Moda Select Individual & family

Choose a better experience with your *health insurance*



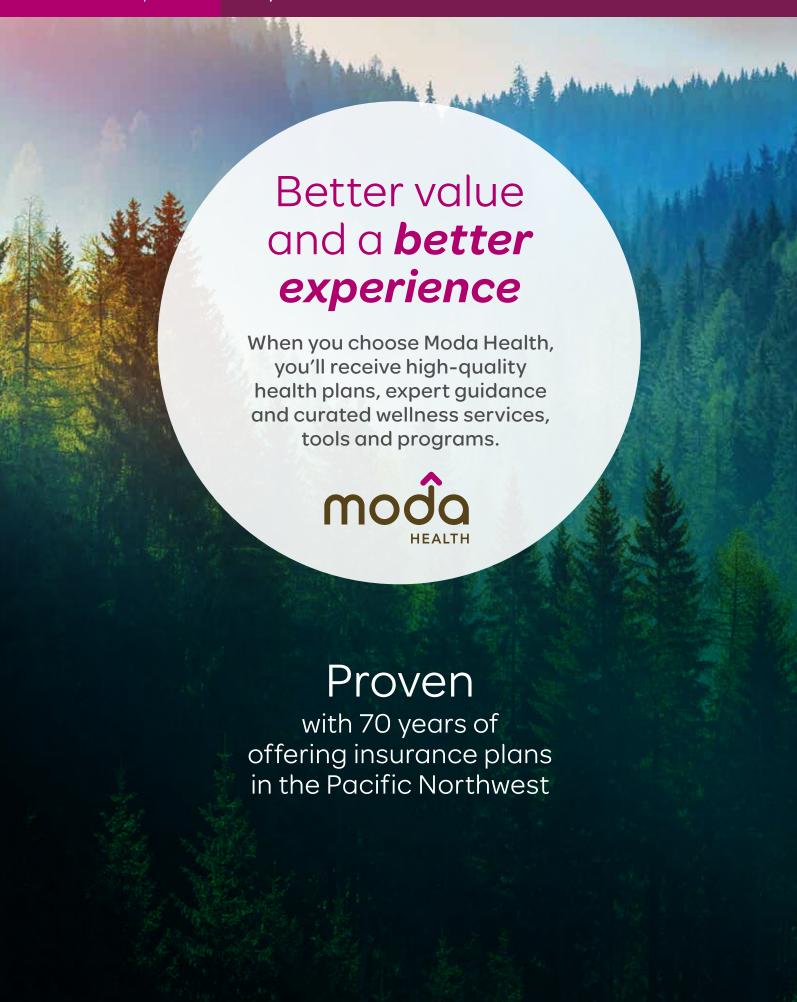
Moda Health Plan, Inc.



2025



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Preventive care

Preventive exams, women's annual exams, well-baby care, and many immunizations and screenings, so you can stay healthy



Prescription benefits

Comprehensive prescription drug coverage and an online-approved drug list tool modahealth.com/pdl, so you can confirm what's covered



24/7 doctor access

CirrusMD app, so you can connect to a doctor in under a minute, anytime, anywhere, at no cost except for High-Deductible Health Plans (HDHP)



