Enjoy every health advantage

Advantage Plus

Dental, hearing, and vision benefits

2014 Enrollment Brochure
Be healthy. Be vibrant.

Now you can add affordable dental, hearing, and vision services to your Kaiser Permanente Senior Advantage Individual Plan.
GET STARTED HERE.

For a fast, easy review of this Advantage Plus booklet, just follow steps A, B, and C. See the Table of Contents on page 5 to learn more about Advantage Plus and everything it provides.

Quick Start Guide

A  Go to page 4 for a quick look at how Advantage Plus makes it easy to expand your health care coverage. For more detailed information about Advantage Plus benefits, go to page 22.

B  Turn to “Benefits at a Glance” on page 6 for a summary of the dental, hearing, and vision benefits of Advantage Plus.

C  Apply for coverage by filling out the simple enrollment form. Please see “How to Apply for Coverage” on page 20.

If you have questions, please call our Customer Service Center at 1-800-805-2739 (TTY 711 for the hearing/speech impaired). Representatives are available seven days a week, 8 a.m. to 8 p.m.
Advantage Plus
A BENEFITS PACKAGE FOR A HEALTHIER, MORE VIBRANT YOU.

As a Kaiser Permanente Senior Advantage Individual Plan member, you enjoy the convenience of one plan that combines your Medicare coverage with Kaiser Permanente coverage. Now, with Advantage Plus, you get a bundle of valuable dental, hearing, and vision benefits added to your plan. So, all your health benefits can come in one convenient package.

More health coverage. More value.

• Advantage Plus works together with your Senior Advantage Individual Plan to give you dental, hearing, and vision care, all through a convenient and trusted source—Kaiser Permanente and our health care partners.

• Save time and money by eliminating the need to shop around for dental, hearing, and vision benefits separately.

• One bill—for both your Senior Advantage Individual Plan and Advantage Plus coverage—makes taking care of your health easier than ever. If you prefer, your entire Senior Advantage premium and your Advantage Plus premium can be made through a monthly electronic funds transfer.

You deserve the total health care that’s yours through Senior Advantage with Advantage Plus. It’s one more way we can help you live a more vibrant life.

Kaiser Permanente is an HMO plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal. You must continue to pay your Medicare Part B premium and any other applicable Medicare premium(s), if not otherwise paid by Medicaid or another third party. You must reside in the Kaiser Permanente Medicare health plan service area in which you enroll.

The benefit information provided is a brief summary, not a complete description of benefits. For more information contact the plan. Limitations, copayments, and restrictions may apply.

Benefits, formulary, pharmacy network, provider network, premium and/or copayments/co-insurance may change on January 1 of each year.
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BENEFITS AT A GLANCE.

The Advantage Plus package gives you the option of adding more benefits to your Senior Advantage Individual Plan. This chart shows the dental, hearing, and vision benefits you receive when you purchase Advantage Plus for an additional $20 a month for all three benefits. This $20 monthly premium will be added to your Senior Advantage Individual Plan premium.
<table>
<thead>
<tr>
<th>Senior Advantage Individual Plan coverage only</th>
<th>Advantage Plus coverage combined with Senior Advantage Individual Plan</th>
</tr>
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### PREVENTIVE DENTAL

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>90% coverage</td>
<td>per examination (maximum of 2 per calendar year)</td>
</tr>
<tr>
<td>90% coverage</td>
<td>for one bite-wing X-ray per calendar year</td>
</tr>
<tr>
<td>80% coverage</td>
<td>for other X-rays</td>
</tr>
<tr>
<td>80% coverage</td>
<td>for one full-mouth X-ray every five years</td>
</tr>
<tr>
<td>75% coverage</td>
<td>per cleaning, up to a maximum of 2 per calendar year</td>
</tr>
<tr>
<td>75% coverage</td>
<td>for adjunctive general services including palliative treatment for pain (but not to cure)</td>
</tr>
</tbody>
</table>

Coverage is based on the HDS Allowed Amount (see page 10).

