

Senior Advantage (HMO) for Federal Members

| 2023 Benefits and Services | High Option | | |
|---|------------------|--------------------|-----------------------|
| | Without Medicare | Senior Advantage 1 | Senior Advantage 2 |
| Deductible | None | None | None |
| Outpatient services | | | |
| Preventive care | \$0 | \$0 | \$0 |
| Telehealth | \$0 | \$0 | \$0 |
| Primary care office visit | \$15 | \$5 | \$10 |
| Specialty care office visit | \$25 | \$5 | \$10 |
| Most lab tests and X-rays | \$0 | \$0 | \$0 |
| Chiropractic – 20 visits per year | \$15 | \$15 | \$15 |
| Hospital services | | | |
| Outpatient surgery | \$50 | \$5 | \$50 |
| Inpatient hospital | \$250 | \$100 | \$250 |
| Emergency and urgent care | | | |
| Urgent care | \$15 | \$5 | \$10 |
| Emergency care | \$100 | \$75 | \$75 |
| Ambulance | \$50 | \$50 | \$50 |
| Prescription drugs² | | | |
| Generic | \$10 | \$10 | \$10 |
| Brand | \$40 | \$30 | \$40 |
| Specialty | \$100 | \$100 | \$100 |
| Additional Senior Advantage benefits | | | |
| Eyewear allowance (every 24 months) | Not covered | \$200 | Not covered |
| Dental | Not covered | Included | Not covered |
| Fitness membership | Not covered | Not covered | Silver&Fit® |
| Nonemergency transportation and meal delivery | Not covered | Included | Not covered |
| Hearing aid allowance for adults (per ear, every 36 months) | Not covered | Not covered | \$500 |
| Part B reimbursement | None | None | Up to \$250 per month |
| Out-of-Pocket Maximum | \$2,000 | \$2,000 | \$2,000 |

¹Deductible applies. ²Plan providers determine the drug that is medically necessary. If you request another drug, you pay prices charged to members for noncovered drugs. Some drugs may not be eligible for mail-order delivery. For certain drugs, you can get prescription refills mailed to you through our Kaiser Permanente mail-order pharmacy. You should receive them within 3-5 days. If not, please call **1-888-218-6245 (TTY 711)**.

Notes:

- Deductible and out-of-pocket maximum amounts are per person, but no more than 2 times per family.
- Coinsurance (%) is based on our allowance.
- Telehealth options include video, phone, email, and more.

Enrolling in Senior Advantage for Federal Members does not change your FEHB premium.

| Standard Option | | | Prosper | |
|--------------------|--------------------|-----------------------|------------------|-----------------------------|
| Without Medicare | Senior Advantage 1 | Senior Advantage 2 | Without Medicare | Senior Advantage |
| \$100 | None | None | \$500 | None |
| \$0 | \$0 | \$0 | \$0 | \$0 |
| \$0 | \$0 | \$0 | \$0 | \$0 |
| \$30 | \$15 | \$25 | \$25 | \$25 |
| \$40 | \$15 | \$25 | \$35 | \$25 |
| \$10 ¹ | \$10 | \$10 | 20% ¹ | \$0 |
| \$15 | \$15 | \$15 | \$15 | \$15 |
| \$200 ¹ | \$15 | \$25 | 20% ¹ | \$25 |
| \$500 ¹ | \$250 | \$500 | 20% ¹ | \$250 per day up to \$1,000 |
| \$30 | \$15 | \$25 | \$25 | \$25 |
| \$150 ¹ | \$75 | \$75 | 20% ¹ | \$75 |
| \$150 ¹ | \$125 | \$150 | 20% ¹ | \$150 |
| \$15 | \$10 | \$10 | \$15 | \$10 |
| \$50 | \$40 | \$47 | \$60 | \$47 |
| \$150 | \$150 | \$150 | \$200 | \$200 |
| Not covered | \$150 | Not covered | Not covered | \$150 |
| Not covered | Included | Not covered | Not covered | Not covered |
| Not covered | Not covered | Silver&Fit® | Not covered | Not covered |
| Not covered | Not covered | Not covered | Not covered | Not covered |
| Not covered | Not covered | Not covered | Not covered | Not covered |
| None | None | Up to \$250 per month | None | None |
| \$3,000 | \$2,000 | \$2,000 | \$5,500 | \$2,000 |

- Copayments are for a 30-day supply, or 100-day supply for High Option Senior Advantage 1, at Kaiser Permanente pharmacies. You pay only 2 copays for up to a 100-day supply for most drugs through Kaiser Permanente's mail-order program.
- Silver&Fit® is a federally registered trademark of American Specialty Health, Inc.

This is a summary of the features of the Kaiser Permanente health plan, including Kaiser Permanente Senior Advantage for Federal Members. Before making a final decision, please read the Federal Employees Health Benefits (FEHB) brochure RI 73-003. All benefits are subject to the definitions, limitations, and exclusions set forth in the FEHB brochure and the Kaiser Permanente Senior Advantage for Federal Members *Evidence of Coverage*.