



# Bend Chamber of Commerce

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2025 Health Plans & Services

[ProvidenceHealthPlan.com/Bend-Chamber](https://ProvidenceHealthPlan.com/Bend-Chamber)



# Bend Chamber of Commerce Health Plan Overview

As our local businesses flourish, they foster a vibrant community that is happier, healthier, and more robust. Ensuring that both businesses and their employees have access to quality, affordable healthcare is essential to maintaining this growth. Providence is excited to continue our essential partnership with the Bend Chamber, focusing on enriching the benefits and services provided to businesses. This collaboration is designed to empower employers to meet the diverse health needs of their workforce, enhancing the well-being of our entire community.

## What's required to participate?

Businesses must be headquartered in the state of Oregon, and a Chamber membership must be maintained.

## Who to reach out to for more information?

Talk with Johnson Benefit Planning or visit [ProvidenceHealthPlan.com/Bend-Chamber/Producers](https://ProvidenceHealthPlan.com/Bend-Chamber/Producers) to learn more. They'd be happy to talk you through the various plan options available to employers and answer any questions you may have.

## Easing the way for new members

We are prepared to ensure a smooth onboarding process for new employers and members opting for the Bend Chamber of Commerce association health plan. At Providence Health Plan, we utilize a structured approach to offer transition of care support to new members requiring assistance, ensuring they experience minimal disruption in their healthcare services.

## During enrollment

- Members who are receiving care for things like chemotherapy, radiation therapy, an organ transplant, or are currently pregnant, can complete a transition of care form
- Once a form is received, a case manager will reach out to assist with things like: access, medication needs, scheduling surgeries, transfer of medical records, scheduling appointments or procedures, and pharmacy services

## Pharmacy transition services include a 90-day period for new members:

- Transitioning non-formulary medications
- Medications requiring a prior authorization
- Those that are subject to step therapy or quantity limits



# Benefits Designed With You In Mind

A unique workforce requires a customized solution, so we’ve developed robust options that offer flexibility based on your employees’ needs.

## Some standard features

- Premier, Core, and Base plans with a wide range of deductibles and coverage of common services with deductible waived
- Low cost plan options with Choice and Connect networks that use patient-centered medical homes without referral requirements
- New HSA qualified plan with non-embedded lower deductible
- Multiple plan offerings – employers with two to nine enrolled employees can have two plans, and ten or more can have up to three plans
- Many preventive medications with a \$0 copay
- 90-day supply of maintenance medications for two copayments
- Optional any licensed eye care provider vision benefit that can be added
- Chiropractic (20 visits) and acupuncture (12 visits) embedded for each covered member
- AD&D benefit of \$25,000 for employees enrolled in the medical plan through USAbLe-Life
- No cost COBRA administration
- Four-visit Employee Assistance Program (EAP)

# Navigating the Cigna PPO Network

When you’re a Providence Health Plan member, you’re never out of network.\*

That’s right, no matter where you live or might be traveling, you’ll always have access to the care you need through our collaboration with Cigna Healthcare, utilizing their PPO network. It’s all part of our commitment to offering you quality care options.

## With You Every Step of the Way

Other health plans offer access to care when you live out of state or are traveling, but with Providence you get so much more. Our collaboration with Cigna Healthcare isn’t simply a travel network, you also have access to our integrated Providence Care Management team. It’s open to all members and available at no cost.

### Our care managers offer help with:

Finding services that fit your needs, authorizations and referrals, coordination between providers, and more...

To connect with Care Management services, call **800-662-1121 (TTY: 711)** or email us at **CareManagement@Providence.org**

## Accessing Behavioral Health services outside of the Cigna PPO Network

Behavioral Health providers and clinics are available only through Providence Health Plan — not through Cigna’s PPO network.

To find an in-network behavioral health provider or clinic, call customer service at **800-878-4445 (TTY: 711)**, or search the Provider Directory at **ProvidenceHealthPlan.com/FindAProvider**

## Next: Information to Provide Your Cigna PPO Network Provider

Even providers need a bit of guidance from time to time. If they don’t recognize your Providence ID card, here are some tips you can offer to make things easier for them, and you.

### Explain to your provider that:

- 01
- You have access to the Cigna PPO Network via a shared administration agreement between Cigna Healthcare and Providence. This is detailed on the back of your ID card.
- 02
- To verify benefits or eligibility, they should NOT CALL Cigna Healthcare because they do not have benefits information for shared clients. They must call Providence Health Plan at **800-878-4445**.
- 03
- Claims are sent to Cigna Healthcare first, then Cigna Healthcare communicates with Providence. Claim submission instructions are on the back of your ID card and should be sent to:



Cigna Healthcare, Payer ID# 62308  
PO Box 188061  
Chattanooga, TN 37422-8061

If you have any questions or concerns accessing the Cigna PPO Network, ***please do not call Cigna Healthcare directly.***

We’re here to help you. Contact Providence Health Plan’s Customer Service: **800-878-4445**, Monday — Friday between 8 a.m. and 5 p.m. (Pacific Time).

\*The Cigna PPO Network refers to the health care providers (doctors, hospitals, specialists) contracted as part of the Cigna PPO for Shared Administration.