### HEARING AIDS

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>$500</td>
<td>is your maximum plan benefit coverage amount for purchase of up to two hearing aids every three years. If the hearing aid you purchase costs more than $500, you will pay the difference.</td>
</tr>
</tbody>
</table>

Visits for counseling, adjustment, cleaning, and inspection of hearing aids purchased at The Hearing Center by Kaiser Permanente within the manufacturer’s three-year warranty are at no charge.

### EYE WEAR

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>80% coverage</td>
<td>for Medicare Allowable eyewear after each cataract surgery.</td>
</tr>
</tbody>
</table>

Medicare Allowable eyewear after cataract surgery is only covered for the cost of basic eyeglass frames and lenses. **You must pay** charges above the Medicare Allowable amount for premium lenses, premium eyeglass frames, anti-reflective coatings/tints, polarized or Transition photochromic lenses, or other premium options.

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>$200</td>
<td>maximum benefit coverage amount for purchase of one pair of basic or premium prescription eyeglasses or one order of contact lenses every year. and</td>
</tr>
</tbody>
</table>

80% coverage for Medicare Allowable eyewear after cataract surgery.

You may combine your Advantage Plus eyewear $200 benefit with your Senior Advantage Medicare Allowable cataract eyewear benefit or the $200 Advantage Plus eyewear benefit may be used for a separate prescription eyewear purchase.

Once the Advantage Plus eyewear $200 benefit is used toward any purchase, the benefit will not become available until January 1st of the next calendar year.

See your Kaiser Permanente Senior Advantage *Evidence of Coverage* for detailed information about dental, hearing, and vision services provided under your Senior Advantage Individual Plan.
Your dental health is vital to your overall health. Healthy teeth and gums mean you can eat better and feel better—physically and mentally. And nothing engages the people around you like a bright smile.

Prevention and treatment of dental problems are important at any stage of life. You may experience more tooth sensitivity, or have dental problems as a result of certain medications or health conditions. Regular oral exams not only keep your mouth healthy, they can also help identify medical problems.

Advantage Plus makes it easy to get the dental care you need. Enjoy the power of a healthy smile.

**Health Tip:**

**REDUCE YOUR RISK OF INFECTION.**

Brushing and flossing are not only important for healthy teeth, they may also help reduce the risk of infection. Good oral hygiene is especially important for anyone facing surgery for hip or knee replacement. Bacteria can travel from the mouth to other parts of the body, causing infection—a major cause of failure in joint replacements.
YOUR DENTAL BENEFITS

Advantage Plus dental benefits are provided through Hawaii Dental Services (HDS).

Getting Started

Register for Online Member Information

The HDS website provides valuable information on your dental plan. You will be able to review your dental plan benefits, view your own tooth chart, search for a participating dentist, view your Explanation of Benefits reports, and more!

To register:
1. Log on at www.hawaiidentalservice.com
2. Click on “New User”
3. Complete the “Member Registration” form
4. Click on “Register User” button

HDS will then send you an e-mail to activate your account. Please be sure to click on the link.

Effective Date of Eligibility

If you are a new HDS member enrolling in this plan, Kaiser Permanente will let you know the start date (effective date) of your dental coverage. An HDS membership card will be mailed directly to you after HDS is notified of your start date.

- At your first appointment, let your dental office know that you are covered by HDS and present your HDS membership card.
- If you need dental services immediately after your effective date of dental coverage but have not received your HDS membership card, you may print or request a card through the HDS website at www.deltadentalhi.org or you may ask your dentist to confirm your eligibility with HDS prior to receiving services.

Selecting a Dentist

In Hawaii — Choose an HDS Participating Dentist

You may select any dentist, however you save on your out-of-pocket costs when you visit an HDS participating dentist for services received in Hawaii. HDS participating dentists partner with HDS by limiting their fees for services that are covered.

About 95% of all licensed, practicing dentists in Hawaii participate with HDS, so it is more than likely your dentist is an HDS participating dentist. For a current listing of HDS participating dentists, visit the HDS website at www.hawaiidentalservice.com or call the HDS Customer Service department.

On the Mainland — Choose A Delta Dental Participating Dentist

HDS is a member of the Delta Dental Plans Association (DDPA), the nation’s largest and most experienced dental benefits carrier with a network of more than 251,100 dentist locations.

