2022-23 OEBB Insurance Committee Webinar

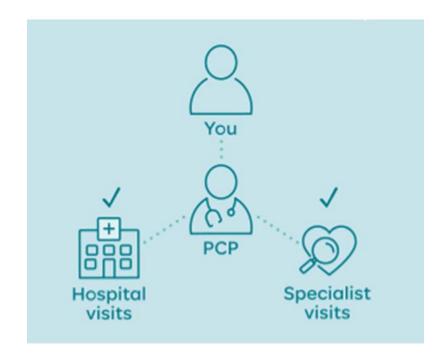
Moda Health

Medical and pharmacy

Moda Health

Plans and network options

- All Moda Health medical plans 1-7 will continue to use our Connexus Network
 - Referrals for specialists are not required for any of the Moda Health plans
- Members have the options to participate in coordinated care or noncoordinated care
- To participate in coordinated care, members must choose and use a PCP 360 for primary care services
- A PCP 360 is a primary care provider who is part of a facility that has been certified by the Oregon Patient-Centered Primary Care program or other similar programs
 - This means that a PCP 360 has met certain quality standards
- Each covered family member can choose whether to participate in coordinated care and choose their own PCP 360
- To search for in-network providers, members can use Moda Health's online provider directory Find Care or call their Health Navigator.
- Members living outside of the Connexus service area use Moda's NEW National network. More details coming soon.



PCP 360 and better benefits

- By selecting a PCP 360 for primary care services, the member receives the better benefits of:
 - A lower individual deductible
 - A lower individual out-ofpocket maximum
 - Lower cost for certain services:
 - Primary care office visits
 - Specialist office visits
 - Alternative care services
 - Incentive office visits for chronic conditions
- Members can choose a PCP 360 at any time during the year. They will receive the better benefit level the first of the month in which they make their PCP 360 selection with Moda Health

| Medical Plan | Deductible | | Out of pocket | | Primary Care | | Specialist Care | | Urgent Care | |
|-----------------------------|-------------|---------------------|---------------|---------------------|-------------------|---------------------|-------------------|---------------------|-------------------|---------------------|
| | Coordinated | Non- Coordinated | Coordinated | Non- Coordinated | Coordinated | Non- Coordinated | Coordinated | Non- Coordinated | Coordinated | Non- Coordinated |
| Plan 1 ² | \$400 | \$500 | \$2,850 | \$3,250 | \$20 ¹ | 20% | \$40 ¹ | 20% | \$40 ¹ | 20% |
| Plan 2 ² | \$800 | \$900 | \$3,850 | \$4,250 | \$20 ¹ | 20% | \$40 ¹ | 20% | \$40 ¹ | 20% |
| Plan 3 ² | \$1200 | \$1300 | \$4,850 | \$5,250 | \$25 ¹ | 25% | \$50 ¹ | 25% | \$50 ¹ | 25% |
| Plan 4 ² | \$1600 | \$1700 | \$6,700 | \$7,100 | \$25 ¹ | 25% | \$50 ¹ | 25% | \$50 ¹ | 25% |
| Plan 5 ² | \$2000 | \$2100 | \$6,800 | \$7,200 | \$30 ¹ | 25% | \$50 ¹ | 25% | \$50 ¹ | 25% |
| Plan 6 ² | \$1600 | \$1700 | \$6,400 | \$6,750 | 15% | 20% | 15% | 20% | 15% | 20% |
| Plan 7 ² HDHP | \$2000 | \$2100 | \$6,500 | \$6,750 | 20% | 25% | 20% | 25% | 20% | 25% |

¹ Deductible waived

² If enrolled in a Moda Health medical plan, each covered individual must choose a PCP 360 with Moda Health for that individual to receive the enhanced "coordinated" benefit under that plan when using a provider in the Connexus Network. If an individual has not chosen a PCP 360 with Moda Health, they will receive the "non-coordinated" benefit shown in the right column if using a provider in the Connexus Network

