

Summary of Benefits Chart for Kaiser Permanente Senior Advantage (HMO) with Part D (1/1/23—12/31/23)

Plan Out-of-Pocket Maximum

For Services subject to the maximum, you will not pay any more Cost Share for the rest of the calendar year if the Copayments and Coinsurance you pay for those Services add up to the following amount:
 For any one Member\$1,000 per calendar year

Plan Deductible **None**

Professional Services (Plan Provider office visits) **You Pay**

Most Primary Care Visits and most Non-Physician Specialist Visits	\$20 per visit
Most Physician Specialist Visits	\$20 per visit
Annual Wellness visit and the “Welcome to Medicare” preventive visit	No charge
Routine physical exams	No charge
Routine eye exams with a Plan Optometrist	\$20 per visit
Urgent care consultations, evaluations, and treatment.....	\$20 per visit
Physical, occupational, and speech therapy	\$20 per visit

Telehealth Visits **You Pay**

Primary Care Visits and Non-Physician Specialist Visits by interactive video	No charge
Physician Specialist Visits by interactive video.....	No charge
Primary Care Visits and Non-Physician Specialist Visits by telephone	No charge
Physician Specialist Visits by telephone	No charge

Outpatient Services **You Pay**

Outpatient surgery and certain other outpatient procedures.....	\$20 per procedure
Most immunizations (including the vaccine)	No charge
Most X-rays and laboratory tests	No charge
Manual manipulation of the spine	\$20 per visit

Hospitalization Services **You Pay**

Room and board, surgery, anesthesia, X-rays, laboratory tests, and drugs	No charge
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Emergency Health Coverage **You Pay**

Emergency Department visits	\$50 per visit
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Note: If you are admitted directly to the hospital as an inpatient for covered Services, you will pay the inpatient Cost Share instead of the Emergency Department Cost Share (see “Hospitalization Services” for inpatient Cost Share)

Ambulance and Transportation Services **You Pay**

Ambulance Services	No charge
Other transportation Services when provided by our designated transportation provider as described in this EOC	No charge for up to 24 one-way trips (50 miles per trip) per calendar year

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Prescription Drug Coverage	You Pay
Covered outpatient items in accord with our drug formulary guidelines:	
Most generic items at a Plan Pharmacy	\$10 for up to a 30-day supply, \$20 for a 31- to 60-day supply, or \$30 for a 61- to 100-day supply
Most generic refills through our mail-order service.....	\$10 for up to a 30-day supply or \$20 for a 31- to 100-day supply
Most brand-name items at a Plan Pharmacy	\$25 for up to a 30-day supply, \$50 for a 31- to 60-day supply, or \$75 for a 61- to 100-day supply
Most brand-name refills through our mail-order service	\$25 for up to a 30-day supply or \$50 for a 31- to 100-day supply

Durable Medical Equipment (DME)	You Pay
Covered durable medical equipment for home use	No charge

Mental Health Services	You Pay
Inpatient psychiatric hospitalization	No charge
Individual outpatient mental health evaluation and treatment.....	\$20 per visit
Group outpatient mental health treatment	\$10 per visit

Substance Use Disorder Treatment	You Pay
Inpatient detoxification	No charge
Individual outpatient substance use disorder evaluation and treatment.....	\$20 per visit
Group outpatient substance use disorder treatment.....	\$5 per visit

Home Health Services	You Pay
Home health care (part-time, intermittent)	No charge

Other	You Pay
Eyeglasses or contact lenses every 24 months.....	Amount in excess of \$150 Allowance
Hearing aid(s) every 36 months.....	Amount in excess of \$1,000 Allowance per aid
Skilled nursing facility care (up to 100 days per benefit period).....	No charge
External prosthetic and orthotic devices	No charge
Meals delivered to your home following discharge from a hospital or Skilled Nursing Facility.....	No charge up to three meals per day in a consecutive four-week period, once per calendar year
Over-the-Counter (OTC) Health and Wellness products obtained through our OTC catalog	No charge for a quarterly benefit limit of \$70

This chart does not explain benefits, Cost Share, out-of-pocket maximums, exclusions, or limitations, nor does it list all benefits and Cost Share amounts. For additional information, please refer to the *Summary of Benefits* booklet enclosed; for a complete explanation, refer to the *EOC*.