If you are on the Mainland, we recommend that you visit a Delta Dental participating dentist to receive the maximum benefit from your plan.

For a list of Delta Dental participating dentists, visit the HDS website at www.hawaiidentalservice.com and click on “Members/Find a Participating Dentist.” Click on the link at the bottom of the page to search for a Mainland dentist. Select “Delta Dental Premier” as your plan type. Or you may call the HDS Customer Service department.
Visiting a Delta Dental Participating Dentist

- When visiting a dentist on the Mainland, let the dentist know that you have an HDS plan and present your HDS membership card.
- If the dentist is a Delta Dental participating dentist, the claim will be submitted directly to HDS for you.
- Provide the dentist with the HDS mailing address and toll-free number located on the back of your membership card.
- HDS’s payment will be based upon HDS’s participating dentist’s Allowed Amount.
- Your Patient Share will be the difference between the Delta Dental dentist’s Approved Amount and HDS’s payment amount.

Visiting a Non-Participating Dentist

If you choose to have services performed by a dentist who is not an HDS or Delta Dental participating dentist, you are responsible for the difference between the amount that the non-participating dentist actually charges and the amount paid by HDS in accordance with your plan.

- In most cases you will need to pay in full at the time of service.
- The non-participating dentist will render services and may send you the completed claim form (universal ADA claim form) to submit to HDS. Mail the completed claim form for processing to:
  HDS — Dental Claims
  700 Bishop Street, Suite 700
  Honolulu, HI 96813-4196
- HDS payment will be based on the HDS non-participating dentist fee schedule and a reimbursement check will be sent to you along with your Explanation of Benefit (EOB) report.

Whether you visit a participating or non-participating dentist, please be sure to discuss your financial obligations with your dentist before you receive treatment. All dental claims must be filed within 12 months of the date of service for HDS claims payment.

Helping You Manage Your Costs

HDS participating dentists agree to limit their fees and charge you at the agreed upon fee even after you reach your annual plan maximum.

Your participating dentist may submit a preauthorization request to HDS before providing services. With HDS’s response, your dentist should explain to you the treatment plan, the dollar amount your plan will cover and the amount you will pay.

HDS Reports and Payments

Explanation of Benefits (EOB) Report

HDS provides its members with Explanation of Benefits (EOB) statements which summarize the services you received from your dentist and lists payment information.

You can receive EOBs through the mail or electronically. If you receive EOBs through the mail, you will not receive an EOB for services with no patient share or when only tax is due.

To receive EOBs electronically, register as a user on our website at www.hawaiidentalservice.com. Select “New User” and complete the “Member Registration” form. If you are already a registered user, login and select “Edit My Profile,” then select “yes” under “Request Electronic EOB.”

It is important to note that the EOB statement is not a bill. Depending on your dentist’s practice, your dentist may bill you directly or collect any portion not covered by your plan at the time of service.
Calculating Your Benefit Payments

Determining the amount you should pay your HDS participating dentist is based on a simple formula (see box below). HDS will pay the “% plan covers” amount.

You are responsible for the balance owed to your dentist which includes the Approved Amount (the maximum amount that the member is responsible for) any applicable deductible amounts and taxes, less the HDS payment. Participating dentists are paid based upon their Allowed Amount. (The amount to which the benefit percentage is applied to calculate the HDS payment.)

\[
\text{Dentist's Allowed Amount} \times \% \text{ Plan Covers} \quad \frac{\text{HDS Payment}}{\text{Dentist's Allowed Amount}} - \text{HDS Payment} \quad \% \text{ Plan Covers} \quad \text{Patient Share}
\]

It is important to note that when determining payment, HDS may consider your prior dental work performed under another plan and your current plan’s limitations.

Questions on Your Claims

If you have any questions or concerns about your dental claims, please call the HDS Customer Service department at 808-529-9248 on Oahu or toll-free at 1-800-232-2533 extension 248, Monday through Friday, 7:30 a.m. - 4:30 p.m. Hawaii Standard Time.

If you are not satisfied with the plan benefit determination, a request for reconsideration may be sent to the Manager of Customer Service within one year of the date of service. A copy of HDS’s claims appeal process may be obtained from Customer Service.