Incentive care benefits

 The coordinated care benefit includes an incentive care office visit with a PCP 360 or specialist for chronic conditions such as asthma, heart conditions, cholesterol, high blood pressure and diabetes

| Medical | Incentive Care Office Visit | | | | |
|-----------------------------|-----------------------------|-----------------|--|--|--|
| Plan | Coordinated | Non-Coordinated | | | |
| Plan 1 ² | \$15 ¹ | 20% | | | |
| Plan 2 ² | \$15 ¹ | 20% | | | |
| Plan 3 ² | \$20 ¹ | 25% | | | |
| Plan 4 ² | \$20 ¹ | 25% | | | |
| Plan 5 ² | \$25 ¹ | 25% | | | |
| Plan 6 ² HDHP | 15% | 20% | | | |
| Plan 7 ² HDHP | 20% | 25% | | | |

¹ Deductible waived

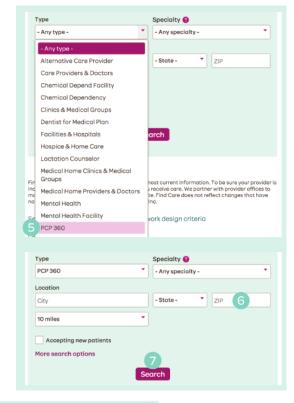
² If enrolled in a Moda Health medical plan, each covered individual must choose a PCP 360 with Moda Health for that individual to receive the enhanced "coordinated" benefit under that plan when using a provider in the Connexus Network. If an individual has not chosen a PCP 360 with Moda Health, they will receive the "non-coordinated" benefit shown in the right column if using a provider in the Connexus Network.

How to find a PCP 360

To find a PCP 360, the member can visit modahealth.com/OEBB

- (2) Click the Find Care link on the left side of the page
- (3) Use the Search by network option to select the Connexus Network
- (4) Then, choose "Search by network"
- (5) From the "Type" dropdown menu, select PCP 360
- (6) Enter your Zip code
- (7) Choose "Search"
- (8) You will know a provider is a PCP 360 if you see the "" graphic under their phone number







How to choose a Moda Health PCP 360



Call a Moda 360 Health Navigator at 866-923-0409 or email them at oebbquestions@modahealth.com



Log in to your Member Dashboard to select a PCP 360 or instantly chat with Moda 360 Health Navigator

- Each enrolled member can choose their own PCP 360
- The subscriber of the plan may also choose a PCP 360 for all covered members, including their spouse or domestic partner and dependents

Members who live outside the service area

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|--|------|
| Dependents who live <i>part-time</i> outside of the Connexus Network service area (like college students) can still choose a PCP 360 for coordinated care and receive the better benefits. • Members must update the dependent's address in myOEBB to access Moda's new National network for in-network benefits away from home. • When members are away and need primary care from a provider other than their designated PCP 360, they will receive benefits at the "Primary care office visits with a provider other than their chosen PCP 360" benefit level. | y do |

Medical plan changes overview

- Moda continues to offer medical plans 1-7. No changes to the deductibles and copays/coinsurances.
- NEW! The Maximum Cost Share for medical plans 1-5 is being removed. This means all eligible medical services, including additional cost tier copay/coinsurances and pharmacy expenses, will now accrue towards the out-of-pocket maximum.
 - Once the out-of-pocket maximum has been met, all eligible medical and pharmacy services will be covered at 100%