Cigna Healthcare is an independent company and not affiliated with Providence Health Plan. Access to the Cigna PPO Network is available through Cigna Healthcare’s contractual relationship with Providence Health Plan. All Cigna Healthcare products are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company. The Cigna Healthcare name, logo, and other marks are owned by Cigna Intellectual Property, Inc.



# Tailored Plan Designs That Perform

Below is a summary of what our plans include, as well as the high-level differences in the specific plan options.

## Most plans include:

- Covered in full, first three in-office, PCP, and behavioral health visits
- Preventive services, in-network at no cost (\$0 deductible)
- Robust support for mental health and substance abuse needs
- Access to the nationwide Cigna PPO network\*
- Chiropractic manipulation and acupuncture
- \$1,000 accident benefit on all non-HSA plans
- Signature + OHSU, Choice, or Connect network with Signature
- Virtual office visits for in-network primary care and mental health visits covered in full
- Common deductible for most Premier plans
- Primary care and specialist visits not subject to the deductible on all non-HSA plans
- Optional vision coverage

## HSA Qualified Plans

- Signature + OHSU network with Cigna as the national network
- Embedded deductibles on most plans; and one new \$1650 non-embedded deductible option
- Prescription drug coverage included in all HSA plan options
- Optional vision coverage

## Prescription Drug Plans

- Most preventive drugs covered in full
- Two copayments for a 90-day maintenance supply
- Specialty and compounded drug coverage

## Vision plan (optional rider)

- Any licensed provider
- Adults covered up to \$400 per calendar year per member, for exam and corrective hardware
- Meets pediatric essential health benefit requirements

\* Choice and Connect plans have access to Cigna through the out-of-network benefit

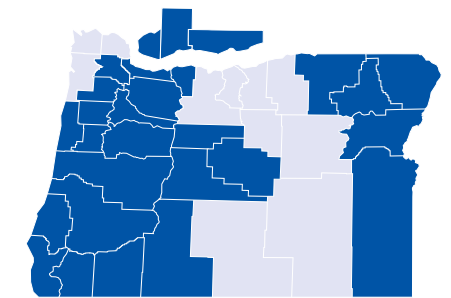
# Comprehensive Network Options

With Providence, Bend Chamber members have access to more in-network providers – close to home and coast-to-coast.



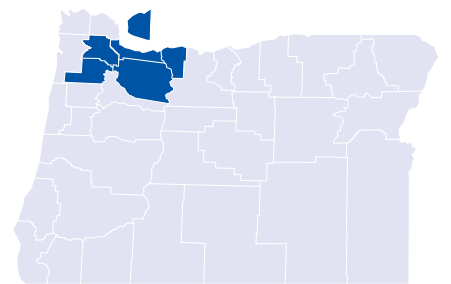
## Providence Signature network + OHSU

Expansive network featuring over 1 million providers nationwide, including top health systems in Oregon such as Providence, Asante, St. Charles, OHSU, and more. The Cigna PPO Network covers members outside of Oregon and southwest Washington.



## Providence Choice network

Tailored, high-performing network of nearly 400 patient-centered medical homes. Clinics in the Choice network are designated as medical homes by the Oregon Health Authority based on access, coordination, quality, and cost measures.



## Providence Connect network

Like Choice, participating clinics in this tailored medical home style network partner with Providence to improve the quality of care and reduce medical costs. Connect is available in the Portland metropolitan area, centered around the Providence delivery system.

## What is a Patient-Centered Medical Home (PCMH)?

A medical home is a team-based health care model led by a primary care provider (PCP). They work with other health professionals to coordinate members’ care – like nurses, specialists and pharmacists – this is called a “health care team.” The members of the team work together to make sure they’re all on the same page when it comes to members’ health.



# 2025 Bend Chamber of Commerce

## Premier plan

Network: Signature  
+ OHSU

	Premier plans			
	10/10/50/250	10/10/50/500	25/20/50/1000	25/30/50/1500
In-network				
Deductible Individual / Family	\$250 / \$500	\$500 / \$1,000	\$1,000 / \$2,000	\$1,500 / \$3,000
Out-of-Pocket Maximum Individual / Family	\$3,500 / \$7,000	\$3,500 / \$7,000	\$6,000 / \$12,000	\$6,000 / \$12,000
Member pays				
Preventive Services	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓
Office Visits - Primary	\$10 ✓	\$10 ✓	\$25 ✓	\$25 ✓
Chiropractic (20 visits)	\$10 ✓	\$10 ✓	\$25 ✓	\$25 ✓
Acupuncture (12 visits)	\$10 ✓	\$10 ✓	\$25 ✓	\$25 ✓
Virtual Care (Primary and Mental Health)	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓
Office Visits - Specialty and Urgent Care	\$25 ✓	\$25 ✓	\$50 ✓	\$50 ✓
Physical Therapy	10% ✓	10% ✓	20% ✓	30% ✓
Lab / X-ray	10% ✓	10% ✓	20% ✓	30% ✓
Accident Benefit	0% of first \$1,000 within 90 days of the accident ✓			
Emergency Services	\$250 + 10% ✓	\$250 + 10% ✓	\$250 + 20% ✓	\$250 + 30% ✓
Hospital (Including surgical procedures and advanced imaging)	10%	10%	20%	30%

