

# Kaiser Permanente Senior Advantage Care Plus (HMO-POS) Plan

Keep your favorites with  
our Care Plus Plan

Care where and when you want  
it – plus extras from the number  
one health plan in America!<sup>1</sup>

Switch to the Kaiser Permanente Senior Advantage Care Plus (HMO-POS) plan for personalized, innovative care, and receive a **\$1,500** annual allowance<sup>2</sup> for out-of-network coverage. This way you'll get the care from our over 600 doctors at one of our medical centers, plus be able to receive care from your choice of providers. Your allowance can be used for office visits to specialties like ophthalmology, allergies, dermatology, outpatient behavioral health care, and more – without a referral.



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1. "Best Health Insurance Companies For 2023," Insure.com, January 23, 2023. The rankings are based on the National Committee for Quality Assurance's annual health plan ratings as well as member surveys.
2. Members are responsible for any charged amounts for covered services that exceed the annual allowance maximum of \$1,500. Coverage limited to the inside the United States and its territories. This benefit covers limited services. See your Evidence of Coverage for details.

## Accessing Care

When you are anywhere in the United States or its territories, we cover preventive, routine, follow-up, or continuing care office visits. It also covers outpatient tests and services, and Part B drugs obtained from out-of-network Medicare providers not to exceed your benefit maximum of **\$1,500** in covered plan charges per calendar year.

## Covered services, include, but are not limited to:



Primary care and specialty care visits



Mental health care outpatient visits



Outpatient tests and services, such as lab tests, X-rays, and ultrasounds

## Your copays up to the \$1500 annual benefit limit<sup>2</sup>

Out-of-Network Service	In-Network Copay*	Out-of-Network Copay
Preventive Care	\$0	\$0
Primary Care	\$10	\$25
Specialty Care	\$35	\$50
Lab	\$0	\$50
X-ray	\$10	\$50
Ultrasound	\$10	\$50
Behavioral health care <ul style="list-style-type: none"><li>• Individual (per visit)</li></ul>	\$35	\$50
<ul style="list-style-type: none"><li>• Group (per visit)</li></ul>	\$17	\$25
Medicare Part B Drugs	0% - 20% coinsurance depending on the drug	20% of providers fee schedule

### You'll also receive these EXTRA benefits in your plan:

- \$600 annual Healthy Food Card allowance to purchase eligible healthy foods from participating retailers<sup>3</sup>
- \$460 annual Over-the-counter wellness allowance to be used quarterly on health & wellness items
- Dental benefits included in your plan for preventive, diagnostic, and some comprehensive services<sup>4</sup>

3. The benefits mentioned are part of a special supplemental program for the chronically ill. Not all members qualify. Allowance helping with overall health for members with at least one chronic condition. Must have a visit with your PCP first.

4. For coverage details, including a full list of covered services, how to locate an eligible provider, how to schedule an appointment, and claims, please see the Medical Benefits Chart, Chapter 4, in your Evidence of Coverage.

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. Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.