

Kaiser Permanente Medical Plans

High-quality care for all that is you

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,¹ e-visits, and the option to email your doctor's office with nonurgent questions.^{2,3}

With plan designs that fit your needs:

- Find a plan that helps fit your needs. Our plan options let you decide whether you prefer a higher monthly premium with lower costs when you receive care, or a lower monthly premium with higher costs when you receive care.
- Our coordinated care teams, advanced technology, and preventive focus help provide more effective care.

Member cost shares for virtual services

Services	Classic	CDHP
Email	\$0	\$0
E-visit	\$0	\$0 after deductible
Phone visit	\$0	\$0 after deductible
Video visit	\$0	\$0 after deductible

Look for high-quality care:

- We have a large and diverse multispecialty medical group, so we'll find you a specialist when you need one.
- 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 resources on our website: my.kp.org/wapebb

- Learn more about Kaiser Permanente and see what it's like being a member. Experience how we make health care simpler and more convenient.
- View plan documents, including enrollment materials, benefit summaries, healthy resources, and more.

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/wapebb

PEBB SUMMARY OF MEDICAL BENEFITS FOR 2024

Plan benefits	Classic	CDHP
	You pay	You pay
Annual deductible	\$300/individual⁴ \$900/family⁵	\$1,600/individual ⁴ \$3,200/family ⁵
Annual out-of-pocket maximum	\$2,500/individual⁴ \$5,000/family⁵	\$5,100/individual⁴ \$10,200/family⁵
Preventive care services	\$0	\$0
Primary care office visit	\$25 ages 18+ \$0 ages 0-17	\$20* ages 18+ \$0* ages 0-17
Prenatal office visit	\$0	\$0
Specialist office visit	\$35	\$30*
Outpatient surgery, emergency room, and hospital inpatient care	15%*	15%*
Vision exam	\$25	\$20*
Urgent care visit	\$45	\$40*
Lab/X-ray/diagnostics	\$10	15%*
Prescription drugs: Mail-order pharmacy is available at 2 copays for a 90-day supply. ⁶	\$15 generic \$40 preferred brand \$75 non-preferred brand 50% up to \$150 specialty	\$15* generic \$40* preferred brand \$75* non-preferred brand 50% up to \$150* specialty
Chiropractic ⁷	\$35	\$30*
Acupuncture ⁷	\$35	\$30*
Naturopathy	\$25 ages 18+ \$0 ages 0-17	\$20* ages 18+ \$0* ages 0-17
Massage therapy ⁸	\$25	\$25*
Vision hardware	Balance after \$150 allowance every 2 calendar years	Balance after \$150 allowance every 2 calendar years

*You pay charges for services when you receive them until you meet your deductible. After your deductible is met, you pay only your copay or cost share for services.

¹To have a video visit, members must be registered on kp.org and have a camera-equipped computer or mobile device. If you have a Consumer-Directed Health Plan (CDHP), you will need to pay the full charges for e-visits, phone visits, and video visits until you reach your deductible. Once you reach your deductible, your copay is \$0 for scheduled phone and video visits.

²When appropriate and available.

³These features are available when you get care at a Kaiser Permanente facility.

⁴For subscriber only coverage per year.

⁵For a family of 2 or more members per year.

⁶Most specialty drugs are not available for mail-order.

⁷Preauthorization required after first 12 visits. To be covered by your benefit, you must receive care from a provider in our service area who is part of The CHP Group network. Visit chpgroup.com to find a provider. ⁸Massage therapy is limited to 12 visits per year. No referral is required. To be covered by your benefit, you must receive care from a provider in our service area who is part of The CHP Group network. Visit chpgroup.com to find a provider.

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.



