Beyond what’s required

2023 Health Plans for Idaho Large Groups | 51+
Here to help

Since our founding in 1933, we’ve learned a lot about keeping members and employers satisfied. Year in and year out, we’ve invested in the relationships and technologies that mean a better experience for all.

Our staff is right here in the Northwest. We answer member calls in less than 30 seconds on average, according to internal call reports. And we’re committed to doing what it takes to keep clients happy.

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: **members, providers, and communities**

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 fairly, 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.

98%
That’s our average employer satisfaction rating, based on surveys conducted March 2021 – February 2022. The remaining 2%? We’re working on it.
Benefits that go beyond what’s required

**Expanded telehealth coverage**
Members can see a doctor without leaving home. Your employees get the care they need, where and when they 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

**Human service**
No automated phone trees or offshore call centers.

**Client service that puts you first**
You’ll have a dedicated representative who’s focused on you, your plan details, and helping you control costs.
PacificSource Health Plans covers more than **234,000** members and their families in the Greater Northwest. Our business clients include companies working in a variety of industries. That’s experience we can leverage to help you.

<table>
<thead>
<tr>
<th>Manufacturing</th>
<th>Construction</th>
<th>Education</th>
<th>Legal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wholesale Supply</td>
<td>Medical</td>
<td>Retail</td>
<td>Restaurants</td>
</tr>
<tr>
<td>Banking</td>
<td>Agriculture</td>
<td>Nonprofit</td>
<td>Transportation</td>
</tr>
</tbody>
</table>

Source: monthly enrollment report, March 2022
InTouch puts you in charge

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

You’ll have employer-only access to all your insurance information through our secure online portal.

With InTouch for Employers you can:

- **Easily pay your bill**
  View statements, pay online, and review payment history.

- **Manage enrollment status**
  Easily add, update, and delete employee information.

- **Run reports**
  Know who and how many employees are covered.

- **ID cards**
  Request ID cards or print them on demand.

- **Get info on demand**
  See benefit summaries, your contract, handbooks, and more.

- **Keep in touch**
  Easy-to-find contact information for your PacificSource representatives.
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 Idaho, the Navigator network includes St. Luke’s Health Partners, Patient Quality Alliance, Eastern Idaho Regional Medical Center, and Bingham Memorial Hospital, 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 a coordinated care product designed to advance the ideal member experience. Each member’s care is managed within a network of local, highly rated healthcare providers focused on quality outcomes.

With Navigator, you get a health plan that:

- Promotes better member healthcare engagement
- Provides empowering self-management tools
- Employs cost controlling measures
- Emphasizes shared decision-making with providers

Employees experience seamless, accountable care from a dedicated team of providers.
Give your staff the doctors and hospitals they want.
We’ve partnered with well-respected health centers and hospitals in the region to provide members and their families with quality care.

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

**Montana**
- Statewide

**Oregon**
- Statewide

**Washington**
- Spokane
- Tacoma
- Vancouver

In-network availability is based on member’s plan and network.
How Navigator benefits employers

- Multiple plan designs
- Controlled costs
- Clinical integration
- Unified communications

Navigator is available for purchase by businesses located in the following counties: Ada, Adams, Bannock, Bear Lake, Bingham, Blaine, Boise, Bonneville, Butte, Camas, Canyon, Caribou, Cassia, Clark, Custer, Elmore, Franklin, Fremont, Gem, Gooding, Jefferson, Jerome, Lemhi, Lincoln, Madison, Minidoka, Oneida, Owyhee, Payette, Power, Teton, Twin Falls, Valley, and Washington
In-network, nationwide

Our four-state provider network

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

Outside the Northwest?

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

[Additional text and table details provided]
## Drug Coverage

### Prescription (Rx)

<table>
<thead>
<tr>
<th>Plan</th>
<th>Out of Network</th>
<th>In Network</th>
<th>After Deductible</th>
<th>MEMBER PAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSA 3000_20+Rx</td>
<td>20% or 30%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>20% or 30%</td>
</tr>
<tr>
<td>HSA 3000_50+Rx</td>
<td>90%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>90%</td>
</tr>
<tr>
<td>HSA 4000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
<tr>
<td>HSA 5000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
<tr>
<td>HSA 7000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
</tbody>
</table>

### Emergency Services

<table>
<thead>
<tr>
<th>Plan</th>
<th>Out of Network</th>
<th>In Network</th>
<th>After Deductible</th>
<th>MEMBER PAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSA 3000_20+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
<tr>
<td>HSA 3000_50+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
<tr>
<td>HSA 4000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
<tr>
<td>HSA 5000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
<tr>
<td>HSA 7000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
</tbody>
</table>

### Preventive

<table>
<thead>
<tr>
<th>Plan</th>
<th>Out of Network</th>
<th>In Network</th>
<th>After Deductible</th>
<th>MEMBER PAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSA 3000_20+Rx</td>
<td>20% or 30%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>20% or 30%</td>
</tr>
<tr>
<td>HSA 3000_50+Rx</td>
<td>90%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>90%</td>
</tr>
<tr>
<td>HSA 4000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
<tr>
<td>HSA 5000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
<tr>
<td>HSA 7000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
</tbody>
</table>

### Individual / Family

<table>
<thead>
<tr>
<th>Plan</th>
<th>Out of Network</th>
<th>In Network</th>
<th>After Deductible</th>
<th>MEMBER PAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSA 3000_20+Rx</td>
<td>20% or 30%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>20% or 30%</td>
</tr>
<tr>
<td>HSA 3000_50+Rx</td>
<td>90%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>90%</td>
</tr>
<tr>
<td>HSA 4000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
<tr>
<td>HSA 5000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
<tr>
<td>HSA 7000+Rx</td>
<td>75%</td>
<td>Covered in full</td>
<td>Covered in full</td>
<td>75%</td>
</tr>
</tbody>
</table>

For hospital services, please refer to pages 1 and 2 of the plan summary for details.

