Beyond what’s required

2023 Health Plans for Oregon Individuals and Families
The kind of help you’d expect from a friend.

At PacificSource, member service is more than professional—it’s personal.

What’s more, it’s local. The people who help you are right here in the Northwest. We answer your calls in less than 30 seconds on average, according to internal call reports. And we’re committed to going beyond what’s required to make sure you’re satisfied.

PacificSource is a not-for-profit community health plan. We don’t answer to shareholders, but to members, providers, producers, and employers—the people who depend on our products and services.
Health plans that focus on the right things: you, your doctor, and your community

A unique, not-for-profit partnership
PacificSource is different. We’re a local health insurer that works closely with highly rated providers to deliver exceptional member experience.

Integrated care that revolves around members
This patient-centered approach is enabled by close collaboration with our provider partners, supported by best-in-class data analytics.

High-value care and lower costs
We strive to compensate providers based on quality of outcomes and overall value—not volume.

Ongoing investment in community health
As a not-for-profit insurer, PacificSource continually invests in our own neighborhoods, through financial aid and access to healthcare for diverse populations and those most in need.
Benefits that go beyond what’s required

**Expanded telehealth coverage**
Members can see a doctor without leaving home. You’ll get the care you need, when and where you need it.

**No referrals required with any plan**
Our plans don’t require members to visit a primary care doctor before seeing a specialist. (Some specialists may have their own referral requirements.)

**No-cost preventive care and preventive drugs**
We’re pleased to offer $0 copays on:
- Well-baby and well-child care
- Annual checkups
- Prenatal consultations
- Preventive mammograms and colonoscopies
- Immunizations
- Dozens of preventive drugs—including 82 more than the law requires (Note: Standard plans only use the Standard ACA drug list.)

**Human service**
No automated phone trees or offshore call centers
InTouch puts you in charge

Manage your benefits from your computer, phone, or tablet—24/7.

You’ll have secure access to all your insurance information, plus valuable health-related extras, with our InTouch site and iOS/Android app.

With InTouch you can:

- Display your member ID
- Schedule doctor visits—physical and behavioral health—through Teladoc®
- Review what’s covered by your plan
- Read Explanation of Benefits statements
- Check your deductible status
- Search for a doctor
- Select your primary care provider
- Call our free 24-Hour NurseLine
- Work toward health goals with our health and wellness portal
- Reach our Customer Service team
The Navigator difference

A coordinated network of highly rated medical professionals

Your provider network determines which doctors and hospitals are covered at the highest benefit level.

In Oregon, the Navigator network includes, among many others, Legacy Health, Legacy Health Partners, OHSU Health, St. Charles Health System, Samaritan Health Services, PeaceHealth, McKenzie-Willamette Medical Center, Asante, and Central Oregon Independent Practice Association. Plus thousands of independent practitioners, including acupuncture, chiropractic, and naturopathic care providers.

Navigator also offers out-of-network benefits, for greater freedom and choice.
Navigator

Cost-effective care coordination that puts members at the center

Navigator is our clinically integrated product. We work with members and a network of local, highly rated healthcare providers focused on quality outcomes.

With Navigator, you get a plan that:

- Supports you on your journey toward optimal health
- Values and promotes your healthcare engagement
- Provides empowering self-management tools
- Emphasizes shared decision making with providers

Members experience seamless, accountable care from a dedicated team of providers.

Pharmacy integration
Primary care
Scheduling and logistics
Specialist care
Community resources

Member

Care coordination and oversight
The doctors and hospitals you want
We’ve partnered with well-respected health centers and hospitals in the region to provide members and their families with quality care.

**Oregon**
- Statewide
  - Legacy Health
  - St. Charles Health System
  - Central Oregon Independent Practice Association
  - OHSU Health
  - Legacy Health Partners
  - McKenzie-Willamette Medical Center
  - The Portland Clinic
  - PeaceHealth
  - ASANTE
  - Samaritan Health Services

**Idaho**
- Blackfoot
- Boise
- Nampa/Caldwell
- Pocatello
- Twin Falls

**Montana**
- Statewide
  - Billings Clinic
  - Providence St. Patrick Hospital
  - Community Medical Center
  - St. Peter’s Health
  - SCL Health
  - Logan Health

**Washington**
- Spokane
- Tacoma
- Vancouver

In-network availability is based on member’s plan and network.
Navigator is available for purchase by people living in any Oregon county.

In-network, nationwide

Outside the Northwest?