Prescription (Rx) Drug Coverage	\$5 / \$10 / \$50 / \$75 ✓ 2 copays for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order	Plans can be paired with: \$5 / \$10 / 50% / 50% OR \$5 / \$10 / \$50 / \$75 ✓ 2 copays for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order
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Optional Vision Rider	Services are available from any licensed provider. Adults: Up to \$400 per calendar year per member (including exam, prescription lenses, contact lenses, and frames) ✓
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Premier plans				
25/30/50/2000	35/30/50/3000	35/30/50/4000	35/30/50/5000	35/30/50/6000
In-network				
\$2,000 / \$4,000	\$3,000 / \$6,000	\$4,000 / \$8,000	\$5,000 / \$10,000	\$6,000 / \$12,000
\$7,500 / \$15,000	\$8,000 / \$16,000	\$8,500 / \$17,000	\$8,500 / \$17,000	\$9,200 / \$18,400
Member pays				
Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓
\$25 ✓	\$35 ✓	\$35 ✓	\$35 ✓	\$35 ✓
\$25 ✓	\$35 ✓	\$35 ✓	\$35 ✓	\$35 ✓
\$25 ✓	\$35 ✓	\$35 ✓	\$35 ✓	\$35 ✓
Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓
\$50 ✓	\$60 ✓	\$60 ✓	\$60 ✓	\$60 ✓
30% ✓	30% ✓	30% ✓	30% ✓	30% ✓
30% ✓	30% ✓	30% ✓	30% ✓	30% ✓
0% of first \$1,000 within 90 days of the accident ✓				
\$250 + 30% ✓	\$250 + 30% ✓	\$250 + 30% ✓	\$250 + 30% ✓	\$250 + 30% ✓
30%	30%	30%	30%	30%

Plans can be paired with: \$5 / \$10 / 50% / 50% OR \$5 / \$10 / \$50 / \$75 ✓ 2 copays for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order
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Services are available from any licensed provider. Adults: Up to \$400 per calendar year per member (including exam, prescription lenses, contact lenses, and frames) ✓
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# 2025 Bend Chamber of Commerce

## Core plan

### Network: Signature + OHSU

	Core plans		Core plans	
	35/50/50/2500		35/50/50/3500	35/50/50/5000
	In-network		In-network	In-network
Deductible Individual / Family	\$2,500 / \$5,000		\$3,500 / \$7,000	\$5,000 / \$10,000
Out-of-Pocket Maximum Individual / Family	\$8,000 / \$16,000		\$8,000 / \$16,000	\$8,500 / \$17,000
	Member pays		Member pays	
Preventive Services	Covered in full ✓		Covered in full ✓	
Office Visits - Primary	\$35 ✓		\$35 ✓	
Chiropractic Manipulation (20 visits)	\$35 ✓		\$35 ✓	
Acupuncture (12 visits)	\$35 ✓		\$35 ✓	
Office Visits Specialty and Urgent Care	\$70 ✓		\$70 ✓	
Virtual Care (Primary and Mental Health)	Covered in full ✓		Covered in full ✓	
Physical, Occupational, and Speech Therapy	50%		50%	
Lab / X-ray	50%*		50%*	
Accident Benefit	0% of first \$1,000 within 90 days of the accident ✓		0% of first \$1,000 within 90 days of the accident ✓	0% of first \$1,000 within 90 days of the accident ✓
Emergency Services	50%		50%	
Inpatient & Outpatient Hospital (Including surgical procedures and advanced imaging)	50%		50%	
	Plan includes: \$5 / \$10 / 50% / 50% ✓		Plan includes: \$5 / \$10 / 50% / 50% ✓	
Prescription (Rx) Drug Coverage	2 copays for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order		2 copays for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order	
Optional Vision Rider	Services are available from any licensed provider. Adults: Up to \$400 per calendar year per member (including exam, prescription lenses, contact lenses, and frames) ✓		Services are available from any licensed provider. Adults: Up to \$400 per calendar year per member (including exam, prescription lenses, contact lenses, and frames) ✓	Services are available from any licensed provider. Adults: Up to \$400 per calendar year per member (including exam, prescription lenses, contact lenses, and frames) ✓

✓ = Deductible waived

\*Core Plus plans with Providence Signature + OHSU network only: Covered in full, deductible waived, for the first \$500 of in-network services in a calendar year, then deductible and coinsurance

Note: Additional cost shares apply when using out-of-network providers, please see benefit summary for details.



