

The Kaiser Permanente Insurance Company Preferred Provider Organization (PPO) Plan

The flexibility and freedom you need

With the Kaiser Permanente PPO Plan,¹ you have 2 options for selecting a doctor – and you're free to see specialists without a referral.

- In California, Colorado, Georgia, Hawaii, Maryland, Oregon, Virginia, Washington, and the District of Columbia, you can get care from a **participating provider** in the Private Healthcare Systems (PHCS) Network for the Kaiser Permanente Insurance Company (KPIC).² In other states, you can visit a Cigna HealthcareSM PPO Network provider.³
- Or you can see **any licensed provider** you choose.⁴

Participating provider tier

- Nationwide coverage is provided through our participating provider networks. Providers within the PHCS Network for KPIC and Cigna Healthcare PPO Network can be found using the provider directories posted on kp.org/kpic/ppo. You can also get help finding a PHCS Network for KPIC provider by calling **1-888-298-7427**.
- Our participating provider network is likely to include your doctor, if you already have one.
- Most doctor's office visits are covered at a copay.
- Ask your doctor if you can get care by phone, video,⁵ or email. Cost shares vary depending on the type of service provided and are equivalent to an in-person visit specific to that service.
- After reaching your annual deductible,⁶ you'll pay a coinsurance for most other covered services, including hospitalization.
- Your doctor's office will file any claims and paperwork on your behalf.⁷

Lower out-of-pocket costs

When you see a participating provider, your out-of-pocket costs will generally be lower. Most doctor's office visits – including diagnostic lab tests and X-rays performed during your visit – are covered at just a copay. Most other services, including hospitalization, are covered at a coinsurance rate after you meet your deductible.

Nonparticipating provider tier

- Your choice of any licensed health care professional in the country, including specialists. Just make an appointment directly with their office.
- Continue seeing the doctor you have or choose one near your home or work.
- Ask your doctor if you can get care by phone, video,⁵ or email. Cost shares vary depending on the type of service provided and are equivalent to an in-person visit specific to that service.
- After reaching your annual deductible,⁶ you'll pay a coinsurance for most covered services.
- You may need to file your own claims and paperwork.

Note: This is a summary only. Your Kaiser Permanente Insurance Company (KPIC) *Certificate of Insurance* contains a complete explanation of benefits, exclusions, and limitations. The information provided here is not intended for use as a benefits summary, nor is it designed to serve as the *Certificate of Insurance*.



If you have questions about our PPO plan, including questions about benefits, claims, eligibility, or finding a participating provider, visit kp.org/kpic/ppo or call **1-800-788-0710** (TTY **711**).

Access to care

With the nonparticipating provider tier, you're free to see any licensed health care professional in the country. This can make it more convenient to continue any doctor relationships you already have, or to choose a doctor near your home or work.

When you see a nonparticipating provider, you'll need to reach your deductible for most services. Then, you'll start paying coinsurance for all covered services until you reach your out-of-pocket maximum. Overall, your out-of-pocket costs may be higher than with the participating provider tier and you'll need to file your own claims and paperwork. You'll also be responsible for any balance above the fair and reasonable cost your plan will cover.

Pharmacy coverage

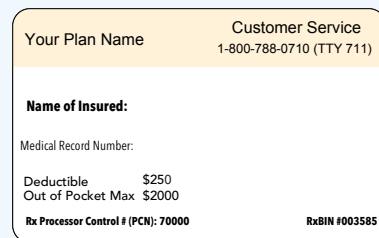
- Prescription delivery service is provided by Walgreens Home Delivery. Call **1-866-304-2846** or go to **walgreens.com/homedelivery**.
- Most prescription drugs are covered at a convenient copay. You can fill your prescriptions at any MedImpact pharmacy.⁸ To find a pharmacy near you, visit **kp.org/pharmacylocator/ppo** or call **1-800-788-2949**, 24 hours a day, 7 days a week.

