

Welcome to Kaiser Permanente

Get started in 3 easy steps



How your Kaiser Permanente health plan works

Your Deductible Added Choice with the Kaiser Permanente SelectSM delivery system plan gives you the freedom to choose how you receive care, each time you receive care:

You get quality care from the Kaiser Permanente Select delivery system, composed of over 1,700 physicians of the Mid-Atlantic

Permanente Medical Group, P.C. (Permanente), and thousands of Community Physicians in private practice. Refer to the *Kaiser Permanente Select Physician Directory* or visit kp.org/doctor for a list of primary care physicians, ob-gyns, specialists, and hospitals.

Out-of-network: You may visit any licensed physician not included in the Kaiser Permanente Select delivery system, and you do not need to notify us of your choice.

It's important to keep in mind that your benefits and cost shares will vary when you choose an out-of-network provider.

About this plan

	In-network providers	Out-of-network providers
Physicians	Permanente physicians and thousands of Community Physicians in private practice.	Any licensed physician or provider not included in the Kaiser Permanente Select delivery system.
Hospitals	Kaiser Permanente premier hospitals. ¹	Any hospital not included in the Kaiser Permanente Select delivery system.
Out-of-pocket costs	Usually the lowest out-of-pocket costs. There is a deductible. Some services, such as preventive care and primary care physician visits, are offered before a deductible is met. Refer to your plan document for a list of services that are subject or not subject to the deductible.	Usually the highest out-of-pocket costs. Most services are subject to a deductible and then coinsurance.
	When you visit an in-network Permanente provider, you will not be charged more than your deductible, copayment, or coinsurance for covered services.	When you visit an out-of-network provider, in addition to your contract year deductible, copayment, and/or coinsurance, you may be responsible for the difference between the billed charges and the maximum allowable charge.
Referral and preauthorization	Referral to see specialists is required. Some services may require preauthorization. If you have a Permanente physician, he or she will obtain preauthorization for you. If you have a network physician, you'll be responsible for obtaining preauthorization.	No referral to specialists is needed. Some services require preauthorization. You will be responsible for obtaining preauthorization. Contact Member Services or the Utilization Management Operations Center at 888-225-7202 (TTY 711) to obtain preauthorizations. Representatives are available from Monday through Friday, 8 a.m. to 11 p.m. You may, however, request precertification 24 hours a day, 7 days a week. Response to urgent requests occurs within 2 hours of your message; nonurgent requests will get a reply during the following business day. Visit kp.org/addedchoice/mas .
Claims	Virtually no claim forms to complete.	You may be required to pay the full cost of each visit. If so, you will need to submit claim forms with itemized bills for reimbursement. Forms are available at kp.org/addedchoice/mas .

¹Premier hospitals are independently owned and operated hospitals, and they contract with Kaiser Foundation Hospitals. The continued availability and/or participation of any facility cannot be guaranteed. For the most current information, visit kp.org/premierhospitals.

Greetings

We're glad to be your partner on this journey, and we look forward to a long and healthy relationship with you.

This reference guide will help you make the most of your membership with Kaiser Permanente. It puts important details at your fingertips, including how to get care, important phone numbers, and information about Urgent Care centers. You will also find information about pharmacies, getting care away from home, and understanding your costs.

This reference guide will also walk you through the most important steps for accessing your membership. The sooner you choose a doctor and sign up on our website, the more you'll get out of your new health plan.

We encourage you to take a few minutes to read through this brochure and keep it nearby for quick reference.

Get started today by calling us at **888-225-7202** (TTY **711**) or visiting **kp.org/newmember**. Take advantage of all that life has to offer by being as healthy as you can be.

Welcome to Kaiser Permanente.

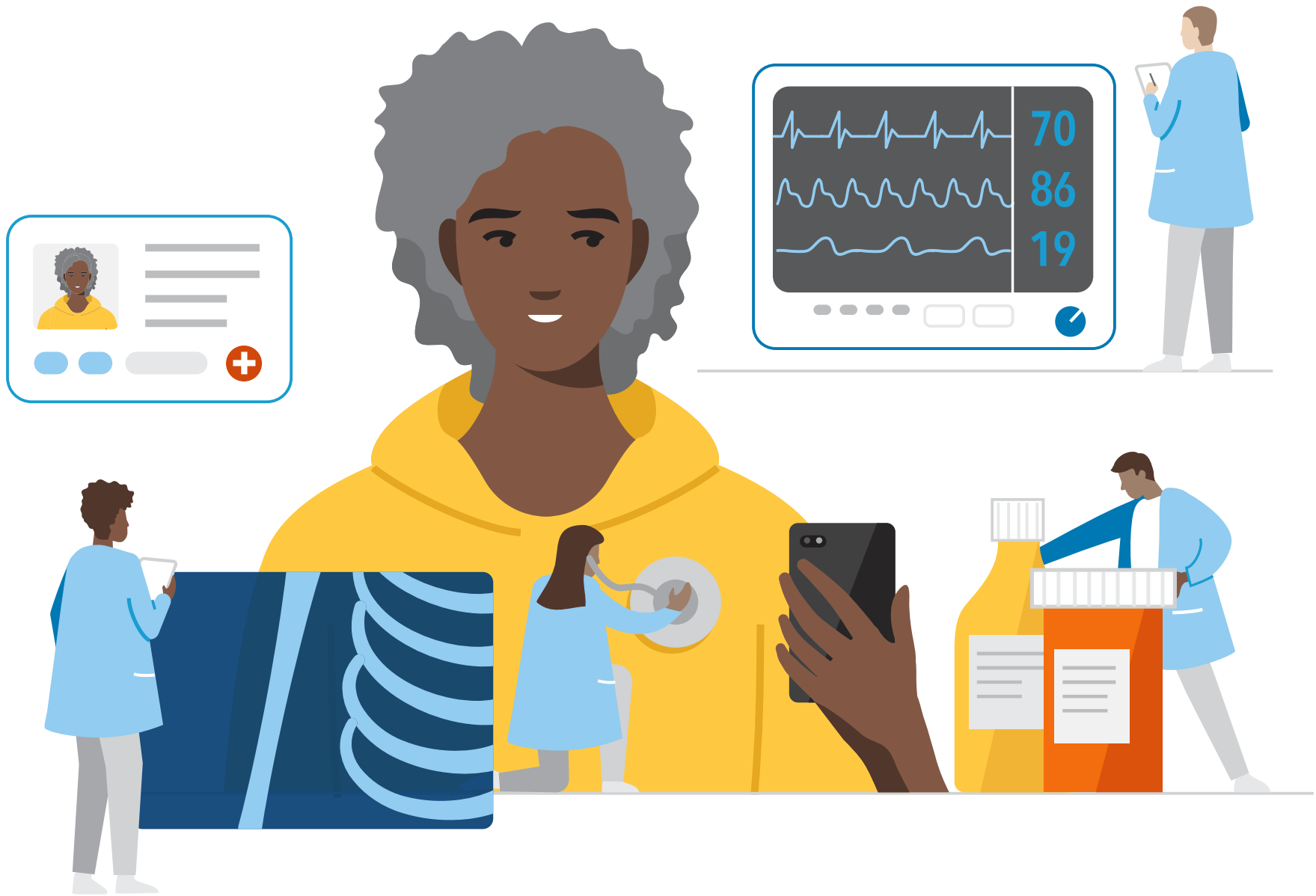


Ruth Williams-Brinkley
Regional President, Kaiser Permanente

Stay in the know with all things Kaiser Permanente—check out kp.org/insider for valuable health information, facility updates, and member discounts.

Your plan is governed by the Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. (KFHP-MAS), *Group Agreement and Evidence of Coverage (EOC)*. Inside this booklet, it is referred to as your “plan document.”

In the event of ambiguity or conflict between this member guide and the KFHP-MAS *Group Agreement and EOC*, the KFHP-MAS *Group Agreement and EOC* shall prevail.



Let's get started

Making the most of your membership takes only 3 easy steps. Ready to go?



