\$25/\$45_20% ¹	\$5,000 / \$10,000	20%	\$8,900 / \$17,800	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$5000_\$8900_\$35/\$55_30% ¹	\$5,000 / \$10,000	30%	\$8,900 / \$17,800	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$6000_\$7150_\$25/\$45_20% ¹	\$6,000 / \$12,000	20%	\$7,150 / \$14,300	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$6000_\$7150_\$35/\$55_30% ¹	\$6,000 / \$12,000	30%	\$7,150 / \$14,300	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$6000_\$8900_\$25/\$45_20% ¹	\$6,000 / \$12,000	20%	\$8,900 / \$17,800	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$6000_\$8900_\$35/\$55_30% ¹	\$6,000 / \$12,000	30%	\$8,900 / \$17,800	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$7000_\$8900_\$25/\$45_20% ¹	\$7,000 / \$14,000	20%	\$8,900 / \$17,800	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$7000_\$8900_\$35/\$55_30% ¹	\$7,000 / \$14,000	30%	\$8,900 / \$17,800	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible
VBC_\$8000_\$8900_\$25/\$45_20% ¹	\$8,000 / \$16,000	20%	\$8,900 / \$17,800	\$25 per visit	\$45 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$45 per visit	\$25 per visit	20% after deductible
VBC_\$8000_\$8900_\$35/\$55_30% ¹	\$8,000 / \$16,000	30%	\$8,900 / \$17,800	\$35 per visit	\$55 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$55 per visit	\$35 per visit	30% after deductible

¹ First three visits are \$5 (includes PCP and behavioral health visits, in-office and virtual)

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2025 *Medical plan* benefit table

Plan name	Calendar-year costs			Care & services							
	Deductible per person / family	Coinsurance	Out-of-pocket max per person / family	PCP office visit	Specialist office visit	Emergency room visits	Virtual care office visit	Behavioral health office visit	Physical therapy	Acupuncture & spinal manipulations	Inpatient / outpatient care
	In-network member pays			In-network member pays							
PPO_\$250_\$2500_\$20_10% ¹	\$250 / \$500	10%	\$2,500 / \$5,000	\$20 per visit	\$20 per visit	\$200 then 10% after deductible	\$20 per visit	\$20 per visit	\$20 per visit	\$20 per visit	10% after deductible
PPO_\$250_\$3000_\$25_10% ¹	\$250 / \$500	10%	\$3,000 / \$6,000	\$25 per visit	\$25 per visit	\$200 then 10% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	10% after deductible
PPO_\$500_\$3000_\$25_10% ¹	\$500 / \$1,000	10%	\$3,000 / \$6,000	\$25 per visit	\$25 per visit	\$200 then 10% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	10% after deductible
PPO_\$500_\$3000_\$25_20% ¹	\$500 / \$1,000	20%	\$3,000 / \$6,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$500_\$5000_\$30_20% ¹	\$500 / \$1,000	20%	\$5,000 / \$10,000	\$30 per visit	\$30 per visit	\$200 then 20% after deductible	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	20% after deductible
PPO_\$500_\$3000_\$20_20% ¹	\$500 / \$1,000	20%	\$3,000 / \$6,000	\$20 per visit	\$20 per visit	\$200 then 20% after deductible	\$20 per visit	\$20 per visit	\$20 per visit	\$20 per visit	20% after deductible
PPO_\$500_\$3500_\$20_20% ¹	\$500 / \$1,000	20%	\$3,500 / \$7,000	\$20 per visit	\$20 per visit	\$200 then 20% after deductible	\$20 per visit	\$20 per visit	\$20 per visit	\$20 per visit	20% after deductible
