
PEBB Mandatory Open Enrollment

October 1-31, 2023



Customer Service Info

- PEBB Customer Service Hours (note, our staff will be working remotely)
 - 8 AM to 6PM
 - Monday-Friday in October
- Call PEBB: (503) 373-1102
- Fax PEBB: (503) 373-1654
- Email PEBB: pebb.benefits@odhsoha.Oregon.gov
- Enroll: www.pebbenroll.com
- PEBB Forms:
<https://www.oregon.gov/OHA/PEBB/Pages/forms.aspx>
- Plan Info: www.pebbinfo.com

www.PEBBinfo.com

This gets you to the system to enroll or you can go to www.pebbenroll.com

PEBB Home

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Required Enrollment Begins Oct. 1

La inscripción requerida comienza el 1 de octubre

Everyone must complete Open Enrollment between Oct. 1 and Oct. 31. Go to PEBBenroll.com to make your plan selections.

Todos deben completar la Inscripción Abierta entre el 1 y el 31 de octubre. Vaya a PEBBenroll.com para seleccionar su plan.

HEM enrollment runs Sept. 1 through Oct. 31. You must complete your health assessment by October 31, 2023 to qualify for a monthly tax incentive and lower deductible.

Visit the HEM page to learn more or to start your HEM enrollment.

Benefits

[2024 Benefit Information](#)

[2023 Benefit Information](#)

[Alex, Virtual Benefits Counselor](#)

[New Hire Resources](#)

[Part-Time University \(SB 551\)](#)

[Optional Insurance Plans](#)

[Commuter Account](#)

[Dependent Flexible Spending Account](#)

[Health Care Flexible Spending Account](#)

[Travel Assistance by The Standard](#)

Resources

[2023 Imputed Tax Values](#)

[Dependent Eligibility](#)

[Forms](#)

[Insurance Company Plan Documents](#)

[News and Events](#)

[Premium Estimator Tool](#)

[Qualified Status Change \(QSC Matrix\)](#)

[Summary Plan Description](#)

[Required Notices](#)

Wellness Central

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[Wellness Programs](#)

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[Coordinated Care Model](#)

[Flu Shot Information](#)

[Health Club Discounts](#)

[Health Engagement Model \(HEM\)](#)

[Weight/Watchers \(covered by PEBB medical plans\)](#)

www.PEBBinfo.com

All about HEM

Health Engagement Model (HEM)

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Alex, Virtual Benefits Counselor	Forms	EAP S
New Hire Resources	Insurance Company Plan Documents	Coordi
Part-Time University (SB 551)	News and Events	Flu Str
Optional Insurance Plans	Premium Estimator Tool	Health
Commuter Account	Qualified Status Change (QSC Matrix)	Health
Dependent Flexible Spending Account	Summary Plan Description	Weight medical plans)
Health Care Flexible Spending Account	Required Notices	
Travel Assistance by The Standard		

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Learn about your health risks and save money too!
HEM pays employees an incentive to learn your health risks and take steps to reduce those risks when possible. When you participate in HEM:
• PEBB pays you a taxable incentive of \$17.50 per month, and
• You keep your medical plan deductible low.
If you decide not to participate, you will have a higher deductible. You will also miss out on a monthly incentive.



*Contact your medical carrier if you need a password reset. It may take up to 14 days for Kaiser Permanente members to receive your password, so please don't wait!

Easy steps to participate in HEM

Current medical plan enrollees:

- Enroll in a PEBB medical plan for 2024 between Oct. 1 and Oct. 31, 2023. *Be sure to state you wish to participate in HEM.*
- Take your health assessment on your current medical carrier's website between Sept. 1 and Oct. 31, 2023. Health assessments done outside of these dates will not be accepted. [Be sure to print or save your appointment card.](#)
- Complete two health actions during the plan year. You don't have to report them. You just need to let us know you did them at open enrollment next year.

Employees without medical coverage (Opt-out, decline members, or employees who have never enrolled):

Normally to participate in HEM, members take a health assessment on their current medical plan's website. Even though you are not enrolled in a medical plan this year you can still participate in HEM though. You just need to enroll in medical coverage during open enrollment. You won't take a health assessment this year. You will take one next open enrollment when you can take it on your medical carrier's website.

To participate in 2024:

- Enroll in a PEBB medical plan for 2024 between Oct. 1 and Oct. 31, 2023. *Be sure to state you plan to participate in HEM.*
- Complete two health actions during the plan year. You don't have to report them. You just need to let us know you did them at open enrollment next year.

New Hires:

To be eligible for HEM, your benefits must be in effect by Oct. 1. If your benefits are effective Nov. 1 or later, you are not eligible for HEM for the upcoming plan year. You can participate in HEM next open enrollment.
• HEM is an open enrollment benefit only.
• New employees not eligible for HEM do not receive the monthly incentive but are enrolled in the lower deductible plan.

Questions?

- What are Health Actions? +
- What Health Actions do I have to do? +
- Do I have to "track" my health actions? +

Go to Kaiser Permanente Health Assessment

Health Extras
Total Health Assessment
Phone: 1-866-300-9867 (if you leave a message, please allow 2 business days for a response.)
Hours: M-F, 8:00 a.m.-5:00 p.m.
O&A on Total Health Assessment
RewardsCustomerService@kp.org

Printable Instructions

Go to Moda Health Health Assessment

Health Risk Assessment
Phone: 1-844-775-5523
Email: pebbcustomerservice@modahealth.com
Talk to Health Navigators:
M-F, 7:30 AM - 3:30 PM

Printable Instructions

Go to Providence Health Assessment

MyProvidence Personal Health Assessment
Phone: 1-877-569-7768
Hours: M-F, 8:00 a.m.-5:00 p.m. (10/1-10/31)
Mon, 8:00 a.m.-8:00 p.m. (10/31)

Printable Instructions



Mandatory OE

- What does Mandatory OE mean?
 - You must do OE, or you will not be able to participate in HEM and receive the lower deductible and monthly incentive
 - Surcharges will apply if you don't do OE (tobacco and other group coverage for spouse)
 - Opt Out's need to reconfirm other group coverage each year
 - If you don't do OE, then your Opt Out turns to a Medical Not Enrolled and you will not receive the monthly incentive
 - If you want a Dependent Care (DC FSA) or Health Care (HC FSA) Flexible Spending Account, you must re-enroll each year
 - If you fail to do OE, then you will not be eligible for an FSA (unless you have a QSC)
 - We will explore the Open Enrollment Decision Chart aka **Napoleon Chart** to discuss Mandatory OE

The Open Enrollment Decision Chart

There are three easy steps to take part in HEM:

1. Enroll in a PEBB medical plan at pebbenroll.com between Oct. 1 and Oct. 31, 2023. (Be sure to state you plan to take part in HEM)
2. Take your Health Assessment on your current medical plan's website between Sept. 1 and Oct. 31, 2023. (Health Assessments done outside of this window will not be accepted.) If you are not currently enrolled in a PEBB medical plan, don't forget to do open enrollment during October and be sure to state you plan to take part in HEM.
3. Complete two health actions during the plan year.

Plan early to complete your Health Assessment. You may need to have your password reset. Kaiser Permanente may require 10 business days to reset your password.

HEM

	Do I have to complete my Health Assessment?		Do I have to complete my Open Enrollment?	
	YES	NO	YES	NO
Health Engagement Model (HEM)				
I am participating in the Health Engagement Model (HEM) in 2023. I am not making any changes to my enrollments for 2024.	✓		✓	
I am participating in the Health Engagement Model (HEM) in 2023. I need to make changes to my plans and/or dependents. I also said I want to be a HEM Participant.	✓		✓	
I am not enrolled in a medical plan in 2023. I want to enroll in medical. I also want to participate in HEM for 2024.		✗	✓	
I opted out of medical for an incentive in 2023. I want to enroll in a medical plan and participate in HEM for 2024.		✗	✓	
I was not able to take part in HEM in 2023 because I was a new hire and my coverage started on or after Nov. 1, 2021. I want to participate in HEM in 2024 and receive a monthly incentive of \$17.50. I know I must complete the process to keep my deductible low and receive the monthly incentive	✓		✓	
I don't currently take part in HEM. I want to participate in 2024.	✓		✓	
I don't currently take part in HEM and I don't plan to take part in 2024. I do want to make plan or dependent changes for 2024.		✗	✓	

FSA's

HC FSA \$3050 limit

DC FSA \$5000 family limit



Commuter Accounts \$300 monthly

Do I have to complete my Health Assessment?		Do I have to complete my Open Enrollment?	
YES	NO	YES	NO

Flexible Spending Accounts (FSAs)						
I want to enroll <i>FOR THE FIRST TIME</i> in a Health Care and/or Dependent Care Flexible Spending Account (FSA).						You must complete Open Enrollment between Oct. 1 and Oct. 31 to be eligible for a FSA.
<i>Follow the examples under HEM to decide if you need to do a Health Assessment.</i>						
I want to <i>RE-ENROLL</i> in a Health Care and/or Dependent Care FSA						Even if you have an FSA right now, you must re-enroll each year during Open Enrollment to renew this plan. If you don't take this action your FSA will terminate Dec. 31, 2023.
<i>Follow the examples under HEM to decide if you need to do a Health Assessment.</i>						

Surcharges


Do I have to complete my Health Assessment?		Do I have to complete my Open Enrollment?	
YES	NO	YES	NO

Surcharges					
<p>I am not changing my answers to surcharge questions in 2023 (including tobacco use and spouse/ dependent group coverage).</p> <p><i>Follow the examples under HEM to decide if you need to do a Health Assessment.</i></p>					<p>If you don't complete open enrollment certain surcharges will default. This means you may have added deductions taken from your pay. You may correct these surcharges until Dec. 31, 2023. After Jan. 1, the correction will be effective the first of the next month.</p>
<p>I have updated one of my surcharge answers. I am also making enrollment changes because of the new OE/PEBB or PEBB/PEBB medical double coverage surcharge.</p> <p><i>Follow the examples under HEM to decide if you need to do a Health Assessment.</i></p>					

Medical Opt Out

Do I have to complete my Health Assessment?		Do I have to complete my Open Enrollment?	
YES	NO	YES	NO

Medical Opt Out

<p>I opted out of medical for an incentive in 2023. I want to continue to opt out and keep everything else the same.</p> <p><i>Follow the examples under HEM to decide if you need to do a Health Assessment.</i></p>					<p>To continue to opt out of medical benefits in 2024 you must:</p> <ul style="list-style-type: none"> • Complete open enrollment between Oct. 1 and Oct. 31, 2023. • Attest that you still have other group (employer) coverage to receive the opt out incentive. <p>If you don't complete open enrollment you will remain without medical coverage and lose your monthly incentive.</p>
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Medical Opt Outs

- If Medical Opt Outs want to enroll in medical, they need to go in and complete the OE process:
 - They will have to select a medical plan during OE
 - If they want to participate in HEM, they will need to choose to participate during the Open Enrollment process
 - **The Health Assessment Access Code does not exist.**
 - Members new to a PEBB medical plan that want to participate in HEM only need to choose the participation during Open Enrollment
 - They do not need to take the Health Assessment

New to PEBB Medical Members

No Health Assessment Access Code



- This process started last year....PEBB members that are currently NOT ENROLLED in a PEBB medical plan:
 - New Hires, Opt Outs and Medical Not Enrolled
- That now WANT to participate in HEM and enroll in a PEBB medical plan
- Must do OE and during OE choose to participate in HEM
- They don't have to do a Health Assessment
- They will get the lower deductible
- They will get the monetary incentive of \$17.50/month

New Hires

Do I have to complete my Health Assessment?		Do I have to complete my Open Enrollment?	
YES	NO	YES	NO

New Hires with an October 1, 2023 Effective Date				
<p>I am a new hire with an Oct. 1, 2023 coverage effective date. I want to participate in HEM.</p> <p><i>Follow the examples under HEM to decide if you need to do a Health Assessment.</i></p>	✘		✔	<ul style="list-style-type: none"> You must enroll in benefits right away to be covered Oct. 1, 2023 – Dec. 31, 2023. You must also complete open enrollment between Oct. 1 and Oct. 31, 2023 to have coverage in 2024. When you complete open enrollment: <ul style="list-style-type: none"> Be sure to say you want to take part in HEM.
<p>I am a new hire with an Oct. 1, 2023 effective date. I want to enroll in an FSA for 2024.</p> <p><i>Follow the examples under HEM to decide if you need to do a Health Assessment.</i></p>			✔	<ul style="list-style-type: none"> You must enroll in benefits right away to be covered Oct. 1, 2023 – Dec. 31, 2023. You must also complete open enrollment between Oct. 1 and Oct. 31, 2023 to have coverage in 2024. During open enrollment you can choose to enroll in an FSA for the 2024 plan year.

New Hires

- New Hire's with a coverage effective start date of 11/1/2023 or after do not qualify for HEM
 - They get the lower deductible, but they do not get the \$17.50 incentive
 - They are eligible to participate in HEM during Open Enrollment 2024

Medical Not Enrolled

- These are folks that just didn't do their open enrollment last year; basically, they don't do anything.
- Why not?
- If you don't need medical, then you are missing out on a \$233 (based on FTE) monetary incentive each month added to your pay
- If you want medical, dental and vision (along with optionals), you must do something.....

QSCs and Ex Spouses

- These are Qualified Status Changes
- Many members notice an ex-spouse during the OE timeframe
- You should report any mid-year events within 30 days of the event
- These ex's need to come off the plan the end of the month in which the divorce was final
- If you notice you still have an ex on the plan, please let us know so we can terminate them correctly
- **NEVER** keep an ex-spouse on the plans as this may harm your employment and they aren't eligible

OE Correction Deadline

***ALL OPEN ENROLLMENT CORRECTIONS ARE DUE BY
FEBRUARY 29, 2024****

- Plan corrections
- Dependent corrections
 - HEM
 - Tobacco Surcharge
- Other Coverage Surcharge

***FSA corrections due by Friday, December 8, 2023**

Division 20, Correcting Enrollment Errors and Open Enrollment Errors

[https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrs
nRsn=249463](https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrs
nRsn=249463)

Thank You!

**For More Information, Please Contact
Linda Freeze, Benefits Manager
(503) 881-8749 (cell)
linda.freeze@oha.Oregon.gov**

2024 PEBB Enrollment Guide



2024 Open Enrollment Webinar

Thank you for your patience, the webinar will begin soon!



Closed Captioning will be available next week in our YouTube recording.

We will send a follow-up email when it's available.



Required Open Enrollment
October 1–31, 2023
www.PEBBinfo.com



2024 Open Enrollment Webinar

2024 PEBB
Enrollment
Guide



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Webinar Tips



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Webinar Tips



Around 11:20 PT a National Alert **Test** will be sent to cell phones, TVs, and radios

Please turn off or move your phones & devices



2024 PEBB Enrollment Guide

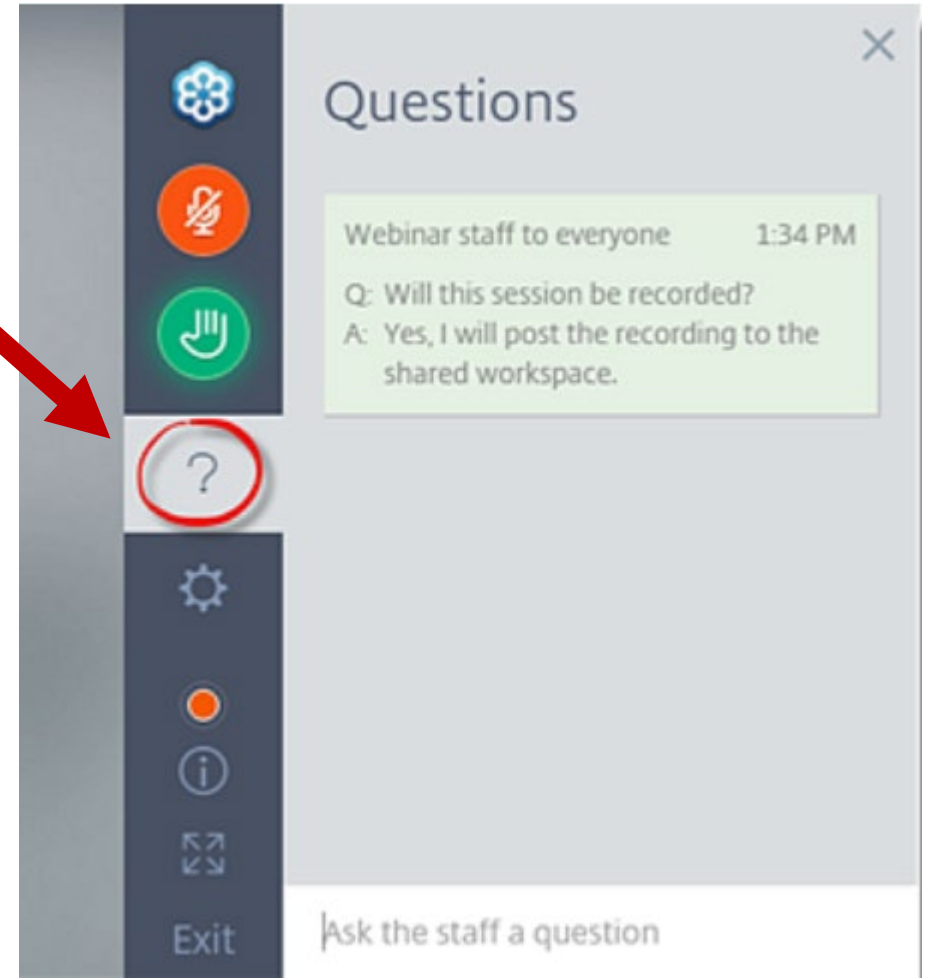


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Webinar Tips

- Type in questions anytime during the live webinar
- After the live webinar, email questions to: pebb.benefits@odhsoha.oregon.gov or call 503-373-1102
- Find the recordings, slides, and tools at **PEBBinfo.com**
- You will receive a follow-up email with the recording by Friday 10/6



Agenda

- PEBB: Overview & Highlights
- PEBB: Open Enrollment Notifications and Tools
- Moda Health & Delta Dental: Medical & Dental Plans
- Providence: Medical Plans
- Kaiser Permanente: Medical, Dental, & Vision Plans
- Willamette Dental Group: Dental Plan
- VSP: Vision Plans
- The Standard: Life/AD&D Insurance, Short- and Long-Term Disability Insurance
- Canopy: Employee Assistance Program



2024 PEBB Enrollment Guide



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PEBB Communications 2024 Plan Year

1. Open Enrollment Communications Timeline
2. PEBB's Digital Tools



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[Click Here to Enroll Now](#)

Haga clic para inscribirse ahora

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Benefit Materials

Materials are in **English** and **Spanish***

- Website text = Use the Languages tool
- Other Tools & Documents = Spanish versions available

*Spanish Enrollment Guide expected by mid-October

*Spanish Explore Your Benefits expected by mid-October

🌐 Languages

- Arabic / اللغة العربية
- Chinese (Simplified) / 简体中文
- Chinese (Traditional) / 繁體中文
- English
- Hmong / Lus Hmoob
- Korean / 한글
- Portuguese
- Russian / Русский
- Somali / Af Soomaali
- Spanish / Español
- Vietnamese / Tiếng Việt

An official website of the State of Oregon [How you know »](#)

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🌐 Languages

2024 Benefit and Enrollment Information

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Enrollment for your 2024 benefits is **REQUIRED**. Go to [PEBBenroll.com](https://pebbenroll.com) to make your elections or decline coverage **between Oct. 1 and Oct. 31, 2023**.

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[2024 Benefit Information](#)

[PEBInfo.com](https://pebbinfo.com)

Open Enrollment Communications

September

- HEM email
Sept 1.
- Mailed Summary of Benefits
Mid-Sept.
- “Sneak peek” email to members with links to:
Mid-Sept.
- **Premium estimator tool**
LIVE!
- **Virtual benefits fair**
LIVE!
- **Premium estimator tool**
LIVE!
- Dependent eligibility verification process email
Late Sept.
- **Online plan comparison tool**
LIVE!

October:

Open Enrollment Oct. 1 –31

- “OE is here” email
Oct. 2
- **Explore Your Benefits**
Live!
- **Open Enrollment webinar**
Today!
- **FSA/commuter accounts webinar**
Oct. 5 (Tomorrow!)
- Reminder emails
Each week

November/December/January

- Corrections email
Early Nov. and Dec.
- FSA mailer to homes
Early Nov.
- Understand your FSA webinar
Mid-Nov.
- FSA email
Early Dec.
- Check your paystub email
Early Jan.

