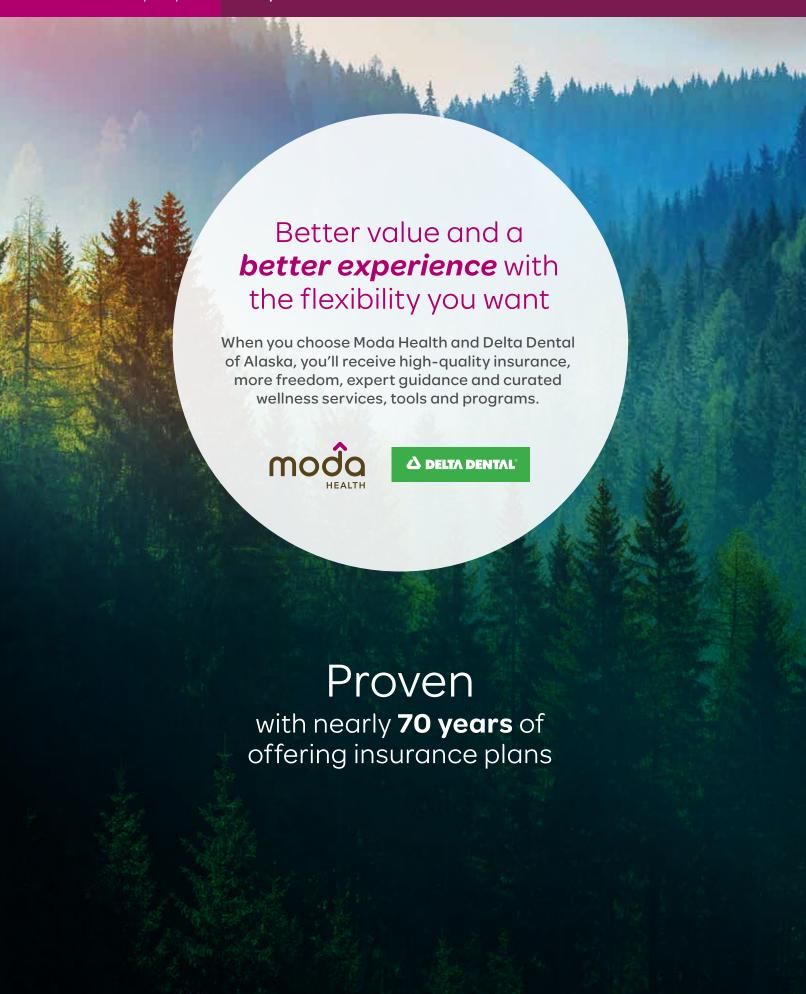


Choose a better experience with your *health insurance*









Plans that put **you first**



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



△ DELTA DENTAL®

One of the largest networks of dentists

Experience top-of-the-line dental care from one of the largest dental networks in Alaska and across the country



24/7 doctor access

CirrusMD app, so you can connect to a doctor in under a minute, anytime, anywhere, at no cost* *Included in all plans except Moda Pioneer Bronze HDHP 5500



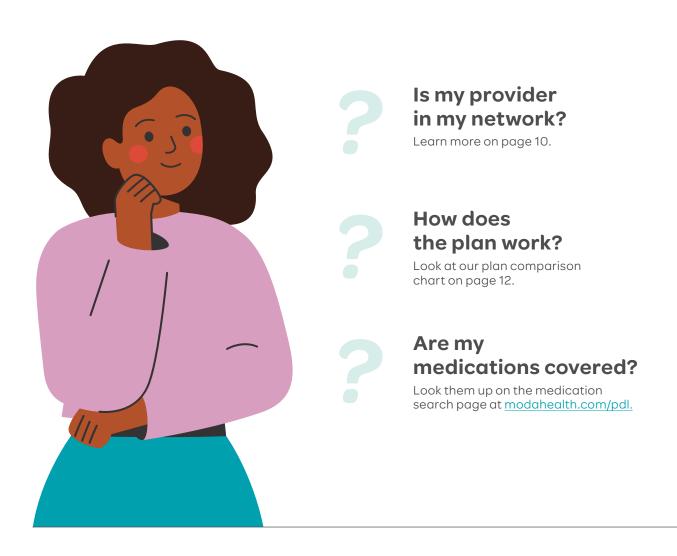
Choose a better experience.