PPO_\$500_\$4000_\$25_20% ¹	\$500 / \$1,000	20%	\$4,000 / \$8,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$500_\$5000_\$25_20% ¹	\$500 / \$1,000	20%	\$5,000 / \$10,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$500_\$5000_\$35_30% ¹	\$500 / \$1,000	30%	\$5,000 / \$10,000	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$500_\$7150_\$25_20% ¹	\$500 / \$1,000	20%	\$7,150 / \$14,300	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$500_\$7150_\$35_30% ¹	\$500 / \$1,000	30%	\$7,150 / \$14,300	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$1000_\$3000_\$25_20% ¹	\$1,000 / \$2,000	20%	\$3,000 / \$6,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1000_\$5000_\$25_20% ¹	\$1,000 / \$2,000	20%	\$5,000 / \$10,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1000_\$3000_\$30_20% ¹	\$1,000 / \$2,000	20%	\$3,000 / \$6,000	\$30 per visit	\$30 per visit	\$200 then 20% after deductible	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	20% after deductible
PPO_\$1000_\$5000_\$30_20% ¹	\$1,000 / \$2,000	20%	\$5,000 / \$10,000	\$30 per visit	\$30 per visit	\$200 then 20% after deductible	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	20% after deductible
PPO_\$1000_\$3500_\$25_20% ¹	\$1,000 / \$2,000	20%	\$3,500 / \$7,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1000_\$4500_\$25_20% ¹	\$1,000 / \$2,000	20%	\$4,500 / \$9,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1000_\$5500_\$25_20% ¹	\$1,000 / \$2,000	20%	\$5,500 / \$11,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1000_\$5500_\$35_30% ¹	\$1,000 / \$2,000	30%	\$5,500 / \$11,000	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$1000_\$7150_\$25_20% ¹	\$1,000 / \$2,000	20%	\$7,150 / \$14,300	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1000_\$7150_\$35_30% ¹	\$1,000 / \$2,000	30%	\$7,150 / \$14,300	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$1500_\$3000_\$25_20% ¹	\$1,500 / \$3,000	20%	\$3,000 / \$6,000	\$25 per visit	\$25 per visit	\$200	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1500_\$5000_\$25_20% ¹	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$25 per visit	\$25 per visit	\$200	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1500_\$3000_\$30_20% ¹	\$1,500 / \$3,000	20%	\$3,000 / \$6,000	\$30 per visit	\$30 per visit	\$200	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	20% after deductible
PPO_\$1500_\$5000_\$30_20% ¹	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$30 per visit	\$30 per visit	\$200	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	20% after deductible
PPO_\$1500_\$4000_\$25_20% ¹	\$1,500 / \$3,000	20%	\$4,000 / \$8,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1500_\$5000_\$25_20% ¹	\$1,500 / \$3,000	20%	\$5,000 / \$10,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1500_\$6000_\$25_20% ¹	\$1,500 / \$3,000	20%	\$6,000 / \$12,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1500_\$6000_\$35_30% ¹	\$1,500 / \$3,000	30%	\$6,000 / \$12,000	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$1500_\$7150_\$25_20% ¹	\$1,500 / \$3,000	20%	\$7,150 / \$14,300	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$1500_\$7150_\$35_30% ¹	\$1,500 / \$3,000	30%	\$7,150 / \$14,300	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$2000_\$4000_\$25_20% ¹	\$2,000 / \$4,000	20%	\$4,000 / \$8,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$2000_\$6000_\$25_20% ¹	\$2,000 / \$4,000	20%	\$6,000 / \$12,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible

