

# 2024 – 25 Moda Health plan updates and clarifications

Effective Oct. 1, 2024

## Medical

- Medical Plans 1-7 will continue to be offered. No changes to the deductibles, out-of-pocket limits, copayments, or coinsurance.
- **NEW!** Teladoc: a virtual primary care program that offers members access to coordinated and primary care providers in a virtual setting.
  - Members who select Teladoc as their PCP 360 will be able to participate in coordinated care and receive better benefits.
  - Subscribers who live out-of-state can participate in coordinated care and receive better benefits.
  - Teladoc is subject to the virtual visit cost share, while other treatments or services would be subject to the standard cost share.
- **NEW!** Mighty Health: a virtual care platform focused on helping adults lose weight, reduce pain, and improve mobility and function at no cost to you.
- **NEW!** Gabbi: A digital breast cancer risk self-assessment to ensure all women know their risks and have access to early detection
  - Gabbi's risk assessment and concierge service is available at no cost to you.
- **NEW!** Doula services will be covered up to eight visits plus birth and delivery.
- **NEW!** Effective 1/1/25, Moda will be changing the member's PCP 360 attribution from individual primary care providers to the clinic level. There is no action needed for members who currently have a PCP 360 provider selected. You will automatically be assigned to the corresponding PCP 360 clinic.
- **NEW!** Nutritional therapy will now be available to all members at the standard cost sharing without a required diagnosis.
- All OEBC medical members have access to our **Behavioral Health 360 program**, offering two easy ways to find personalized care and support that helps you feel your best. Log into your Member Dashboard and go to the Behavioral Health tile to get started.
  - Complete a **Self-Guided Assessment** for immediate recommendations tailored to you.
  - Connect with a **Behavioral Health Champion** who will help you every step of the way.
- All Moda medical plans will continue to include our **Moda 360 program**, which includes access to our Health Navigator team, 24/7 texting with a doctor (CirrusMD), mental health support (Behavioral Health 360), virtual physical therapy (Sword) and more. Log into your [Member Dashboard](#) account to see all that Moda 360 has to offer!
- Members have the option to **participate in coordinated care** and receive the benefit benefits by **selecting a PCP 360** for primary care services. The **better benefits** include:
  - A lower individual deductible
  - A lower individual out-of-pocket maximum
  - Lower cost for certain services like primary care office visits, specialist office visits, and alternative care

## Pharmacy

- No changes to pharmacy copays/coinsurance
- 90-day mail order benefit is through Postal Prescription Services (PPS) or Costco. You can receive additional savings by using the mail-order benefit.
- **NEW!** OEBC has added the Costco 6 for 6 program which allows members to receive a 6-month supply of select value tier medications for a \$6 copay at Costco retail pharmacies

## Vision – no changes!

- **Plans Opal, Pearl, and Quartz** will continue to be offered.
- Members can see any license vision providers, however when the member chooses Moda Health contracted vision provider, they will receive a discounted rate.

## Dental

- **NEW!** OEBC add enhanced benefits for members with intellectual disabilities which includes:
  - Additional cleanings
  - Nitrous oxide
  - Sedation
  - Case management services

Services except for nitrous oxide and sedation are preventive services, therefore would not apply to the member's annual benefit maximum. Nitrous oxide and sedation would fall under the applicable benefit level.

- No changes to dental copays and coinsurance. Dental plans 1, 5, 6, Exclusive PPO, and Exclusive PPO – incentive plan will continue to be offered.

- The Exclusive PPO plans requires that members use a Delta Dental PPO provider. There are no out-of-network benefits.
- OEGB members have the **Preventive First benefit**. This means all preventive services will no longer accrue towards the annual benefit maximum and members will have additional dollars to use for basic and major services (ie. fillings, crowns, and implants).

## Delta Dental plan options

Dental plan	Plan 1 <sup>1</sup>	Plan 5 <sup>2</sup>	Plan 6	Exclusive PPO <sup>3</sup>	Exclusive PPO incentive plan <sup>3</sup>
Network	Delta Dental Premier			Delta Dental PPO	
Deductible	\$50	\$50	\$50	\$50	\$50
Benefit maximum	\$2,200	\$1,700	\$1,200	\$1,500	\$2,300
In-network members pay					
Preventative/ diagnostic <sup>1</sup>	30%-0%	30%-0%	0%	0%	0%
Restorative	30%-0%	30%-0%	20%	10%	30%-0%
Major restorative	30%-0%	30%	50%	20%	30%-0%
Prosthodontic	30%-0%	50%	50%	20%	30%-0%
Orthodontic (Lifetime maximum - \$1,800)	20%	20%	N/A	20%	20%

<sup>1</sup> Deductible waived.

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

<sup>3</sup> This plan has no out-of-network benefit. Services performed outside the Delta Dental PPO network are not covered unless for a dental emergency.

## Medical plans 1-7 (Connexus network)

Medical plan	Deductible		Out-of-pocket		Primary care		Specialist visits		Alternative care		Urgent care	
	CCM	Non-CCM	CCM	Non-CCM	CCM	Non-CCM	CCM	Non-CCM	CCM	Non-CCM	CCM	Non-CCM
Medical plan 1	\$400	\$500	\$2,850	\$3,250	\$20 <sup>1</sup>	20%	\$40 <sup>1</sup>	20%	\$20 <sup>1</sup>	20%	\$40 <sup>1</sup>	20%
Medical plan 2	\$800	\$900	\$4,250	\$8,000	\$20 <sup>1</sup>	20%	\$40 <sup>1</sup>	20%	\$20 <sup>1</sup>	20%	\$40 <sup>1</sup>	20%
Medical plan 3	\$1,200	\$1,300	\$4,850	\$5,250	\$25 <sup>1</sup>	25%	\$50 <sup>1</sup>	25%	\$25 <sup>1</sup>	25%	\$50 <sup>1</sup>	25%
Medical plan 4	\$1,600	\$1,700	\$6,700	\$7,100	\$25 <sup>1</sup>	25%	\$50 <sup>1</sup>	25%	\$25 <sup>1</sup>	25%	\$50 <sup>1</sup>	25%
Medical plan 5	\$2,000	\$2,100	\$6,800	\$7,200	\$30 <sup>1</sup>	25%	\$50 <sup>1</sup>	25%	\$30 <sup>1</sup>	25%	\$50 <sup>1</sup>	25%
HDHP Medical plan 6	\$1,600	\$1,700	\$6,400	\$6,750	15%	20%	15%	20%	20%	25%	15%	20%
HDHP Medical plan 7	\$2,000	\$2,100	\$6,500	\$6,750	20%	25%	20%	25%	20%	25%	20%	25%

<sup>1</sup> Deductible waived. All amounts reflect member responsibility.

<sup>2</sup> Subscriber-only amounts shown. Family deductible and out-of-pocket maximums vary by plan. See plan options brochure for details.



Medical/Vision 866-932-0409 Dental 866-923-0410 Pharmacy 866-923-0411