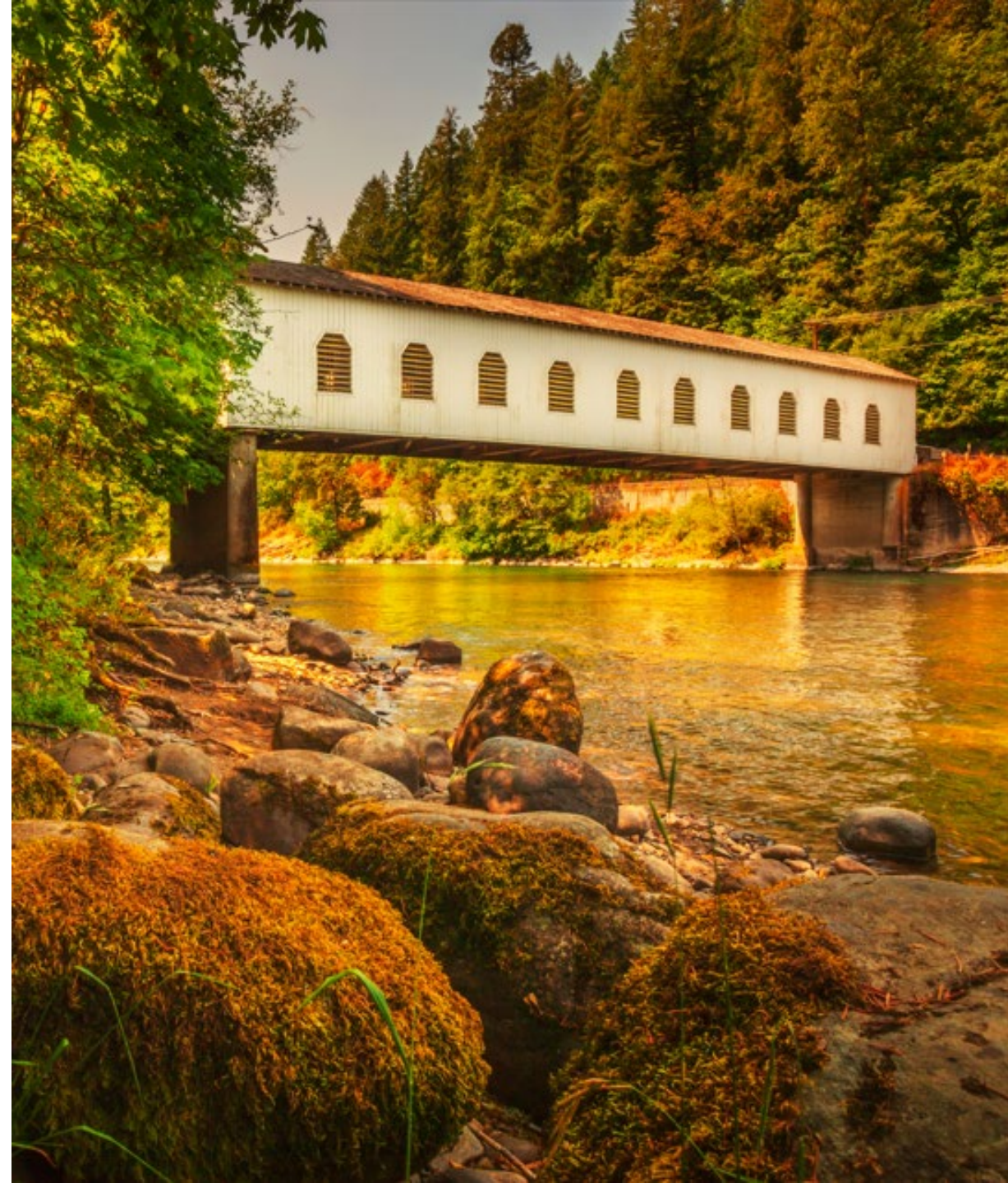


PEBB Open Enrollment

Plan Year 2027



Webinar Tips

Note: If you're not hearing the webinar, click the "gear" icon and check your audio settings. 1

Ask questions.

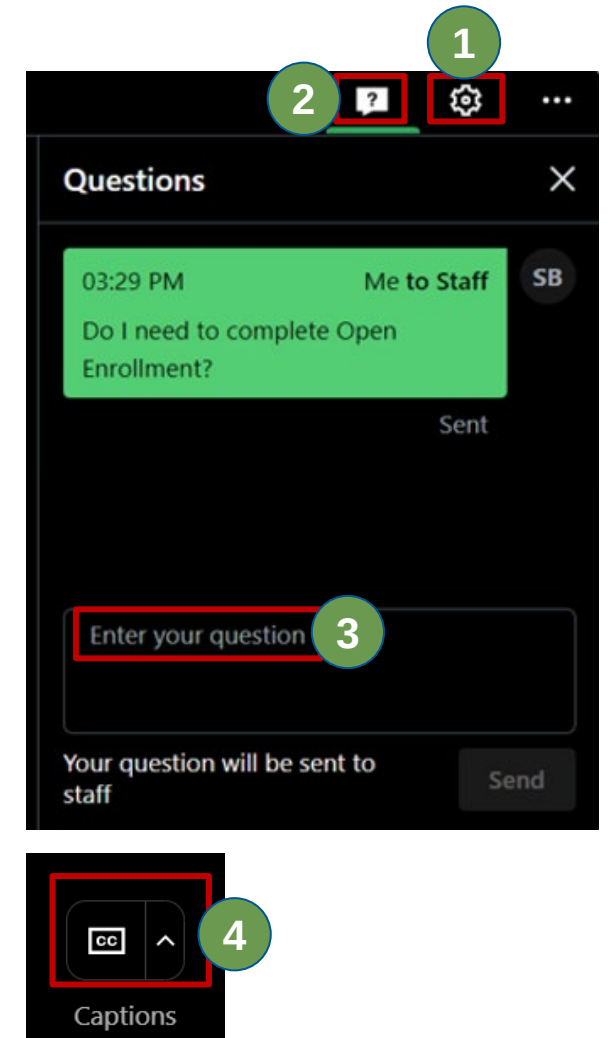
- Click on the question mark icon. 2
- Type in your questions. 3
- Staff and vendor partners will answer questions directly through the Questions panel and out loud during the presentation.

Watch or read the presentation.

- Click the Captions button to turn on closed captions during the webinar. 4
- You'll receive a follow-up email when the recording and slides are available.
- Captions are included in the recording.

Review additional benefits information.

- Go to the [Benefits Information](https://PEBBinfo.com) page at PEBBinfo.com.



Agenda

Time	Duration	Topic	Presenter
1:00 pm	10 mins	• Welcome • Required Open Enrollment	PEBB
1:10 pm	15 mins	Medical, dental, vision	Kaiser Permanente
1:25 pm	25 mins	Medical, dental, Garner	Moda Health – NEW medical plans
1:50 pm	15 mins	Pharmacy (for Moda Health medical plans)	Judi Rx
2:05 pm	15 mins	Employee Assistance Program	Revive (formerly Canopy) EAP
2:20 pm	10 mins	Vision	VSP
2:30 pm	10 mins	Dental	Willamette Dental
2:40 pm	10 mins	Life and Disability Insurance	The Standard
2:50 pm	10 mins	• Benefit Resources • Questions	PEBB



2027 Required Open Enrollment



**Open Enrollment
is required
this year.**

Everyone must log into PEBBenroll.com starting Oct. 1 and make their selections during Open Enrollment.

This includes:

- Selecting a new medical plan and confirming vision and dental plan elections.
- Enrolling or re-enrolling in a Health Care or Dependent Care Flexible Spending Account (FSA).
- Enrolling as a new hire.
- Adding or dropping a dependent.
- Answering surcharge questions.
- Updating your personal information and beneficiaries.



PEBB's Open Enrollment is Oct. 1–31, 2026.

Remember, Open Enrollment is the one time each year you can make changes to your plans or dependents without a [Qualified Status Change \(QSC\)](#).

2027 Required Open Enrollment



Log in by Oct. 31, 2026
to make your
2027 benefit selections.

PEBBenroll.com



If you don't complete Open Enrollment by Oct. 31, 2026:

- **You will not have PEBB medical coverage in 2027.**
- Your dental and vision coverage will stay the same.
- **You will not be allowed to make changes during the correction period.**
- All applicable PEBB surcharges will be deducted from your paycheck throughout 2027.
- You won't be able to contribute to a Flexible Spending Account (FSA). You must enroll or re-enroll each year during Open Enrollment to participate in an FSA. **FSA enrollments do not roll over to the next plan year.**

2027 Required Open Enrollment



New Hires

You might need to enroll twice depending on the date you were hired or became benefit eligible.

PEBBenroll.com



New hires with benefit coverage effective Oct. 1, 2026, must:

- Enroll in benefits now to be covered Oct. 1, 2026 – Dec. 31, 2026.
- Complete Open Enrollment between Oct. 1 and Oct. 31, 2026, to have coverage in 2027.
- If you want to enroll in an FSA for 2027, you must make your election during Open Enrollment.

New hires with benefit coverage effective Nov. 1, 2026, must enroll in benefits within the first 30 days after becoming benefit eligible.

2027 Required Open Enrollment

- **Opt out of coverage:** You can opt out of (not enroll in) a PEBB medical plan if you're covered under another group medical plan. You'll receive part of your employer's premium contribution ("opt out incentive") if you opt out.
 - **Note: You cannot opt out** if you have coverage under OHP/Medicaid or an individual marketplace plan.
- **Decline coverage:** You may also decline core benefits, where you choose not to take part in any PEBB benefit. You also decline your employer's premium share for core benefits.

Learn more: <https://www.oregon.gov/oha/PEBB/Documents/Opt-out-Denial.pdf>.



Important!

If you opted out or declined in 2026 and take no action during Open Enrollment, your status will be changed to "medical not enrolled" and your opt out incentive will end.

2027 Benefit Changes (cont.)

Medical Plan Options

- The Board asked several insurance companies to submit bids for PEBB's 2027 medical plans.
- The Board chose Moda Health and Kaiser Permanente for 2027.
- Judi Rx was chosen to be the pharmacy benefit administrator for all Moda Health medical plans.
- Providence Health Plan medical plans will not be offered in 2027.
- Here are the 2027 medical plans for full-time and part-time members:
 - **Moda PPO**—Offered in Oregon and across the U.S.; Judi Rx provides prescription coverage; replaces the Providence Statewide PPO plan.
 - **Moda Coordinated Care**—Offered in Oregon and surrounding areas; Judi Rx provides prescription coverage; replaces the Providence Choice and Moda Synergy plans.
 - **Kaiser Traditional**—Available to those who live or work in Kaiser Permanente service areas; same as the current Kaiser Traditional plan, with some plan changes.
 - **Kaiser Deductible**—Available to those who live or work in Kaiser Permanente service areas; same as the current Kaiser Deductible plan.

2027 Benefit Changes (cont.)

Flexible Spending Account (FSA) Changes

Health Care Flexible Spending Accounts (HCFSA) limit increase

- The IRS has raised the limit on how much you can set aside from your paycheck before taxes to help pay for eligible medical, dental, and vision expenses.
- The new limit for 2027 is \$3,400/year
 - You can find a full list of eligible expenses at <https://asiflex.com/orpebb/HCFSA.aspx>.

Dependent Care Flexible Spending Accounts (DCFSA) limits stay the same

- \$7,500/year if you're married and filing jointly.
- \$3,750/year if you're single or married and filing separately.
 - You can use this for childcare for children up to age 13 and elder care.
 - You can find a full list of eligible expenses at <https://asiflex.com/orpebb/DepCareFSA.aspx>.

Important FSA Reminders!

- FSAs are “use it or lose it” accounts so unused funds are forfeited at the end of the plan year.
- You must enroll or re-enroll each year to participate in an FSA.

2027 Benefit Changes (cont.)

Commuter Benefit Accounts Limit Increase

The limit for Commuter Benefit Accounts will increase for 2027.

- **Parking Reimbursement Account: \$340/month**

- Set aside pretax money from your paycheck to pay for **parking** at or near a location from which you work or commute to work
- Parking in a state-owned location is not eligible for reimbursement

Important! If you park at a state-owned lot or garage and pay the parking expense through pre-tax payroll deductions, you don't qualify for the Parking Reimbursement Account.

- **Mass Transit/ Vanpool Reimbursement Account: \$340/month**

- Set aside pretax money from your paycheck to pay for **transit expenses**
- Eligible expenses include vanpool, bus, rail, or ferry that you incur to commute to and from work. Bicycles are not included.

Important! If you pay for mass transit passes through pre-tax payroll deductions, you don't qualify for the Commuter Transportation Account.

You can find a full list of eligible commuter expenses at <https://asiflex.com/orpebb/Commuter.aspx>.

2027 Benefit Changes (cont.)

Long-Term Care (LTC) Coverage Ending

- **Long-term care (LTC) coverage will not be offered in 2027.**
 - Unum stopped accepting new applications for LTC coverage in Feb. 2026.
 - Because of Unum's decision, the PEBB Board decided to no longer offer LTC coverage starting in 2027.
 - If you wish to keep LTC coverage, you must transition to direct billing with Unum by Feb. 28, 2027.
 - Coverage costs will remain the same as of Jan. 1, 2027.
 - PEBB will provide details via email, mail, and webinar about how to move to direct billing.

Unum LTC Webinar

Oct. 13, 2026; 10-11 am PT

Register now: <https://attendee.gotowebinar.com/register/1976411089047803231>

2027 Benefit Changes (cont.)

Other Changes

- **Dental:** Delta Dental plans will have a few minor changes and improvements. There are no changes to other dental plans.
- **Life insurance:** Rates will go down.
- **Canopy Everyday Assistance Plan:** Canopy is changing its name to “Revive.” Mental health assistance, counseling, coaching, financial, and legal help will stay the same.

Review the following for more details:

- [Summary of Changes](#)
- [Things to Consider When Choosing a Medical Plan](#)

Questions?

PEBB Member Services

pebb.benefits@odhsoha.oregon.gov

503-373-1102

PEBBinfo.com

Monday–Friday; 8 am–5 pm

Vendor Partner Presentations





Better health care. Built around you.

2027 | Public Employees Benefit Board



KAISER
PERMANENTE®

Health care is better when it all works together

Our connected care is designed to deliver the right support at every step.

Proactive, high-quality care

Mental health support

Virtual visits

Pharmacy and labs



Discover care that grows with you at kp.org/choosekp.



Connected care for a seamless experience

IN PERSON

Many services often under one roof

Timely primary care appointments and lab results

VIRTUAL CARE

Connect with doctors who know your health history

Phone, video, and online options¹

AWARD-WINNING APP

24/7 access to your health records

Message your care team, manage appointments, view most lab results, and refill most prescriptions²

1. When appropriate and available. 2. These features apply to care you get at Kaiser Permanente facilities.

Support for you at every step

AS A NEW MEMBER, YOU CAN:

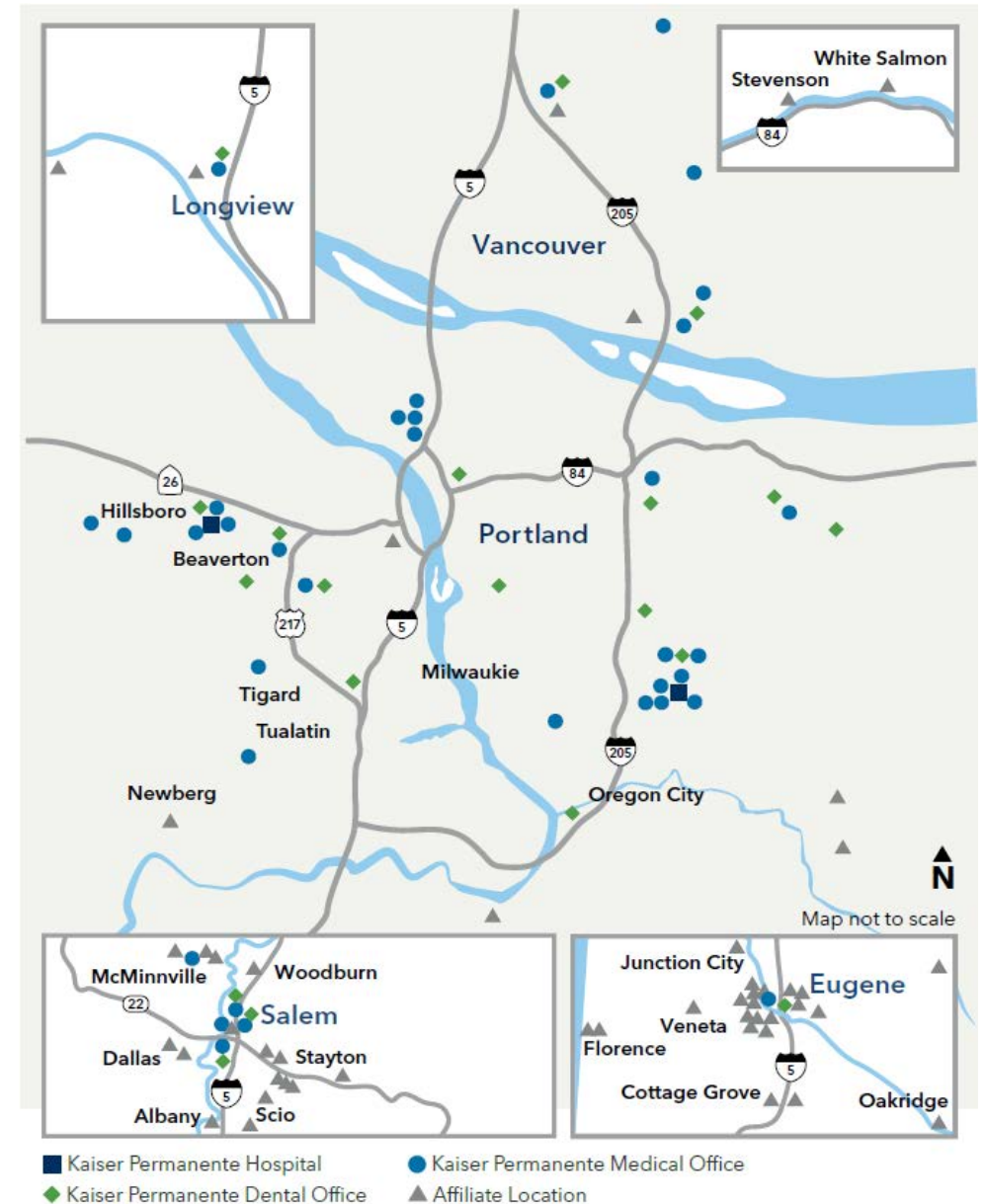
- Set up your kp.org account to conveniently manage your care
- Choose a doctor who fits your needs and lifestyle
- Transfer your prescriptions and order refills
- Connect to quality care when it's convenient for you

Convenient locations in the Northwest

Our service area extends from Eugene, Oregon, to Longview, Washington, and includes medical offices, dental offices, Vision Essentials by Kaiser Permanente optical retail locations, pharmacies, urgent care clinics, and hospitals.

