## 2024 Small Business Plan Guide

Effective as of January 1, 2024





## Why Kaiser Permanente?

We are an industry-leading nonprofit health care organization with over 70 years of experience. In our connected system, everyone works together toward the same goal: keeping your employees – and your bottom line – healthy.

As a small employer, you know that when employees miss work, it can mean lost profits and business opportunities. Instead of waiting for your employees to get sick or hurt, our care providers are incentivized to keep them healthy.

While other health plans talk about what they need to do to help businesses control costs, improve employee health, and build long-term success, we're already doing it. We're caregivers and a health plan working in concert to set the bar for quality, affordability, and service.

# A better partner for a better business.

Choosing a health care partner is one of the most important business decisions you can make. Kaiser Permanente can help you manage costs, invest in the health of your employees, and build a healthier future for your employees and your business. Choose Better. Choose Kaiser Permanente.

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<sup>&</sup>lt;sup>1</sup> Kaiser Permanente 2022 HEDIS® scores. Benchmarks provided by the National Committee for Quality Assurance (NCQA) Quality Compass® and represent all lines of business. Kaiser Permanente combined region scores were provided by the Kaiser Permanente Department of Care and Service Quality. The source for data contained in this publication is Quality Compass 2022 and is used with the permission of NCQA. Quality Compass 2022 includes certain CAHPS data. Any data display, analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such display, analysis, interpretation, or conclusion. Quality Compass® and HEDIS® are registered trademarks of NCQA. CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality.

<sup>&</sup>lt;sup>2</sup> In the NCQA Commercial Health Plan Ratings 2022, Kaiser Foundation Health Plan of Georgia, Inc. has earned a rating of 4 out of 5, and has the top-rated commercial health plan in the state for the 17th year in a row.

#### Care under one roof

At Kaiser Permanente facilities, your employees can often get care from everyone they need to see under one roof, including doctors, pharmacists, and lab technicians. Plus, they can schedule appointments, view most lab results, and more right from their computer or smartphone.

Enabling employees to choose where, when, and how they get care can reduce absenteeism, help them stay present and engaged when they're at work, and make it easier for them to stay on top of their health.



MANY SERVICES UNDER ONE ROOF

#### Switching is simple

You'd like to offer Kaiser Permanente to your employees because you care about their health and well-being. But you might think switching health care providers is complicated. Here's the good news: It's easier than you think.



#### Connect to care online

Once you get your ID card, create an account at **kp.org** or download the Kaiser Permanente app. It's easy and gives your employees access the ability to manage their care whenever and wherever they are.

#### Registering on kp.org

Once you get your ID card, the first step is registering on **kp.org**. Signing up is a snap, and it gives your employees access to convenient, time-saving features that can make it easier to manage their care.



## Choosing a doctor Quality care starts with

quality doctors. And it's

easy for your employees to choose one who meets their needs. They can browse online doctor profiles to review education, specialties, languages spoken, and other helpful information at **kp.org/doctors**. Also, members can change their doctor at any time, for any reason.



## Transitioning care seamlessly

Easily move prescriptions so treatment is uninterrupted.
At **kp.org/newmember**, your employees can see how easy it is to transition prescriptions to a Kaiser Permanente pharmacy near them. All they'll need is a prescription number and the name and number of their previous pharmacy. Our pharmacists will handle the rest, helping them get the medication they need.

## Meeting members when and where they need care

Kaiser Permanente offers members options for how they connect with our exceptional providers. Both on-demand and scheduled care is available, allowing your workforce to thrive with better outcomes, all while saving them—and your business—time and money.



Visit us in person at a location near you.



Talk to a health care professional by phone or video.<sup>1</sup>



#### **Email**

Message your Kaiser Permanente doctor's office with nonurgent questions and get a reply usually within 2 business days.



#### **Prescription delivery**

Use the Kaiser Permanente app² to fill prescriptions for delivery or same-day pickup.<sup>3</sup>



#### 24/7 advice

Get on-demand support with 24/7 care advice by phone.



#### E-visit

Use our online symptom checker for certain conditions and get personalized care advice within a few hours.



#### Chat with a doctor

Chat live online with a Kaiser Permanente doctor for advice.

#### Care away from home

You're covered for urgent and emergency care anywhere in the world. And if you're planning to travel, we can help you stay on top of your health when you're away from home. We'll work with you to see if you need a vaccination, refill prescriptions, and more.



<sup>1</sup> When appropriate and available. If you travel out of state, phone appointments and video visits may not be available due to stat laws that may prevent doctors from providing care across state lines. Laws differ by state.

<sup>2</sup> To use the Kaiser Permanente app, you must be a Kaiser Permanente member registered on kp.org.

 $<sup>{\</sup>tt 3\ These\ features\ are\ available\ when\ you\ get\ care\ from\ Kaiser\ Permanente\ facilities.}$ 

### Members-only medical facilities



#### **Integrated Care**

Your employees can access care at any of our 26 locations throughout metro Atlanta and Athens. With our integrated approach to health care, access to primary care, specialists, lab, medical imaging, and pharmacy are all under one roof at most of our facilities.

#### **Advanced Urgent Care**

Conveniently located at our Southwood, TownPark, and Gwinnett locations, our industry-leading Comprehensive Medical Centers have a 24/7 Advanced Care Center and a 24/7 Clinical Decision Unit. Plus, members have access to additional affiliated urgent care centers throughout Georgia.