PEBBinfo.com



Flexible Spending and Commuter Account Webinar

Thursday Oct. 5 @ 2:30-3:30 PT

- What are Flexible Spending Accounts?
- Health Care FSAs
- Dependent Care FSAs
- Commuter Benefit Accounts
- Important Dates



Registration Link

PEBInfo.com



Premium Estimator Tool

Estimate monthly benefit premiums

- **Determine monthly deductions** for PEBB benefits
- **Includes all PEBB benefits**, from health care plans to spending accounts
- **Includes tool tips**, explaining why information is needed, how elections impact costs, and when surcharges apply
- Can be used during **Open Enrollment** or following a qualifying status change
- Part-time employees may pay more depending on hours worked. **Contact your payroll office for a more accurate estimate.**

Complete the information in all tabs to obtain the most accurate estimated monthly deductions below.

1. Basic Info 2. Core Benefits 3. Life & Disability Benefits 4. Spending/Commuter Accounts 5. Surcharges/HEM 6. Estimated Deductions

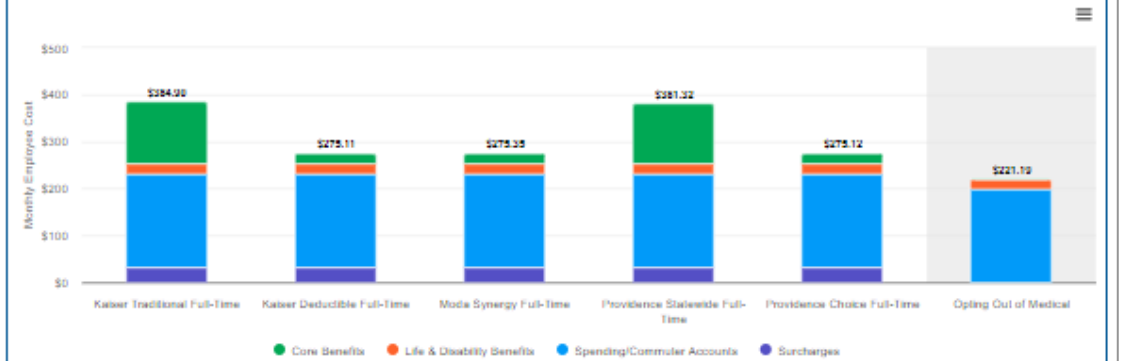
Review your total estimated premium deductions below. Estimated monthly costs are shown based on the plans in which you might enroll. Premium deductions are estimates only.

- To save a copy of this estimate, click the Print button in the top right corner. Print a hardcopy or save a PDF.
- To enroll in benefits, go to [PEBBenroll.com](https://pebbenroll.com). (You can't enroll for benefits through this premium estimator tool.)
- For questions about PEBB's benefit plans, go to [PEBBInfo.com](https://pebbinfo.com).

< Prev

- Estimated Monthly Deductions Detailed Estimate of Core Benefit Costs Filter Plans

Below is a summary of your estimated monthly premium deductions. This summary shows your estimated out-of-pocket costs. Employer costs are not included. ?



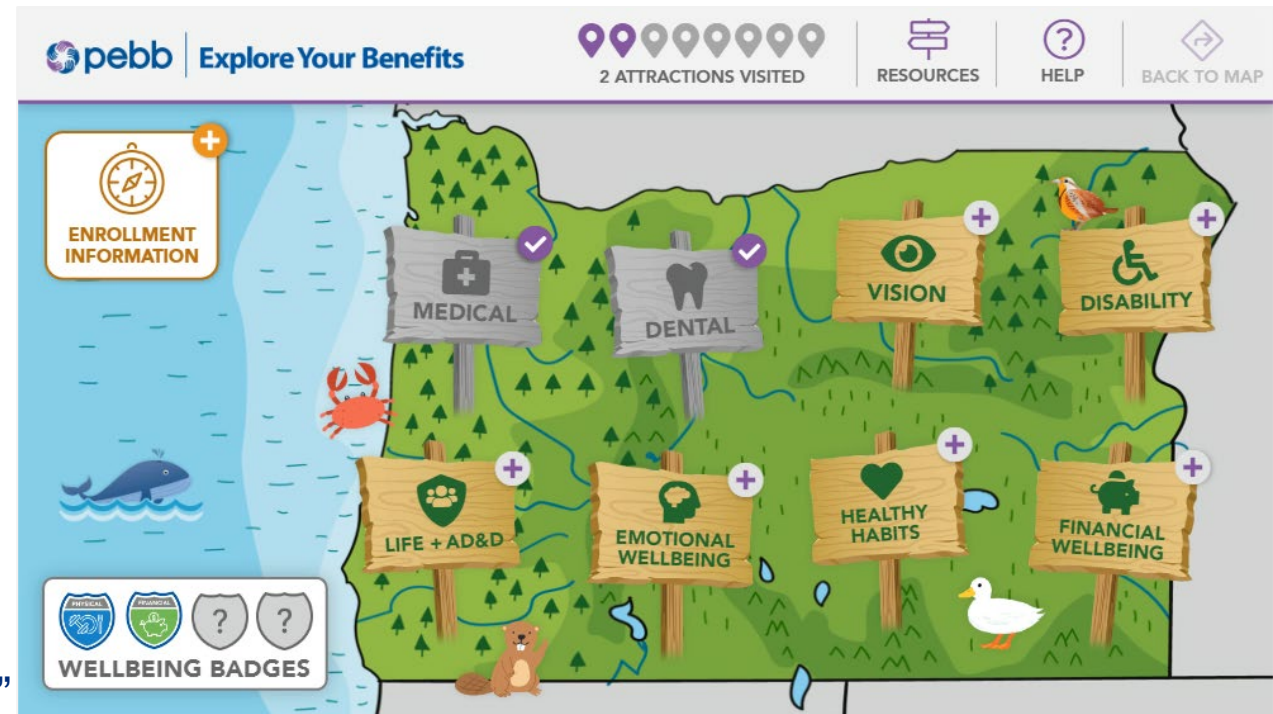
If you choose this medical plan, your estimated premiums are...

Benefit Groups	Kaiser Traditional Full-Time	Kaiser Deductible Full-Time	Moda Synergy Full-Time	Providence Statewide Full-Time	Providence Choice Full-Time	Opting Out of Medical *
+ Core Benefits	\$132.81	\$23.02	\$23.26	\$129.23	\$23.03	\$1.60
+ Life & Disability Benefits	\$21.59	\$21.59	\$21.59	\$21.59	\$21.59	\$21.59
+ Spending/Commuter Accounts	\$198.00	\$198.00	\$198.00	\$198.00	\$198.00	\$198.00
+ Surcharges/HEM/VSP Plus	\$32.50	\$32.50	\$32.50	\$32.50	\$32.50	\$0.00
TOTAL	\$384.90	\$275.11	\$275.35	\$381.32	\$275.12	\$221.19

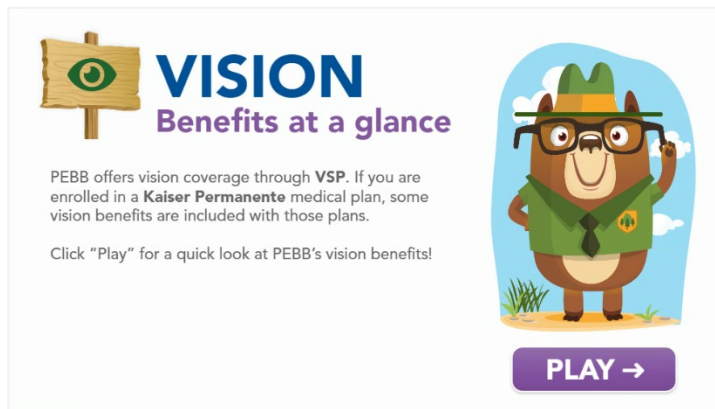
Explore Your Benefits

Interactive benefits learning tool

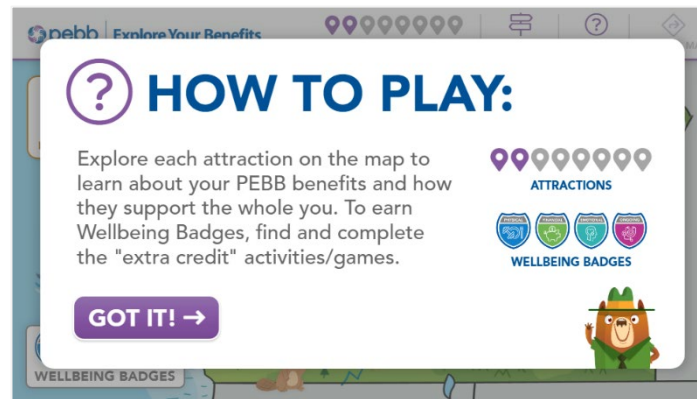
- A simulated benefits video game with entertaining modules about PEBB's benefits and wellness programs
- Fun education with mini knowledge tests
- Earn wellness badges for smart wellbeing actions



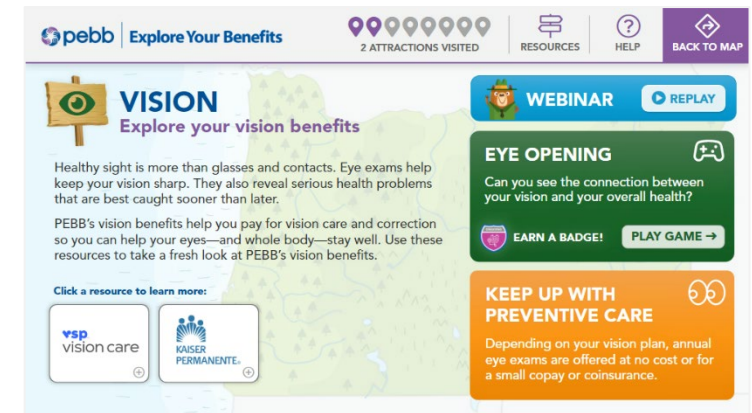
Home page "map"



Videos



Wellness badges

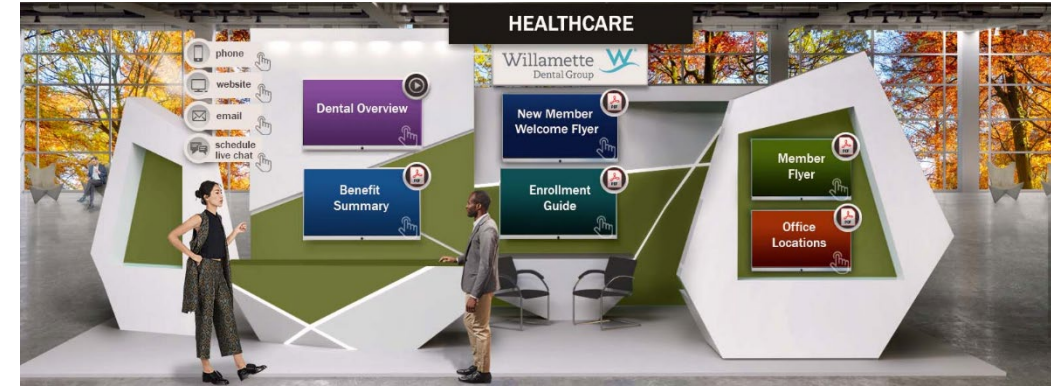


Links to videos, games, quizzes, and vendor partner spotlights

Virtual Benefits Fair

Connect members with benefits and vendor partners

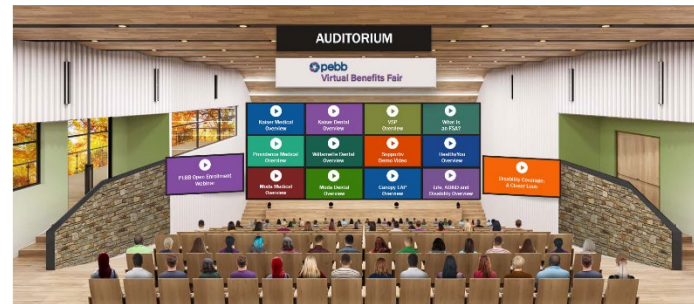
- Watch videos and download PDFs
- Explore resources available at no additional cost to PEBB members, like discounts on exercise equipment, mental health apps, legal or financial planning services, and more.
- Explore wellness, and emotional wellbeing resource centers
- Connect with vendor partners during scheduled times



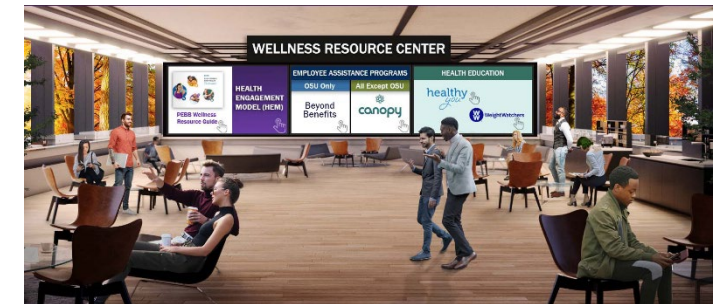
Vendor Partner Booths



Lobby



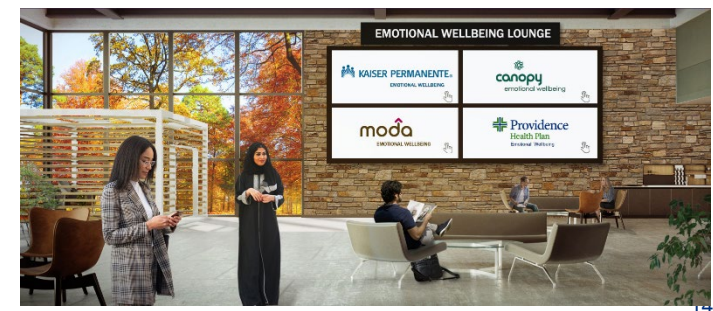
Auditorium



Wellness Central



Decision Center



Emotional Wellbeing Lounge

Summary of Benefits



Sent to your mailbox last month



See plan features for medical, dental, and vision plans



Compare plan copays, deductibles, coinsurance, and the cost of covered services.

Vendor Health Plan	Kaiser Permanente		moda		Providence		Kaiser Permanente		moda		Providence	
	Medical Deductible	Annual Out-of-Pocket	Medical Deductible	Annual Out-of-Pocket	Medical Deductible	Annual Out-of-Pocket	Medical Deductible	Annual Out-of-Pocket	Medical Deductible	Annual Out-of-Pocket	Medical Deductible	Annual Out-of-Pocket
Worksite	None	\$0	None	\$0	None	\$0	None	\$0	None	\$0	None	\$0
Standard Deductible	\$1,000/individual, \$500/family	\$1,000/individual, \$2,000/family	\$1,000/individual, \$2,000/family	\$1,000/individual, \$2,000/family	\$1,000/individual, \$2,000/family	\$1,000/individual, \$2,000/family	\$1,000/individual, \$2,000/family	\$1,000/individual, \$2,000/family	\$1,000/individual, \$2,000/family	\$1,000/individual, \$2,000/family	\$1,000/individual, \$2,000/family	\$1,000/individual, \$2,000/family

2024 PEBS dental plan summary comparison

Vendor Dental Plan	Kaiser Dental PPO		Delta Dental PPO		Willamette Dental Premier*		Kaiser Dental Premier*		Delta Dental Premier*	
	Full time and part-time	Part-time only	Full time and part-time	Part-time only	Full time and part-time	Part-time only	Full time and part-time	Part-time only	Full time and part-time	Part-time only
Worksite	Full time and part-time	Part-time only	Full time and part-time	Part-time only	Full time and part-time	Part-time only	Full time and part-time	Part-time only	Full time and part-time	Part-time only
Network	Kaiser network	Out of network	Participating providers	Participating providers	Kaiser network	Participating providers	Kaiser network	Participating providers	Kaiser network	Participating providers
Deductible individual/family	None	\$0/\$150	\$0/\$150	\$0/\$150	None	None	None	\$0	None	\$0
Annual max coverage	\$1,750	\$1,750	\$1,750	\$1,750	Not covered	\$1,250	\$1,250	\$1,250	\$1,250	\$1,250
Diagnostic and preventive services (dental and maintenance services)	\$0 copay + 20%	0%/no deductible	0%/no deductible	0%/no deductible	Covered with office visit copay for fillings, other basic services covered with office visit copay	\$0 copay + 50%	50%	\$0 copay + 50%	50%	50%
Crowns	\$0 copay + 50%	50%	50%	50%	\$250 copay	\$0 copay + 50%	50%	\$0 copay + 50%	50%	50%
Implants	\$0 copay + 50%	50%	50%	50%	\$1,000/year	Not covered	Not covered	Not covered	Not covered	Not covered
Dentures	\$0 copay + 50%	50%	50%	50%	\$200 copay	\$0 copay + 50%	50%	\$0 copay + 50%	50%	50%
Orthodontia	\$0 copay + 50%, up to \$1,500/individual	50%, up to \$1,500/individual	50%, up to \$1,500/individual	50%, up to \$1,500/individual	Not covered	Not covered	Not covered	Not covered	Not covered	Not covered

* Members can utilize any licensed providers on the Premier plans and receive in-network benefit level. However, the out-of-network providers may bill you for any amount above the max plan allowance.

† Preventive services will not accrue toward the plan max.

‡ The \$1,500 (Kaiser) and \$1,000 (Delta Dental) lifetime max coverage is separate from the \$1,750 annual max coverage.

§ Benefits payments increase by 10% each plan year provided the member has visited a Delta Dental PPO provider at least once during the plan year.

|| For implant surgery only.

¶ Benefits for implant surgery have a benefit max.

** A \$10 office visit copay applies to each office visit, except the first non-patient preventive visit for members who have not previously seen a participating provider.

2024 Summary of Benefits

pebb
Public Employer Benefit Board
1500 Summer Street NE
Salem, OR 97301-1863
www.PEBB.or.com
503-373-1102

What do I contribute to monthly premiums?
Your employer pays a large portion of the monthly premium costs for your core benefits (medical, dental, vision). Many employees only pay 1% to 5% of those monthly costs, depending on:
• your agency or employer's employer
• the plan you choose
• where you live
• your work status (full-time or part-time)
Note: Part-time employees may pay more depending on hours worked. Contact your payroll office for a more accurate estimate. Use the Premium Estimator Tool to see what you may pay each month.
<https://pebb.permanentins.com>

vision care

Member	Description	Copay	Frequency
Full vision exam	Focuses on eye exam and overall wellness	\$25	Each calendar year
Prescription glasses	• \$150 allowance for a wide selection of frames • \$170 allowance for contact lenses • 25% savings on the amount over your allowance • \$150 Member/Member's Choice frame allowance • \$50 Contact* frame allowance	Included in prescription plan	Each calendar year
Contact lenses	• Single vision, level, bifocal and dual initial lenses • Contact lenses for dependent children • Standard progressive lenses • Custom progressive lenses • Average savings of 40% on other lens enhancements	\$0 \$50, \$100, \$150	Each calendar year
Lens enhancements	• \$250 allowance for contact copy lens not apply • Contact lens exam (fitting and evaluation) • 15% savings on a contact lens exam (fitting and evaluation)	Up to \$200	Each calendar year
Contact (cost of glasses)	• \$250 allowance for ready-made non-prescription sunglasses or blue light filtering glasses instead of prescription glasses or contacts	\$25	Each calendar year
Lighten	• Fully covered evaluation, 75% off approved vision centers up to \$750 annually	25%	Every 12 months

WSP Plan Plan (includes Basic Plan coverage)

Member	Description	Copay	Frequency
Frames	• \$250 allowance for a wide selection of frames • \$245 allowance for contact lenses • 25% savings on the amount over your allowance • \$225 Member/Member's Choice frame allowance • \$25 Contact* frame allowance	Included in prescription plan	Each calendar year
Lenses	Standard progressive lenses • \$225 allowance for ready-made non-prescription sunglasses or blue light filtering glasses instead of prescription glasses or contacts	Each calendar year \$0	Each calendar year
Lighten	• Fully covered evaluation, 75% off approved vision centers up to \$750 annually	\$25	Each calendar year
Medical Screening	100% medical screening systems take portion of the results of the eye.	\$10	Each calendar year

Please note, Kaiser Permanente vision benefits are included in the medical coverage and can be found on the medical summary comparison.