We also have a network of affiliated providers for routine, urgent, or emergency care.

For our current locations, visit kp.org/locations.



Access from anywhere

Knowing you're covered for care when you're away from home means you can enjoy your time and thrive.

Away from Home Travel Line: 951-268-3900 (TTY 711)

- Get 24/7 care by phone and video across the nation*
- Get immunization information from our travel clinic
- Find care in another Kaiser Permanente service area
- Assistance with claims reimbursement

24/7 advice by phone

Get advice 24/7 from a registered nurse. No need for an appointment. Call **1-800-813-2000**.

Urgent and emergency care

Access more than 1 million doctors for urgent and emergency care through Cigna's in-person locations. In some locations, you can also get urgent care by phone or video with a Kaiser Permanente care team.

Kaiser Permanente app and kp.org/travel

Email your care team with nonurgent health questions, find locations, and get answers to common questions about care and coverage.

*When appropriate and available. If you travel out of state, phone appointments and video visits may not be available in select states due to licensing laws. Laws differ by state.



2027 medical plan benefits

Plan benefits	Full-Time Traditional Copayment Plan	Full-Time \$250 Deductible Plan	Part-Time Traditional Copayment Plan	Part-Time \$250 Deductible Plan
Plan year deductible	\$0	\$250/individual \$750/family	\$0	\$250/individual \$750/family
Out of pocket maximum	\$800/individual \$1600/family	\$1500/individual \$4500/family	\$1500/individual \$3000/family	\$1500/individual \$4500/family
Preventive care services	\$0	\$0	\$0	\$0
Primary and specialty office visit copay	\$5	\$5	\$30	\$30
Outpatient surgery	\$5	15% after deductible	\$30	20% after deductible
Hospital inpatient care	\$50/day up to \$250/admission	\$50/day after deductible up to \$250/admission	\$500/admission	\$500/admission after deductible
Lab tests and X-rays	\$0	\$15	\$10	\$20
Urgent care	\$5	\$25	\$30	\$50
Emergency room copay	\$150	\$150 after deductible	\$150	\$150 after deductible
Prescriptions	\$5 generic \$25 formulary brand 50% up to \$100 nonformulary \$50 specialty	\$5 generic \$25 formulary brand 50% up to \$100 nonformulary \$50 specialty	\$10 generic \$25 formulary brand \$25 nonformulary brand \$50 specialty	\$10 generic \$25 formulary brand \$25 nonformulary brand \$50 specialty

Alternative Care

- No referral required
- Naturopathy services same as primary care benefit
- Naturopathy services are unlimited
- Annual visit limits apply to Acupuncture, Chiropractic & Massage
- Visit limits vary by plan
- For more information, visit choose.kaiserpermanente.org/pebb



Plan benefits	Full-Time Traditional Copayment Plan	Full-Time \$250 Deductible Plan	Part-Time Traditional Copayment Plan	Part-Time \$250 Deductible Plan
Self-referred chiropractic	\$10 20 visit limit	\$10 30 visit limit	Not covered	\$10 20 visit limit
Self-referred acupuncture	\$10 12 visit limit	\$10 24 visit limit	Not covered	\$10 12 visit limit
Self-referred massage therapy	Not covered	\$25 12 visit limit	Not covered	\$25 12 visit limit
Self-referred naturopathy	\$5	\$5	\$30	\$30

Self-referred alternative care

To help you achieve total health, PEBB medical plans may include some self-referred alternative care benefits. Covered services and visit limits vary by plan so refer to your plan documents for details.

1. Choose an alternative care provider*

Choose from more than 1,400 qualified and credentialed complementary and alternative medicine providers throughout our service area. Visit **herayahealth.com** or call **1-800-449-9479**.

2. Schedule an appointment

Call the provider you select to schedule an appointment. When you schedule your appointment, make sure to confirm your provider's participation before receiving care.

3. Determine the amount you will pay

Refer to your Benefit Summary and *Evidence of Coverage (EOC)* for details about your out-of-pocket costs. The amount you pay for visits to alternative care providers varies by plan and type of service.

4. Call Member Services for help

Member Services is our members' one-stop resource for answers. Available Monday through Friday, 8 a.m. to 6 p.m. at **1-800-813-2000 (TTY 711)**.

Visit **herayahealth.com**
or call 1-800-449-9479 to find
a provider



Naturopathy



Chiropractic care



Acupuncture



Massage therapy

Doula Network

- Kaiser Permanente is contracted with Doula Love and Community Doula Alliance to offer PEBB members a diverse network of doulas to choose from. This collaboration ensures a seamless billing experience with no balance billing. Members are required to seek services through Doula Love or Community Doula Alliance.
- Doula Love: www.portlanddoulalove.com
- Community Doula Alliance: www.communitydoulaalliance.com
- Doula coverage includes:
 - Visits during pregnancy and postpartum (no cost to member)
 - Inpatient hospital services provided by Doula (no cost to member)



2027 vision plan benefits for full-time employees

Vision hardware and optical services (for members age 19 and older)	You pay
Vision exam	\$5
Frames, lenses and contact lenses (up to \$100 of this allowance may be used for nonprescription sunglasses or nonprescription digital eyestrain glasses.)	Any amount over the annual allowance
Vision hardware allowance –frames, prescription lenses, and contact lenses	Full-time Traditional Plan = \$200 credit every 12 months Full-time Deductible Plan = \$250 credit every 12 months
Pediatric vision hardware and optical services	You pay
Vision exam (limited to one exam per year)	\$5
Standard eyeglasses (limited to one pair per year)	\$0
Contact lenses, in lieu of eyeglasses (limited to one pair per year for conventional lenses or up to a 12-month supply of disposable contact lenses per year.	\$0

This is not a contract. This benefit summary does not fully describe your benefit coverage with Kaiser Foundation Health Plan of the Northwest. For more details of your benefit coverage, exclusions and limitations, claims review, and adjudication procedures, please see your *Evidence of Coverage (EOC)*, or call Member Services. In the case of a conflict between this summary and the *EOC*, the *EOC* will prevail.

To learn more about Kaiser Permanente, visit **kp.org**.

2027 dental plan benefits

	Full-Time	Part-Time
Yearly deductible	n/a	n/a
Annual benefit maximum	\$1,750	\$1,250
Plan benefits*	Full-Time	Part-Time
Dental office visit copay	\$5	\$5
Oral exams, X-rays, cleaning, fluoride treatments, and space maintainers	\$0	\$0
Routine fillings and simple tooth extractions	20%	50%
Surgical tooth extractions	20%	50%
Periodontics	20%	50%
Endodontics	20%	50%
Major restorative, crowns and bridges	25-50%	50%
Full and partial dentures, relines, rebases	50%	50%
Orthodontic treatment (\$2,500 lifetime benefit maximum)	50%	Not Covered
Implant services	50% up to the benefit maximum	Not Covered

This is a summary of some benefits and their copays and coinsurance. For specific information about your covered dental plan benefits, limitations, and exclusions, including those not listed in this summary, please see your *Evidence of Coverage*.

*Services must be provided by a contracted Kaiser Permanente provider for benefits to be payable. See *Evidence of Coverage* for details.

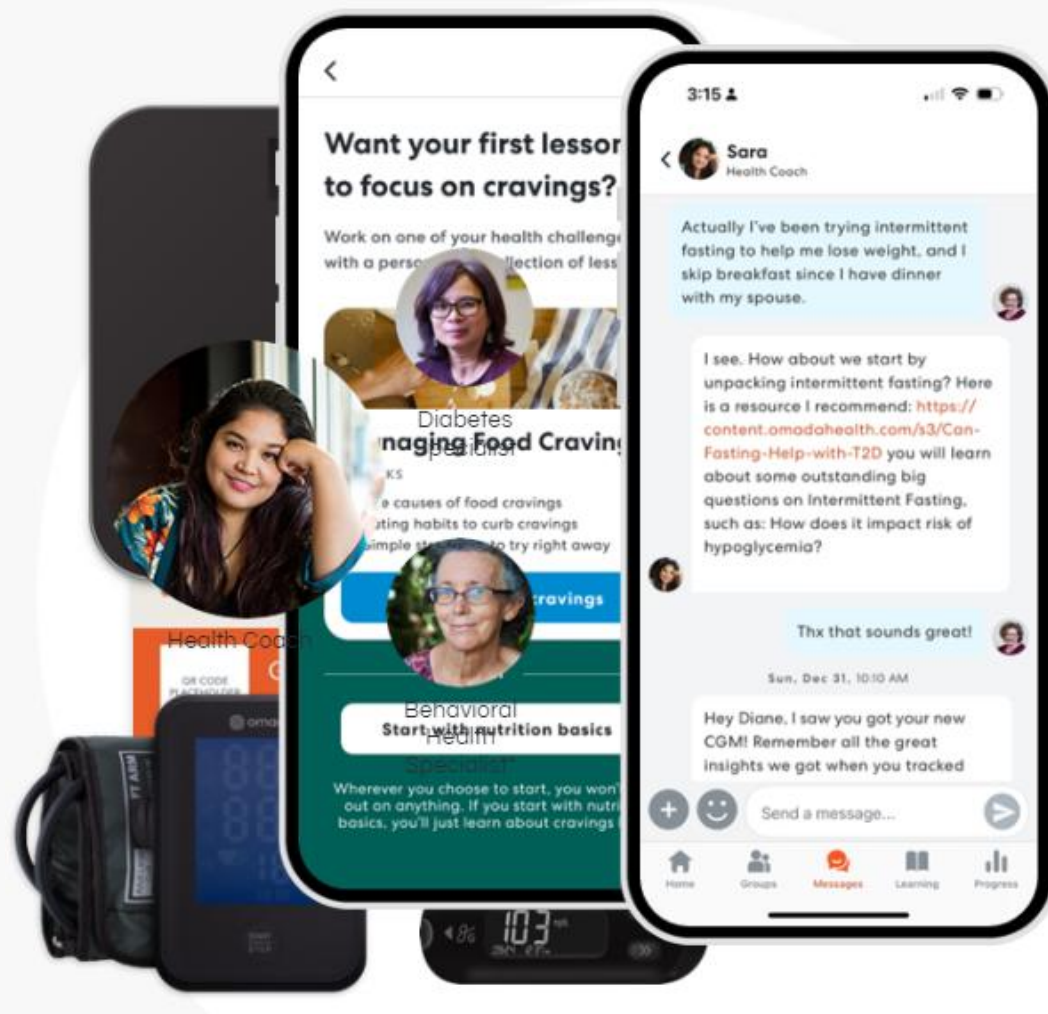
Offerings

Omada

For weight management
and diabetes prevention

**Reaching Members with Relevant
Tactics Throughout Their Journey**

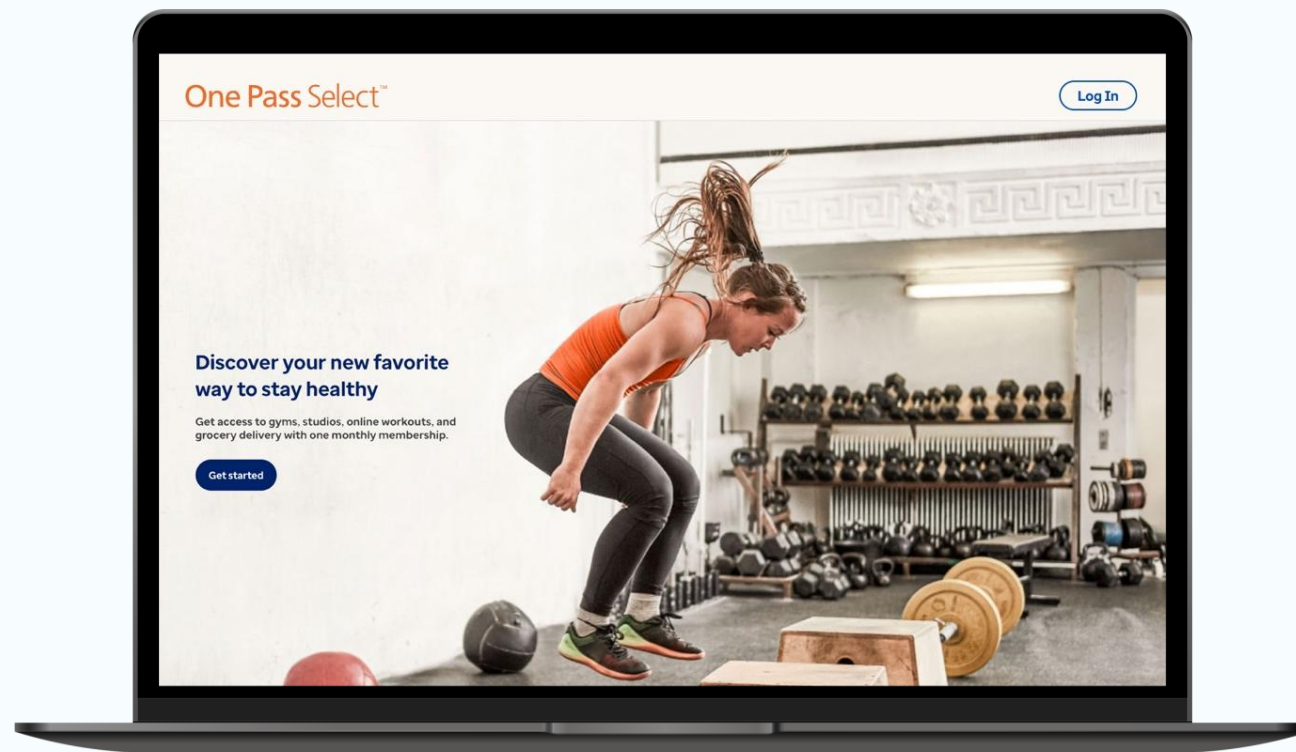
- Targeted Outreach & Enrollment
- Smart Tools & Technology
- Supportive Online Peer Groups
- Interactive Lessons
- Professional Care Team



* Behavioral Health Specialists operate behind the scenes with other members of the care team and do not have a member-facing role
Disclaimer: These images are samples based on a composite and do not reflect information about a specific person.

One Pass Select Affinity

- ✓ No long-term contracts; pay month-to-month
- ✓ Cancel anytime (30-day notice)
- ✓ Flexibility to change tiers monthly
- ✓ Browse locations in each tier before deciding to purchase
- ✓ Add unlimited friends and family (ages 18+) at 10% off





On-demand wellness tools put better health within reach

Members can use our mental health and wellness self-care apps anytime, anywhere at no cost.¹

Over 80% of Kaiser Permanente members have found these tools helpful.²



Calm

The number one app for meditation and sleep
is designed to help lower stress, reduce anxiety, and build resilience.



Headspace

Connect with an emotional support coach by text, explore self-care activities, and more — available 24/7.

No cost to members

All devices

Self-care and wellness resources



Wellness coaching by phone

Convenient, ongoing support from a specially trained health professional

MANY AREAS OF FOCUS

Whether you want less stress or better sleep, wellness coaches can help. They're not mental health care providers, but they can set up an action plan to keep you motivated toward your health goals.

CONVENIENT SCHEDULING

Phone sessions are available 5 days a week and typically last 20 minutes.

A DEDICATED PARTNER IN HEALTH

The same coach will get to know you over multiple sessions — providing tailored guidance at whatever time and frequency works best for you.

KP Website

choose.kaiserpermanente.org/pebb

Talk with a pre-enrollment specialist

Call 1-800-514-0985 (TTY 711), Monday through Friday, 7:00 a.m. to 6:00 p.m. Pacific time to talk to a Kaiser Permanente pre-enrollment specialist. Language interpretation services available.

New Member Welcome Desk

Call 1-888-491-1124, M-F, 7 a.m. to 8 p.m., and Sat 8 a.m. to 4:30 p.m. This dedicated team will assist in transferring prescriptions, medical records, and answering questions for a seamless transition of care.

Lane County

Members in Lane county have access to a dedicated member support line. Call 541-225-3410, M-F, 8 a.m. to 5 p.m.

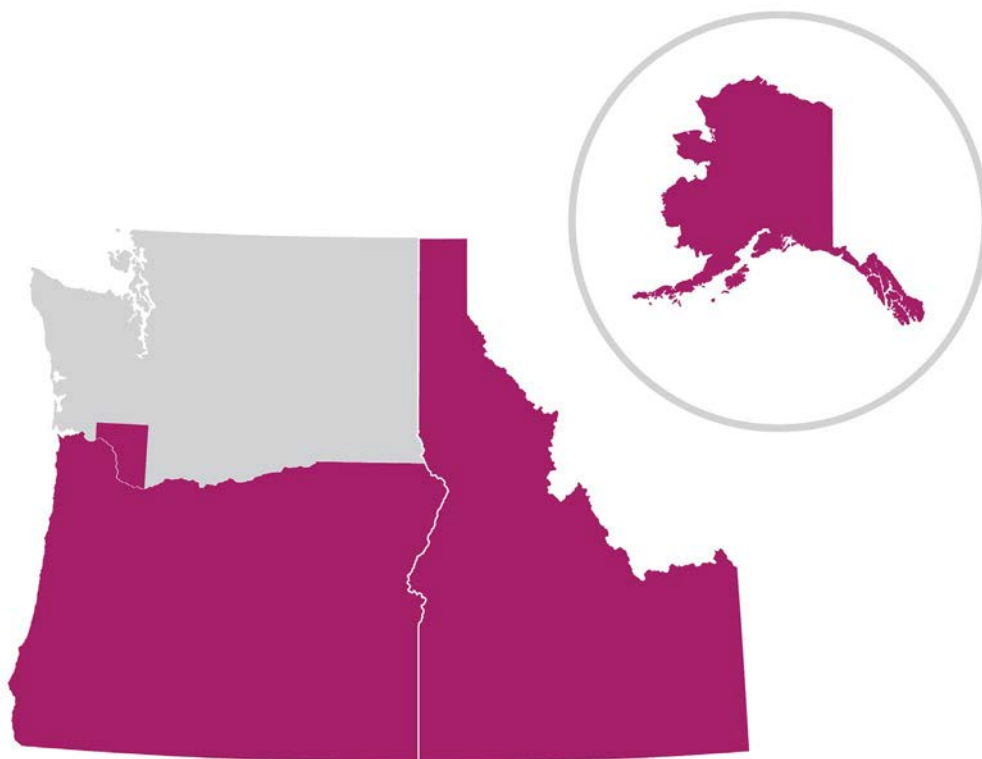


2027 | Medical and Dental Open Enrollment plan options



Network overview

Network – Connexus



You can search for Providence providers starting Oct. 1st.

The Connexus network is available to those who live in Oregon, SW Washington, Idaho and Alaska.