#### **Affiliated Hospitals**

Kaiser Permanente members will have access to inpatient care at several of Atlanta's most well-respected hospitals. For medical emergencies, you have access to any hospital emergency room, even if it's not affiliated with Kaiser Permanente.<sup>1</sup>

Affiliated Urgent Care locations



<sup>&</sup>lt;sup>1</sup> If you think you have an emergency – a medical or psychiatric condition that may put your life, health, limbs, or bodily functions in serious jeopardy – call 911 or go the nearest emergency room.



### Hospital partners

When your care requires a trip to the hospital, we're proud of our partnerships with some of Atlanta's very best.

We're proud to offer our effective model of care at Emory Decatur Hospital and Emory Saint Joseph's Hospital where Kaiser Permanente doctors are on staff 24/7.

Additionally we're affiliated with a number of Atlanta's most prestigious hospitals. For the most up-to-date listing, visit **kp.org/locations** and type hospitals in the search box.

<sup>1</sup> The hospital you are admitted to is determined by the primary care physician you select. Some locations are available only in specific cases. In an emergency, you have access to any hospital emergency room.









### **Pediatric Dental Benefits**

Under the ACA, we are required to include pediatric dental benefits with your Kaiser Permanente health plans for those ages 18 and younger. The pediatric dental services are provided by Delta Dental Insurance Company.

You may contact Delta Dental at **1-800-929-2309** for questions with benefits or claims. If you currently have pediatric dental coverage through a standalone plan, you are no longer required to keep it. Pediatric dental benefits are not included with SHOP plans.

Preventive Services	covered at 100% services include diagnostic, cleanings, and sealants
Basic Services	covered at 60% after medical plan deductible services include periodontal cleanings
Major Services	covered at 60% after medical plan deductible services include periodontics, oral surgery, and endodontics
Orthodontic Benefits	covered at 60% after medical deductible (medically necessary)



#### Consumer-directed health care

Consumer-directed health plans are growing in popularity, and Kaiser Permanente is uniquely positioned to help you control your overall health care costs and achieve healthy outcomes. We strive to deliver plans that are simple and easy to use – not just for you, but for your employees.

#### **Product pairings**

Take advantage of Kaiser Permanente's paired consumer-directed health care offerings by choosing the plan and Health Payment Account that work for you.

HRA – Employees can use funds contributed by you to pay for qualified medical expenses on a tax-free basis. There are several HRA types available, from broad to more limited coverage, with options for point-of-service payment using our health payment card or convenient automatic reimbursement.

HSA – These employee-owned accounts can be used to pay for qualified medical expenses, including services not covered under the Kaiser Permanente health plan. The money your employees contribute to their HSAs through payroll withholding isn't considered part of their wages, so they won't be taxed on it. They can also contribute aftertax funds. Mutual fund investment options are available with HSAs as well.

**FSA** – With a medical FSA, your employees make pretax contributions to an account they can use to pay for a wide range of qualified expenses such as doctor visits, prescription drugs, and lab tests, including services not covered under the Kaiser Permanente health plan. A dependent care FSA can be used for any qualified child and dependent care expense, including child care.<sup>1</sup>

#### Health payment accounts

HRA	\$3.75 per account per month
HSA	\$3.25 per account per month
FSA	\$3.75 per account per month

Account fees are per employee account per month. They'll be billed monthly to the employer, separate from the premium.<sup>2</sup>

There are no additional setup fees for standard account types and no transaction or annual debit card fees.<sup>3</sup>

#### Convenience your employees expect

- Online access to account balances, claims, contributions, and reimbursements
- Mobile access with our Balance Tracker app
- Support by phone with dedicated Health Payment Services team
- HSA calculators to help employees estimate their health care costs

<sup>&</sup>lt;sup>1</sup> Refer to IRS Publication 502 for a list of qualified medical and dental expenses. Refer to IRS Publication 503 for a list of qualified child and dependent care expenses.

<sup>&</sup>lt;sup>2</sup> Except for self-funded groups

<sup>&</sup>lt;sup>3</sup> For HSAs, employers may choose to have their employees billed for the administrative fees

## See how easy health plan enrollment can be through the SHOP

The Small Business Health Options Program (SHOP) helps small businesses with 1-50 employees provide private insurance to their employees. It's also generally the only way to access the Small Business Health Care Tax Credit, which can save eligible employers up to 50% of their employer contribution.

## To be eligible for SHOP coverage, you must:

- Have a primary business address within the Kaiser Permanente Georgia service area.
- Have at least one common-law W2 employee on payroll (not including a business owner or sole proprietor, or their spouse(s) on the payroll) to enroll in coverage.
- Offer coverage to all your full-time employees - those working on average of 30 or more hours per week
- Employ 50 or fewer full-time equivalent employees (FTEs). For example, 2 halftime employees generally equal 1 FTE. Visit HealthCare.gov/shop-calculators-fte to quickly calculate how many FTEs you have.

#### The Small Business Health Care Tax Credit

The Small Business Health Care Tax Credit can be worth up to 50% of your premium contributions (up to 35% for tax-exempt employers). To qualify for the tax credit, you must have all of these:

- Fewer than 25 full-time equivalent (FTE) employees
- An average employee salary of \$50,000 per year or less, adjusted yearly for inflation
- A contribution of at least 50% of your fulltime employees' premium costs
- Employees enrolled in coverage through the SHOP

You don't need to offer coverage to your parttime employees (those working fewer than 30 hours per week) or dependents to qualify for the tax credit.

