Services always available in the HMO In-Network Provider Tier

If you choose a participating or nonparticipating provider at a higher cost share, you can still get your routine lab work and diagnostic X-rays performed at Kaiser Permanente medical offices in the HMO In-Network Provider Tier to help control your health care costs.³

You can also fill your medications prescribed by participating and nonparticipating providers at a Kaiser Permanente pharmacy and likely pay less.³

For more information, call Customer Service at **1-855-364-3184** (TTY **711**), Monday-Friday, 8 a.m.-6 p.m.

Balance your health care with 3 different options

The 3-Tier POS plan enables you to receive care from providers in the HMO In-Network Provider Tier, Participating Provider Tier,⁴ or from any licensed physician or facility you choose in the Nonparticipating Provider Tier. You can mix and match as needed, giving you flexibility to make the choices right for you. It's about keeping you healthy and providing the resources you need with virtually unlimited physician choice.

Note: Not all services are covered in each tier. If you have questions about your benefits, please consult your plan documents or contact Customer Service.

HMO In-Network Provider Tier

You'll pay copayments for the care you routinely need, such as office visits, and many preventive services are covered at 100 percent. Some services (for example, transplants, skilled nursing, and most durable medical equipment) are only covered in the HMO In-Network Provider Tier. Some services are subject to a deductible.

Participating Provider Tier⁵

You'll pay higher copayments for routine office visits. Many preventive services are covered at 100%. Your out-of-pocket maximum and your cost share for most services, if covered in all tiers, will be higher in the Participating Provider Tier than in the HMO In-Network Tier.

Nonparticipating Provider Tier

You can see any licensed doctor you choose. You will have to satisfy a deductible first, and your costs are generally the highest in this tier. You may have to pay up front for services and submit a claim for reimbursement. You will be responsible for the difference, if any, between the cost of the service and the payment your nonparticipating provider received from Kaiser Permanente Insurance Company (KPIC). The provider may bill you for the balance of expenses.



3-Tier POS Plan

	HMO In-Network Provider Tier	Participating Provider Tier	Nonparticipating Provider Tier
Preventive care ⁶	No charge for preventive health services.	No charge for preventive health services.	Deductible has to be met first, then pay your applicable coinsurance.
Copayments/ coinsurance	Costs are predictable, with set copayments for routine office visits.	Higher costs than the HMO In-Network Provider Tier.	Higher copayments and coinsurance than the HMO In-Network and Participating Provider Tiers.
Deductible and coinsurance ³	Deductible has to be met first, then pay your applicable coinsurance. Deductible and coinsurance may accumulate toward the out-of-pocket maximum.		Deductible has to be met first, then pay your applicable coinsurance. Coinsurance may accumulate toward the out-of-pocket maximum.
Choice of providers	Members can choose to receive care from more than 1,200 primary care physicians and specialists at any of our Kaiser Permanente medical offices, as well as from network community providers in their service area. ⁷ Visit kp.org/findadoctor to search by ZIP code or keywords. For other questions, please call Customer Service at 1-855-364-3184 (TTY 711), Monday-Friday, 8 a.m6p.m.	The participating provider network ⁵ includes the First Health Network and direct contracted providers when receiving care within a Kaiser Permanente state (CO, CA, HI, OR, WA, GA, MD, VA, and DC). When receiving care outside of a Kaiser Permanente state, the participating provider network is the Cigna Healthcare SM PPO Network. ⁸ With network physicians and specialists nationwide, there's a good chance your personal doctor is already in our Participating Provider Tier. To find participating providers in the network, check online at kp.org/kpic-colorado for the most up-to-date information. For assistance finding a provider, visit kp.org/kpic-colorado or call 1-855-364-3184 (TTY 711), Monday-Friday, 8 a.m6 p.m.	Go to any licensed physician or facility not associated with the HMO In-Network Provider or Participating Provider Tier. When you get care from a nonparticipating provider, you may be asked to pay at the time of service and will need to file a claim for reimbursement. After you've satisfied your deductible, we'll reimburse you based on your cost-share level. ³ You'll need to file a claim to be reimbursed. To obtain medical claim forms, contact Customer Service at 1-855-364-3184 (TTY 711), Monday-Friday, 8 a.m6 p.m.

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3-Tier POS Plan (continued)

	HMO In-Network Provider Tier	Participating Provider Tier	Nonparticipating Provider Tier		
Prior approval of medical services? For prior approval requirements for outpatient prescription drugs, please see Prescriptions.	Your HMO in-network provider will arrange for prior authorization, if required, for certain services.	Precertification is required for all inpatient care (such as hospital surgical procedures) and certain outpatient procedures. Your participating provider is required to obtain precertification. Contact Permanente Advantage at 1-888-525-1553 (TTY 711) for questions about precertification.	Precertification is required for certain covered outpatient procedures. You are required to obtain precertification. However, your physician, hospital, or authorized representative may obtain precertification on your behalf. If you do not obtain precertification for covered services that require it, you may be required to pay a penalty and/or the entire expense, which will not count toward any applicable deductible, coinsurance, or out-of-pocket maximum. Contact Permanente Advantage at 1-888-525-1553 (TTY 711) to initiate precertification.		
Emergency	When it comes to emergency care, you're covered anywhere in Colorado, the nation, and the world.				
Online health resources	All members who elect a Kaiser Permanente doctor in the HMO In-Network Provider Tier as their primary care physician have access to services on kp.org and can email their doctor's office, request/view/cancel routine appointments, get most lab results, order prescription refills, and more. Members who have chronic conditions, such as asthma, heart disease, diabetes, etc., will find support through our chronic care management programs and online tools. All members have access to a wide range of preventive health resources and information on kp.org . Get support to lose weight, manage stress, stop smoking, and more with our healthy lifestyle programs. Search health and drug encyclopedias, download current drug formularies, member publications, and more.				