With **Navigator**, your in-network coverage goes with you thanks to partnerships with **First Health®** and **First Choice Health.™**

Our four-state provider network

Provider networks through **First Health®** and **First Choice Health.™** (Alaska)

Out-of-network benefits

Want to see a doctor who’s not in your network? With Navigator, their services are covered, up to an allowed amount.
We cover more than **49,000** individual members and their families across the Greater Northwest.

PacificSource covers independent people just like you who get their health insurance direct, not from an employer.

Source: monthly enrollment report, February 2022
<table>
<thead>
<tr>
<th>Plan</th>
<th>2023</th>
<th>Preventive Benefits</th>
<th>In-Network &amp; Out-of-Network Deductible</th>
<th>Preventive Services</th>
<th>Preventive Drugs, Contraceptives</th>
<th>Accident Benefit</th>
<th>In-Network &amp; Out-of-Network Deductible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gold 5001</td>
<td>30%</td>
<td>0% after deductible</td>
<td>$10,000 / $20,000</td>
<td>30% after deductible</td>
<td>Covered in full up to $500,</td>
<td>$9,100 / $18,200</td>
<td>30% after deductible</td>
</tr>
<tr>
<td>Silver 3200</td>
<td>20%</td>
<td>0% after deductible</td>
<td>$10,000 / $20,000</td>
<td>20% after deductible</td>
<td>Covered in full up to $500,</td>
<td>$9,100 / $18,200</td>
<td>30% after deductible</td>
</tr>
<tr>
<td>Silver 2900</td>
<td>90%</td>
<td>90% after deductible</td>
<td>$10,000 / $20,000</td>
<td>Covered in full up</td>
<td>Covered in full</td>
<td>$9,100 / $18,200</td>
<td>30% after deductible</td>
</tr>
<tr>
<td>Silver 4000</td>
<td>30%</td>
<td>0% after deductible</td>
<td>$10,000 / $20,000</td>
<td>30% after deductible</td>
<td>Covered in full up to $500,</td>
<td>$9,100 / $18,200</td>
<td>30% after deductible</td>
</tr>
<tr>
<td>Silver 4000</td>
<td>50%</td>
<td>0% after deductible</td>
<td>$10,000 / $20,000</td>
<td>50% after deductible</td>
<td>Covered in full up to $500,</td>
<td>$9,100 / $18,200</td>
<td>30% after deductible</td>
</tr>
<tr>
<td>Bronze 7000</td>
<td>30%</td>
<td>0% after deductible</td>
<td>$10,000 / $20,000</td>
<td>30% after deductible</td>
<td>Covered in full up to $500,</td>
<td>$9,100 / $18,200</td>
<td>30% after deductible</td>
</tr>
<tr>
<td>Bronze 9100</td>
<td>50%</td>
<td>0% after deductible</td>
<td>$10,000 / $20,000</td>
<td>50% after deductible</td>
<td>Covered in full up to $500,</td>
<td>$9,100 / $18,200</td>
<td>30% after deductible</td>
</tr>
<tr>
<td>Catastrophic</td>
<td>90%</td>
<td>90% after deductible</td>
<td>$10,000 / $20,000</td>
<td>90% after deductible</td>
<td>Covered in full up to $500,</td>
<td>$9,100 / $18,200</td>
<td>30% after deductible</td>
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<tr>
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<td>30% after deductible</td>
</tr>
</tbody>
</table>

Notes:
- All individuals up to 26 years of age with a high-risk medical condition are eligible for catastrophic coverage.
- Preventive care is covered at 100% without a deductible under the ACA.
- Out-of-network care is subject to a maximum-of-10% coinsurance and no copay for preventive care.
- In-network care is subject to a maximum-of-10% copay for preventive care.

Contact: [Horizon Health Care](mailto:horizonhealthcare@gmail.com) or [Horizon Health Insurance](mailto:horizonhealthinsurance@gmail.com) for details on the Summary of Benefits. For more information, please call [888-977-9299](tel:888-977-9299) or visit [HorizonHealthIns.com](http://HorizonHealthIns.com).
Vision care for kids

Pediatric vision benefits for members through age 18

All of our medical plans include pediatric vision coverage. This includes routine eye exams at no cost when seeing an in-network doctor. See plan comparison on previous page for details.
Decide on **dental**

**Good dental health can lead to better overall health. You can:**

- Add one of our dental plans to your health plan
- Select dental-only
- Purchase these plans year-round, not just during open enrollment