The Small Business Health Care Tax Credit Estimator at **HealthCare.gov/shop-calculatorstaxcredit** can help you determine if your business may qualify for the tax credit and how much it could be worth.

## Offer your employees choice and flexibility

Our Dual Choice PPO<sup>1</sup> plans offer the cost effectiveness and value of Kaiser Permanente's integrated delivery system, but also provide the choice and flexibility of a PPO. It's a solution that gives you and your employees the best of both worlds.

#### Freedom to see any doctor

Your employees can see any doctor in- or out-of-network. Each time your employees need care, they can see:

- Kaiser Permanente Providers
- Network providers, including the PHCS™ network² when getting care in a Kaiser Permanente state, or from the Cigna Healthcare PPO Network when you get care outside a Kaiser Permanente state, offers thousands of providers in metro Atlanta and hundreds of thousands nationwide.³
- Out-of-network providers or any licensed providers



#### No other PPO can offer access to Kaiser Permanente medicine.

<sup>&</sup>lt;sup>1</sup> The Dual Choice PPO is fully underwritten by Kaiser Permanente Insurance Company (KPIC), a subsidiary of Kaiser Foundation Health Plan (KFHP), Inc.

<sup>&</sup>lt;sup>2</sup> Kaiser Permanente Insurance Company (KPIC), a subsidiary of Kaiser Foundation Health Plan, Inc., underwrites the Dual Choice PPO plan. KPIC has contracted with PHCS, a subsidiary of Multiplan. Some services require precertification. For more information, see your Certificate of Insurance (COI).

<sup>&</sup>lt;sup>3</sup> The continued participation of any one provider or medical facility cannot be guaranteed. Before getting care from a provider, call Customer Service at **1-855-364-3185** or visit kp.org/dualchoice-georgia and click "Finding Doctors and Locations" to verify the provider's participation.

## Kaiser Permanente Level Funded program

A self-funding option that gives you more control over your health care costs.



For businesses with 20 to 100 employees<sup>2</sup>



An option that minimizes your risk when claims are high and provides an opportunity to get money back if claims are better than expected



Helps keep employees healthy and manage costs through our connected care model



Our extensive offering of no- and low-cost virtual care options make it easy for employees to access convenient care with fewer higher-cost claims.



Pre-designed EPO, HDHP, and PPO plans, with some flexibility for customization



Integrated medical/ pharmacy benefit included. Pharmacy cannot be carved out

#### Contact your sales executive to request a level funded quote.

- <sup>1</sup> Kaiser Permanente Level funded is not an insurance product, but a set of administrative services provided by Kaiser Permanente Insurance Company (KPIC) under a contract between KPIC and the Plan Sponsor (Employer). KPIC will act as the self-funded plan administrator.
- <sup>2</sup> You must have 20 enrolled employees to participate in the Kaiser Permanente Level Funded program.

## Kaiser Permanente Plus plans

## Quality care when and where it works for you

KP Plus is a new and affordable option giving employees access to high-quality care from KP and affiliated providers plus the flexibility to get care from out of network providers for a limited number of visits.



Comprehensive coverage from Kaiser Permanente doctors and facilities as well as affiliated providers



The option for up to 10 out-of-network physician visits or other medical services, and 5 prescription fills per year



Preventive care services, such as routine physicals, well-child visits, and certain screening tests, with \$0 copay



Generally lower out-of-pocket expenses and monthly rates when compared to a typical PPO plan



	KP/0/0/20/S11 PLATINUM	KP/500/20/20/S11 PLATINUM	KP/0/0/30/S11 Gold	KP/0/0/40/S11 Gold
KP PLANS				
Deductible (2x Family)	None	\$500	None	None
Coinsurance (after deductible)	0%	20%	0%	0%
Out-of-pocket Maximum (2x Family)	\$2,500	\$4,500	\$8,700	\$8,700
Teleheath Visits <sup>1</sup>	\$0	\$0	\$0	\$0
Primary Care	\$20	\$20	\$30	\$40
Specialty Care	\$40	\$40	\$60	\$70
Laboratory Services	\$0	\$0	\$0 / \$50	\$0 / \$50
MRI, CT, & PET	\$100	\$100	\$500	\$550
Urgent Care	\$40	\$40	\$60	\$80
Emergency Room	\$350	\$350	\$650	\$650
Outpatient surgery	\$250	20%	\$550	\$700
Inpatient Hospital	\$500 per day	20%	\$900 per day	\$950 per day, first 3 days
PHARMACY SERVICES	•			
Tier 1 Generic Drugs	\$5	\$5	\$5	\$5
Tier 2 Generic Drugs	\$10	\$10	\$10	\$10
Tier 3 Preferred Brand Drugs	\$40	\$40	\$50	\$60
Tier 4 Non-Preferred Drugs	\$60	\$60	\$80	\$100
Tier 5 Specialty Drugs	25%	25%	35%	35%
Relativity to KP/0/0/20/S11 Platinum	0.0%	-2.4%	-7.2%	-7.7%