2024 PEBS Summary of Benefits

Mandatory Open Enrollment October 1-31

pebb
Public Employer Benefit Board

\$4,000/individual, \$12,000/family	\$2,000/individual, \$4,000/family	\$1,000/individual, \$2,000/family	\$2,000/individual, \$4,000/family	\$0/individual, \$0/family	\$0/individual, \$0/family	\$0/individual, \$0/family	\$0/individual, \$0/family	\$0/individual, \$0/family	\$0/individual, \$0/family	\$0/individual, \$0/family	\$0/individual, \$0/family	\$0/individual, \$0/family
30%	\$30 deductible	\$30	\$40† not for ortho, deductible waived	50%	20% or less ortho, deductible waived	50%	\$40 first four visits, deductible waived	50%	\$0 deductible waived	50%	\$0 deductible waived	50%
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Online Plan Comparison Tool

Compare medical, dental, and vision plans online

- Compare plan features for medical, dental, and vision
- Compare plan copays, deductibles, coinsurance, and the cost of covered services.
- Print the plans and services you want to see

Enter the tool

Step 1: Choose the features you want to see

Step 2: Choose the plans you want to view

NEW!

Step 1

- Choose the plan features you want to compare by checking or unchecking the box next to each feature.
- To view more details for each feature, click the "plus" sign.

Once you've chosen which features to show, click "Next Step" to view and compare the plans.

Next Step

Medical

Show all plans Show all services Print **Note:** The maximum number of columns that can be printed is 18 columns. Also, be sure to choose the landscape page layout.

	<input type="checkbox"/> Kaiser Medical Plan 1 In-Network	<input type="checkbox"/> Kaiser Medical Plan 1 Out-of-Network	<input type="checkbox"/> Kaiser Medical Plan 2A In-Network	<input type="checkbox"/> Kaiser Medical Plan 2A Out-of-Network	<input type="checkbox"/> Kaiser Medical Plan 2B In-Network	<input type="checkbox"/> Kaiser Medical Plan 2B Out-of-Network	<input type="checkbox"/> Kaiser Medical Plan 3 HSA Optional In-Network	<input type="checkbox"/> Kaiser Medical Plan 3 HSA Optional Out-of-Network	<input type="checkbox"/> Moda Medical Plan 1 In-Network Coordinated Care ⁵	<input type="checkbox"/> Moda Medical Plan 1 In-Network Non-Coordinated Care ⁶
<input type="checkbox"/> Medical Network										
<input type="checkbox"/> Network	Kaiser Permanente Facilities	Kaiser Permanente Facilities	Kaiser Permanente Facilities	Kaiser Permanente Facilities	Kaiser Permanente Facilities	Kaiser Permanente Facilities	Kaiser Permanente Facilities	Kaiser Permanente Facilities	Connexus Network	Connexus Network
<input type="checkbox"/> Deductibles & Out-of-Pocket Maximums										
<input type="checkbox"/> Deductible per person	None	N/A	\$800	N/A	\$1,200	N/A	\$1,600 ²	N/A	\$400	\$500
<input type="checkbox"/> Maximum deductible per family	None	N/A	\$2,400	N/A	\$3,600	N/A	\$3,200 ²	N/A	\$1,500	\$1,500
<input type="checkbox"/> Out-of-pocket (OOP) maximum per person	\$1,500	N/A	\$4,000	N/A	\$4,500	N/A	\$6,550 ²	N/A	\$2,850 ³	\$3,250 ³
<input type="checkbox"/> Out-of-pocket (OOP) maximum per family	\$3,000	N/A	\$12,000	N/A	\$13,500	N/A	\$13,100 ²	N/A	\$9,750 ³	\$9,750 ³

Alex: the Virtual Benefits Counselor

- ALEX walks you through the process of picking your benefits
- Provides easy-to-understand explanations for any questions you might have along the way.



The screenshot shows the Alex Dental interface. At the top left is the 'alex' logo with 'Dental' next to it. At the top right is the 'pebb' logo (Public Employees' Benefit Board). Below the logo is a navigation bar with 'CC', 'MUTE', and 'SKIP' buttons. A legend indicates that blue bars represent 'Premiums' and green bars represent 'Estimated costs'. Three dental plans are listed:

Plan Name	Total Cost
★ Delta Dental PPO Full-Time and Part-Time	\$1,872.36
Willamette Dental Group Full-Time and Part-Time	\$2,001.08
Delta Dental Premier Full-Time and Part-Time	\$2,026.32

On the right side of the interface, there is a question: 'Do you want to go with this plan?' with three yellow buttons for responses: 'Yes.', 'No, I'll go with a different plan.', and 'I need more info first.'

Questions?



2024 Open Enrollment Webinar

Q&A



2024 PEBB
Enrollment
Guide



Required Open Enrollment
October 1–31, 2023
www.PEBBinfo.com





A Deeper Dive into the 2024 Moda Health and Delta Dental Open Enrollment



Plan summary overview – Synergy Network

Medical	Full-time Medical Plan	
	In-network	Out-of-network
Deductible per person	\$250	\$500
Deductible per family	\$750	\$1,500
Out-of-pocket max per person	\$1,500	\$4,000
Out-of-pocket max per family	\$4,500	\$12,000

Medical	Primary Care (PCP 360) ¹	Specialist Office Visit ²	Office visits for Chronic Conditions	Urgent Care ³	Alternative care ³	Diagnostic Labs & X-ray	Emergency Room ⁴
Full-time Plan	\$10	\$10	\$0	\$25	\$10	\$0	\$150

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

² Referrals are not required for in-network specialist care

³ Acupuncture is limited 12 visits per plan year, spinal manipulation is limited 20 visits per plan year, and massage therapy is limited a \$1,000 benefit maximum

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

Pharmacy benefits

Plan-year costs	Full-time
Deductible per person	\$50
Deductible per family	\$150
Out-of-pocket max per person	\$1,000
Out-of-pocket max per family	\$3,000

	Full-time*
Retail (30-day supply)	
Value	\$0
Generic	\$10
Preferred	\$30
Mail & Preferred Retail (90-day supply)	
Value	\$0
Generic	\$25
Preferred	\$75
Specialty (30-day supply)	
Generic	\$100
Brand	\$10

**Copays apply after the deductible has been met*



Synergy Network



Travel and out-of-area dependent network

Travel Network	Out-of-Area Dependents
<p>When traveling outside of the Synergy Network, you will have access to Moda's national network, Aetna PPO® through Aetna Signature Administrators® for urgent and emergent services.</p>	<p>Dependents who live outside of the Synergy Network service area (i.e., college student) will also use Moda's national network, Aetna PPO® through Aetna Signature Administrators®.</p> <p>Dependents living outside of the Synergy service area will use Moda's National network, Aetna PPO® network, for in-network benefits away from home, except members living in Alaska and Idaho.</p> <p>If you have a dependent who lives in Idaho, they will have access to both the Synergy network, and the First Health Network. If they live in Alaska, they will use the First Health Network.</p> <p>To ensure your dependent is using the correct network, you will need to update their address in the PEBB system.</p>

PCP 360

Use your PCP 360 for all of your primary care needs

You must choose a PCP 360 for each covered individual for all their primary care needs

Choose a PCP 360 with Moda

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

Each member of your family gets a choice

Each enrolled member can pick the same PCP 360 or a different one to receive in-network benefits for primary care services

No referrals

No referrals are required to see specialists

How to choose a Moda PCP 360



Call a Moda 360 Health Navigator
844-776-1593. You can also message one instantly
through your Member Dashboard or email them at
pebbcustomerservice@modahealth.com



Log in to your Member Dashboard

Existing medical PEBB Synergy members

If you have already selected a PCP 360, you do not have to re-select a PCP 360 unless you would like to change your PCP 360. You may change PCP 360 providers any time during the year.

Each enrolled member can choose their own PCP 360.

How to find a PCP 360

- 1 To find a PCP 360, visit modahealth.com/PEBB
- 2 Click the Find Care link on the left side of the page
- 3 Use the Search by network option to select the Synergy Network

The screenshot displays the modahealth.com/PEBB website interface. At the top, the 'moda' logo is on the left, and 'DELTA DENTAL' and 'moda HEALTH' logos are on the right. A navigation bar includes 'Oregon', 'About Moda', 'Community', 'Contact us', and a search bar. A left sidebar menu lists various services, with 'Find Care' (Find a doctor, dentist, pharmacy or clinic) circled in yellow and labeled with a '2'. The main content area features a banner for 'Experience better care that revolves around you' powered by moda 360, followed by a section for PEBB (Public Employees' Benefit Board). Below this, there are two search options: 'Search as a member' and 'Search by network'. The 'Search by network' section is circled in yellow and labeled with a '3', showing a dropdown menu with 'Synergy' selected and a 'Search by network' button. A 'moda' app icon is also visible in the bottom right of the search area.

How to find a PCP 360

- 4 Then, click PCP 360 from the 'Type' drop-down menu and look for a PCP 360
- 5 You will know a provider is a PCP 360 if you see the "360" graphic under their phone number

moda | Find Care

Search for a provider

Welcome, guest | Search as a member

Type of search
Medical

Network
Connexus

Name of provider
Enter doctor name

Type
PCP 360

Specialty
- Any specialty -

- Any type -
Alternative Care Provider
Behavioral Health EOCCO
Core Providers & Doctors
Chemical Depend Facility
Chemical Dependency
Clinics & Medical Groups
Dentist for Medical Plan
Facilities & Hospitals
Hospice & Home Care
Lactation Counselor
Medical Home Clinics & Medical Groups
Medical Home Providers & Doctors
Mental Health
Mental Health Facility
PCP 360
PCP on Moda Select
PCP on Synergy
Supplies & Services
Transportation
Vision

Search

4

McKnight, Nicole L. Primary Care Provider

1 Distance: 1.3 mi
9047 SE Foster Rd
Portland, OR 97266
503-772-8751

360

5

New programs and enhancements (effective 1/1/2024)

NEW

- Moda is adding the Virta program
 - Virta is a provider-led treatment that can help reverse type 2 diabetes.
 - The program provides:
 - Continuous remote medical care
 - Nutritional therapy
 - Assistance in lowering blood sugar
 - Helps with reducing medications
 - Help members with weight loss
 - Eligible members will receive an invite for the program and at no cost to them.

NEW

- Medical and Rx fertility benefits
 - There is currently a combined \$35k annual benefit maximum for medical and pharmacy fertility expenses.
 - Effective 1/1/24, there will now be a \$25K annual benefit maximum for medical expenses and no annual benefit maximum for pharmacy expense

New programs and enhancements (effective 1/1/2024)



NEW

- Copay Max Plus is an industry-leading copay program that allows you to utilize the full benefit of manufacturer assistance to offset your costs at the point-of-sale.
 - It looks for manufacturer assistance and applies it at the point-of-sale, if available.
 - Assistance will no longer accrue toward the pharmacy deductible and the medical maximum cost share.
 - Applies to more than 450 drugs



NEW

- Health assessment (Effective 9/1)
 - Moda has partnered with a new vendor to offer this year's health assessment, which you can access through your [Member Dashboard](#) account. For instructions how to register, please visit our website: https://www.modahealth.com/pebb/health_assessment.shtml

New programs and enhancements (effective 1/1/2024)



spring health

- Moda has partnered with **Spring Health** to give you access to behavioral health telehealth services through your phone, tablet, or computer. Services include:
 - Mental health therapy
 - Psychiatry
 - Care navigation
 - Digital cognitive behavioral therapy
- Call a Moda 360 Health Navigator at 844-776-1593.
- You can access Spring Health through your Member Dashboard modahealth.com/memberdashboard.

Find the right care for YOU!

Spring Health's diverse network helps us connect you with exactly the right provider for you.

- 30+ languages spoken
- Therapists that focus on the LGBTQIA+ community
- 18+ specialty and focus areas
- BIPOC therapists and prescribers
- Providers available for after-hour appointments



moda 




moda
HEALTH



- With Moda 360, you can:
 - Live chat with a Health Navigator
 - Find specialized program matches
 - Timely personalized care reminders
 - And so much more, which is easily accessible through your Member Dashboard.



Moda 360 – Health Navigators



- Moda 360 Health Navigators can help you with:
 - 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



Member Dashboard



New Member Dashboard launched in January 2023

Enhanced, easy to use layout

Personalized to each member


Moda 360 programs



Care Reminders Moda 360 programs

Moda 360 programs

Healthcare can be complicated. That's why we created Moda 360 - personalized programs to help you on your health journey.



- [Comprehensive Coordinated Care \(C3\)](#)
Your PCP 360 visits and in-network mental health visits are covered when you enroll. >
- [Text a doctor with CirrusMD](#)
Never be without a doctor. Text a medical doctor about non-emergency health concerns 24/7. >
- [Case management](#)
Navigate the healthcare system with our registered nurses or licensed clinical social workers. >

Additional resources

[View all programs](#) >

Moda 360 programs



Benefit

Medical Dental Pharmacy **Programs** Resources

Moda 360 Programs

Filters

Program Status
Eligible ▼

Category
Medical: Virtual Care ▼

Apply

Clear filters

Text a doctor with CirrusMD >

Never be without a doctor. Text a medical doctor about non-emergency health concerns 24/7.

Virtual visits with OHSU >

Get care from home. See a licensed OHSU doctor from your computer or mobile device.

Moda 360 programs



Mental health support with Spring Health

Through our partnership with Spring Health, we make sure you and your covered family members have the mental health care and support you need and deserve. With Spring Health, you can access a range of telehealth services, including mental health therapy, psychiatry, care navigation and digital cognitive behavioral therapy, from your phone, tablet or computer. A diverse network of passionate therapist and physicians are ready to help you feel your very best.

[Learn more and enroll](#)

Call health navigator: 866-923-0409

CirrusMD



- The CirrusMD app connects you with a doctor via text, 24/7, with no cost sharing
- 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 also prescribe medications
- Access CirrusMD through your Member Dashboard at modahealth.com/memberdashboard or the CirrusMD website at cirrusmd.com/modahealth



sword



A digital physical therapy program designed to provide treatment for all musculoskeletal issues at no cost to you.



1 Your dedicated physical therapist designs an exercise program just for you.



2 Sword will ship you a tablet + motion sensors to guide you and provide real-time feedback.



3 Complete your exercise sessions at home when it is convenient for you.



4 Your physical therapist is there to support you virtually and is available at any time.



To learn more, log into your Member Dashboard at modahealth.com/memberdashboard or visit the Sword website at <https://enroll.swordhealth.com/pebb>



Call the Sword team at **888-492-1860** or email them at help@swordhealth.com

Equip

- Equip offers fully virtual eating disorders treatment for patients ages 6-24.
- Each patient has a dedicated interdisciplinary 5-person care team including a peer mentor, family mentor, physician therapist, and dietitian.

PEBB Open Enrollment

Eating disorder treatment that works

Delivered at home



We take insurance

“ I saw natural joy in my child for the first time in a long while. ”
— Father of 11-year-old girl with anorexia

Now accepting patients ages 6-24

How it works

Family-Based Treatment
The leading evidence-based treatment for eating disorders

5-person care team
Therapist, dietitian, medical provider, peer mentor, and family mentor

Virtual by design
Fully virtual treatment from wherever is convenient for your family

Diverse provider teams
Individuals in the LGBTQ+, BIPOC, bilingual, and disability communities

Build a life worth living
Care that empowers your family to continue everyday activities and be invested in life

Equip leads to lasting recovery

74% of patients report improvements with depression or anxiety*
7 of 10 patients report a decrease in eating disorder behaviors*
3 in 4 families feel more confident in caring for their child*

*By the 8th week of treatment



Scan the QR code or visit equip.health/parents to learn more!

info@equip.health

NOCD

- In-network mental health providers that offers virtual mental health outpatient therapy for OCD.
- NOCD specialize in exposure and response therapy
- To schedule an appointment



OCD isn't what you think

OCD is a severe and misunderstood chronic condition that affects **1 in 40 people.**



Howie Mandel
NOCD Partner



OCD ISN'T

- A fun and helpful personality quirk
- A flippant way to describe being a "neat freak" or a "germophobe"
- Being overly interested in or devoted to a particular subject
- Something that should be joked about in the media
- Managed by standard CBT therapy



OCD IS

- Ranked as the 10th leading cause of disability by the World Health Org.
- Recurrering fears that often have violent, sexual, contamination, religious and relationship themes
- An internal war to disprove thoughts, images, and urges with 100% certainty
- Managed effectively by **Exposure and Response Prevention (ERP)** Therapy

Cyti Psychological

- Telehealth benefit that delivers high-quality individual, family, and couples counseling on PEBB members' terms.
- Cyti therapists are licensed and accredited, and available 24/7.
- Available to Moda members who reside in Oregon only



As a Moda Health member, you can now access
SCIENCE-BASED, SOLUTION-ORIENTED THERAPY
For anyone, anytime, anywhere. No matter what
you are going through, **You Are Not Alone.**

Getting started is easy! Just call **1-866-478-3978**

or scan our QR code



for **cyticlinics.com**

Benefits include

- Same day HIPAA compliant telehealth sessions
- Customized online scheduling & billing for Moda patients
- Customized treatment plans, follow-up, and scheduling reminders
- A vast array of therapeutic modalities
- Research-driven, full length therapy sessions
- Live web chat and phone support 24/7
- Continuity of care with culturally sensitive, competent clinicians
- Personalized experiences, human to human connection
- Diverse leadership and therapists
- LGBTQ+ friendly and experienced
- No call center mentality, our focus is empathy and care

🌐 cyticlinics.com | 1-866-478-3978



Specialty Clinics & Community Initiatives

- DBT Clinic
- EMDR Clinic
- Couples Clinic
- Eating Disorders
- Trauma-Focused
- Family/Parenting: Ages 5 - 12
- Family/Parenting: Ages 13 - 18
- Gender Care
- Pain Management
- Service Member Family Support
- Native American & Alaskan Native Support



Delta Dental plans





Delta Dental plan changes

- There are **NO** changes to the coinsurances and deductibles to the existing plan designs. We will continue to offer the Delta Dental Premier and the Delta Dental PPO.
- PEBB members have the **Preventive First program**. This means preventive services do not accrue towards the annual benefit maximum, leaving additional dollars to use for basic and major services.

Dental plan options

Plan options	Full-time Delta Dental PPO		Full-time Delta Dental Premier
	In-network	Out-of-network	In-network
Deductible	\$50		\$50
Benefit maximum	\$1,750		\$1,750
In-network, members pay			
Preventive¹/ diagnostic services	0% ²	10%	0% ²
Basic services	20% - 0%	30%	20%
Major services	50%	50%	50%
Occlusal guards³ <i>(night guards* and athletic mouth guards)</i>	0%	0%	0%
Nitrous oxide	50%	50%	50%
Orthodontic – <i>(Lifetime maximum - \$1,800)</i>	50%	50%	50%

¹ Preventive services will not accrue toward the plan maximum.

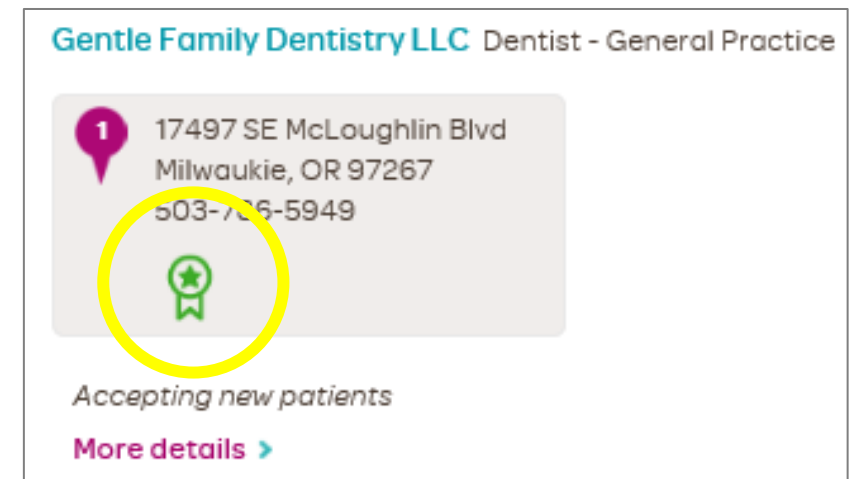
² Deductible waived.

