

OREGON 2017 EHB BENCHMARK PLAN

SUMMARY INFORMATION

Small Group Market
PacificSource Health Plans
Preferred Codeduct Value
Preferred Codeduct Value 3000+35/70% 0812 Tiered Value Rx 10/50/75 0812
Pediatric dental (CHIP) Pediatric vision (FEDVIP)



BENEFITS AND LIMITS

Α	В	С	D	E	F	G	Н
Benefit	EHB	Is the	Quantitative	Limit	Limit Unit	Exclusions	Explanations
		Benefit	Limit on	Quantity			
		Covered?	Service?	-			
Primary Care Visit to Treat an Injury or Illness	Yes	Covered	No				
Specialist Visit	Yes	Covered	No				
Other Practitioner Office Visit (Nurse, Physician	Yes	Covered	No				
Assistant)							
Outpatient Facility Fee (e.g., Ambulatory Surgery	Yes	Covered	No				
Center)							
Outpatient Surgery Physician/Surgical Services	Yes	Covered	No				
Hospice Services	Yes	Covered	No				Respite care provided in a nursing facility subject to a maximum of five
							consecutive days and to a lifetime maximum benefit of 30 days.
Routine Dental Services (Adult)	No No	Not Covered					
Infertility Treatment	NO	Not Covered					
Long-Term/Custodial Nursing Home Care	NO	Not Covered Not Covered					
Private-Duty Nursing Routine Eye Exam (Adult)	No	Covered	No				
Urgent Care Centers or Facilities	Yes	Covered	No				
Home Health Care Services	Yes	Covered	No				
Emergency Room Services	Yes	Covered	No				
Emergency Transportation/Ambulance	Yes	Covered	No				
Inpatient Hospital Services (e.g., Hospital Stay)	Yes	Covered	No				
Inpatient Physician and Surgical Services	Yes	Covered	No				
Bariatric Surgery	No	Not Covered	-				
Cosmetic Surgery	Yes	Covered	No				Cosmetic or reconstructive surgery must take place within 18 months after
	105	covered	10				the injury, surgery, scar, or defect first occurred unless medically necessary.
Skilled Nursing Facility	Yes	Covered	Yes	60	Day(s) per Year		······································
Prenatal and Postnatal Care	Yes	Covered	No				
Delivery and All Inpatient Services for Maternity	Yes	Covered	No				
Care							
Mental/Behavioral Health Outpatient Services	Yes	Covered	No				
Mental/Behavioral Health Inpatient Services	Yes	Covered	No				
Substance Abuse Disorder Outpatient Services	Yes	Covered	No				
Substance Abuse Disorder Inpatient Services	Yes	Covered	No				
Generic Drugs	Yes	Covered	No				
Preferred Brand Drugs	Yes	Covered	No				
Non-Preferred Brand Drugs	Yes	Covered	No				
Specialty Drugs	Yes	Covered	No				
Outpatient Rehabilitation Services	Yes	Covered		30	Visit(s) per Year		Visit limit does not apply to treatment of mental health conditions.
Habilitation Services	Yes	Covered		30	Visit(s) per Year		Visit limit does not apply to treatment of mental health conditions.
Chiropractic Care	No		No				
Durable Medical Equipment	Yes	Covered	No				\$5,000 limit on non-Essential Health Benefit Durable Medical equipment.
Hearing Aids	Yes	Covered	Yes	2000	Dollar(s) per 2 Years		Covers hearing aids for members under 18 years of age and younger, or 25
	<u> </u>						years of age and younger if the member is enrolled in college.
Imaging (CT/PET Scans, MRIs)	Yes	Covered	No				
Preventive Care/Screening/Immunization	Yes	Covered	No				
Routine Foot Care	Yes	Covered	No				Covered for patients with diabetes mellitus.
Acupuncture	No	Not Covered	No				