	KP/1000/20/30/S11 Gold	KP/2000/0/30/S11 Gold	KP/2250/20/30/S11 Gold	KP/2500/0/30/S11 Gold
KP PLANS				
Deductible (2x Family)	\$1,000	\$2,000	\$2,250	\$2,500
Coinsurance (after deductible)	20%	0%	20%	0%
Out-of-pocket Maximum (2x Family)	\$8,500	\$8,900	\$8,500	\$8,900
Teleheath Visits <sup>1</sup>	\$0	\$0	\$0	\$0
Primary Care	\$30	\$30	\$30	\$30
Specialty Care	\$60	\$60	\$60	\$60
Laboratory Services	\$0/\$60	\$0/0% after ded	\$0/\$60	\$0/0% after deductible
MRI, CT, & PET	\$400	\$600	20%	\$600
Urgent Care	\$60	\$60	\$60	\$60
Emergency Room	\$550	\$650	\$550	\$650
Outpatient surgery	20%	\$0	20%	0%
Inpatient Hospital	20%	\$0	20%	0%
PHARMACY SERVICES			`	
Tier 1 Generic Drugs	\$5	\$5	\$5	\$5
Tier 2 Generic Drugs	\$10	\$20	\$10	\$20
Tier 3 Preferred Brand Drugs	\$40 (\$250 ded)	\$50	\$40 (\$250 ded)	\$50
Tier 4 Non-Preferred Drugs	\$60 (\$250 ded)	\$80	\$60 (\$250 ded)	\$80
Tier 5 Specialty Drugs	25% (\$250 ded)	25%	25% (\$250 ded)	25%
Relativity to KP/0/0/20/S11 Platinum	-9.1%	-9.6%	-13.4%	-11.0%

KP and HDHP Plans are also available on the SHOP (with the exception of Platinum KP/0/0/20/S11 and KP/500/20/S11). KP Plus plans are not available on the SHOP. For more detailed benefit summaries, visit *Selling Plans* on **account.kp.org**.

	KP/3500/0/30/S11 Gold	KP/3750/20/30/S11 Gold	KP/4500/0/30/S11 Gold	KP/2700/35/50/S11 Silver
KP PLANS				
Deductible (2x Family)	\$3,500	\$3,750	\$4,500	\$2,700
Coinsurance (after deductible)	0%	20%	0%	35%
Out-of-pocket Maximum (2x Family)	\$8,900	\$6,200	\$8,900	\$8,900
Teleheath Visits <sup>1</sup>	\$0	\$0	\$0	\$0
Primary Care	\$30	\$30	\$30	\$50
Specialty Care	\$60	\$60	\$60	\$80
Laboratory Services	\$0/0% after deductible	20%	\$0/0% after deductible	35%
MRI, CT, & PET	\$600	20%	\$600	\$550 after deductible
Urgent Care	\$60	\$60	\$60	\$100
Emergency Room	\$650	20%	\$650	35%
Outpatient surgery	0%	20%	0%	35%
Inpatient Hospital	0%	20%	0%	35%
PHARMACY SERVICES	•	•	•	
Tier 1 Generic Drugs	\$5	\$5	\$5	\$5
Tier 2 Generic Drugs	\$20	\$10	\$20	\$20
Tier 3 Preferred Brand Drugs	\$50	\$50	\$50	\$50 (\$450 ded)
Tier 4 Non-Preferred Drugs	\$80	\$80	\$80	\$80 (\$450 ded)
Tier 5 Specialty Drugs	25%	25%	25%	35% (\$450 ded)
Relativity to KP/0/0/20/S11 Platinum	-14.0%	-16.0%	-16.8%	-19.9%

	KP/3700/35/50/S11 Silver	KP/4700/35/50/S11 Silver	KP/5500/0/50/S11 Silver	KP/6000/30/50/S11 Silver
KP PLANS				
Deductible (2x Family)	\$3,700	\$4,700	\$5,500	\$6,000
Coinsurance (after deductible)	35%	35%	0%	30%
Out-of-pocket Maximum (2x Family)	\$9,100	\$9,100	\$9,000	\$8,800
Teleheath Visits <sup>1</sup>	\$0	\$0	\$0	\$0
Primary Care	\$50	\$50	\$50	\$50
Specialty Care	\$80	\$80	\$80	\$80
Laboratory Services	35%	35%	\$550 after deductible	30%
MRI, CT, & PET	\$550 after deductible	\$550 after deductible	\$450 after deductible	30%
Urgent Care	\$100	\$100	\$100	\$100
Emergency Room	35%	35%	\$600 after deductible	30%
Outpatient surgery	35%	35%	\$200 after deductible	30%
Inpatient Hospital	35%	35%	\$500 after deductible	30%
PHARMACY SERVICES	•	•		
Tier 1 Generic Drugs	\$5	\$5	\$5	\$5
Tier 2 Generic Drugs	\$20	\$20	\$20	\$20
Tier 3 Preferred Brand Drugs	\$50	\$50	\$50	\$50 (Medical ded applies)
Tier 4 Non-Preferred Drugs	\$80	\$80	\$80	\$80 (Medical ded applies)
Tier 5 Specialty Drugs	35%	35%	30%	45% (Medical ded applies)
Relativity to KP/0/0/20/S11 Platinum	-22.3%	-24.4%	-21.1%	-26.5%

<sup>&</sup>lt;sup>1</sup> Phone visits are available for many specialities and primary care. For members who are registered on **kp.org** and have seen their doctor in the past year.

