# 2024 Medical plan benefit summary



#### Moda Health Beacon Silver 6400 - CSV1 In network you pay Out-of-network you pay Calendar year costs Deductible per person \$2,750 Not Covered Deductible per family \$5,500 Not Covered Out-of-pocket max per person \$7,050 Not Covered Out-of-pocket max per family \$14,100 Not Covered Care & services Preventive care visit \$0/visit Not Covered Primary care provider (PCP) office visit1 \$15/visit Not Covered Specialist office visit \$70/visit Not Covered Urgent care visit \$70/visit Not Covered Virtual care visit - CirrusMD \$0/visit Not Covered Other providers \$10/visit Not Covered Outpatient diagnostic X-ray & lab 20% after deductible Not Covered 20% after deductible 20% after deductible Emergency room visit Ambulance 20% after deductible 20% after deductible Inpatient/outpatient Care 20% after deductible Not Covered Outpatient mental health/ \$15/visit Not Covered substance use disorder office visit1 Physical, speech or \$70/visit Not Covered occupational therapy visit Acupuncture and \$15/visit Not Covered spinal manipulation services Dental services for under age 19 Not Covered Not Covered \$15/visit Pediatric vision exam Not Covered 20% after deductible Not Covered Pediatric vision hardware Adult vision exam \$15/visit Not Covered Prescription medications<sup>2</sup> Value \$2 \$2 Select \$20 \$20 Preferred 40% 40% 50% after deductible Non-Preferred 50% after deductible 40% Not Covered **Preferred Specialty** Non-Preferred Specialty 50% after deductible Not Covered Features Metallic level Silver Exchange On Provider network Beacon Travel network Aetna PPO Clackamas, Clatsop, Columbia, Coos, Curry, Hood River, Jackson, Josephine, Multnomah, Tillamook, Service area Wasco, Washington, Yamhill, Additional benefits Adult vision exam

(not covered out-of-network)

<sup>1</sup> First 3 visits (including in person or virtual primary care visits and mental health and substance use disorder office visits) \$5/visit

<sup>2</sup> One copay per 30-day supply. \$85 maximum per 30-day supply for insulin

### Limitations

- Acupuncture: 12 visits per year
- Authorization by Moda Health is required for all medical and surgical admissions and some outpatient services and medications
- Biofeedback: Only for tension or migraine headaches or urinary incontinence. 10 visits per lifetime
- Coordination of benefits: When you have more than one health plan, combined benefits for all plans is limited to the maximum plan allowance for all covered services. An expense paid under Medicare will have benefits reduced by the amount Medicare paid
- Hearing aids: Once every 3 years. Hearing tests: Twice per year under age 4 and once per year age 4 and older
- Hospice respite care: 30 days per lifetime, up to five days in a row
- Infusion therapy: For some medications you must use an authorized provider. Outpatient hospital setting may not be covered
- Prescriptions: 30-day supply for standard retail and most specialty pharmacy. 90-day supply for mail order and participating retail
- Preventive care: Cost sharing may apply to services not required under the Affordable Care Act
- Rehabilitation and habilitation: 30 inpatient days and 30 outpatient sessions per calendar year. Extra rehabilitation up to 60 days after acute head or spinal cord injury or 60 sessions to treat neurologic conditions. Separate limits for rehabilitative and habilitative services.
- Skilled nursing facility: 60 days per year
- Spinal manipulation: 20 visits per year
- Transplants must be performed at the authorized transplant facility to be eligible for coverage
- Vision exam and glasses or contacts: Once per year for members under age 19
- Adult vision exam once per year

## **Exclusions**

- Care outside the United States, other than emergency care
- Charges over the maximum plan allowance
- Correctional services, including sheltered living and court-ordered anger management or sex offender treatment
- Cosmetic services and supplies (exception for reconstructive surgery if medically necessary and not specifically excluded)
- Custodial care
- Dental examinations and treatment except for accidental injury
- Experimental or investigational treatment
- Infertility (services or supplies to treat infertility, including reversal of sterilization)
- Injury you get from practicing for or participating in professional athletic activities
- Instruction programs, except under the outpatient diabetic instruction benefit
- Massage or massage therapy
- Naturopathic supplies. Includes herbal, naturopathic or homeopathic medicines, substances or devices and any other nonprescription supplements
- Obesity (all services and supplies except those required under the Affordable Care Act)
- Optional services or supplies, including those for comfort, convenience, environmental control or education, and treatment not medically necessary
- Orthognathic surgery except when medically necessary to repair an accidental injury or for treatment of cancer
- Out-of-network care, except emergency services, retail pharmacy services, and services at an in-network facility when you cannot choose an in-network provider
- Self-treatment. Services you provide to yourself or services from a member of your immediate family (other than a dental provider)
- Services or supplies available under any city, county, state or federal law, except Medicaid
- Temporomandibular Joint Syndrome (TMJ)
- Vision surgery to cure or reduce near-sightedness, far-sightedness or astigmatism
- Adult vision exam one per year

This document is provided for informational purposes only, and is intended as a quick reference of Moda Health plan benefits. It is not considered a Summary of Benefits and Coverage (SBC), and should not be regarded as a replacement for the SBC. For cost and additional details of the coverage, including exclusions, any reduction or limitations and the terms under which the policy may be continued in force, contact your producer or Moda Health.

This is a summary of the health plan benefits and is not a contract. If there is any discrepancy between the information in this summary and the contract, it is the contract that will control.

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