# 2025 Bend Chamber of Commerce

## HSA Qualified plan

Network: Signature + OHSU

	HSA Qualified plan	HSA Qualified Embedded Deductible plans		
	50/50/1650	50/50/3300	0/50/4000	0/50/6000
	In-network	In-network		
Deductible Individual / Family	\$1,650 / \$3,300	\$3,300 / \$6,600	\$4,000 / \$8,000	\$6,000 / \$12,000
Out-of-Pocket Maximum Individual / Family	\$6,000 / \$12,000	\$6,000 / \$12,000	\$4,000 / \$8,000	\$6,000 / \$12,000
	Member pays	Member pays		
Preventive Services	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓
Office Visits - Primary	After deductible, 50%	After deductible, 50%	After deductible, Covered in full	After deductible, Covered in full
Chiropractic Manipulation (20 visits)	After deductible, 50%	After deductible, 50%	After deductible, Covered in full	After deductible, Covered in full
Acupuncture (12 visits)	After deductible, 50%	After deductible, 50%	After deductible, Covered in full	After deductible, Covered in full
Office Visits Specialty and Urgent Care	After deductible, 50%	After deductible, 50%	After deductible, Covered in full	After deductible, Covered in full
Virtual Care (Primary and Mental Health)	After deductible, 50%	After deductible, 50%	After deductible, Covered in full	After deductible, Covered in full
Physical, Occupational, and Speech Therapy	After deductible, 50%	After deductible, 50%	After deductible, Covered in full	After deductible, Covered in full
Lab / X-ray	After deductible, 50%	After deductible, 50%	After deductible, Covered in full	After deductible, Covered in full
Diabetic Supplies	50% ✓	50% ✓	20% ✓	20% ✓
Emergency Services	After deductible, 50%	After deductible, 50%	After deductible, Covered in full	After deductible, Covered in full
Inpatient & Outpatient Hospital (Including surgical procedures and advanced imaging)	After deductible, 50%	After deductible, 50%	After deductible, Covered in full	After deductible, Covered in full
Prescription (Rx) Drug Coverage	Non-embedded Rx	Embedded Rx	Embedded Rx	Embedded Rx
	Preventive drugs: \$0 ✓	Preventive drugs: \$0 ✓	Preventive drugs: \$0 ✓	Preventive drugs: \$0 ✓
	30-day supply Tiers 1 - 4: 50%	30-day supply Tiers 1 - 4: 50%	30-day supply Tiers 1 - 4: Covered in full	30-day supply Tiers 1 - 4: Covered in full
	50% for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order	50% for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order	50% for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order	50% for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order
Optional Vision Rider	Tier 5 Specialty drugs 50%, up to a 30-day supply	Tier 5 Specialty drugs 50%, up to a 30-day supply	Tier 5 Specialty drugs Covered in full, up to a 30-day supply	Tier 5 Specialty drugs Covered in full, up to a 30-day supply
	Services are available from any licensed provider.	Services are available from any licensed provider.	Services are available from any licensed provider.	Services are available from any licensed provider.
	Adults: Up to \$400 per calendar year per member (including exam, prescription lenses, contact lenses, and frames) ✓	Adults: Up to \$400 per calendar year per member (including exam, prescription lenses, contact lenses, and frames) ✓	Adults: Up to \$400 per calendar year per member (including exam, prescription lenses, contact lenses, and frames) ✓	Adults: Up to \$400 per calendar year per member (including exam, prescription lenses, contact lenses, and frames) ✓

✓ = Deductible waived

Note: Additional cost shares apply when using out-of-network providers, please see benefit summary for details.



# 2025 Bend Chamber of Commerce

## Base plan

Network: Signature + OHSU

	Base plans		Base plans				
	25/20/50/1000	25/30/50/1500	25/30/50/2000	35/30/50/3000	35/30/50/4000	35/30/50/5000	35/30/50/6000
In-network			In-network				
Deductible Individual / Family	\$1,000 / \$2,000	\$1,500 / \$3,000	\$2,000 / \$4,000	\$3,000 / \$6,000	\$4,000 / \$8,000	\$5,000 / \$10,000	\$6,000 / \$12,000
Out-of-Pocket Maximum Individual / Family	\$6,000 / \$12,000	\$6,000 / \$12,000	\$7,500 / \$15,000	\$8,000 / \$16,000	\$8,500 / \$17,000	\$8,500 / \$17,000	\$9,200 / \$18,400
Member pays			Member pays				
Preventive Services	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓
Office Visits - Primary	\$25 ✓	\$25 ✓	\$25 ✓	\$35 ✓	\$35 ✓	\$35 ✓	\$35 ✓
Chiropractic (20 visits)	\$25	\$25	\$25	\$35	\$35	\$35	\$35
Acupuncture (12 visits)	\$25	\$25	\$25	\$35	\$35	\$35	\$35
Virtual Care (Primary and Mental Health)	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓
Office Visits - Specialty and Urgent Care	\$50	\$50	\$50	\$60	\$60	\$60	\$60
Physical Therapy	20%	30%	30%	30%	30%	30%	30%
Lab / X-ray	20%	30%	30%	30%	30%	30%	30%
Accident Benefit	0% of first \$1,000 within 90 days of the accident ✓		0% of first \$1,000 within 90 days of the accident ✓				
Emergency Services	\$250 + 20%	\$250 + 30%	\$250 + 30%	\$250 + 30%	\$250 + 30%	\$250 + 30%	\$250 + 30%
Hospital (Including surgical procedures and advanced imaging)	20%	30%	30%	30%	30%	30%	30%

Plans can be paired with:  
\$5 / \$10 / \$50 / \$75 ✓

Prescription (Rx) Drug Coverage

2 copays for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order

Optional Vision Rider

Services are available from any licensed provider.  
Adults: Up to \$400 per calendar year per member (including exam, prescription lenses, contact lenses and frames) ✓

Plans can be paired with: \$5 / \$10 / 50% / 50%  
OR \$5 / \$10 / \$50 / \$75 ✓

2 copays for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order

Services are available from any licensed provider.  
Adults: Up to \$400 per calendar year per member (including exam, prescription lenses, contact lenses and frames) ✓

The deductible does not apply to services marked with a ✓.

