

## 2026 Choice MHP Plan Grid

See tier definitions below <sup>2</sup>	Choice Plan - MHP			
	Tier I	Tier II	Tier III	Tier IV
	Salem Health & West Valley Hospital (in-network)	Connexus Network (in-network) <sup>1</sup>	Connexus Network (in-network) <sup>1</sup>	Out-of-Network
<b>Deductible</b> All copayment and coinsurance costs are after your deductible has been met, except where noted with an *	\$0 individual \$0 family	\$750 individual \$1,500 family	\$1,500 individual \$3,000 family	\$1,500 individual \$3,000 family
<b>Maximum out-of-pocket</b>	\$2,500 individual \$5,000 family	\$3,500 individual \$7,000 family	\$5,900 individual \$11,800 family	\$5,900 individual \$11,800 family
<b>At the doctor's office or urgent care</b>				
<b>Preventive care</b> (services as defined by the ACA)	0%*	0%*	0%*	40%
<b>Primary care office visit</b>	0%*	10%	20%	40%
<b>Specialist office visit</b>	0%*	10%	20%	40%
<b>Urgent care</b>	\$20 copay*	\$40 copay*	\$50 copay*	40%
<b>Salem Health virtual visits - Urgent care</b>	0%*	N/A		
<b>At the hospital</b>				
<b>Emergency room facility</b>	\$250 copay*	\$250 copay - Tier I out-of-pocket maximums apply		
<b>Inpatient hospital</b>	0%*	10%	20%	40%
<b>Diagnostic test</b> (x-ray, blood work)	0%*	10%	20%	40%
<b>Advanced imaging</b>	0%*	10%	\$100 copay, then 20%	\$100 copay, then 40%
<b>Spine surgery</b>	0%*	\$500 copay, then 20%	\$500 copay, then 20%	\$500 copay, then 40%

**When traveling outside of the primary service area (Oregon / Southwest Washington), you can receive the Tier III benefit level when using the Aetna Signature Administrators (ASA) network.**

\* Deductible waived

<sup>1</sup> Employees who live outside of Oregon / SW Washington may have access to alternative networks.

<sup>2</sup> Tier I: Providers of Salem Health Hospitals & Clinics and facilities and West Valley Hospital.

Tier II: Moda's Connexus Network. This network includes providers and clinics that generally provide services that are not available at Salem Health Hospitals & Clinics.

Tier III: Moda's Connexus Network. This includes specific hospital systems, ambulatory surgery centers and provider clinics that provide the same services as Salem Health Hospitals & Clinics.

Tier IV: Providers that are not contracted by the Moda Health Connexus network and are considered non-participating (out-of-network).

*This benefit comparison chart contains highlights of benefit options available to you and is not a complete description of the benefits. For a more detailed description of benefits and limitations, refer to your member handbook.*

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<b>Other medical benefits</b>				
<b>Outpatient rehabilitation</b> † (physical, occupational or speech therapies)	0%*	10%	20%	40%
<b>Massage therapy</b> † (Up to \$1,000 per calendar year)	0%*	\$20 copay*	\$20 copay*	40%*
<b>Acupuncture</b> † (Up to 20 visits per calendar year)	0%*	\$20 copay*	\$20 copay*	40%*
<b>Spinal manipulation</b> † (Up to 20 visits per calendar year)	0%*	\$20 copay*	\$20 copay*	40%*
<b>Sleep studies</b>	0%*	\$100 copay, then 20%	\$100 copay, then 20%	\$100 copay, then 40%
<b>Upper endoscopy</b>	0%*	\$100 copay, then 20%	\$100 copay, then 20%	\$100 copay, then 40%
<b>Mental Health and Substance Use Disorder</b>				
<b>Outpatient mental health &amp; substance use disorder office visits</b>	0%*	\$0*	\$0*	\$0*
<b>Residential mental health &amp; substance use disorder treatment programs</b>	0%*	0%*	0%*	40%
<b>Substance use disorder detoxification</b>	0%*	10%	10%	40%

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