#### A BETTER WAY TO TAKE CARE OF BUSINESS

	KP Virtual Complete 3000/20/40/S11 Gold	KP Virtual Complete 5000/30/40/S11	KP Virtual Complete 6300/20/60/S11
KP VIRTUAL COMPLETE PLA	ANS		
Deductible (2x Family)	\$3,000	\$5,000	\$6,300
Coinsurance (after deductible)	20%	30%	20%
Out-of-pocket Maximum (2x Family)	\$4,900	\$9,000	\$9,000
Teleheath Visits <sup>1</sup>	\$0	\$0	\$0
Primary Care	\$40 after deductible (ded waived for the first 3 visits)	\$40 after deductible (ded waived for the first 3 visits)	\$60 after deductible (ded waived for the first 3 visits)
Specialty Care	\$60 after ded	\$60 after ded	80 after ded
<b>Laboratory Services</b>	\$0/20%	\$0/30%	\$0/20% after ded
MRI, CT, & PET	20%	30%	20%
Urgent Care	\$80 after ded	\$80 after ded	\$120 after deductible (ded waived for the first 3 visits)
Emergency Room	20%	30%	20%
Outpatient surgery	20%	30%	20%
Inpatient Hospital	20%	30%	20%
PHARMACY SERVICES			
Tier 1 Generic Drugs	\$5	\$5	\$5
Tier 2 Generic Drugs	\$25	\$25	\$30
Tier 3 Preferred Brand Drugs	20% (Medical ded applies)	30% (Medical ded applies)	\$60 (Medical ded applies)
Tier 4 Non-Preferred Drugs	45% (Medical ded applies)	50% (Medical ded applies)	\$100 (Medical ded applies)
Tier 5 Specialty Drugs	45% (Medical ded applies)	50% (Medical ded applies)	20% (Medical ded applies)
Relativity to KP/0/0/20/S11 Platinum	-18.2%	-29.7%	-32.0%

	HDHP/3500/20/S11	HDHP/5000/20/S11	HDHP/7250/0/S11
	Silver	Silver	Bronze
HDHP PLANS			
Deductible (2x Family)	\$3,500	\$5,000	\$7,250
Coinsurance (after deductible)	20%	20%	0%
Out-of-pocket Maximum (2x Family)	\$6,900	\$6,900	\$7,250
Teleheath Visits <sup>1</sup>	20%	20%	0%
Primary Care	20%	20%	0%
Specialty Care	20%	20%	0%
Laboratory Services	20%	20%	0%
MRI, CT, & PET	20%	20%	0%
Urgent Care	20%	20%	0%
Emergency Room	20%	20%	0%
Outpatient surgery	20%	20%	0%
Inpatient Hospital	20%	20%	0%
PHARMACY SERVICES			
Tier 1 Generic Drugs	\$5	\$5	\$25
Tier 2 Generic Drugs	20% (Medical ded applies)	20% (Medical ded applies)	0% (Medical ded applies)
Tier 3 Preferred Brand Drugs	20% (Medical ded applies)	20% (Medical ded applies)	0% (Medical ded applies)
Tier 4 Non-Preferred Drugs	20% (Medical ded applies)	20% (Medical ded applies)	0% (Medical ded applies)
Tier 5 Specialty Drugs	20% (Medical ded applies)	20% (Medical ded applies)	0% (Medical ded applies)
Relativity to KP/0/0/20/S11 Platinum	-23.6%	-30.2%	-33.2%

<sup>&</sup>lt;sup>1</sup> Phone visits are available for many specialities and primary care. For members who are registered on **kp.org** and have seen their doctor in the past year.

		KP Plus 0/0/20/S11 Platinum		KP Plus 0/0/30/S11 Gold		00/20/30/S11 old
	In network	Out-of-network	In network	Out-of-network	In network	Out-of-network
KP PLUS PLANS	·					
Deductible (2x Family)	None	N/A	None	N/A	\$1,000	N/A
Coinsurance (after deductible)	0%	N/A	0%	N/A	20%	N/A
Out-of-pocket Maximum (2x Family)	\$2,500	N/A	\$8,700	N/A	\$8,500	N/A
Teleheath <sup>2</sup> Visits <sup>1</sup>	\$0	\$20	\$0	\$20	\$0	\$20
Primary Care <sup>2</sup>	\$20	\$40	\$30	\$50	\$30	\$50
Specialty Care <sup>2</sup>	\$40	\$60	\$60	\$80	\$60	\$80
Laboratory Services <sup>2</sup>	\$0	\$20	\$0/\$50	\$20/\$70	\$0/\$60	\$20/\$80
MRI, CT, & PET	\$100	N/A	\$500	N/A	\$400	N/A
Urgent Care	\$40	N/A	\$60	N/A	\$60	N/A
Emergency Room	\$350	\$350	\$650	\$650	\$550	\$550
Outpatient surgery	\$250	N/A	\$550	N/A	20%	N/A
Inpatient Hospital	\$500 per day	N/A	\$900 per day	N/A	20%	N/A
PHARMACY SERVICES						
Tier 1 Generic Drugs	\$5 KP \$15 Network	\$25	\$5 KP \$15 Network	\$25	\$5 KP \$15 Network	\$25
Tier 2 Generic Drugs	\$10 KP \$20 Network	\$30	\$10 KP \$20 Network	\$30	\$10 KP \$20 Network	\$30
Tier 3 Preferred Brand Drugs	\$40 KP \$60 Network	\$60	\$50 KP \$70 Network	\$70	\$40 KP \$60 Network \$250 Rx ded	\$60
Tier 4 Non-Preferred Drugs	\$60 KP \$90 Network	\$90	\$80 KP \$110 Network	\$110	\$60 KP \$90 Network \$250 Rx ded	\$90
Tier 5 Specialty Drugs	25% KP 35% Network	35%	35% KP 45% Network	45%	25% KP 35% Network \$250 Rx ded	35%