Note: Additional cost shares apply when using out-of-network providers, please see benefit summary for details.





# 2025 Bend Chamber of Commerce Choice or Connect Premier plan

Network: Choice or Connect	Premier plans		Premier plans			
	25/20/50/1000	25/30/50/1500	25/30/50/2000	35/30/50/3000	35/30/50/4000	35/30/50/5000
In-network			In-network			
Deductible Individual / Family	\$1,000 / \$2,000	\$1,500 / \$3,000	\$2,000 / \$4,000	\$3,000 / \$6,000	\$4,000 / \$8,000	\$5,000 / \$10,000
Out-of-Pocket Maximum Individual / Family	\$6,000 / \$12,000	\$6,000 / \$12,000	\$7,500 / \$15,000	\$8,000 / \$16,000	\$8,500 / \$17,000	\$8,500 / \$17,000
Member pays			Member pays			
Preventive Services	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓
Office Visits - Primary	\$25 ✓	\$25 ✓	\$25 ✓	\$35 ✓	\$35 ✓	\$35 ✓
Chiropractic (20 visits)	\$25 ✓	\$25 ✓	\$25 ✓	\$35 ✓	\$35 ✓	\$35 ✓
Acupuncture (12 visits)	\$25 ✓	\$25 ✓	\$25 ✓	\$35 ✓	\$35 ✓	\$35 ✓
Virtual Care (Primary and Mental Health)	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓	Covered in full ✓
Office Visits - Specialty and Urgent Care	\$50 ✓	\$50 ✓	\$50 ✓	\$60 ✓	\$60 ✓	\$60 ✓
Physical Therapy	20% ✓	30% ✓	30% ✓	30% ✓	30% ✓	30% ✓
Lab / X-ray	20% ✓	30% ✓	30% ✓	30% ✓	30% ✓	30% ✓
Accident Benefit	0% of first \$1,000 within 90 days of the accident ✓		0% of first \$1,000 within 90 days of the accident ✓			
Emergency Services	\$250 + 20% ✓	\$250 + 30% ✓	\$250 + 30% ✓	\$250 + 30% ✓	\$250 + 30% ✓	\$250 + 30% ✓
Hospital (Including surgical procedures and advanced imaging)	20%	30%	30%	30%	30%	30%
Prescription (Rx) Drug Coverage						
Optional Vision Rider						

The deductible does not apply to services marked with a ✓.

**\$5 / \$10 / \$50 / \$75 ✓**

2 copays for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order

Plans can be paired with: **\$5 / \$10 / 50% / 50% OR \$5 / \$10 / \$50 / \$75 ✓**

2 copays for a 90-day supply of maintenance drugs at preferred retail pharmacy or through mail order

Note: Additional cost shares apply when using out-of-network providers, please see benefit summary for details.

