



HSA-QUALIFIED FLEXIBLE CHOICE

A health plan that fits the business plan

A SOLUTION GREATER THAN THE SUM OF ITS PARTS

HSA-Qualified Flexible Choice is a unique point-of-service plan that combines Kaiser Permanente HMO with participating provider organization (PPO) and indemnity options.

The combination lets employers take advantage of each plan's best aspects—the provider choice their employees are looking for, along with options for managing out-of-pocket costs with varying copayments, coinsurance, and deductibles from option to option.

And because this type of plan meets U.S. Treasury guidelines, it can be paired with a health savings

account (HSA), which allows the use of pretax dollars to pay for qualified medical expenses. Once an HSA is opened, money can be put in it. Keep in mind that the IRS sets a limit on how much money can be put in an HSA each year. Employers can contribute money to their employees' accounts.

In addition, with HSA-Qualified Flexible Choice, any time medical care is needed, employees can choose who will provide their care and where they will receive it.

The result is a health care solution that's truly greater than the sum of its parts.

WHO SHOULD CONSIDER HSA-QUALIFIED FLEXIBLE CHOICE?

- + Firms seeking to combine a multiple-network health plan offering with a tax-advantaged health savings vehicle
- + Firms looking for administrative simplification through a single-carrier solution for health insurance coverage
- + Customers needing broad network choice—with predictable cost sharing—for specific groups of employees, at a lower premium price point
- + Groups with employees who frequently travel outside the Kaiser Permanente Mid-Atlantic service area

LIKE THREE PLANS ROLLED INTO ONE

HSA-Qualified Flexible Choice offers three provider options for employees to receive care. And members can select from the three options at any time, so they can always make the best decisions for their health and their wallets.

OPTION 1:

KAISER PERMANENTE PROVIDERS

Members have access to 1,700+ physicians in the Mid-Atlantic Permanente Medical Group, P.C., who practice in Kaiser Permanente medical centers. A list of network physicians is accessible at kp.org/doctor, and members can choose and change their doctors at any time, for any reason.

- + Virtually no claim forms to complete.
- + Coordinated care and around-the-clock access to the features on kp.org, including the ability to email their doctors, check lab and radiology test results, schedule appointments with Permanente physicians, and so much more.
- + Receiving diagnosis and treatment at one-stop medical centers, some with access to after-hours and 24/7 Urgent Care.
- + Some services are subject to a deductible,³ then copay or coinsurance.

OPTION 2:¹

PREFERRED PROVIDER ORGANIZATION (PPO)²

Members have access to more than 250,000 primary care physicians, 890,000 specialists, and 4,900 hospitals in the PHCS™ or MultiPlan® networks³ when getting care in a Kaiser Permanente service area. Or in the Cigna HealthcareSM PPO Network⁴ when they get care outside a Kaiser Permanente service area. Finding a physician, facility, or health care practitioner who participates in these networks is as easy as visiting multiplan.com/kpmas.

- + No referral is needed for office visits to specialists.
- + Provider fees are subject to negotiated rates, and providers are not allowed to charge members directly for covered services.
- + Providers usually complete and submit claim forms.
- + Inpatient and certain outpatient services are subject to precertification.
- + Most services are subject to a deductible,⁵ then copay or coinsurance.
- + Out-of-pocket costs are generally higher when members choose Option 2 providers over Option 1 providers.

OPTION 3:¹

OUT-OF-NETWORK PROVIDERS²

Members have access to any licensed provider who is not an Option 1 or Option 2 provider.

- + No referral is needed for office visits to specialists.
- + Inpatient and certain outpatient services are subject to precertification.
- + Most services are subject to a deductible,³ then coinsurance.
- + Providers may require members to pay the full cost of each visit. If so, members will need to submit a claim for reimbursement.
- + Providers may bill members for the difference, if any, between actual billed charges and the maximum allowable charge. Charges that exceed the maximum allowable are not covered, do not satisfy the deductible, and do not accumulate to the out-of-pocket maximum.

COMPETITIVE OVERALL HEALTH CARE COSTS

HSA-Qualified Flexible Choice offers lower premiums than traditional and Deductible Flexible Choice plans. Pairing HSA-Qualified Flexible Choice with our competitively priced HSA-Qualified Deductible HMO plan creates the most cost-effective Flexible Choice solution. This solution enables employers to control costs and employees to choose the plan that best fits their health care needs and budgets.