| Medical | Deductible | | Out of | pocket | Maximum Cost Share | |
|---------------------|-------------|---------------------|-------------|---------------------|-----------------------|---------------------|
| Plan | Coordinated | Non- Coordinated | Coordinated | Non- Coordinated | Coordinated | Non- Coordinated |
| Plan 1 ² | \$400 | \$500 | \$2,850 | \$3,250 | \$7,900 | \$7,900 |
| Plan 2 ² | \$800 | \$900 | \$3,850 | \$4,250 | \$7,900 | \$7,900 |
| Plan 3 ² | \$1200 | \$1300 | \$4,850 | \$5,250 | \$7,900 | \$7,900 |
| Plan 4 ² | \$1600 | \$1700 | \$6,700 | \$7,100 | \$7,900 | \$7,900 |
| Plan 5 ² | \$2000 | \$2100 | \$6,800 | \$7,200 | \$7,900 | \$7,900 |
| Plan 6 ² | \$1600 | \$1700 | \$6,400 | \$6,750 | N/A | N/A |
| Plan 7 ² | \$2000 | \$2100 | \$6,500 | \$6,750 | N/A | N/A |

High Deductible Health Plans overview (Plans 6 & 7)

- High Deductible Health Plans (HDHPs) can be paired with a Health Savings Account (HSA)
- Preventive services are covered in full; all other services are subject to the deductible and coinsurance
- Pharmacy expenses are also subject to the deductible and coinsurance, with the exception of Value-Tier drugs
- The family deductible applies to plans where the subscriber covers one or more dependents on the plan
 - There is no individual deductible on family plans
- Deductible and coinsurance amounts both accrue towards the member's out-of-pocket maximum

Medical plan changes (effective 10/1/22)

- NEW! Continuous Glucose Monitors (CGM) and diabetic testing supplies will only be covered under the pharmacy benefit and no longer be covered under the DME benefit.
- Members can obtain these supplies through a retail pharmacy or mail order pharmacy, Postal Prescription Services and Costco for more savings
 - Members who are impacted will be notified at least 60 days before the change takes place
 - Any prior authorization (PAs) approved under the medical benefit will be transferred under the pharmacy benefit to ensure there is no member disruption in coverage
 - This means members do not need to get another prior authorization to receive their diabetic supplies
- NEW! Moda is also expanding our Site of Care (SOC) program to add therapeutic oncology medications
 - The program will redirect members receiving select infused therapeutic oncology medications from the hospital outpatient setting to clinically appropriate home infusion
- Members can reach out a Health Navigator should they need any assistance or have any questions about these changes

Medical plan changes (effective 10/1/22) Cont.

NEW! Pre-Diabetes Prevention program (or Pre-D)

- Members who engage in the program can decrease their risk for chronic conditions such as heart disease, stroke and developing Type II diabetes
- Moda Health lifestyle and health coaches work with members identified with prediabetes to teach them about healthier habits that can lower their risk of diabetes
- Lifestyle coaches trained in diabetes management guide them using standards set by the
 CDC
- Health coaches are available to assess how the member is doing, help set personal goals, refer them to a nutritionist, and have quarterly check-ins to assess their progress
- Member who participate in the program will receive a Fitbit to help them track their weight and exercise.

Medical plan changes (effective 10/1/22)

- NEW! Behavioral Health (BH) program
 - The program will provide dedicated Behavioral Health Champions to help members get the best treatment that meets their specific health needs.
 - BH Champions will:
 - Identify the most appropriate treatment options and determine the support tools needed
 - Help members find available providers
 - Assist in scheduling appointments
 - Make sure members can access their treatment and confirm that the treatment is meeting their needs
 - Expanded access through digital point solutions