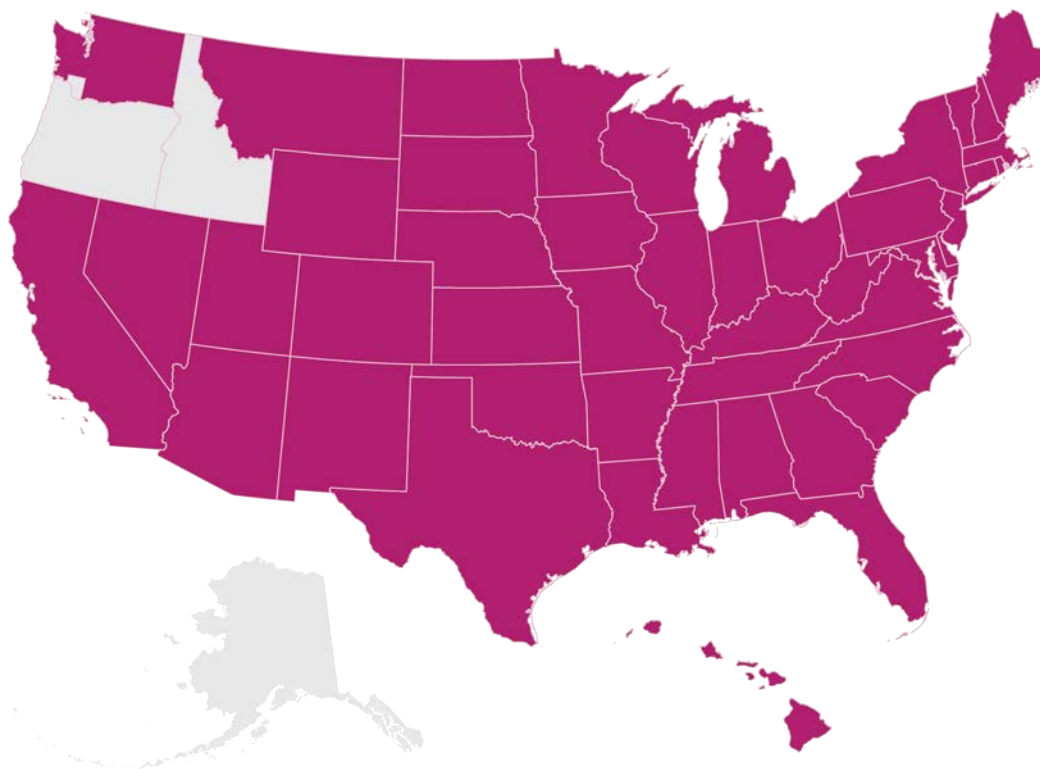
Moda is updating our provider directory tool, Find Care to include Providence Primary Care Providers as PCP 360s. Your Providence PCP 360 provider will not in the search tool until closer to October 1st, 2026.

Network – aetna

PEBB members will also have access to the Aetna PPO® Network through Aetna Signature Administrators®

Members can use the Aetna PPO network when outside of the Connexus service area:

- Oregon
- Idaho
- Alaska
- SW Washington



Coordinated Care vs. PPO

Coordinated Care

Coordinated Care Model & PCP 360

- Members who live in Oregon and surrounding counties can select the Coordinated Care plan
- Members on this plan must select a PCP 360 for primary care to receive in-network benefits
- For care outside of the Connexus service area, members will use the Aetna PPO® Network through Aetna Signature Administrators®
- Subscribers who have dependents living outside the Connexus service area, can still enroll in the Coordinated Care plan. These dependents will use the Aetna PPO network when outside of the service area.

PPO

- The PPO plan is available is nationwide. Members can select this plan if they live in Oregon or throughout the country
- Members on the plan who live in Oregon, Southwest Washington, Idaho or Alaska, will use the Connexus Network
- If they are outside of the service area, they will use the Aetna PPO® Network through Aetna Signature Administrators®

If you or your dependent lives outside of the Connexus service area, please make sure to update PEBB's enrollment system with the correct address.

No referrals required from your PCP 360/PCP to see a specialist on either plans!

Medical

Plan summary overview

Benefit	2027 Coordinated Care (Full-Time)	2026 Moda Synergy/Providence Choice Plan	2027 PPO (Full-Time)	2026 Providence Statewide PPO
Network	Connexus Network		Connexus Network	
Calendar year deductible	\$500 / person \$1,500 / family	\$250 individual/ \$750 family	\$250 / person \$750 / family	\$250 individual/ \$750 family
Calendar year out-of-pocket maximum	\$1,500 / person \$4,500 / family	\$1,500 individual/\$4,500 family	\$1,900 / person \$5,700 / family	\$1,900 individual/ \$5,700 family
Primary care	\$10 copay ¹	\$10 copay¹	15% coinsurance; 10% coinsurance ^{1,5}	15% coinsurance; 10% coinsurance¹
Specialist office visit²	\$25 copay	\$10 copay	15% coinsurance	15% coinsurance
Office visits for chronic conditions	\$0 copay	\$0 copay	0% coinsurance	0% coinsurance
Urgent care	\$25 copay	\$25 copay	15% coinsurance	15% coinsurance
Alternative care³	\$10 copay	\$10 copay	15% coinsurance	15% coinsurance
Diagnostic labs & X-ray	\$0 copay	\$0 copay	15% coinsurance	15% coinsurance
Emergency room⁴	\$150 after deductible	\$150 after deductible	\$150, then 15%	\$150, then 15%

¹ Deductible is waived of the first 4 PCP visits, per plan year

² Referrals are not required for in-network specialist care

³ Spinal manipulations are limited to 20 visits per plan year. Acupuncture is limited to 12 visits per plan year. Massage Therapy is limited to \$1,000 per plan year.

⁴ Copayments does not apply to out-of-pocket maximums

⁵ Moda PPO plan members whose in-network provider has been recognized by the Oregon Health Authority as a patient-centered primary care home will have the lower coinsurance.



To view the Coordinated Care and PPO part-time plans, please see the plan brochure on our website

Coordinated Care Plan – Choosing a PCP 360



Required for CCM members

Members on the Coordinated Care plan must select and use a PCP 360 to receive in-network benefits for primary care services. This means if you do not see your selected PCP 360 for primary care services, you will pay the out-of-network benefits rate.



What is a PCP 360?

A PCP 360 is a primary care clinic/facility that has been certified by the Oregon Patient-Centered Primary Care Program or other similar programs.



Choose anytime

You and your enrolled family can choose a different PCP 360 and/or change your PCP 360 at any time during the year.

How to find a PCP 360? (Cont.)

1 Go to modahealth.com/pebb

Open the PEBB member site.

2 Select Find a Doctor

Use the link in the top navigation.

3 Choose how to search

Continue as a guest or use your member ID number.

The screenshot shows the PEBB member site on modahealth.com. At the top, there is a purple header with a globe icon and the word "Español". Below this is the "moda HEALTH" logo and "PEBB". To the right of the logo is a search bar with a magnifying glass icon and a "Login" button. Below the header is a navigation bar with links: "Understand your coverage", "Access care", "Health and wellness programs", "Find a doctor" (with a magnifying glass icon), and "Contact us". Below the navigation bar is a blue banner with a white icon and the text: "Looking for 2026 PEBB benefits information? Please call a Moda 360 Health Navigator for help. Our website now shows 2027 plan information, so 2026 benefit details may not be available here." Below the banner is a large image of two women talking. Overlaid on the image is a white box with the text: "Welcome, PEBB members. We're glad you're here. Your Moda Health and Delta Dental of Oregon plans give you better benefit choices, better care and our largest provider network. Plus, you get access to Moda 360. Log in to your Member Dashboard". Below the image is a section titled "Search as a member" with the text: "Enter your member ID to see providers in your network and get more accurate search results." Below this is a text input field labeled "Member ID number" with a help icon. Below the input field is a link: "Help me find my member ID". Below the link is a button: "Continue as member". To the right of the "Search as a member" section is a section titled "Search as a guest" with the text: "Explore Moda provider networks and see which doctors, clinics and hospitals are included – no member ID required." Below this text is a button: "Continue as guest".

How to find a PCP 360? (Cont.)

4 Choose the care you need

When searching as a guest select “Find a medical provider, facility or specialty.”

5 Set the medical network

Choose “Connexus” before continuing.

4 Choose the care you need

Hello, what are you looking for today?



Find a medical provider, facility or specialty

Search for medical providers and facilities in your plan's network.

Start your search



Find a dental provider

Search for dental providers and facilities in your plan's network.

Start your search



Find a vision provider

Search for vision providers and facilities in your plan's network.

Start your search



Find a pharmacy

Search for pharmacies in your plan's network.

Start your search

5 Choose a medical network

Don't see your plan? [Logging in](#) may help narrow this list.

Search medical networks

Any medical network

☐ Any medical network

Medical/Vision Networks - Oregon & SW Washington:

☐ OHSU PPO	☐ OHSU EPO	☐ Affinity
☒ Connexus	☐ Connexus Alternative Care	☐ Eastern Oregon CCO
☐ HMC & OHSU Health Network	☐ Moda Pathways	☐ Moda Select 
☐ Moda Select Pathways	☐ Synergy	

How to find a PCP 360?

6 Define your primary-care search

Enter your ZIP code, select Primary care, then choose the primary-care type or can you search by the name of your provider

7 Filter to PCP 360

Open Filters and limit the results to PCP 360 providers.

8 Verify the listing

You will know a provider is a PCP 360 if you see the "PCP 360" graphic above their address.

The image is a composite of three screenshots from the Moda Health website, illustrating the steps to find a PCP 360.

Step 6: Find a medical provider or facility
 The top screenshot shows the search interface. The 'Medical network' is set to 'Connexus'. The 'City, state, or ZIP (required)' field is empty. Below the search bar, there are buttons for 'Find a specialty' and 'Find a provider/facility'. A search bar for 'Search by provider or facility name' is also present. Below this, there are three categories: 'Primary care' (circled in red), 'Specialty care', and 'Behavioral health providers and facilities'. The 'Primary care' category is selected, showing a list of sub-specialties: 'Family Medicine', 'General Practice', 'Internal Medicine (Primary care)', and 'Pediatrics'. The 'Family Medicine' sub-specialty is circled in red.

Step 7: Filters
 The middle screenshot shows the 'Filters' sidebar. The 'Medical specialties' section has several options, including 'Adolescent Medicine (Family Medicine) Physician', 'Adult Medicine Physician', 'Family Medicine Physician', 'Geriatric Medicine (Family Medicine) Physician', and 'Hospice and Palliative Medicine (Family Medicine) Physician'. The 'Provider type' section has two options: 'Primary Care Provider (PCP)' and 'PCP 360' (circled in red). The 'PCP 360' option is selected. Below this, there are sections for 'Gender' and 'Gender identity'.

Step 8: Verify the listing
 The bottom screenshot shows a provider listing for '1. Fraser, William J.' and 'Family Medicine Physician'. The 'Provider type' is circled in red, showing a house icon and a '360' icon. Below the provider name, the address is listed: '1700 E 19th Street, The Dalles, OR 97058'. There is a 'Get directions' link and a distance of '14.37 miles away'. A phone number '542-961-1111' is also displayed. To the right, there is a green checkmark indicating 'Accepting new patients' and a network selection of 'Connexus'.

How to select your PCP 360?



Call a Moda 360 Health Navigator at
844-776-1593 or email them at
PEBBcustomerservice@modahealth.com



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



Your pharmacy benefits is administered by Judi Rx. To view your 2027 pharmacy coverage details, you will need to reach out to Judi Rx directly by visiting <https://enrollment.cap-rx.com/?client=oregonpebb>.

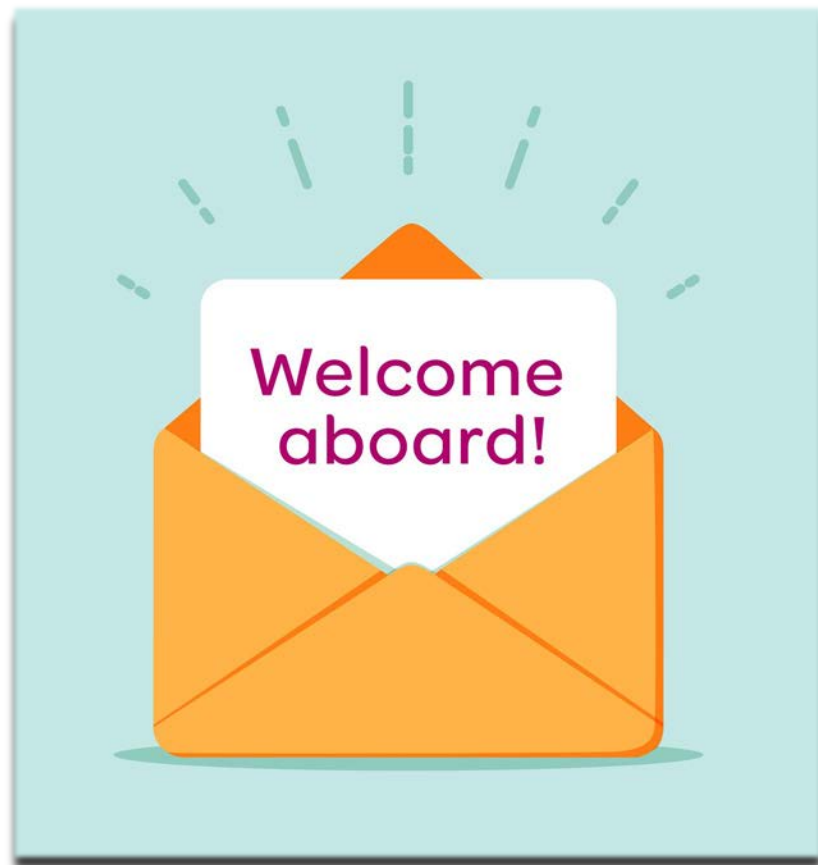
PPO Plan

Plan-year costs			
Deductible per person	\$50		
Deductible per family	\$150		
Out of pocket max per person	\$1,000		
Out of pocket max per family	\$3,000		
	Retail	Mail order and preferred retail	Specialty
Prescription medications	For a 30-day supply, you pay	For a 90-day supply, you pay	For a 30-day supply, you pay
Value drugs	\$0	\$0	N/A
Generic drugs	\$10	\$25	\$10
Brand drugs	\$30	\$75	\$100

Coordinated Care Plan

Plan-year costs			
Deductible per person	\$50		
Deductible per family	\$150		
Out of pocket max per person	\$1,000		
Out of pocket max per family	\$3,000		
	Retail	Mail order and preferred retail	Specialty
Prescription medications	For a 30-day supply, you pay	For a 90-day supply, you pay	For a 30-day supply, you pay
Value drugs	\$0	\$0	N/A
Generic drugs	\$10	\$25	\$10
Brand drugs	\$30	\$75	\$100

Getting started – **Your Welcome packet**



When you join Moda Health, you'll receive a ***Welcome packet!***

- ✓ **This packet will include:**
 - ✓ Welcome letter with information about the coordinated care model
 - ✓ Contact information for your Health Navigators
 - ✓ More information about your health benefits
 - ✓ Steps on how to create your Member Dashboard
 - ✓ ID card

Pharmacy benefits are covered through Judi Rx. After you enroll, you will receive your member ID card from Moda Health which will include your medical benefits and Judi Rx pharmacy information.

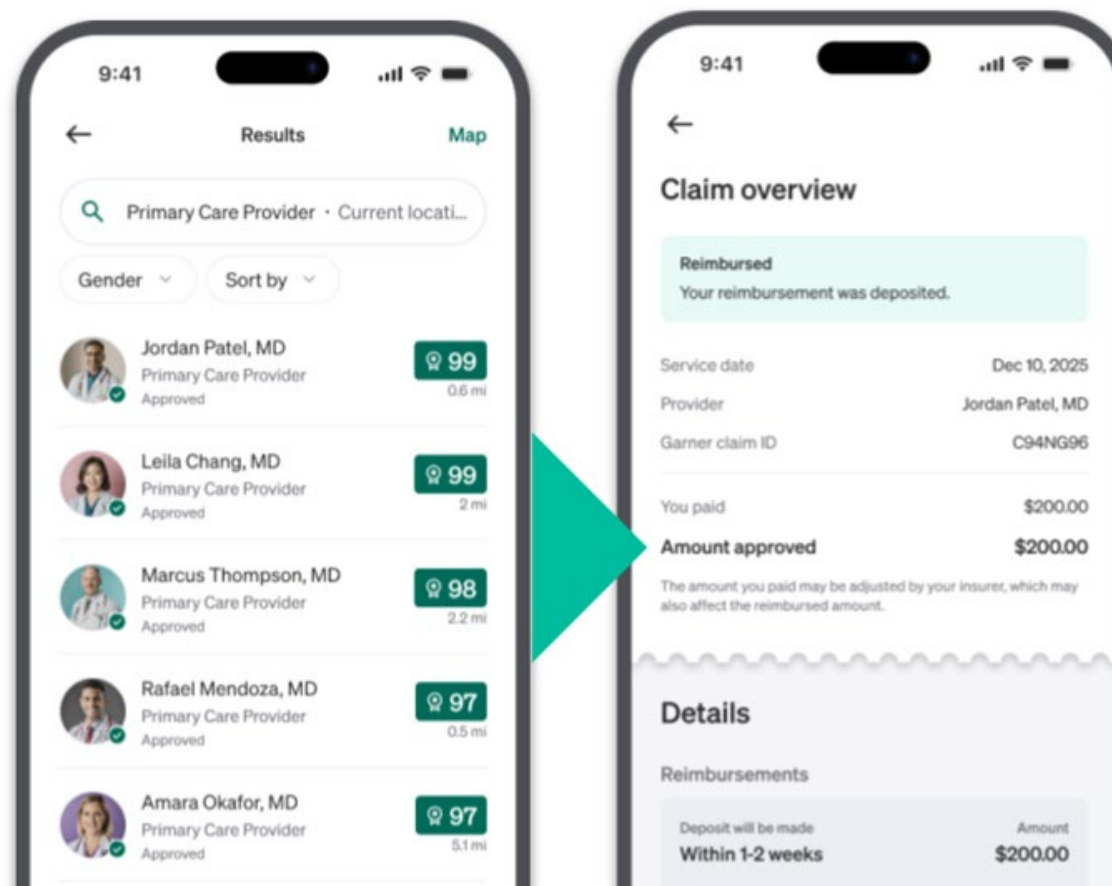


garner™

Get reimbursed when you see Top Providers



Garner helps members find high-quality, in-network providers and reimburses qualifying out-of-pocket costs when they visit them.