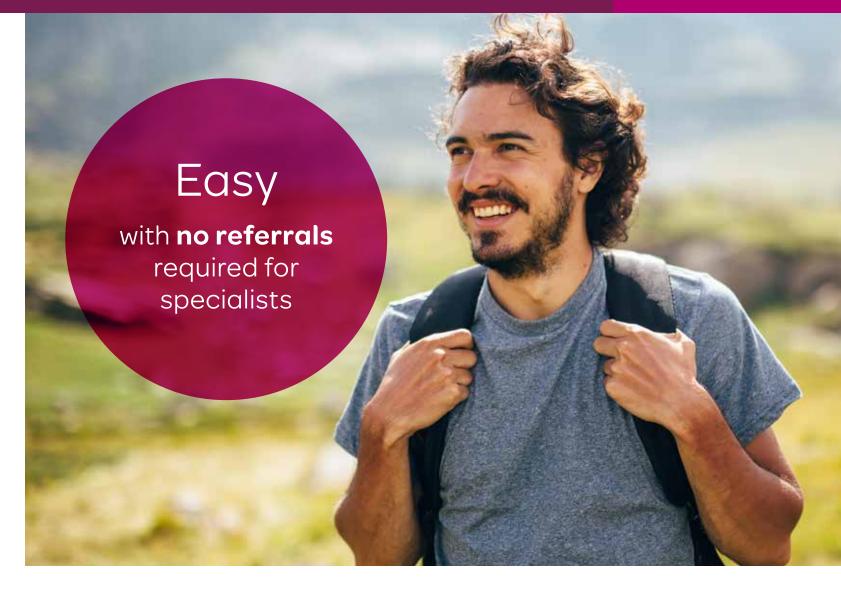
Enroll today at modahealth.com/shop

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 is right for you?

Learn more about the Moda Pioneer individual and family plans **on page 12.**

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

modahealth.com/shop





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



Discounts

Gym memberships

Alternative care (acupuncture, chiropractic and therapeutic massage)