Pharmacy benefits – no changes

| | Medical Plans 1-5 | Medical Plans 6-7 | | |
|------------------------|--|-----------------------------------|------------------------|--|
| Out-of-pocket maximum | Accrues towards maximum cost-share | Accrues towards out-of-pocket max | | |
| | | Coordinated Care | Non-Coordinated Care | |
| Value | \$4 per 31-day supply | \$4* per 31-day supply | \$4* per 31-day supply | |
| Select generic | \$12 per 31-day supply | 20% | 25% | |
| Preferred brand | 25% up to \$75 per 31-day supply | 20% | 25% | |
| Non-preferred brand ** | 50% up to \$175 per 31-day supply | 20% | 25% | |
| Mail | | | | |
| Value | \$8 per 90-day supply | \$8* per 90-day supply | \$8* per 90-day supply | |
| Select generic | \$24 per 90-day supply | 20% | 25% | |
| Preferred brand | 25% up to \$150 per 90-day supply | 20% | 25% | |
| Non-preferred brand ** | 50% up to \$450 per 90-day supply | 20% | 25% | |
| Specialty*** | | | | |
| Generic | \$12 per 31-day supply or \$36 dollars when allowed 90-day supply | 20% | 25% | |
| Preferred brand | 25% up to 200\$ per 31-day supply | 20% | 25% | |
| Non-preferred brand ** | 50% up to \$500 per 31-day supply | 20% | 25% | |

^{*} Deductible waived

^{**}A formulary exception must be approved for non-preferred brand prescription medication

^{***}Allows 90-day fills for select specialty medications (2 times the copay)









- Moda 360 Health Navigators will help the member navigate the sometimes-complex healthcare system
- Take the member out of the middle
- Every time the member calls the Moda Health OEBB member phone number, they will be connected with a Moda 360 Health Navigator. The Health Navigator will not only answer any questions they have but will also serve as a guide to connect members with the care, resources and program that works best for them and their families.
 - Assistance with appointment scheduling
 - Connecting members with care programs
 - Assistance with prior authorizations
 - Selecting a PCP 360
 - Claims and provider billing support
 - Closing gaps in care



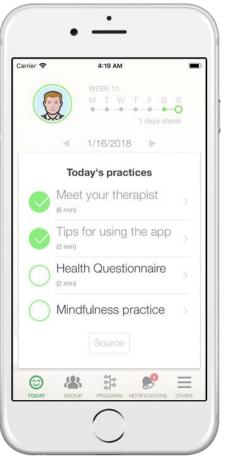
CirrusMD

- The CirrusMD app connects you with a doctor via text, 24/7 with no cost-sharing for members*
 - *Effective 10/1/22, members on a High Deductible Health Plan (Medical Plan 6 or 7) will be subject to the deductible with no member cost sharing after their deductible has been met.
- The app allows members to:
 - Ask urgent or general health questions
 - Message, share photos or video chat
- Provides convenience and flexibility, and is available in all 50 states
- Providers can also prescribe medications
- Can access through Member Dashboard or the CirrusMD website cirrusmd.com/modahealth



Meru Health

- A comprehensive approach to help reduce stress, depression, anxiety and burnout with a 12-week evidence-based program via a Smartphone App
- Available to qualified Moda members 18+ who reside in OR, WA or ID
- Initial assessment will be at your mental health office visit cost sharing and subsequent visits are at no cost sharing
- The program offers:
 - Confidential access to a personal, remote therapist
 - Mindfulness and behavioral techniques
 - Wearable biofeedback training to increase focus and manage stress
 - Can access through Member Dashboard or the Meru Health website at meruhealth.com/modahealth









Lessons and Practices

CBT, mindfulness, sleep and nutrition. User-friendly audio and video practices.



Licensed Therapist Chat

Daily support via chat to enhance learning and engagement.



HRV Biofeedback

Objective physiological feedback provided for patients.



 $Peer\text{-}Support\,Group$

Anonymous and confidential



Psychiatrist Support

Case overview and medication management (when needed).



PCP Collaboration

Reports and updates provided to PCP and/or patient's care team

Livongo – Diabetes management





- A program that combines the advanced technology of a smart glucose meter with coaching to support members with Type 2 diabetes
- This is an invitation-only program all eligible members who qualify for the program receive an invite and the program is at no cost sharing to Moda members
- The program includes:
 - A smart glucose meter is a device that digitally helps the member track and monitor your blood sugar levels
 - Unlimited testing strips available to order from their meter or through the app
 - Anytime access to expert health coaches
 - Alerts to their providers, family members and coaches

