OPEN SEASON IS NOVEMBER 14 THROUGH DECEMBER 12

Greater choice without compromise





New for 2023

- Premiums starting at \$43.81
- 24/7 virtual care nationwide for a \$0 copay¹
- Expanded care coast to coast
- 4 new medical centers
- Ginger, a 24/7 self-care app at no additional cost-no referral needed²



Great extras with your plan

- \$400 in Healthy Rewards for High Option and Standard Option
- \$750 in Healthy Rewards for Prosper
- Calm and myStrength self-care apps at no cost^{2,3}
- ClassPass on-demand fitness membership at no cost²



Need more information to make a decision?

Visit kp.org/feds to learn more about how Kaiser Permanente can help you live well. Or, simply call us at 877-489-8043, Monday through Friday, 10 a.m. to 8 p.m. Starting November 14, our hours for open enrollment will be Fridays from 9 a.m. to 10 p.m.

kp.org/feds



¹lf 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.

2These benefits are neither offered nor guaranteed under contract with the FEHB program, but are made available to enrollees and family members, aged 18 and older, who become members of Kaiser Permanente.

3myStrength® is a trademark of Livongo Health, Inc., a wholly owned subsidiary of Teladoc Health, Inc.

Your 2023 benefits at a glance

Benefits and Services		High Option	Standard Option	Prosper
Deductible		None	None	\$100
Outpatient services (per	visit or procedure)		'	'
Preventive care		\$0	\$0	\$0
Telehealth		\$0	\$0	\$0
Primary care office visit		\$10 (\$0 for children through age 4)	\$20 (\$0 for children through age 17)	\$30 (\$0 for children through age 4)
Specialty care office visit		\$20	\$30	\$40
Laboratory tests		\$0	\$0	\$0
X-rays		\$0	\$0	\$40
Specialty scan		\$75	\$100	\$100¹
Maternity				
Routine prenatal care and postpartum visit		\$0	\$0	\$0
Delivery		\$0	\$0	\$750 per admission ¹
Hospital services				
Outpatient surgery		\$75	\$150	\$300 ¹
Inpatient hospital care		\$100	\$500	\$750 ¹
Emergency and urgent	care			
Urgent care at a plan facility		\$20	\$30	\$40
Emergency care		\$100	\$150	\$150 ¹
Ambulance		\$0	\$100 per service	\$100 per service ¹
Prescription drugs				
Generic	Preferred	\$7	\$10	\$10
	Non-preferred	\$45	\$60	\$65
Brand	Preferred	\$30	\$40	\$45
	Non-preferred	\$45	\$60	\$65
Specialty		\$100	\$150	\$200
Eyewear/contact lens allowance		\$100/\$50	\$100/\$50	\$100/\$50
Preventive dental		Covered	Covered	Not covered
Out-of-pocket maximum		\$2,250	\$3,500	\$4,000

¹Deductible applies.

These rates do not apply to all enrollees. If you are in a special enrollment category, please refer to the FEHB Program website or contact the agency or Tribal Employer that maintains your health benefits enrollment.

Your premium share		High Option	Standard Option	Prosper
Self Only	Biweekly	\$105.31	\$73.30	\$43.81
	Monthly	\$228.17	\$158.82	\$94.93
Self Plus One	Biweekly	\$279.03	\$168.59	\$104.67
	Monthly	\$604.57	\$365.27	\$226.79
Self and Family	Biweekly	\$228.13	\$168.59	\$123.27
	Monthly	\$494.29	\$365.27	\$267.08

This is a summary of the features of the Kaiser Permanente Mid-Atlantic States FEHB plan. Before making a final decision, please read the Plan's Federal brochure *RI 73-047*. All benefits are subject to the definitions, limitations, and exclusions set forth in the Federal brochure.

Notes:

- Deductible and out-of-pocket maximum amounts are per person, but no more than 2 times per family.
- Telehealth options include video, phone, email, and more.
- Prescription drug copayments are for a 30-day supply at Kaiser Permanente Plan medical center pharmacies. You pay only 2 copays for up to a 90-day supply for most drugs through Kaiser Permanente's Mail Order Pharmacy.
- Eyewear (lenses and frames) or contact lenses limited to once every 12 months.