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



Coaching and care

Health coaching

Care coordination

Tobacco cessation

Mobile therapy

Emergency medical assistance when traveling

Travel and care coordination for elective surgeries



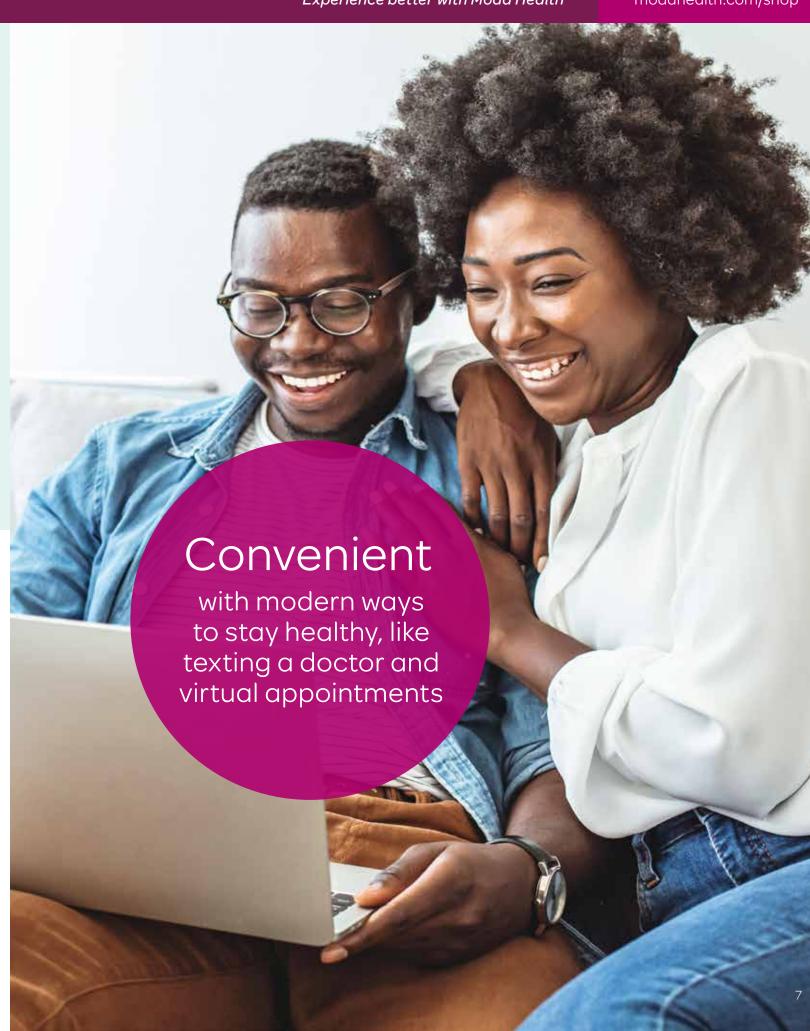
Mental health support

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

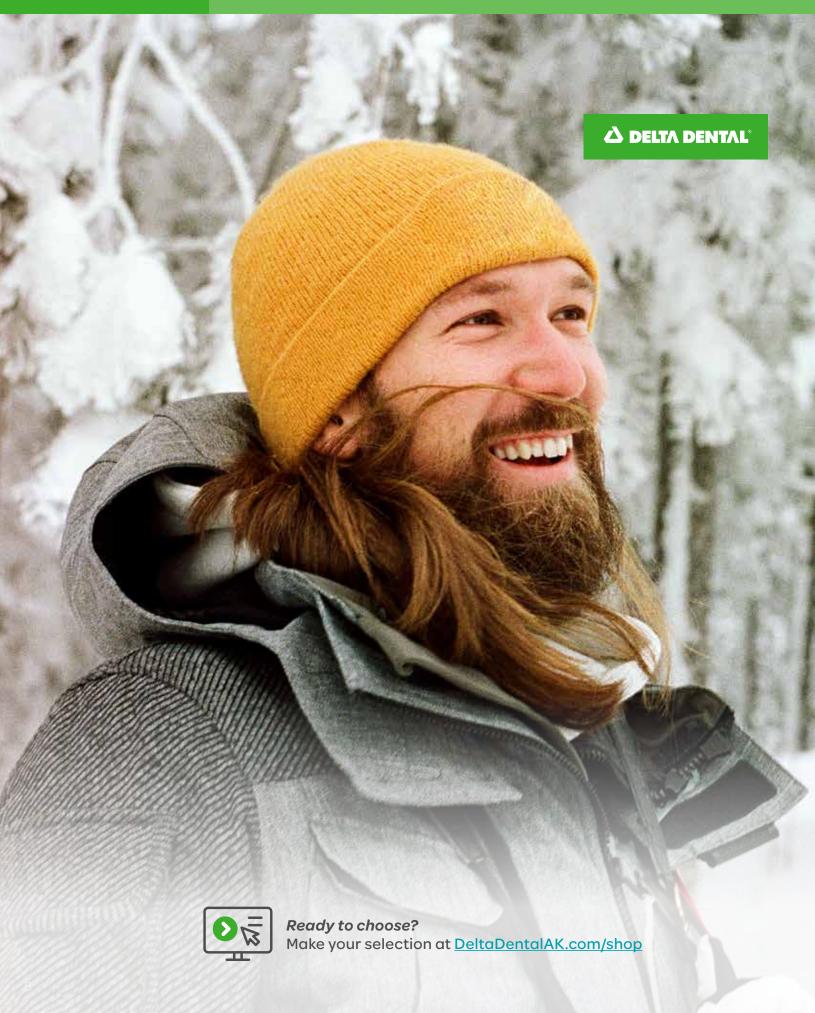


Choose a better experience.

Enroll today at modahealth.com/shop



DeltaDentalAK.com Quality coverage for your smile Quality coverage for your smile



Quality coverage for your smile

Our plans come with dental insurance options. This way, your whole health is covered.

With Delta Dental of Alaska plans, you'll have access to Delta Dental, one of the nation's largest dental networks. That means you can choose from thousands of dentists across the state and the country.



Savings from in-network dentists



Cleanings every 6 months



Superior customer service



DeltaDentalAK.com

Freedom to choose a dentist

Our dental plans also include useful online tools, resources and special programs for those of you who may need extra attention for your pearly whites.