*This is a brief summary. Contact us at IdahoSales@PacificSource.com or go to PacificSource.com for details or to see a plan's Summary of Benefits. Accessibility help for assistive technology users on line at www.PacificSource.com by phone 888-817-9299, TTY: 711. We accept all relay calls.
### Class I: Preventive Services

- **Exams** and x-rays
- Three dental cleanings (empirical or periodontal maintenance) per year
- Fluoride applications
- Sealant on bicuspids and permanent molars (kids through age 18 only)
- Brushing services

### Class II: Basic Services

- Simple extractions
- Periodontal scaling and root planing and/or curettage
- Full mouth debridement
- Fillings, including composite
- Endodontic (pulp therapy and root canal therapy)
- Periodontal surgery

### Class III: Major Services

- Full, immediate, or overdentures
- Crowns and bridges

### Cosmetic Orthodontia

- $1,000 or $1,500 lifetime maximum options
- 26+ enrolled employees
- 12-month exclusion period on some voluntary plans (exclusion period reduced or eliminated with prior orthodontic coverage)

---

**What’s covered?**

Here is a list of services and treatments most commonly asked about. Go to PacificSource.com to get all the details.

**Vision**

<table>
<thead>
<tr>
<th>Plan Name</th>
<th>IN NETWORK</th>
<th>OUT OF NETWORK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental Choice</td>
<td>50-1000 or 7500</td>
<td>50-1500 or 7500</td>
</tr>
<tr>
<td>Dental Advantage</td>
<td>50-1000 or 7500</td>
<td>50-1500 or 7500</td>
</tr>
<tr>
<td>Dental Choice</td>
<td>1000 or 2500</td>
<td>1500 or 2500</td>
</tr>
<tr>
<td>Dental Advantage</td>
<td>1000 or 2500</td>
<td>1500 or 2500</td>
</tr>
</tbody>
</table>

**Access for individuals with disabilities**

PacificSource is committed to providing individuals with disabilities access to services, assistance, and information. For help with this document, call PacificSource at 888-977-9299, TTY: 711. We accept all relay calls. For assistance reading this table or the rest of the document, please call us at 888-977-9299, TTY: 711. We accept all relay calls.
Choose **one plan, or more**

**Our Right Fit options let your employees choose the premium and coverage that suit them best.**

- Employees may choose from two to five different products.
- There’s no minimum enrollment, but the number of plans you offer can’t exceed the number of enrolling employees.
- Your products can use different provider networks, and employees can change products during open enrollment.
- Minimum employer contribution: 50% employee/0% dependents of your lowest-cost plan.

Underwriting guidelines apply.

### About Health Savings Accounts (HSA)

HSA-qualified plans help employees save money for healthcare expenses, such as deductibles and coinsurance. They also help employers save premium dollars—and your contributions to HSA accounts are exempt from payroll taxes.

### Need help with healthcare admin? PacificSource Administrators, Inc. (PSA) can provide:

**FSA | Flexible Spending Accounts**

Stretch healthcare dollars while helping employees save by reducing their taxable income. PSA will help you understand grace periods, carryovers, and other ways your organization can benefit.

**HRA | Health Reimbursement Arrangements**

With an HRA, you reimburse some of your employees’ medical expenses. You control how much to contribute and which types of expenses are eligible. And if you choose PacificSource Administrators, they can take care of claims filing and reimbursement through Easy Pay.

**COBRA | Administration**

Compliance is critical, so why not give COBRA administration and notifications to a team you can trust? PSA will simplify with accuracy and efficiency.
At a glance your PacificSource coverage includes:

- No-cost wellness programs to encourage employee fitness, nutrition, and behavioral health
- Optional vision coverage plans for children and adults
- Affordable fitness center access from our partner, Active&Fit Direct™
- Optional $500 benefit for covered services due to an accident outside of work
- 24-Hour NurseLine at no cost
- Education reimbursement up to $150 for health and wellness classes
- No-cost care management for chronic conditions
- Prenatal program for expectant parents
- Easy online access for you and your employees
- Home delivery of prescriptions—up to a 90-day supply
- Worry-free travel with global emergency services from Assist America®

Additional benefits are not considered insurance.
Next steps:

Choose a health plan or plans

Decide on additional coverage options

Contact your broker or our team for a quote
We’re here to help.

We know that each step may require guidance, so please contact us with any questions.

Monday through Friday from 8:00 a.m. to 5:00 p.m.

**Phone:** 888-422-1303

**TTY:** 711. We accept all relay calls.

**Email:** IdahoSales@PacificSource.com

PacificSource.com