³ \$150 maximum, once every 5 years.

Health through Oral Wellness[®] (HtOW)

- All PEBB 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
- For more details about the program, visit deltadentalor.com/oralwellness/members

To see which providers are actively participating in the Health through Oral Wellness program, look for a green badge shown in Find Care.



Health Equity/Provider Diversity

Provider diversity – FindCare

The following fields available to display in our online provider directory:

- Race
- Ethnicity
- Gender Identity
- Preferred Pronouns
- Ages Serviced
- Professional Expertise
- Cultural Competency Training Completed
- ADA Accessibility
- Materials available in other formats
- Bi-lingual Staff Available




Member data


PEBB Open Enrollment

Profile Case Status Outreach **Health Context** Plans Programs Care Reminders Visits & Prior Auth PCP External Links

Model **REALD** SOGI AHC

Status: **Complete** Completion date: 08/01/2022 Completed By: Don Maag



Race, Ethnicity, Language, and Disability (REALD) 

These questions are optional and your answers are confidential. We would like you to tell us your race, ethnicity, language and ability levels so that we can find and address health and service differences.

Race and Ethnicity

1. How do you identify your race, ethnicity, tribal affiliation, country of origin, or ancestry?
American

2. Which of the following describes your **racial or ethnic identity**? Please check **ALL** that apply.

Hispanic and Latino/a/x

Native Hawaiian and Pacific Islander

White

Other White

American Indian and Alaska Native

Black and African American

Middle Eastern/North African

Asian


3. If you checked more than one category above, is there one you think of as your primary racial or ethnic identity?
Yes

[Edit](#)
[Mark as Complete](#)
[Member Declined](#)

Profile Case Status Outreach **Health Context** Plans Programs Care Reminders Visits & Prior Auth PCP External Links

Model REALD **SOGI** AHC

Status: **Complete** Completion date: 07/18/2022 Completed By: Lydia Witty

EQUITY AND INCLUSION DIVISION
Sexual Orientation and Gender Identity (SOGI) 

A. LOGISTICAL QUESTIONS

Logistical questions are not demographical in nature, but help to ensure respectful communications and data-matching/verifications that might occur in systems involving insurance and eligibility for services.

- What first and last name do you want to use?**
Jane (This is my legal name)
- Are there any other names we should know about, such as on your insurance card?**
No, please use the name above
- What pronouns do you use?**
They/Them
She/Her
- What title do you use?**
Ms

[Edit](#)
[Mark as Complete](#)
[Member Declined](#)

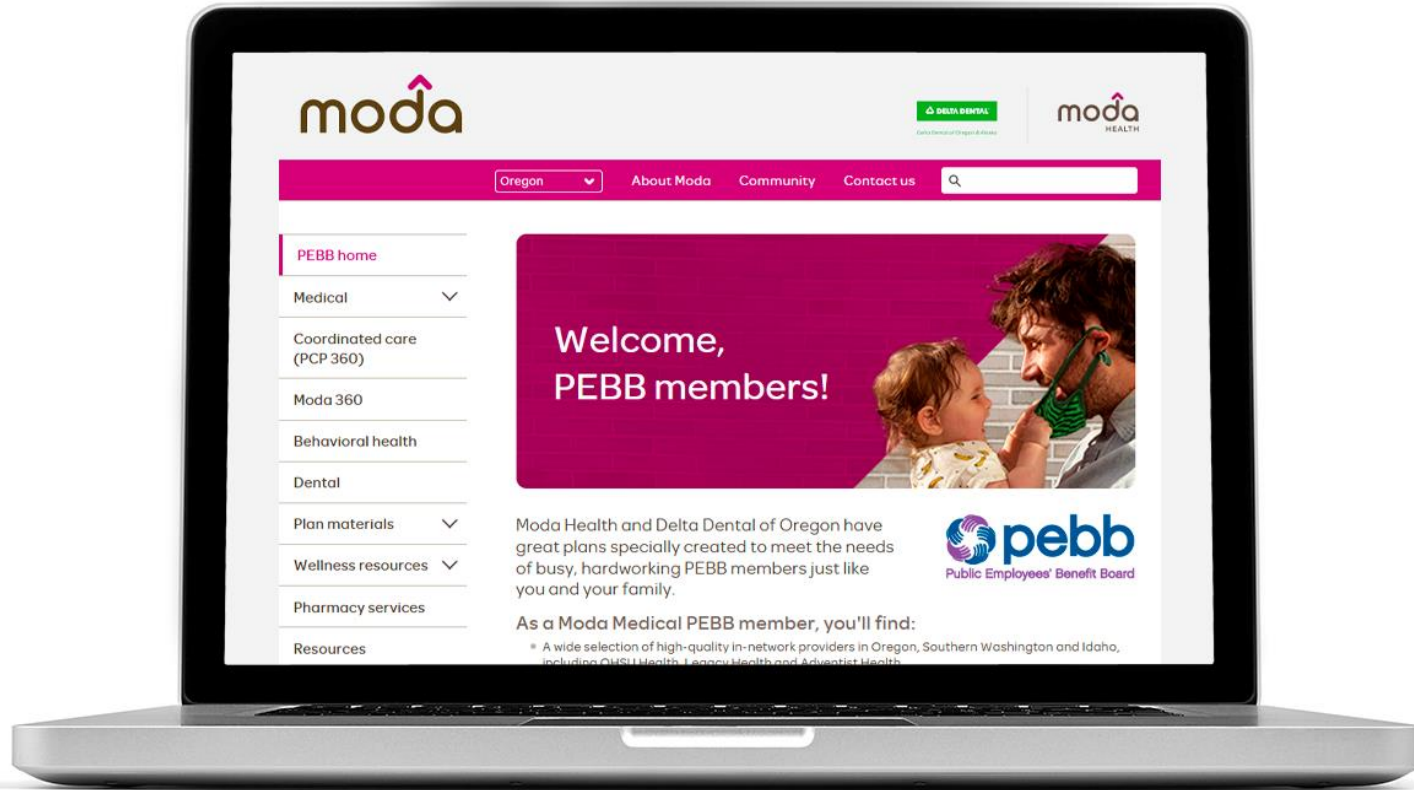
Member Information				Health Information			
Age	Gender	Mailing Address	Preferred Contact Method	Phone	Phone Number Type	Chronic Conditions	Medical History
24 Yr	F	4035 SE Harrison St, Milwaukie OR 97222	-	503-705-7259	-	Anxiety, Depression	-
REALD/SOGI/SDoH Overview							
REALD							
Race	Ethnicity	Preferred Language	Disability				
Mexican, Test	Hispanic and Latino/a/x Asian	French	Down Syndrome				
SOGI							
Preferred Pronouns	Preferred Name	Gender Identity	Sexual Orientation				
She/Her	Jane Doe	Female	Straight				
SDoH							
Employment Status	County	Primary Method of Transit	Alc./Drug Indicator				
Employed	Clackamas	-	-				



Member Resources

PEBB dedicated website

PEBB Open Enrollment



modahealth.com/pebb

Health Navigators



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



Medical/Vision
844-776-1593



Pharmacy
844-776-1594



Dental with Moda Medical
833-681-2117
Dental Only
844-827-7100

Or email Moda Health at
PEBBquestions@modahealth.com.

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

Thank you



Delta Dental is a trademark of Delta Dental Plans Association



Welcome to Providence Health Plan's presentation on your benefits

Available January 1st, 2024

What's new for 2024

No changes to deductibles, copays, and coinsurance

Medical Plan Updates

- Choice Plan
 - Referral **no longer required** to see a specialist
- Statewide Plan
 - Massage Therapy benefit added. 15% coinsurance after deductible. \$1,000 annual benefit

Providence Updates

- Increasing Behavioral Health Virtual Solutions - Focused on broad access and additional specialty support.
 - Talkspace: telehealth provider of virtual psychotherapy for adults and teens 13+, and available through text, voice, or video options.
 - Equip: virtual, eating disorder treatment for kids and young adults ages 6-24 using Family Based Treatment (FBT).
 - Charlie Health: Intensive Outpatient Program (IOP) delivered virtually and available 24/7 for teens and young adults ages 11-30

Advancing health equity for all

Our vision, Health for a Better World, is driven by a belief that health is a human right. Every person deserves the chance to live their healthiest life.

At Providence, we recognize that long-standing inequities and systemic injustices exist in the world. This has led to health disparities among communities that have been marginalized because of their race, ethnicity, gender, sexual orientation, age, ability, religion or socioeconomic status.

Each year, we serve more than 6 million people of every walk of life. We value each member of our diverse communities for their identities, journeys and experiences. We promise to strengthen the diverse communities we serve, inclusive of those who identify as LGBTQIA+. Our commitment is to welcome all and treat one another with respect and dignity.



Your Providence health plan options

OPTION 1: PEBB Providence Statewide

	In-Network	Out-of-Network
Deductible	\$0,000	\$0,000
Out-of-Pocket Max	\$0,000	\$0,000

- Pay more for flexibility
- OHSU and Adventist in-network
- No referrals required
- Self-directed care
- Massage therapy covered

OPTION 2: PEBB Providence Choice

	In-Network	Out-of-Network
Deductible	\$0,000	\$0,000
Out-of-Pocket Max	\$0,000	\$0,000

- Pay less for predictability
- Medical home care team
- No referrals required
- Low copayments
- Massage therapy covered

Providence Choice

As a Providence Choice member, you will be required to choose a medical home. Before you receive health care services and schedule an appointment:

- Communicate your selection to Providence via one of the following options:
 - myProvidence account
 - Choose “Medical Home Selection” under the “My Providers” drop down in the top navigation bar.
 - Review your options, then click on the “set As A Medical Home Clinic” button.
 - Customer service
 - We’re here to help! (503) 574-7500 or 800 878-4445 (TTY: 711) from 8AM to 5PM (Pacific Time), Monday through Friday.

PEBB Providence Choice

The screenshot displays the member portal interface for the Providence Health Plan. It includes the Providence Health Plan logo, the website myProvidence.com, and the PEBB logo. The member's name is redacted with a grey box. The ID number is 01234567890 and the group number is 012345. The plan details table shows a deductible of \$0,000 for both in-network and out-of-network, and an out-of-pocket maximum of \$0,000 for both. The Rx BIN is 123456 and the Rx PCN is 01234567. The Rx Assistance for Pharmacists is 888-445-5518. The plan name is Providence Choice Plan - Option Adv/Signature.

	In-Network	Out-of-Network
Deductible	\$0,000	\$0,000
Out-of-Pocket Max	\$0,000	\$0,000

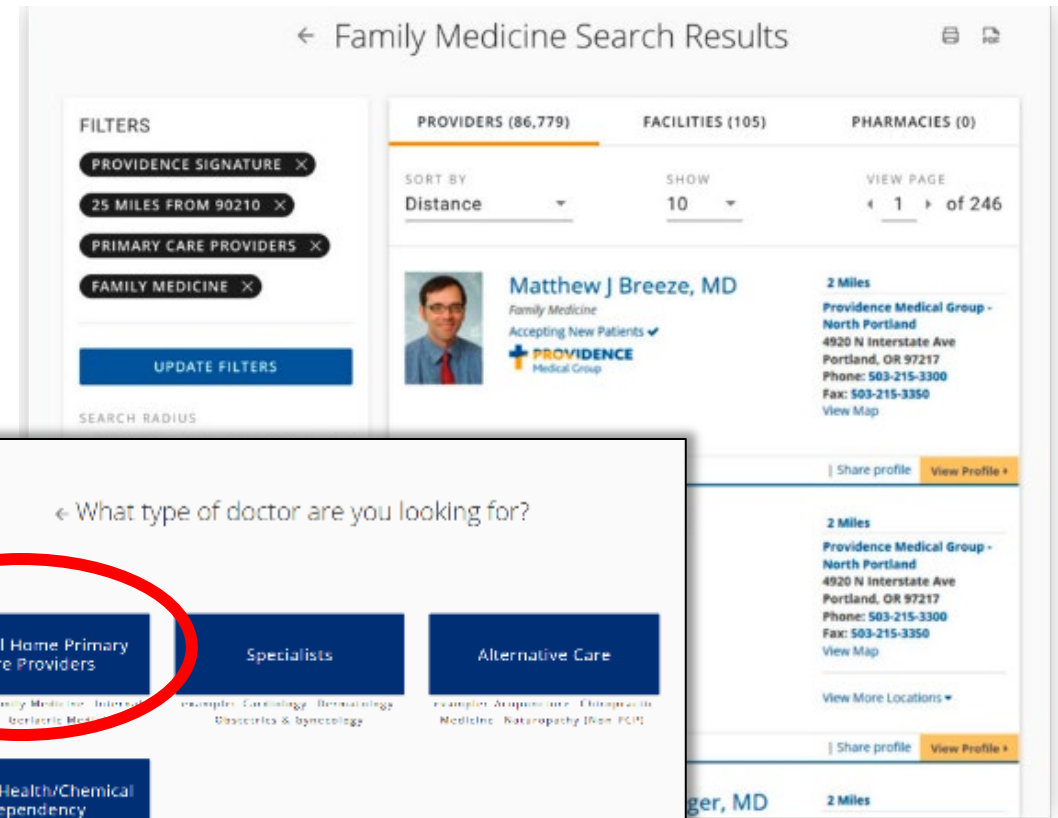
Rx BIN # 123456 Rx Assistance for Pharmacists 888-445-5518

Rx PCN # 01234567

Providence Choice Plan - Option Adv/Signature

Navigating the Providence directory

- 1 Visit** providencehealthplan.com/findaprovider
- 2 Search** by member ID or plan type and network
- 3 Tailor** your search by provider, place, name, keyword or location
- 4 Customize** results based on preferences — specialty, location, gender, language



2024 Medical and Prescription Plan Overview

Cost share overview – no changes in 2024!

Benefit summaries may be found online at: www.providencehealthplan.com/pebb

PEBB STATEWIDE PPO					
Calendar year deductible		Cost Share (after deductible, if applicable)		Calendar year Out-of-pocket maximum	
In-Network	Out-of-network	In-network	Out-of-network	In-Network	Out-of-network
\$250 / person \$750 / family	\$500 / person \$1,500 / family	15%	30%	\$1,900 / person \$5,700 / family	\$4,800 / person \$14,400 / family

Any portion of the medical deductible met in the 4th quarter of the year applies to the next year's deductible

PROVIDENCE CHOICE					
Calendar year deductible		Cost Share (after deductible, if applicable)		Calendar year Out-of-pocket maximum	
Medical Home	Out-of-Medical Home	Medical Home	Out-of-Medical Home	Medical Home	Out-of-Medical Home
\$250 / person \$750 / family	\$500 / person \$1,500 / family	\$10 per visit	30%	\$1,500 / person \$4,500 / family	\$4,000 / person \$12,000 / family

Prescription drug coverage

- Prescription drug benefits do not apply to medical deductible or medical out-of-pocket maximum
- PEBB's Value Formulary includes a list of medications that are covered in full

Drug Coverage Category	Copay or Coinsurance				
	All participating & preferred retail pharmacies (up to a 30-day supply)	All mail order & preferred retail pharmacies (up to a 90-day supply of maintenance prescriptions)	All participating specialty pharmacies (up to a 30-day supply of specialty drugs)	Calendar year deductible	Calendar year out-of-pocket maximum
Value Drug	Covered in full	Covered in full	Does not apply	Does not apply	\$1,000 per person \$3,000 per family (3 or more)
Generic drug	\$10	\$25	\$100	\$50 per person \$150 per family (3 or more)	
Brand name drug	\$30	\$75	\$100	\$150 per family (3 or more)	



PEBB's prescription drug lists (formularies) are available online: www.ProvidenceHealthPlan.com/PEBB

Get the right care at the right time in the right place



ProvRN Free

- Connect with a registered nurse 24/7
- Easy first step when you have symptoms and want to know if you need face-to-face care



ExpressCare Virtual Free

- Talk with a provider from anywhere using your tablet, smartphone, or computer
- Available nationwide



ExpressCare Clinics Free

- Same-day, in-person treatment
- With many convenient locations (some in your local Walgreens), it's easy to find a clinic near you



Primary Care \$

- Your primary healthcare partner for check-ups, managing chronic conditions, and specialist referrals
- Appointment required



Urgent Care \$\$

- When you need help right away and can't wait for an appointment
- Hours vary by location



Emergency \$\$\$

- When you think you may be in danger
- Available 24/7

If you ever think your life or well-being could be in serious danger, call 911 immediately.

Express care virtual visits

- **See a provider in minutes, from anywhere**
 - Live video visits from your smartphone, tablet or computer
 - No appointment necessary
 - Board-certified providers treat many common conditions such as cough, cold/flu, sinus/ear/eye infections, etc.
- **Extended hours**
 - 8am to 8pm in OR, WA, MT, AK, CA and 24/7 nationwide through our network partner
- **No Cost Option for Care**
 - Free for PEBB members
 - Visit information is shared with PCP for care continuity support



Providence Behavioral Health

We're here for you when you need us.

- Enhanced behavioral health and substance use services to simplify the way you get whole self-care
- 24/7 access to a crisis-trained behavioral health and substance use service support team

Help is available 24 hours per day, 7 days per week:
Call us **503-574-7500** or **800-878-4445**

Find your behavioral health providers
Visit providencehealthplan.com/findaprovider



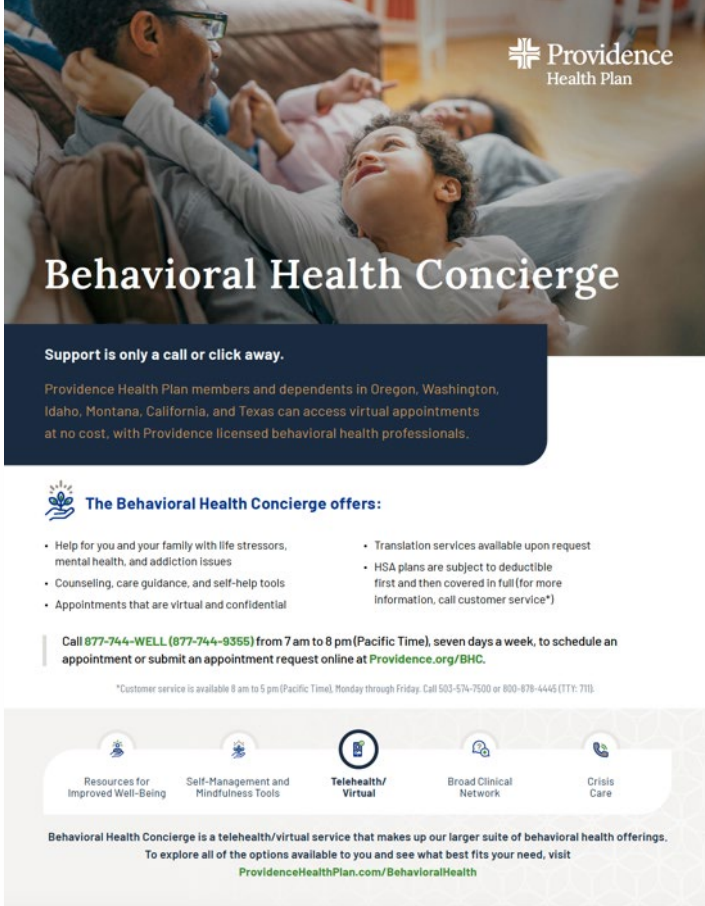
Behavioral Health Concierge

Virtual behavioral health visits *at no cost to PEBB members*

- Schedule same-day or next-day access to virtual counseling
- Access appointments with a licensed counselor from 7AM to 8PM (Pacific Time)
- Available for all PEBB members in Oregon, Washington, Idaho, Montana, California, and Texas

Call: 877-744-9355

Learn more about behavioral health concierge
ProvidenceHealthPlan.com/BehavioralHealth



The graphic features a background image of a family (a man, a woman, and a child) sitting together. The Providence Health Plan logo is in the top right corner. The title 'Behavioral Health Concierge' is prominently displayed. Below the title, a dark blue box contains the text: 'Support is only a call or click away. Providence Health Plan members and dependents in Oregon, Washington, Idaho, Montana, California, and Texas can access virtual appointments at no cost, with Providence licensed behavioral health professionals.' A section titled 'The Behavioral Health Concierge offers:' lists services such as help with stressors, counseling, and translation services. It also provides contact information: 'Call 877-744-WELL (877-744-9355) from 7 am to 8 pm (Pacific Time), seven days a week, to schedule an appointment or submit an appointment request online at Providence.org/BHC.' A small note at the bottom states: '*Customer service is available 8 am to 5 pm (Pacific Time), Monday through Friday. Call 503-574-7500 or 800-878-4445 (TTY: 711).' At the bottom, five icons represent different services: Resources for Improved Well-Being, Self-Management and Mindfulness Tools, Telehealth/Virtual (highlighted), Broad Clinical Network, and Crisis Care. A final paragraph states: 'Behavioral Health Concierge is a telehealth/virtual service that makes up our larger suite of behavioral health offerings. To explore all of the options available to you and see what best fits your need, visit ProvidenceHealthPlan.com/BehavioralHealth'

Providence Health Plan

Behavioral Health Concierge

Support is only a call or click away.