Garner uses one of the nation's largest medical claims datasets to finally understand & rank provider performance

Garner's advanced data analytics to rank providers



60 billion medical records | 320+ million patients

Garner scores providers based on how they actually perform

Garner doctor score is based on:

- ✓ Following latest clinical guidelines
- ✓ Better patient outcomes
- ✓ Cost effectiveness

*...from data on over 320 million patients.
...based on over 550 performance measures.*



Dr. M

68

TOP PROVIDER



Dr. G

98

Garner will reimburse members for using high-quality providers* for:

- Office visits
- Imaging
- Lab work
- Procedures
- Prescriptions

**If you have a Flexible Spending Account or Health Reimbursement Account, you cannot be reimbursed for the cost of your visit by both Garner and your Flexible Spending Account or Health Reimbursement Account. This is considered "double-dipping". It would violate IRS tax rules and may result in tax penalties.*

**Coordinated Care
Plan – FT & PT**

\$1,250
for individuals

\$2,500
for families

PPO – FT & PT

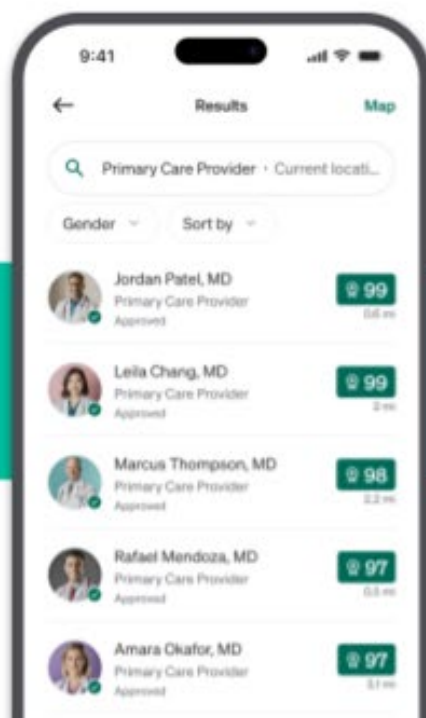
\$1,000
for individuals

\$2,000
for families

Get reimbursed in 3 simple steps

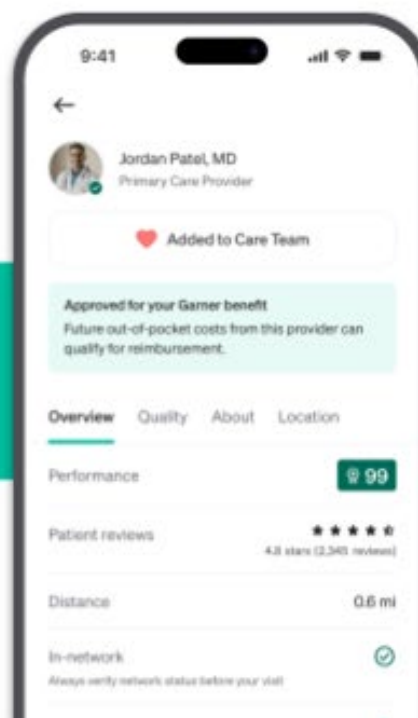
1.

Find a Top Provider



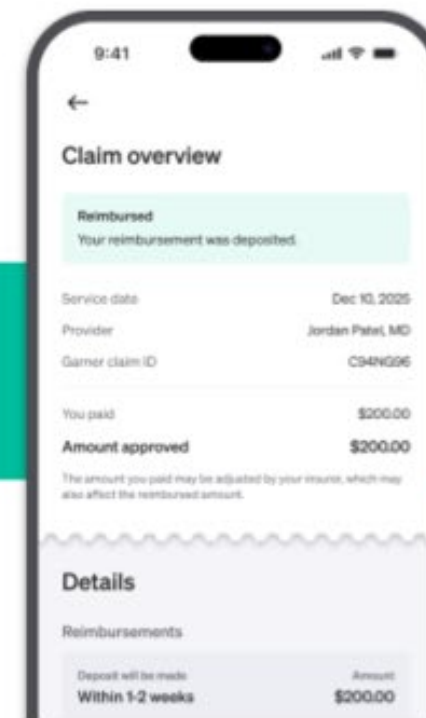
2.

Add to your Care Team



3.

Get reimbursed



Flexible Spending Accounts (FSAs)

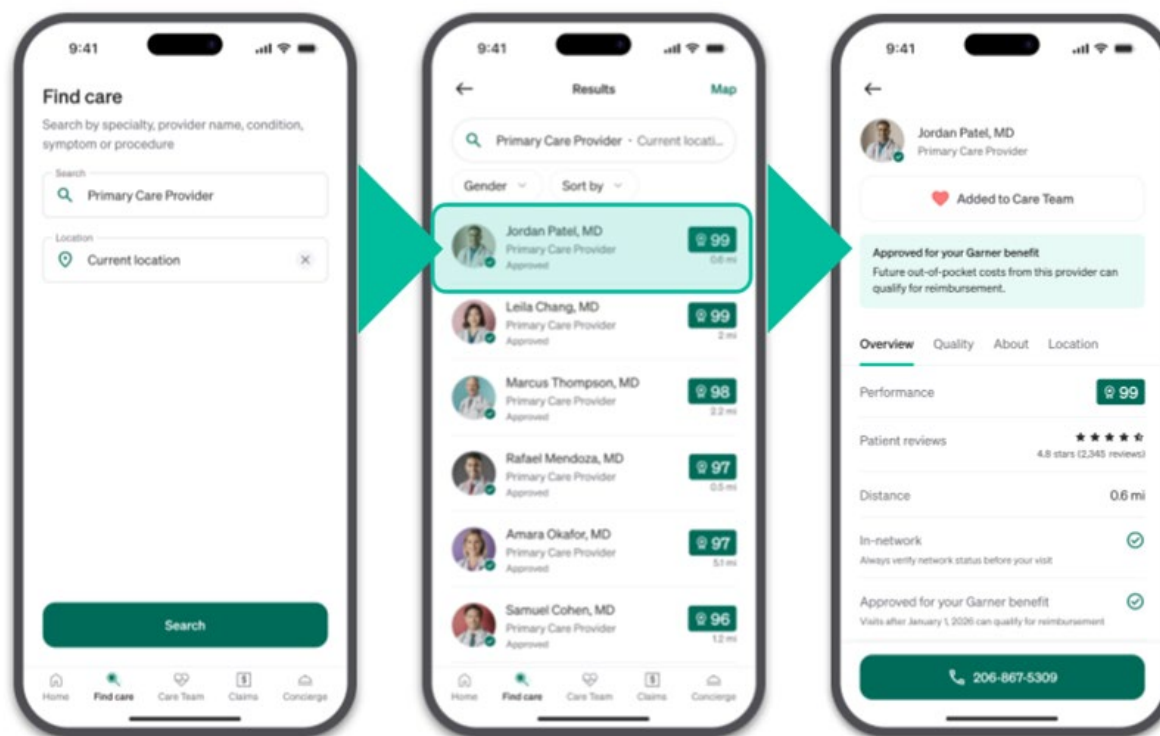
- You cannot get reimbursed by both Garner and your FSA for the same visit. That's called "double-dipping," which violates IRS rules and could result in tax penalties.
- You don't have to use Garner. You can use your FSA. But if you use Garner to see a Top Provider, they'll automatically reimburse you up to your yearly limit.
- Once Garner has reimbursed you up to the yearly limit, you can start using your FSA for future visits with any provider, including Garner Top Providers.

Find Garner Top Providers

You can search for in-network providers by specialty, symptom, provider name, condition or procedure.

Providers with a green Top Provider badge are eligible for reimbursement.

To make sure you are eligible for reimbursement, **add new providers to your Care Team before your appointment.**



Care Team is the **ONLY** way to ensure your provider is approved.

Add Top Providers to your Care Team

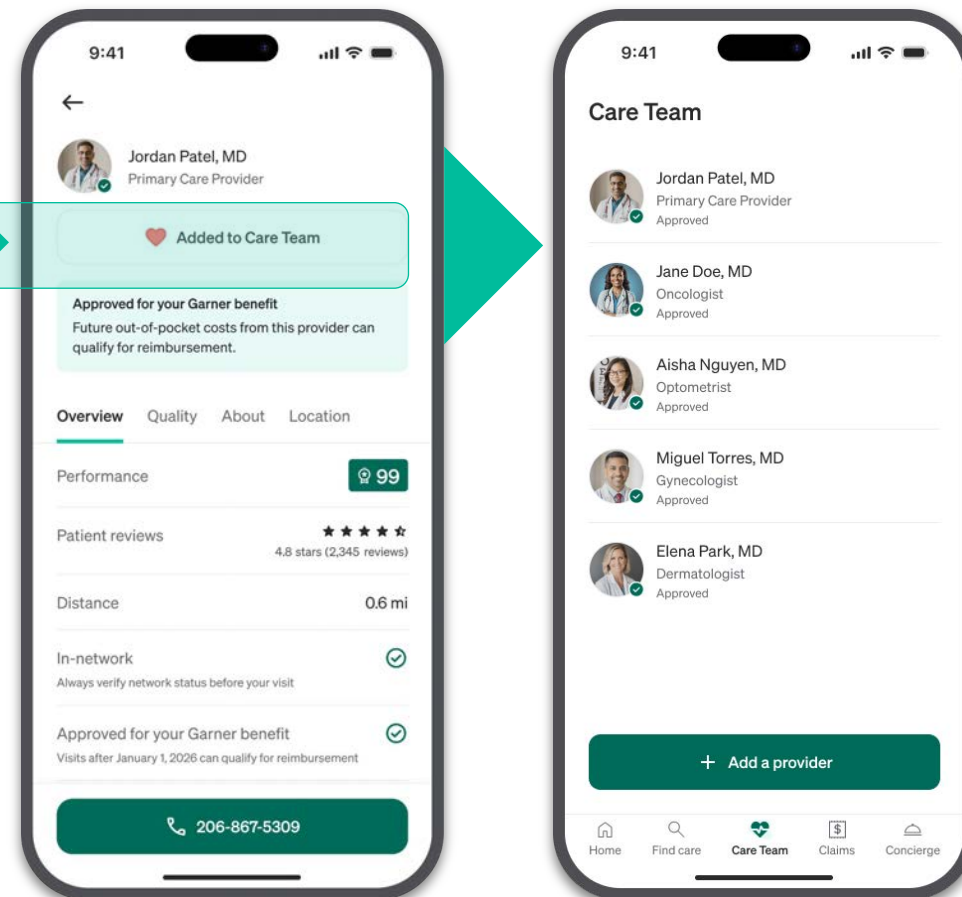


To be approved for reimbursement, you must add **Top Providers to your Care Team** before your appointment.

To register for a Garner account, you'll need to enter the following information:

- Email address
- Employer's name – type or select 'PEBB'
- First and last name as it appears on your Moda ID card
- Phone number
- Date of birth (DOB)
- P Number (the subscriber ID on your Moda ID card)

New or potential members: enter your P number with PEBB. If you don't know your P number, ask your employer or PEBB.



Get help from Garner Assistant & Concierge

The Garner team is here to help with any questions you may have, from finding an available provider to understanding how the reimbursement process works.

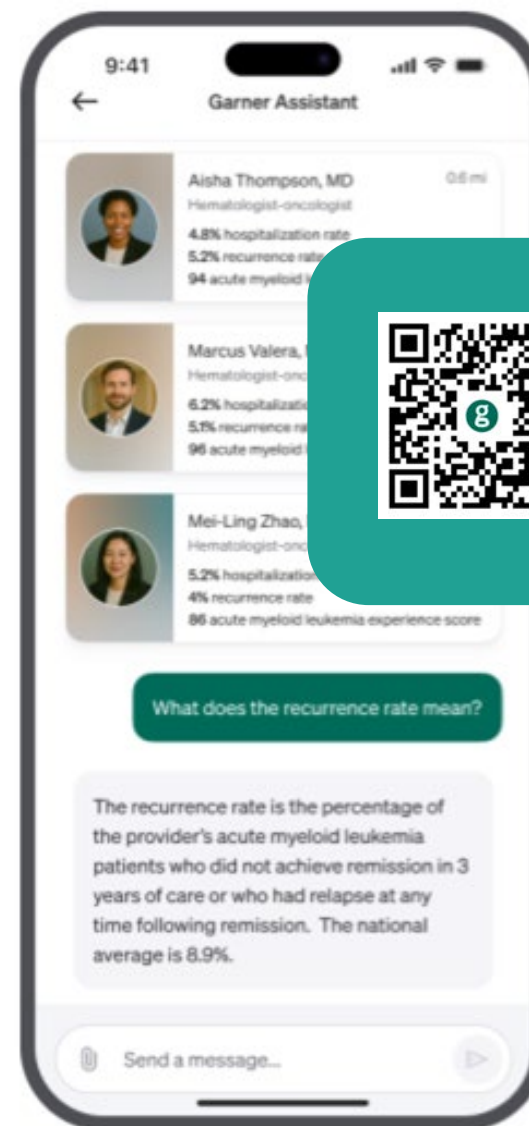
Garner Assistant: Available 24/7 in the app and online, English only.

Concierge: Available Monday-Friday, 5 a.m. to 7 p.m. Pacific Time, in both English and Spanish.

Contact us via:

- Garner Health App (recommended)
- Email: concierge@garnerhealth.com
- Phone: 458-488-4828

garner



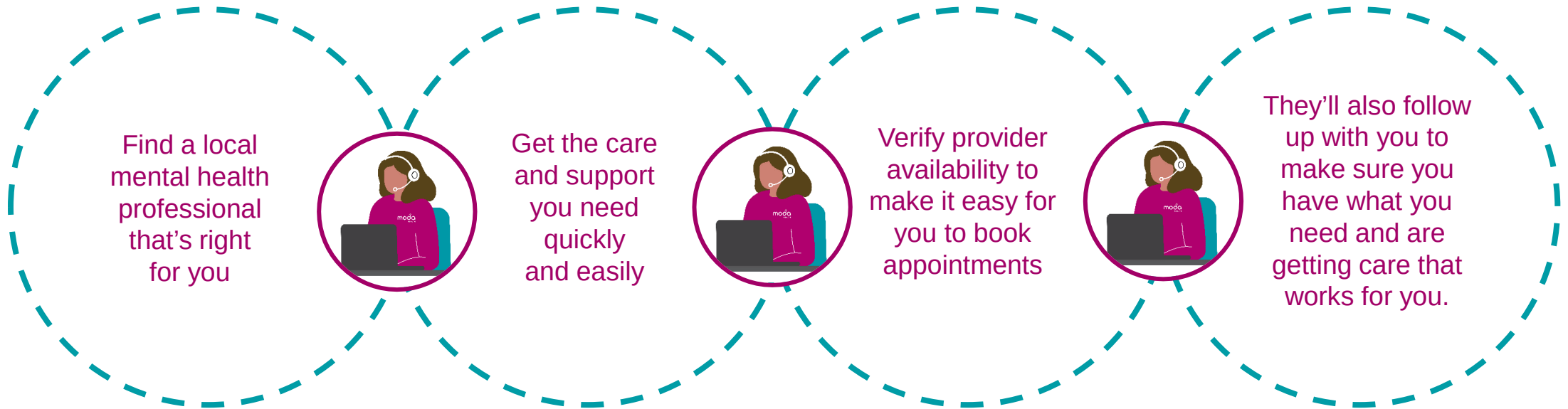
Download the
Garner Health
App today

moda
HEALTH

Behavioral Health 360

Behavioral Health 360 experience

Our Behavioral Health Champions and Self-Guided Assessment offer two ways to help you find the care you need to feel your best. **Our Behavioral Health Champions can help you with:**



Call a Behavioral Health Champion at **833-212-5027** or email them at bhchampions@modahealth.com

Behavioral Health 360

The image displays two screenshots of the Moda Health website, highlighting key features of the Behavioral Health 360 program.

Screenshot 1 (Left): Shows the "Your Moda 360 features" section. The "Behavioral Health 360" feature is highlighted with a yellow circle and the number 1. It states: "Behavioral Health 360 puts you at the center with tailored mental health services and a Behavioral Health Champion who helps you find the provider that's right for you. Get quickly connected to the specialized care you and your family need for the healthy, happy life you deserve." A button labeled "View BH 360 Services" is visible.

Screenshot 2 (Right): Shows the "Behavioral Health 360 Programs" section. The "Behavioral Health 360" program is highlighted with a yellow circle and the number 2. It states: "Whole health includes behavioral and mental health. Explore the services available to you or contact your Behavioral Health Champion to find the care you and your family need." Below this, there are two main options: "Self-Guided Assessment Tool" and "Contact a Behavioral Health Champion".

Behavioral Health 360

moda HEALTH

DELTA DENTAL

Home Find care Claims/EOBs Benefits Moda 360

moda HEALTH
Decision Support Tool

Take Assessment

Thank you for taking the time to complete this Decision Support assessment. Our goal is to help you find the best recommendations for your specific concerns. If you are experiencing any difficulties, please answer the following questions to the best of your ability. If you believe you need additional support, we encourage you to contact a healthcare professional or reach out to Moda Health customer service for assistance.

Decision Support Tool

1. What kind of services can we help you find today? (check all that apply)

☐ Counseling/therapy ☐ Medication management ☐ Substance use treatment

☐ Higher Level of Care (inpatient, residential, intensive services) ☐ Other (freeform)

Over the last two weeks, how often have you been bothered by the following problems?(check all that apply)

2. Feeling nervous, anxious, or on edge

☐ Not at all ☐ Several Days ☐ More than half the days ☐ Nearly every day

3. Not being able to stop or control worrying

☐ Not at all ☐ Several Days ☐ More than half the days ☐ Nearly every day

Next

Behavioral Health 360 vendors



Spring Health provides counseling, psychiatry, and more via phone, tablet or computer.



Video modeling and skill development for children with autism & developmental disorder.



Meru Health provides effective treatment for stress and depression via your smartphone.



Hazelden Betty Ford offers resources and care for substance use disorder.



moda 

moda Health Navigators

- When you call the Moda Health PEBB member phone number, you are connected with a Moda 360 Health Navigator.
- They can help you with:
 - Scheduling appointments
 - Connecting members with care programs
 - Assistance with prior authorizations
 - Selecting a PCP 360
 - Claims and provider billing support
 - Closing gaps in care



Transition of Care



At Moda Health, we know that switching to a new carrier can feel overwhelming, and we want to make that transition as easy as possible. If you're seeing an out-of-network provider, working with case management through another plan or have an active medical prior authorization, we'll make sure you get the support you need.

Moda is working with Providence Health Plan on this transition.

If you need help



Talk to a Health Navigator

Call our Health Navigator team.
We can assist you with next steps.



Fertility benefits and additional resources



Through PEBB, you have access to enhanced fertility and family-building benefits through Progyny. Progyny combines comprehensive coverage, personalized support and access to leading specialists to help you navigate every step of your family-building journey.

Through Progyny, you'll have access to:

- Comprehensive fertility and family-building coverage
- Dedicated support from a Progyny Care Advocate
- Access to a premier network of fertility specialists

- Progyny's smart cycle program is offered to members at no cost share.
- Moda is partnering with Providence Health Plan (PHP) to ensure a seamless transition when switching to Moda.
- PEBB members seeking to fertility support must use Progyny as their fertility provider to receive in-network care.
- To ask questions and learn more please visit <https://benefits.mypgny.com/members/pebb>, log into your [Member Dashboard](#) or call Progyny at 833-233-0843.