Getting precertification

When getting care with a PHCS Network provider or nonparticipating provider, some suggested services may require precertification – like outpatient surgery, scheduled hospitalization, and complex imaging. Make sure you get precertification or your claim may be denied. Getting precertification can also help you avoid paying more than you need to. Once you enroll, we'll provide you with a complete list of services that require precertification, along with instructions on how to get it.

Cigna Healthcare PPO Network providers will be responsible for getting precertification on your behalf when it's required. You won't be financially responsible if a Cigna Healthcare PPO Network provider fails to get precertification for covered services.

Use your **gold and white ID card** anytime you seek medical or emergency care.



Sample image. Your card may look different.

Questions and answers

How much should I expect to pay each year?

Your exact costs will depend on your plan details and the services you receive. But in general, you'll pay a copay for most doctor's office visits to participating providers all year round. And most preventive care services will be covered at no cost or at a copay. If you see a nonparticipating provider, you can usually expect to pay full charges until you reach your annual deductible. After you reach your deductible, you'll start paying a coinsurance rate for most covered services until you reach your out-of-pocket maximum. Remember, any balance above the fair and reasonable cost from a nonparticipating provider won't contribute toward your plan deductible or out-of-pocket maximum.

How do I know when I need to submit a claim?

Participating providers should always submit any necessary claim forms to Kaiser Permanente on your behalf. You should only be asked to pay a copay, coinsurance, or deductible payment to the provider. If you receive care from a nonparticipating provider, you will be responsible for submitting claims and receipts to Kaiser Permanente. Nonparticipating providers may also ask you to pay the full amount up front.

Where do I submit claims?

Northern California members:

KFHP Claims Department
P.O. Box 12923
Oakland, CA 94604-2923

Southern California members:

KFHP Claims Department
P.O. Box 7004
Downey, CA 90242-7004

Does the PPO plan have a separate deductible for prescription drugs?

That depends on your plan details. We offer plans both with and without a separate deductible for brand-name prescription drugs. In most cases, however, you'll pay just a copay for most prescription drugs – even before you reach your annual plan deductible.

Is prescription delivery service available?

Yes. Prescription delivery service is administered by Walgreens Home Delivery. Walgreens will fill prescriptions written by participating and nonparticipating providers. Walgreens Home Delivery isn't managed through its retail pharmacies. If you have any questions about how it works, please call **1-866-304-2846** or sign in to [walgreens.com/homedelivery](https://www.walgreens.com/homedelivery).

What is precertification and why do I need it?

Precertification, also known as utilization management, is the review of services before they are performed to ensure they are medically necessary, appropriate, and cost effective for the member. Many services, including some outpatient procedures, durable medical equipment, and complex lab and imaging procedures (MRI, CT, PET scans, etc.), require precertification.

THIS IS AN IMPORTANT STEP. Failure to obtain precertification for services with a PHCS Network provider or nonparticipating provider will result in a reduction of benefits.

Cigna PPO Network providers will be responsible for getting precertification on your behalf when it's required. You won't be financially responsible if a Cigna PPO Network provider fails to get precertification for covered services.

1. The Kaiser Permanente PPO Plan is underwritten by Kaiser Permanente Insurance Company (KPIC), a subsidiary of Kaiser Foundation Health Plan, Inc. (KFHP) **2.** KPIC has contracted with PHCS Network to provide access to hospitals and physicians with a commitment to keeping out-of-pocket costs low through contracted rates. **3.** 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. **4.** For the participating provider and nonparticipating provider tiers, penalties and balance billing charges do not apply toward your annual deductible. **5.** When appropriate and available. **6.** Penalties and balance billing charges do not apply toward your deductible or out-of-pocket maximum. **7.** The participating provider is responsible for claims submissions. The provider can only collect against copays and deductibles at the time of the visit. Once the claim is processed, any additional member liability will be listed on the Explanation of Benefits. **8.** KPIC contracts with MedImpact to provide prescription drug coverage through a national network of chain and independent pharmacies. Participating pharmacies are subject to change.

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 Healthcare name, logo, and other marks are owned by Cigna Intellectual Property, Inc.