Providence Health Plan members and dependents in Oregon, Washington, Idaho, Montana, California, and Texas can access virtual appointments at no cost, with Providence licensed behavioral health professionals.

The Behavioral Health Concierge offers:

- Help for you and your family with life stressors, mental health, and addiction issues
- Counseling, care guidance, and self-help tools
- Appointments that are virtual and confidential
- Translation services available upon request
- HSA plans are subject to deductible first and then covered in full (for more information, call customer service*)

Call 877-744-WELL (877-744-9355) from 7 am to 8 pm (Pacific Time), seven days a week, to schedule an appointment or submit an appointment request online at Providence.org/BHC.

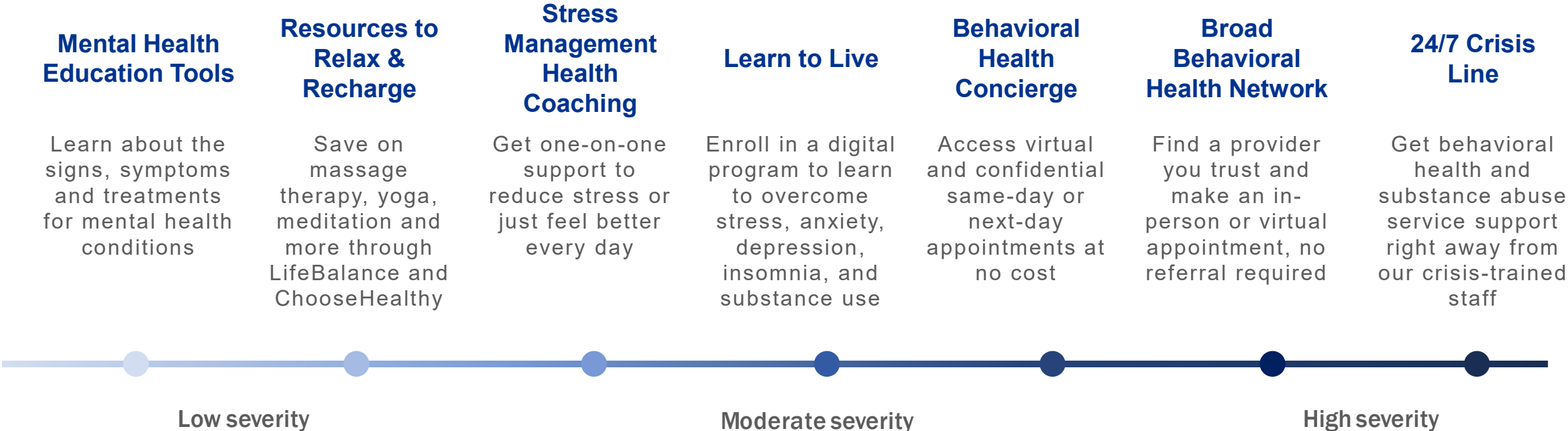
*Customer service is available 8 am to 5 pm (Pacific Time), Monday through Friday. Call 503-574-7500 or 800-878-4445 (TTY: 711).

Resources for Improved Well-Being | Self-Management and Mindfulness Tools | **Telehealth/Virtual** | Broad Clinical Network | Crisis Care

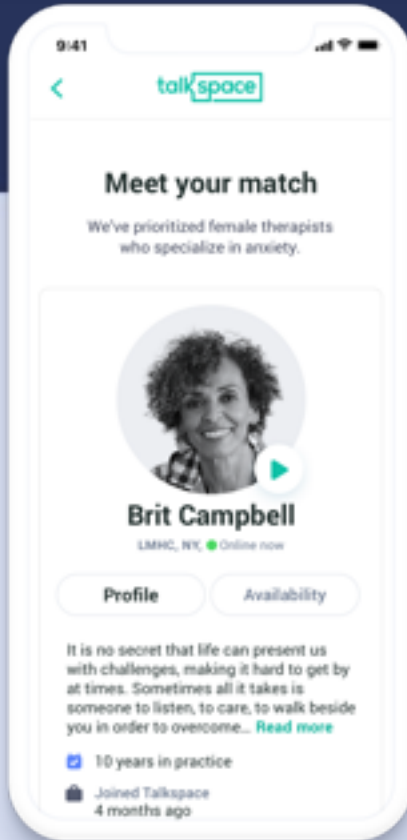
Behavioral Health Concierge is a telehealth/virtual service that makes up our larger suite of behavioral health offerings. To explore all of the options available to you and see what best fits your need, visit ProvidenceHealthPlan.com/BehavioralHealth

Member well-being resources

At Providence, we value whole self-care for all members. We offer resources across the behavioral health continuum, so members and their families can get the care they need.

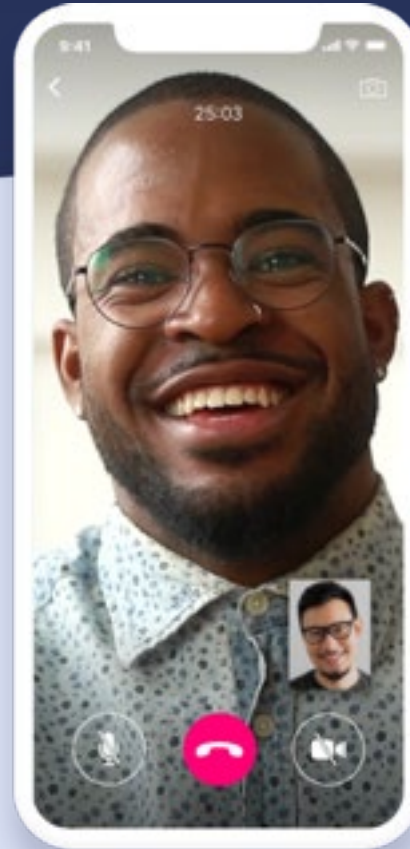


Talkspace is the leading virtual behavioral health care provider for mild to moderate needs



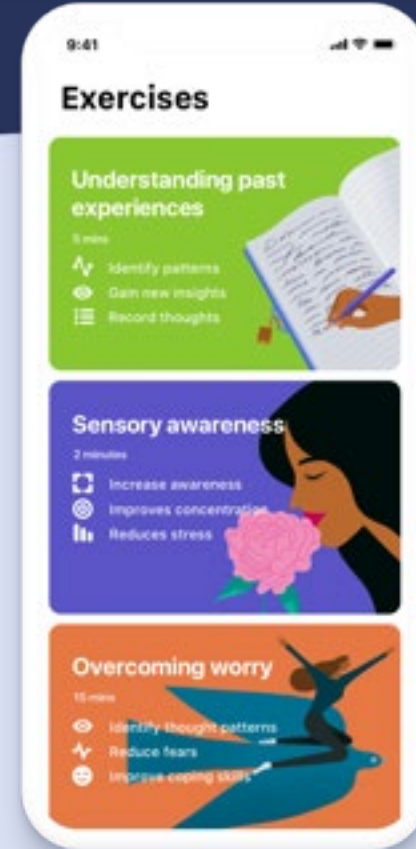
Therapy

Dedicated behavioral health and emotional well-being support from a licensed clinician



Psychiatry

Evaluation, prescription, and medication management from a licensed prescriber



Self-Help Tools

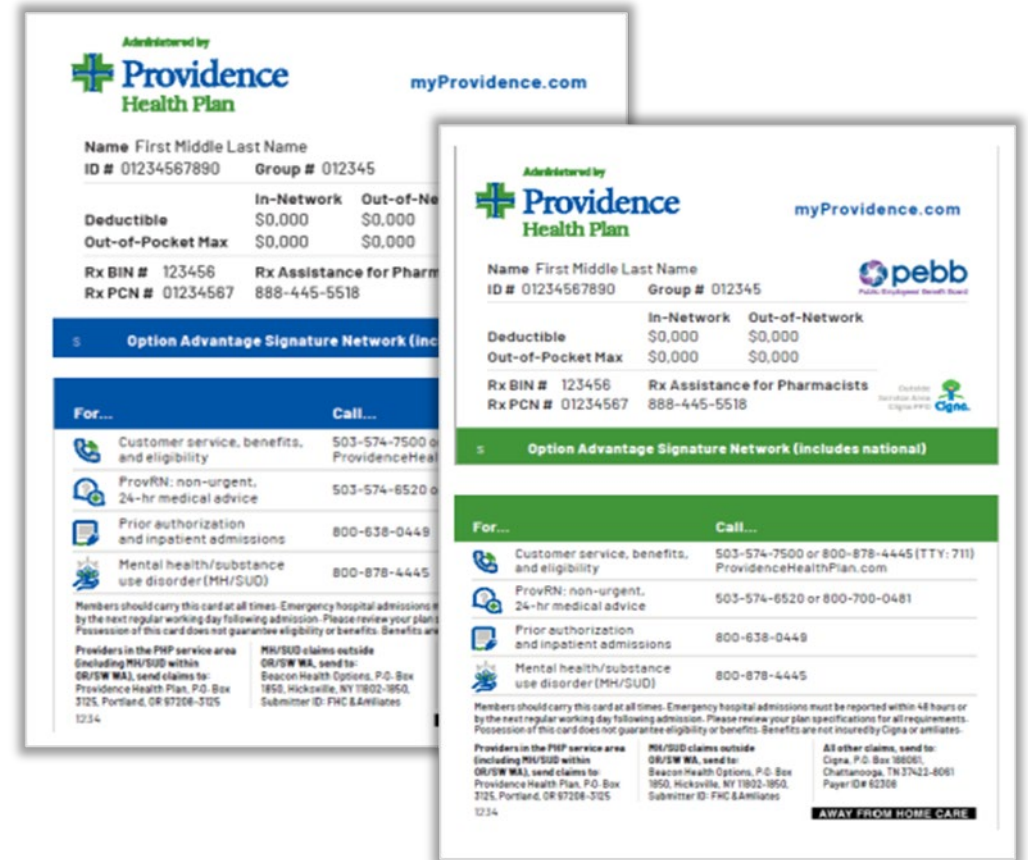
Exercises, such as meditation and journaling, are available to use anytime

Online resources and tools

ID cards – printable ID cards

Access ID cards via MyProvidence

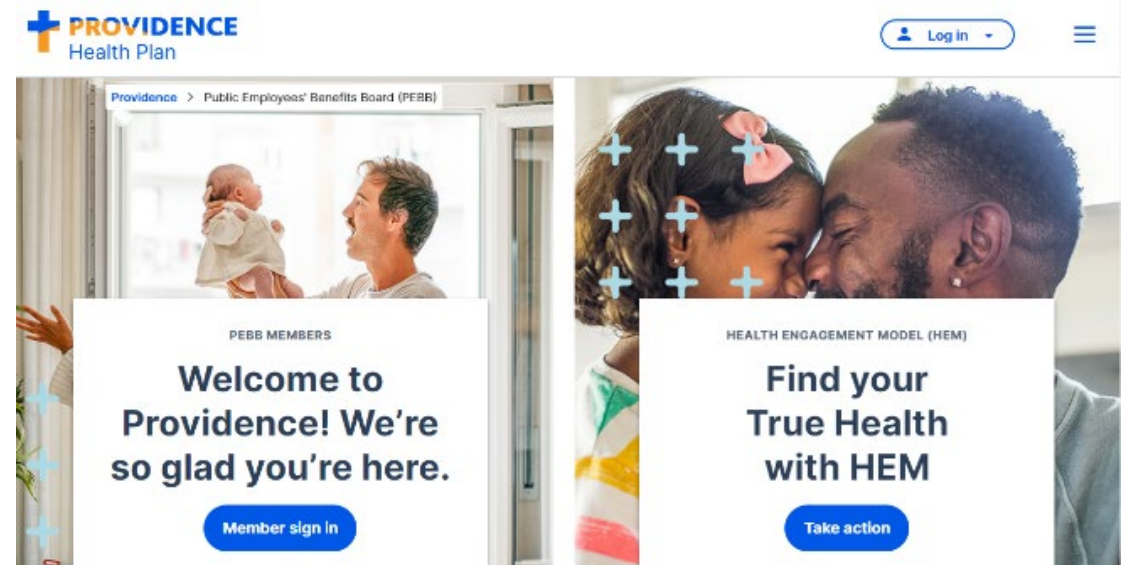
- Subscriber and spouse/partner may also choose to print a PDF version of the ID card for themselves or individual dependents
- Everyone can access



Resources on the web

Tools available on our website include:

- [myProvidence](#), secure member portal
- [Pharmacy resources](#)
- Searchable [Provider Directory](#)
- Numerous [wellness tools & resources](#)
- [Behavioral Health Concierge](#)
- [Kaia Health](#) digital pain management program
- [Virta Health](#) Type 2 diabetes reversal program
- [Omada](#) Type 2 diabetes prevention program
- [Talkspace](#) - Virtual behavioral health benefits



→ Get Started

Go to www.providencehealthplan.com/pebb to explore the tools and resources available to you online.

myProvidence

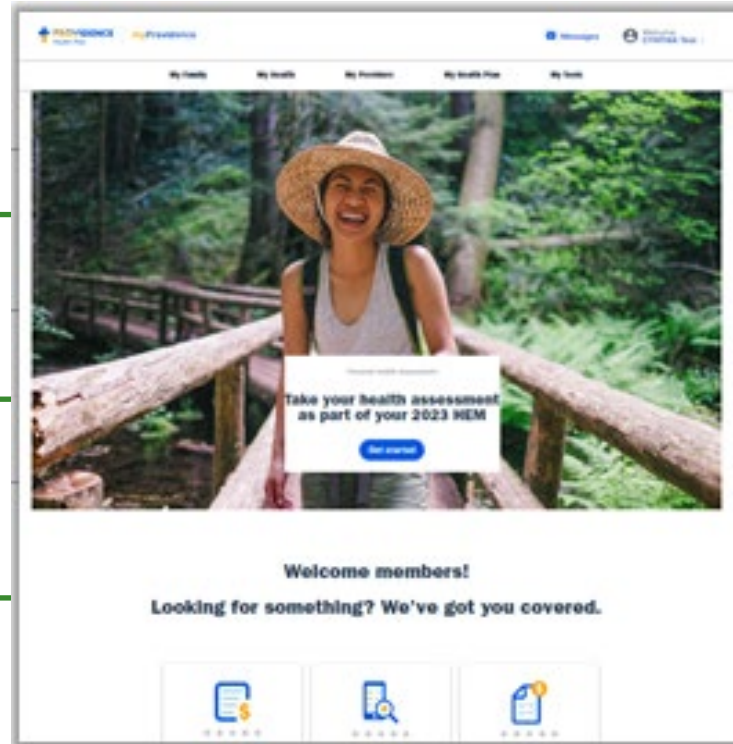
Connect to your personal health plan information



Take a personal health assessment to find out what you're doing well and where you can improve



Estimate the cost of care or prescriptions before you receive them



Access exclusive member discounts on fitness memberships, travel and more



Easily manage your health plan with user preferences



Visit Wellness Central, a personal health and wellness hub to track your health goals

→ Get Started

Sign up for your account at myProvidence.com

Don't forget HEM

September 1st through October 31st

Wellness assessment (HEM)

- Employees answer health and lifestyle questions
 - General health
 - Preventive health
 - Nutrition
 - Physical activity
 - Mental and emotional health
 - Safety
 - Tobacco and alcohol
 - Readiness to change
 - Productivity
- Approximately 10 minutes to complete
- Member receives personalized recommendations with areas to focus on, an overall wellness score, and a detailed personal health analysis, lifestyle risks and health conditions, programs and tools to achieve health goals



This information is NOT shared with PEBB or your employer!

**Don't forget HEM
September 1st through October 31st**

Additional member well-being resources



Health coaching

- **Standard health coaching program**
 - Guidance to help members identify and take action toward healthier lifestyle and behavior choices
 - Empower members to lose weight, improve diet, manage stress, exercise or stop using tobacco
 - Evidence-based coaching techniques
 - Sessions are 1:1



Omada for diabetes prevention

- Members get pre-connected cellular scales to report data and track progress in real time
- Omada care teams receive automatic updates and provide relevant, evidence-based guidance
- Personal health coaches and specialists update best clinical practices for each member based on data points
 - 19% of participants lost 5% or more of their initial weight
 - 58% of participants achieved normal A1C at 12 months in the program



Kaia Health digital pain management

- **Kaia helps you fight aches and pains, in as little as 15 minutes per day**
 - Ready when you are! No equipment or wearables needed
 - Direct audio and video feedback on how you are performing your exercises by Kaia's Motion Coach™
 - Real time feedback ensures good form & optimal results
 - Clinically validated -- feedback as effective as in-person PT
 - Kaia is designed to fit into your lifestyle and is available 24/7 from the comfort of your own home



www.startkaia.com/pebb



Virta Health type 2 diabetes reversal

Virta helps to naturally reverse type 2 diabetes

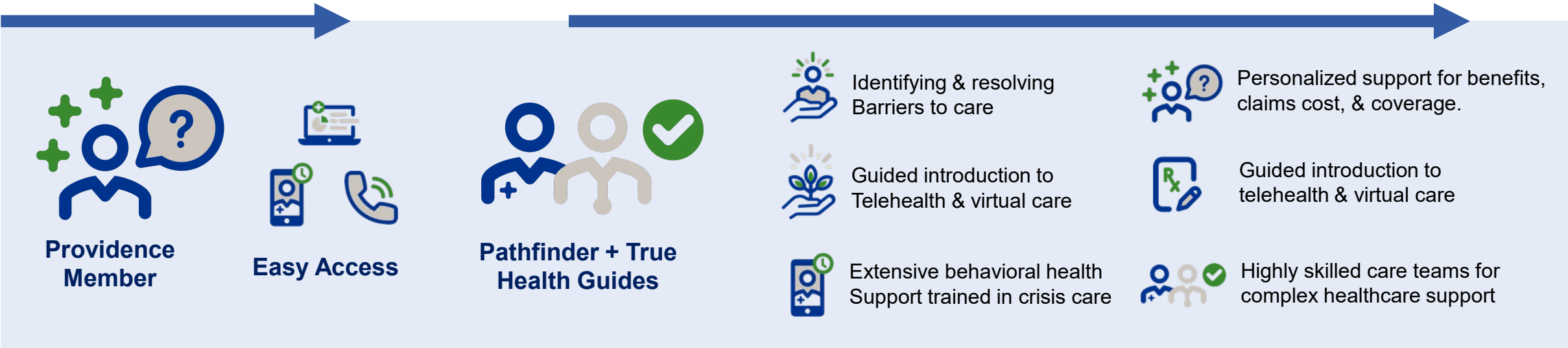
- Virta is a non-surgical, medical treatment that is clinically proven to reverse Type 2 diabetes
 - Lower blood sugar and lose weight while eliminating the need for medications
- PEBB members currently living with type 2 diabetes may be eligible to enroll in Virta Health at **NO COST**

To learn more, visit www.virtahealth.com



Member support and navigation

- **Providence Pathfinder**
 - Single point of access for medical, behavioral health, and pharmacy benefit support
 - 24/7, 365 access to a crisis-trained support team
 - Secure chat and email via MyProvidence, with history stored in the member's account
- **24/7, 365 access to commonly requested services**
 - Real time benefits, cost share details, PA and referral information, and ID card requests



Get answers to your health plan questions



Online: www.ProvidenceHealthPlan.com/PEBB



PHONE: 503-574-7500 or 800-878-4445 (TTY: 711)

Customer Service is available 8 a.m. to 5 p.m. (Pacific Time) Monday through Friday



SECURE EMAIL AND CHAT: myprovidence.com



We all deserve True Health

www.ProvidenceHealthPlan.com/PEBB

- ✓ **Complete the health assessment at myProvidence.com by October 31st**
- ✓ **Enroll in Providence Statewide or Providence Choice by October 31st**



2024 PEBB Open Enrollment

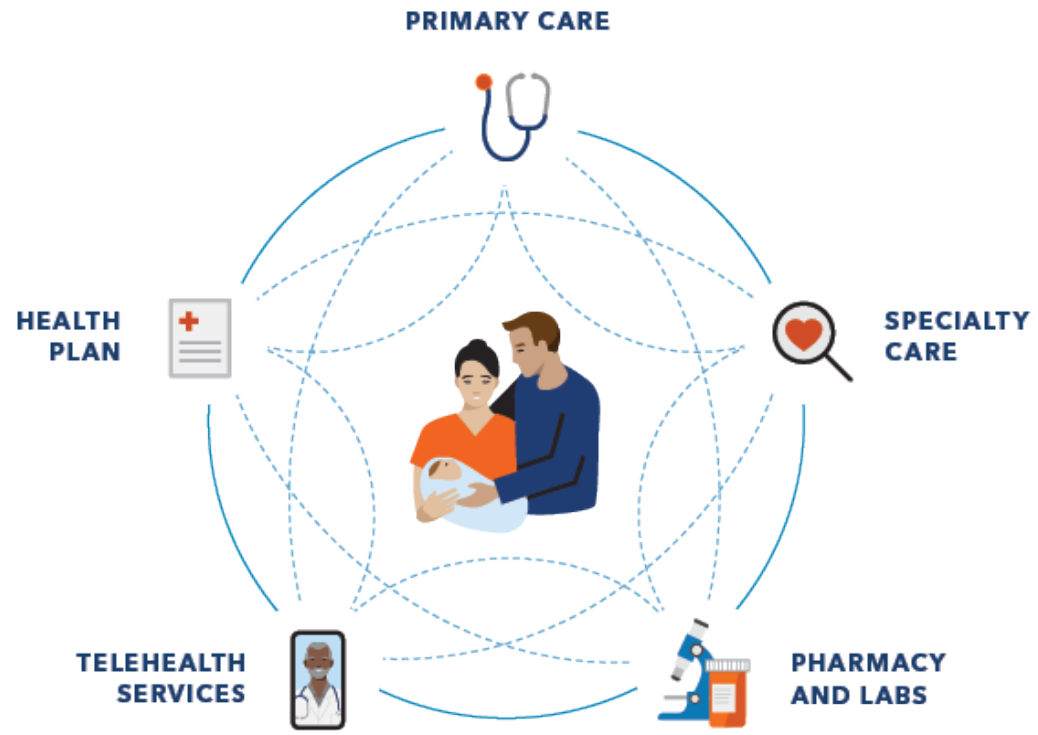
Care for all that is you

With medical care designed to help you thrive

All plans offered and underwritten by Kaiser Foundation Health Plan of the Northwest.
500 NE Multnomah St., Suite 100, Portland, OR 97232.