Α	В	С	D	E	F	G	Н
Benefit	EHB	Is the	Quantitative	Limit	Limit Unit	Exclusions	Explanations
		Benefit	Limit on	Quantity			
Wainht Lass Drawner	No	Covered? Not Covered	Service?				
Weight Loss Programs	No		NO				Considered with SED Divervision . Web Ontion
Routine Eye Exam for Children	Yes		-				Supplemented with FEP BlueVision - High Option.
Eye Glasses for Children	Yes		No				Supplemented with FEP BlueVision – High Option.
Dental Check-Up for Children	Yes		No				Supplemented with OHP Plus.
Rehabilitative Speech Therapy	Yes	Covered	Yes	30	Visit(s) per Year		30 visits per condition per calendar year. Visit limit does not apply to treatment of mental health conditions.
Rehabilitative Occupational and Rehabilitative	Yes	Covered	Yes	30	Visit(s) per Year		Visit limit does not apply to treatment of mental health conditions.
Physical Therapy							
Well Baby Visits and Care	Yes	Covered	No				
Laboratory Outpatient and Professional Services	Yes	Covered	No				
X-rays and Diagnostic Imaging	Yes	Covered	No				
Basic Dental Care - Child	Yes	Covered	No				Supplemented with OHP Plus.
Orthodontia - Child	Yes	Covered	No				Supplemented with OHP Plus.
Major Dental Care - Child	Yes	Covered	No				Supplemented with OHP Plus.
Basic Dental Care - Adult	No	Not Covered	No				
Orthodontia - Adult	No	Not Covered	No				
Major Dental Care – Adult	No	Not Covered	No				
Abortion for Which Public Funding is Prohibited	No	Not Covered	No				
Transplant	Yes	Covered	No				
Accidental Dental	Yes	Covered	No				
Dialysis	Yes	Covered	No				
Allergy Testing	Yes	Covered	No				
Chemotherapy	Yes	Covered	No				
Radiation	Yes	Covered	No				
Diabetes Education	Yes	Covered	Yes	3	Hour(s) per Year		Covers three hours of education per year if there is a significant change in condition or treatment; covers one diabetes self-management education program at the time of diagnosis.
Prosthetic Devices	Yes	Covered	No				
Infusion Therapy	Yes	Covered	No				
Treatment for Temporomandibular Joint Disorders	No	Not Covered	No				
Nutritional Counseling	Yes	Covered	Yes	5	Visit(s) per Lifetime		Visit limit does not apply to treatment of mental health conditions.
Reconstructive Surgery	Yes	Covered	No				Cosmetic or reconstructive surgery must take place within 18 months after the injury, surgery, scar, or defect first occurred unless medically necessary.



PRESCRIPTION DRUG EHB-BENCHMARK PLAN BENEFITS BY CATEGORY AND CLASS

CATEGORY	CLASS	SUBMISSION COUNT
Analgesics	Nonsteroidal Anti-inflammatory Drugs	20
Analgesics	Opioid Analgesics, Long-acting	11
Analgesics	Opioid Analgesics, Short-acting	13
Anesthetics	Local Anesthetics	3
Anti-Addiction/ Substance Abuse Treatment Agents	Alcohol Deterrents/Anti-craving	3
Anti-Addiction/ Substance Abuse Treatment Agents	Opioid Dependence Treatments	2
Anti-Addiction/ Substance Abuse Treatment Agents	Opioid Reversal Agents	1
Anti-Addiction/ Substance Abuse Treatment Agents	Smoking Cessation Agents	3
Antibacterials	Aminoglycosides	5
Antibacterials	Antibacterials, Other	17
Antibacterials	Beta-lactam, Cephalosporins	9
Antibacterials	Beta-lactam, Other	2
Antibacterials	Beta-lactam, Penicillins	5
Antibacterials	Macrolides	5
Antibacterials	Quinolones	10
Antibacterials	Sulfonamides	4
Antibacterials	Tetracyclines	4
Anticonvulsants	Anticonvulsants, Other	4
Anticonvulsants	Calcium Channel Modifying Agents	4
Anticonvulsants	Gamma-aminobutyric Acid (GABA) Augmenting Agents	5
Anticonvulsants	Glutamate Reducing Agents	3
Anticonvulsants	Sodium Channel Agents	7
Antidementia Agents	Antidementia Agents, Other	1
Antidementia Agents	Cholinesterase Inhibitors	3
Antidementia Agents	N-methyl-D-aspartate (NMDA) Receptor Antagonist	1
Antidepressants	Antidepressants, Other	8
Antidepressants	Monoamine Oxidase Inhibitors	4
Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake	
Antidepressants	Inhibitors) Tricyclics	11
Antiemetics	Antiemetics, Other	9
Antiemetics	Emetogenic Therapy Adjuncts	10
Antifungals	No USP Class	6
Antigout Agents	No USP Class	19
Anti-inflammatory Agents	Glucocorticoids	6
Anti-inflammatory Agents	Nonsteroidal Anti-inflammatory Drugs	26
	Ergot Alkaloids	20
Antimigraine Agents		2



