

2024 Benefits at a Glance

Medicare Health Plan Benefit Highlights Chart

Premiums and Benefits	Kaiser Permanente Senior Advantage Basic 2 (HMO)	Kaiser Permanente Senior Advantage Enhanced 2 (HMO)
Description	You pay	You pay
Monthly Premium	\$0	\$20
Doctor Office Visit	\$0 Primary/\$0-\$25 Specialist (\$0 for virtual visits ¹)	\$0 Primary/\$0-\$15 Specialist (\$0 for virtual visits ¹)
Preventive Services ²	No charge	No charge
Urgent/Emergency Care	\$25 Urgent/\$120 Emergency	\$15 Urgent/\$120 Emergency
Lab, X-ray	\$0 lab, \$5 X-ray	\$0 lab, \$0 X-ray
Inpatient Hospitalization	\$295 per day for days 1 through 6 No charge for the remainder of your stay	\$225 per day for days 1 through 7 No charge for the remainder of your stay
Outpatient Surgery in an ambulatory surgical center	\$275	\$200

Part D Prescription Drug Coverage³

Description	You pay
Initial Coverage Stage (for up to a 30-day supply) When the annual total drug costs paid by you and any Part D plan reach \$5,030 , you move into the Coverage Gap.	\$0 preferred generic (Tier 1) \$6 generic (Tier 2) \$47 preferred brand name (Tier 3) \$95 non-preferred drug (Tier 4) 33% specialty (Tier 5) \$0 injectable Part D vaccines (Tier 6)
Our Mail-Order Pharmacy⁴ (Restrictions & limitations may apply.)	\$0 copay for up to a 90-day supply for preferred generic and generic (Tiers 1 and 2) All other drugs: 2 copays for up to a 90-day supply

For more information about **Part D Prescription Drug Coverage**, please see your **Summary of Benefits**.
To see more benefits, visit kp.org/medichart and type in your zip code.

(Benefits continued on back page)

Premiums and Benefits

Kaiser Permanente Senior Advantage Basic 2 (HMO)

Kaiser Permanente Senior Advantage Enhanced 2 (HMO)

Description	Benefit	Benefit
Additional supplemental benefits included in your plan		
Healthy Food Card <i>Quarterly allowance that can be used toward healthy groceries⁵</i>	\$140	\$150
Over-the-Counter Benefit (credit does not roll over each quarter) to purchase health-and-wellness products	\$100 every 3 months	\$165 every 3 months
Fitness Program Silver Sneakers®⁶	No cost for membership to any of the participating facilities, exercise programs, and home fitness programs	
Dental⁷	\$0 copay for preventive & diagnostic services	
Vision Benefits⁸	\$0 copay for 1 routine eye exam every year and \$500 allowance for eyewear and contact lenses every 2 years	

Optional Supplemental Package (Advantage Plus)

Description	You pay
Advantage Plus Monthly Premium Hearing aid and additional comprehensive dental ⁷ services	\$9 in addition to your monthly plan premium

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1. When appropriate and available. If you travel out of state, virtual care could be limited due to state laws that may prevent doctors from providing care across state lines. Laws differ by state. **2.** \$0 copay for all preventive services covered under Original Medicare at zero cost sharing. **3.** For insulin – you won't pay more than \$35 for a one-month supply for each insulin product covered by our plan. For vaccines – our plan covers most Part D vaccines at no cost to you. **4.** For certain drugs, you can get prescription refills mailed to you through our Kaiser Permanente mail-order pharmacy. You should receive them within 3–5 days. If not, please call **1-800-733-6345 (TTY 711)**, 7 days a week, 24 hours. **5.** Allowance helping with overall health for members with at least one chronic condition. The benefits mentioned are part of a special supplemental program for the chronically ill. Not all members qualify. **6.** SilverSneakers and SilverSneakers GO are trademarks of Tivity Health, Inc. © 2023 Tivity Health, Inc. All rights reserved. **7.** Dental benefits provided by DeltaCare® USA Dental HMO Program. **8.** Vision services available through Avesis or at certain core Kaiser Permanente facilities.

Kaiser Permanente is an HMO and HMO-POS 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.