Vision

Moda Health



Vision plan options – No changes

- 1. You may see any licensed ophthalmologist, optometrist or optician
- Receive discounted rate from a Moda Health contracted provider just use Find Care, Moda Health's online provider directory
- 3. Benefits run on a plan year basis from Oct. 1 through Sept. 30
- 4. Benefit maximum benefits include vision exam and hardware

| Vision plan options | Opal | Pearl | Quartz | |
|---|-------|---------------|--------|--|
| Benefit maximum | \$600 | \$400 | \$250 | |
| | W | hat members p | ay | |
| Eye examinations Frequency: Once per plan year | | 0% | | |
| Lenses Frequency: Contacts or one pair of lenses per plan year | 0% | | | |
| Frames Frequency: One pair per plan year for members under age 17; One pair per every two plan years for members age 17 and older | 0% | | | |

Dental

Delta Dental

Delta Dental plan changes



- NEW! Effective 10/1/22, OEBB added the Preventive First program. This means preventive services will no longer accrue towards the annual benefit maximum, leaving additional dollars to use for basic and major services.
- There are no changes to the copays and coinsurances to the existing plan designs. We will continue to offer plans 1,5,6, the Exclusive PPO and the Exclusive PPO incentive plan.
- Both Exclusive PPO plans do not include out-of-network benefit coverages
 - Members enrolled in either of these plans must see a Delta Dental PPO provider in order to receive benefits

Delta Dental plan options

| Plan options | Plan 1 | Plan 5 | Plan 6 | Exclusive PPO – Incentive plan | Exclusive PPO Plan |
|---|------------------------------|----------|---------|-----------------------------------|--------------------|
| Network | letwork Delta Dental Premier | | | Delta Dental PPO | Delta Dental PPO |
| Deductible | \$50 | \$50 | \$50 | \$50 | \$50 |
| Benefit maximum | \$2,200 | \$1,700 | \$1,200 | \$2,300 | \$1,500 |
| In-network, members pay | | | | | |
| Preventive/diagnostic | 30% - 0% | 30% - 0% | 0% | 0% | 0% |
| Restorative | 30% - 0% | 30% - 0% | 20% | 30%-0% | 10% |
| Major restorative - crowns/onlays | 30% - 0% | 30% | 50% | 30% - 0% | 20% |
| Prosthodontic -implants | 30% - 0% | 50% | 50% | 30% - 0% | 20% |
| Orthodontic (lifetime maximum - \$1,800) | 20% | 20% | N/A | 20% | 20% |
| Occlusal guards (night guards* and athletic mouth guards) | 50% | 50% | 50% | 50% | 50% |
| Nitrous oxide | 50% | 50% | 50% | 50% | 50% |

Delta Dental highlights

- The Delta Dental Premier Network (Plans 1, 5 & 6) is the largest dental network in Oregon and nationwide
 - Over 2,200 providers in Oregon and over 154,000 providers nationwide
- The Exclusive PPO plans use the Delta Dental PPO Network
 - Over 1,200 providers in Oregon and over 113,000 providers nationwide
 - Members must use a Delta Dental PPO provider, and there are no out-of-network benefits for this plan
- Evidence-based approach to dentistry with a focus on preventive care

Health through Oral Wellness® (HtOW)

- All OEBB members have access to the HtOW program
 - Patient-centered wellness program that helps members maintain better oral health through a risk assessment, education and additional evidence-based preventive care
- Providers participating in the program use an oral health assessment to find out the member's risk of tooth decay, gum disease and oral cancer
- Members may qualify for the following services depending on their risk score:
 - Additional cleanings
 - Fluoride treatment
 - Sealants
 - Periodontal maintenance
 - Nutritional counseling
- To see which providers are participating in HtOW, members can look for a green badge shown in Find Care
- For more details on HtOW please see our website: <u>deltadentalor.com/oralwellness/members/</u>