It's easier to find your healthy place with connected care



We combine care and coverage:

- **Doctors and dentists**
- **Hospitals**
- **Health plan**
- **Dental plan**

Care feels easier and faster and is centered around you.

If you are switching to us from a non-Kaiser Permanente plan, you will need to select a new provider from our network.



Care that is close to home or work

No matter what life throws their way, our members have many ways to connect to convenient, high-quality care.

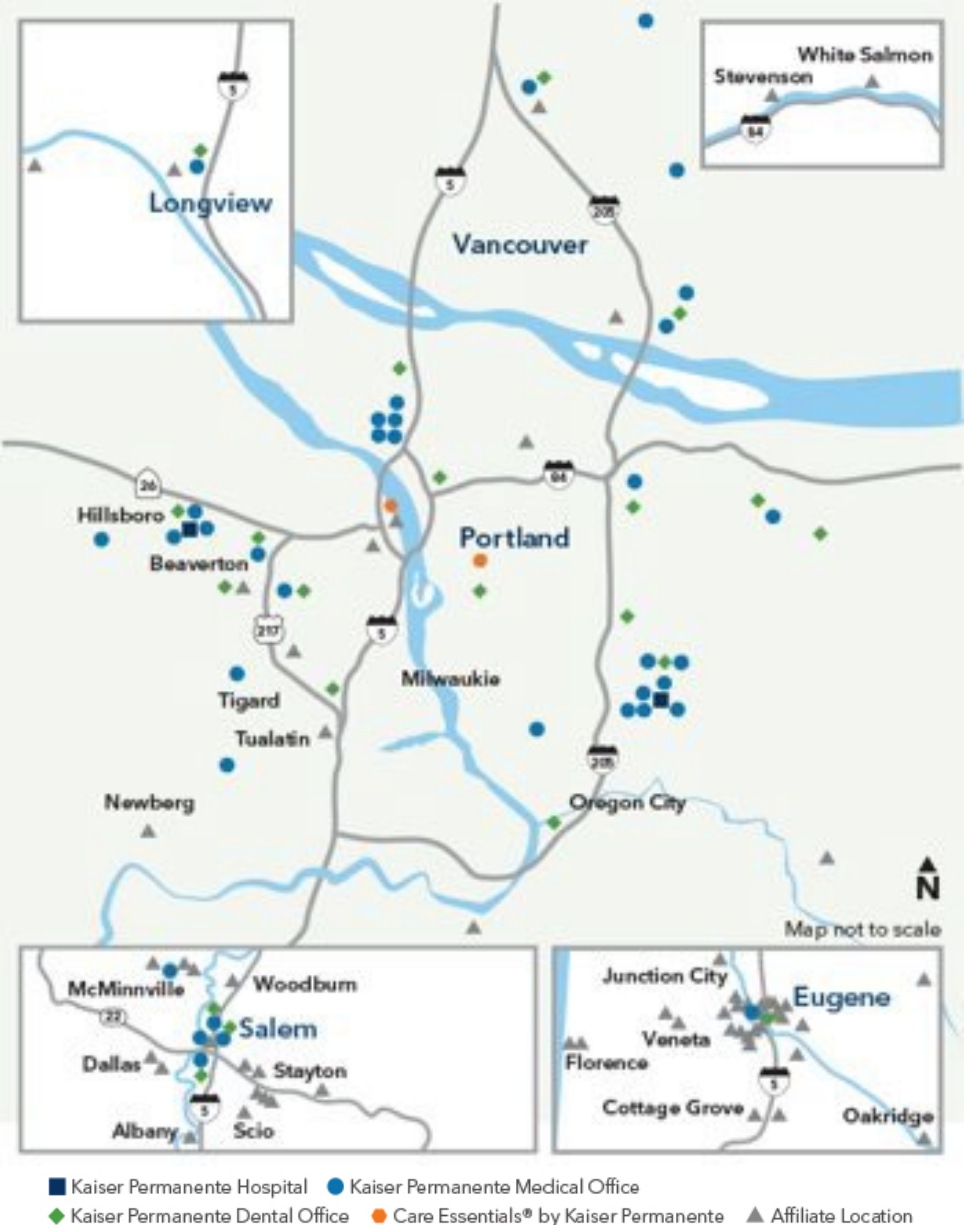
Kaiser Permanente locations

- 31 medical offices
- 21 dental offices
- 2 Kaiser Permanente hospitals
- 2 Care Essentials by Kaiser Permanente clinics

Access to affiliate providers including, but not limited to:

- OHSU Doernbecher Children's Hospital
- PeaceHealth Southwest Medical Center
- The Portland Clinic
- Salem Hospital
- Willamette Valley Medical Center
- Select PeaceHealth locations in Lane County*

*Our partnership with PeaceHealth only includes the Santa Clara, RiverBend Pavilion, Cottage Grove, and Florence locations. Not all providers at these primary care locations are part of our network. Go to kp.org/doctors to verify network participation.





Quality care when you need it

Same-day, next-day, and weekend appointments are available at most locations and by phone and video.¹



Visit us in person at a location near you.



Talk to a health care professional by phone or video.^{1, 2}

24-hour virtual care on your schedule



- **NEW** — If a trip to the doctor's office doesn't fit your schedule, it's easy to get fast, personalized support — daytime, nighttime, anytime.
- Schedule a phone or video visit with a doctor or clinician.^{1, 2}
- Get 24/7 care advice from a registered nurse by phone.
- With e-visits, complete an online questionnaire and receive a treatment plan and prescriptions, if needed.

1. When appropriate and available. For high deductible health plan members, e-visits, phone visits, and video visits are subject to your plan's annual deductible. 2. To have a video visit, members must be registered on kp.org and have a camera-equipped computer or mobile device. If you travel out of state, phone and video visits may not be available due to state laws that may prevent doctors from providing care across state lines. Laws differ by state.

Save time and money

Telehealth is covered at no cost with most plans.²



Mental health services — care for the whole you

Your thoughts and feelings affect your overall well-being. We're committed to helping you achieve and maintain optimal health for your mind, body, and spirit.

- Get support for a wide range of conditions, like anxiety, depression, substance use disorder, and autism spectrum disorders.
- Find care with psychiatrists, psychologists, therapists for you or a covered family member.
- Make an appointment for therapy within Kaiser Permanente without a referral.
- Use a wide range of online self-care resources at any time to help you relieve stress, improve sleep, practice mindfulness, and more.

Learn more at kp.org/mentalhealth.



Wellness coaching

Convenient, ongoing support from
a specially trained health professional

Many areas of focus

Wellness coaches can help your employees with stress, sleep, smoking cessation, and more. They're not mental health care providers, but they can set up an action plan to keep your employees motivated toward their health goals.

Convenient scheduling

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

Dedicated support

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

69%
of members

who used wellness
coaching reduced their
stress within one month

 no cost to members

 by phone

 self-care and wellness resources

 KAISER PERMANENTE®



Mental health and emotional wellness apps

Everyone needs support for total health — mind, body, and spirit. These wellness apps can help members navigate life's challenges, and make small changes to improve your sleep, mood, relationships, and more.¹



Calm

Meditation and relaxation app designed to help strengthen mental fitness and help with stress, anxiety, insomnia, depression, and more



ClassPass

Access to thousands of on-demand workout videos, plus live-streaming and in-person exercise classes from top studios worldwide



myStrength²

Personalized program with interactive activities to track current emotional states and ongoing life events to help improve awareness and change behaviors



Ginger

On-demand emotional support through the Ginger app. Ginger's emotional support coaches are available 24/7 to help with stress, low mood, sleep troubles, and more.

Go to
kp.org/selfcare
to learn more and
download apps.



1. These services aren't covered under your health plan benefits and aren't subject to the terms set forth in your Evidence of Coverage or other plan documents. These services may be discontinued at any time without notice. Only available to Kaiser Permanente members with medical coverage. 2. myStrength® is a trademark of Livongo Health, Inc., a wholly owned subsidiary of Teladoc Health, Inc.



Access from anywhere

Knowing your employees can always connect to care gives you the peace of mind that they're covered in and out of the office.



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

- 24/7 support while traveling
- 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 by talking to a clinician. No need for an appointment. Phone numbers vary by service area.



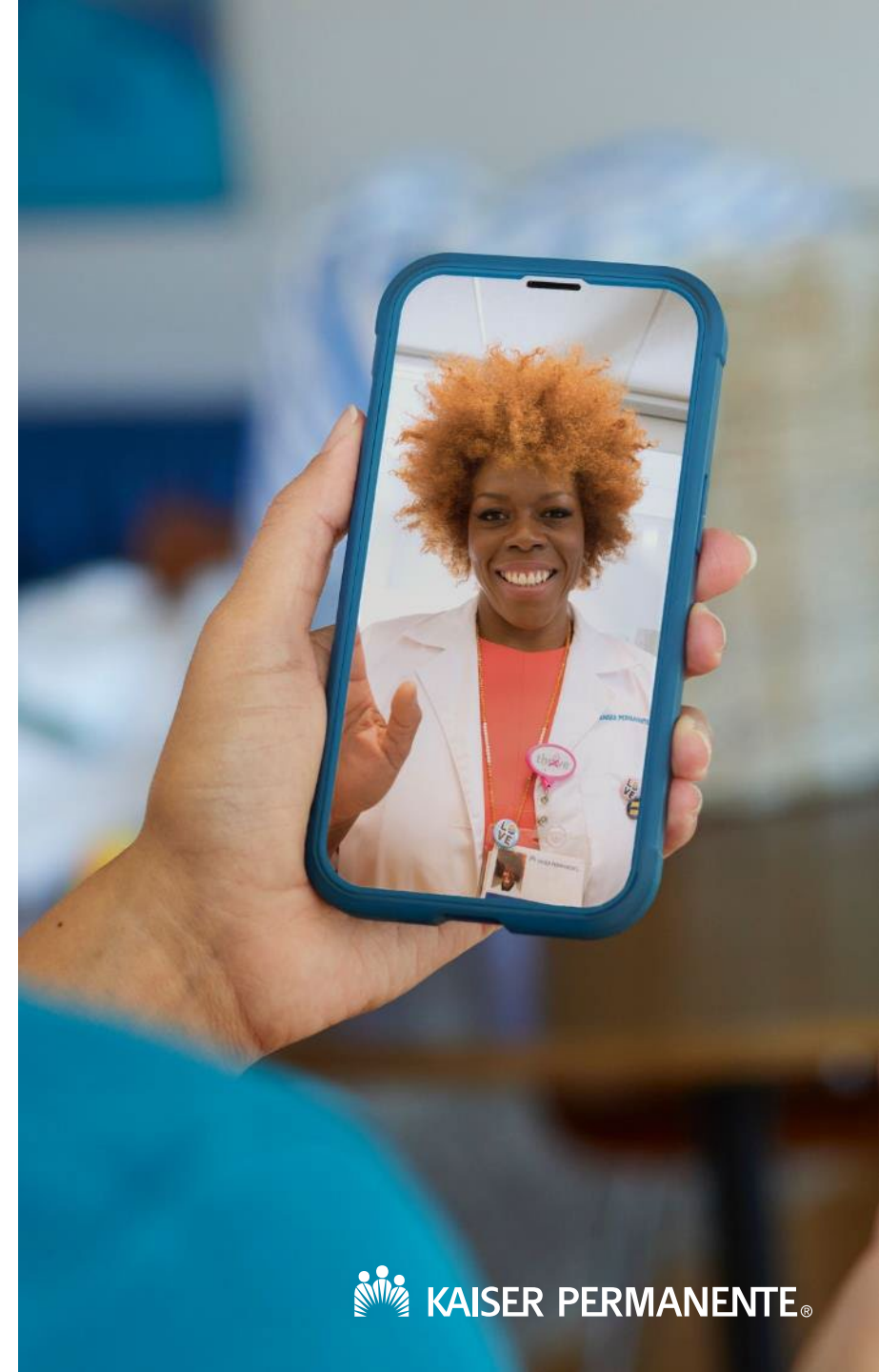
Urgent and emergency care

Get help anywhere in the world. And at many locations outside Kaiser Permanente states (Cigna PPO Network, MinuteClinic®, and Concentra), your employees won't need to file a claim later.



Kaiser Permanente app and online at kp.org/travel

Find locations and get answers to common care and coverage questions.





2023-2024 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
Preventive care services	\$0	\$0	\$0	\$0
Primary and specialty office visit copay	\$5	\$5	\$30	\$30
Outpatient surgery	\$5	15% after deductible	\$30	15% 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	\$1 generic \$15 formulary brand \$15 nonformulary brand \$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
Self-referred chiropractic & acupuncture	\$10	\$10	Not covered	\$10
Self-referred massage therapy	Not covered	\$25	Not covered	\$25
Self-referred naturopathy	\$5	\$5	\$30	\$30



Find a provider at
CHPgroup.com

Alternative Care

- 20-visit limit for chiropractic*
- 12-visit limit for acupuncture*
- 12-visit limit for massage therapy
- Naturopathy services same as primary care benefit
- No referral required
- Services covered by CHP network



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 and acupuncture	\$10	\$10	Not covered	\$10
Self-referred massage therapy	Not covered	\$25	Not covered	\$25
Self-referred naturopathy	\$5	\$5	\$30	\$30

*All plans except for the part-time traditional plan have access to chiropractic and acupuncture services.



Treating eye care as a part of your overall health

We care for the entire visual system and treat the eye as a component of your total health.



Comprehensive eye exams



Wide selection of eyeglass frames, ranging from value frames to designer brands



Reorder contact lenses online



No additional charge for shipping contact lenses or glasses





Vision care with Vision Essentials



Close by when you need us:

- **6 Vision Essentials locations**
- **Many locations in or near a Kaiser Permanente medical office**
- **Affiliated providers in Eugene**



Visit kp2020.org to find a convenient location near you.

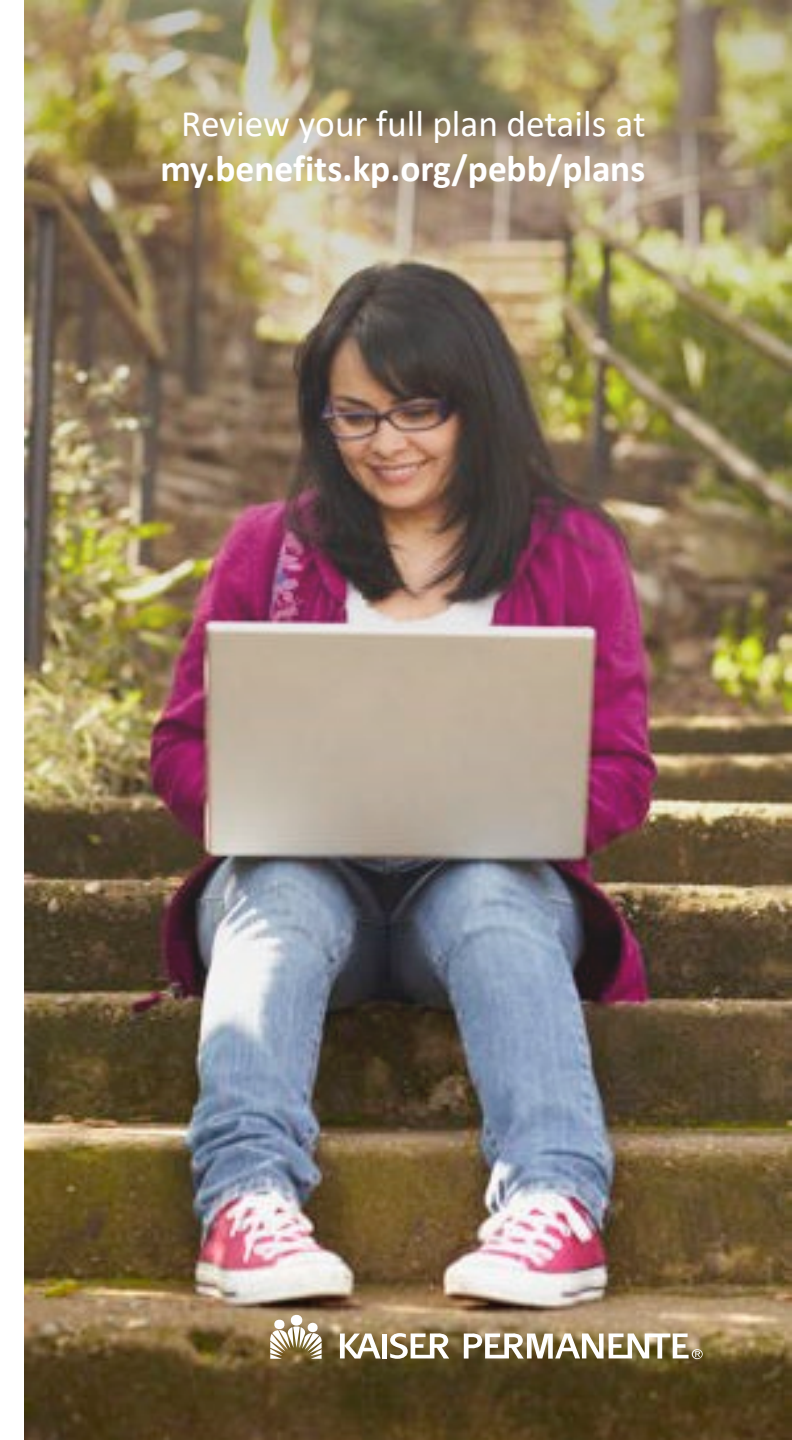


Review your full plan details at my.benefits.kp.org/pebb/plans

PEBB vision benefits for 2023–2024 for full-time employees¹

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 \$200 annual allowance
Pediatric vision hardware and optical services ²	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

1. Must be enrolled in a Kaiser Permanente medical plan to enroll in the Kaiser Permanente vision plan. 2. Pediatric vision covered until the end of the month in which the member turns 19.