Over-the-Counter (OTC) Wellness Benefit

As a Kaiser Permanente Medicare health plan group member, you can get OTC health and wellness products delivered to your home. And all at no cost.



You can use your benefit to order:

- Vitamins and minerals
- Allergy, cough, and cold remedies
- Antacids, laxatives, and stomach aids
- Pain relievers and fever reducers
- First aid kits, joint supports, and incontinence products
- Blood pressure monitors and thermometers
- Diabetic supplies such as compression stockings and sharps containers

Your Kaiser Permanente Senior Advantage (HMO) plan includes a **\$70** quarterly benefit limit for OTC products.¹

Ready to order? It's easy – visit our website or call today.

Place your order for your OTC health and wellness products in one of the following ways:



Visit kp.org/otc/ca



Call **1-833-569-2360 (TTY 711)**,
Monday through Friday,
7 a.m. to 6 p.m.

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Who can use this benefit?

You must be a Kaiser Permanente Medicare health plan member covered under your employer group.

Need a catalog?

Call **1-833-569-2360** (TTY **711**), Monday through Friday, 7 a.m. to 6 p.m. to have a print catalog mailed to you. You can also view our digital catalog at **kp.org/otc/ca**.

If you have questions or to learn more about the OTC health and wellness benefit, call the Member Service Contact Center at **1-800-443-0815** (TTY **711**), 7 days a week, 8 a.m. to 8 p.m.

¹Please refer to your *Evidence of Coverage* for details. OTC benefits may change each year on January 1. Minimum order value is \$25. Shipments must be delivered to an address within California. Your benefit limit resets on January 1, April 1, July 1, and October 1. Any unused portion of the quarterly benefit will not carry forward to the next quarter. Your order may not exceed your quarterly benefit limit. Limitations and restrictions may apply. Cash, checks, credit cards, or money orders are not accepted. Kaiser Permanente is an HMO plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal. You must reside in the Kaiser Permanente Medicare health plan service area in which you enroll.



Silver&Fit[®] Healthy Aging and Exercise Program

Get more from your Kaiser Permanente Medicare health plan

Available to select Kaiser Permanente Senior Advantage (HMO) plan members

The Silver&Fit Healthy Aging and Exercise Program¹ can help you stay active and thrive, at no additional cost. Join a participating fitness center and try a Home Fitness Kit.



Fitness Center Membership

Choose from Silver&Fit's broad network of participating fitness centers. Where available, you can:

- Work out with cardio and strength-training equipment
- Access features such as saunas, pools, and whirlpools²
- Attend Silver&Fit classes, including yoga, swimming, strength and cardio training, and more



Home Fitness Choices

We make it easy to fit fitness into your day – right where you're most comfortable. With the home fitness choice, you can enjoy:

- One Home Fitness Kit per benefit year from a variety of fitness options
- Thousands of digital workout videos on the Silver&Fit website or mobile app
- The Get Started program which gives you a personal exercise plan

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How to get started with the Silver&Fit program

Once you're a Kaiser Permanente Senior Advantage member, follow these steps:

- Go to **SilverandFit.com**.
- Register to use the site.
- Select a participating fitness center and choose a Home Fitness Kit.
- Print out your Silver&Fit card, take it to the fitness center, and start exercising.

You'll also get these great benefits:

- A resource library with Healthy Aging education materials (online or by mail)
- A rewards program for members who track their exercise and activities
- Social support and community involvement opportunities at participating fitness centers, where available
- The Silver Slate® quarterly newsletter (online or by email)
- Access to **SilverandFit.com**

Learn more at **SilverandFit.com** or call **1-877-750-2746 (TTY 711)**

¹The Silver&Fit program is provided by American Specialty Health Fitness, Inc. (ASH Fitness), a subsidiary of American Specialty Health Incorporated (ASH). The Silver&Fit program is available to current members of participating Kaiser Permanente Group Medicare health plans. All programs and services are not available in all areas. Silver&Fit and The Silver Slate are trademarks of ASH and used with permission herein. Other names and logos may be trademarks of their respective owners. Kits are subject to change. Participating facilities and fitness chains may vary by location and are subject to change.

²Any additional fees not included.

Kaiser Permanente is an HMO plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal. You must reside in the Kaiser Permanente Medicare health plan service area in which you enroll.