KP and HDHP Plans are also available on the SHOP (with the exception of Platinum KP/0/0/20/S11 and KP/500/20/S11). KP Plus plans are not available on the SHOP. For more detailed benefit summaries, visit *Selling Plans* on **account.kp.org**.

#### A BETTER WAY TO TAKE CARE OF BUSINESS

		KP Plus 2500/0/30/S11 Gold		KP Plus 2700/35/50/S11 Silver		0/35/50/S11 /er
	In network	Out-of-network	In network	Out-of-network	In network	Out-of-network
KP PLUS PLANS						
Deductible (2x Family)	\$2,500	N/A	\$2,700	N/A	\$3,700	N/A
Coinsurance (after deductible)	0%	N/A	35%	N/A	35%	N/A
Out-of-pocket Maximum (2x Family)	\$8,900	N/A	\$8,900	N/A	\$9,100	N/A
Teleheath <sup>2</sup> Visits <sup>1</sup>	\$0	\$20	\$0	\$20	\$0	\$20
Primary Care <sup>2</sup>	\$30	\$50	\$50	\$70	\$50	\$70
Specialty Care <sup>2</sup>	\$60	\$80	\$80	\$100	\$80	\$100
Laboratory Services <sup>2</sup>	\$0/0% after ded	\$20/10%	35%	45%	35%	45%
MRI, CT, & PET	\$600	N/A	\$550 after ded	N/A	\$550 after ded	N/A
<b>Urgent Care</b>	\$60	N/A	\$100	N/A	\$100	N/A
Emergency Room	\$650	\$650	35%	35%	35%	35%
Outpatient surgery	0%	N/A	35%	N/A	35%	N/A
Inpatient Hospital	0%	N/A	35%	N/A	35%	N/A
PHARMACY SERVICES						
Tier 1 Generic Drugs	\$5 KP	\$25	\$5 KP	\$25	\$5 KP	\$25
	\$15 Network		\$15 Network		\$15 Network	
Tier 2 Generic Drugs	\$20 KP	\$40	\$10 KP	\$40	\$20 KP	\$40
Tier 3 Preferred Brand Drugs	\$30 Network \$50 KP	\$70	\$20 Network \$40 KP	\$70	\$30 Network \$50 KP	\$70
Tier of referred Brand Brags	\$70 Network	Ψίσ	\$60 Network \$450 Rx ded	Ψ7.0	\$70 Network	Ψ
Tier 4 Non-Preferred Drugs	\$80 KP	\$110	\$60 KP	\$110	\$80 KP	\$110
	\$110 Network		\$90 Network \$450 Rx ded		\$110 Network	
Tier 5 Specialty Drugs	25% KP 35% Network	35%	25% KP 35% Network \$450 Rx ded	45%	35% KP 45% Network	45%

<sup>&</sup>lt;sup>1</sup> Phone visits are available for many specialities and primary care. For members who are registered on kp.org and have seen their doctor in the past year.

<sup>&</sup>lt;sup>2</sup> Services covered out of network are subject to 10 visits/services and 5 Rx fill/refill per year.

	PPO/0/0 Plati	/20/S11 num		PPO/1000/20/30/S11 Gold		10/30/S11 old
	In network	Out-of-network	In network	Out-of-network	In network	Out-of-network
Dual Choice PPO <sup>1</sup>						
Deductible (2x Family)	None	\$2,000	\$1,000	\$3,000	\$2,500	\$5,000
Coinsurance (after deductible)	\$0	30%	20%	30%	10%	30%
Out-of-pocket Maximum (2x Family)	\$2,500	\$7,500	\$8,700	\$17,400	\$9,100	\$18,200
Teleheath Visits	Primary	30%	Primary	30%	Primary	30%
	\$0 KP		\$0 KP		\$0 KP	
	\$40 Network		\$40 Network		\$40 Network	
	Specialty		Specialty		Specialty	
	\$0 KP		\$0 KP		\$0 KP	
	\$60 Network		\$60 Network		\$60 Network	
Primary Care	\$20 KP	30%	\$30 KP	30%	\$30 KP	30%
-	\$40 Network		\$50 Network		\$50 Network	
Specialty Care	\$40 KP	30%	\$60 KP	30%	\$60 KP	30%
	\$60 Network		\$80 Network		\$80 Network	
Laboratory Services	\$0	30%	\$0/\$60	30%	\$0/0% after ded	30%
MRI, CT, & PET	\$100	30%	\$400	30%	\$600	30%
Urgent Care	\$40 KP	30%	\$60 KP	30%	\$60 KP	30%
	\$80 Network		\$100 Network		\$100 Network	
Emergency Room	\$350	\$350	\$550	\$550	\$650	\$650
Outpatient surgery	\$250	30%	20%	30%	10%	30%
Inpatient Hospital	\$500 per	30%	20%	30%	10%	30%
PHARMACY SERVICES	day					
	¢ε νρ	30% medical	¢E KD	200/	¢∈ KD	200/ madical
Tier 1 Generic Drugs	\$5 KP \$15 Network	ded applies	\$5 KP \$15 MedImpact	30% medical ded applies	\$5 KP \$15 MedImpact	30% medical ded applies
Tier 2 Generic Drugs	\$10 KP	30% medical	\$10 KP	30% medical	•	30% medical
Her 2 Generic Drugs	\$20 MedImpact	ded applies	\$20 MedImpact	ded applies	\$30 MedImpact	ded applies
Tier 3 Preferred Brand Drugs	\$40 KP	30% medical		30% medical	•	30% medical
ner e i reremen Drama Drage	\$60 MedImpact	ded applies	\$60 MedImpact	ded applies	\$70 MedImpact	ded applies
			\$250 Rx ded			
Tier 4 Non-Preferred Drugs	\$60 KP	30% medical	\$60 KP	30% medical	\$80 KP	30% medical
	\$90 MedImpact	ded applies	\$90 MedImpact	ded applies	\$110 MedImpact	ded applies
	2-2/ 1/2		\$250 Rx ded		0-04 445	222/
Tier 5 Specialty Drugs	25% KP	30% medical	25% KP	30% medical	25% KP	30% medical
	30% MedImpact	ded applies	30% MedImpact	ded applies	30% MedImpact	ded applies
			\$250 Rx ded			