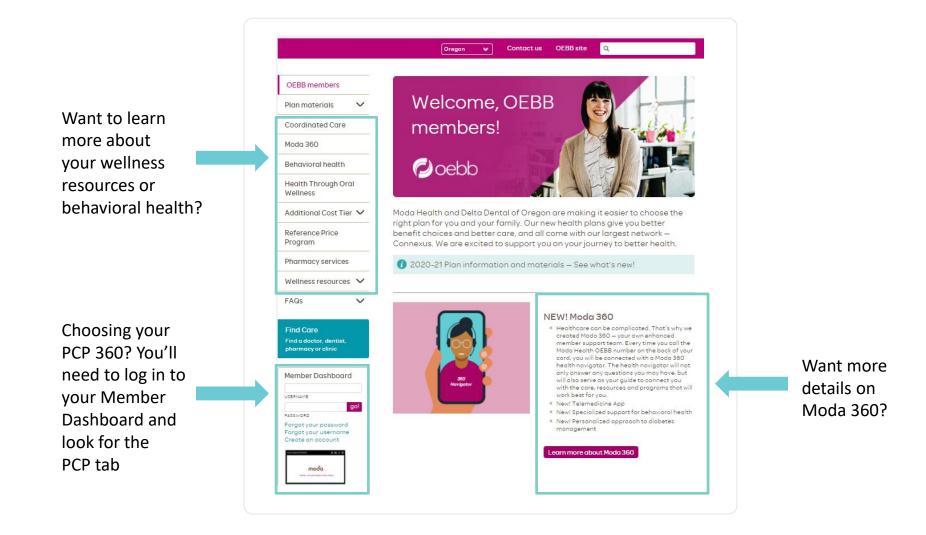


Member resources

Moda Health and Delta Dental



modahealth.com/oebb

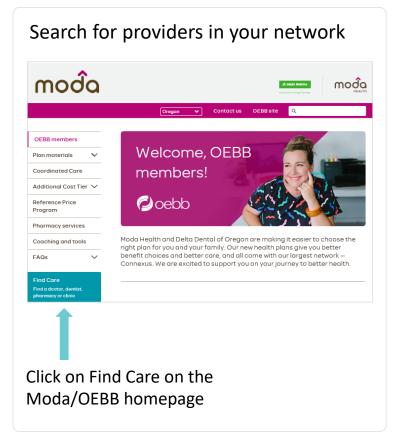


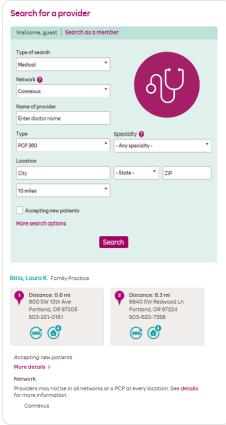
Member Dashboard – Your personal member website

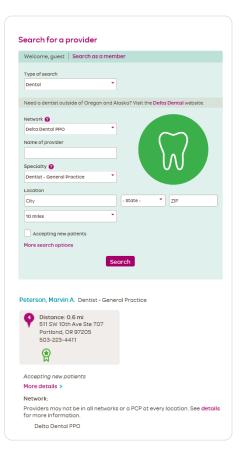
- See your benefits and Member Handbook
- Choose a PCP 360
- Check claims and review electronic explanations of benefits (EOBs)
- Download your member ID card
- Access member care resources
 - Health coaching
 - Prescription Price Check
 - Healthcare Cost Estimator
- Access Moda 360 digital resources
 - CirrusMD
 - Meru Health
 - Chat with a Moda 360 Health Navigator



Find Care – Moda Health's online provider directory







Moda Health Account Management team



Aleenna Rebitzke
Account Executive



Gail VannamanLarge Group
Account Manager



Erica Hedberg
Director Govt
Programs

Please feel free to email us at OEBB_Marketing@modahealth.com if you would like to schedule a virtual or in-person meeting to discuss the changes for the 2022-2023 plan year or if you have any other questions.

Thank you for watching!

Moda Health

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