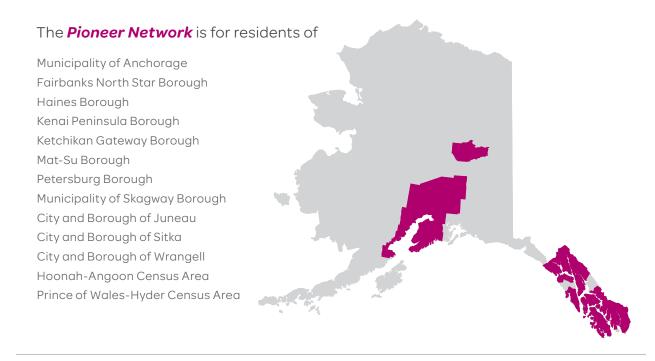






A network that connects you to care

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 *Pioneer Network* was developed to provide cost-effective, coordinated care. Pioneer offers three benefit levels (tiers) of healthcare:

Tier One

















Visit modahealth.com/PioneerProviders to see a list of Tier One providers.

Tier Two

First Choice Health. network in Alaska

Tier Three All other Alaska providers not in Tier One or Tier Two

Members can use any professional provider or hospital. However, Tier Three providers can balance bill when permitted by law. Members receive the best benefit by using Tier One providers.

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

Delta Dental networks go where you go

With access to thousands of dentists across the state and country. In-network dentists agree to accept our contracted fees as full payment, saving you out-of-pocket costs.



Delta Dental **PPO™** Network

Potential savings in-network

> Choose from a large selection of dentists



Delta Dental **Premier**® Network

Potential savings in-network

Get more choice with the largest dental network in Alaska





See if your dentist is in network at modahealth.com. Then, choose *Find Care* and select your dental network. DeltaDentalAK.com

modahealth.com/shop Experience better with Moda Health modahealth.com/shop

2023 *Medical plan* benefit table

	Gold plans		Silver plans		Bronze plans			
	Moda Pioneer Gold 1500	Moda Pioneer Alaska Standard Gold	Moda Pioneer Silver 4500	Moda Pioneer Alaska Standard Silver	Moda Pioneer Bronze 6500	Moda Pioneer Alaska Standard Bronze	Moda Pioneer Bronze HDHP 5500	
	Tier1y	ou pay	Tier1y	Tier 1 you pay		Tier1you pay		
Calendar year costs								
Deductible per person	\$1,500	\$2,000	\$4,500	\$5,800	\$6,500	\$9,100	\$5,500	
Deductible per family	\$3,000	\$4,000	\$9,000	\$11,600	\$13,000	\$18,200	\$11,000	
Out-of-pocket max per person	\$6,000	\$8,700	\$7,600	\$8,900	\$8,250	\$9,100	\$7,000	
Out-of-pocket max per family	\$12,000	\$17,400	\$15,200	\$17,800	\$16,500	\$18,200	\$14,000	
Care and services								
Primary care provider (PCP) office visit	\$25 / visit ¹	\$30 / visit	\$25 / visit ¹	\$40 / visit	\$30 / visit ¹	0% after deductible	35% after deductible	
Specialist office visit	\$50 / visit	\$60 / visit	\$50 / visit	\$80 / visit	\$60 / visit	0% after deductible	35% after deductible	
Urgent care visit	\$50 / visit	\$45 / visit	\$50 / visit	\$60 / visit	\$60 / visit	0% after deductible	35% after deductible	
Virtual care visit	\$15 / visit	\$30 / visit	\$15 / visit	\$40 / visit	\$20 / visit	0% after deductible	35% after deductible	
Emergency room visit	30% after deductible	25% after deductible	30% after deductible	40% after deductible	30% after deductible	0% after deductible	35% after deductible	
Acupuncture, spinal manipulation and massage therapy services ³	\$25 / visit	\$30 / visit	\$25 / visit	\$40/visit	\$30/visit	0% after deductible	35% after deductible	
Mental health and substance use disorder office visit ⁴	\$25/visit ⁵	\$30/visit	\$25 / visit ⁵	\$40/visit	\$30 / visit ⁵	0% after deductible	35% after deductible	
Outpatient rehabilitation ⁶	\$50 / visit	\$30 / visit	\$50 / visit	\$40 / visit	\$60 / visit	0% after deductible	35% after deductible	
Inpatient/outpatient care	30% after deductible	25% after deductible	30% after deductible	40% after deductible	30% after deductible	0% after deductible	35% after deductible	
Prescriptions ²								
Value	\$2	\$15	\$2	\$20	\$2	0% after deductible	\$2	
Select	\$10	\$15	\$20	\$20	30% after deductible	0% after deductible	35% after deductible	
Preferred	\$45	\$30	\$60	\$40	30% after deductible	0% after deductible	35% after deductible	
Non-Preferred	50% after deductible	\$60	50% after deductible	\$80 after deductible	45% after deductible	0% after deductible	40% after deductible	
Preferred Specialty	40% after deductible	\$250	40% after deductible	\$350 after deductible	35% after deductible	0% after deductible	35% after deductible	
Non-Preferred Specialty	50% after deductible	\$250	50% after deductible	\$350 after deductible	45% after deductible	0% after deductible	40% after deductible	
Features								
Plan highlights							AHSA	