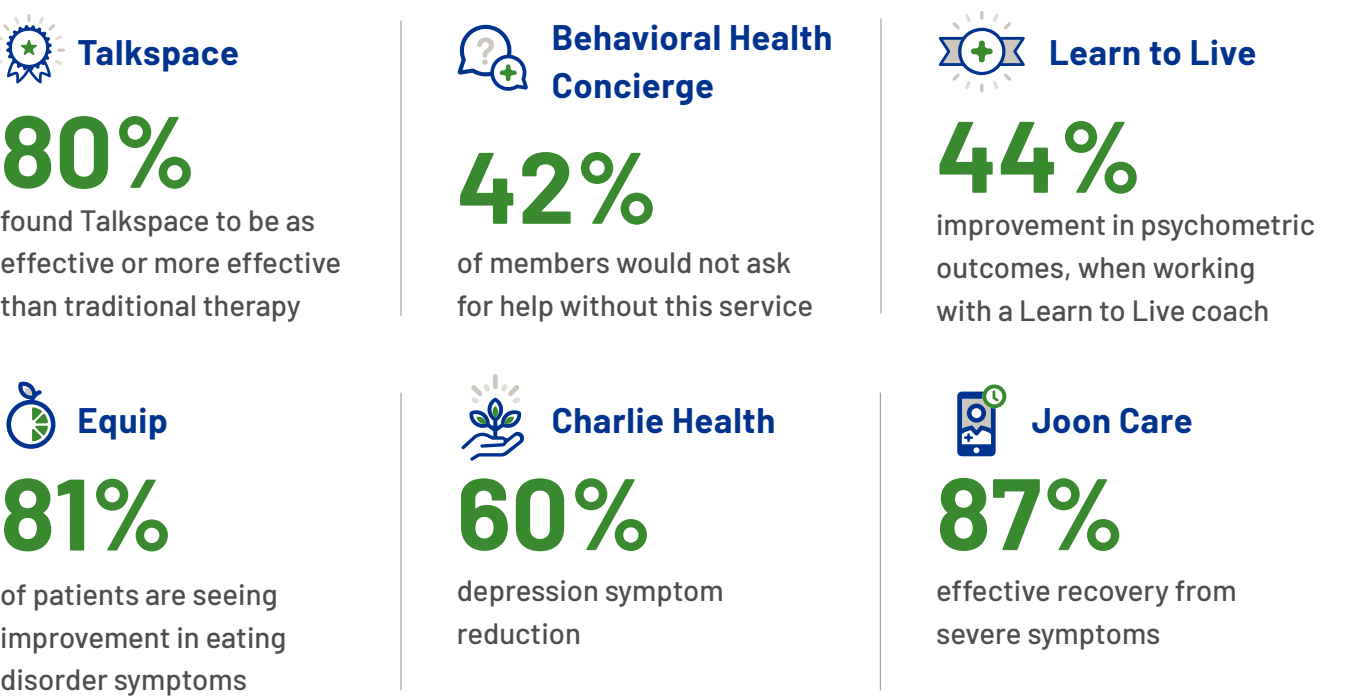
Behavioral Health Suite of Services






Offering members more ways to access the care they need.

At Providence Health Plan, we understand that behavioral health isn’t a one-size-fits-all solution. Every person is unique. That’s why we offer our members a variety of services that can help them feel supported and achieve positive outcomes.

Here’s a quick look at our suite of offerings.

Our services in action



<div></div> <div>Resources for Improved Well-Being</div>	<div></div> <div>Self-Management &amp; Mindfulness Tools</div>	<div></div> <div>Telehealth/ Virtual</div>	<div></div> <div>Broad Clinical Network</div>	<div></div> <div>Care Management &amp; Crisis Support</div>	
<div>Resources to Relax &amp; Recharge</div> <ul style="list-style-type: none"><li>Savings on massage therapy, yoga, meditation, and more</li><li><a href="#">ProvidenceHealthPlan.com/LifeBalance</a></li></ul>	<div>Health Coaching</div> <ul style="list-style-type: none"><li><a href="#">ProvidenceHealthPlan.com/HealthCoaching</a></li><li>One-on-one health coaching sessions</li><li>Personalized goal setting with manageable steps</li><li>A program designed to empower members to achieve their health goals</li></ul> <div>Learn to Live</div> <ul style="list-style-type: none"><li><a href="#">LearnToLive.com/Welcome/ProvidenceHealthPlan</a></li><li>Self-directed virtual therapy to manage mental well-being</li><li>One-on-one coaching, mindfulness exercises, and live and on-demand webinars</li><li>Available at any time within the app</li></ul>	<div>Behavioral Health Concierge</div> <ul style="list-style-type: none"><li><a href="#">Providence.org/BHC</a></li><li>Quick access to direct care with Providence providers</li><li>Extended hours 7 a.m. – 8 p.m. (Pacific Time), 7 days a week</li><li>Help with life stressors, mental health, and addiction issues</li><li>Available to eligible members residing in OR, WA, ID, CA, MT, and TX</li></ul> <div>Talkspace</div> <ul style="list-style-type: none"><li><a href="#">Talkspace.com/ProvidenceHealthPlan</a></li><li>Telehealth provider of virtual psychotherapy for teens (13+) and adults</li><li>Be matched to a provider within 48 hours</li><li>Connect through text, call, or live video</li><li>Access to therapy, psychiatry,* or both</li></ul> <div><small>*Psychiatrists have the ability to prescribe medication.</small></div>	<div>Equip</div> <ul style="list-style-type: none"><li>Virtual, eating disorder treatment</li><li>Kids and young adults ages 6-24</li><li>Family-Based Treatment (FBT) matched with a multi-disciplinary team</li></ul> <div>Charlie Health</div> <ul style="list-style-type: none"><li>Virtual Intensive Outpatient Program (vIOP)</li><li>Teens and young adults ages 11-30</li><li>Personalized treatment plans, including group and family/individual therapy</li></ul> <div>Joon Care</div> <ul style="list-style-type: none"><li>Suicide and crisis support</li><li>Virtual sessions with a licensed therapist</li><li>Teens and young adults ages 13-26</li><li>Available to eligible members residing in OR, WA, TX, CA, DE, PA, and NY</li></ul>	<div>Behavioral Health Network</div> <ul style="list-style-type: none"><li>Local and nationwide access</li><li>In-person and virtual services</li><li>Age-specific care (kids, teens, adults)</li><li>Access to specialty behavioral health network</li></ul> <div>Provider Directory</div> <ul style="list-style-type: none"><li><a href="#">ProvidenceHealthPlan.com/FindAProvider</a></li><li>Customized provider search by using Member ID number</li><li>Select “Find a care provider”</li><li>Select “Mental Health/Substance Use Disorder”</li></ul>	<div>Behavioral Health Hub</div> <ul style="list-style-type: none"><li>Immediate access 24/7</li><li>Team trained in crisis triage care</li><li>Real-time referrals</li></ul> <div>Emergency &amp; Urgent Care Services</div> <ul style="list-style-type: none"><li>In-patient and residential care</li><li>Partial hospital care</li></ul>

For more information, visit

[ProvidenceHealthPlan.com/BehavioralHealth](#)

# Pharmacy Resources

Understand benefits and how members can save money on prescriptions.