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Step 1 Create your online account on kp.org



Start using our secure website, kp.org, to manage your health on your time¹

Visit kp.org anytime, from anywhere, to:

- Schedule an appointment to see physicians and providers by video visit.²
- View most lab results.
- Refill most prescriptions.
- Email your doctor's office with nonurgent questions.
- Schedule and cancel routine appointments.
- Print vaccination records for school, sports, and camp.
- Manage a family member's health care.
- Get a personalized cost estimate.
- Use our Chat with KP feature.
- And much more.

Caregiver access

Caregivers can access certain features of kp.org for loved ones who are members of Kaiser Permanente. Nonmembers can be caregivers on kp.org as long as they're at least 18 years old and have either:

- Permission from you, or
- Legal rights to make health care decisions on your behalf, or legal rights to access your health care information.

To set up an account, go to kp.org/register and follow the prompts for caregiver access.

Download the Kaiser Permanente app

Now you can download the Kaiser Permanente app³ to your smartphone.

1. From your smartphone, go to your preferred app site: App StoreSM (iOS) or Google Play[®] (Android[™]).⁴
2. Search for the Kaiser Permanente app, then download it to your smartphone.
3. Use your kp.org user ID and password to activate the app, and you'll be ready to go.

Digital membership card

Access your membership information anytime, anywhere, with an electronic version of your membership card to:

- Check in for appointments.
- Pick up prescriptions.
- Access your family's membership information.

To use your digital membership card, tap the card icon at the bottom of the Kaiser Permanente app dashboard.

Creating an account is easy

Go to kp.org/newmember from a computer or mobile device and follow the sign-on instructions. You'll need your medical record number, which you can find on your member ID card.

Personalize your kp.org experience: Use your member ID card and our Member Photo Upload feature to add your digital image to kp.org.

¹These features are available when you get care at Kaiser Permanente facilities.

²When appropriate and available. If you travel out of state, phone appointments and video visits may not be available due to state laws that may prevent doctors and health care providers from providing care across state lines. Laws differ by state. If you have an HSA-qualified deductible plan, you may need to pay the full charge for scheduled phone appointments and video visits until you reach your deductible. Once you reach your deductible, you won't pay anything for scheduled phone appointments and video visits.

³To use the Kaiser Permanente app, you must be a Kaiser Permanente member registered on kp.org.

⁴Apple is a trademark of Apple, Inc., registered in the U.S. and other countries. App Store is a service mark of Apple, Inc. Google Play and Android are trademarks of Google, Inc.

Step 2 Choose your doctor—and change anytime

Select from a wide range of great doctors and change anytime, for any reason

Your Added Choice plan gives you the freedom to choose how you receive care, each time you receive care:

- In-network: Kaiser Permanente providers
- Out-of-network: any licensed provider

In-network: Choosing a personal doctor (primary care physician)

Choose by phone

Call us at **888-225-7202** (TTY 711), Monday through Friday, 7:30 a.m. to 9 p.m. Once you've decided on a doctor, we can help you schedule your first appointment.

Choose online

Go to **kp.org/doctor** to browse our doctor profiles and find a doctor who matches your needs. Once you've chosen, call **800-777-7904** (TTY 711), 24 hours a day, 7 days a week, to schedule your first

appointment. You don't need a referral for the following specialties. Just call for an appointment:

- **800-777-7904** (TTY 711) for obstetrics-gynecology and optometry
- **866-530-8778** for behavioral health—initial consultation (except inpatient care) and chemical dependency or addiction medicine

For other types of specialty care, your doctor will refer you.

Out-of-network: Any licensed provider

Through the out-of-network tier, you can work directly with any licensed provider or facility anywhere. No referral is needed for office visits to out-of-network physicians or specialists; however, preauthorization applies to certain covered out-of-network services.

It's important to keep in mind that your benefits will vary with each provider option and that the amount you pay for a particular service will depend on the provider option you choose and, in some cases, where you choose to receive care.



Visit **kp.org/addedchoice/mas** to learn more about how your Added Choice plan works.

Step 3 Get prescriptions

You can fill prescriptions from any provider at any pharmacy

Kaiser Permanente pharmacies:

- You can fill prescriptions from Kaiser Permanente medical center pharmacies or online at **kp.org**.
- You can also use Kaiser Permanente's Mail Order Pharmacy to get your prescription refills delivered right to your front door.¹

Community participating pharmacies:

- You can fill prescriptions at participating pharmacies, including Giant, Harris Teeter, Kmart, Rite Aid, Safeway, Walgreens, Walmart, and others.
- There is no mail-order service with this pharmacy option.
- You may have higher cost shares than you would if you go to a Kaiser Permanente pharmacy, and a deductible may apply.

Out-of-network pharmacies:

- You can fill prescriptions at all other pharmacies.
- There is no mail-order service with this pharmacy option.
- You may have higher cost shares than you would if you went to a participating (community network) pharmacy, and a deductible may apply.
- You may need to pay full out-of-pocket costs for prescriptions filled at out-of-network pharmacies and submit claims to MedImpact for reimbursement.



Get prescription refills by mail

Get medications sent to you in 3 to 5 days and at no cost with Mail Order Pharmacy.¹ To start, register at **kp.org**, download the Kaiser Permanente app,^{2,3} or call **800-733-6345**. Some prescriptions are available for same-day or next-day delivery for a small fee; for eligible prescriptions, select this option at checkout.

Get prescription refills by phone

Call us at **800-700-1479 (TTY 711)**, 24 hours a day, and follow the instructions to request most refills online.

Get prescription refills online

Register on **kp.org** or the Kaiser Permanente app^{2,3} to request refills for most prescriptions online.

What drugs are covered?

Visit **kp.org/formulary** for a list of approved drugs.

Picking up your order

You can fill your prescriptions at the pharmacies located in our medical centers. Just visit **kp.org/facilities** and select the pharmacy where you'd like to pick them up.

¹Some medications are not eligible for Mail Order Pharmacy. Mail Order Pharmacy can mail to addresses in MD, VA, DC, and certain locations outside the service area.

²Apple is a trademark of Apple, Inc., registered in the U.S. and other countries. App Store is a service mark of Apple, Inc. Google Play and Android are trademarks of Google, Inc.

³To use the Kaiser Permanente app, you must be a Kaiser Permanente member registered on **kp.org**.

Pharmacy phone numbers

There is a pharmacy in each Kaiser Permanente medical center. See back cover for locations on a map.

Maryland

Abingdon Medical Center
410-515-5450

Annapolis Medical Center
410-571-7360

Kaiser Permanente Baltimore Harbor Medical Center
410-637-5750

Bowie Fairwood Medical Center
301-867-1330

Camp Springs Medical Center
301-702-6175

Columbia Gateway Medical Center
410-309-7500

Kaiser Permanente Frederick Medical Center
240-529-1800

Gaithersburg Medical Center
240-632-4150

Kensington Medical Center
301-929-7175

Largo Medical Center
301-618-5552

Lutherville-Timonium Medical Center
410-847-3029

Marlow Heights Medical Center
301-702-5190

North Arundel Medical Center
410-508-7675

Shady Grove Medical Center
301-548-5755

Silver Spring Medical Center
301-572-1055

South Baltimore County Medical Center
410-737-5200

West Hyattsville Medical Center
240-906-6600

White Marsh Medical Center
410-933-7626

Woodlawn Medical Center
443-663-6116

Virginia

Alexandria Medical Center
703-721-6310

Ashburn Medical Center
571-252-6005

Burke Medical Center
703-249-7750

Caton Hill Medical Center
703-986-2500

Colonial Forge Medical Center
540-602-6300

Fair Oaks Medical Center
703-934-5800

Falls Church Medical Center
703-237-4430

Fredericksburg Medical Center
540-368-3800

Haymarket Crossroads Medical Center
571-445-7300

Manassas Medical Center
703-257-3030

Reston Medical Center
703-709-1560

Springfield Medical Center
571-622-2100

Tysons Corner Medical Center
703-287-4650




Washington, DC

Kaiser Permanente Capitol Hill Medical Center
202-346-3300

Northwest DC Medical Office Building
202-419-6900

Your plan may allow you to use non-Kaiser Permanente pharmacies. For information, call Member Services at **800-777-7902 (TTY 711)**, Monday through Friday (except holidays), 7:30 a.m. to 9 p.m. If your plan is through your employer, check with your benefits manager to find out if your plan includes non-Kaiser Permanente pharmacies.