- 1 No cost sharing for first 2 PCP visits per year
- 2 Copay amounts are per 30-day supply
- 3 You can get up to 24 acupuncture, massage and spinal manipulation visits in a calendar year
- 4 Unlimited mental health and substance disorder in person office visits
- 5 No cost sharing for first 2 mental health or substance use disorder office visits
- 6 Up to 45 outpatient rehab and 45 outpatient habilitation sessions per years

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.

Plan highlights



The Pioneer Network was developed to provide cost-effective, coordinated care. Pioneer offers three benefit levels (tiers) of healthcare. To view detailed summaries of these plans including all benefit tiers, use the QR code below.





Our health savings account (HSA)-compatible, high-deductible health plan (Bronze HDHP 5500) 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 disorder in person office visits⁴



Up to 45 outpatient rehabilitation and 45 habilitation visits in a calendar year⁶



You can get up to 24 acupuncture, massage and spinal manipulation visits in a calendar year³

 $\frac{1}{3}$

Quality coverage for your smile Quality coverage for your smile DeltaDentalAK.com DeltaDentalAK.com

2023 **Dental plan** benefit table

	<u>Delta Dental Premier®</u> <u>Plan</u>	<u>Delta Dental Premier®</u> <u>Healthy Smiles</u>	<u>Delta Dental Premier®</u> <u>Preventive Alaska Mandated Plan</u>	<u>Delta Dental PPO™</u> <u>1000 Plan</u>	<u>Delta Dental PPO™</u> <u>1500 Plan</u>			
	In network, you pay							
Calendar year costs								
Deductible per person	\$0	\$0	\$25 (applies to all ages)	\$50 (applies to all ages)				
Deductible per family	NA	NA	\$75 (applies to all ages)	\$150 (applies to all ages)				
Annual maximum (age 19+)	\$1,100	NA	\$500 (applies to all ages)	\$1,000	\$1,500			
Out-of-pocket maximum (under 19)	\$375 for one member / \$750 for two or more members		NA	\$375 for one member / \$750 for two or more members				
	Under age 19 / Ages 19+							
Class 1								
Exams & X-rays	30%/20%	30% / Not covered	0% after deductible	0%	0%			
Cleanings	30%/20%	30% / Not covered	0% after deductible	0%	0%			
Periodontal maintenance	30%/20%	30% / Not covered	0% after deductible	0%	0%			
Sealants	30%/20%	30% / Not covered	0% after deductible	0%	0%			
Topical fluoride ¹	30%/20%1	30% / Not covered	0% after deductible / 0% after deductible ⁶	0% / 0%1	0% / 0% ¹			
Class 2		'	'		'			
Space maintainers	70% / Not covered	70% / Not covered	0% after deductible ⁴ / Not covered	50% after deductible / Not covered	50% after deductible / Not covered			
Restorative fillings ²	70% / 35%²	70% / Not covered	90% after deductible ²	50% after deductible / 20% after deductible²	50% after deductible / 20% after deductible²			
Class 3		'	'		'			
Oral Surgery ³	70% / 50%³	70% / Not covered	90% after deductible ²	70% after deductible / 50% after deductible ³	70% after deductible / 50% after deductible³			
Endodontics ³	70% / 50%³	70% / Not covered	90% after deductible ²	70% after deductible / 50% after deductible ³	70% after deductible / 50% after deductible³			
Periodontics ³	70% / 50%³	70% / Not covered	90% after deductible ²	70% after deductible / 50% after deductible ³	70% after deductible / 50% after deductible ³			
Restorative crowns ³	70% / 50%³	70% / Not covered	90% after deductible ³	70% after deductible / 50% after deductible³	70% after deductible / 50% after deductible³			
Bridges ³	70%/50%³	70% / Not covered	90% after deductible ²	70% after deductible / 50% after deductible ³	70% after deductible / 50% after deductible ³			
Partial and complete dentures ³	70% / 50%³	70% / Not covered	90% after deductible ³	70% after deductible / 50% after deductible³	70% after deductible / 50% after deductible³			
Anesthesia ³	70% / 50%³	70% / Not covered	90% after deductible ³	70% after deductible / 50% after deductible³	70% after deductible / 50% after deductible³			
Orthodontia ⁵	70% ⁵ / Not covered	70% ⁵ / Not covered	Not Covered	70% after deductible ⁵ / Not covered	70% after deductible⁵ / Not covered			
Features			·					
Provider network	Delta Dental Premier Network			Delta Dental	PPO Network			

