

# Elect

## Plan Features and Benefits

Our plans are well-balanced to meet the needs of individuals and families in Oregon. Choose the plan with the features and benefits that are important to you.

All plans cover treatment for preventive care, illness and injury, maternity care, and prescription drugs.

Coverage levels differ from plan to plan and some plans cover alternative practitioner services.

All plans have an annual maximum benefit of \$2 million per person.

For details, please see the Benefit Comparison on the right side of this page or visit our website at [PacificSource.com](http://PacificSource.com).

### Value-Added Services

Take advantage of these member programs, available to you at no additional cost:

#### Online Tools at PacificSource.com

InTouch for Members lets you track your benefits online. The PacificSource Provider Directory helps you find up-to-date information about local participating providers.

#### Health and Wellness Programs\*

Better your health and manage existing conditions with the help of our health and wellness programs. Our "extras" include tobacco cessation and reimbursement for hospital-based wellness classes.\* You can also access information and manage your health online through Health Manager.

#### Global Emergency Services

Travel worry free with global emergency services from Assist America®. If you experience a medical emergency when traveling 100 or more miles from home or in a foreign country, Assist America offers a wide range of services to help you.

*These value-added services are not insurance, but are offered in addition to your medical plan to help you take charge of your health.*

\* Visit our website, [PacificSource.com](http://PacificSource.com), for more details or to obtain a complete list of Elect benefits, exclusions and limitations.

	Elect <b>Premiere</b>	Elect <b>Preferred</b>	Elect <b>Value Option</b>	Elect <b>HSA</b>
Individual Annual Deductible/Out-of-Pocket (OOP) Limit (Limit includes the deductible)	Deductible/OOP Limit \$1,000/\$5,000 \$2,500/\$5,000 \$5,000/\$10,000 \$7,500/\$15,000 \$10,000/\$20,000	Deductible/OOP Limit \$500/\$5,000 ✓ \$1,000/\$5,000 \$2,500/\$5,000 \$5,000/\$10,000 \$7,500/\$15,000 \$10,000/\$20,000	Deductible/OOP Limit \$2,500/\$7,500 \$5,000/\$10,000 \$7,500/\$12,500 \$10,000/\$15,000	Deductible/OOP Limit \$1,500/\$5,000 \$2,000/\$5,000 \$3,000/\$5,800 \$5,000/\$5,000
Accident Benefit (accident-related covered expenses)	The first \$5,000 of covered expense within 90 days of an accident is paid at 100% and is not subject to the deductible. The balance is covered as shown below.	The first \$2,500 of covered expense within 90 days of an accident is paid at 100% and is not subject to the deductible. The balance is covered as shown below.	The first \$1,000 of covered expense within 90 days of an accident is paid at 100% and is not subject to the deductible. The balance is covered as shown below.	
<b>Preferred Provider Benefit</b>				
<b>Preventive Care</b>				
Well Baby Care	100%●	100%●	100%●	100%●
Routine Physicals and Preventive Care Exams	100%●■	100%●■	100%●■	100%●■
Routine Gyn. Exams	100%●	100%●	100%●	100%●
Immunizations	100%●	100%●	100%●	100%●
<b>Professional Services</b>				
Office and Home Visits	100% after \$25 copay●	100% after \$30 copay●	60%	50%▲
Chiropractic Manipulation	100% after \$25 copay● (\$1,500 combined max)	100% after \$30 copay● (\$1,000 combined max)	Not covered	50%▲ (\$1,000 combined max)
Acupuncture				
Naturopathic Care	100% after \$25 copay●	100% after \$30 copay●		
Urgent Care Visits	100% after \$25 copay●	100% after \$30 copay●	60%	50%▲
Maternity Care	80%	70%	60%	50%▲
Hospital Services	80%	70%	60%	50%▲
Outpatient Services	80%	70%	60%	50%▲
Emergency Room Visits	80% after \$100 copay (copay waived if admitted to hospital)	70% after \$100 copay (copay waived if admitted to hospital)	60%	50%▲
<b>Other Covered Services</b>				
Prescription Drugs	Incentive drugs: \$4 copay● Generic drugs: 100% after \$10 copay● Preferred brand name drugs: 50%●	Incentive drugs: \$4 copay● Generic and preferred brand name drugs: 50%●	50%	50%▲
Vision (per 2 calendar years)	Routine eye exam: 100% after \$25 copay●; \$200 for frames, lenses and contacts●		Not covered	

● Not subject to the annual deductible. ■ Scheduled benefit. ▲ Covered at 100% under the Elect HSA 5,000 plan (after deductible).

✓ FHIAP eligible. All benefits shown here apply for participating providers. Services rendered by nonparticipating providers will be paid at a lower percentage. For a complete list of Elect policy exclusions and limitations, see our website at [PacificSource.com](http://PacificSource.com), or contact us to request a full brochure.

# Choose the plan that's right for you:

## Elect **Premiere**

### *Expansive Coverage*

You'll pay just a \$25 copay for office visits, acupuncture, naturopathic, and chiropractic care. This plan also offers vision care.

## Elect **Preferred**

### *Comprehensive Coverage*

This plan offers a \$30 copay for office visits, acupuncture, naturopathic, and chiropractic care.

## Elect **Value Option**

### *Low-cost Coverage*

Get peace of mind with basic coverage, provided at a low monthly rate. Most in-network services are covered at 60% after deductible.

## Elect **HSA**

### *HSA-Qualified High Deductible Health Plan*

An HSA is like a "healthcare IRA." You control how you spend your healthcare dollars, and you can save on your taxes at the same time.

## Visit us online!

It's easier than ever to compare different plan deductibles, benefits, and rates. Visit our website at [PacificSource.com](http://PacificSource.com) and find the health plan that best fits your budget and needs.

**PacificSource.com**

## Interested in dental coverage?

PacificSource offers dental coverage you can combine with your Elect medical plan. Ask your insurance agent about PacificSource Elect Dental.

## Questions?

If you have questions about our individual and family health plans, please contact your insurance agent or a PacificSource Individual Service Representative at **866.695.8684** or by email at [individual@pacificsource.com](mailto:individual@pacificsource.com).



PacificSource Health Plans is a not-for-profit company based in Springfield, Oregon, with local offices throughout Oregon, Montana, and Idaho. Founded in 1933, we put our decades of experience to work providing our customers with affordable coverage and the best possible service. PacificSource covers more than 290,000 people with its group and individual health insurance plans. For more information, visit our website, [PacificSource.com](http://PacificSource.com).

# Elect Plans

## Well-Balanced Health Plans for Individuals and Families in Oregon

