

# Ensuring your health



2020 Health Plans for **Washington** Individuals and Families



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

# Health insurance is complicated. We simplify it for you.

Service and tools to save you time and effort.



## Broad in-network availability in our service area

Our new products for 2020 offer a broad array of in-network providers, where sold in Washington.



#### 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.

# Get the health insurance features you want

(but may not even know existed).



#### On-demand access to doctors by video

Get the medical care you need, when and where you need it. Check your plan benefits for cost-sharing information.



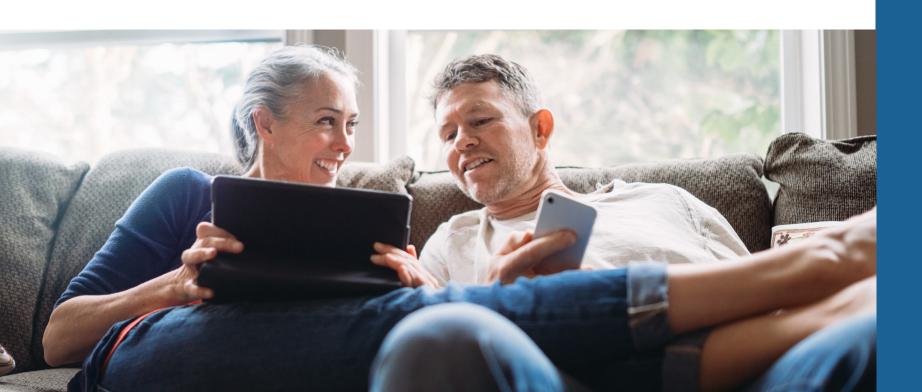
#### Find doctors **fast**

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.





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.

#### **EOBs**

See the explanation of benefits statements for your claims.

#### **Check your status**

See how much of your deductible has been met.

#### **ID** cards

Request ID cards and print temporary ones.

#### **CaféWell**

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

#### **Estimate costs**

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

## **Navigator**



Navigator is our clinically integrated 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, 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™. Navigator products also offer out-of-network benefits, for more freedom and choice.

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:

Clark, Pierce, and Spokane.

#### The doctors and hospitals you want.

We've partnered with well-respected health centers and hospitals in the **Spokane**, **Tacoma**, and **Vancouver** areas so you will get top-notch quality of care and service.











