

Permanente Advantage – your health advocate



With your Kaiser Permanente Insurance Company (KPIC) point-of-service (POS),¹ preferred provider organization (PPO),² or out-of-area (OOA) indemnity plan,³ you have the freedom to decide where you get care. But sometimes managing your choices can seem overwhelming. **Permanente Advantage** is here to help you understand your options so you can focus on what's important – getting better.

Precertification

As your health advocate, Permanente Advantage helps make sure medical services ordered by your doctor are:

- Medically necessary
- Cost-effective
- The most appropriate treatment for your condition based on nationally recognized standards

That's why you may need approval before you get certain services from participating or nonparticipating providers. This is called **precertification**.

Services that may need precertification include:

- Hospital admissions
- Outpatient surgeries
- Inpatient rehabilitation, hospice, or skilled nursing facility services
- MRI, CT, and PET scans
- Home infusion/home health
- Durable medical equipment, prosthetics, or orthotics
- Genetic testing
- Radiation therapy
- Physical, speech, or occupational therapy
- Pain management

For a complete list of services that require precertification, see your *Certificate of Insurance*.

You or your doctor should call to ask for precertification before you get services.⁴

Need precertification or other help?

To get precertification for services from a participating provider in a Kaiser Permanente state (California, Colorado, District of Columbia, Georgia, Hawaii, Maryland, Oregon, Virginia, and Washington) or a nonparticipating provider, call Permanente Advantage at **1-888-251-7052**, Monday through Friday, 6 a.m. to 6 p.m. Pacific Time. If you call after hours, leave a message and your call will be returned usually on the next business day.

In all other states, for services from a participating provider, Cigna HealthcareSM PPO Network providers will get precertification for you.⁵

Visit **kp.org/permanenteadvantage** for more information about Permanente Advantage.

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Helping you manage a serious condition

If you're getting care for a serious condition, our Care Management Program may assign a registered nurse to be your personal case manager.

Your case manager will:

- Work with your health care providers to plan, coordinate, and monitor your care
- Help you understand your health plan benefits
- Help you coordinate any services requiring precertification
- Assist with transitions in care such as coordinating outpatient or home services after a hospital stay
- Let you know about medical, mental health, and social services that may be helpful to you
- Refer you to wellness, disease management, or maternity programs

When do I need a case manager?

A case manager may be helpful when you're dealing with a serious condition such as cancer, a high-risk pregnancy, or trauma. They can help make the care process easier and give you peace of mind while you focus on feeling better.

What will a case manager do for me?

A case manager will give you customized advice for your situation. They'll help you:

- Consider your treatment options
- Arrange for any services you need

How do I get a case manager?

You or your doctor can call Permanente Advantage at **1-888-251-7052**. We'll take a look at whether a case manager is appropriate for your condition.

Permanente Advantage is accredited by URAC. URAC's accreditation is recognized nationwide by state and federal regulators and ensures organizations are delivering health care in a manner consistent with national standards.

1. The HMO Tier of the Point-of-Service (POS) plan is underwritten by Kaiser Foundation Health Plan, Inc. (KFHP) while the Participating Provider and Non-Participating Provider Tiers of the POS plan are underwritten by Kaiser Permanente Insurance Company (KPIC). KPIC is a subsidiary of KFHP. **2.** The Kaiser Permanente PPO Plan is underwritten by Kaiser Permanente Insurance Company (KPIC), a subsidiary of Kaiser Foundation Health Plan, Inc. **3.** Kaiser Permanente Insurance Company (KPIC) underwrites the out-of-area plan. KPIC is a subsidiary of KFHP. **4. POS members:** Emergency care, up until the point when you are stable for transfer, is covered under the HMO tier. Please call the number on the back of your blue Kaiser Permanente ID card or **1-800-225-8883** for more information. **PPO and OOA members:** Emergency care does not require precertification, but precertification for inpatient admission requires notification within 24 hours. **5.** The Cigna HealthcareSM PPO Network refers to the health care providers (doctors, hospitals, specialists) contracted as part of the Cigna Healthcare PPO for Shared Administration.

Cigna Healthcare is an independent company and not affiliated with Kaiser Foundation Health Plan, Inc., and its subsidiary health plans. Access to the Cigna Healthcare PPO Network is available through Cigna Healthcare's contractual relationship with the Kaiser Permanente health plans. The Cigna Healthcare PPO Network is provided exclusively by or through operating subsidiaries of The Cigna Group, including Cigna Health and Life Insurance Company. The Cigna name, logo, and other marks are owned by Cigna Intellectual Property, Inc.