CirrusMD



moda 360

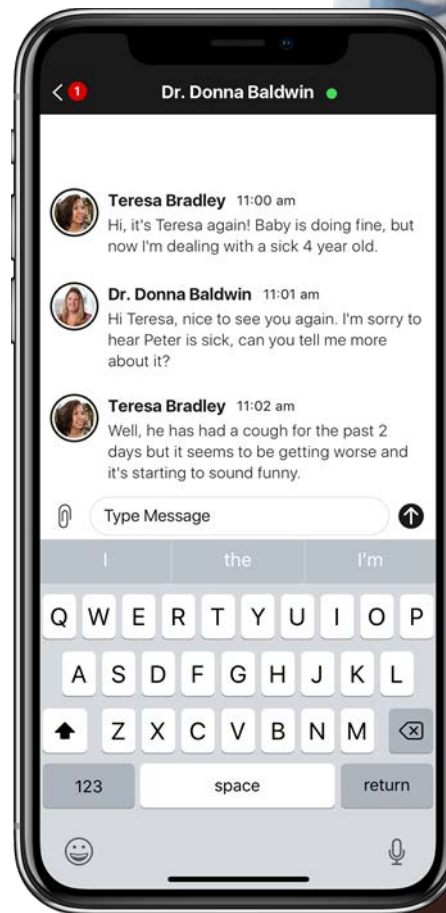
Download on the
App Store

GET IT ON
Google Play

The CirrusMD app connects you with a doctor via text, 24/7 with no extra cost to you.

The app allows you 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 prescribe medications
- Member can access it through their Member Dashboard or the CirrusMD website, cirrusmd.com/modahealth





Teladoc is a virtual primary care program designed to help you gain access to coordinated care and primary care providers in a virtual setting.

With Teladoc:

- You can schedule an appointment by using their app, desktop or phone.
- Prior to your first virtual appointment, Teladoc will provide you with a blood pressure cuff and a heart rate monitor.
- If labs or a specialist are required, the Teladoc provider will help coordinate these visits.

- Teladoc's virtual primary care program is subject the standard cost share.
- You can select Teladoc as your PCP 360 by calling the Moda Health Navigators at 844-776-1593 (TTY: 711) or by logging into your [Member Dashboard](#).
- To learn more or get started, visit <http://www.teladochealth.com>.



Additional resources

Want to learn more? Explore these resources and more from Moda to help you get the most from your health plan.



Moda 360 Programs Guide

Overview of Moda's programs and benefits.



Plan Year Guide

Coverage details for the 2027 plan year.



Member Dashboard

Log in to manage your plan online.*



Find Care

Search for in-network providers near you.

Find these materials and more at modahealth.com/PEBB

Members can access their member Dashboard after receiving their subscriber ID, found on their member ID card or by contacting the Moda 360 Health Navigators.



2027 | Dental
Open Enrollment for PEBB



Delta Dental – Plan year updates

- There are **NO** changes to the to the annual benefit maximum and coinsurances.
- PEBB members have:
 - **Preventive First benefit:** This means preventive services do not accrue towards the annual benefit maximum, leaving additional dollars to use for basic and major services.
 - **Health through Oral Wellness (HtOW) program:** Patient-centered wellness program that helps members maintain better oral health through a risk assessment, education and additional evidence-based preventive care



Delta Dental plan options – no changes

Plan options	Full-time Delta Dental PPO	Full-time Delta Dental Premier
Network	PPO	Premier
Deductible	\$50	\$50
Benefit maximum	\$1,750	\$1,750
	In-network, members pay	
Preventive ¹ / Diagnostic services	0% ²	0% ²
Basic services ³	20% - 0%	20%
Major services	50%	50%
Occlusal guards ⁴ (night guards* and athletic mouth guards)	0%	0%
Nitrous oxide	50%	50%
Orthodontic— (Lifetime maximum - \$1,800)	50%	50%

¹ Preventive services will not accrue toward the plan maximum.

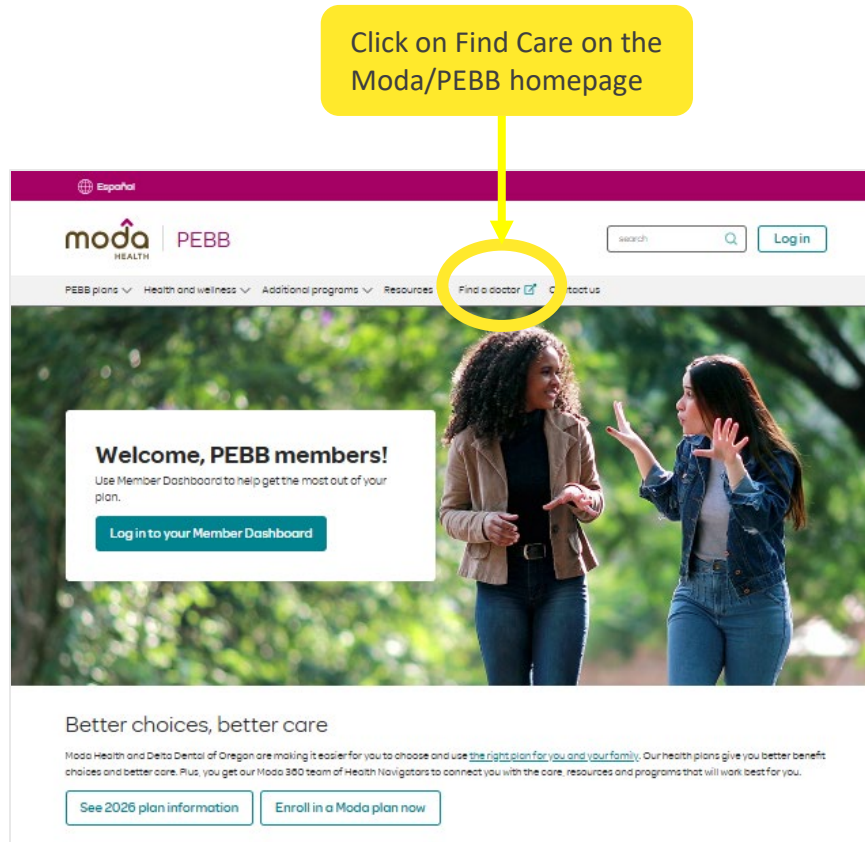
² Deductible waived.

³ Benefit payments increase by 10% each plan year provided the individual has visited a Delta Dental PPO provider at least once during the previous plan year.

⁴ \$150 maximum, once every 5 years.

Find Care – Delta Dental’s online provider directory

Search for providers in your network



This screenshot shows the search results for Bradley Fuller, a Dentist - General Practice. The search criteria include: Type of search: Dental; Network: Delta Dental PPO; Name of provider: Enter doctor name; Specialty: Dentist - General Practice; Location: Portland, OR 97204, 10 miles. The results show two locations, both 0.2 miles away, with contact information and a "See details" link. A "Search" button is visible at the bottom.

This screenshot shows the search results for John W. Holland, a Dentist - General Practice. The search criteria include: Type of search: Dental; Network: Delta Dental Premier; Name of provider: Enter doctor name; Specialty: Any specialty; Location: Portland, OR 97204, 10 miles. The results show one location, 0.3 miles away, with contact information and a "See details" link. A "Search" button is visible at the bottom.

moda 360 Health Navigators

Available Monday through Friday
from 7:30 a.m. to 5:30 p.m. Pacific Time.



Medical
844-776-1593



Dental
844-827-7100



Or email Moda Health at
PEBBcustomerservice@modahealth.com.

You can also chat with the Moda 360
Health Navigator team instantly through
your [Member Dashboard](#).

Find this information and more at
modahealth.com/PEBB.

Thank you





The Pharmacy Benefit Manager for Moda Health medical plans

Starting January 1, 2027





Agenda



Who is Judi Rx?



Plan Details



Pharmacies In Network



Open Enrollment Details



Member Services Support





Judi Rx™

Welcome to the Judi Rx Family!

Judi Rx oversees the prescription benefit for all Moda Health medical plans. We work hard every day to ensure your prescription drug plan is cost-effective but in line with our mission: **your health.**





Understanding Your Prescription Drug Plan

Plan Details

The Formulary

- The formulary is a list of drugs that are covered by your plan, including generic and brand name drugs.
- Drugs that do not appear on this list are excluded under the Formulary.
- Drugs with no Food Drug Administration approval or with over the counter equivalents may not be covered.

Drug Tiers

- Each drug is assigned a tier depending on the type of drug.
- Oregon PEBB formulary tiers are Value Drugs, Tier 1= Generics, Tier 2 and Tier 3= Brands

Prior Authorizations

- Some drugs require a prior authorization before the prescribed medication can be dispensed.
- More details available at the Judi Rx Open Enrollment Webinars regarding the process.



Judi Rx's Unique Network of >62,000 Pharmacies

Expansive network solution offers cost-plus economics for members





Benefits of 90 Day Supply through Home Delivery



Save Money

Your pharmacy benefit plan may offer lower copays or incentives when filling a 90-day supply compared to a 30-day supply. This can lead to significant cost savings over time.



Save Time

With a 90-day supply, you only need to refill your prescription(s) four times a year. This reduces the number of trips to the pharmacy. Most mail-order and retail pharmacies offer automatic refill services that you can enroll into, making it easier to stay on track with your medications by minimizing the need to manually reorder. If you use a mail-order pharmacy, your medication can be delivered directly to your door. This eliminates the need to visit a physical location altogether.



Stay on Track

With a larger supply on hand, you are less likely to miss a dose due to delays in getting your prescription(s) refilled. Staying consistent with your medication helps keep your treatment plan effective. This can provide better health outcomes

HOME DELIVERY SOLUTIONS





Oregon PEBB Open Enrollment Portal

Frequently Asked Questions and Documents available

Available
Oct. 1



Dedicated Call Center
Toll Free: 1-833-895-9846



Formulary Lookup



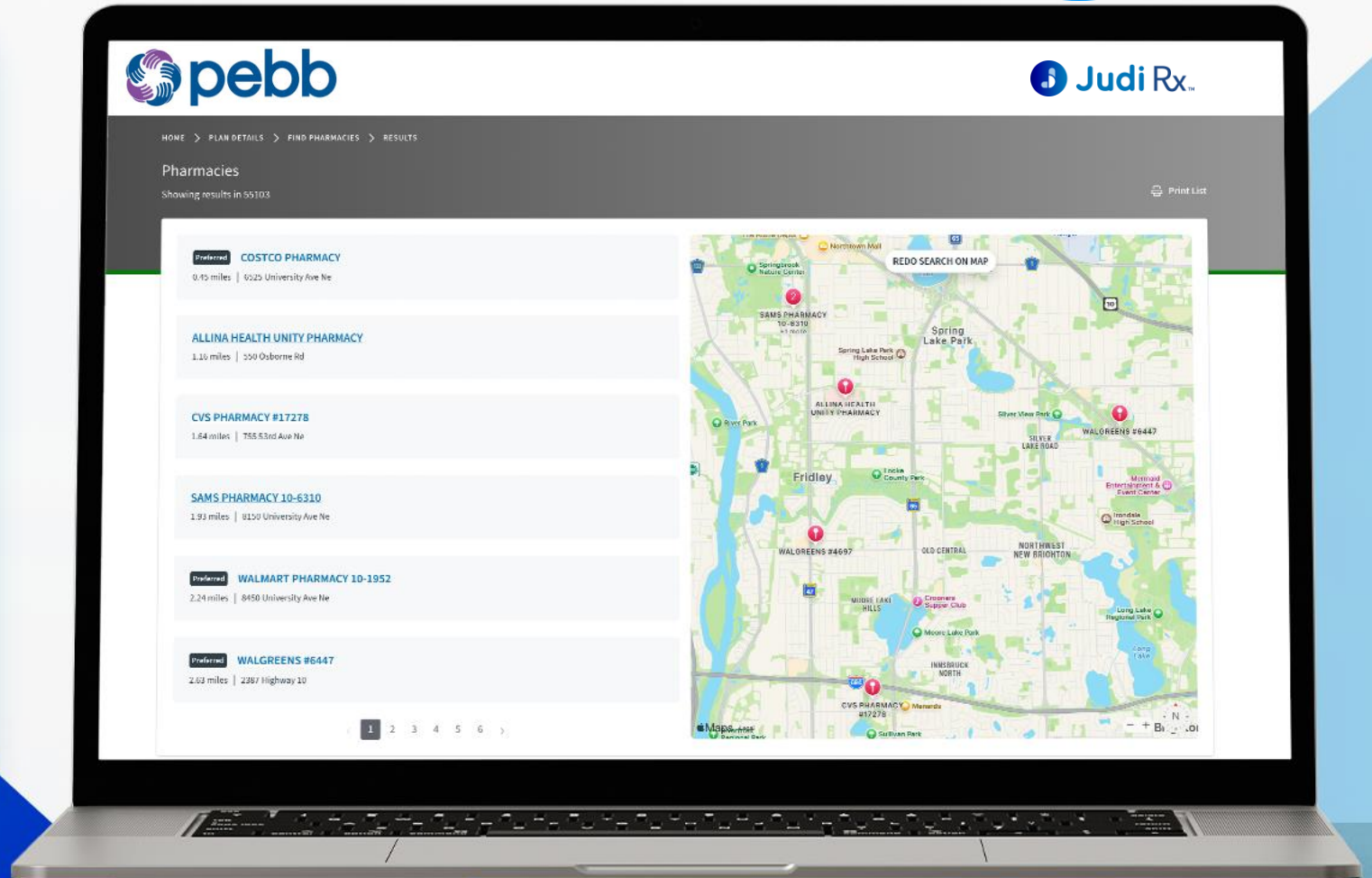
Pharmacy Finder



Drug Price Lookup



Custom Plan Design



Open Enrollment Webinars

Please register at a link below

[Session 1- Tuesday October 6th 9am-10am PT](#)

[Session 2- Friday October 9th 11am-12pm PT](#)

[Session 3- Wednesday October 14th 9am-10am PT](#)

[Session 4- Wednesday October 28th 12pm-1pm PT](#)

Discussion Items:

Transition Details
Formulary Information
Prior Authorizations
Member Tools
Customer Care

Hosted on Zoom Webinar

Tools Available Soon

- **Late December**
 - **Member Welcome Booklet**
 - Mailed to home address
 - Details your pharmacy benefit including Mail Order, Specialty, Prior Authorizations, Member Portal and Mobile App
- **January 1, 2027**
 - **Member Portal available**
 - 'Find Best Price' Tool
 - Track progress with accumulators
 - View your benefits information
 - Track Prior Authorization status
 - Formulary Document





Judi Rx Mobile App

Search 'Judi Rx' to download on the app store

Available
Jan. 1



Find low-cost drugs at a pharmacy near you



Find a pharmacy



View your claims history



Download a digital pharmacy ID card



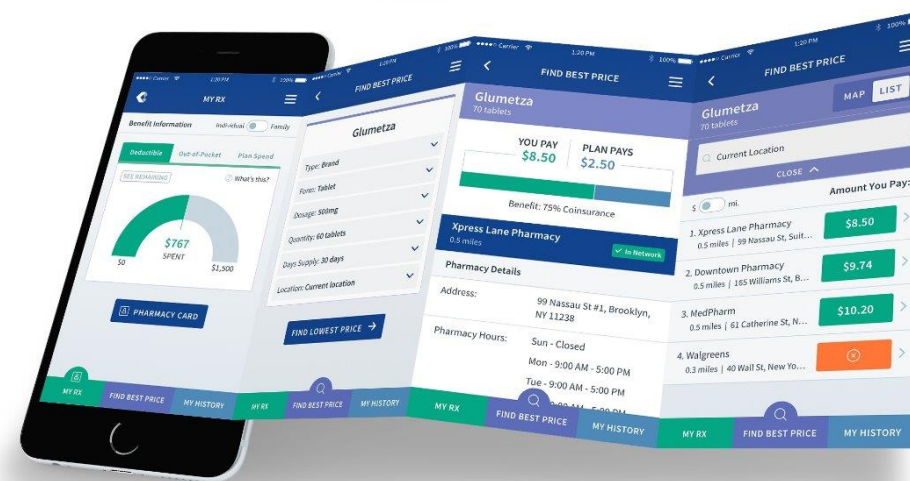
View which drugs are covered under your plan



Track how much money you have paid towards your out-of-pocket obligations



View or download member documents and plan forms



 Thank you for your time!



 **Web:** [Judi Rx | PBM of Judi Health](#)

 **Phone:** 833-895- 9836

SUBSCRIBE:



*The Astonishing
Healthcare Podcast*

FOLLOW US:



Judi Health



Everyday Assistance Plan (EAP)

Our Mission

**Create happier and healthier futures by breaking down
barriers today**

Who Is Eligible

- All employees
- Spouse/Domestic Partner
- Family members living in the household
- Dependents up to 26 years old, regardless of location

Revive Service Summary

FREE AND CONFIDENTIAL

Mental Health Hotline 24/7/365

Assistance from a mental health professional with in-the-moment consultations and referrals

Counseling

Counseling to address a wide range of issues, to feel better and move forward. Able to match based on diversity criteria and health plan participation. **In-Person or virtual. (3, 5, 6 or 8 sessions per incident)**

Coaching

Coaching to support personal development. **(3, 5, 6 or 8 sessions per incident)**

Virtual Peer Support

24/7/365 moderated anonymous online peer support and resources.

Resources for Life

- Childcare
- Adult care
- Resource retrieval
- Unlimited financial coaching
- Legal referrals, will kit, and forms
- Identity theft services
- Fertility health support
- Home ownership program
- Wellness and pet insurance discounts

Member Site and Digital Tools

Virtual Care Navigator and

Direct-to-Care scheduling portal

Self-care courses, tips, forms, videos and dCBT

Speed to Care

**<10
Seconds**

calls answered by a
live representative

6 Days

days until first
appointment with a
master level
counselor

**1 – 2
Days**

days until first
appointment with a
coach

Provider Diversity

48%

of our network has shared
identity/experience with BIPOC and
LGBTQIA+

Care you deserve, from a network built for you.

Revive's network is designed around the diverse need of the people and communities we serve.

- Flexible scheduling options
- Broad insurance acceptance
- Provider specialization
- Language and cultural competence

Resources for Life

Caregiver Resources

Resources found based on family's specifications

Resource Retrieval

Revive will do the research and report the resources



Unlimited Financial Coaching



- Budgeting
- Building savings
- Reducing debt
- Improving credit
- Mortgage
- College planning
- Joint incomes
- Buying a home
- Retirement

Legal Help

Confidential 30-minute consultation with an attorney, 25% discount thereafter

- Family law
- Real estate
- Civil matters
- Will/Estate Planning
- Other



Identity Theft Services

- Consultation and guidance for victims of ID theft
- Preventative tips
- Information about how to restore your identity



Home Ownership and Housing Support



- Assistance and discounts for selling, buying, and refinancing a home
- Savings for employee's average \$2,000 - \$6,000 of their out-of-pocket expenses
- Housing resource retrieval
 - Locate resources for housing assistance, options in your area, temporary or emergency needs

Fertility Health & Family Building

Exclusive access for Revive EAP members:

- Discounted fertility health check
- Connection to fertility preservation, care, and donation services
- \$350 care credit
- EAP resources for adoption, counseling support, legal and financial guidance



**PINNACLE
FERTILITY**

Your health plan may not cover Fertility Health and Family Growing services. Please refer to your health plan summary for more information.