Choose a better experience.
Enroll today at modahealth.com/shop

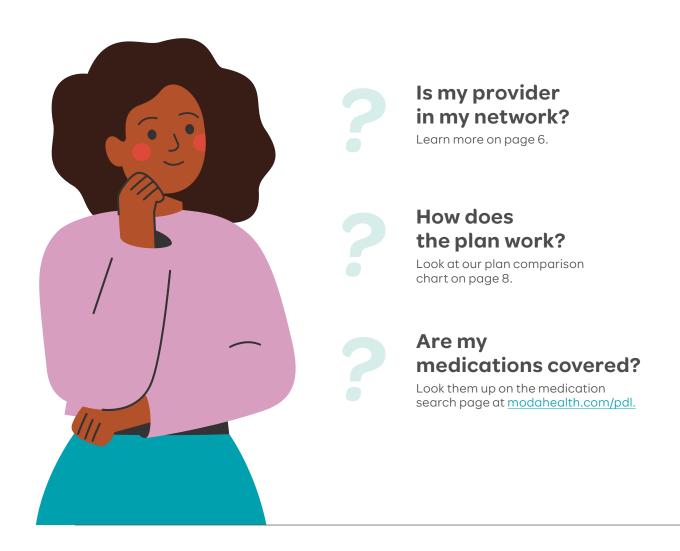
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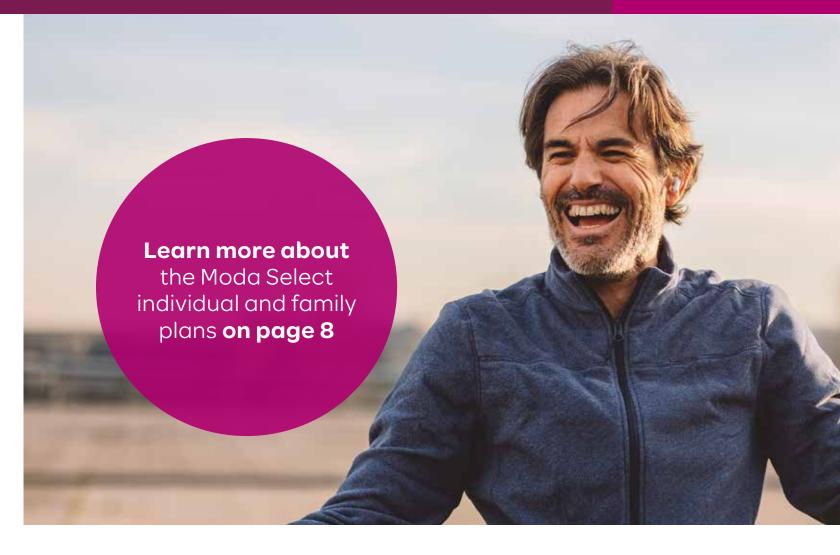
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Make a better choice

Insurance can be confusing. We want to make the experience better for you by helping you understand your choices.

When selecting your plan, you want to know:





Which plan is right for you?

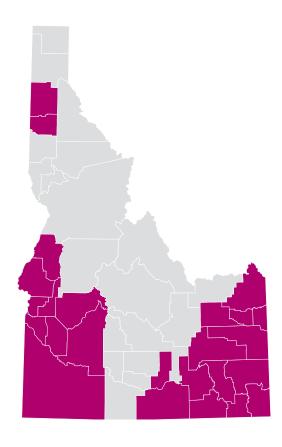
	Gold	Silver	Bronze
Monthly premium	\$\$\$	\$\$	\$
Out-of-pocket costs	\$	\$\$	\$\$\$
Great if you	use a lot of healthcare		use a little healthcare





The **Moda Select** 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.



The *Moda Select* Network is for residents living in these counties:

Ada	Bingham	Cassia	Jefferson	Owyhee
Adams	Boise	Elmore	Kootenai*	Payette
Bannock	Bonneville	Franklin*	Madison	Power
Bear Lake*	Canyon	Fremont	Minidoka	Teton
Benewah*	Caribou	Gem	Oneida	Washington

^{*} New for 2025



Are services available out-of-network?

Yes! All of our Idaho plans include both in- and out-of-network benefits. You can see out-of-network providers, but you'll receive the most savings when you see an in-network provider.

Can I get care outside of the service area?

Yes! We have options based on where the care is located. Please contact our team at 855-718-1767 with questions about where you can obtain care.

Health partners in your area

Treasure Valley



Northern Idaho



Eastern Idaho



South Central Idaho



Southeast Idaho



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Not all providers at these locations are in-network.



See if your doctor is in-network at modahealth.com/modaselect

ID IND Brochure 2025

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2025 **Moda Select** medical plans