## Formulary – A List of Covered Medications

A formulary is a list of generic and brand name prescription drugs that are covered under your members’ health plan. The medications listed on the formulary have been approved based on their safety, quality, effectiveness, and affordability. Providence provides this comprehensive list to all members with pharmacy benefits.

For member formulary access, visit [ProvidenceHealthPlan.com/FindMyFormulary](https://ProvidenceHealthPlan.com/FindMyFormulary)

## A Specialty Team for Specialty Pharmacies

Specialty drugs require careful handling or administration (like refrigeration or complex injection instructions). For members to get the information they need, they have access to a dedicated, specialty care team. The Care Team will provide support, including where to find the nearest specialty pharmacy, and how to get financial assistance when available.

## Save a Trip to the Pharmacy – Have Your Medication Delivered

When members switch to mail order, they can get what they need delivered directly to their homes.<sup>1</sup> Request the prescriptions to be sent to one of our preferred mail order pharmacies – Costco Mail Order or Postal Prescription Services.<sup>2</sup>

**For questions about pharmacy benefits:**  
Visit [ProvidenceHealthPlan.com/Pharmacy](https://ProvidenceHealthPlan.com/Pharmacy) or call **877-216-3644 (TTY: 711)**  
Monday – Friday between 8 a.m. and 5 p.m. (Pacific Time).

## Find a Preferred Pharmacy

Our network of preferred pharmacies includes those affiliated with Providence along with major retailers like Rite Aid, CVS, Costco, Walmart, and many more. To search our directory, members can search by using their ID number from the back of their ID card.

To search for in-network pharmacies, visit [ProvidenceHealthPlan.com/FindAProvider](https://ProvidenceHealthPlan.com/FindAProvider)

## Enjoy Access to a Nationwide Network


There are thousands of participating pharmacies members can choose from to get the medication they need. Retail and preferred retail pharmacies offer a 30-day supply, or up to 90 days for maintenance medication. When members fill their prescriptions at a preferred retail pharmacy, they may save money.


## Rx Savings Solutions


Utilizes software that scans members’ medications against their plans to find covered, lower-cost prescriptions. Option to receive personalized alerts about potential prescription savings via mail, email, phone, call, or text.


# In-person and virtual care


With several options to choose from, members can get the care they need – at home, or in person – anytime, anywhere.


 **Primary Care**  
Visits with a Primary Care Provider (PCP) to establish a relationship and build a personalized health history.


 **Telehealth (phone or video appointment)\***  
Members schedule a phone appointment to talk with a Primary Care Provider or specialist from anywhere using a video conferencing platform, such as Zoom.

 **24/7 Nurse Advice Line (ProvRN)**  
Members can speak with a registered nurse anytime, any day, when they have a health concern, a sick newborn, or just need advice – it’s a simple first step to determine if they need in-person care.

 **ExpressCare Virtual**  
Connect in minutes via phone or video to treat conditions like common colds, flu and fever, or infections like pink eye, laryngitis, or bronchitis. Reproductive and pediatric health concerns can be addressed at these virtual visits, along with prescription refills and scheduling labs or procedures.

 **ExpressCare Clinics**  
Same-day in-person appointments or walk-ins (where available). Useful for treating common conditions like a cold, sore throat, or allergies.

 **Urgent Care**  
Urgent care is where members turn when they can’t wait for a primary care appointment, to treat minor injuries like cuts, burns and pains.

 **Emergency Care**  
Emergency care is for symptoms like suspected heart attack, severe abdominal pain, poisoning or loss of consciousness.

\*Subject to availability, call your provider’s office to ask if this is an option.

<sup>1</sup> Excludes specialty and compounded medications  
<sup>2</sup> Your network provisions may require the use of just one of these mail-order pharmacies for coverage



# myProvidence Member Portal

Provides members with secure digital access to manage and use benefits.

## My Health Plan



### Benefits Documents

Members can view materials to learn about:

- How to use plan coverage
- Covered services and costs
- Plan benefits, and more



### Claims & Explanation of Benefits (EOB)

Reference claims and understand how health care services are billed. EOB includes:

- Services provided
- Provider's billed amount
- Amount covered by insurance
- Member responsibility
- Reasons for denial (if any)



### Pharmacy Information

Members can go to "Drug Lists" to see a list of FDA-approved drugs covered by their plan. The list includes:

- Brand-name, generic, and specialty medications
- Medications that require approval, that are part of a step therapy program, or have refill limits



### Benefit Usage

Members can view their annual deductible and out-of-pocket maximum progress. Once these limits are reached:

- Insurance begins to pay a portion of their healthcare costs (deductible)
- Insurance typically covers most covered healthcare costs (out-of-pocket maximum)

## My Providers



### My Providers

Members can find in-network providers, pharmacies, and facilities, or select a PCP. The directory includes:

- Providers and pharmacies tailored to plan network
- Filters such as language, gender, race, ethnicity, and more

## My Tools



### Estimate Costs

Estimate medical, pharmacy, and dental treatment costs.

- Compare costs among providers and pharmacies
- Find copay and coinsurance information for services



### ID Card Management

View member ID card for plan details such as:

- Member and Group ID
- Covered plan network
- Care resources
- Claims submission information

# Member Perks

Additional benefits and programs available to cover every aspect of life.