Our focus on total health

Your dentist will build a care plan based on your needs and work with your care team to deliver high-quality, personalized care.



Preventive dental care is at the core of our philosophy



Personalized prevention and treatment plan



Independently recognized as a leader in high-quality dental care¹

1. Continuously accredited by the Accreditation Association for Ambulatory Health Care (AAAHC) since 1990. Kaiser Permanente Dental is the only AAAHC-accredited dental home in the Northwest, and the third in the nation to achieve dental home accreditation. 2. According to the Press Ganey survey for January 2022–December 2022.



95% of our member say they would recommend Kaiser Permanente Dental to family and friends.²



Kaiser Permanente Dental

With care and coverage working conveniently together, Kaiser Permanente Dental is uniquely designed to be your partner in total health so you can feel your best.



21 dental offices



Service area from Longview, WA, to Eugene, OR



Many dental offices located in or near our medical offices



Visit kp.org/dental/nw to find a location near you.





Quality care with you at the center

Your dentist will build a care plan based on your needs and work with your care team to deliver high-quality, personalized care.



Consistent, coordinated, high-quality care



Doctors who can focus on your total health



Dentists who can detect health symptoms and connect with your doctor



Important health reminders

Additional benefits to look for when choosing a dental plan



Medical-dental integration



Shared medical record



Coordinated approach to care





Virtual dentistry

When the pandemic emerged, we quickly stood up virtual dental care options to continue to meet members' needs. Members like these convenient virtual visits because dentists can cover a member's dental history, assess the severity of the concern, and provide recommendations and next steps.



Telephone advice 24 hours a day, 7 days a week



Telephone and video visits available after a member is triaged^{1,2}



Dental advice email on kp.org and the Kaiser Permanente app^{3,4}



Ability to email patient photos through kp.org and the Kaiser Permanente app⁴



1. When appropriate and available. 2. These features apply to care you get at Kaiser Permanente facilities. 3. To use the Kaiser Permanente app, you must be a Kaiser Permanente member registered on kp.org. 4. Available for members with both Kaiser Permanente medical and dental.



Review your full plan details at mybenefits.kp.org/pebb

PEBB dental benefits for 2024

	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, inlays, and simple tooth extractions	20%	50%
Surgical tooth extractions	20%	50%
Periodontics	20%	50%
Endodontics	20%	50%
Major restorative, crowns and bridges	20%	50%
Full and partial dentures, relines, rebases	50%	50%
Orthodontic treatment (\$1,500 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.



A better experience from the start

We guide you through each step of joining Kaiser Permanente, so you can start getting the care you need from day one.



Create your online account

- Visit kp.org/newmember.
- Download the Kaiser Permanente app.



Transition your care and prescriptions

- Visit kp.org/newmember to get started.



Pick a provider and change at any time

- View doctor profiles at kp.org/doctors.
- Pick a provider near your home or work.





Want to learn more?

Choosing a health plan is a big decision — so we're here to answer any of your questions.



Ask about the essentials

- Where to get care
- Specialty care services
- How our doctors, hospitals, and health plan work together to make your life easier



Or about our extra features

- Video visits* and other convenient ways to get care
- Apps, podcasts, and other self-care resources available to you at no additional cost

*These features available when you get care at Kaiser Permanente facilities. For high deductible health plan members, phone and video appointments are subject to your plan's annual deductible. If you travel out of state, phone appointments and video visits may not be available due to state laws that may prevent doctors from providing care across state lines. Laws differ by state. To have a video visit, members must be registered on kp.org and have a camera-equipped computer or mobile device.

**Call 1-800-514-0985 (TTY 711),
Monday through Friday,
7 a.m. to 6 p.m. Pacific time.**

*When appropriate and available.



Thank you

Member Services

1-800-813-2000 (TTY 711)

More information

mybenefits.kp.org/pebb

PEBB OPEN ENROLLMENT

2024 PLAN YEAR



OFFICE LOCATIONS & HOURS

Extended Office Hours
M-F, 7:00 am – 5:30 pm Select Saturdays

CONVENIENT LOCATIONS

OREGON 21 Offices

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

WASHINGTON 19 Offices

Locations from Bellingham to Vancouver, Silverdale to Spokane

IDAHO 6 Offices

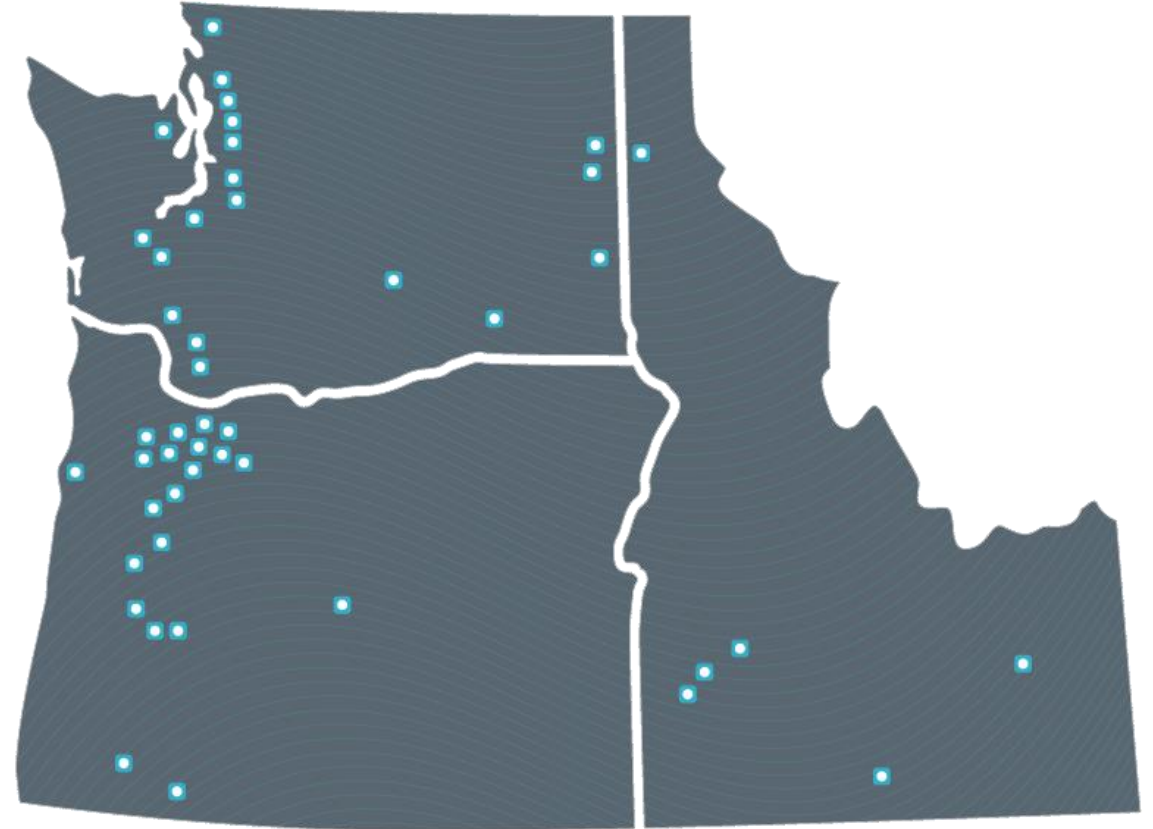
Boise, Nampa, Meridian, Twin Falls, Idaho Falls, Coeur d'Alene

GENERAL CARE All Offices

Our General Dentists provide outstanding care

SPECIALTY CARE Select Offices

High caliber specialists including Orthodontists, Endodontists, Oral Surgeons & Periodontists



SUMMARY OF BENEFITS

General and Ortho Office Visit	\$10 per Visit
Diagnostic and Preventive Services	Covered at 100%
Fillings	\$20 copay
Crown or Bridge	\$250 copay
Complete Upper or Lower Dentures	\$290 copay
Root Canal Therapy	\$150 copay
Surgical Extraction	\$40 copay
Comprehensive Orthodontic Treatment	\$2,500 copay
Dental Implant Surgery	\$1,500 maximum
Specialty Office Visit	\$10 per Visit

- No maximum, No deductible
- No waiting periods
- Predictable copays
- Orthodontic benefit for all ages
- Office visit copay waived for new patient visit, only for members who have never been seen a WDG provider.



WE'RE DIFFERENT – A UNIQUE APPROACH TO ORAL HEALTH

- Willamette Dental Group's practice philosophy focuses on proactive dental care.
- Proactive care means focusing on preventing disease rather than treating it surgically.
- This is achieved by practicing evidence-based dentistry
- Cleaning frequencies
 - Vary based on each individual person and oral health risks
 - Range from 1 -4 cleanings per year, as recommended by Dentist



DENTIST RATINGS AND PROFILES

- Patient feedback ratings and comments online for each dentist
- NRC Health partner
- Over 4.5 average star rating



Visit our website at willamettedental.com/oebb



Mimi Poon Whittemore, DMD

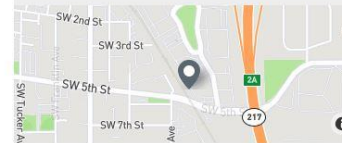
General Dentist

★★★★★ 4.8 out of 5 | [226 Ratings, 57 Comments](#)

 **By Appointment Only**
To schedule an appointment, call:
1-855-4DENTAL (1-855-433-6825)

 **Willamette Dental Group**
Beaverton

 4925 SW Griffith Drive
Beaverton, OR 97005
[Get Directions](#)



Dr. Mimi Whittemore's Biography

Dr. Whittemore approaches dentistry with compassion, integrity, and empathy. Her conservative approach to dental treatment and being proactive about dental health directly aligns with her passion to work at Willamette Dental Group. Getting to know her patients and understanding their dental needs is very important to her. Dr. Whittemore and her team's continued focus to educating and providing care in a caring manner has gained her the trust and connection of her patients. Through the years Dr. Whittemore continues to make a positive impact on her patients and strives for dental excellence. Willamette Dental Group, being provider-centric, has allowed her to be collaborative with her peers to create the best treatment options available for her patients.

In her spare time she enjoys spending time with her family and is an avid gardener.

Languages

- English
- Cantonese

Education





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 1.855.433.6825. Appointments are available within days or weeks – we can't wait to meet you!



APPOINTMENTS OR EMERGENCIES

855.433.6825

M-F: 7:00 am – 5:30 pm / Sat: 7:00 am – 1:00 pm

For dental emergencies call 24 hrs/7 days a week



QUESTIONS ABOUT YOUR BENEFITS?

memberservices@willamettedental.com

Member Services Hours: M-F: 8:00 am – 5:00 pm

vsp
vision care



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

PEBB VSP Vision Plans

Open Enrollment is 10/1/23 – 10/31/23
Effective 1/1/24



Eye Care is Essential

Keep yourself healthy with a yearly eye exam from a VSP network doctor.

Did you know?

Annual eye exams provide an unobstructed view of the blood vessels and can help detect early signs of serious eye and health conditions like glaucoma, diabetes, high cholesterol, and high blood pressure.

- Nearly **96 million** US adults are living with **pre-diabetes** and **84%** don't know they have it.*

*Centers for Disease Control and Prevention (CDC)

Classification: Confidential



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	<ul style="list-style-type: none"> WellVision Exam® covered every calendar year \$10 Copay 	
	<ul style="list-style-type: none"> Retinal Imaging exam covered every calendar year with up to \$39 Copay 	<ul style="list-style-type: none"> Retinal Imaging exam covered every calendar year with a \$10 Copay
Frame Allowance	<ul style="list-style-type: none"> \$150 Frame allowance every calendar year \$170 featured frame brands allowance \$150 Walmart®/ Sam's Club® frame allowance \$80 Costco® frame allowance 	<ul style="list-style-type: none"> \$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 <ul style="list-style-type: none"> Fully covered single vision, lined bifocal, or lined trifocal lenses Impact-resistant lenses for children 	
Lens Enhancements	<ul style="list-style-type: none"> Standard Progressive lenses - \$0 copay 40% average savings on other lens enhancements 	<ul style="list-style-type: none"> 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)	



Retinal Screening

Retinal screening photos are images of the inside of the eye that are used as baseline documentation of a healthy eye or to screen for potential disease(s).

These images can be compared year after year to monitor even the most subtle changes in the eyes, helping detect signs of eye disease and systemic disease as early as possible.

- **Basic Plan** members pay no more than a **\$39** copay for retinal screening each year.
- **Plus Plan** members pay a **\$10** copay for retinal screening each year.
- Members with **diabetes** receive **fully covered** retinal screening each year.



VSP LightCare™

Digital screens and fluorescent lighting emit blue light that can contribute to headaches, blurred vision, and sore eyes. Wearing blue light filtering glasses indoors can reduce exposure to blue light and glare.

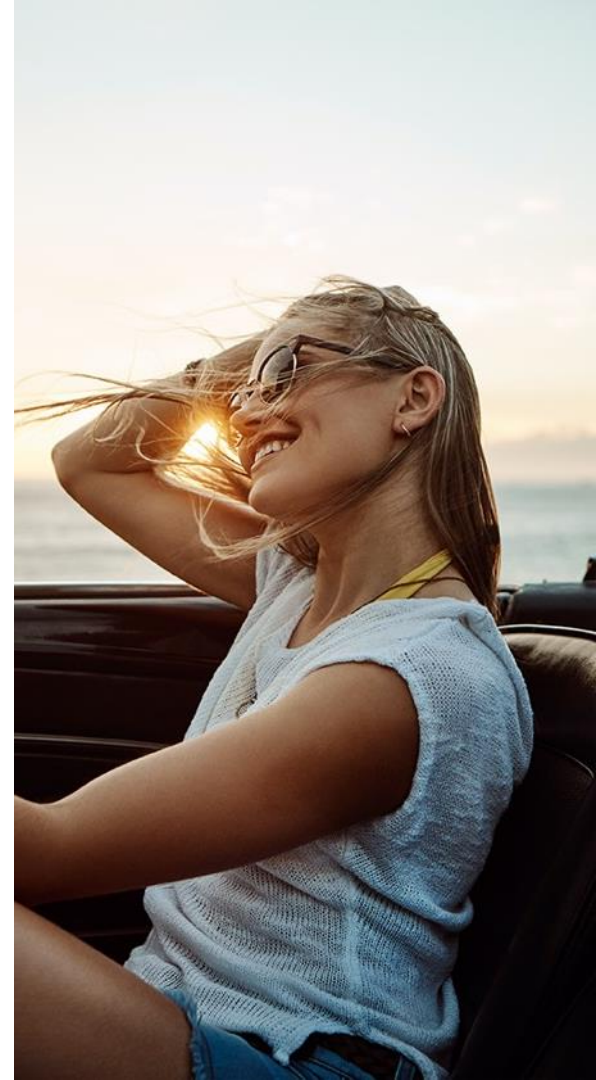
Keep Your Eyes Protected

Visit a VSP network doctor and choose either prescription eyewear coverage, or use your frame and lens allowance toward ready-to-wear:

- non-prescription sunglasses, or
- non-prescription blue light filtering glasses

Register and log in to [vsp.com](https://www.vsp.com) to review your benefit information. Based on applicable laws; benefits may vary by location

Classification: Confidential



Vision therapy

What's Vision Therapy?

- Sessions cover diagnosis and treatment of turned eye, eye teaming, lazy eye, eye focusing, and general eye movement ability

What's included?

- Fully covered evaluation
- 75% off approved therapy sessions up to \$750 annually

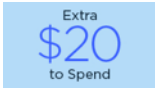
**Check with your doctor to see if you qualify



Exclusive Member Extras

Get the Savings You Need.

Visit **vsp.com** to see all the Exclusive Member Extras. VSP puts members first by providing you with exclusive special offers from leading industry brands, totaling more than **\$3,000 in savings**. Discover great deals on glasses, sunglasses, contact lenses, and more.



Enjoy an Extra \$20 on Featured Frame Brands.



Save up to 40% on popular lens enhancements*.

Offers vary based on state and benefit plan. Brands and offers subject to change.

*Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details.

Classification: Confidential



Convenient Access You Want

With thousands of in-network doctors, it's easy to find an eye doctor near you.

With Even More Options

Maximize your benefits at a Premier Program location (at no extra cost) including thousands of private practice doctors and over 700 Visionworks® retail locations nationwide.

- Exclusive bonus offers and savings
- A wide selection of featured frame brands
- Advanced eye exam technology, like retinal imaging



Participating Retail Chains

There are more than 10,000 retail chain locations in the VSP network in addition to Visionworks, including:

- Costco Optical
- Walmart Vision Center
- Pearle Vision
- MyEyeDr
- Clarkson Eyecare
- RxOptical
- And more

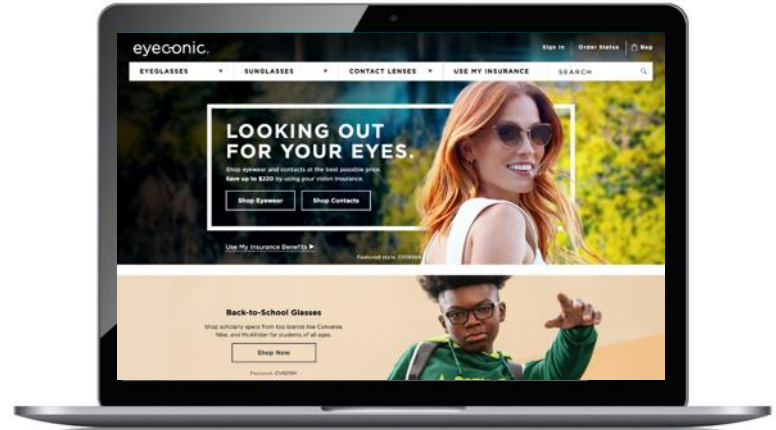


Eyeconic

As a VSP-owned company, **Eyeconic** seamlessly connects your VSP vision benefits to your account.

Eyeconic offers a variety of well-known brands and contact lenses. Choose from more than 70 eyewear brands like Calvin Klein, Cole Haan, Nike, and more.

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



eyeconic

a vsp vision company



Using Your Benefit is Easy

Once you're enrolled...

- Create an account at **vsp.com** and review your personalized benefit information.
- You can find a VSP in-network doctor by visiting **pebb.vspforme.com** or calling **800.877.7195**.
- At your appointment, simply tell them you have VSP. No ID card needed—and we'll take care of the rest! There are no claim forms to fill out when you see a VSP network doctor.



Enroll Today!

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

**Questions? Contact us.
Call 800.877.7195 or visit [vsp.com](https://www.vsp.com).**





Life and Disability Insurance

For Members of the Oregon Public Employees' Benefit Board



TheStandard®

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 Assistance

An included service that connects you and family members to resources when traveling more than 100 miles from home.

- Travel planning guidance
- Assistance replacing lost credit cards and passports, transferring funds and locating missing luggage
- Medical and legal assistance
- Emergency medical evacuation and repatriation services
- Return transportation for dependent children and traveling companions

Travel Assistance is provided by Assist America, Inc. 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 The Standard's group policy.



Life Services Toolkit

Life Services Toolkit is automatically available to you as an insured member under your group Life insurance policy. Life Services Toolkit is also available to your beneficiary. Access is available for up to 12 months after claim approval. Services for beneficiaries include:

Grief and loss support. Confidential “in moment” phone support and 6 face-to-face sessions.

Books to help children cope. Age-appropriate books can be sent to children and adults coping with loss.

Support Services. Work-life advisors can guide beneficiaries to resources to help manage household repairs and chores; find child care and elder care providers; or organize a move or relocation.

Online Resources. Beneficiaries can easily access additional services and features on the Life Services Toolkit website for beneficiaries, including online resources to help in planning a funeral, writing obituaries, and copy with grief.

Legal services. Includes a 30-minute legal consultation by phone or in-person; 25% rate reduction thereafter.