	Gold plans		Silver plans			Bronze plans		
	Moda Select Gold 1000 + Vision Exam	Moda Select Gold 2200 + Vision Exam	Moda Select Silver 3000 + Vision Exam	Moda Select Silver 4000 + Vision Exam	Moda Select Silver 6400 + Vision Exam	Moda Select Bronze 8900 + Vision Exam	Moda Select Bronze 9200 + Vision Exam	Moda Select Bronze HDHP 7500
What you pay for the in-ne	twork care you rece	eive each year						
Deductible per person	\$1,000	\$2,200	\$3,000	\$4,000	\$6,400	\$8,900	\$9,200	\$7,500
Deductible per family	\$2,000	\$4,400	\$6,000	\$8,000	\$12,800	\$17,800	\$18,400	\$15,000
Out-of-pocket max per person	\$8,000	\$7,600	\$8,250	\$8,900	\$7,350	\$9,200	\$9,200	\$7,500
Out-of-pocket max per family	\$16,000	\$15,200	\$16,500	\$17,800	\$14,700	\$18,400	\$18,400	\$15,000
Out-of-network benefits available	Ø	Ø	Ø	⊘	⊘	Ø	Ø	Ø
Benefits that make up your	plan and what <i>you</i>	pay	'				'	
Primary care provider (PCP) office visit	\$15 per visit	\$10 per visit	\$25 per visit	\$10 per visit	\$25 per visit	\$50 per visit	\$50 per visit	0% after deductible
Specialist office visit	\$30 per visit	\$30 per visit	\$70 per visit	\$50 per visit	\$70 per visit	\$90 per visit	\$125 per visit	0% after deductible
Urgent care visit	\$30 per visit	\$30 per visit	\$70 per visit	\$50 per visit	\$70 per visit	\$90 per visit	\$125 per visit	0% after deductible
Virtual care visit	\$5 per visit	\$0 per visit	\$15 per visit	\$5 per visit	\$15 per visit	\$40 per visit	\$40 per visit	0% after deductible
Emergency room visit	15% after deductible	10% after deductible	35% after deductible	\$400 after deductible	35% after deductible	10% after deductible	0% after deductible	0% after deductible
Spinal manipulation services	\$30 per visit	\$30 per visit	\$70 per visit	\$50 per visit	\$70 per visit	\$90 per visit	\$125 per visit	0% after deductible
Mental health and substance use disorder office visit	\$15 per visit	\$10 per visit	\$25 per visit	\$10 per visit	\$25 per visit	\$50 per visit	\$50 per visit	0% after deductible
Outpatient rehabilitation	\$30 per visit	\$30 per visit	\$70 per visit	\$50 per visit	\$70 per visit	10% after deductible	0% after deductible	0% after deductible
Inpatient/outpatient care	15% after deductible	10% after deductible	35% after deductible	40% after deductible	35% after deductible	10% after deductible	0% after deductible	0% after deductible
Prescription medication ¹								
Value	\$2	\$2	\$2	\$2	\$2	\$2	\$2	0%
Select	\$10	\$5	\$20	\$20	\$20	\$20	\$20	0% after deductible
Preferred	30% after deductible	30%	40% after deductible	40%	40%	40%	40%	0% after deductible
Non-preferred	50% after deductible	50%	50% after deductible	0% after deductible				
Preferred specialty	30% after deductible	30%	40% after deductible	40%	40%	40%	40%	0% after deductible
Non-preferred specialty	50% after deductible	50%	50% after deductible	0% after deductible				
Things to consider when ch	oosing your plan							
Features and special benefits included in your plan	PCP 🕂	PCP 🕂	PCP 🕂	PCP	PCP +	PCP 🕂	PCP	HSA PCP

¹ One copay for a 30-day supply

Plan highlights



Out-of-network benefits available

For out-of-network benefits, scan the QR code, then click the Summary of Benefits (SOB) link for detailed information on each plan.



Choose a PCP

To help you manage your health, we highly encourage selecting an in-network PCP.



Health savings account

Our health savings account (HSA)-compatible, high-deductible health plan (Bronze HDHP 7500) gives you flexibility and choice. You have the freedom to choose any financial institution for your HSA. You can use HSA tax-free dollars to pay for deductibles, coinsurance and other qualified expenses not covered by your health plan.



Included with all plans



Unlimited mental health and substance use disorder in-person office visits Rehabilitation and habilitation



benefits (physical, occupational and speech therapy) limited to separate 20 sessions per year



Spinal manipulation limited to 18 visits per year

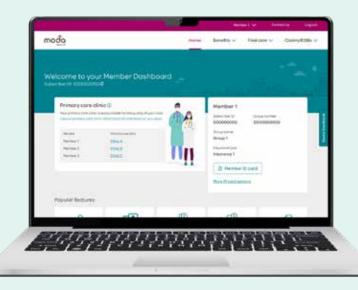
These benefits and Moda Health Plan policies are subject to change in order to be compliant with state and federal guidelines. This document provides summaries of various health plans and is not a contract. If there is any discrepancy between the summaries and the contract, it is the contract that will control.

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Member perks to reach your health goals

Save money as you work toward better health with exclusive discounts, programs and tools for members.







