

Your 2025 Kaiser Permanente FEHB Guide to Medicare

Get lower copays without increasing your FEHB monthly premium



Get the most out of your FEHB coverage

Kaiser Permanente Options Federal plan and Original Medicare

A combination to cover most of your out-of-pocket medical expenses. This guide will help you understand your options so you can choose the coverage that’s right for you. You’ll also find tools and tips to make your transition easier.

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If you have any questions about your primary coverage, call Member Services at **206-901-4636** or **1-888-901-4636** (TTY **1-800-833-6388** or **711**), Monday through Friday, 8 a.m. to 5 p.m.

The 4 parts of Medicare

PART A	PART B
Hospital insurance <ul style="list-style-type: none"> • Inpatient care • Skilled nursing facility care • Home health care <p>You pay no premium if you or your spouse paid Medicare taxes for at least 10 years while working.</p>	Medical insurance <ul style="list-style-type: none"> • Services from doctors and other health care providers • Outpatient care • Durable medical equipment <p>You pay a monthly premium.*</p>
PART C	PART D
Medicare Advantage <p>A Medicare-approved plan from a private company that offers an alternative to Original Medicare for your health and drug coverage.</p> <p>Bundles Part A, Part B, and usually Part D.</p>	Prescription drug coverage <p>Helps cover the cost of prescription drugs, including many recommended shots or vaccines.</p>

ADDITIONAL MEDICARE NOTES

- Original Medicare includes Medicare Part A (hospital insurance) and Medicare Part B (medical insurance) and is provided by the U.S. government as a federal health insurance program.
- With Original Medicare alone, you will pay deductibles and coinsurance for most services.
- Medicare Advantage plans (Part C) offer all the benefits of Original Medicare PLUS extra benefits like vision, hearing, and fitness programs. Some plans even pay for some or all of your Part B premium.

*Kaiser Permanente offers Part B premium reimbursement with some plans.



Helpful resources

We want you to understand your choices and options. If you have questions, here are some helpful resources:

Medicare

To learn more about Medicare coverage or enrollment periods or to ask a general question about Medicare, go to [medicare.gov](https://www.medicare.gov) or call **1-800-633-4227**, 24 hours a day, 7 days a week. TTY users, call **1-877-486-2048**.

Social Security

To get more information about your Medicare eligibility, sign up for Part A and/or B, or determine your Part B premium, visit [ssa.gov](https://www.ssa.gov) or call Social Security at **1-800-772-1213**, Monday through Friday, 8 a.m. to 7 p.m. TTY users, call **1-800-325-0778**.

Enrolling in Medicare

Here's what you need to know:



Initial Enrollment Period



You're eligible to sign up for Medicare Parts A, B, C, and D during this 7-month period:

- 3 months before you turn 65
- The month you turn 65
- 3 months after you turn 65



General Enrollment Period



If you don't sign up for Parts A and B when you're first eligible, you can sign up between January 1 and March 31 each year, for a July 1 start date of your Medicare coverage. However, you may have to pay a higher Part B premium for late enrollment.



Part B Special Enrollment Period (SEP)



Part B SEP applies when you're able to delay your enrollment in Medicare Part B because you have coverage from an employer. Medicare-eligible members can sign up for Part B:

- Anytime you're still covered by your employer's health plan
- During the 8-month period that begins the month after your employment or coverage ends, whichever happens first



To learn more about Medicare enrollment and eligibility

Call Social Security at **1-800-772-1213** (TTY **1-800-325-0778**), Monday through Friday, 8 a.m. to 7 p.m.

Get more with our Options Federal health plan

Care and coverage to help you thrive in your retirement

Kaiser Permanente Washington Options Federal offers a health plan that provides coverage to help you enjoy a healthy, happy retirement. Whether you choose Standard Option or the High Deductible Health Plan, when an FEHB plan is your secondary health care coverage to Medicare Parts A and B, you may have broader coverage and fewer unexpected health care expenses.

Why choose Kaiser Permanente?