The right care

Services	In-network	Out-of-network
 <p>Seeing your doctor For an expected care need, like a recommended preventive screening or a visit for a health issue currently being treated, or a new health concern or change in an existing health condition that is not an urgent care need.</p>	<p>To make appointments with doctors at Kaiser Permanente facilities, visit kp.org/appointments or call 800-777-7904 (TTY 711), 24 hours a day, 7 days a week. You can also use our automated wait list to get an earlier appointment if one becomes available. Select Join for sooner appointment and be notified if earlier appointments open up.¹</p> <p>If you have an affiliated physician, contact your doctor's office directly. Ask your doctor's office for business hours.</p>	<p>Call your out-of-network provider directly. Ask your doctor's office for business hours.</p>
 <p>Video visits² See physicians and providers by video visit—wherever you need. You can also meet a physician on demand with Get Care Now with a Clinician. Short wait times may apply.</p>	<p>For video visits with doctors who practice at Kaiser Permanente medical centers, visit kp.org or call 800-777-7904 (TTY 711), 24 hours a day, 7 days a week.</p>	<p>Contact your provider directly about the availability of telehealth appointments.</p>
 <p>E-visits³ For certain conditions, you can use our online symptom checker and get personalized care advice within 2 hours.</p>	<p>Get started at kp.org. E-visits are available 7 days a week, from 8 a.m. to midnight.</p>	<p>Contact your provider directly about the availability of e-visits.</p>

¹Sooner appointments are available for phone, video, or in-person appointments. Availability varies by service and department.




²When appropriate and available. If you travel out of state, phone appointments and video visits may not be available due to state laws that may prevent doctors and health care providers from providing care across state lines. Laws differ by state. If you have an HSA-qualified deductible plan, you may need to pay the full charge for scheduled phone appointments and video visits until you reach your deductible. Once you reach your deductible, you won't pay anything for scheduled phone appointments and video visits.

³Available when you register and log in to kp.org or the Kaiser Permanente app.

Services	In-network	Out-of-network
 <p>Medical advice by phone Whenever you need medical advice or are unsure whether you need urgent care.</p>	<p>800-777-7904 (TTY 711) 24 hours a day, 7 days a week</p>	<p>You may choose to call your out-of-network provider directly during business hours, or call Kaiser Permanente at 800-777-7904 (TTY 711), 24 hours a day, 7 days a week.</p>
 <p>Urgent care You are covered at any Kaiser Permanente Urgent Care or Advanced Urgent Care center.</p>	<p>800-777-7904 (TTY 711) 15 locations; 7 open 24 hours a day, 7 days a week Members are welcome to walk in without an appointment. Learn more at kp.org/urgentcare/mas. Unsure if you need urgent or emergency care? Call 800-677-1112 (TTY 711).</p>	<p>You can visit any licensed out-of-network urgent care facility. Make sure to keep a copy of your bill to submit with your claim for reimbursement.</p>
 <p>Emergency care¹ You are covered for urgent and emergency illness or injury anywhere in the world.</p>	<p>If you think you're experiencing a medical emergency, immediately call 911 or go to the nearest emergency facility 24 hours a day, 7 days a week. Unsure if you're experiencing an emergency? Call 866-677-1112 (TTY 711).</p>	<p>All emergency care is covered as an in-network benefit.</p>

¹If you reasonably believe you have an emergency medical condition, call 911 or go to the nearest emergency department. An emergency medical condition is one that, in the absence of immediate medical attention, may result in 1) placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy, 2) serious impairment to bodily functions, or 3) serious dysfunction of any bodily organ or part. Refer to your plan document for the complete definition of emergency medical conditions.

The right care (continued)

Services	In-network	Out-of-network
 <p>Behavioral health</p>	<p>You can seek initial consultation without a referral from your doctor for outpatient treatment for behavioral health or substance use conditions.</p> <p>Call 866-530-8778 (TTY 711), Monday through Friday (closed holidays), 8:30 a.m. to 5 p.m.</p>	<p>You may be able to receive care from any licensed behavioral health or chemical dependency professional for mental illness, emotional disorders, and drug or alcohol abuse. Please refer to your plan document for more details.</p> <p>Preauthorization is required before receiving inpatient hospital care. Depending on your plan, it may also be required for certain outpatient procedures.</p>
 <p>Vision care</p>	<p>Visit kp.org or call 800-777-7904 (TTY 711). Hours vary by location. Learn more at kp2020.org.</p> <p>You don't need a referral from your doctor to make an appointment.</p>	<p>You can visit any licensed optometrist or vision facility. You'll pay for services in full and submit a claim for reimbursement.</p>
 <p>Seeing specialty doctors</p>	<p>You need a referral from your primary care physician for specialty care. In most cases, an appointment will be coordinated for you by your care team. Otherwise, call Kaiser Permanente at 800-777-7904 (TTY 711).</p> <p>You do not need a referral for obstetrics-gynecology, optometry, and some behavioral health services.</p>	<p>You can choose any licensed provider for specialty care. No referral is needed for office visits to out-of-network specialists; however, preauthorization applies to certain covered out-of-network services.</p>

If you are new to Kaiser Permanente or haven't seen your Permanente physician yet, and if you have a chronic condition, were recently hospitalized, or are or think you might be pregnant, please make an appointment as soon as possible. Call **800-777-7904 (TTY 711)**.

Getting virtual care with Kaiser Permanente

Virtual care allows members to see their personal doctor—as well as any specialists they’ve been referred to—by video, phone, or email, usually for no copay.¹ When you need medical attention, you can start your journey using any of our virtual care options after registering and logging on to kp.org and downloading the Kaiser Permanente app.²



Get Care Now with a Clinician for 24/7 on-demand service with the next available clinician—no appointment is needed for Urgent Care that can be addressed virtually



E-visits for personalized advice in 2 hours or less



Email consultations with your doctor



24/7 advice line and online chat

During a virtual visit, your doctor can access your digital health record and consult with other physicians, so your care is seamless, convenient, and connected. All of your post-visit information, prescriptions, lab results, immunization status, emails, and more are available and secure with **kp.org** and the Kaiser Permanente app.

Are you ready for your video visit?

Please make sure your computer is working prior to your appointment. To check, visit kp.org/tipsvideovisits and click [Tech Check](#).

For more information on your telehealth options and how to join a video visit, go to kp.org/getcare.

¹When appropriate and available. If you travel out of state, phone appointments and video visits may not be available due to state laws that may prevent doctors and health care providers from providing care across state lines. Laws differ by state. If you have an HSA-qualified deductible plan, you may need to pay the full charge for scheduled phone appointments and video visits until you reach your deductible. Once you reach your deductible, you won't pay anything for scheduled phone appointments and video visits.

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

Healthy extras to improve your mental and physical health

Enjoy access to our healthy extras¹—online resources to help manage your well-being:

Virtual classes at no extra cost

- Cataract Class
- Managing Prediabetes
- Nutrition for Cholesterol Control
- Nutrition for Weight Control
- Stress Management

Fitness classes at no extra cost

- **ClassPass** on-demand fitness classes

Self-care apps²

- **myStrength® Complete.**³ Use this comprehensive and flexible digital program to get proven tools and support for stress, sleep management, depression, anxiety, and more.
- **Calm.** Reduce stress, improve sleep, and enhance mood with meditation.

- **Ginger.** Get immediate one-on-one emotional support for coping with many common challenges—from stress and low mood to work or relationship issues.