CATEGORY	CLASS	SUBMISSION COUNT
Antimigraine Agents	Prophylactic	3
Antimigraine Agents	Serotonin (5-HT) 1b/1d Receptor Agonists	7
Antimyasthenic Agents	Parasympathomimetics	3
Antimycobacterials	Antimycobacterials, Other	2
Antimycobacterials	Antituberculars	11
Antineoplastics	Alkylating Agents	4
Antineoplastics	Antiandrogens	4
Antineoplastics	Antiangiogenic Agents	3
Antineoplastics	Antiestrogens/Modifiers	3
Antineoplastics	Antimetabolites	5
Antineoplastics	Antineoplastics, Other	4
Antineoplastics	Aromatase Inhibitors, 3rd Generation	2
Antineoplastics	Enzyme Inhibitors	5
Antineoplastics	Molecular Target Inhibitors	17
Antineoplastics	Monoclonal Antibodies	1
Antineoplastics	Retinoids	3
Antiparasitics	Anthelmintics	
Antiparasitics	Antiprotozoals	4
Antiparasitics	Pediculicides/Scabicides	10
Antiparkinson Agents	Anticholinergics	6
Antiparkinson Agents	Antiparkinson Agents, Other	3
Antiparkinson Agents	Dopamine Agonists	4
Antiparkinson Agents	Dopamine Precursors/ L-Amino Acid Decarboxylase Inhibitors	1
Antiparkinson Agents	Monoamine Oxidase B (MAO-B) Inhibitors	2
Antipsychotics	1st Generation/Typical	10
Antipsychotics	2nd Generation/Atypical	9
Antipsychotics	Treatment-Resistant	1
Antispasticity Agents	No USP Class	4
Antivirals	Anti-cytomegalovirus (CMV) Agents	2
Antivirals	Anti-hepatitis B (HBV) Agents	6
Antivirals	Anti-hepatitis C (HCV) Agents	7
Antivirals	Antiherpetic Agents	5
Antivirals	Anti-HIV Agents, Integrase Inhibitors (INSTI)	
Antivirals	Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)	3
Antivirals	Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)	5
Antivirals	Anti-HIV Agents, Other	12
Antivirals	Anti-HIV Agents, Protease Inhibitors	3
Antivirals	Anti-influenza Agents	9
		4



CATEGORY	CLASS	SUBMISSION COUNT
Anxiolytics	Anxiolytics, Other	4
Anxiolytics	Benzodiazepines	0
Anxiolytics	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	5
Bipolar Agents	Bipolar Agents, Other	7
Bipolar Agents	Mood Stabilizers	5
Blood Glucose Regulators	Antidiabetic Agents	20
Blood Glucose Regulators	Glycemic Agents	1
Blood Glucose Regulators	Insulins	9
Blood Products/Modifiers/ Volume Expanders	Anticoagulants	8
Blood Products/Modifiers/ Volume Expanders	Blood Formation Modifiers	6
Blood Products/Modifiers/ Volume Expanders	Coagulants	0
Blood Products/Modifiers/ Volume Expanders	Platelet Modifying Agents	9
Cardiovascular Agents	Alpha-adrenergic Agonists	4
Cardiovascular Agents	Alpha-adrenergic Blocking Agents	4
Cardiovascular Agents	Angiotensin II Receptor Antagonists	8
Cardiovascular Agents	Angiotensin-converting Enzyme (ACE) Inhibitors	10
Cardiovascular Agents	Antiarrhythmics	10
Cardiovascular Agents	Beta-adrenergic Blocking Agents	13
Cardiovascular Agents	Calcium Channel Blocking Agents	9
Cardiovascular Agents	Cardiovascular Agents, Other	4
Cardiovascular Agents	Diuretics, Carbonic Anhydrase Inhibitors	2
Cardiovascular Agents	Diuretics, Loop	4
Cardiovascular Agents	Diuretics, Potassium-sparing	4
Cardiovascular Agents	Diuretics, Thiazide	6
Cardiovascular Agents	Dyslipidemics, Fibric Acid Derivatives	2
Cardiovascular Agents	Dyslipidemics, HMG CoA Reductase Inhibitors	7
Cardiovascular Agents	Dyslipidemics, Other	4
Cardiovascular Agents	Vasodilators, Direct-acting Arterial	3
Cardiovascular Agents	Vasodilators, Direct-acting Arterial/Venous	3
Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines	4
Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Amphetamines	4
Central Nervous System Agents	Central Nervous System, Other	7
Central Nervous System Agents	Fibromyalgia Agents	3
Central Nervous System Agents	Multiple Sclerosis Agents	7
Dental and Oral Agents	No USP Class	8
Dermatological Agents	No USP Class	83
Enzyme Replacement/ Modifiers	No USP Class	7
Gastrointestinal Agents	Antispasmodics, Gastrointestinal	