Dual Coverage/Coordination of Benefits

- Please be sure to let your dentist know if you are covered by any other dental benefits plan(s).
- When you are covered by more than one dental benefits plan, the amount paid will be coordinated with the other insurance carrier(s) in accordance with guidelines and rules of the National Association of Insurance Commissioners. Total payments or reimbursements will not exceed the participating dentist’s Allowed Amount when HDS serves as the second plan.
- There is a limit on the number of times certain covered procedures will be paid and payment will not be made beyond these plan limits.
- Coverage of identical procedures will not be combined in cases where there are multiple plans. For example, if you have two plans and each includes two cleanings during each calendar year, your benefits will cover two cleanings (not four) in each calendar year.

Fraud and Abuse Program

Quality assurance is taken seriously at HDS. HDS periodically conducts reviews at HDS participating dentists’ offices to ensure that you are being charged in accordance with HDS’s contract agreements.

Confidential Fraud Hotline

From Oahu: 808-529-9277
Toll-free: 1-800-505-9227
E-mail: HDSCompliance@hawaiidentalservice.com
Benefit Exclusions

The following are general exclusions not covered by the plan:

- Services for injuries and conditions that are covered under Workers’ Compensation or Employer’s Liability Laws; services provided by any federal or state government agency or those provided without cost to the eligible person by the government or any agency or instrumentality of the government.

- Congenital malformations, medically related problems, cosmetic surgery or dentistry for cosmetic reasons.

- Procedures, appliances or restorations other than those for replacement of structure loss from cavities that are necessary to alter, restore or maintain occlusion.

- Treatment of disturbances of the temporomandibular joint (TMJ).

- Orthodontic services.

- Hawaii general excise tax imposed or incurred in connection with any fees charged, whether or not passed on to a patient by a dentist.

- All transportation costs such as airline, taxi cab, rental car and public transportation are not covered.

- Other exclusions are listed in the Schedule of Benefits, which is included in the dental contract.
Access to HDS Information 24/7

Visit HDS Online at www.hawaiidentalservice.com to:

CHECK
• whether you and/or your dependents are eligible for HDS benefits
• what services are covered by your plan
• what the limits are of each type of covered service and how much you have used

SEARCH
• for an HDS participating dentist by specialty, location, handicap accessibility, weekend hours, and more
• for a Delta Dental participating dentist in the Mainland

VIEW
• your own tooth chart—see what services have been performed on each tooth
• your EOB statements (and print them out)
• a list of frequently asked questions
• HDS contact information

DOWNLOAD & PRINT
• a summary of your benefits for tax purposes
• blank claim forms
• an HDS membership card
• HDS Notice of Privacy Practices

REQUEST
• to receive an e-mail when your claim is processed
• to receive EOB statements through e-mail
• an HDS membership card to be mailed to you

Visit HDS DenTel
From Oahu: 808-545-7711
Toll-free 1-800-272-7204

HDS DenTel is an automated phone service that allows HDS members to:
• find out when they are eligible for coverage for their next dental visit
• obtain claims information
• have a summary of their plan benefits faxed or mailed to them; simply by following prompts on the phone

How to Contact HDS
Customer Service Representatives
Monday through Friday, 7:30 a.m. - 4:30 p.m. Hawaii Standard Time

From Oahu: 808-529-9248
Toll-free: 1-800-232-2533 ext. 248
Fax: 808-529-9366
Toll-free fax: 1-866-590-7988

TTY 711 for the hearing/speech impaired, seven days a week, 8 a.m. to 8 p.m.

Send Written Correspondence to:
Hawaii Dental Service
Attn: Customer Service
700 Bishop Street, Suite 700
Honolulu, HI 96813-4196

E-mail: HDSCustomerService@hawaiidentalservice.com
Healthy hearing means you can fully participate in life. You’re more confident, more secure, and more connected to your world.

Millions of Americans experience some degree of hearing loss. But now, more than ever, hearing loss doesn’t mean that your quality of life has to change. Today’s hearing products are smaller, more effective, and more comfortable.

Hearing benefits from Advantage Plus can help make sure you’re not missing the sounds and conversations that make life more fulfilling.