HSA-QUALIFIED FLEXIBLE CHOICE PHARMACY BENEFITS

Employers can choose from a set of prescription drug plan designs to pair with the medical plan.

- + Members can fill prescriptions at any pharmacy, including Kaiser Permanente pharmacies, where they will generally pay the lowest copay, no matter if prescribed by an Option 1, 2, or 3 provider.
- + Members pay full out-of-pocket costs for prescriptions filled at out-of-network pharmacies and they submit claims for reimbursement.

Kaiser Permanente pharmacies	<ul style="list-style-type: none">+ Rx filled at Kaiser Permanente medical center pharmacies or online at kp.org+ Rx filled by mail for a 90-day supply of maintenance medications⁶+ Generally the lowest copayments+ Prescription drug benefits are subject to the Option 1 medical deductible
Participating network pharmacies	<ul style="list-style-type: none">+ Rx filled at participating pharmacies in the MedImpact Network, which includes CVS, Farm Fresh, Harris Teeter, Kmart, Rite Aid, Safeway, Shoppers Food Warehouse, Target, Walgreens, and others+ No mail-order service option+ Generally higher copayments than Option 1; prescription drug benefits are subject to the Option 2 medical deductible

IT ALL LEADS TO HAPPIER, MORE PRODUCTIVE EMPLOYEES

This solution meets employees' care needs by offering a choice between the HSA-Qualified Deductible HMO plan, with its lower premiums and costs, and HSA-Qualified Flexible Choice, which offers a nationwide selection of licensed providers. Both options offer predictable out-of-pocket expenses and high-quality⁷ care when members use Kaiser Permanente's integrated care delivery system. And both plans can be paired with a Health Savings Account (HSA)⁸ for tax-saving benefits.

HSA-Qualified Flexible Choice can also be paired with traditional HMO, Deductible HMO, HMO Plus, and Deductible HMO Plus plans. Speak with a Kaiser Permanente representative to learn more about plan-pairing options and how they can best serve your business.



To learn more, visit kp.org/flexiblechoice/mas. 

¹Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. (KFHP-MAS) underwrites the in-network HMO tier (Option 1), and Kaiser Permanente Insurance Company (KPIC), a subsidiary of Kaiser Foundation Health Plan, Inc. (KFHP), underwrites the in-network PPO tier (Option 2) and out-of-network tier (Option 3).

²Coverage in both Option 2 and Option 3 is fee-for-service indemnity coverage; however, out-of-network providers have not agreed to negotiated rates.

³Provider numbers as of April 2023. The PHCS™ and MultiPlan® networks include physicians and health care practitioners and facilities that are available to Kaiser Permanente Insurance Company members via a network access agreement. Not all PHCS and MultiPlan network providers are included. For a list of network participants, go to multiplan.com/kpmas.

⁴The Cigna HealthcareSM PPO Network refers to the health care providers (doctors, hospitals, specialists) contracted as part of the Cigna Healthcare PPO for Shared Administration. Cigna Healthcare is an independent company and not affiliated with Kaiser Permanente Insurance Company or Kaiser Foundation Health Plan. Access to the Cigna Healthcare PPO Network is available through Cigna Healthcare's contractual relationship with Kaiser Permanente Insurance Company and Kaiser Foundation Health Plan. The Cigna Healthcare PPO Network is provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc.

⁵Each option has a separate deductible. If a member meets the deductible in one option, they will pay only the applicable copay or coinsurance for covered services received in that option. If they receive services in another option, they must meet that option's deductible amount before only paying the applicable copay or coinsurance for covered services received in that option. Options 2 and 3 deductible and out-of-pocket maximum cross-accumulate.

⁶Some medications are not eligible for Mail Order Pharmacy. Mail Order Pharmacy can deliver to addresses in MD, VA, DC, and certain locations outside the service area.

⁷In the NCQA Commercial Health Plan Ratings 2022, our commercial plan is rated 5 out of 5, the highest rating in the nation.

⁸An HSA can be opened with any financial vendor.

