



Kaiser Permanente Medical Plans

High-quality care with predictable costs for PEBB members

Choosing a plan that works for you is important, but it doesn't have to be complicated.

Look for convenience:

- Most of our locations let you see your doctor, get lab work or X-rays, and pick up a prescription – all in one trip.
- Skip the trip to your doctor's office with video visits, e-visits, and the option to email your doctor's office with nonurgent questions.

Look for cost savings and efficiency:

- Find a plan that fits your needs, from the Traditional Plan's predictable costs with no deductible, to the Deductible Plan's lower premiums and simple copays for primary and specialty care office visits.
- Our coordinated care teams, advanced technology, and preventive focus help provide better treatment and more affordable care.

Member cost shares:

We offer PEBB members a \$0 cost share for the following services: video visits, phone visits, e-visits, and emails to your care team.

Look for high-quality care:

- We have one of the largest multispecialty medical groups in the country, so we'll find you the right specialist quickly.
- Our integrated system helps your doctor, nurses, and specialists work together to help keep you healthy. They're connected to each other, and you, through your electronic health record.

Look for healthy resources:

Good health goes beyond the doctor's office.

The myStrength and Calm apps are digital tools that provide effective, easy-to-use mental health resources – without a referral and at no cost to members.^{1,2} Learn more at kp.org/selfcareapps/nw.

We're here to help if you have more questions:

1-800-813-2000 (TTY 711)

1-800-324-8010 (language interpretation services)

Monday through Friday, 8 a.m. to 6 p.m.

See reverse to compare our medical plan options.

my.kp.org/pebb



¹Calm and myStrength are only available to Kaiser Permanente members with medical coverage.

²myStrength is a wholly owned subsidiary of Livongo Health, Inc.

PEBB SUMMARY OF MEDICAL BENEFITS FOR 2021

Choose from 4 Kaiser Permanente plans

Plan benefits	Full-Time Traditional Copayment Plan	Full-Time \$250 Deductible Plan	Part-Time Traditional Copayment Plan	Part-Time \$250 Deductible Plan
Plan year deductible	\$0	\$250/individual ¹ \$750/family ²	\$0	\$250/individual ¹ \$750/family ²
Out-of-pocket maximum per plan year	\$600/individual ¹ \$1,200/family ²	\$1,500/individual ¹ \$4,500/family ²	\$1,500/individual ¹ \$3,000/family ²	\$1,500/individual ¹ \$4,500/family ²
Preventive care services	\$0	\$0	\$0	\$0
Prenatal care	\$0	\$0	\$0	\$0
Well-baby routine visits	\$0	\$0	\$0	\$0
Preventive tests	\$0	\$0	\$0	\$0
Office visit copay	\$5	\$5	\$30	\$30
Specialist copay	\$5	\$5	\$30	\$30
Outpatient surgery	\$5	15% coinsurance after deductible	\$30	20% coinsurance after deductible
Emergency room copay	\$75	\$75 after deductible	\$100	\$100 after deductible
Urgent care copay	\$5	\$25	\$30	\$50
Hospital inpatient care	\$50/day up to \$250/admission	\$50/day after deductible up to \$250/admission	\$500 per admission	\$500 per admission after deductible
Lab/X-ray/diagnostics	\$0	\$15	\$10	\$20
Prescription: Mail-order pharmacy is available at 2 copays for a 90-day supply.	\$1 generic \$15 formulary brand \$15 nonformulary brand \$50 specialty	\$5 generic \$25 formulary brand 50% up to \$100 nonformulary brand \$50 specialty	\$10 generic \$25 formulary brand \$25 nonformulary brand \$50 specialty	\$10 generic \$25 formulary brand \$25 nonformulary brand \$50 specialty
Self-referred alternative care: chiropractic, naturopathy, and acupuncture	\$10 up to \$1,000 per year	\$10 up to \$1,000 per year	\$30 physician referral required	\$10 up to \$1,000 per year
Self-referred massage therapy	Not covered	\$25 copay ³ 12-visit maximum	Not covered	\$25 copay ³ 12-visit maximum
Routine eye exam	\$5	\$5	\$30	\$30

¹For subscriber only coverage per year.

²For a family of 2 or more members per year.

³Massage therapy visits apply toward alternative care maximum of \$1,000.

This is not a contract. This benefit summary does not fully describe your benefit coverage with Kaiser Foundation Health Plan of the Northwest. For more details of your benefit coverage, exclusions and limitations, claims review, and adjudication procedures, please see your *Evidence of Coverage (EOC)* or call Member Services. In the case of a conflict between this summary and the *EOC*, the *EOC* will prevail.

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