Health insurance is complicated. We simplify it for you.
Service and tools to save you time and effort.

Four-state in-network area

Access anytime, from anywhere
Use our mobile app to access your health insurance information, including a convenient mobile ID card.

No referrals
Need to see a specialist? None of our plans require you to see your primary care physician to get a referral first. (Some specialists may have their own referral requirements.)

30 seconds or less
That’s the average wait time before someone answers when calling PacificSource customer service, according to internal call reports. No phone trees. Just real, knowledgeable people, ready to help.

We’ve been putting members first with outstanding service since 1933.

At your service
The PacificSource difference is our exceptional customer service.

We’re focused on making health insurance easier for you and your family. So you can stay healthy and happy, while controlling healthcare costs.
Get the health insurance features you want (but may not even know existed).

On-demand access to doctors by phone and video
Get the medical care you need, when and where you need it. Check your plan benefits for cost-sharing information.

Find doctors fast
Our online search directory helps you find just the right doctor, anytime you’re ready.

$0 copays on preventive care and select preventive prescription drugs
There is no charge on well baby/well child care, preventive physicals, preventive mammograms, immunizations, preventive colonoscopies, and more, when receiving care from in-network providers. Plus, select preventive prescriptions are also available at no charge.

Customer service that saves you time and effort.

Quick access to customer service
We pick up calls in 30 seconds or less, according to internal call reports.

Live, local support
We answer all member calls with real people, not automated phone trees.
Manage your health insurance benefits through our online tool from any computer or mobile device.

Secure, convenient, member-only access to your insurance information and health resources via our InTouch portal and our myPacificSource app.

Coverage information
View coverage for common services, and even some uncommon ones.

ID cards
Request ID cards and print temporary ones.

EOBs
See the explanation of benefits statements for your claims.

CaféWell
Get access to a health engagement portal (for members 18 and older).

Check your status
See how much of your deductible has been met.

Estimate costs
Find out how much procedures may cost with our treatment cost navigator.

Our New 2020 products.

The product you can enroll in is determined by which county you live in.

Our health plan products are a unique combination of networks and plan designs to fit the needs of you and your family. For 2020 we’re offering two new products: Navigator and Voyager. The county where you live determines which one of these you can enroll in.

These new products are part of our continued effort to simplify how you make informed decisions about your health, and to keep you engaged with your healthcare providers. The products further refine our mission to provide you with quality of care, accountability, access, affordability, and member choice.

Your product’s provider network determines which doctors, hospitals, and other healthcare providers are covered by in-network benefits for you. All of our Navigator and Voyager products also offer out-of-network benefits, for more freedom and choice.
Navigator

Navigator is our coordinated care product, where a member’s personal provider is navigating care within a coordinated network of health professionals who are focused on the individual throughout their health journey.

Navigator products are designed to support member engagement and promote shared decision making with providers.

Navigator gives access to a broad array of in-network providers, including local providers, providers within our four-state area, and those available for urgent and emergent conditions while traveling nationally through contracts with First Health®, and in Alaska through contracts with First Choice Health™.

Our provider partners give members personalized care through high-quality health management, and help members better understand the costs associated with their health.

Navigator is available in the following counties:
Carbon, Flathead, Lake, Lewis and Clark, Missoula, Musselshell, Park, Stillwater, Sweet Grass, and Yellowstone

In-network availability based upon member’s plan and network

The doctors and hospitals you want.
We’ve partnered with well-respected health centers and hospitals in each state so you will get top-notch quality of care and service.

Montana:
Billings
Helena
Kalispell
Missoula

Idaho:
Boise
Pocatella
Twin Falls

Oregon:
Bend
Portland Metro

Washington:
Spokane
Tacoma
Vancouver
Voyager

Voyager is a preferred provider network, suited for people who prefer a more self-directed experience.

Voyager includes a broad array of in-network providers from PacificSource in Idaho, Montana, Oregon, and Washington, as well as nationally through contracts with First Health®, and in Alaska through contracts with First Choice Health™.

We cover more than 40,000 individual members and their families in the Greater Northwest.*

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

* based on monthly enrollment report from March 2019

Voyager products give you greater choice for in-network providers.

A broader network means more freedom to choose from a bigger selection of primary care doctors, specialists, and more.

