

# PacificSource 2025 Individual / Family Plans



# We believe in Members First

Throughout our eighty plus years in business, we've made personal human service a core value. It's earned us a reputation for taking exceptional care of people and their communities.

This, combined with our not-for-profit status, keeps our focus where it belongs: on the well-being and satisfaction of our members.

# What "Members First" Means



#### **Human Service**

A knowledgeable person answers your call in less than 30 seconds.



Quality Care
Our network of professional providers extends throughout the U.S.



#### **Easy Access**

Our InTouch site and mobile app give you access to your benefits 24/7.



#### **Condition Support**

We offer programs that help members with chronic or more-intensive medical needs get cost-effective care.

# **Beyond the Northwest,** in-network care is available through our collaboration with Aetna Signature Administrators.®



## The Navigator network – Montana

We partner with highly rated local providers, including:









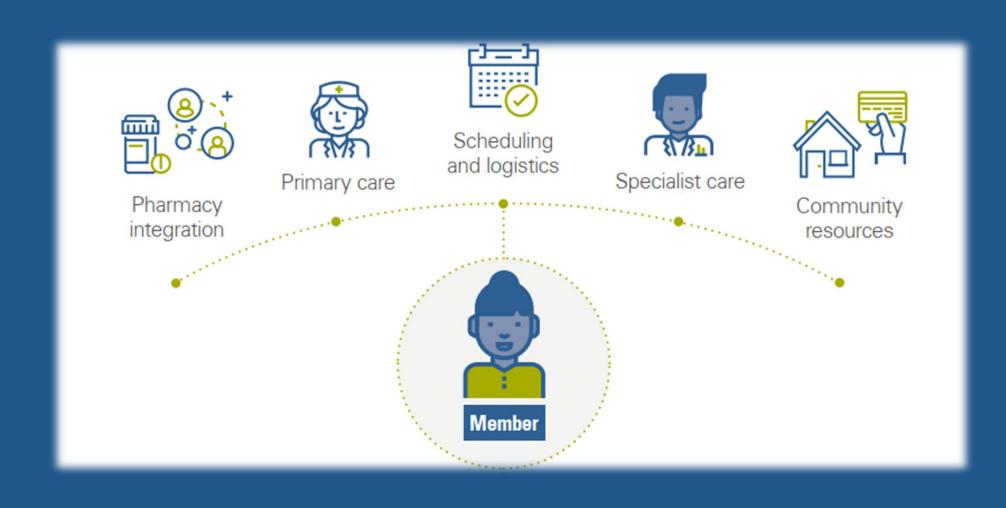








# Montana Individual and Family



# **Individual Direct and Exchange Plans**

Plan Name	Deductible	ООР	PCP OV / Spec	Coinsurance	Rx structure
Bronze HSA 7500 8050	\$7,500 \$8,050	\$7,500 \$8,050	After deductible 0%	After deductible, 0%	After deductible 0%
Bronze 7000	<del>\$7,000</del>	<del>\$8,550</del>	\$35 / after deductible 40%	After deductible, 40%	After deductible 40%
Bronze 9400 9200	\$9,400 \$9,200	\$9,400 \$9,200	After deductible 0%	After deductible, 0%	After deductible 0%
Silver 5000	\$5,000	\$7,600 \$8,200	<del>\$35</del> <b>\$25</b> / <del>\$70</del> <b>\$50</b>	After deductible, 30%	After deductible 30%
Silver HSA 3500	\$3,500	\$6,700	After deductible 25%	After deductible, 25%	After deductible 25%
Gold 1500	\$1,500	\$7,000	After deductible, 10%	After deductible, 10%	\$15 / \$60 / \$100 / \$250

Bronze 7000 discontinued due to federal limitation on plan offerings outside of CMS standard plan.

# Silver Cost Share Reduction plans - Exchange

Plan Name	Deductible	ООР	PCP OV / Spec	Coinsurance	Rx structure
Silver 5000	\$5,000	\$8,200	\$25/ \$50	After deductible, 30%	After deductible 30%
Silver 5000 (73)	\$3,200	\$7,300	\$25/\$50	After deductible, 30%	After deductible, 30%
Silver 5000 (87)	\$700	\$2,500	\$25/\$50	After deductible, 30%	After deductible, 30%
Silver 5000 (94)	\$300	\$675	\$25/\$50	After deductible, 30%	After deductible, 30%
Silver HSA 3500	\$3,500	\$6,700	After deductible, 25%	After deductible, 25%	After deductible, 25%
Silver 3500 (73)	\$2,550	\$6,000	After deductible, 25%	After deductible, 25%	After deductible, 25%
Silver 3500 (87)	\$1,100	\$1,800	After deductible, 20%	After deductible, 20%	After deductible, 20%
Silver 3500 (94)	\$275	\$675	After deductible, 20%	After deductible, 20%	After deductible, 20%