### 2023 Oregon Individual and Family Dental Plan Comparison

**USE THIS CHART TO COMPARE OUR DENTAL PLANS**

<table>
<thead>
<tr>
<th></th>
<th>Dental Advantage 0-20-50 1000</th>
<th>Dental Advantage 0-20-50 1500</th>
<th>Kids Dental Advantage 0-20-50 (coverage for members age 18 and under)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Advantage Network</strong></td>
<td><strong>Advantage Network</strong></td>
<td><strong>Advantage Network</strong></td>
</tr>
<tr>
<td></td>
<td><strong>IN NETWORK</strong></td>
<td><strong>OUT OF NETWORK</strong></td>
<td><strong>IN NETWORK</strong></td>
</tr>
<tr>
<td><strong>Annual Deductible</strong></td>
<td>N/A</td>
<td>$50 / $150</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Individual / Family</strong></td>
<td>N/A</td>
<td>$50 / $150</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Annual Maximum Benefit</strong></td>
<td>$1,000</td>
<td>$1,500</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Per person, age 19 and older</strong></td>
<td>$375 / $750</td>
<td>N/A</td>
<td>$375 / $750</td>
</tr>
<tr>
<td><strong>Pediatric Out-of-Pocket Maximum</strong></td>
<td>Ind. / Fam., age 18 and younger</td>
<td>$375 / $750</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>NO DEDUCTIBLE, MEMBER PAYS:</strong></td>
<td>Covered in full</td>
<td>Gold in full</td>
<td>Covered in full</td>
</tr>
<tr>
<td><strong>Class I Services</strong></td>
<td>20%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td><strong>NO DEDUCTIBLE, MEMBER PAYS:</strong></td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>Covered in full</td>
</tr>
<tr>
<td><strong>Class II Services</strong></td>
<td>20%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td><strong>NO DEDUCTIBLE, MEMBER PAYS:</strong></td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>Covered in full</td>
</tr>
<tr>
<td><strong>Class III Services</strong></td>
<td>50%</td>
<td>50%</td>
<td>50%</td>
</tr>
<tr>
<td><strong>Exclusion Period</strong></td>
<td>Class II: 6 months; Class III: 12 months</td>
<td>Class II: 6 months; Class III: 12 months</td>
<td>None</td>
</tr>
</tbody>
</table>

This is a brief summary. Contact a Coverage Advisor at **855-330-2792** or by email at CoverageAdvisors@PacificSource.com. For more details, search individual and family plans at PacificSource.com. Accessibility help: for assistance reading this table or the rest of the document, please call us at **855-330-2792**, TTY: 711. We accept all relay calls.
Finding the **right plan**

One factor as you decide on a plan will be whether you want one that can be paired with a health savings account (HSA). Here are things to consider.

<table>
<thead>
<tr>
<th><strong>All plans</strong></th>
<th><strong>All our health plans</strong> include coverage for preventive care, $0 annual physicals from in-network providers, $0 copays on many preventive drugs, and most vaccinations.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HSA</strong></td>
<td><strong>HSA-qualified plans</strong> help you save for healthcare expenses like deductibles and coinsurance. The plans require that all major benefits be subject to your deductible.</td>
</tr>
<tr>
<td></td>
<td>With HSA plans, you’ll set up a dedicated bank account, contributions to which are 100% tax deductible (up to a maximum), like an IRA. Another benefit: withdrawals from your HSA account to pay for qualified medical expenses are tax-free.</td>
</tr>
<tr>
<td><strong>Non-HSA</strong></td>
<td><strong>Non-HSA plans</strong> allow you to use some benefits for a copay prior to meeting your deductible (such as primary care, urgent care, or pharmacy).</td>
</tr>
</tbody>
</table>
Ten more ways PacificSource gives you more

Access to highly rated hospitals and urgent care centers

Affordable gym memberships through Active&Fit Direct™

Global emergency services from Assist America®

Help quitting tobacco

Home-delivered pharmacy orders

$500 accident benefit with most plans

No-cost care management for chronic conditions

Prenatal resources for expectant parents

Up to $150 reimbursement for health & wellness classes

Weight Watchers® program discounts

Additional benefits are not considered insurance.
Next steps:

Select a health plan
(see the big chart)

Decide on dental
(see the smaller chart)

Shop and enroll:

- Contact your broker
- Online at Shop. PacificSource.com/individual
- Or call us at 855-983-8844
  TTY: 711
  We accept all relay calls
We’re here to help.

It’s natural to have questions about a topic as important as your family’s health. We understand, and we’re happy to speak with you by phone or email.

**Phone:** 800-814-6827  
**TTY:** 711. We accept all relay calls.

**Email:** [CoverageAdvisors@PacificSource.com](mailto:CoverageAdvisors@PacificSource.com)

PacificSource.com