## **2020 Washington** Individual and Family Medical Plans

	NON-HSA QUALIFIED PLANS										HSA QUALIFIED PLANS	
Product	<b>Gold</b> 1500		<b>Silver</b> 3500 <sup>†</sup>		Silver 5000		Bronze 7000		Catastrophic <sup>^</sup>		<b>Bronze</b> HSA 6750	
	Navigator		Navigator		Navigator		Navigator		Navigator		Navigator	
	IN NETWORK	OUT OF Network	IN NETWORK	OUT OF Network	IN NETWORK	OUT OF NETWORK						
<b>Deductible</b> Individual / Family	\$1,500 / \$3,000	\$10,000 / \$20,000	\$3,500 / \$7,000	\$10,000 / \$20,000	\$5,000 / \$10,000	\$10,000 / \$20,000	\$7,000 / \$14,000	\$10,000 / \$20,000	\$8,150 / \$16,300	\$10,000 / \$20,000	\$6,750 / \$13,500	\$10,000 / \$20,000
Out-of-Pocket Maximum Individual / Family	\$5,000 / \$10,000	\$25,000 / \$50,000	\$7,500 / \$15,000	\$25,000 / \$50,000	\$8,150 / \$16,300	\$25,000 / \$50,000	\$8,150 / \$16,300	\$25,000 / \$50,000	\$8,150 / \$16,300	\$25,000 / \$50,000	\$6,750 / \$13,500	\$25,000 / \$50,000
	NO DEDUCTIBLE, MEMBER PAYS:	AFTER DEDUCTIBLE, MEMBER PAYS:	NO DEDUCTIBLE, MEMBER PAYS:	AFTER DEDUCTIBLE, MEMBER PAYS:	NO DEDUCTIBLE, MEMBER PAYS:	AFTER DEDUCTIBLE, MEMBER PAYS:						
<b>Preventive Services</b>	Covered in Full	50%	Covered in Full	50%	Covered in Full	50%						
<b>Preventive Drug Coverage</b>	Covered in Full	90%	Covered in Full	90%	Covered in Full	90%						
	AFTER DEDUCTIBLE, MEMBER PAYS:		AFTER DEDUCTIBLE, MEMBER PAYS:		AFTER DEDUCTIBLE, MEMBER PAYS:		AFTER DEDUCTIBLE, MEMBER PAYS:		AFTER DEDUCTIBLE, MEMBER PAYS:		AFTER DEDUCTIBLE, MEMBER PAYS:	
<b>Telemedicine</b> (including behavioral health for adults)	\$10*	50%	\$10*	50%	\$10*	50%	\$10*	50%	Telemedicine and office combined visits 1-3 no deductible, covered in full. Visits 4+ covered in full after deductible.	50%	Covered in Full	50%
Office Visits Primary, Urgent Care, and Specialist	Primary/Urgent Care: \$20* Specialist: \$40*	50%	Primary/Urgent Care: \$40* Specialist: 30%	50%	Primary/Urgent Care: \$35* Specialist: \$70*	50%	Primary/Urgent Care: \$35* Specialist: 40%	50%	Telemedicine and office combined visits 1-3 no deductible, covered in full. Visits 4+ covered in full after deductible. Urgent Care/Specialist: Covered in Full	50%	Covered in Full	50%
Inpatient Hospital	20%	50%	30%	50%	30%	50%	40%	50%	Covered in Full	50%	Covered in Full	50%
Lab / X-ray	20%	50%	30%	50%	30%	50%	40%	50%	Covered in Full	50%	Covered in Full	50%
Physical, Occupational, and Speech Therapy 25 visits per benefit period	20%	50%	30%	50%	30%	50%	40%	50%	Covered in Full	50%	Covered in Full	50%
<b>Outpatient Surgery</b>	20%	50%	30%	50%	30%	50%	40%	50%	Covered in Full	50%	Covered in Full	50%
<b>Emergency Services</b>	20%	20%	30%	30%	30%	30%	40%	40%	Covered in Full	Covered in Full	Covered in Full	Covered in Full
Chiropractic / Acupuncture Visits per benefit period: Chiro: 12 / Acu: 12	\$20*	50%	\$40*	50%	\$35*	50%	\$35*	50%	Covered in Full	50%	Covered in Full	50%
Prescription (Rx) Drug Coverage Out-of-network: 30-day max fill, no more than 3 per year	Tier 1: \$15* Tier 2: \$70* Tier 3 & 4: 20%*	90%	Tier 1: \$15* Tier 2: \$80* Tier 3 & 4: 30%*	90%	30%	90%	40%	90%	Covered in Full	90%	Covered in Full	90%
Pediatric Eye Exam One exam per benefit period	Covered in Full*	Covered in Full up to \$40*	Covered in Full*	Covered in Full up to \$40*	Covered in Full*	Covered in Full up to \$40*	Covered in Full*	Covered in Full up to \$40*	Covered in Full	50%	Covered in Full*	Covered in full up to \$40*
Pediatric Vision Hardware One item per benefit period	Covered in full* up to \$150 then subject to in-network deductible and 20%		Covered in full* up to \$150 then subject to in-network deductible and 30%		Covered in full* up to \$150 then subject to in-network deductible and 30%		Covered in full* up to \$150 then subject to in-network deductible and 40%		Covered in Full	50%	Covered in full* up to \$150 then subject to in-network deductible	

Out-of-network services are covered up to an allowed amount. After that amount is reached, members may be subject to balance billing. \* Not subject to deductible. ^ Only available for people under 30, or people of any age with a hardship exemption or affordability exemption. † Only available on a direct basis. 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.

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

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

\* from internal monthly enrollment report, March 2019, for Individual member subscribers and their dependents.





## 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.

#### **Non-HSA**

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).

HSA-qualified plans help you save money for healthcare expenses, such as deductibles and coinsurance. This type of plan requires that all major benefits be subject to the deductible.

#### **HSA**

HSA plans enable the use of HSA bank accounts. Contributions to HSA accounts are 100% tax deductible (up to the legal maximum) like an IRA. And withdrawals from your HSA to pay for qualified medical expenses are tax-free. Pro Tip: look for plan names with "HSA" in them.

## **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 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<sup>®</sup> and Weight Watchers<sup>®</sup>
  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:



See if our products are offered in your county



Choose a health plan



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