Coaching

Revive's professional coaches are available by phone or video sessions to support you with:

- Goal setting and planning
- Health habits
- Increased resilience
- Decision making
- Communication Skills
- Career or personal development



Pet Parent Resources



- Concierge support
- Bereavement support
- Pet insurance discounts
- New pet parent resources

Wellness Discounts

Exclusive membership discounts to gyms, fitness centers, and studios

Additional discounts on weight loss and healthy eating programs for the whole family

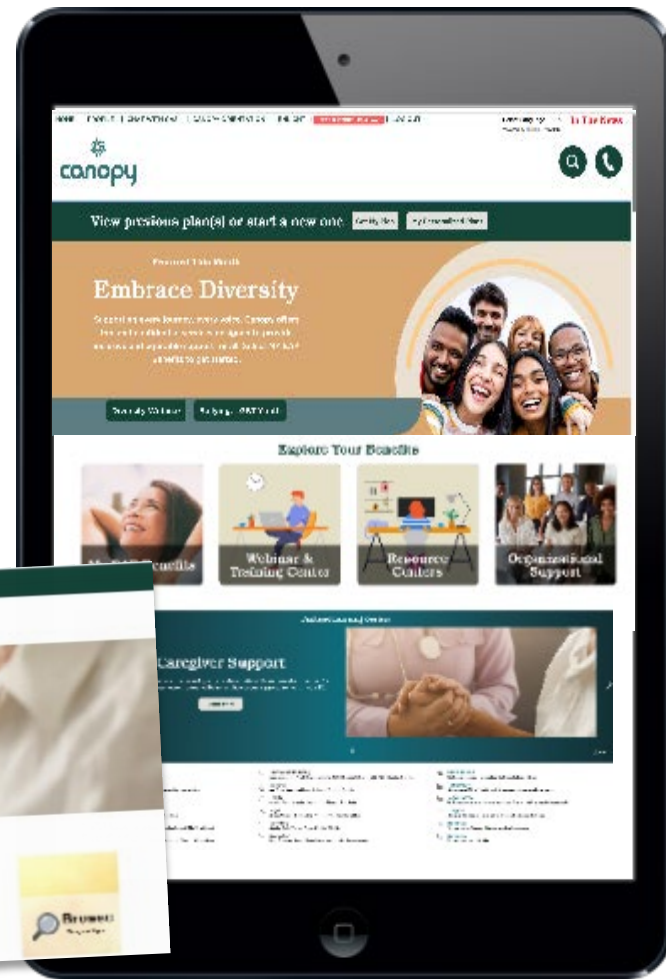


Member Website

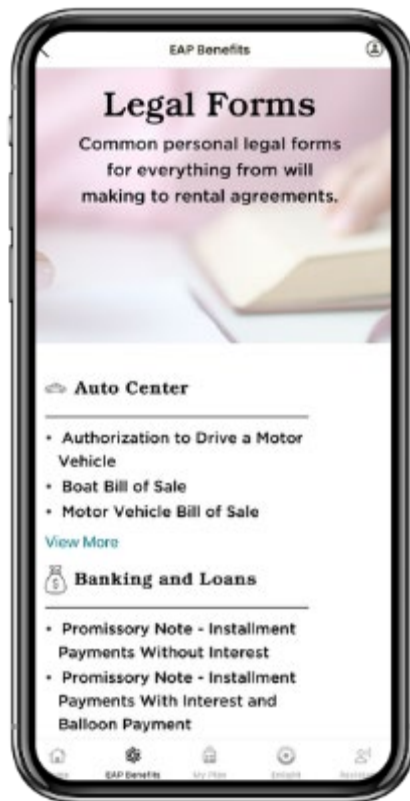
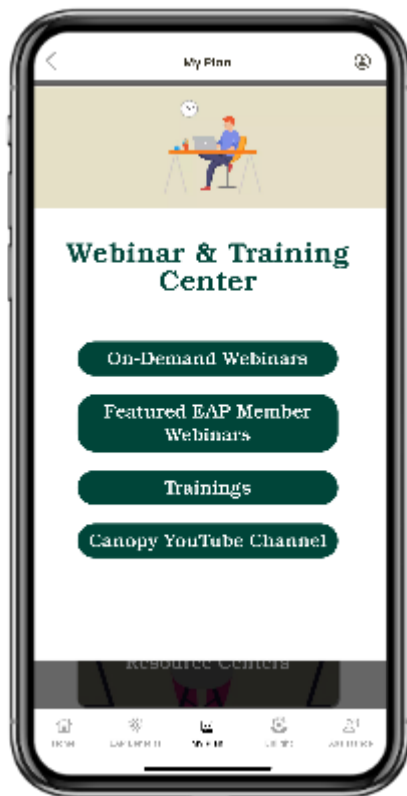
- On-demand webinars
- Learning centers
- Resources and tools
- Self-assessments
- Videos
- Quizzes
- And more...

Login to the member site:
canopy.myrevive.health

Register with your
Organization Name:
PEBB



Mobile App



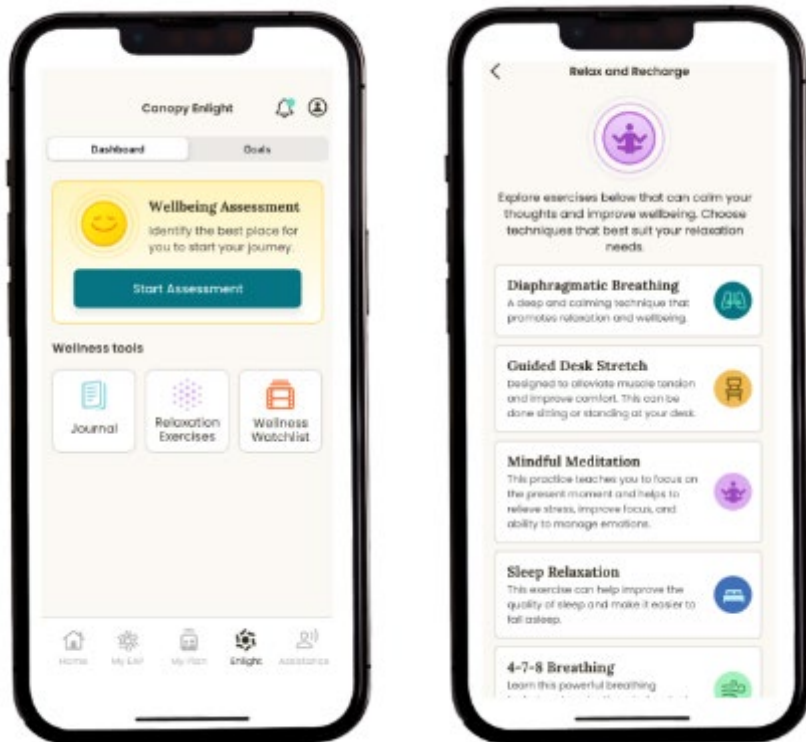
- Provider search + self-scheduling
- Self-Assessments
- Videos
- Webinars
- Legal and tax forms
- Resources to manage stress, work, family life, and more
- dCBT (Enlight)



Download the app: Search
"Canopy EAP"



Enlight



Enlight

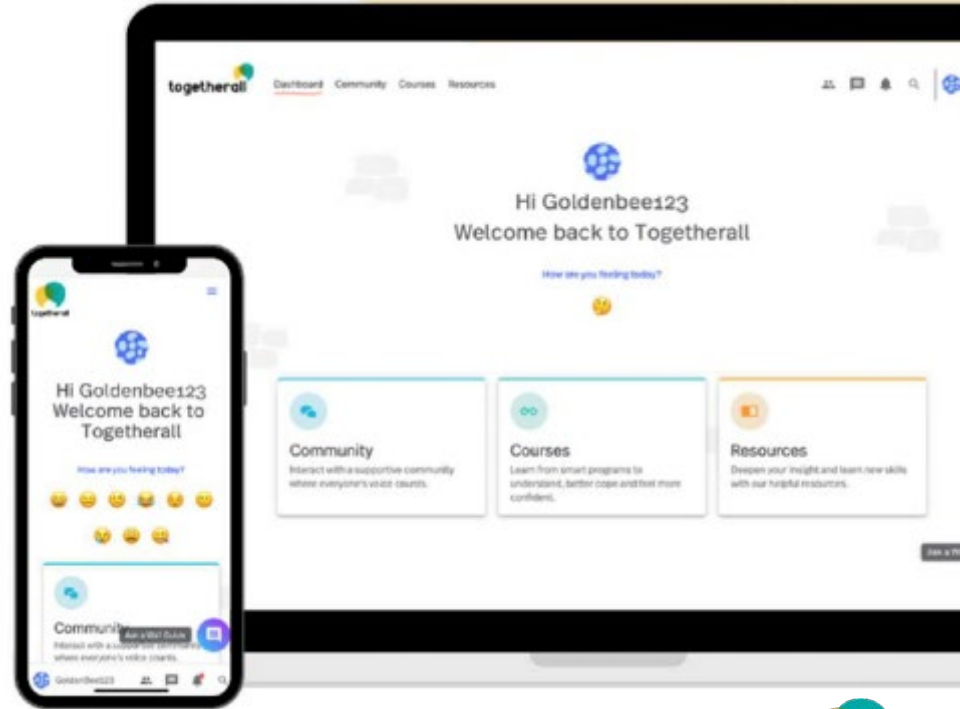
Your Self-Paced Mental Health Companion

Digital Cognitive Behavioral Therapy (dCBT) helps you discover ways to enhance your wellbeing and support your journey toward a healthier and happier you.

- Complete a short assessment in 3-5 minutes
- Goal setting and tracking tools
- Breathing, mindfulness, and relaxation tools
- Digital therapy and support for sleep, stress, and more

24/7 Peer to Peer Support

- Easily and anonymously connect with other with shared lived experiences
- Occupational specific matches
- Monitored and moderated 24/7 by licensed clinicians
- Referrals to EAP content and services
- Safe and inclusive online space



In partnership with



Questions?

Please contact us if you have any questions.

We appreciate your time and attention.



800-433-2320



connect@revive.health



canopy.myrevive.health





It's Time to Enroll Get to Know Your VSP Vision Benefits

State of Oregon

Enjoy easy access to your vision benefits with VSP.
Learn how at vsp.com.



Great Eye Care with a Hefty Side of Savings

Vision Care
is Essential



Savings that
Really Stack Up



Thousands of
In-Network
Choices



Founded by
Doctors
Focused on You



See Why Eye Care Is Essential to Overall Health and Wellness

Did you know an eye exam is the only non-invasive way to view blood vessels in your body?*

Signs of more than 270 health conditions can be detected during an eye exam.*

Your eye doctor can be the first to detect signs of certain conditions, like diabetes.*

heart disease + **stroke** + cardiovascular + Alzheimer's + hypertension + aneurysm + **diabetes** + **brain tumor** + high blood pressure + cancers of blood, tissue, skin + **high cholesterol** + lyme disease + multiple sclerosis + lupus + sickle cell disease + stroke + **thyroid disease** + vascular disease + brain tumor + melanoma + squamous cell + **Lymphoma** + **leukemia** + rheumatoid arthritis + giant cell arteritis + **medication toxicities** + myasthenia gravis + sarcoidosis + sjögren's syndrome + **vitamin a deficiency**

270+



PEBB – VISION PLANS

PEBB offers **two** VSP vision plans for you to choose from.

The VSP
Basic Plan



The VSP
Plus Plan



Your VSP Plan Options at a Glance

	Basic Plan	Plus Plan
Exams	WellVision Exam® covered every calendar year \$10 Copay	
	Retinal Imaging exam covered every calendar year with up to \$39 Copay	Retinal Imaging exam covered every calendar year with a \$10 Copay
Frame Allowance	\$150 Frame allowance every calendar year \$170 featured frame brands allowance \$150 Walmart®/ Sam's Club® frame allowance \$80 Costco® frame allowance	\$225 Frame allowance every calendar year \$245 featured frame brands allowance \$225 Walmart®/ Sam's Club® frame allowance \$125 Costco® frame allowance
Lenses	Prescription lenses covered every calendar year with \$25 Copay - Fully covered single vision, lined bifocal, or lined trifocal lenses - Impact-resistant lenses for children	
Lens Enhancements	- Standard Progressive lenses - \$0 copay 40% average savings on other lens enhancements	- Standard Progressive lenses - \$0 copay - Anti-glare coating - \$20 copay - Premium or Custom Progressive lenses - \$20 copay 40% average savings on other lens enhancements
Contact Lens Allowance (Instead of glasses)	\$200 allowance for contacts lenses and copay up to \$60 for contacts lens exam (fitting and evaluation)	\$225 allowance for contacts lenses and copay up to \$60 for contacts lens exam (fitting and evaluation)



Retinal Screening

Digital imaging is key to early detection and intervention

- Images of the inside of the eye
- Baseline documentation of a healthy eye
- Screen for potential disease(s)
- Can be compared year after year to monitor even the most subtle changes in the eyes
- No more than **\$39** copay (or **\$10** copay on the Plus Plan)
- **\$0** copay for members with diabetes





VSP LightCare™

No prescription? No problem.
Defend your eyes indoors and out

Shield your eyes from the sun's ultraviolet rays or blue light from screens—all without a prescription. Simply apply your frame allowance when you visit a VSP network doctor and choose:



Sunglasses

or



Ready-made blue light filtering glasses*

Create an account and log in to vsp.com to review your benefit information. Based on applicable laws; benefits may vary by location. Coverage with a retail chain may be different or not apply.

*Blue light filtering lenses are not clinically proven to prevent or reduce digital eye strain. Use of these lenses should be based on personal preference, not medical necessity.



Essential Medical Eye Care

- Fully covered retinal screening for members with diabetes.
- Exams and services to treat immediate issues like pink eye and sudden changes in vision.
- Treatment options to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more.
- Copay of **\$20** for exam services.



“My husband burned his eyes welding, and without this benefit we would have had to pay out of pocket or waited days to get prior authorization from his health insurance.”



Savings Beyond Benefits

Members get access to VSP Member Extras

- 50%** ▶ Save 50% on additional pairs of glasses and sunglasses at Visionworks® ¹
- \$300** ▶ Save up to \$300 with your VSP vision insurance, with free shipping and returns²
- \$20** ▶ Additional \$20 on Featured Frame Brands³
- 60%** ▶ Save up to 60% on hearing aids with TruHearing® ⁴
- \$1,200** ▶ Save up to \$1,200 on Lasik
- \$300** ▶ Get up to \$300 in contact lens rebates

1. Offers may vary based on state and benefit plan. Brands and offers are subject to change. 2. Savings and offers vary by brand, lens type, and member eligibility. Restrictions apply. Savings cannot be redeemed for cash, applied to past purchases, or combined with other offers. 3. Frame brands and promotion subject to change. Only available to VSP members with applicable plan benefits. Only available at in-network locations. Members who participate in a Medicaid/state-funded plan are not eligible. 4. VSP is providing information to its members, but does not offer or provide any discount hearing program. VSP makes no endorsement, representations or warranties regarding any products or services offered by TruHearing, a third-party vendor. TruHearing is not insurance and not subject to state insurance regulations. For additional information, please visit vsp.com/offers/special-offers/hearing-aids/truhearing. For questions, contact TruHearing directly. Not available directly from VSP in the states of Washington and California.



VSP Member Extras

Glasses & Sunglasses



LASIK



Contacts



Hearing Health



Money & Life Management



Leisure & Lifestyle



*VSP Member Extras are only available through VSP network doctors or participating partners. Some offers may only be available to VSP members with applicable plan benefits. Promotions are evaluated regularly and are subject to change. VSP shall have no liability whatsoever for the services or products or the discounts that may be offered by third parties. These third-party offers are void where prohibited.

Classification: Confidential

The Choice is Yours

Thousands of in-network locations.



Private Practice
locations



Retail
locations



Online at Eyeconic,
the VSP in-network
online eyewear
store.

Walmart
Vision Center

sam's club

COSTCO
OPTICAL

Rxoptical
The people who care for your eyes.