Learn more and download these apps at kp.org/selfcareapps.

Other resources to help keep you informed, inspired, and feeling your best:

- Health education classes at our facilities. Registration is required. Browse courses at kp.org/classes, and to register, call **800-777-7904 (TTY 711)**.
- *Partners in Health.* This monthly newsletter brings you health tips, member stories, and facility or service updates.
- Online wellness programs. Learn more at kp.org/healthylifestyles.

- ChooseHealthy® offers discounts on alternative care and fitness services. The program is available to you in addition to any benefits for these services that may be covered under your plan. Learn more at kp.org/choosehealthy.

Refer to your plan document for more information.



¹The products and services described are provided by entities other than Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc., and are neither offered nor guaranteed under your Kaiser Permanente contract. Kaiser Permanente does not endorse or make any representations regarding the quality or medical effectiveness of such products and services, nor the financial integrity of these entities. Kaiser Permanente disclaims any liability for these products and services. Some Kaiser Permanente members may have coverage through their health plan for some of the same services available through ChooseHealthy®. The value-added services available under the ChooseHealthy program are separate and apart from any chiropractic, acupuncture, or massage services available under your contract. Please see your coverage documents for information regarding those services covered under your Kaiser Permanente contract. The ChooseHealthy program is administered by American Specialty Health Administrators, Inc., a subsidiary of American Specialty Health Incorporated (ASH). ChooseHealthy is a federally registered trademark of ASH and used with permission herein.

²These apps are not covered under your health plan benefits and are not subject to the terms set forth in your *Evidence of Coverage* or other plan documents. These services may be discontinued at any time without notice.

³myStrength Complete by Teladoc Health is available to members 13 and older who do not have a Maryland Medicaid health plan. Some of these services may not be covered under your health plan benefits and may not be subject to the terms set forth in your *Evidence of Coverage* or other plan documents. These services may be discontinued at any time without notice. myStrength® is a wholly owned subsidiary of Livongo Health, Inc. Psychiatry is not included in the myStrength Complete membership.

Urgent care

Urgent Care centers

Open evenings, weekends, and holidays, our Urgent Care centers are located in Maryland, Virginia, and Washington, DC.

Call **800-777-7904** (TTY **711**) to get the care you need, or come in if you are experiencing any of the following:

- Abdominal pain
- Breathing trouble
- Broken bones
- Deep cuts
- Flu- or cold-like symptoms
- Rash or skin infections
- Sprains and strains
- Urinary tract infection
- Vomiting, diarrhea, or nausea

These are examples of conditions that are treated in Urgent Care or Advanced Urgent Care. If you think you are experiencing an emergency medical condition,¹ call 911.

24/7 Kaiser Permanente Advanced Urgent Care centers

At our medical centers that have 24/7 Urgent Care, you get:

- Physicians trained in emergency medicine
- Lower cost shares² than those for a typical hospital ER visit
- 24/7 laboratory services
- Extended pharmacy hours, with most open 24/7
- 24/7 advanced imaging services, including CT, MRI, and ultrasound
- An observation unit where patients can be monitored for up to 24 hours

Get Care Now with a Clinician

With our Get Care Now with a Clinician on-demand service, no appointment is needed for Urgent Care that can be addressed virtually—you can see the next available clinician today.

- Connect to this virtual care service 24/7, and a physician will reach out to you, usually within 2 hours

- Offered at no charge
- Available via phone, video, **kp.org**, or the Kaiser Permanente app³

Out-of-network

- You have access to any out-of-network urgent care facility, anywhere in the country.
- The facility may ask you to pay in full when you receive care. If so, retain a copy of the bill as proof of payment, and submit your claim for reimbursement.
- You will have the highest out-of-pocket cost when using this option.



¹An emergency medical condition is one that, in the absence of immediate medical attention, may result in 1) placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy, 2) serious impairment to bodily functions, or 3) serious dysfunction of any bodily organ or part. Refer to your plan document for the complete definition of emergency medical conditions.

²Cost share depends upon your plan. For specific information, please check your plan document.

³To use the Kaiser Permanente app, you must be a Kaiser Permanente member registered on **kp.org**.

Kaiser Permanente Urgent Care locations

Maryland

Annapolis Urgent Care
(Opens January 2, 2024)
888 Bestgate Road, Suite 111
Annapolis, MD 21401
By appointment only
Mon-Fri: 3-11 p.m.
Sat, Sun, holidays: 9 a.m.-5 p.m.

Kaiser Permanente Baltimore Harbor Urgent Care
Temporarily closed
815 E. Pratt St.
Baltimore, MD 21202

Camp Springs Urgent Care
6104 Old Branch Ave.
Temple Hills, MD 20748
By appointment only
Fri: 3-11 p.m.
Sat, Sun: 9 a.m.-5 p.m.

Gaithersburg Advanced Urgent Care **24/7**
655 Watkins Mill Road
Gaithersburg, MD 20879

Kensington Urgent Care
Temporarily closed
10810 Connecticut Ave.
Kensington, MD 20895

Largo Advanced Urgent Care **24/7**
1221 Mercantile Lane
Largo, MD 20774

Lutherville-Timonium Advanced Urgent Care **24/7**
2391 Greenspring Drive
Lutherville-Timonium, MD 21093

South Baltimore County Advanced Urgent Care **24/7**
1701 Twin Springs Road
Halethorpe, MD 21227

White Marsh Urgent Care
4920 Campbell Blvd.
Nottingham, MD 21236
By appointment only
Mon-Fri: 3-11 p.m.
Sat, Sun: 9 a.m.-5 p.m.

Woodlawn Urgent Care
Temporarily closed
7141 Security Blvd.
Baltimore, MD 21244

Virginia

Ashburn Urgent Care
(Opens January 2, 2024)
43480 Yukon Drive
Ashburn, VA 20147
By appointment only
Mon-Fri: 3-11 p.m.
Sat, Sun, holidays: 9 a.m.-5 p.m.

Caton Hill Advanced Urgent Care **24/7**
13285 Minnieville Road
Woodbridge, VA 22192

Fredericksburg Urgent Care
1201 Hospital Drive
Fredericksburg, VA 22401
By appointment only
Mon-Fri: 3-7 p.m.
Sat, Sun, holidays: 9 a.m.-5 p.m.

Manassas Urgent Care
Temporarily closed
10701 Rosemary Drive
Manassas, VA 20109

Reston Urgent Care
1890 Metro Center Drive
Reston, VA 20190
By appointment only
Mon-Fri: 3-11 p.m.
Sat, Sun, holidays: 9 a.m.-9 p.m.

Tysons Corner Advanced Urgent Care **24/7**
8008 Westpark Drive
McLean, VA 22102

Washington, DC

Kaiser Permanente Capitol Hill Advanced Urgent Care **24/7**
700 2nd St. NE
Washington, DC 20002



The continued availability and/or participation of any facility cannot be guaranteed.

Kaiser Permanente reserves the right to relocate, modify, or terminate the location and hours of services for Urgent Care. For the most up-to-date information, visit kp.org/urgentcare/mas.

Hospital care

kp.org/premierhospitals

Kaiser Permanente carefully selects premier hospitals¹ to team with us in taking great care of you.

We've chosen award-winning hospitals to team with in coordinating your care when you need inpatient or outpatient hospital care. These hospitals are located throughout Maryland, Virginia, and Washington, DC.

If you're admitted to a hospital that is not one of our premier hospitals

Once your condition has stabilized, we may move you to one of our premier hospital locations where our Kaiser Permanente physicians are on duty. By doing so, we can provide you seamless and coordinated care, both during your hospitalization and in your transition out of the hospital.

Out-of-network hospitals:

- You can receive inpatient hospitalization services from any licensed or accredited hospitals and facilities.
- When you receive services, you may need to pay allowable charges (such as the contracted amount a provider has agreed to accept) to the hospital, doctor, or other providers, as described in your plan document. You may also need to submit a claim for reimbursement.
- Precertification is required. Please refer to your plan document for more details.