<sup>&</sup>lt;sup>1</sup> The Dual Choice PPO is fully underwritten by Kaiser Permanente Insurance Company (KPIC), a subsidiary of Kaiser Foundation Health Plan (KFHP), Inc.

KP and HDHP Plans are also available on the SHOP (with the exception of Platinum KP/0/0/20/S11 and KP/500/20/20/S11). KP Plus plans are not available on the SHOP. For more detailed benefit summaries, visit *Selling Plans* on **account.kp.org**.

	PPO/3850/ Silv		PPO/4850/30/50/S11 Silver		PPO HDHP/3 Silv	
	In network	Out-of-network	In network	Out-of-network	In network	Out-of-network
Dual Choice PPO <sup>1</sup>						
Deductible (2x Family)	\$3,850	\$7,700	\$4,850	\$9,700	\$3,800	\$7,600
Coinsurance (after deductible)	30%	40%	30%	40%	20%	40%
Out-of-pocket Maximum (2x Family)	\$9,200	\$18,400	\$9,200	\$18,400	\$9,100	\$14,000
Teleheath Visits	Primary	40%	Primary	40%	Primary	40%
	\$0 KP		\$0 KP		20% KP	
	\$70 Network		\$70 Network		30% Network	
	Specialty		Specialty		Specialty	
	\$0 KP		\$0 KP		20% KP	
	\$100 Network		\$100 Network		30% Network	
Primary Care	\$50 KP	40%	\$50 KP	40%	20% KP	40%
	\$70 Network		\$70 Network		30% Network	
Specialty Care	\$80 KP	40%	\$80 KP	40%	20% KP	40%
Laboratory Services	\$100 Network 30%	40%	\$100 Network \$0/\$60	40%	30% Network 20%	40%
MRI, CT, & PET	\$550 after ded	40%	\$400	40%	20%	40%
Urgent Care	\$100 KP	40%	\$100 KP	40%	20% KP	40%
orgeni Care	\$140 Network	40 /0	\$140 Network	40 /0	30% Network	40 /0
Emergency Room	30%	30%	\$550	30%	20%	20%
Outpatient surgery	30%	40%	20%	40%	20%	40%
Inpatient Hospital	30%	40%	20%	40%	20%	40%
PHARMACY SERVICES						
Tier 1 Generic Drugs	\$5 KP	40% medical	\$5 KP	40% medical		40% medical
	\$15 Network	ded applies	\$15 Network	ded applies	\$15 Network	ded applies
Tier 2 Generic Drugs	\$20 KP	40% medical	\$20 KP	40% medical		40% medical
	\$30 MedImpact	ded applies	\$30 MedImpact	ded applies	30% MedImpact (Med ded applies)	ded applies
Tier 3 Preferred Brand Drugs	\$50 KP	40% medical	\$50 KP	40% medical	20% KP	40% medical
	\$70 MedImpact	ded applies	\$70 MedImpact	ded applies	30% MedImpact	ded applies
Tier 4 Non-Preferred Drugs	\$80 KP	40% medical	\$80 KP	40% medical	(Med ded applies) 20% KP	40% medical
	\$110 MedImpact		\$110 MedImpact		30% MedImpact (Med ded applies)	
Tier 5 Specialty Drugs	30% KP	40% medical	30% KP	40% medical	20% KP	40% medical
	35% MedImpact	ded applies	35% MedImpact	ded applies	30% MedImpact (Med ded applies)	ded applies

<sup>&</sup>lt;sup>1</sup> The Dual Choice PPO is fully underwritten by Kaiser Permanente Insurance Company (KPIC), a subsidiary of Kaiser Foundation Health Plan (KFHP), Inc.