Clarkson
Eyecare
DOCTORS · GLASSES · CONTACTS · LASIK

COHEN'S
Fashion Optical

vsp
PREMIER
edge

Get more
in network

private
practice
doctors

Visionworks

EYEMART
EXPRESS
FAMILY OF STORES

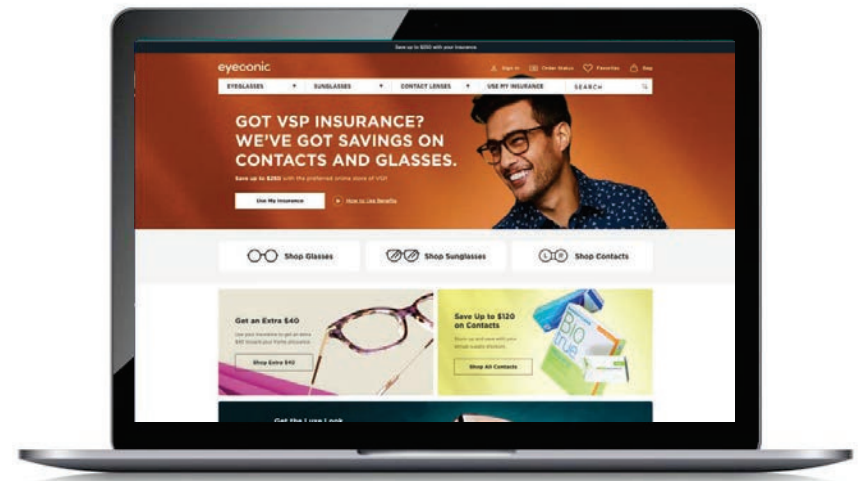


Eyewear Shopping Online at Eyeconic®

Eyeconic® is the in-network, online eyewear store for VSP® members. *You'll get:*

- More than 60 brands of glasses, contacts, and sunglasses
- Virtual Try-On
- Free shipping and returns*
- 20% off eyewear just for being a VSP member
- Specialty sizes that fit your needs

Find your product, customize your order, and we do the rest. Start saving at **eyeconic.com** today.



eyeconic
a vsp vision company

*Terms and conditions apply. Visit eyeconic.com/faqs for more details



12

Classification: Confidential

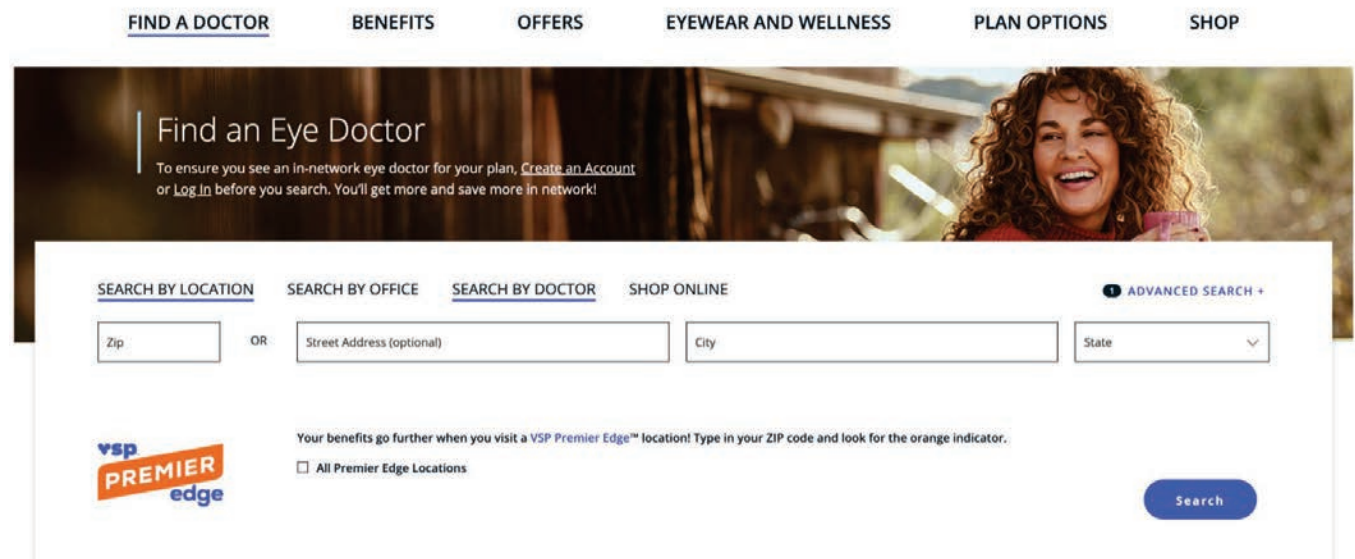
The Right Doctor for You

Using the Find a Doctor tool on **vsp.com** is easy

Visit **vsp.com/eye-doctor** (or navigate from **vsp.com** home page)

Enter the preferences that are meaningful to you like:

- Location
- Gender
- Language
- Frame brands
- Specialty
- Services
- Hours & Scheduling



The screenshot shows the 'Find an Eye Doctor' tool on the VSP website. At the top, there is a navigation bar with links: FIND A DOCTOR (underlined), BENEFITS, OFFERS, EYEWEAR AND WELLNESS, PLAN OPTIONS, and SHOP. Below this is a large banner image of a smiling woman with curly hair. The main heading is 'Find an Eye Doctor' with a subtext: 'To ensure you see an in-network eye doctor for your plan, [Create an Account](#) or [Log In](#) before you search. You'll get more and save more in network!'. Below the banner, there are four search options: SEARCH BY LOCATION (underlined), SEARCH BY OFFICE, SEARCH BY DOCTOR (underlined), and SHOP ONLINE. To the right of these is a link for 'ADVANCED SEARCH +'. The 'SEARCH BY LOCATION' section contains a form with a 'Zip' field, an 'OR' separator, a 'Street Address (optional)' field, a 'City' field, and a 'State' dropdown menu. Below the form, there is a VSP Premier Edge logo and a note: 'Your benefits go further when you visit a VSP Premier Edge™ location! Type in your ZIP code and look for the orange indicator.' There is a checkbox for 'All Premier Edge Locations' and a blue 'Search' button.



Using Your Benefit is Easy

Once you've enrolled...

1. Create an account at **vsp.com** and review your personalized benefit information.
 - Access your personal benefit information
 - View and save your member ID card
 - Find an in-network doctor
2. Find a VSP in-network doctor by visiting your member account, going to **vsp.com** or calling **800.877.7195 (TTY: 711)**.
3. Simply tell your eye doctor's office that you have VSP—and we'll take care of the rest!





VSP helps you see well and be well with
the coverage and quality care you
deserve.

Visit pebb.vspforme.com or call
800.877.7195 (TTY: 711).

Availability of VSP Premier Edge may vary.

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VSP, Eyeconic, WellVision Exam, and ProTec Safety Plan are registered trademarks, VSP
LightCare VSP Premier Edge, and VSP PremierMax are trademarks, and Computer VisionCare
Plan is a service mark of Vision Service Plan.

All other brands or marks are the property of their respective owners.





2027 PLAN YEAR

Dental plan overview



OUR UNIQUE MODEL

Affordable insurance benefits & comprehensive dental care – all in one place

With more than 55 years of expertise, we use an approach based on proven care, strong clinical leadership, and affordable insurance solutions. **Together, these elements help deliver better results and support a healthier future.**

General Dentistry / Orthodontics / Pediatric Dentistry / Periodontics
Endodontics / Oral Surgery / Prosthodontics

Premiums don't tell the whole story on affordability

Recent research* shows nearly 1 in 4 people with dental insurance delay or avoid dental care because of high out-of-pocket costs.

Willamette Dental insurance offers a proven, affordable option that helps members get the care they need without financial barriers.



Office locations and hours

EXTENDED OFFICE HOURS

M-F, 7:00 AM – 5:30 PM SELECT SATURDAYS

Washington 19 offices

Locations from Bellingham to Vancouver, Silverdale to Spokane

Oregon 20 offices

Locations on the I-5 corridor, from Portland to Medford, Bend to Lincoln City

Idaho 6 offices

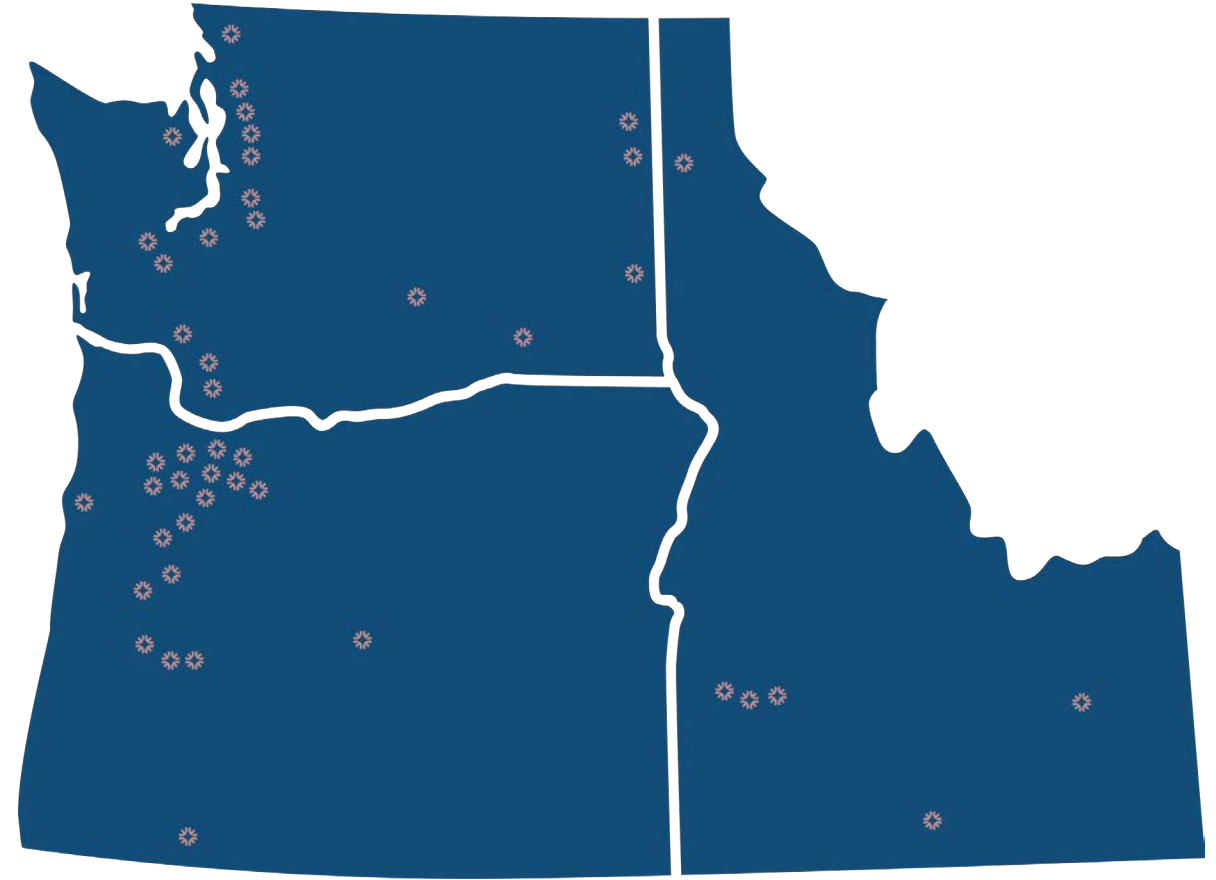
Boise, Nampa, Meridian, Twin Falls, Idaho Falls, Coeur d'Alene

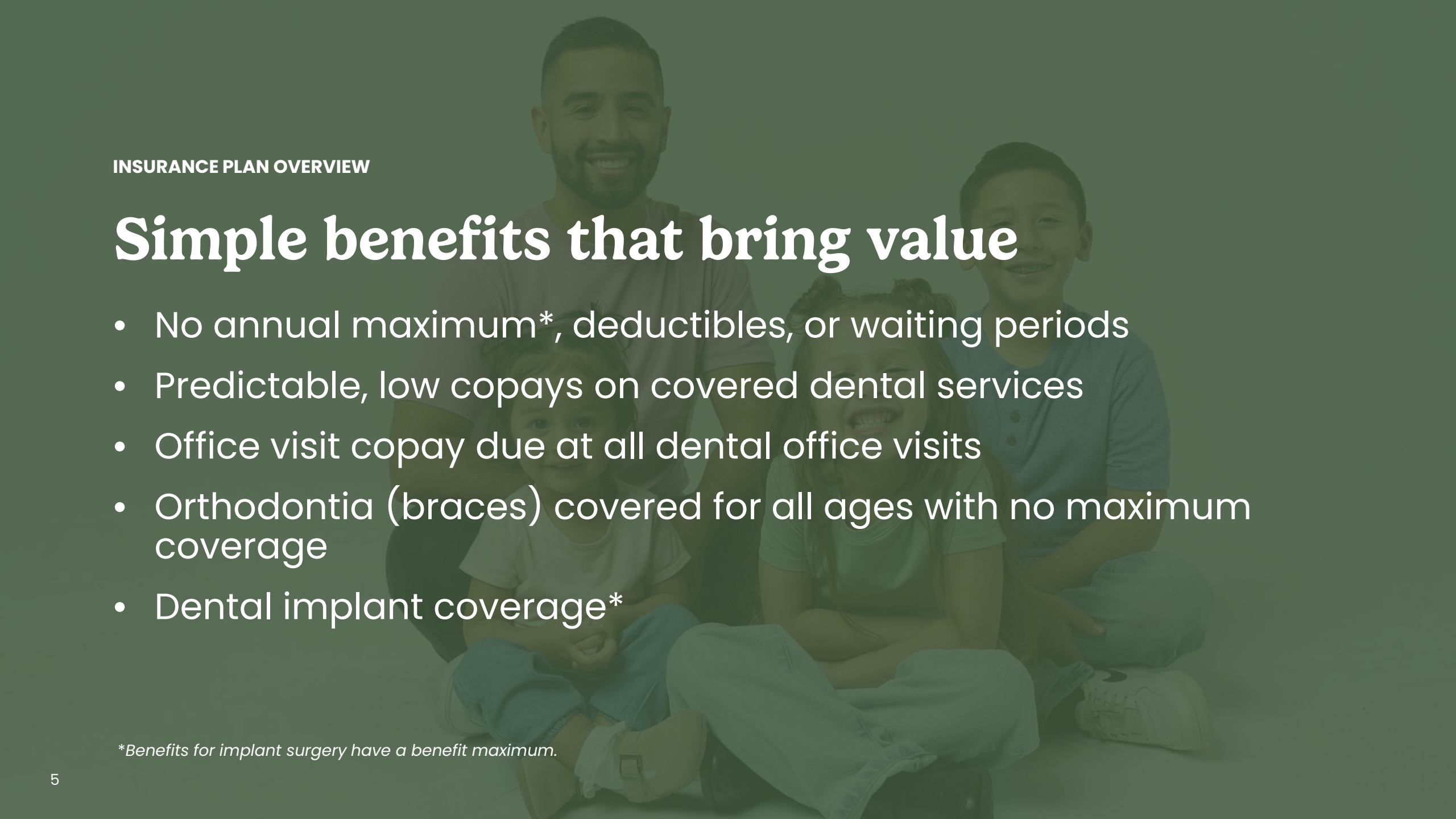
General Care All offices

Our general dentists provide outstanding care

Specialty Care Select offices

Highly trained specialists including orthodontists, endodontists, oral surgeon & periodontists



A smiling man and three children (two girls and one boy) are sitting together, representing a family. The man is in the background, and the children are in the foreground. They are all smiling and looking towards the camera.

INSURANCE PLAN OVERVIEW

Simple benefits that bring value

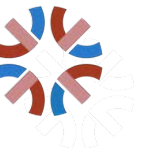
- No annual maximum*, deductibles, or waiting periods
- Predictable, low copays on covered dental services
- Office visit copay due at all dental office visits
- Orthodontia (braces) covered for all ages with no maximum coverage
- Dental implant coverage*

**Benefits for implant surgery have a benefit maximum.*

PEBB Summary of Benefits

Covered Service	Member Out-of-Pocket Cost
General and ortho office visit	\$10 per visit
Diagnostic and preventive services	Covered with office visit copay
Fillings	\$20 copay
Crown or bridge	\$250 copay
Complete upper or lower denture	\$290 copay
Root canal therapy	\$150 copay
Surgical extraction (per tooth)	\$40 copay
Comprehensive orthodontic treatment	\$2,500 copay
Dental implant surgery	\$1,500 maximum coverage per year
Specialty office visit	\$10 per visit

Visit willamettedental.com/pebb to view full Benefit Summary & Certificate of Coverage



Treatment philosophy

At Willamette Dental Group, we believe **dental care should do more than fix problems—it should prevent them.** Through checkups, early detection, and personalized care plans, we help patients maintain their oral health and avoid unnecessary procedures.



Personalized dental care plan

Each patient receives a thorough evaluation, diagnosis and Personalized Dental Care Plan (PDCP) customized to their oral health profile, including:

- Assessment of risk factors (tooth decay, gum disease, chronic conditions, tobacco use)
- Home care recommendations and in-office treatment plan
- Additional preventative screenings (blood pressure, oral cancer screenings, etc.)



Dental cleaning coverage

Frequency of regular dental visits should be tailored by dentists to accommodate for current oral health status and health history – American Dental Association

- Cleaning frequency customized for each patient based on oral health risk assessment
- Plan covers number of cleanings prescribed by your dentist (Range from 1 to 4+ cleanings per year)





Orthodontic treatment for the entire family

- Accessible and affordable
- One-time comprehensive copay + simple office copay at each visit
- Benefits available for both children and adults
- No waiting periods or hidden costs
- Experienced Orthodontists at select regional offices



Dental implant surgery benefit

Surgical services covered up to \$1500
(limited to one implant per year)

Central locations in our tri-state region

Timeline 6-12 months, depending on
scope of treatment required



Helpful Statement of Services

Details all services rendered

Only dental insurance plan to offer real-time claim processing

Shows value of insurance and works for Flex-Spending reimbursement

Given at every appointment



Appointment scheduling and availability



Scheduling appointments

Local appointment center
schedule via phone or
online chat

M-F 7am – 5:30pm
S 7am – 1pm



Emergency appointments

48 hours or less in-office
appointments

24/7 on-call providers



Appointment reminders

Recalls and reminders
sent via preferred
method – text, phone or
email



Rescheduling or cancelling

Easy cancellation via
appt reminders

Call or chat to reschedule



Happy & healthy patients

Our commitment to exceptional care is reflected in our patient satisfaction—**9 out of 10 patients would recommend Willamette Dental** to a friend or family member, according to NRC Health independent post-appointment surveys.





Visit willamettedental.com/pebb

Explore our website to find information about our locations, provider profiles and patient reviews.



Schedule your appointment

Call to schedule your new patient appointment at 855.433.6825. Appointments are available within days or weeks – we can't wait to meet you!

Scheduling hours: M-F: 7am – 5:30pm / Sat: 7am – 1pm PT
For dental emergencies, call 24 hrs / 7 days a week



Questions about your benefits?

Contact Member Services at 855.433.6825 or
memberservices@willamettedental.com

Member Services hours: M-F: 8am – 5pm PT



ACCOUNT MANAGER

Cristine Wienecke

cwienecke@willamettedental.com



 **Willamette Dental**



State of Oregon through the Public Employees' Benefit Board (PEBB)

Annual Enrollment



Today's Agenda

The Standard's Offerings:

- Life Insurance (Basic and Optional)
- Voluntary Accidental Death & Dismemberment (AD&D)
- Short Term Disability
- Long Term Disability

Next Steps

- PEBB Microsite
- Decision Support Tool

Basic and Optional Life Insurance

Basic and Optional Life Coverage

Coverage Amounts

- **Basic Life:**
\$10,000
- **Optional Employee Life:**
\$20,000 to \$600,000
- **Optional Spouse/Domestic Partner Life:**
\$20,000 to \$400,000
- **Dependent Life:**
\$5,000 (Spouse/Domestic Partner and Child)
- **Retiree Life:**
50% of Life Insurance amount in effect prior to retirement, up to \$200,000

Guarantee Issue Levels

- **Basic Life, Dependent Life and Retiree Life:** All guarantee issue
- **Optional Employee Life:**
\$100,000*
- **Optional Spouse/Domestic Partner Life:**
\$20,000*

*If applying for coverage within the first 30 days of becoming eligible



Value Added Features

Accelerated Benefit	Provides up to 75% of Life Insurance benefit prior to death for terminally ill employee/spouse/domestic partner
Waiver of Premium	Continues Life Insurance for members who are under age 60 and totally disabled without payment of premium
Portability	Allows you to take your insurance with you upon termination of employment (not retirement) at the same rates
Travel Assistance*	Provides services to employee and immediate family members when traveling more than 100 miles from home
Life Services Toolkit*	Timely and compassionate support services for members and beneficiaries

* Provided by a third-party administrator



Travel Assistance¹

Security That Travels With You

Travel Assistance connects you to resources 24/7 before and during a trip:

- Available when you travel more than 100 miles from home for up to 180 days for business² or pleasure
- Coverage for you, your spouse, and kids through age 25
- Easy access via mobile app, online portal, QR code and wallet card

¹ Travel Assistance is provided through an arrangement with Assist America, Inc. and is not affiliated with The Standard. Travel Assistance is subject to the terms and conditions, including exclusions and limitations of the Travel Assistance Program Description. Assist America, Inc. is solely responsible for providing and administering the included service. Travel Assistance is not an insurance product. This service is only available while insured under Standard Insurance Company's Life insurance policy. Standard Insurance Company may change providers or terminate service at any time.