Premier hospitals by region

Maryland

- Baltimore Washington Medical Center, Glen Burnie
umms.org/bwmc
- Capital Region Medical Center, Largo
umms.org/capital
- Holy Cross Germantown Hospital
holycrosshealth.org
- Holy Cross Hospital, Silver Spring
holycrosshealth.org
- Luminis Health Anne Arundel Medical Center, Annapolis
askAAMC.org
- St. Joseph Medical Center, Towson
umms.org/sjmc
- Suburban Hospital, Bethesda
suburbanhospital.org

Virginia

- Reston Hospital Center, Reston
restonhospital.com
- Stafford Hospital, Stafford
marywashingtonhealthcare.com
- Virginia Hospital Center, Arlington
virginiahospitalcenter.com

Washington, DC

- Children's National Health System
childrensnational.org
- MedStar Washington Hospital Center
whcenter.org

¹The premier hospitals are independently owned and operated hospitals, and they contract with Kaiser Foundation Hospitals. The continued availability and/or participation of any facility cannot be guaranteed. Kaiser Permanente reserves the right to relocate, modify, or terminate the location for premier hospitals. For the most up-to-date information, visit kp.org/premierhospitals.

Kaiser Permanente medical facilities

Maryland

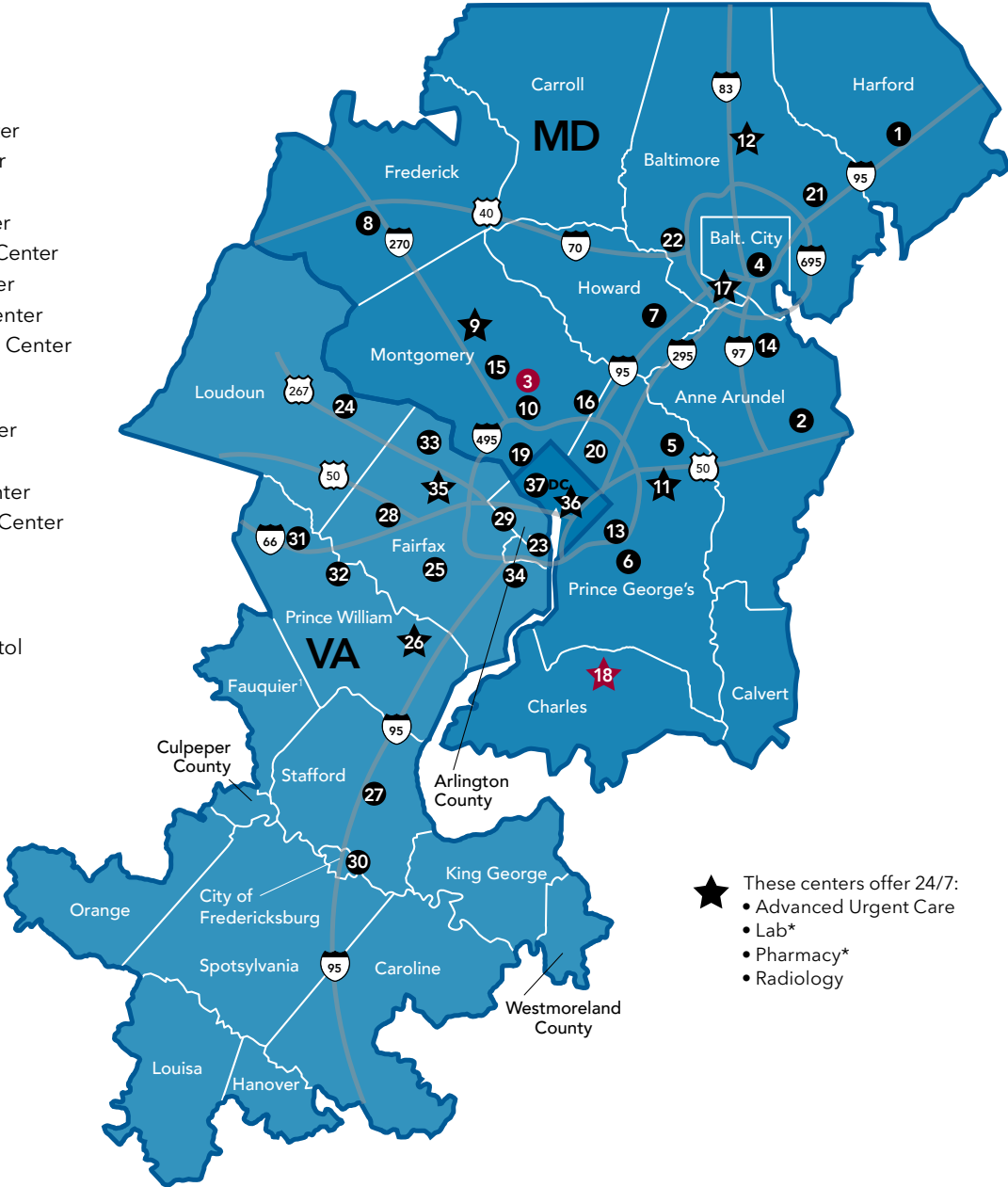
- 1 Abingdon Medical Center
- 2 Annapolis Medical Center
- 3 **FUTURE LOCATION**
Medical Center in Aspen Hill
- 4 Kaiser Permanente Baltimore Harbor Medical Center
- 5 Bowie Fairwood Medical Center
- 6 Camp Springs Medical Center
- 7 Columbia Gateway Medical Center
- 8 Kaiser Permanente Frederick Medical Center
- 9 Gaithersburg Medical Center
- 10 Kensington Medical Center
- 11 Largo Medical Center
- 12 Lutherville-Timonium Medical Center
- 13 Marlow Heights Medical Center
- 14 North Arundel Medical Center
- 15 Shady Grove Medical Center
- 16 Silver Spring Medical Center
- 17 South Baltimore County Medical Center
- 18 **FUTURE LOCATION**
Medical Center in Waldorf
- 19  Friendship Heights by KAISER PERMANENTE.
- 20 West Hyattsville Medical Center
- 21 White Marsh Medical Center
- 22 Woodlawn Medical Center

Virginia

- 23 Alexandria Medical Center
- 24 Ashburn Medical Center
- 25 Burke Medical Center
- 26 Caton Hill Medical Center
- 27 Colonial Forge Medical Center
- 28 Fair Oaks Medical Center
- 29 Falls Church Medical Center
- 30 Fredericksburg Medical Center
- 31 Haymarket Crossroads Medical Center
- 32 Manassas Medical Center
- 33 Reston Medical Center
- 34 Springfield Medical Center
- 35 Tysons Corner Medical Center

Washington, DC

- 36 Kaiser Permanente Capitol Hill Medical Center
- 37 Northwest DC Medical Office Building





*Extended pharmacy hours at Gaithersburg and Lutherville-Timonium and extended lab hours at Tysons Corner.



For our most up-to-date listing of facilities and services available, please check kp.org/facilities.

*Kaiser Permanente's service area in Fauquier County includes the following ZIP codes: 20115, 20116, 20117, 20119, 20128, 20137, 20138, 20139, 20140, 20144, 20181, 20184, 20185, 20186, 20187, 20188, 20198, 22406, 22556, 22639, 22642, 22643, 22720, 22728, and 22739.