CATEGORY	CLASS	SUBMISSION COUNT
Gastrointestinal Agents	Gastrointestinal Agents, Other	8
Gastrointestinal Agents	Histamine2 (H2) Receptor Antagonists	4
Gastrointestinal Agents	Irritable Bowel Syndrome Agents	2
Gastrointestinal Agents	Laxatives	4
Gastrointestinal Agents	Protectants	2
Gastrointestinal Agents	Proton Pump Inhibitors	6
Genitourinary Agents	Antispasmodics, Urinary	7
Genitourinary Agents	Benign Prostatic Hypertrophy Agents	9
Genitourinary Agents	Genitourinary Agents, Other	6
Genitourinary Agents	Phosphate Binders	4
Hormonal Agents, Stimulant/ Replacement/ Modifying (Adrenal)	No USP Class	31
Hormonal Agents, Stimulant/ Replacement/ Modifying (Prostaglandins)	No USP Class	1
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)	Anabolic Steroids	2
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)	Androgens	4
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)	Estrogens	10
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)	Progesterone Agonists/Antagonists	0
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)	Progestins	9
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)	Selective Estrogen Receptor Modifying Agents	1
Hormonal Agents, Stimulant/Replacement/ Modifying (Pituitary)	No USP Class	5
Hormonal Agents, Stimulant/Replacement/ Modifying (Thyroid)	No USP Class	4
Hormonal Agents, Suppressant (Adrenal)	No USP Class	1
Hormonal Agents, Suppressant (Parathyroid)	No USP Class	2
Hormonal Agents, Suppressant (Pituitary)	No USP Class	7
Hormonal Agents, Suppressant (Thyroid)	Antithyroid Agents	2
Immunological Agents	Angioedema (HAE) Agents	1
Immunological Agents	Immune Suppressants	18
Immunological Agents	Immunizing Agents, Passive	0
Immunological Agents	Immunomodulators	16
Inflammatory Bowel Disease Agents	Aminosalicylates	3
Inflammatory Bowel Disease Agents	Glucocorticoids	5
Inflammatory Bowel Disease Agents	Sulfonamides	1
Metabolic Bone Disease Agents	No USP Class	13
Ophthalmic Agents	Ophthalmic Prostaglandin and Prostamide Analogs	3
Ophthalmic Agents	Ophthalmic Agents, Other	20
Ophthalmic Agents	Ophthalmic Anti-allergy Agents	10
Ophthalmic Agents	Ophthalmic Antiglaucoma Agents	18
Ophthalmic Agents	Ophthalmic Anti-inflammatories	11
Otic Agents	No USP Class	8



CATEGORY	CLASS	SUBMISSION COUNT
Respiratory Tract/ Pulmonary Agents	Antihistamines	10
Respiratory Tract/ Pulmonary Agents	Anti-inflammatories, Inhaled Corticosteroids	7
Respiratory Tract/ Pulmonary Agents	Antileukotrienes	3
Respiratory Tract/ Pulmonary Agents	Bronchodilators, Anticholinergic	2
Respiratory Tract/ Pulmonary Agents	Bronchodilators, Sympathomimetic	10
Respiratory Tract/ Pulmonary Agents	Cystic Fibrosis Agents	3
Respiratory Tract/ Pulmonary Agents	Mast Cell Stabilizers	1
Respiratory Tract/ Pulmonary Agents	Phosphodiesterase Inhibitors, Airways Disease	5
Respiratory Tract/ Pulmonary Agents	Pulmonary Antihypertensives	7
Respiratory Tract/ Pulmonary Agents	Respiratory Tract Agents, Other	3
Skeletal Muscle Relaxants	No USP Class	6
Sleep Disorder Agents	GABA Receptor Modulators	3
Sleep Disorder Agents	Sleep Disorders, Other	5
Therapeutic Nutrients/ Minerals/ Electrolytes	Electrolyte/Mineral Modifiers	7
Therapeutic Nutrients/ Minerals/ Electrolytes	Electrolyte/Mineral Replacement	7
Therapeutic Nutrients/ Minerals/ Electrolytes	Vitamins	0