Below are our participating providers:

**OAHU**

**The Hearing Center by Kaiser Permanente**

**Kaiser Permanente Honolulu Clinic**
1010 Pensacola Street, 1st Floor
Honolulu, HI 96814
Phone: 808-432-2155
TTY: 711

**The Hearing Center by Kaiser Permanente**

**Kaiser Permanente Waipio Clinic**
94-1480 Moanalani Street
Waipio, HI 96797
Phone: 808-432-2155
TTY: 711

**The Hearing Center by Kaiser Permanente**

**Kaiser Permanente Hawaii Kai Clinic**
6700 Kalanianaole Highway, Suite 111
Honolulu, HI 96825
Phone: 808-432-2155
TTY: 711
Health Tip:

QUICK HEARING SELF-CHECK.

Be sure to have your hearing checked by a plan provider. In the meantime, use these questions for a simple self-check of your hearing health:

- Do you often ask people to speak up or repeat themselves?
- Do you have trouble following conversations in a noisy room or understanding speech on the phone?
- Do you feel as though people are mumbling all the time?
- Do others complain that your TV or radio is too loud?

FREQUENTLY ASKED QUESTIONS

Hearing services for Kaiser Permanente members are provided by Kaiser Permanente and participating providers to provide comprehensive hearing care products and services.

Q: Are hearing tests covered?
A: Your current Kaiser Permanente Senior Advantage Individual Plan covers hearing tests that determine the need for hearing correction. These tests are provided at the office visit co-payment. Hearing aid consultations for evaluations to determine the appropriate hearing aid and to verify that the aid matches the prescription are free at The Hearing Center by Kaiser Permanente. If you suspect you have hearing loss, call your Kaiser Permanente personal care physician.

Q: If I have a hearing loss, are hearing aids covered?
A: As a Kaiser Permanente member with the Advantage Plus benefit package, you will receive a $500 maximum plan benefit coverage amount toward the purchase of hearing aids. This maximum plan benefit coverage amount is available once every three years. If your hearing aids cost more than $500, you will be responsible for the difference. If you do not use all of the $500 at the initial point of sale, you cannot use it later.
Q: Where can I obtain my hearing aids?
A: You may use your hearing aid benefit at The Hearing Center by Kaiser Permanente or a participating provider. The Hearing Center by Kaiser Permanente services are offered at our Honolulu, Hawaii Kai, Waipio, and Wailuku Clinics. To find a location near you, call our Kaiser Permanente Customer Service Center at 1-800-805-2739 (TTY 711 for the hearing/speech impaired) seven days a week, 8 a.m. to 8 p.m.

Q: Are referrals or special claim forms required to use my hearing aid benefit?
A: No referrals or claim forms are required for hearing aid purchase from The Hearing Center by Kaiser Permanente or participating providers.

Q: Are there any limitations to the type or style of hearing aid that is covered?
A: The Hearing Center by Kaiser Permanente or participating provider audiologist will assist you in selecting a hearing aid that best meet your needs. You will receive a thorough explanation of your test results and recommended treatment options. There is a wide range of technology and variety of styles from which to choose. Coverage is limited to the types and models of hearing aids furnished by the provider.

Q: What if I need service or repairs on my hearing aids?
A: If you purchased your hearing aid in Hawaii at The Hearing Center by Kaiser Permanente you have an applicable warranty for up to a 3-year period. If you purchased your hearing aid from a contracted Hawaii provider, you should check with that contracted Hawaii provider for warranty information on your specific hearing aid. Batteries, accessories, and damaged hearing aid repairs are not part of your hearing aid package and are an out-of-pocket expense. If you purchased your hearing aid from any provider outside Hawaii or from a provider who is not contracted by the Kaiser Permanente Hawaii region, your hearing aid will not be covered for service or repairs under your Kaiser Permanente Advantage Plus benefit package.

Hearing Aid benefit exclusions
The following Services are not covered under this “Hearing Coverage” section:

- Internally implanted hearing aids such as Cochlear implants and Osseo integrated external hearing devices (instead, refer to “Prosthetic or orthotic devices and related supplies” benefit description in the Senior Advantage Individual Plan Evidence of Coverage)
- Replacement parts and batteries, repair of hearing aids, and replacement of lost or broken hearing aids
- Service packages which include adjustment, cleaning and inspection of hearing aids after manufacturer’s warranty
FOCUS ON A HEALTHIER YOU.