¹ First three visits are \$5 (includes PCP and behavioral health visits, in-office and virtual)

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2025 *Medical plan* benefit table

Plan name	Calendar-year costs			Care & services							
	Deductible per person / family	Coinsurance	Out-of-pocket max per person / family	PCP office visit	Specialist office visit	Emergency room visits	Virtual care office visit	Behavioral health office visit	Physical therapy	Acupuncture & spinal manipulations	Inpatient / outpatient care
	In-network member pays			In-network member pays							
PPO_\$2000_\$4000_\$30_20% ¹	\$2,000 / \$4,000	20%	\$4,000 / \$8,000	\$30 per visit	\$30 per visit	\$200 then 20% after deductible	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	20% after deductible
PPO_\$2000_\$6000_\$30_20% ¹	\$2,000 / \$4,000	20%	\$6,000 / \$12,000	\$30 per visit	\$30 per visit	\$200 then 20% after deductible	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	20% after deductible
PPO_\$1500_\$3000_\$30_30% ¹	\$1,500 / \$3,000	30%	\$3,000 / \$6,000	\$30 per visit	\$30 per visit	\$200	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	30% after deductible
PPO_\$1500_\$5000_\$30_30% ¹	\$1,500 / \$3,000	30%	\$5,000 / \$10,000	\$30 per visit	\$30 per visit	\$200	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	30% after deductible
PPO_\$2000_\$4000_\$30_30% ¹	\$2,000 / \$4,000	30%	\$4,000 / \$8,000	\$30 per visit	\$30 per visit	\$200	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	30% after deductible
PPO_\$2000_\$6000_\$30_30% ¹	\$2,000 / \$4,000	30%	\$6,000 / \$12,000	\$30 per visit	\$30 per visit	\$200	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	30% after deductible
PPO_\$2000_\$4500_\$25_20% ¹	\$2,000 / \$4,000	20%	\$4,500 / \$9,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$2000_\$5500_\$25_20% ¹	\$2,000 / \$4,000	20%	\$5,500 / \$11,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$2000_\$5500_\$35_30% ¹	\$2,000 / \$4,000	30%	\$5,500 / \$11,000	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$2000_\$7150_\$25_20% ¹	\$2,000 / \$4,000	20%	\$7,150 / \$14,300	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$2000_\$7150_\$35_30% ¹	\$2,000 / \$4,000	30%	\$7,150 / \$14,300	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$2500_\$5000_\$25_20% ¹	\$2,500 / \$5,000	20%	\$5,000 / \$10,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$2500_\$5000_\$35_30% ¹	\$2,500 / \$5,000	30%	\$5,000 / \$10,000	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$2500_\$7500_\$25_20% ¹	\$2,500 / \$5,000	20%	\$7,500 / \$15,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$2500_\$7500_\$35_30% ¹	\$2,500 / \$5,000	30%	\$7,500 / \$15,000	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$3000_\$5000_\$30_20% ¹	\$3,000 / \$6,000	20%	\$5,000 / \$10,000	\$30 per visit	\$30 per visit	\$200	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	20% after deductible
PPO_\$3000_\$7000_\$30_20% ¹	\$3,000 / \$6,000	20%	\$7,000 / \$14,000	\$30 per visit	\$30 per visit	\$200	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	20% after deductible
PPO_\$3000_\$5000_\$25_30% ¹	\$3,000 / \$6,000	30%	\$5,000 / \$10,000	\$25 per visit	\$25 per visit	\$200	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	30% after deductible
PPO_\$3000_\$7000_\$25_30% ¹	\$3,000 / \$6,000	30%	\$7,000 / \$14,000	\$25 per visit	\$25 per visit	\$200	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	30% after deductible
PPO_\$3000_\$5000_\$30_30% ¹	\$3,000 / \$6,000	30%	\$5,000 / \$10,000	\$30 per visit	\$30 per visit	\$200	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	30% after deductible
PPO_\$3000_\$7000_\$30_30% ¹	\$3,000 / \$6,000	30%	\$7,000 / \$14,000	\$30 per visit	\$30 per visit	\$200	\$30 per visit	\$30 per visit	\$30 per visit	\$30 per visit	30% after deductible
PPO_\$3000_\$5500_\$25_20% ¹	\$3,000 / \$6,000	20%	\$5,500 / \$11,000	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$3000_\$5500_\$35_30% ¹	\$3,000 / \$6,000	30%	\$5,500 / \$11,000	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$3000_\$7150_\$25_20% ¹	\$3,000 / \$6,000	20%	\$7,150 / \$14,300	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$3000_\$7150_\$35_30% ¹	\$3,000 / \$6,000	30%	\$7,150 / \$14,300	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$3000_\$8900_\$25_20% ¹	\$3,000 / \$6,000	20%	\$8,900 / \$17,800	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$3000_\$8900_\$35_30% ¹	\$3,000 / \$6,000	30%	\$8,900 / \$17,800	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$3500_\$7150_\$25_20% ¹	\$3,500 / \$7,000	20%	\$7,150 / \$14,300	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$3500_\$7150_\$35_30% ¹	\$3,500 / \$7,000	30%	\$7,150 / \$14,300	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$3500_\$8900_\$25_20% ¹	\$3,500 / \$7,000	20%	\$8,900 / \$17,800	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$3500_\$8900_\$35_30% ¹	\$3,500 / \$7,000	30%	\$8,900 / \$17,800	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$4000_\$7150_\$25_20% ¹	\$4,000 / \$8,000	20%	\$7,150 / \$14,300	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
PPO_\$4000_\$7150_\$35_30% ¹	\$4,000 / \$8,000	30%	\$7,150 / \$14,300	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
PPO_\$4000_\$8900_\$25_20% ¹	\$4,000 / \$8,000	20%	\$8,900 / \$17,800	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible

¹ First three visits are \$5 (includes PCP and behavioral health visits, in-office and virtual)

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2025 *Medical plan* benefit table