Tools

Health assessments

Prescription price check Text a doctor 24/7



Discounts

Gym memberships

Acupuncture, chiropractic, therapeutic massage (once plan benefit limit has been reached)

Popular health and fitness brands (like Vitamix® and Garmin®)



Coaching and care

Health coaching
Care coordination

Individual
Assistance Program
(including work issues, family
relationships, depression,
anxiety and grief)

Emergency medical assistance when traveling



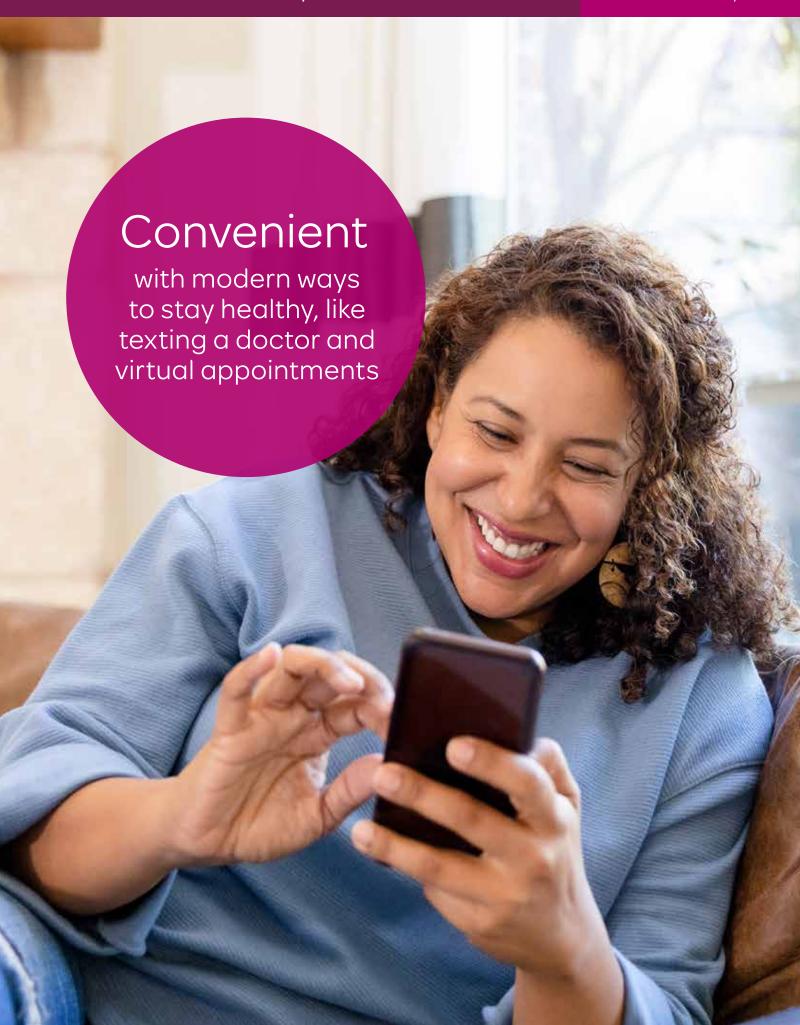
Mental health support

12 weeks of mobile therapy from a private therapist through your smartphone



Choose a better experience.

Enroll today at modahealth.com/shop



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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:

844-931-1775 (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 Partners, 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/idaho



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 hổ trợ ngôn ngữ miễn phí cho bạn. Goi 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 222-605-711 (الهاتف النصبي: 711)

بولتے ہیں تو ل نی (URDU) توجب دیں: اگر آپ اردو اعسانت آپ کے لیے بلا مصاوضہ دستیاب ہے۔ پر کال کریں (TTY: 711) 3229-605-877-

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 222-605-717) تماس بگیرید.

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 Sprachassistenzdienste 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 (TYY、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。 અગત્યનું: જો તમે (ભાષાં તર કરેલ ભાષા અહીં દશાર્વો) બોલો છો તો તે ભાષામાં તમારે માટે વિના મૂલ્યે સહાય ઉપલબ્ધ છે.1-877-605-3229 (TTY: 711) પર કૉલ કરો

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

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

ATENŢIE: Dacă vorbiţi limba română, vă punem la dispoziţie serviciul de asistenţă lingvistică în mod gratuit. Sunaţi 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)

ត្រវចងចាំ៖ បើអ្នកនិយាយភាសាខ្មែរ ហើយ ត្រ័វការសេវាកម្មជំនួយផ្នែកភាសាដោយ ឥតគិតថ្លៃ គឺមានផ្ដល់ជូនលោកអ្នក។ 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.

โปรดหราบ: หากคุณพูดภาษาไทย คุณ สามารถใช้บริการช่วยเหลือด้านภาษา ได้ฟรี 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 totogia. Vala'au i le 1-877-605-3229 (TTY: 711)

IPANGAG: Nu agsasaoka iti Ilocano, 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)

Health plans provided by Moda Health Plan Inc



Medicare Supplement
Small group
Large group

Questions? We're here to help.

Contact a Moda Health agent or call us at 855-718-1767. TTY users, please call 711.

Ind&MedSuppSales@modahealth.com modahealth.com/idaho



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