Here’s an immediate way to enhance your life: improve your vision. It’s possible that your vision has changed—but you haven’t noticed. An eye exam can show you what you’ve been missing. When you see clearly, your daily activities, such as driving and reading, become noticeably easier.

It’s important to have your eyes checked regularly to identify minor as well as more serious eye problems. Advantage Plus adds to your Senior Advantage vision benefits, giving you more to spend on your glasses or contacts. So you’ll have more choices to help you see a brighter, more vibrant world.

Health Tip:

PROTECT YOUR VISION.

To protect your eyes from our year round Hawaiian sunshine, you should consider using your optical benefit toward a pair of prescription sunglasses. Your sunglass lenses can be manufactured to the optical prescription specifications provided by your doctor.

Polarized lenses can protect your eyes from blinding glare and block out harmful ultraviolet (UV-A & UV-B) rays from the sun. Prolonged UV exposure increases the risk of developing cataracts, pterygium, corneal sunburn, skin cancer (eyelids), and aged-macular degeneration, a leading cause of vision loss for the elderly.
FREQUENTLY ASKED QUESTIONS

The vision benefits covered by Advantage Plus are provided at Vision Essentials by Kaiser Permanente locations. For information about vision benefits (including limitations and exclusions) covered under your Senior Advantage plan, please refer to your Senior Advantage Individual Plan Evidence of Coverage Benefits Chart under “Vision care.”
Q: What is my coverage for eyeglass frames, lenses and contact lenses?

A: As a Kaiser Permanente member with the Advantage Plus benefit package, you will receive a maximum plan benefit coverage amount of $200 every year to use toward the purchase of eyeglass frames, lenses and/or contact lenses. If the eyewear you purchase costs more than $200, you pay the difference. If you do not use all of the $200 at the initial point of sale, you cannot use it later.

Q: Where can I obtain my eyeglasses and contact lenses?

A: You may use your vision benefit at any of our eight Vision Essentials by Kaiser Permanente locations. These optical centers are conveniently located in our medical offices, and carry a large selection of eyeglass frames, lenses, and contact lenses priced to fit every budget. To find a Vision Essentials location near you, call our Kaiser Permanente Customer Service Center at 1-800-805-2739 (TTY 711 for the hearing/speech impaired) seven days a week, 8 a.m. to 8 p.m. or visit kp2020.org for more information.

Q: When will I be eligible to use my Advantage Plus vision benefit for the first time?

A: Once you receive confirmation of your enrollment in Advantage Plus, you can begin using your vision benefits on your effective date.

Q: After I use my Advantage Plus vision benefit, when can I use it again?

A: You are eligible to use your Advantage Plus vision benefit one year after the date that you last obtained your eyeglasses or contact lenses using this benefit.

Q: Can I combine my Advantage Plus vision $200 benefit with other optical discounts offered by Kaiser Permanente?

A: No. Depending on the total price of your eyewear (frame and lenses), you may use either your Advantage Plus $200 vision benefit or the member discount, whichever option provides the best savings for you. Typically, members select a second backup pair from the Kaiser Permanente Vision Essentials value line of package eyewear. A basic pair of backup value line eyewear may be available to you at no copayment if you apply your $200 optical benefit to this item.

Q: Can I combine my Advantage Plus vision benefit with my Senior Advantage Individual Plan vision benefits listed in the Evidence of Coverage?

A: Yes. Under your Senior Advantage Individual Plan cataract vision benefit, you pay 20% of the Medicare Allowable eyeglass frame and lens charges and any remaining balance resulting from purchase of premium products/options, calculated as follows:

<table>
<thead>
<tr>
<th>Premium eyeglass and lens products/options*</th>
<th>Medicare Allowable Amounts for frame and lens Member Obligation</th>
</tr>
</thead>
<tbody>
<tr>
<td>You may combine your Advantage Plus vision $100 benefit with your Senior Advantage Individual Plan cataract benefit to decrease your out-of-pocket Member Obligation amount. However, once the Advantage Plus vision benefit is used towards purchase, the benefit will not become available for one year from order date.</td>
<td></td>
</tr>
</tbody>
</table>

*Premium eyeglass and lens products/options include premium lenses, premium eyeglass frames, anti-reflective coatings/tints, polarized or Transition photochromic lenses.
HOW TO APPLY FOR COVERAGE.