	Plan name	Calendar-year costs			Care & services								
		Deductible per person / family	Coinsurance	Out-of-pocket max per person / family	PCP office visit	Specialist office visit	Emergency room visits	Virtual care office visit	Behavioral health office visit	Physical therapy	Acupuncture & spinal manipulations	Inpatient / outpatient care	
		In-network member pays			In-network member pays								
Connexus Network	PPO_4000_8900_35_30% ¹	\$4,000 / \$8,000	30%	\$8,900 / \$17,800	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible	
	PPO_4500_7150_25_20% ¹	\$4,500 / \$9,000	20%	\$7,150 / \$14,300	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible	
	PPO_4500_7150_35_30% ¹	\$4,500 / \$9,000	30%	\$7,150 / \$14,300	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible	
	PPO_4500_8900_25_20% ¹	\$4,500 / \$9,000	20%	\$8,900 / \$17,800	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible	
	PPO_4500_8900_35_30% ¹	\$4,500 / \$9,000	30%	\$8,900 / \$17,800	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible	
	PPO_5000_8550_25_30% ¹	\$5,000 / \$10,000	30%	\$8,550 / \$17,100	\$25 per visit	\$25 per visit	\$200	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	30% after deductible
	PPO_5000_7150_25_20% ¹	\$5,000 / \$10,000	20%	\$7,150 / \$14,300	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
	PPO_5000_7150_35_30% ¹	\$5,000 / \$10,000	30%	\$7,150 / \$14,300	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
	PPO_5000_8900_25_20% ¹	\$5,000 / \$10,000	20%	\$8,900 / \$17,800	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
	PPO_5000_8900_35_30% ¹	\$5,000 / \$10,000	30%	\$8,900 / \$17,800	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
	PPO_6000_7150_25_20% ¹	\$6,000 / \$12,000	20%	\$7,150 / \$14,300	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
	PPO_6000_7150_35_30% ¹	\$6,000 / \$12,000	30%	\$7,150 / \$14,300	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
	PPO_6000_8900_25_20% ¹	\$6,000 / \$12,000	20%	\$8,900 / \$17,800	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
	PPO_6000_8900_35_30% ¹	\$6,000 / \$12,000	30%	\$8,900 / \$17,800	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
	PPO_7000_8900_25_20% ¹	\$7,000 / \$14,000	20%	\$8,900 / \$17,800	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
	PPO_7000_8900_35_30% ¹	\$7,000 / \$14,000	30%	\$8,900 / \$17,800	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
	PPO_8000_8900_25_20% ¹	\$8,000 / \$16,000	20%	\$8,900 / \$17,800	\$25 per visit	\$25 per visit	\$200 then 20% after deductible	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	\$25 per visit	20% after deductible
	PPO_8000_8900_35_30% ¹	\$8,000 / \$16,000	30%	\$8,900 / \$17,800	\$35 per visit	\$35 per visit	\$200 then 30% after deductible	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	\$35 per visit	30% after deductible
Connexus Network HDHP	HDHP_3300_3300_0% ²	\$3,300 / \$6,600	0%	\$3,300 / \$6,600	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	
	HDHP_2800_5000_20% ^{2,3}	\$2,800 / \$5,600	20%	\$5,000 / \$10,000	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	
	HDHP_2800_5000_30% ^{2,3}	\$2,800 / \$5,600	30%	\$5,000 / \$10,000	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	
	HDHP_3300_5000_20% ²	\$3,300 / \$6,600	20%	\$5,000 / \$10,000	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	
	HDHP_5000_5000_0% ²	\$5,000 / \$10,000	0%	\$5,000 / \$10,000	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	0% after deductible	
	HDHP_3300_7000_30% ²	\$3,300 / \$6,600	30%	\$7,000 / \$14,000	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	30% after deductible	

¹ First three visits are \$5 (includes PCP and behavioral health visits, in-office and virtual)

² First three visits are \$0 after deductible (includes PCP and behavioral health visits, in-office and virtual)

³ For coverage with three or more members, the entire family deductible must be met before benefits are payable for anyone

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2025 *Pharmacy* benefit table

	Value	Select	Preferred	Non-preferred	Select specialty	Preferred specialty	Non-preferred specialty
R1.OR.25	\$2	\$10	\$30	\$50	\$10	\$150	30%
R2.OR.25	\$2	\$15	\$45	\$75	\$15	\$225	30%
R3.OR.25	\$2	\$20	\$60	50%	\$20	\$180	50%
R4.OR.25	\$2	Greater of \$15 or 50%	Greater of \$15 or 50%	Greater of \$15 or 50%	Greater of \$15 or 50%	Greater of \$15 or 50%	Greater of \$15 or 50%

Expect quality pharmacy benefits

Quality prescription coverage is at the heart of a great health plan. We're here to support the pharmacy needs of your clients' employees, every step of the way.

Members have access to comprehensive prescription drug benefits through the Navitus pharmacy network. The Navitus network includes over 90% of pharmacies in Oregon, plus more than 58,000 pharmacies nationwide.

This means they can fill prescriptions almost anywhere, including these local and national drug store chains:

- Safeway and Albertsons
- Costco
- Walgreens
- CVS
- Fred Meyer
- Walmart
- Rite Aid

We also offer mail-order pharmacy services through Postal Prescription Services (PPS) and Costco.



Members can visit modahealth.com/pdl and choose "Large group" to search medications and find out their medication tiers and costs





Ready to choose better health *for your clients?*

Questions?

Contact your Moda Health Sales representative

 quotes@modahealth.com

 800-578-1402 | TTY users, please call 711

 modahealth.com

Portland office (corporate headquarters)
601 SW Second Ave., Portland, OR 97204-3156

For a list of medical plan exclusions, any reduction or limitations, contact Moda Health. These benefits and Moda Health policies are subject to change in order to be compliant with federal guidelines. Health plans provided by Moda Health Plan, Inc.