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	HMO In-Network	Participating	Nonparticipating
	Provider Tier	Provider Tier	Provider Tier
Prescriptions ¹⁰	Denver/Boulder members can go to any Kaiser Permanente medical office pharmacy. Members living outside of the Denver/Boulder service area can go to any Kaiser Permanente pharmacy or any network pharmacy provider in their service area. Visit: kp.org/facilities to find a Kaiser Permanente medical office pharmacy kp.org/rxrefill to use mail order pharmacy kp.org/formulary for a list of covered drugs and restrictions, including prior authorization ¹¹ Call (Monday-Friday, 8 a.m6 p.m.): 1-866-523-6059 (TTY 711) to order prescription refills 1-866-244-4119 (TTY 711) to learn about our formulary	The participating pharmacy network is MedImpact. ¹² Go to any participating MedImpact network pharmacy nationwide, including most major drugstore chains and many other retail pharmacies. The pharmacy will collect your cost share. To verify if a specific pharmacy participates, or to obtain a complete list of participating pharmacies, call MedImpact at 1-800-788-2949 (TTY 711), Monday-Friday, 8 a.m6 p.m. For a list of covered drugs and restrictions, including prior authorization, please visit kp.org/kpic-colorado. ¹¹	You have the option of using a non-Kaiser Permanente pharmacy or a pharmacy in the MedImpact network. You may need to pay full price and submit a claim to MedImpact for reimbursement. There is no mail-order service with this pharmacy option. Claim forms can be found at kp.org/kpic-colorado. For a list of covered drugs and restrictions, including prior authorization, please visit kp.org/kpic-colorado.¹¹

The information provided here is a summary only. The information provided here is not a contract and is not intended for use as a Summary Plan Description, nor is it designed to serve as your *Evidence of Coverage* (EOC) or *Certificate of Insurance* (COI). Upon enrollment, your EOC or COI will contain a description of your coverage, including benefits, exclusions, and limitations. Your EOC or COI will prevail over this or any other plan summary such as your Summary of Benefits and Coverage.

1. Kaiser Foundation Health Plan of Colorado, Inc. (KFHP), underwrites the HMO Network Provider Tier and Kaiser Permanente Insurance Company (KPIC), a subsidiary of Kaiser Foundation Health Plan, Inc., underwrites the Participating Provider Tier and Nonparticipating Provider Tier of the 3-Tiered POS Plan. 2. Colorado state law requires that a Network Access Plan be available that describes Kaiser Permanente Insurance Company's network of provider services. To obtain a copy, please call Customer Service at 1-855-364-3184 or visit kp.org/choiceppo-colorado. 3. Services may or may not be subject to deductible. Deductible may count toward the satisfaction of your out-of-pocket maximum. Payments to satisfy your Participating Provider Tier deductible also apply to your HMO In-Network Provider Tier deductible; however, payments to satisfy your HMO In-Network Provider Tier deductible may apply only to the HMO In-Network Provider Tier. 4. Kaiser Permanente Insurance Company is contracted with First Health. First Health is a brand name of First Health Group Corp. 5. For its participating provider network, KPIC has contracted with the First Health® Network. The list of participating providers in the First Health® Network for KPIC is subject to change without notice. 6. Preventive care includes adult preventive care exams and screenings, well-woman care, immunizations, and well-child care (exams and immunizations in accordance with medical guidelines). See your EOC for details. 7. Choice of providers varies by plan and availability at the time of selection 8. The Cigna Healthcare™ 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 Foundation Health Plan, Inc., and its subsidiary health plans. Access to the Cigna Healthcare PPO Network is available through Cigna Healthcare's contractual relationship with the Kaiser Permanente health plans. The Cigna Healthcare PPO Network is provided exclusively by or through operating subsidiaries of The Cigna Group, including Cigna Health and Life Insurance Company. The Cigna Healthcare name, logo, and other marks are owned by Cigna Intellectual Property, Inc. 9. For both the Participating and Nonparticipating Provider Tiers, referrals aren't required, but some services – surgery, hospitalization, MRIs, PET scans, and CT scans, for example - require precertification. Prior authorization may be required in the HMO In-Network Provider Tier. See your COI or EOC for a list of services that may require precertification or prior authorization, respectively. 10. Coverage and refills of maintenance medications depend on your specific plan provisions: (a) For the HMO In-Network Provider Tier, maintenance medication refills must be filled at one of our Kaiser Permanente Plan medical office pharmacies or through the Kaiser Permanente mail-order program, or the maintenance medication will not be covered; (b) For the Participating Provider Tier, maintenance medication refills must be filled at one of the participating MedImpact pharmacies or through the MedImpact mail-order program or the maintenance medication will not be covered; and (c) For the Nonparticipating Provider Tier, mail order is not available. For the HMO In-Network Provider Tier, prescription refills can only be delivered by mail to an address within the state of Colorado. 11. Certain drugs may require prior authorization, step therapy, quantity and/or age limits. 12. KPIC has contracted with MedImpact. The list of participating MedImpact providers is subject to change without notice. Log on to medimpact.com (be sure to sign up as a registered MedImpact member to get a correct listing), and follow the prompts for a list of participating MedImpact pharmacies.

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