In-network availability based upon member’s plan and network
# 2020 Montana | Individual and Family Medical Plans

<table>
<thead>
<tr>
<th>Product</th>
<th>2020 Montana</th>
<th></th>
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<td>Gold 1500</td>
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</tr>
<tr>
<td>Navigator or Voyager</td>
<td>In Network</td>
<td>Out of Network</td>
<td>In Network</td>
<td>Out of Network</td>
<td>In Network</td>
<td>Out of Network</td>
<td>In Network</td>
<td>Out of Network</td>
<td>In Network</td>
<td>Out of Network</td>
<td>In Network</td>
<td>Out of Network</td>
</tr>
<tr>
<td>Deductible Individual / Family</td>
<td>$1,500 / $2,000</td>
<td>$3,000 / $6,000</td>
<td>$6,000 / $12,000</td>
<td>$8,000 / $16,000</td>
<td>$10,000 / $20,000</td>
<td>$10,000 / $20,000</td>
<td>$14,000 / $28,000</td>
<td>$14,000 / $28,000</td>
<td>$13,500 / $13,500</td>
<td>$13,500 / $27,000</td>
<td>$6,750 / $6,750</td>
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<tr>
<td>Out-of-Pocket Maximum Individual / Family</td>
<td>$5,000 / $10,000</td>
<td>$25,000 / $50,000</td>
<td>$25,000 / $50,000</td>
<td>$25,000 / $50,000</td>
<td>$16,300 / $32,600</td>
<td>$25,000 / $50,000</td>
<td>$25,000 / $50,000</td>
<td>$25,000 / $50,000</td>
<td>$13,500 / $27,000</td>
<td>$6,750 / $25,000</td>
<td>$6,750 / $25,000</td>
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</tbody>
</table>

## Preventive Services
- Covered in Full
- * Not subject to deductible.

## Preventive Drug Coverage
- Covered in Full
- ^ Well baby/well child care services are not subject to deductible. Preventive mammograms are not subject to deductible and are covered in full both in and out of network.

## Accident Benefit
- Covered in Full up to $500, within 90 days of accident.

## Telemedicine (including behavioral health for adults)
- 10% 35% 10% 35%
- * Not subject to deductible.

## Office Visits
- Primary/Urgent Care: $10
- Specialist: 40%

## Inpatient Hospital
- 10% 35% 10% 35%

## Lab / X-ray
- 10% 35% 10% 35%

## Physical, Occupational, and Speech Therapy
- 10% 35% 10% 35%

## Outpatient Surgery
- 10% 35% 10% 35%

## Emergency Services
- 10% 35% 10% 35%

## Chiropractic / Acupuncture
- Visit per benefit period: Chn: 10 / Acu: 12
- Tier 1: $15
- Tier 2: $30
- Tier 3: $45
- Tier 4: $60

## Prescription (Rx) Drug Coverage
- Out-of-network: 30-day max fill, no more than 3 per year
- Tier 1: $15
- Tier 2: $30
- Tier 3: $45
- Tier 4: $60

## Pediatric Eye Exam
- Covered in Full
- Covered in Full up to $40

## Pediatric Vision Hardware
- Covered in full up to $150
- Subject to in-network deductible and 10%

*Not subject to deductible. ^ Well baby/well child care services are not subject to deductible. Preventive mammograms are not subject to deductible and are covered in full both in and out of network. † Available when purchased from sources other than the exchange. This is a brief summary. Contact a Coverage Advisor at (855) 330-2792 or by email at coverageadvisors@pacificsource.com. Go to PacificSource.com for details or to see a plan's Summary of Benefits.
Kids in focus

Pediatric vision benefits (for members through age 18).

All of our medical plans include vision coverage, including routine eye exams for members through age 18 at no cost, when seeing an in-network doctor. Most plans also include vision hardware coverage up to $150 for members through age 18, and amounts over that are covered based on your plan’s specific benefits.

Decide on dental

Good dental health can lead to better overall health. You can add one of our dental plans to your health plan, or select dental-only. Available for purchase year-round, not just during open enrollment.