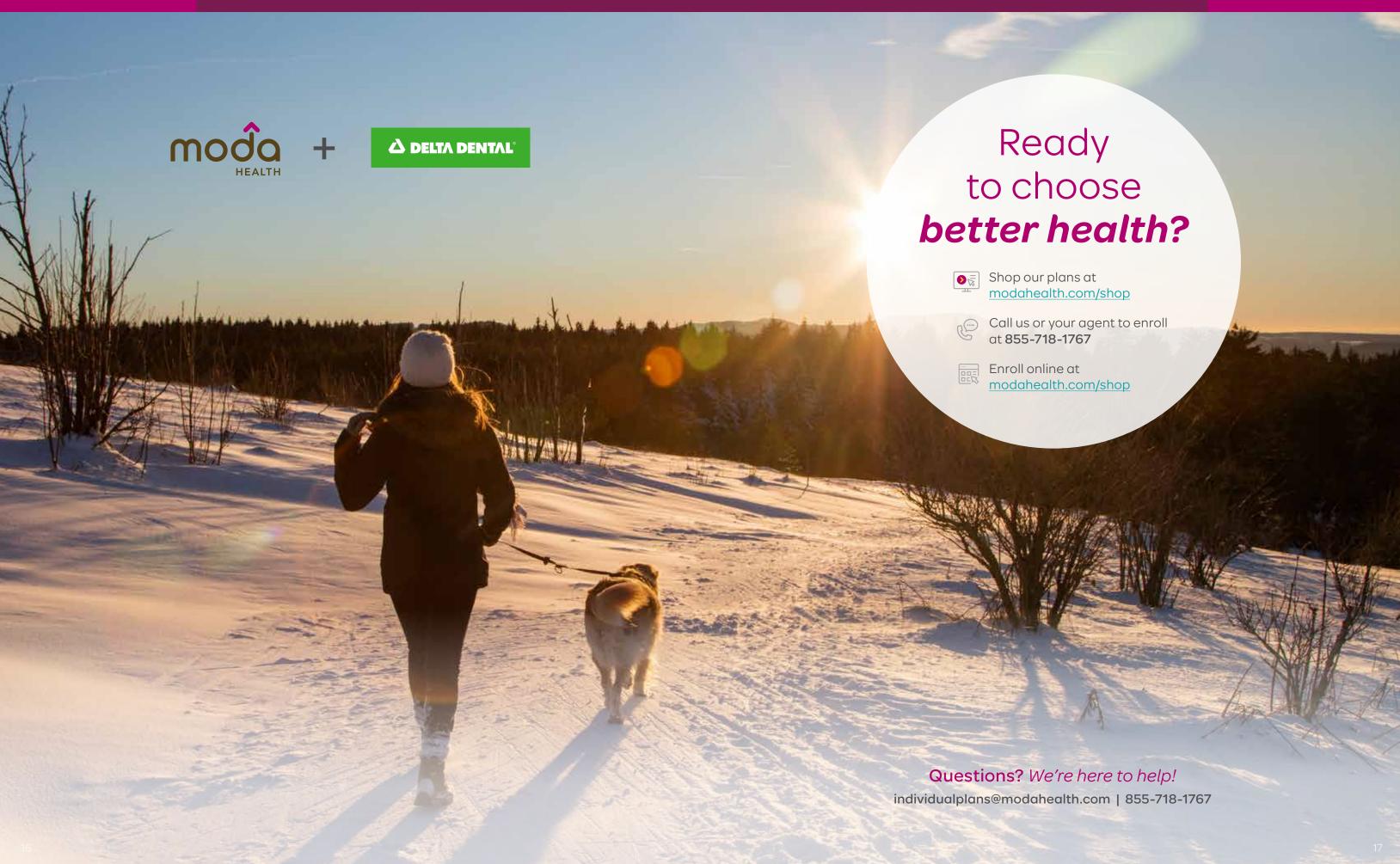
Limited to once in a 12-month period for ages 19 and older only if there is recent history of periodontal surgery or high-risk of decay because of medical disease or chemotherapy or similar type of treatment.
6-month exclusion period applies for ages 19 and older. Exclusion periods may be waived with one year of prior dental coverage, and no more than a 90-day break in coverage from the end of the old policy to the effective date of the 2023 Delta Dental policy.
12-month exclusion period applies for ages 19 and older. Exclusion periods may be waived with one year of prior dental coverage, and no more than a 90-day break in coverage from the end of the old policy to the effective date of the 2023 Delta Dental policy.
Not covered for ages 14 and over.
Only medically necessary orthodontia is covered.
Covered once in a 6-month period for ages 19 and older only if there is recent history of periodontal surgery or high-risk of decay because of medical disease or chemotherapy or similar type of treatment.