Cost share reduction plans for the Silver HSA 3500 are not HSA eligible

# Individual Direct and Exchange Standard Plans

Plan Name	Deductible	ООР	PCP OV / Spec	Coinsurance	Rx Structure*
Standard Expanded Bronze^	\$7,500	\$9,400 \$9,200	\$50 / \$100	After deductible, 50%	\$25 / \$50 after deductible / \$100 after deductible / \$500 after deductible
Standard Silver^	\$5,900 \$5,000	\$ <del>9,100</del> \$8,000	\$40 / \$80	After deductible, 40%	\$20 / \$40 / \$80 after deductible / \$350 after deductible
Standard Gold <sup>^</sup>	\$1,500	\$8,700 \$7,800	\$30 / \$60	After deductible, 25%	\$15 / \$30 / \$60 / \$250

<sup>\*</sup>ACA preventive drug list, not the PacificSource Preventive No-cost Extra Drug List ^No Accident Benefit

# **Standard Silver Cost Share Reduction Plans - Exchange**

Plan Name	Deductible	ООР	PCP OV / Spec	Coinsurance	Rx structure
Standard Silver	\$5,000	\$8,000	\$40 / \$80	After deductible, 40%	\$20 / \$40 / \$80 after deductible / \$350 after deductible
Standard Silver (73)	\$3,000	\$6,400	\$40 / \$80	After deductible, 40%	\$20 / \$40 / \$80 after deductible / \$350 after deductible
Standard Silver (87)	\$500	\$3,000	\$20 / \$40	After deductible, 30%	\$10 / \$20 / \$60 after deductible / \$250 after deductible
Standard Silver (94)	\$0	\$2,000	\$10 / \$20	No deductible, 25%	No charge / \$15 / \$50 / \$150

<sup>\*</sup>ACA preventive drug list, not the PacificSource Preventive No-cost Extra Drug List ^No Accident Benefit

### **Individual Direct ONLY Plans**

Plan Name	Deductible	ООР	PCP OV / Spec	Coinsurance	Rx structure
Silver 4000	\$4,000	\$9,400 \$9,200	\$20 / \$40	30%	After deductible 30%
Silver 3000	\$3,000	\$9,400 \$9,200	\$35-\$30 / after deductible \$70-\$60	40%	\$15 / \$60 / \$100 / \$250

# **Pediatric and Family Dental Plans**

Plan Name	Class I coinsurance	Class II coinsurance	Class III coinsurance	Deductible	Annual Max
Dental Choice 0-20-50 1000	No deductible, 0%	After deductible, 20%	After deductible, 50%	\$50 Individual \$150 Family	Adult annual Max \$1,000
Dental Choice 0-20-50 1500	No deductible, 0%	After deductible, 20%	After deductible, 50%	\$50 Individual \$150 Family	Adult annual Max \$1,500
Kids Dental Choice 0-20-50	No deductible, 0%	After deductible, 20%	After deductible, 50%	\$50 Individual \$150 Family	\$400 \$425 Individual \$800 \$850 Family

All plans offered on and off the marketplace.

Adult services: 6-month exclusion for Class II services and 12-month exclusion for Class III services

# Great stuff our members get with our plans.



#### Convenience

- Easy online access
  from desktop, tablet, or mobile app
- Access to nearby care from doctors, hospitals, and urgent care centers
- Phone or video doctor visits including behavioral visits, through local providers, and nationally through our partner, Teladoc®
- Digital member ID cards via our website and mobile app
- No referrals required by our plans 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®

#### **Savings**

- \$0 copays
  on select preventive prescriptions from in-network pharmacies
- Affordable fitness center membership from our partner, Active&Fit Direct™
- **Weight Watchers®**weight-management program discounts
- 24-Hour NurseLine at no cost to members
- Health education allowance reimbursement up to \$150 for health and wellness classes
- No-cost condition support for members with chronic conditions
- ▼ Prenatal program
  with information and consultations for expectant mothers

### Teladoc | telehealth access to care



#### **Access Anytime**

Provide 24/7, on-demand access to board-certified providers by video, phone, or mobile app.



#### **Services Offered**

Behavioral health and general medical coverage available.



#### **Treat Health Issues**

Diagnose, treat, and prescribe medications (if necessary) for common health issues.

# InTouch for Members (ITM)

# Access Your Plan Info from Your Computer, Tablet, or Phone

We know your busy schedule doesn't always coincide with our customer service hours. To help, we offer InTouch for Members, a secure website available 24/7 from any computer or mobile device.



# ITM and ITM Mobile App

# Access Your Benefits and Wellness Resources Online

Once you've registered for InTouch, you can review your covered services, services you've received, deductibles, co-insurance, co-pays, explanation of benefits, and more.



# InTouch lets you manage your benefits whenever, wherever



### MyPacificSource puts InTouch in your pocket

Our smartphone app makes it easy to find in-network doctors and hospitals wherever you are. Search for primary care doctors, specialists, alternative care providers, and more.

#### You can also:

- View your digital member ID card
- Call our 24-hour NurseLine
- See if you've met your deductible and out-of-pocket max
- Find out which services are covered
- View your Explanation of Benefits statements

First create your InTouch account, then download the app and log in.

# Questions

Please contact me at:

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