Applying for Advantage Plus is as easy as 1, 2, 3.

1. Complete the enrollment form. Fill in every item, and sign and date the form. (If you need an enrollment form, please call our Kaiser Permanente Customer Service Center at 1-800-805-2739 (TTY 711 for the hearing /speech impaired) seven days a week, 8 a.m. to 8 p.m.)

2. Return your enrollment form to:
   
   Kaiser Permanente
   Medicare Department
   P.O. Box 232407
   San Diego, CA 92193-9914

3. We’ll notify you when your application has been approved and provide you with additional details about your coverage and start date.

The premium for your Advantage Plus dental, hearing, and vision benefits is $20 per month. The $20 monthly premium is in addition to your Senior Advantage premium.

Thank you for taking this step toward better dental, hearing, and vision health.
INFORMATION YOU NEED TO KNOW.
Enrollment and Disenrollment

Enrollment

Other important information about applying for Advantage Plus:

- You must be a Kaiser Permanente Senior Advantage Individual Plan member to enroll in the Advantage Plus package. (If your Senior Advantage Plan is provided to you by an employer group or trust fund, you are not eligible to enroll in Advantage Plus.)

- If you are currently a Kaiser Permanente Senior Advantage Individual Plan member, you can enroll in the Advantage Plus package during the annual election period from October 15 to December 7 to begin your Advantage Plus plan year on January 1, 2014. You may also enroll during our Advantage Plus enrollment period from January 1 through March 31, 2014 to begin your Advantage Plus benefit coverage period on the first day of the month after your application is received by Kaiser Foundation Health Plan, Inc.

- If you recently applied for Kaiser Permanente Senior Advantage membership and your Senior Advantage membership effective date is within the past 30 days, you can enroll in the Advantage Plus package by using the Short Enrollment Form. Your Advantage Plus benefit coverage period will begin on the first day of the month after your completed Short Enrollment Form is received by Kaiser Foundation Health Plan, Inc. (Please note that if you do not enroll in Advantage Plus within the first 30 days of your Kaiser Permanente Senior Advantage effective date, then you cannot apply for Advantage Plus until the annual enrollment period of October 15 to December 7 for an effective date of January 1. You may also enroll during our Advantage Plus enrollment period from January 1 through March 31 for an effective date on the first day of the month after your completed Short Enrollment Form is received by Kaiser Foundation Health Plan, Inc.)
**Disenrollment**

You can terminate your Advantage Plus coverage anytime by sending us a completed written disenrollment request. Your disenrollment will be effective the first of the month following the date we receive your completed written disenrollment request. For more information regarding disenrollment, please call our Customer Service Center at **1-800-805-2739 (TTY 711 for the hearing/speech impaired)** seven days a week, 8 a.m. to 8 p.m.

If you disenroll, you will not be eligible to re-enroll until the next annual election period of October 15 to December 7 for coverage to be effective January 1. You can also enroll during our Advantage Plus enrollment period from January 1 through March 31 for Advantage Plus coverage effective the first of the month following the date we receive your completed enrollment form.

If you disenrolled after you used your vision benefits, and subsequently re-enrolled, you won’t be able to get covered eyewear until 12 months after you last used your vision benefit. If you disenrolled after you used your hearing aid benefits, and subsequently re-enrolled, you won’t be able to get covered hearing aids until 36 months after you last used your hearing aid benefit.
Enjoy every health advantage. Enroll in Advantage Plus today.

Get affordable dental, hearing, and vision services by adding Advantage Plus to your Senior Advantage Individual Plan. More health benefits. More value. Plus great care. Now that’s a healthy addition to your coverage. So sign up today.

Want more info? Call our Kaiser Permanente Customer Service Center at 1-800-805-2739 (TTY 711 for the hearing/speech impaired) seven days a week, 8 a.m. to 8 p.m.