Additional services

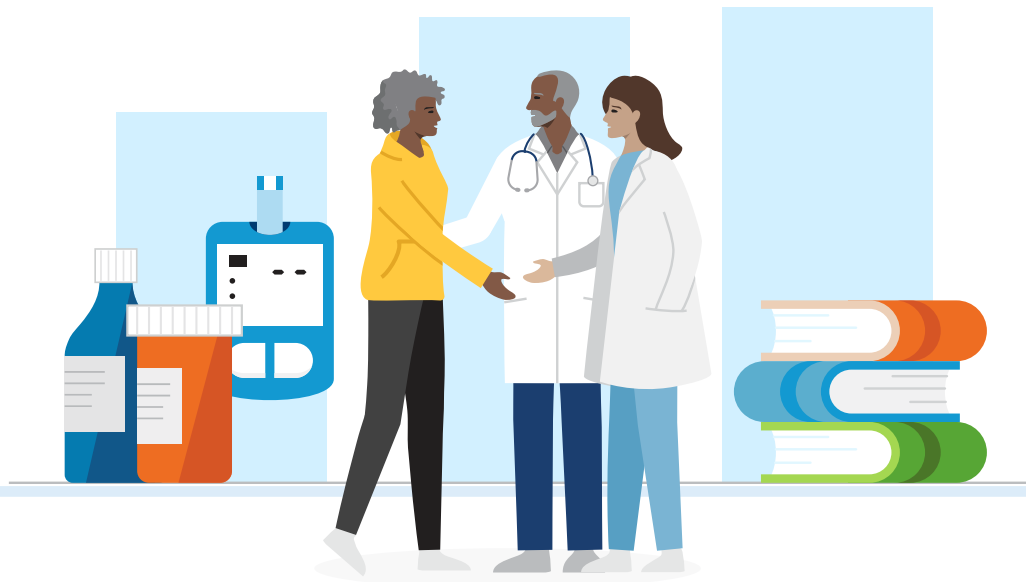
Services	What you need to know
<p data-bbox="150 320 274 412">X-ray and imaging services</p> 	<p data-bbox="334 320 504 348">In-network:</p> <p data-bbox="334 372 1926 400">For most services, you need a referral from your doctor. He or she will let you know how to schedule your appointment.</p> <p data-bbox="334 425 1981 492">Most X-ray and imaging services are located wherever Urgent Care or Advanced Urgent Care is offered so you do not have to make a separate trip to have an X-ray or other imaging test.</p> <p data-bbox="334 517 1993 585">Call the appointment line to schedule a mammogram. You do not need a referral from a doctor. Your primary care physician or ob-gyn will talk with you about how often you should be screened.</p> <p data-bbox="334 609 2004 677">Your results from tests done in Kaiser Permanente medical centers will be available in your medical record. Your primary care physician or ob-gyn will talk with you about how often you should be screened.</p> <p data-bbox="334 702 570 729">Out-of-network:</p> <p data-bbox="334 754 1174 782">You can receive X-ray and other imaging services at any facility.</p> <p data-bbox="334 806 2048 874">If you receive screenings in out-of-network facilities, you will likely pay in full and submit a claim for reimbursement. The provider may also bill you for the difference, if any, between actual billed charges and the maximum allowable charge.</p>
<p data-bbox="172 936 252 964">Dental</p> 	<p data-bbox="334 936 2070 1034">Your medical coverage includes dental care needed after an accident. It does not provide additional dental care or dental treatment that is not related to an accident. Refer to your plan document to determine your accidental dental coverage, or contact the benefits officer where you work if your employer provides your coverage.</p> <p data-bbox="334 1059 1948 1127">You may have a plan that includes preventive and other dental benefits. Refer to your health plan <i>Evidence of Coverage</i>, or contact the benefits officer where you work if your employer provides your coverage.</p> <p data-bbox="334 1151 1981 1250">For questions about dental benefits (other than accidental dental), visit kp.org/dental/mas or call LIBERTY Dental Plan at 800-764-5393 (TTY 877-855-8039). Knowledgeable LIBERTY Dental Plan member service specialists are available Monday through Friday, 8 a.m. to 8 p.m. (ET), to answer your questions about coverage or to help you find a participating dentist.</p>

Additional services (continued)

Services	What you need to know
<p>Lab tests and results</p> 	<p>In-network:</p> <p>For most routine lab tests, your Permanente physician will send the order electronically to the Kaiser Permanente lab, and you can just walk in without an appointment.</p> <p>Most lab services are located wherever Urgent Care or Advanced Urgent Care is offered so you don't have to make a separate trip to have a lab test to complete your care. You can also schedule your lab appointment in advance to save time.</p> <p>Your results from tests done in Kaiser Permanente medical centers will be in your medical record.</p> <p>You can read most results online soon after the lab completes your tests, sometimes the same day.</p> <p>If your lab tests are not performed in a Kaiser Permanente medical center, follow your physician's instructions about how to receive your test results.</p> <p>Out-of-network:</p> <p>You can receive lab services at any facility.</p> <p>If you receive lab services in out-of-network facilities, you will likely pay in full and submit a claim for reimbursement. The provider may also bill you for the difference, if any, between actual billed charges and the maximum allowable charge.</p>
<p>Chat with KP</p> 	<p>Check out Chat with KP, our new click-to-chat service available to members at no extra cost. Use Chat with KP to chat virtually with one of our licensed care providers via kp.org or the Kaiser Permanente app,¹ Monday through Friday, 7 a.m. to 7 p.m., excluding holidays.</p> <p>This service offers the same benefits as our 24/7 advice line, including quick advice and referrals—all with just a click. You can also share pictures through the chat and see your complete chat history, ensuring your care is seamless, convenient, and connected.</p> <p>To chat with a nurse on your computer, log in to kp.org, select Get Care, My Health, Message Center, or Appointment Center pages, and then click Chat with a Nurse. To chat with a nurse on your smartphone, log in to the Kaiser Permanente mobile app, visit the Get Care page, and tap Chat with KP.</p>

¹To use the Kaiser Permanente app, you must be a Kaiser Permanente member registered on **kp.org**.

Services	What you need to know
<p>Chronic care management</p> 	<p>Get help managing your ongoing health conditions. If you have asthma, chronic obstructive pulmonary disease, coronary artery disease, depression, diabetes, or high blood pressure and want information to help manage your condition, you can join our disease management program.</p> <p>Leave a message anytime at 703-536-1465 in the Washington, DC, metropolitan calling area or at 410-933-7739 in the Baltimore area. Please leave your name, medical record number, address, and the condition for which you are requesting information, and we will return your call within 2 business days.</p>
<p>Coordination of benefits</p> 	<p>Do you have coverage from another plan, too? If you have other health coverage in addition to your coverage with Kaiser Permanente, please notify Member Services at 800-777-7902 (TTY 711).</p> <p>If the other plan is your primary insurance, we reserve the right to bill the other health plan for the services we provide or authorize for you. Having more than one health care plan doesn't affect your ability to access Kaiser Permanente services. If you have a work-related injury or an injury caused by another party, please notify Member Services.</p>



More care options while you're away from home

No matter where life takes you, Kaiser Permanente has you covered. If something unexpected happens while you're away from home, it's easier than ever to get care.

Routine care at your fingertips

Use your **kp.org** account or the Kaiser Permanente app¹ on the go to:

- Get medical advice from a licensed care professional 24/7
- Access care by phone, video, or e-visit—usually at no cost^{2,3}
- Email nonurgent questions to your doctor's office

Urgent care⁴

No matter where you get urgent or emergency care, you can file a claim for reimbursement. And at many locations outside Kaiser Permanente service areas, you'll only pay your copay or coinsurance—no need to file a claim.

- Cigna HealthcareSM PPO Network⁵ providers
- MinuteClinics[®], including pharmacies⁶
- Concentra clinics⁶

Emergency care⁴

No matter where you are, you can simply go to the nearest emergency room. If it's a Kaiser Permanente location or Cigna PPO provider, you'll only pay your normal copay or coinsurance.



¹To use the Kaiser Permanente app, you must be a Kaiser Permanente member registered on **kp.org**.

²When appropriate and available. If you travel out of state, phone appointments and video visits may not be available due to state laws that may prevent doctors from providing care across state lines. Laws differ by state.