2020 Montana

Individual and Family Dental Plan Comparison

USE THIS CHART TO COMPARE OUR DENTAL PLANS

<table>
<thead>
<tr>
<th>Dental Choice 0-20-50 1000</th>
<th>Dental Choice 0-20-50 1500</th>
<th>Kids Dental Choice 0-20-50 (coverage for members age 18 and under)</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Network Needed</td>
<td>No Network Needed</td>
<td>No Network Needed</td>
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<tr>
<td>ANY PROVIDER</td>
<td>ANY PROVIDER</td>
<td>ANY PROVIDER</td>
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<tr>
<td>Annual Deductible</td>
<td>Annual Deductible</td>
<td>Annual Deductible</td>
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<tr>
<td>Individual / Family</td>
<td>Individual / Family</td>
<td>Individual / Family</td>
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<tr>
<td>$50 / $150</td>
<td>$50 / $150</td>
<td>$50 / $150</td>
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<tr>
<td>Annual Maximum Benefit</td>
<td>Annual Maximum Benefit</td>
<td>Annual Maximum Benefit</td>
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<tr>
<td>Per person, age 19 and older</td>
<td>Per person, age 19 and older</td>
<td>Per person, age 19 and older</td>
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<tr>
<td>$1,000</td>
<td>$1,500</td>
<td>$500 / $150</td>
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<tr>
<td>Pediatric Out-of-Pocket Maximum</td>
<td>Pediatric Out-of-Pocket Maximum</td>
<td>Pediatric Out-of-Pocket Maximum</td>
</tr>
<tr>
<td>Individual/Family, age 18 and under</td>
<td>Individual/Family, age 18 and under</td>
<td>Individual/Family, age 18 and under</td>
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<tr>
<td>$350 / $700</td>
<td>$350 / $700</td>
<td>$350 / $700</td>
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<tr>
<td>Class I Services</td>
<td>Class I Services</td>
<td>Class I Services</td>
</tr>
<tr>
<td>Covered in Full</td>
<td>Covered in Full</td>
<td>Covered in Full</td>
</tr>
<tr>
<td>AFTER DEDUCTIBLE, MEMBER PAYS:</td>
<td>AFTER DEDUCTIBLE, MEMBER PAYS:</td>
<td>AFTER DEDUCTIBLE, MEMBER PAYS:</td>
</tr>
<tr>
<td>Class II Services</td>
<td>Class II Services</td>
<td>Class II Services</td>
</tr>
<tr>
<td>20%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Class III Services</td>
<td>Class III Services</td>
<td>Class III Services</td>
</tr>
<tr>
<td>50%</td>
<td>50%</td>
<td>50%</td>
</tr>
<tr>
<td>Exclusion Period</td>
<td>Exclusion Period</td>
<td>Exclusion Period</td>
</tr>
<tr>
<td>Per person, age 19 and older</td>
<td>Per person, age 19 and older</td>
<td>Per person, age 19 and older</td>
</tr>
<tr>
<td>Class II: 6 months; Class III: 12 months</td>
<td>Class II: 6 months; Class III: 12 months</td>
<td>Class II: 6 months; Class III: 12 months</td>
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<tr>
<td>Psychosurgery</td>
<td>Psychosurgery</td>
<td>Psychosurgery</td>
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<tr>
<td>NO DEDUCTIBLE, MEMBER PAYS:</td>
<td>NO DEDUCTIBLE, MEMBER PAYS:</td>
<td>NO DEDUCTIBLE, MEMBER PAYS:</td>
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<tr>
<td>After DEDUCTIBLE, MEMBER PAYS:</td>
<td>After DEDUCTIBLE, MEMBER PAYS:</td>
<td>After DEDUCTIBLE, MEMBER PAYS:</td>
</tr>
<tr>
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</tbody>
</table>

This is a brief summary. Contact us at (855) 330-2792 or by email at coverageadvisors@pacificsource.com. For more details, search individual and family plans at PacificSource.com.
Helping you choose a health plan

Health plans can be complicated. We can help simplify your choice.

All our health plans include coverage for preventive care, $0 annual physicals from in-network providers, and most vaccinations.

<table>
<thead>
<tr>
<th>Non-HSA</th>
<th>HSA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-HSA plans allow you to access some benefits for a copay prior to meeting your deductible (such as primary care, urgent care, or pharmacy).</td>
<td>HSA-qualified plans help you save money for healthcare expenses, such as deductibles and co-insurance. This type of plan requires that all major benefits be subject to the deductible.</td>
</tr>
</tbody>
</table>

**Great stuff** you and your family get with our plans.

### Convenience

- **Easy online access** from desktop, tablet, or mobile app
- **Access to nearby care** doctors, hospitals and urgent care centers
- **Video and phone doctor visits** through our partner, Teladoc®
- **Digital member ID cards** via our website and mobile app
- **No referrals required by our plans** for you to see a specialist
- **Mail-order and retail pharmacy** for up to a 90-day supply
- **Online provider directory** to easily find who’s in-network
- **Worry-free travel** with global emergency services from Assist America®

### Cost savings

- **$0 copays** on select preventive care and preventive prescription drugs from in-network providers and pharmacies
- **Affordable fitness center access** from our partner, Active&Fit Direct™
- **Jenny Craig® and WeightWatchers®** Weight-management program discounts
- **24-Hour NurseLine at no cost**
- **Health Education class reimbursement** up to $150 for health and wellness classes, such as first aid/CPR, pregnancy, parenting, heart health, and nutrition
- **No-cost care management programs** for chronic conditions
- **Prenatal program** with info and consultations for expectant mothers
- **Help quitting smoking** or other tobacco use with the Quit For Life® tobacco cessation program

Additional benefits not considered as insurance.
What’s next?

Here’s how to enroll in our products:

1. Find the network offered, based on where you live
2. Choose a health plan
3. Decide on dental
4. Contact your agent or our team for a quote

Stay healthy and happy with PacificSource.
We’re here to help.

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

Phone: (855) 330-2792
Email: coverageadvisors@pacificsource.com

PacificSource.com