Employee Services

Online portal for all covered members offers:

- Online Will template
- Identity theft prevention
- Financial planning online tools
- Funeral planning resources
- Health and wellness resources

The Life Services Toolkit is provided through an arrangement with Health Advocate and is not affiliated with The Standard. Health Advocate is solely responsible for providing and administering the included service. This service is not an insurance product. The Life Services Toolkit is not available to Life insurance beneficiaries who are minors or to non-individual entities such as trusts, estates or charities.

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

All amounts are guarantee issue



Short Term Disability Benefits



Short Term Disability Insurance

The STD plan includes each of the following:

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

Reminder:
Paid Leave Oregon
became effective
September 3, 2023

* 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

Telephonic/Online Claim Submission

File STD claims over the phone or online

Tax-free Benefit

Because premium for STD coverage is paid for by the member with post-tax dollars, benefits paid are non-taxable



Oregon Paid Family Medical Leave



What is Oregon Paid Family Medical Leave?

Oregon Paid Family Medical Leave, also referred to as Paid Leave Oregon, is a new program that ensures individuals and families have the time and support they need to care for themselves and their loved ones when they need it most.

Employees earning at least \$1,000 over the last 12 months are eligible

Work-study employees are not eligible

Job protection is available for employees employed by their employer for at least 90 days before taking leave.



The Basics: Oregon Paid Family Medical Leave

Category	Details
Effective Date	Sept. 3, 2023
Contributions	<ul style="list-style-type: none"> • 1% of earnings up to Consumer Price Index West (updated annually) • Employee pays 60% • Employer pays 40%
State Avg. Weekly Wage*	\$1269.69
Leave Reasons	<ul style="list-style-type: none"> • Own serious health condition (including pregnancy) • Bonding with a child in the first 12 months after birth, adoption, or foster care placement • Caring for a qualifying family member with a serious health condition • Safe leave (survivors of sexual assault, domestic violence, harassment, or stalking)
Relationships	Spouse, domestic partner, child, parent, Grandchild, Grandparent, Sibling, parent of your spouse or domestic partner, "In Loco Parentis" may apply, any individual related by blood or affinity who is the equivalent of a family relationship
Calendar Year	52-week period beginning on the Sunday immediately preceding the date of which the leave commences
Benefit Period	12 weeks and up to an additional 2 weeks due to complications related to pregnancy
Waiting Period	0 days
Min / Max Benefit*	\$63.48 / \$1523.63

*Minimum/Maximum benefit amounts subject to change following annual State Average Weekly Wage review by Oregon Employment Department



How much will I receive?

Benefits will depend on your earnings compared to Oregon's State Average Weekly Wage*. Here are examples based on annual earnings:

Annual Earnings	Weekly Earnings	Weekly Benefit	Income Replacement
\$40,000	\$769.23	\$769.23	100%
\$65,000	\$1,250.00	\$1,037.65	83%
\$80,000	\$1,538.46	\$1,181.88	77%
\$120,000	\$2,307.69	\$1,523.63	66%

You can estimate your PFML benefit at: <https://paidleave.oregon.gov/employees/benefits-calculator.html>

*State Average Weekly Wage for 7/1/2023 through 6/30/2024 is \$1,269.69. This is reevaluated annually on July 1st by Oregon Employment Department.



How does OR PFML impact Short Term Disability benefits

OR PFML benefits are considered Deductible Income under the terms of your Short Term Disability (STD) policy

STD benefits are reduced by benefits you are eligible to receive from OR PFML because of your own health condition

STD benefit amount will be the difference between what you are eligible to receive from OR PFML and the maximum benefit amount of your STD claim

Even if you do not apply for OR PFML for your own health condition, your STD benefit will be reduced



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 non-taxable

Survivors Benefit

3 times maximum LTD benefit without reduction by deductible income



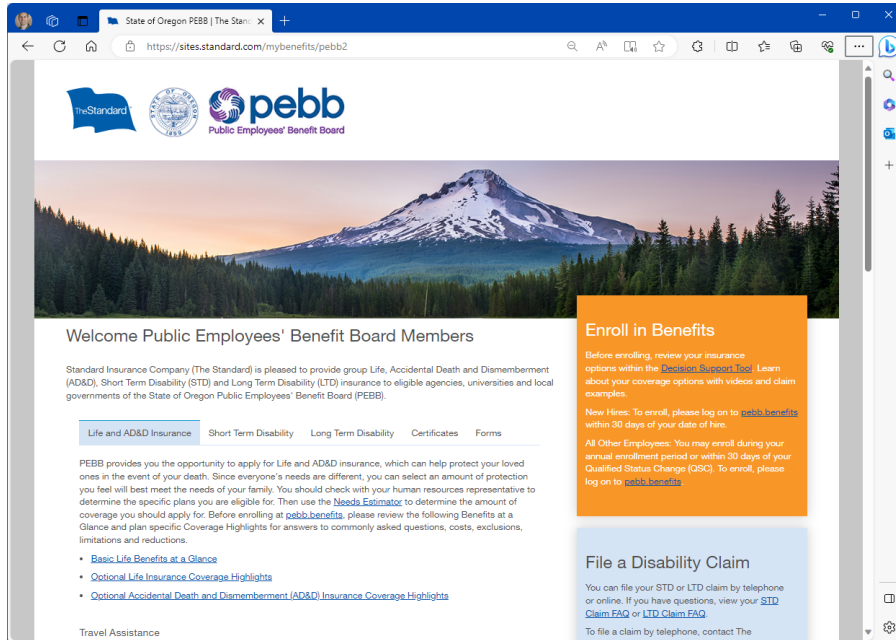


Next Steps

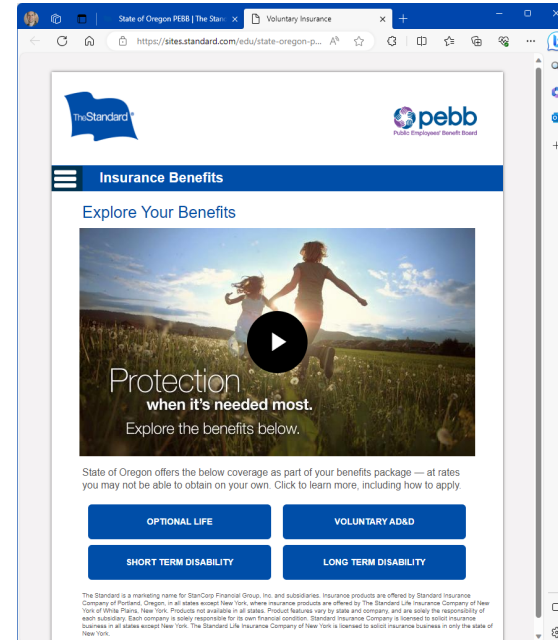
Time to Enroll

Please visit The Standard's PEBB microsite at: www.standard.com/mybenefits/pebb

Here you will find our decision support tool to help you make informed benefit choices.



The screenshot shows the homepage of the PEBB microsite. At the top, there are logos for 'The Standard', the State of Oregon, and 'pebb Public Employees' Benefit Board'. Below the logos is a large image of a snow-capped mountain. The main heading reads 'Welcome Public Employees' Benefit Board Members'. A central orange box contains the text 'Enroll in Benefits' and provides instructions for new hires and other employees. Below this, there is a section for 'File a Disability Claim' with a play button icon. The page also features a navigation menu with links for 'Life and AD&D Insurance', 'Short Term Disability', 'Long Term Disability', 'Certificates', and 'Forms'. A footer section includes 'Travel Assistance'.



The screenshot shows the 'Insurance Benefits' page of the PEBB microsite. It features a video player with a play button and the text 'Protection when it's needed most. Explore the benefits below.' Below the video, there are four buttons: 'OPTIONAL LIFE', 'VOLUNTARY AD&D', 'SHORT TERM DISABILITY', and 'LONG TERM DISABILITY'. A footer section contains a disclaimer about The Standard's insurance products.

These policies have exclusions, limitations, reductions of benefits and terms under which the policy may be continued in force or terminated.





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 360 Hamilton Avenue, Suite 210, 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.



canopy
Innovative Wellbeing

Canopy EAP Orientation

Employee Assistance Program

A **FREE** and **CONFIDENTIAL** service for employees and their family members to get help for a wide range of personal problems



canopy

Eligibility

- Employees
- Spouse/Domestic Partner
- Family members living in household
- Dependents up to 26 years old – regardless of location
- Family members can contact Canopy on their own



Canopy Service Summary

Free and Confidential

Mental Health Hotline 24/7/365

In-the-moment consultations and assistance from a mental health professional

Counseling

3, 5, 6, or 8 sessions 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.

Behavioral Coaching

Coaching to support personal goals

Virtual Peer Support

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

Resources for Life

- Childcare
- Eldercare
- Resource retrieval
- Unlimited financial coaching
- Legal referrals and forms
- Identity theft services
- Fertility health support
- Home ownership program
- Gym and pet insurance discounts

Member Site

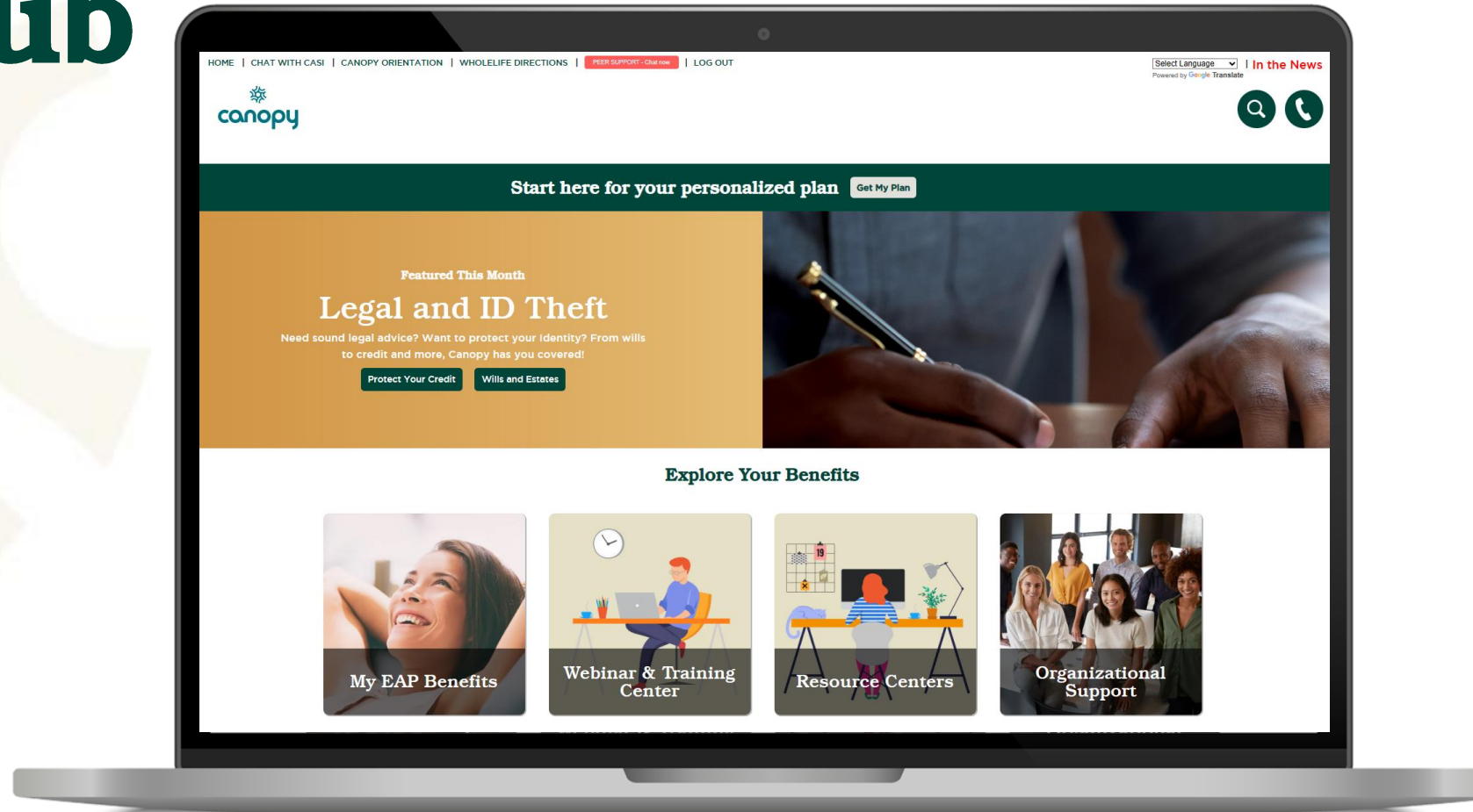
Self-care courses, tips, forms, and videos

WholeLife Directions App

dCBT

Member Hub

- Self-Assessments
- Videos
- Quizzes
- Courses
- Webinars
- Legal and tax forms
- Resources to manage stress, work, family life, and more



Access at my.canopywell.com
organization code: **State of Oregon** or **PEBB**



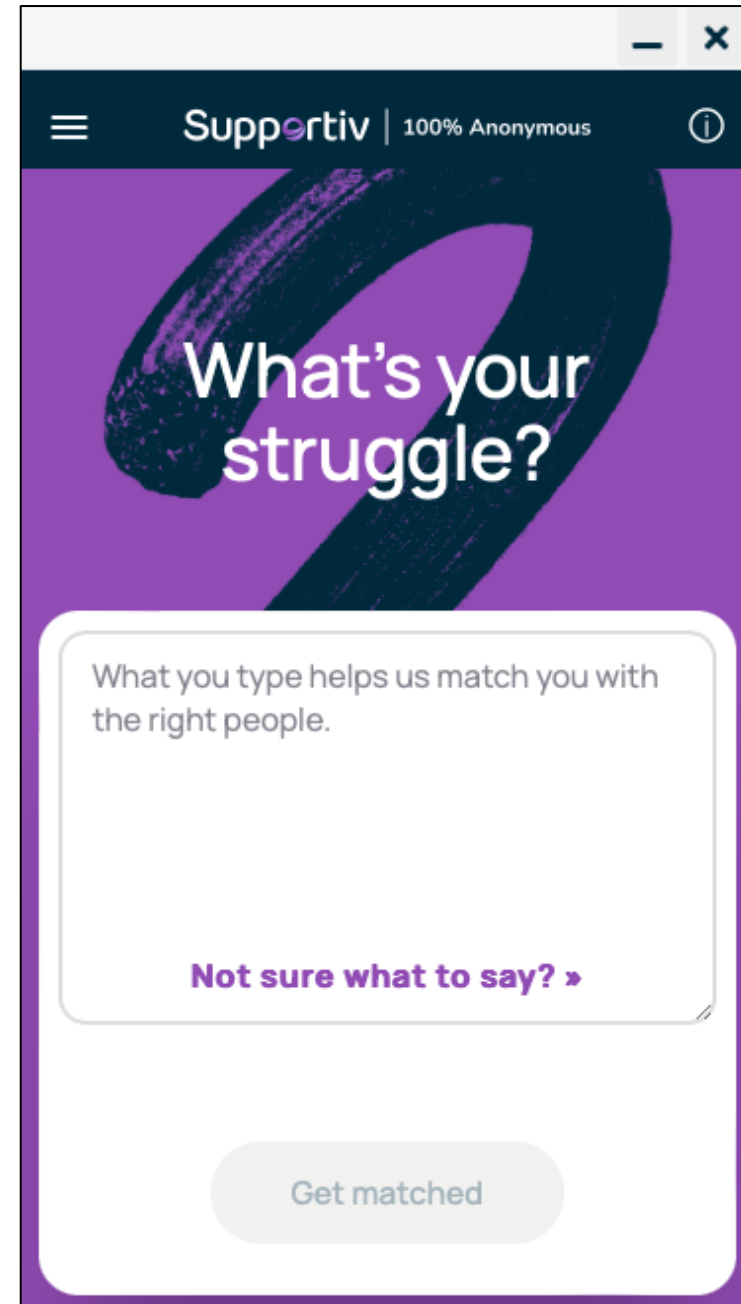
No Cost Virtual Peer Support

Powered by **Supportiv**

Anonymous

Virtual peer-to-peer
chat support

is available to you through
Canopy EAP!



What is Supportiv Virtual Peer Support?

Live, 24/7, ANONYMOUS small group chats

No appointment – connect in <30 seconds

Precision-matched by struggle - all struggles welcome

Facilitated & safeguarded by trained moderators

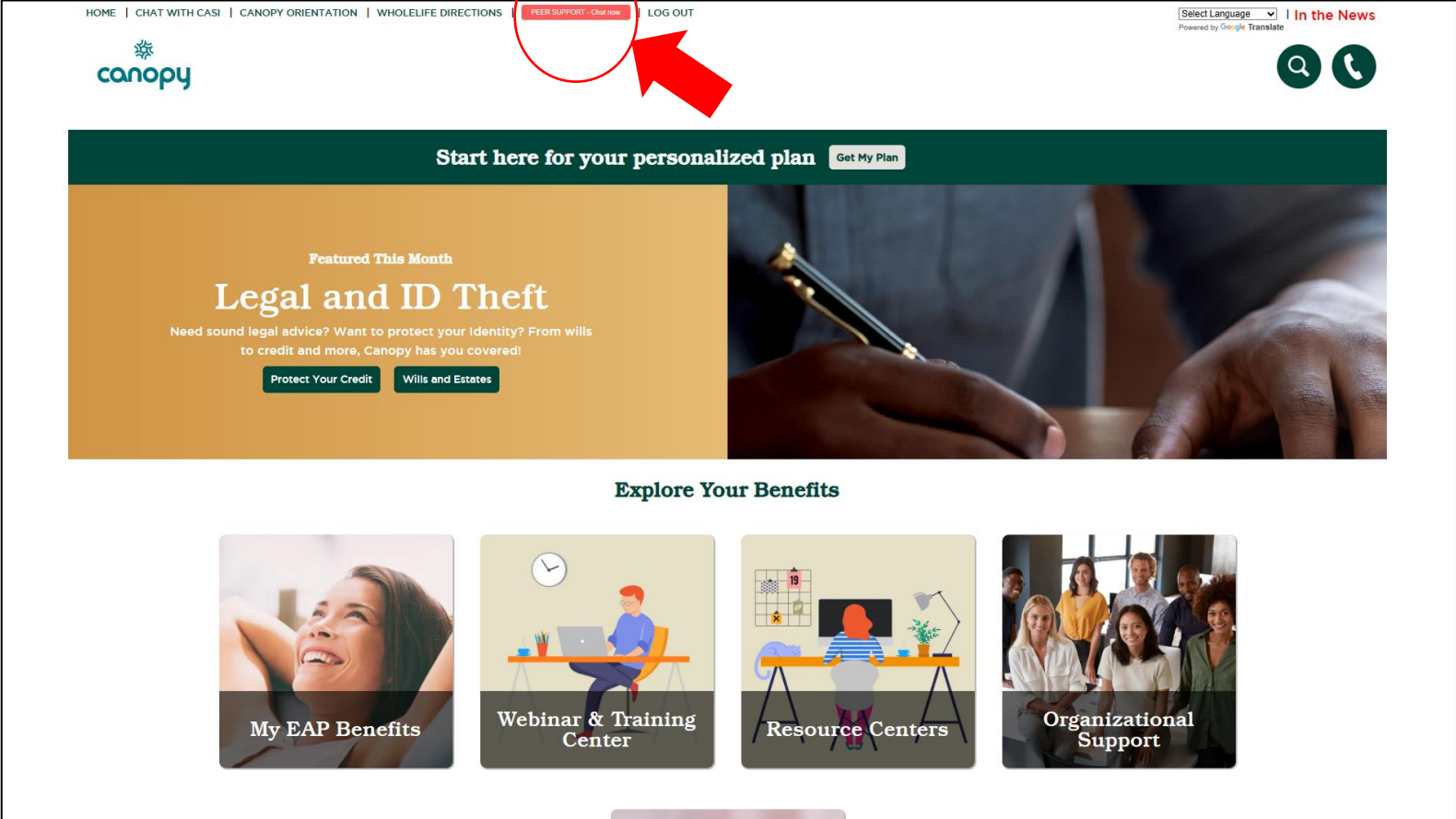
Real-time resources

How Do I Access Supportiv Virtual Peer Support?



And learn more at:
supportiv.com/PEBB

How Do I Access Supportiv Virtual Peer Support?



Key Takeaways

Free and Confidential

For Employees AND Family

24/7/365

Member Hub

Anonymous Virtual Peer Support



Questions?





Thank you



canopy
innovative wellbeing