² Business travel is not available for spouse and dependents.

Get the App

Get the most out of Travel Assistance with the Assist America mobile app. The app provides valuable travel resources including:

- One-touch access to Assist America's Emergency Operations Center
- Worldwide travel alerts
- Mobile ID card
- Embassy locator

Reference number: 01-AA-STD-5201





Life Services Toolkit*

With The Standard, your Life insurance offers extra tools and benefits. Some you can use now — others help beneficiaries after a death.

Employee and Beneficiary services

- Estate planning assistance
- Funeral arrangements
- Identity theft prevention
- Financial planning
- Health and wellness

Other Beneficiary Services

- Grief support counseling
- Legal services
- Financial counseling
- Support services
- Online resources

* Life Services Toolkit is provided through an arrangement with Health Advocate and is not affiliated with Standard Insurance Company. Health Advocate is solely responsible for providing and administering the included service. This service is only available while insured under Standard Insurance Company's life insurance policy. Standard Insurance Company may change providers or terminate service at any time.



Voluntary Accidental Death & Dismemberment

Voluntary AD&D Coverage

Coverage Amounts

- **Member:**
\$50,000 to \$500,000
- **Spouse/Domestic Partner Only:**
50% of member's amount
- **Children Only:**
15% of member's amount for each child
- **Family Coverage (Spouse/Domestic Partner and Children):**
40% of member's amount for spouse/domestic partner and 15% of member's amount for each child

Guarantee Issue Levels

All amounts are guarantee issue

Short Term Disability Benefits

Short Term Disability Insurance

Reminder: Entitlement to Paid Leave Oregon benefits will reduce benefits payable under STD.

The STD plan includes each of the following:

Maximum Weekly Benefit	\$1,662 Maximum benefit* \$25 Minimum benefit *before reduction by deductible income
Benefit Percentage	60% of the first \$2,770 (based on weekly predisability earnings)
Benefit Waiting Period	0 days for accident 7 days for sickness
Maximum Benefit Period	13 weeks 4 weeks for preexisting conditions

* Deductible income is other sources of income your employee receives or is eligible to receive while STD benefits are payable, such as Paid Family Medical Leave, Workers' Compensation, Social Security and PERS.





STD Added Features and Services

- **Return to Work Incentive**

Allows member to receive up to full salary while working part-time

- **Waiver of Premium**

Continues insurance without payment of premium while you are disabled

- **Tax-free Benefit**

Because premium for STD coverage is paid for by the member with post-tax dollars, benefits paid are not taxable

- **Employee Portal**

File claims, upload documents, review status

Long Term Disability Benefits

Long Term Disability Insurance

The LTD plan includes each of the following:

Maximum Monthly Benefit	\$7,200 \$8,000 (before reduction by deductible income*)
Benefit Percentage	60% of the first \$12,000 66 ^{2/3} % of the first \$12,000 (based on monthly predisability earnings)
Benefit Waiting Period	90 days 180 days
Maximum Benefit Period	To age 65 with or age-grading (consult your certificate of insurance for actual coverage maximums)

* Deductible income is other sources of income your employee receives or is eligible to receive while LTD benefits are payable, such as Workers' Compensation, Social Security and PERS.





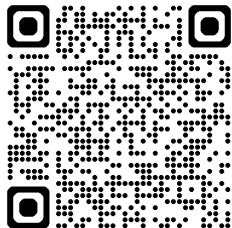
LTD Added Features and Services

- **Return to Work Incentive**
Allows member to receive up to full salary while working part-time
- **Assisted Living Benefit**
Increases income replacement level to 80% for severely disabled members
- **Family Care Expense Benefit**
Helps offset family care expenses
- **Rehabilitation Plan Provision**
Reimbursement for rehabilitation plan expenses
- **Waiver of Premium**
Continues insurance without payment of premium while you are disabled
- **Tax-free Benefit**
Since LTD premium is paid for by the member with post-tax dollars, benefits paid are not taxable
- **Survivors Benefit**
Three times maximum LTD benefit without reduction by deductible income

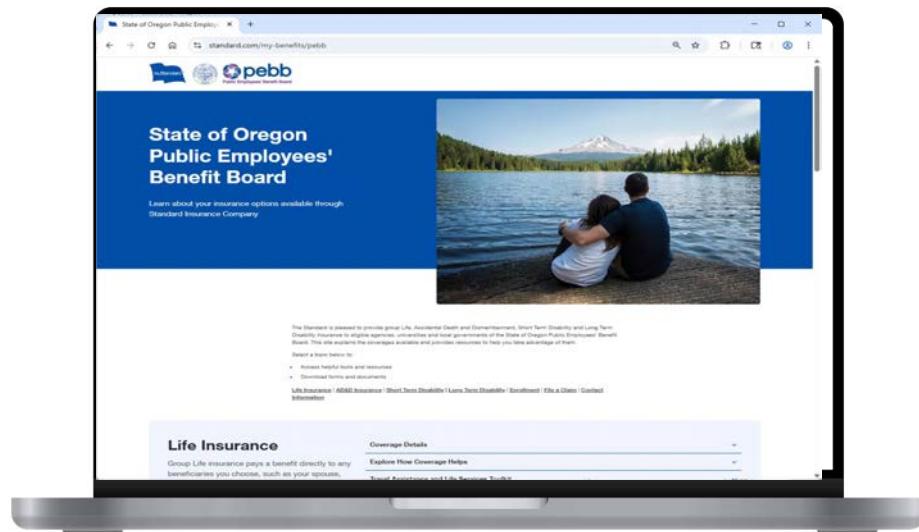
Next Steps

Please review your benefits summary for exclusions, limitations and reductions in benefits.

For more information, including access to our Decision Support Tool, please scan the QR code below:



You can also visit The Standard's PEBB microsite at:
www.standard.com/my-benefits/pebb



The policies described have exclusions, limitations, reduction of benefits, and terms under which the policy may be continued in force or terminated. Please review all materials or contact The Standard for additional information, including costs and complete details of coverage. The amount of benefits provided under the policies described depends on the plan selected.





The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of 1100 SW Sixth Avenue, Portland, Oregon, in all states except New York, where insurance products are offered by The Standard Life Insurance Company of New York of 333 Westchester Avenue, West Building, Suite 300, White Plains, New York. Product features and availability vary by state and company and are solely the responsibility of each subsidiary. Each company is solely responsible for its own financial condition. Standard Insurance Company is licensed to solicit insurance business in all states except New York. The Standard Life Insurance Company of New York is licensed to solicit insurance business in only the state of New York.

Benefit Resources



Vendor Partner Webinars

- Moda Health, Judi Rx, and Kaiser Permanente will host webinars during Open Enrollment.
- These webinars will focus on the individual vendor's plan options. They will not include PEBB staff or other vendors.

Vendor	Topic	Registration
Moda Health (Multiple sessions)	• Moda Health's 2027 plan options. • Benefits and perks available to members.	• <u>Register for a Moda Health webinar.</u>
Judi Rx (Multiple sessions)	• Prescription drug benefits included with Moda Health's 2027 medical plan options.	• <u>Register for a Judi Rx webinar.</u>
Kaiser Permanente (Multiple sessions)	• Kaiser's 2027 plan options. • Benefits and perks available to members.	• <u>Register for a Kaiser Permanente webinar.</u>

PEBBinfo.com



PEBB's website is the primary resource for members.

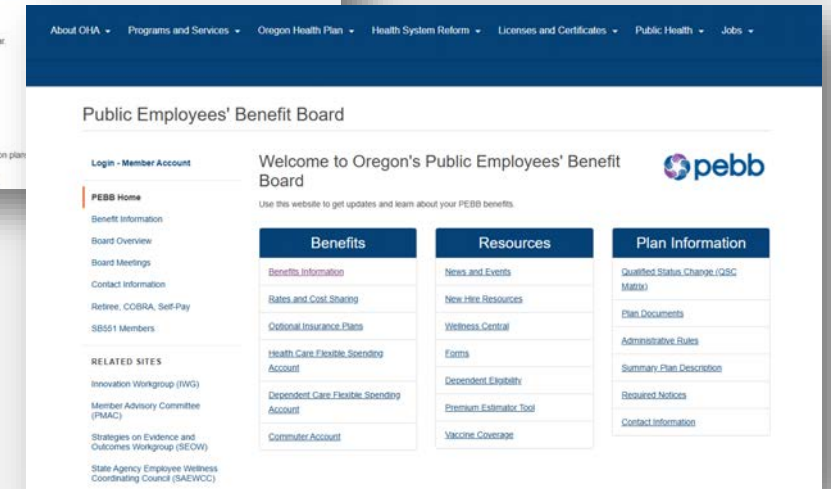
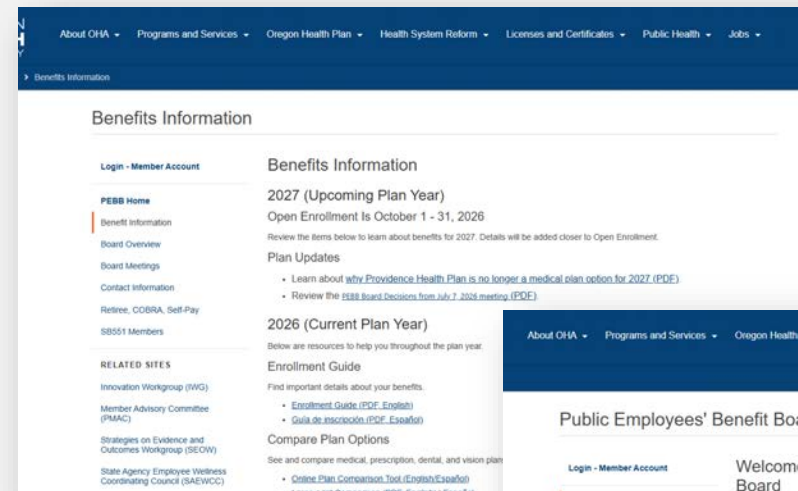


All Open Enrollment and benefits information will be posted on PEBB's website.



Links to other digital education tools are easy to find (e.g., premium estimator, online plan comparison tool, Explore Your Benefits).

PEBBinfo.com



Online Plan Comparison Tool



Use this tool to see the medical, dental, and vision plans available to you side by side.



You can also compare specific services by plan.



This includes copays, deductibles, and coinsurance.



Print your customized comparison if you want a hard copy!

www.comparepebbplans.com

 **Compare Your PEBB Plan Options**
Compare sus opciones de planes PEBB

English Version:
2027 Plan Year
Use this information to prepare for the 2027 plan year.
[Visit the 2027 plan comparison tool](#)

Versión en español:
Plan para el año 2027
Utilice esta información para prepararse para el año del plan 2027.
[Visite la herramienta del plan de comparación 2027](#)

Premium Estimator Tool

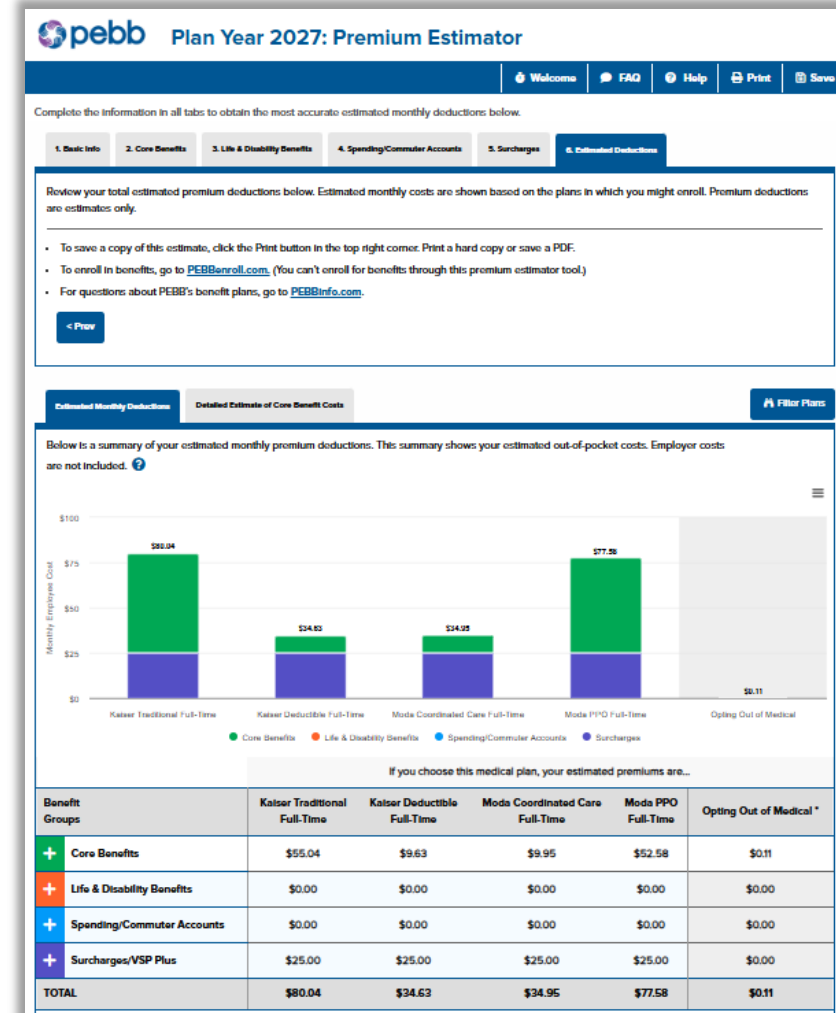


Use this estimator tool to determine your monthly deductions for all your 2027 PEBB benefits



Select your desired benefits, location, work status, and if you are a state or university employee.

pebbpremiumestimator.com



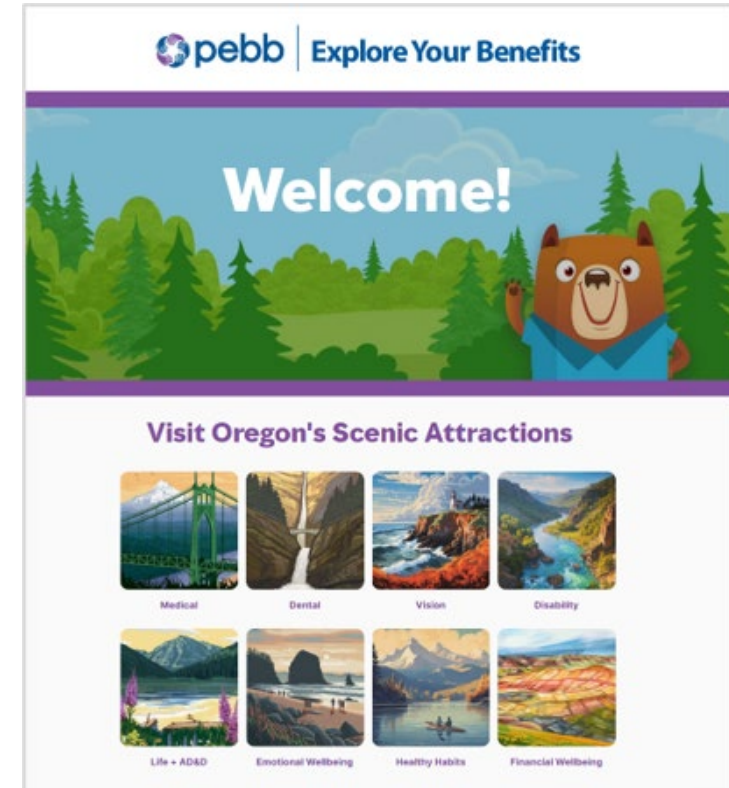
Explore Your Benefits



Make learning about your PEBB benefits fun!

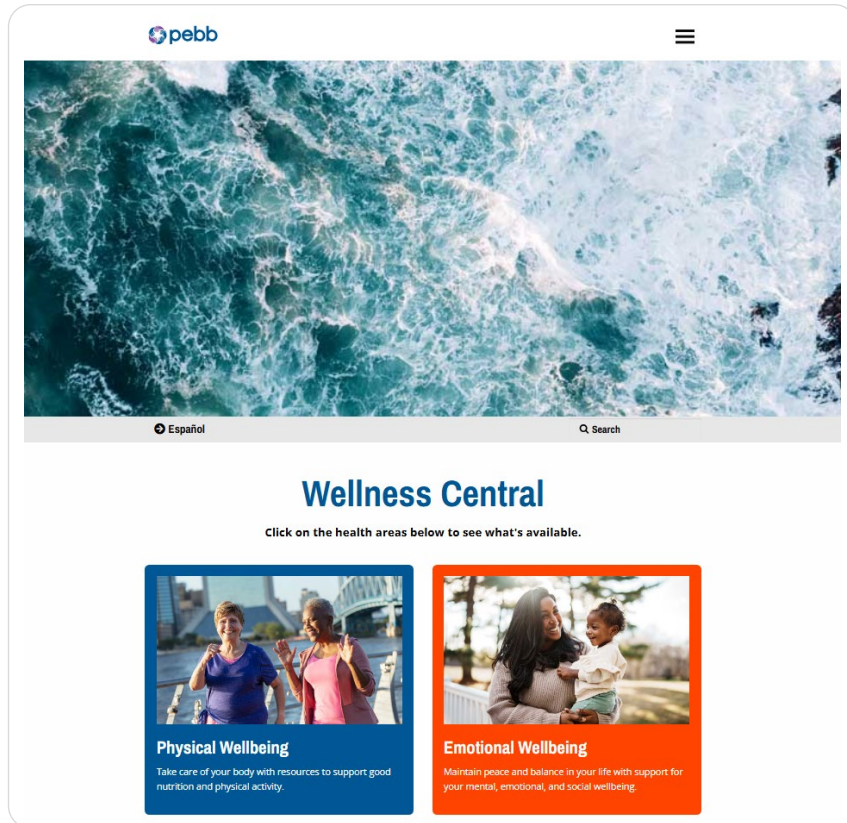


Use this award-winning interactive learning tool to watch videos, test your benefits knowledge, and earn wellness badges for smart wellbeing actions.



pebbexploreyourbenefits.com/2027

Wellness Central Website



- You have access to dozens of wellness programs as a PEBB member.
- With everything from personalized coaching to resource libraries, we're empowering you to take charge of your health.
- Take your physical, emotional, and financial health to the next level.
- Visit the Wellness Central website to see the wellness resources available to you through PEBB's plans.

<https://pebbwellnesscentral.com>

Thank you!

PEBB Member Services

pebb.benefits@odhsoha.oregon.gov

503-373-1102

PEBBinfo.com

Monday–Friday; 8 am–5 pm