### One Pass Select™

Discover whole body health in one affordable program. Choose a membership tier that fits their lifestyle and access digital fitness apps, gym memberships, and home grocery delivery services. Members can start their journey for less than \$1 a day.



### LifeBalance

LifeBalance gives members and their family discounts on the things they love to do, like going to the movies or taking a vacation. They'll find ways to stay active, reduce stress and save money on thousands of recreational, cultural, well-being and travel-related purchases.



### Travel Assistance®

We've partnered with Assist America Travel Assistance® to provide logistical support for emergency medical needs when away from home. Get help with prompt admission to a qualified hospital or replacing prescriptions that have been left behind, and much more.



### ID Protection

Assist America protects from the theft of personal data and helps restore its integrity if it is used fraudulently. Store important information in a safe location, and if it's lost or stolen, take advantage of a fast and simple resolution process.

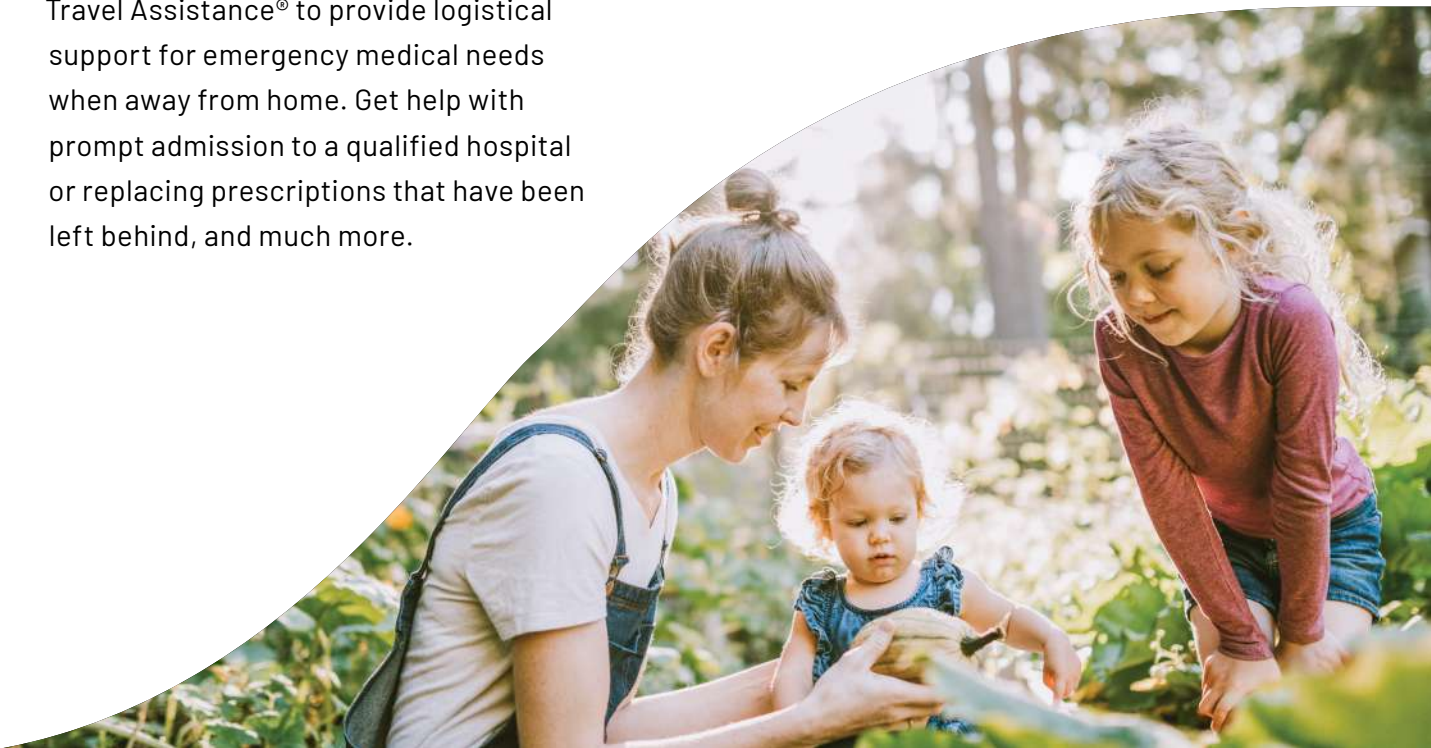


### Personal Health Coach

For members thinking about a healthier lifestyle. Our Providence health coaches are here to support their journey to a healthier, happier life.

For more information, visit

[ProvidenceHealthPlan.com/Member-Perks](https://ProvidenceHealthPlan.com/Member-Perks)



# Health For All

We are committed to working alongside the communities we serve, learning about unique healthcare challenges, and creating tangible solutions to make healthcare more equitable and accessible.

## Have questions?

Feel free to reach out in one of the ways outlined below:

Bend Chamber of Commerce  
**541-382-3221**



Johnson Benefit Planning  
**541-382-3571** or toll-free **800-314-3571**



**[BendChamber.org/Chamber-Health-Insurance](https://BendChamber.org/Chamber-Health-Insurance)**