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	PPO HDHP/5000/20/S11 Silver		PPO 6500/20/60/S11 Bronze		PPO HDHP/7250/10/S11 Bronze	
	In network	Out-of-network	In network	Out-of-network	In network	Out-of-network
Dual Choice PPO <sup>1</sup>						
Deductible (2x Family)	\$5,000	\$10,000	\$6,500	\$13,000	\$7,250	\$14,500
Coinsurance (after deductible)	20%	40%	20%	40%	10%	40%
Out-of-pocket Maximum (2x Family)	\$7,000	\$14,000	\$9,000	\$18,000	\$7,300	\$14,600
Teleheath Visits	Primary 20% KP 30% Network Specialty 20% KP 30% Network	40%	Primary \$0 KP \$80 after ded Network (ded waived for first 3 visits) Specialty \$0 KP \$100 after ded Network	40%	Primary 10% KP 20% Network Specialty 10% KP 20% Network	40%
Primary Care	20% KP 30% Network	40%	\$60 after ded KP (ded waived for first 3 visits) \$80 after ded Network (ded waived for first 3 visits)	40%	10% KP 20% Network	40%
Specialty Care	20% KP 30% Network	40%	\$80 after ded KP \$100 after ded Network	40%	10% KP 20% Network	40%
Laboratory Services	30%	40%	20%	40%	20%	40%
MRI, CT, & PET	\$550 after ded	40%	20%	40%	20%	40%
Urgent Care	\$100 KP \$140 Network	40%	\$120 after ded KP (ded waived for first 3 visits) \$160 after ded Network (ded waived for first 3 visits)	40%	10% KP 20% Network	40%
Emergency Room	30%	30%	\$550	30%	10%	10%
Outpatient surgery	30%	40%	20%	40%	10%	40%
Inpatient Hospital	30%	40%	20%	40%	10%	40%
PHARMACY SERVICES						
Tier 1 Generic Drugs	\$5 KP \$15 Network	40% medical ded applies	\$5 KP \$15 Network	40% medical ded applies	\$25 KP \$15 Network	40% medical ded applies
Tier 2 Generic Drugs	20% KP 30% MedImpact med ded applies	40% medical ded applies	\$30 KP \$40 MedImpact	40% medical ded applies	10% KP 20% MedImpact med ded applies	40% medical ded applies
Tier 3 Preferred Brand Drugs	20% KP 30% MedImpact med ded applies	40% medical ded applies	\$60 KP \$80 MedImpact med ded applies	40% medical ded applies	10% KP 20% MedImpact med ded applies	40% medical ded applies
Tier 4 Non-Preferred Drugs	20% KP 30% MedImpact med ded applies	40% medical ded applies	\$100 KP \$130 MedImpact med ded applies	40% medical ded applies	10% KP 20% MedImpact med ded applies	40% medical ded applies
Tier 5 Specialty Drugs	20% KP 30% MedImpact med ded applies	40% medical ded applies	20% KP 30% MedImpact med ded applies	40% medical ded applies	10% KP 20% MedImpact med ded applies	40% medical ded applies

KP and HDHP Plans are also available on the SHOP (with the exception of Platinum KP/0/0/20/S11 and KP/500/20/S11). KP Plus plans are not available on the SHOP. For more detailed benefit summaries, visit *Selling Plans* on **account.kp.org**.

Notes			

Notes		

#### How to reach us

#### For new sales

Contact us at 1-855-861-6950 or KPGeorgiaSales@kp.org.

#### For existing accounts

Contact your broker or Kaiser Permanente account representative.

#### **Health line**

For information, nurse advice, appointment cancellations, or to schedule an appointment in Pediatrics/Adolescent Medicine or Adult Medicine, call the Health Line 24 hours a day, seven days a week. To schedule all other appointments, call Monday-Friday between 7 a.m. to 7 p.m.

**404-365-0966** locally 1-800-611-1811 long distance TTY: 1-800-255-0056 (Disponible en Español)

#### **Member services**

Offers assistance selecting a personal physician; explains how your health plan works; and answer questions about eligibility, and coverage verification.

Monday-Friday: 7 a.m. to 7 p.m. **404-261-2590** locally **1-888-865-5813** long distance (Disponible en Español)

#### **Pharmacy**

Members with a prescription drug benefit can have prescriptions filled at any Kaiser Permanente medical facility pharmacy. In addition, two great time-saving options are available when refilling prescriptions previously filled at a Kaiser Permanente medical facility pharmacy: Order online at kp.org/rxrefill, or call the 24-hour Refill Line at 770-434-2008.

#### **Medical claims**

Answers questions about medical bills and provides information about medical claims.

Monday-Friday: 8:30 a.m.to 5 p.m. **404-261-2825** locally 1-888-865-5813 long distance

#### Kaiser Permanente online

On kp.org/myhealth, members can:1

- Email their doctor's office
- Schedule, view, and cancel routine appointments
- Review after-visit summaries
- View lab test results
- Order prescription refills
- Act for a family member
- View eligibility and benefits<sup>2</sup>
- View claims and claims status<sup>2</sup>
- Monitor ongoing health conditions
- Order replacement ID cards
- And much more

At the time of production, the information contained in this publication was accurate. Please contact Member Services at 404-261-2590 locally or 1-888-865-5813 for the latest information.

#### account.kp.org



<sup>&</sup>lt;sup>1</sup> Available to members receiving care/filling prescriptions at a Kaiser Permanente medical facility.

<sup>&</sup>lt;sup>2</sup> Available to any member registered on **kp.org**.