With this Kaiser Permanente health plan, you get a wide range of care and support to help you stay healthy and get the most out of life. You can also set up a health savings account (HSA) and put money in it.¹ You won’t pay taxes on this money,² and you can use it anytime to pay for care.³ All in all, it’s a financial and physical win-win.

After you reach your deductible, covered services are available at a copay or coinsurance.

Most preventive care services — like routine physical exams, mammograms, and cholesterol screenings — are covered at little or no cost.

You don’t need a referral for certain specialties, like optometry and obstetrics-gynecology.

Personalized online cost estimates help you know what you’ll pay for scheduled services.

You can set up an HSA, and use it anytime to pay for care.

Your out-of-pocket maximum puts a cap on how much you’ll spend for care each year.

¹To be eligible for an HSA, you must be enrolled in an HSA-qualified deductible health plan and meet other HSA eligibility rules. For more information, see IRS Publication 969, Health Savings Accounts and Other Tax-Favored Health Plans, at irs.gov/publications. If you’re enrolled in a health reimbursement arrangement (HRA) or flexible spending account (FSA) through your employer, you may be ineligible to set up an HSA. Contact your employer or your financial or tax adviser for details.

²The tax references in this document relate to federal income tax only. Consult with your financial or tax adviser for information about state income tax laws.

³You can use your HSA to pay for qualified medical expenses, which are defined under Internal Revenue Code Section 213(d) in IRS Publication 502, Medical and Dental Expenses, available at irs.gov/publications.
A better plan for healthy living

Know what to expect, then jump in with both feet. Your plan helps keep your costs under control, and you get useful tools that help you understand when and how much you can expect to pay. This makes it easier for you to manage your care and get the most out of your plan.

<table>
<thead>
<tr>
<th>Limits on how much you pay for care</th>
<th>Limits on how much your family pays</th>
<th>Know before you go</th>
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<tbody>
<tr>
<td>When you get care, you’ll pay the full charges for covered services, including prescriptions, until you reach a set amount known as your deductible. Then you’ll start paying less — just a copay or a percentage of the charges (a coinsurance) for the rest of the year. You also have an out-of-pocket maximum. It puts a cap on how much you’ll pay for care. If you reach your maximum, you won’t have to pay for any covered services for the rest of the year. This helps protect you financially if you ever get seriously sick or injured.</td>
<td>If your family is covered under your plan, you also have a family deductible and out-of-pocket maximum. When you reach your family deductible, everyone will start paying a copay or coinsurance for services instead of the full charges. If a family member reaches his or her individual deductible, he or she will start paying copays or coinsurance before the rest of the family. If you reach your family out-of-pocket maximum, no one in your family will have to pay for any covered services for the rest of the year. And if any family members reach their individual out-of-pocket maximums before the rest of the family, they won’t need to pay for any covered services.</td>
<td>Knowing how your plan works can give you a better idea of how much you’ll pay when you get care. Once you’re a member, you can register on our website to use our Estimates and Out-of-Pocket Summary tools. They help you know in advance what you can expect to pay for the services you’re scheduled to receive. You can also see how close you are to reaching your deductible and out-of-pocket maximum. This can help you understand what kinds of payments you’ll need to make.</td>
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**DEDUCTIBLE**

The amount you pay each year for covered services before Kaiser Permanente starts paying.

Example: If you have a $500 deductible, you’ll pay the full charges up to $500 before you start paying copays or coinsurance.

**COPAY**

A set amount you pay for covered services.

Example: $10 for an office visit.
Advantages of Your Health Plan

For details about your plan, refer to your Evidence of Coverage.

<table>
<thead>
<tr>
<th>Understanding your HSA</th>
<th>Keeping your payments simple</th>
<th>Your prescription drug coverage</th>
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<tbody>
<tr>
<td>Once you’re enrolled in your plan, you can set up an HSA and put money in it. You won’t pay taxes on the money in your HSA, and you can use it anytime to pay for care. Any money you don’t use by the end of the year rolls over to the next year. The money is yours, so you can take it with you if you change jobs or retire.</td>
<td>When you come in for care, you’ll make a payment for the services you’re scheduled to receive. Your payment may only cover part of what you owe, especially if you get unscheduled services during your visit. In that case, you’ll get a bill later for the difference. Whether you pay when you come in or you’re billed later, you can always use the money in your HSA to pay for care.</td>
<td>Generic and brand-name drugs are covered at a copay or coinsurance after you reach your deductible. To fill your prescriptions, simply visit one of our pharmacies, which are conveniently located at most Kaiser Permanente facilities. For refills, you can order online, by phone, by mail, or in person. All your payments for prescription drugs count toward your out-of-pocket maximum.</td>
</tr>
</tbody>
</table>

For more information, including resources for managing your costs, visit kp.org/deductibleplans.

**COINSURANCE**
A percentage of the charges that you pay for covered services.

Example: 20 percent coinsurance for a $200 procedure = $40.

**OUT-OF-POCKET MAXIMUM**
The maximum amount you’ll pay for covered services each year.

Example: If you have a $3,000 out-of-pocket maximum and you reach it before the year’s up, you pay no charges for covered services for the rest of the year.