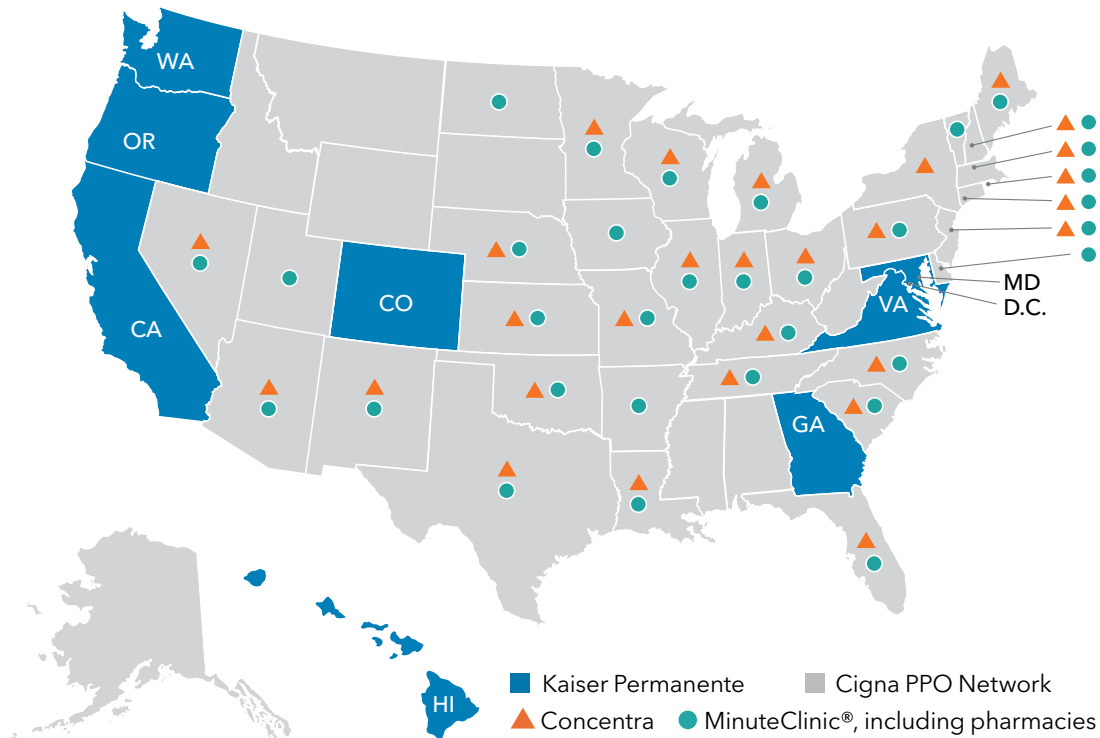
³If you have an HSA-qualified deductible plan, you may need to pay the full charges for scheduled phone appointments and video visits until you reach your deductible. Once you reach your deductible, you won't pay anything for scheduled phone appointments and video visits.

⁴If you believe you have an emergency medical condition, call 911 or go to the nearest hospital. For the complete definition of an emergency medical condition, please refer to your *Evidence of Coverage* or other coverage documents.

⁵The 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.

⁶MinuteClinic and Concentra payment experiences vary by plan.

Find care near you



Support while you're away

Need help finding care or learning what's covered while you're away? Call our Away from Home Travel Line at **951-268-3900** (TTY 711)¹ or visit kp.org/travel.

If you're traveling internationally and need help locating urgent or emergency care, call **001-951-268-3900** (from a landline phone) or **951-268-3900** (from a mobile device).



¹This number can be dialed inside and outside the United States. Before the phone number, dial "001" for landlines and "+1" for mobile lines if you're outside the country. Long-distance charges may apply, and we can't accept collect calls. The phone line is closed on major holidays (New Year's Day, Easter, Memorial Day, July Fourth, Labor Day, Thanksgiving, and Christmas). It closes early the day before a holiday at 10 p.m. Pacific time (PT), and it reopens the day after a holiday at 4 a.m. PT.

Understanding your costs and benefits

You pay \$0 cost share for in-network preventive care

Preventive care includes routine physicals, well-child visits, and certain screenings and tests (such as mammograms), so there's no need to delay making your first appointment with your primary care physician.

If you have symptoms of a condition, your doctor may order a service to help find out what it is or help treat it. Since you've shown symptoms, this service doesn't qualify as preventive. It's actually diagnostic, since it's used to diagnose your condition, and cost sharing may apply.

You may also get services to help treat a condition that's already been diagnosed. Since you're being treated for an existing condition, these services are also non-preventive, and cost sharing may apply.

You'll have a copay for most other care, such as appointments with specialists, Urgent Care, and some tests and services. When you receive preventive care from an out-of-network provider, you will have to pay a cost share.

The table on page 22 shows you the different types of costs (such as copays or coinsurance) you may be required to pay under your plan. What you pay is determined by the type of plan you have. Refer to your plan document for more details about your plan's cost shares.



You can estimate the cost of your next visit at kp.org/costestimates. You'll need to be registered on kp.org to use this secure tool.

Your share of costs

“Cost share” refers to what you pay as part of your share for health care costs. Refer to your plan document to learn more about your plan’s specific cost shares.



Type of cost share	What it is	When you pay
Copayment (copay)	The set fee you pay for a covered service (for instance, a non-preventive office visit) every time that service is provided. Copayments vary depending on your plan and do not count toward a deductible. However, they do count toward your annual out-of-pocket maximum for most services.	Nearly all plans have copayments or coinsurance. A copayment or coinsurance may be owed on the day you receive services, for each visit, even if multiple visits occur on the same day.
Coinsurance	The percentage of the cost for a covered service. For example, if your coinsurance is 15% and your allowed office visit cost is \$100, then you pay \$15 and the health plan pays \$85. Coinsurance varies according to your plan and does not apply toward the deductible. However, it counts toward your annual out-of-pocket maximum for most services.	There is no copay or coinsurance for preventive care for non-grandfathered plans. What you owe depends on your plan’s benefits and the services you receive.
Out-of-pocket maximum	The maximum amount you pay out of pocket each contract year for most covered services. Once the amounts you have paid equal the out-of-pocket maximum, you pay nothing for those covered services for the remainder of the contract year.	Depending on your plan, the copayments, coinsurance, and deductibles you pay for most services will count toward the out-of-pocket maximum.
Deductible (Visit kp.org/deductibleplans for more information on deductible plans and to find helpful cost tools)	The set amount you must pay each contract year for covered medical services before the health plan begins to pay its share. Not all services may be applied to the deductible. Deductibles vary depending on the plan you have. Once you have met your deductible, you will be required to pay only the applicable copayment or coinsurance for most covered services for the remainder of your plan’s contract year. Certain conditions may apply.	If you have a deductible, you will be billed for the full allowed amount for each service that is subject to the deductible during check-in or after the service via mailed bill. You may also receive an estimate of your charges before your office visit for certain services, and you may choose to make a deposit payment based on that estimate.

Claims

You will not file claims for services if:

- You get medical care and services from network providers.
- You get an authorized referral from your network provider to see an out-of-network provider.
- Your amount paid was for a copayment.

If you file a claim:

- You have up to 180 days from the date you received care to submit your claim.
- Kaiser Permanente will review the claim and decide what payment or reimbursement you may be owed.
- Care must be medically necessary. Please refer to your plan document.

How to file the claim

To request payment or reimbursement, log on to kp.org, select [Coverage & Costs](#), and then select [Submit a claim](#).