To find out additional information on these plans and whether there are any out of network benefits *use* the QR code to view detailed summaries of these plans.

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Nondiscrimination notice

We follow federal civil rights laws. We do not discriminate based on race, 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 Customer Service at:

888-217-2363 (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

Dave Nesseler-Cass coordinates

Dave Nesseler-Cass.

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.

our nondiscrimination work:

Chief Compliance Officer 601 SW Second Ave. Portland, OR 97204 855-232-9111 compliance@modahealth.com

Plan of Oregon. Dental plans in Alaska provided by Delta Dental of Alaska. Health plans provided by Moda Health Plan, Inc. Individual medical plans in Alaska provided by Moda Assurance Company. 39969758 (9/19)

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 ban 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 229-605-3229 (الهاتف النصبي: 11/7)

بولتے ہیں تو النی (URDU) توجب دیں: اگر آپ اردو اعثانت آپ کے لیے بلا معناوضہ وستیاب ہے۔ پر کال کریں (TTY: 711) 1-877-605-3229

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 2229-605-877 (TTY: 711) تماس بگيريد.

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 (ભાષાંતર કરેલ ભાષા અહીં દશારવો) બોલો છો તો તે ભાષામાં તમારે માટે વિના મે લયે સહાય ઉપલબધ છે. 1-877-605-3229 (TTY: 711) પર કૉલ કરો

ໂປດຊາບ: ຖ້າທ່ານເວົ້າພາສາລາວ, ການຊ່ວ ຍເຫຼືອດ້ານພາສາແມ່ນມີໃຫ້ທ່ານໂດຍບໍ່ເສັຍ ຄ່າ. ໂທ 1-877-605-3229 (TTY: 711)

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

ATENŢIE: Dacă vorbiţi limba română, vă punem la dispoziție serviciul de asistență lingvistică în mod gratuit. Sunați 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)

ត្រូវចងចាំ៖ បើអ្នកនិយាយភាសាខ្មែរ ហើយត្រូវ កាំរសេវាកម្មជំនួយផ្នែកភាសាដោយឥតគិតថ្លៃ័ គឺមានផ្តល់ជូនលោកអ្នក។ សូមទូរស័ព្ទទៅកាន់លេខ 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 ile 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)





modahealth.com

39969758 (9/19)

Medicare

_arge group

Questions? We're here to help.

Call one of our offices listed below. TTY users, please call 711.

Anchorage office

510 L Street, Suite 270 Anchorage, AK 99501 855-718-1767

Portland office (corporate headquarters)

601 SW Second Ave. Portland, OR 97204-3156 855-718-1767

ModaHealth.com DeltaDentalAK.com





These benefits and Moda Health/Delta Dental policies are subject to change in order to be compliant with state and federal guidelines. Individual medical plans provided by Moda Assurance Company. Dental plans provided by Delta Dental of Alaska. Delta Dental is a trademark of Delta Dental Plans Association