

2017–18 Moda Health plan updates and clarifications

Effective Oct. 1, 2017



Medical

- Plans Alder, Birch, Cedar, Dogwood and Evergreen will continue to be offered. See back page for plan details.
- Plans Birch, Cedar, Dogwood and Evergreen are available as both coordinated care model (CCM) and preferred provider organization (PPO) options.
- Alder is only available as a CCM plan.
- No changes to deductibles, out-of-pocket limits, copayments or coinsurance.
- Bariatric surgery coverage extended to spouse/partners and dependents age 18 and over.
- Moda will use new methodology for calculating Maximum Plan Allowance (MPA). This is applicable to out-of-network providers only.

CCM plans

- The coordinated care model (CCM) offers patient-centered care with a team-based approach. Our plans, powered by the Synergy and Summit networks, connect a primary care provider with the rest of your care team (other providers, specialists, etc.) to bring you the best treatments, facilitated through a Medical Home. You choose a medical home to coordinate your care.
- The Synergy and Summit networks each cover different counties throughout Oregon. Together, they cover all counties across the state.
- CCM plans require selection of a Medical Home for each covered individual. Members must use selected Medical Home for all primary care needs.

Pharmacy

- Pharmacy benefits differ depending on whether you select a PPO medical plan or a CCM (Synergy or Summit) medical plan.
- No changes to pharmacy copays/coinsurance
- Some medications may be limited to select home infusion providers or provider office infusion only. Moda will contact affected members and providers directly.

Vision

- Plans Opal, Pearl, and Quartz will continue to be offered.
- Benefit runs on a plan year basis.
- Benefit maximum includes exam and hardware.
- Covers contacts or one pair of lenses every plan year.

Dental

- Plans 1 and 6 will continue to be offered. Plans 2, 3, 4 are going away. We are introducing two new plans: Premier Plan 5 and an Exclusive PPO plan.
- Premier plans 1, 5, and 6 utilize the Delta Dental Premier Network. The Exclusive PPO plan will use the Delta Dental PPO Network.
- The Exclusive PPO plan requires that members use a Delta Dental PPO provider. This plan does not pay for services provided by a Premier Network or non-contracted provider.
- Members that move from Plan 4 to the NEW Premier Plan 5 option will receive 10 percent credit for each year the member has had dental services. Members will be enrolled with 70, 80, 90 or 100 percent incentive level benefits on Plan 5 based on previous utilization.
- Athletic mouth guards are now covered at 50 percent on all plans; Subject to limitations.
- Health through Oral Wellness – new program available Oct. 1, 2017.
 - Members may be eligible for additional preventive benefits based upon a clinical oral health risk assessment by a participating dentist.



Delta Dental plan options

	Plan 1 ²	Plan 5 ²	Plan 6	Exclusive PPO ³
Network	Delta Dental Premier			Delta Dental PPO
Deductible	\$50	\$50	\$50	\$50
Benefit Maximum	\$2,200	\$1,700	\$1,200	\$1,500
In-network member pays				
Preventative/diagnostic ¹	30%-0%	30%-0%	0%	0%
Restorative	30%-0%	30%-0%	20%	10%
Major Restorative	30%-0%	30%	50%	20%
Prosthetic	30%-0%	50%	50%	20%
Orthodontic (Lifetime maximum – \$1,800)	20%	20%	N/A	20%

¹ Deductible waived. ² 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. ³ This plan has no out-of-network benefit if seeing non-PPO provider.

Medical plans

CCM plan options (Synergy and Summit networks)

	Alder	Birch	Cedar	Dogwood	Evergreen ⁴
Deductible (individual) ¹	\$400	\$800	\$1,200	\$1,600	\$1,600
Out-of-pocket (individual)	\$3,000	\$4,000	\$5,000	\$6,850	\$6,550
Medical Home incentive care	\$10 ^{2,3}	\$15 ^{2,3}	\$15 ^{2,3}	\$15 ^{2,3}	20%
Medical Home primary care	\$20 ^{2,3}	\$30 ^{2,3}	\$30 ^{2,3}	\$30 ^{2,3}	20%
Specialist care	20%	20%	20%	20%	20%
Urgent care	\$50 ²	\$50 ²	\$50 ²	\$50 ²	20%

PPO Plan options (Connexus Network)

	Birch	Cedar	Dogwood	Evergreen ⁴
Deductible (individual) ¹	\$800	\$1,200	\$1,600	\$1,600
Out-of-pocket (individual)	\$4,000	\$5,000	\$6,850	\$6,550
Incentive visit				
Medical Home	\$15 ²	\$15 ²	\$15 ²	20%
Non-Medical Home	20% ²	20% ²	20% ²	20%
Primary care				
Medical Home	\$30 ²	\$30 ²	\$30 ²	20%
Non-Medical Home	20%	20%	20%	20%
Specialist care	20%	20%	20%	20%
Urgent care	\$50 ²	\$50 ²	50 ²	20%

¹ Deductible may be reduced by \$100/individual (up to \$300/family for Alder – Dogwood, up to \$200/family for Evergreen) if Healthy Futures requirements are met. ² Deductible waived. ³ Copay applies only if seen at your pre-selected Medical Home. ⁴ HSA-only plan.

Family deductibles are three times the individual amount on plans Alder – Dogwood. Family deductible is twice the individual amount on plan Evergreen. Family out-of-pocket maximums vary by plan. See plan options brochure for details.