Along with your member reimbursement form, the following information is required for all claims:

- Itemized bills (should include date of service, services received, and cost of each item)
- Medical records (copies of original medical reports, admission notes, emergency room records, and/or consultation reports)
- Proof of payment (receipts or bank or credit card statements)

You can also mail your member reimbursement form and required documents to:

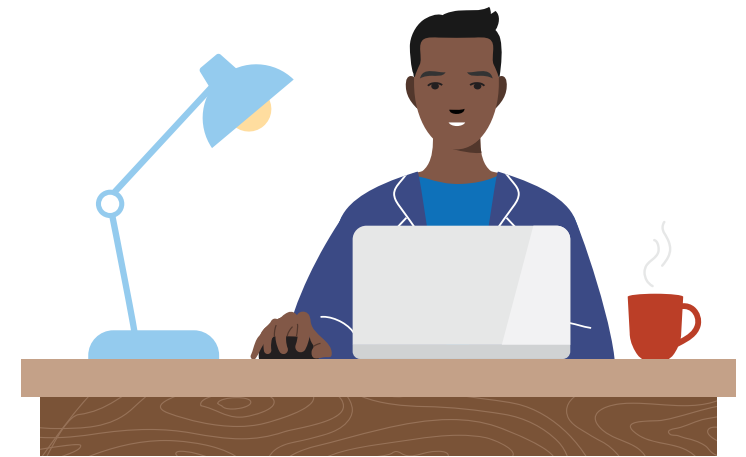
National Claims Administration -
Mid-Atlantic States
P.O. Box 371860
Denver, CO 80237-9998

What you'll receive from us

An Explanation of Benefits that will detail what you need to pay and what the health plan will pay.

Filing an appeal

It is your right to file an appeal if you disagree with a decision not to pay for a claim. Read your plan document for more information.



Requirements for timely medical appointments

Some customers of Kaiser Permanente have a right to an appointment with an in-network health care provider within a certain number of days. You have this right if:

1. You reside in the District of Columbia and purchase your coverage through DC Health Link or receive it through your employer in the District of Columbia, and
2. The appointment is for your first visit with a provider. A first visit includes when you:
 - a. Schedule your first primary care visit with a provider;
 - b. Have changed primary care providers and need to schedule your first visit with a new primary care provider; or
 - c. Schedule your first visit with a provider other than your primary care provider, your behavioral health/substance use provider, or your prenatal care provider for specialty treatment.

How quickly can you expect to be seen?

The District of Columbia has set the standards below for appointments with an in-network provider.

Service type	Time frame
First appointment with a new or replacement primary care physician	Within 7 business days
First appointment with a new or replacement provider for behavioral health treatment, including substance use treatment	Within 7 business days
First appointment with a new or replacement provider for prenatal care treatment	Within 15 business days
First appointment with a new or replacement provider for specialty care treatment	Within 15 business days

If you have trouble scheduling an appointment within the time frames listed, please call **800-777-7902 (TTY 711)** to speak with a Member Services representative, who will connect you with the staff who will help you schedule an appointment within the time frames listed.



NONDISCRIMINATION NOTICE

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. (Kaiser Health Plan) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Kaiser Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. We also:

- Provide no cost aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats, such as large print, audio, and accessible electronic formats
- Provide no cost language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, call **1-800-777-7902** (TTY: **711**)

If you believe that Kaiser Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by mail or phone at: Kaiser Permanente, Appeals and Correspondence Department, Attn: Kaiser Civil Rights Coordinator, 2101 East Jefferson St., Rockville, MD 20852, telephone number: 1-800-777-7902.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 1-800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

In the event of dispute, the provisions of the approved English version of the form will control.

HELP IN YOUR LANGUAGE

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call **1-800-777-7902** (TTY: **711**).

አማርኛ (Amharic) ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዙዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ **1-800-777-7902** (TTY: **711**)።

العربية (Arabic) ملحوظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم **1-800-777-7902** (TTY: **711**) .

Bàsòò Wùdù (Bassa) Dè dɛ nià kɛ dyédé gbo: ɔ jũ ké ñ Bàsòò-wùdù-po-nyò jũ ní, níí, à wùdù kà kò dò po-poò béín ñ gbo kpáa. Đá **1-800-777-7902** (TTY: **711**)

বাংলা (Bengali) লক্ষ্য করুন: যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নিঃখরচায় ভাষা সহায়তা পরিষেবা উপলব্ধ আছে। ফোন করুন **1-800-777-7902** (TTY: **711**)।

中文 (Chinese) 注意: 如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 **1-800-777-7902** (TTY: **711**) 。

فارسی (Farsi) توجه: اگر بہ زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با **1-800-777-7902** (TTY: 711) تماس بگیرید.

Français (French) ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-800-777-7902** (TTY: 711).

Deutsch (German) ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-800-777-7902** (TTY: 711).

ગુજરાતી (Gujarati) સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો **1-800-777-7902** (TTY: 711).

Kreyòl Ayisyen (Haitian Creole) ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele **1-800-777-7902** (TTY: 711).

हिन्दी (Hindi) ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। **1-800-777-7902** (TTY: 711) पर कॉल करें।

Igbo (Igbo) NRUBAMA: O buru na i na asu Igbo, oru enyemaka asusu, n'efu, diiri gi. Kpoo **1-800-777-7902** (TTY: 711).

Italiano (Italian) ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero **1-800-777-7902** (TTY: 711).

日本語 (Japanese) 注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。 **1-800-777-7902** (TTY: 711) まで、お電話にてご連絡ください。

한국어 (Korean) 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-800-777-7902** (TTY: 711) 번으로 전화해 주십시오.

Naabeehó (Navajo) Díí baa akó nínizin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'anída'áwo'déé', t'áá jiik'eh, éi ná hóló, kojí' hódíłnih **1-800-777-7902** (TTY: 711).

Português (Portuguese) ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para **1-800-777-7902** (TTY: 711).

Русский (Russian) ВНИМАНИЕ: если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-800-777-7902** (TTY: 711).

Español (Spanish) ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-777-7902** (TTY: 711).

Tagalog (Tagalog) PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-800-777-7902** (TTY: 711).

ไทย (Thai) เรียน: ถ้าคุณพูดภาษาไทย คุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร **1-800-777-7902** (TTY: 711).

اردو (Urdu) خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں **1-800-777-7902** (TTY: 711)۔

Tiếng Việt (Vietnamese) CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **1-800-777-7902** (TTY: 711).

Yorùbá (Yoruba) AKIYESI: Ti o ba nso ede Yoruba ofe ni iranlowo lori ede wa fun yin o. E pe ero ibanisoro yi **1-800-777-7902** (TTY: 711).

Your provider choices (continued from the inside front cover)

In-network

Costs

There is a deductible. Some services, such as preventive care and primary care physician visits, are offered before a deductible is met. Refer to your plan document for a list of services that are subject or not subject to the deductible.

Referrals

If you have a referral from a Permanente physician, preauthorization from the health plan may also be required for certain services. Your Permanente physician will act on your behalf to seek this preauthorization.

If you have a referral from a network physician, you will need to get preauthorization from the Kaiser Permanente Utilization Management Department by calling Member Services at **800-777-7902** (TTY **711**), Monday through Friday, 7:30 a.m. to 9 p.m. (except holidays).

If your preauthorization request is denied

You have the right to file an appeal if you disagree with the health plan's decision not to authorize medical, surgical, or behavioral health services, or drugs and devices. Appeal rights and detailed instructions are included with your plan document.

You can fax appeals to **866-640-9826**. Refer to your plan document for more information.

Out-of-network

Costs

- After you receive any out-of-network covered medical service, and once a medical claim for your service has been verified as an eligible benefit, you will receive an Explanation of Benefits (EOB). The EOB will show you a breakdown of the charges and payments for your visit, deductible and out-of-pocket maximum accumulations, and how much you are responsible for paying.

- You must first meet your annual deductible before the health plan begins to pay for covered services.
- After you meet your deductible, you will have to pay coinsurance or copays for covered services for the rest of the contract year, and out-of-network providers may also bill you for the difference, if any, between actual billed charges and the maximum allowable charge.
- Out-of-network physicians are not connected electronically to one another or to you, which means you manage your own care, carrying your paper medical record and other files with you from office to office. You must follow up to be sure that test results are communicated between doctors' offices. You must wait for lab results.
- Your pharmacist is not linked to your medical record.

Refer to your plan document for more information.

Want to talk? We're here to help.

If you have questions about how much your visits should cost, visit [kp.org/costestimates](https://www.kp.org/costestimates). Estimates are based on your plan benefits and whether you've reached your deductible—so you get personalized information every time.

For more information on your plan, visit [kp.org](https://www.kp.org) and review your coverage documents.