High-quality care, choice of doctors, prescription drug coverage, predictable costs – with Kaiser Permanente, you get the care and coverage you need in one health plan to support your health goals and help you thrive.

For more information on the Options Federal health plan, visit kp.org/feds.

Why combine the Options Federal plan with Original Medicare?

When you combine Standard Option or the High Deductible Health Plan with Original Medicare, we will coordinate your benefits with Medicare to make sure you get the most from your combined coverage. And your coverage will go even further when you combine the Options Federal Standard Option with Original Medicare coverage.

With the in-network Options Federal clinicians, you get exclusive access to Kaiser Permanente clinicians, members of one of the highest-ranked medical groups in Washington.² You'll find the most current listing of Options Federal in-network clinicians by using the Find a Doctor tool at kp.org/wa/find-a-doctor.

Options Federal Standard Option

Experience lower deductibles, copays, and coinsurance when you combine Options Federal Standard Option with Medicare Parts A and B, receive care from a doctor who accepts Original Medicare, and have Medicare as the primary payer of your benefits.

		Standard Option Without Original Medicare	Standard Option With Original Medicare
2025 Benefits and Services		In-Network	In-Network
Deductible		\$350 per person Up to \$700 per family	\$0
Copays and coinsurance			
Primary care physician		\$25	\$0
Specialist		\$35	\$0
Inpatient hospital		20%*	\$0
Outpatient surgery		20%*	\$0
Prescription drugs**			
Generic	Preferred	\$20	\$20
	Nonpreferred	\$60	\$60
Brand	Preferred	\$40	\$40
	Nonpreferred	\$60	\$60
Specialty	Preferred	25% up to \$200	25% up to \$200
	Nonpreferred	35% up to \$300	35% up to \$300
Prescription drugs – mail-order (90-day supply when available)		2x retail copay	2x retail copay
Out-of-Pocket Maximum In-Network		\$5,000 per person Up to \$10,000 per family	\$5,000 per person Up to \$10,000 per family

*Deductible applies.

**Plan 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.

Notes:

- Deductible and out-of-pocket maximum amounts are per person, but no more than 2 times per family.
- Prescription drug cost-sharing for a 30-day supply at Kaiser Permanente pharmacies. You pay only 2 copays for up to a 90-day supply for most drugs through Kaiser Permanente's mail-order program.

This is a summary of the features of the Kaiser Foundation Health Plan of Washington Options, Inc., benefits. Before making a final decision, please read the Plan's Federal brochure (RI 73-051). All benefits are subject to the definitions, limitations, and exclusions set forth in the Federal brochure.

Ready to enroll with Kaiser Permanente?⁴

1. Sign up for an Options Federal plan.	2. Select the type of enrollment you want.	3. Sign up online or call.
Go to kp.org/feds/wa-options to see details about your options and enroll.	<ul style="list-style-type: none"> • Self Only covers you. • Self Plus One covers you and one eligible family member. • Self and Family covers you and all eligible family members. 	Find your enrollment code in the chart below. Then visit opm.gov to enroll online, or contact your employing agency or retirement office for next steps and other information.

Your Premium Share*		Standard Option	High Deductible Health Plan
Self Only	Biweekly	\$87.06	\$91.22
	Monthly	\$188.63	\$197.65
Self Plus One	Biweekly	\$193.27	\$202.51
	Monthly	\$418.76	\$438.77
Self and Family	Biweekly	\$193.27	\$202.51
	Monthly	\$418.76	\$438.77

Enrollment Code**	Standard Option	High Deductible Health Plan
Self Only	L11	L14
Self Plus One	L13	L16
Self and Family	L12	L15

Enrollees covering themselves and one other eligible family member may choose either the "Self Plus One" or "Self and Family" enrollment type, whichever has a lower premium. If you enroll in the Standard Option, you will pay a lower premium if you choose "Self and Family."

*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.

**To sign up or change options, find your enrollment code in the chart above. Then, visit opm.gov to enroll online or contact your employing agency or retirement office for next steps and other information. These are highlights of the FEHB enrollment process. Please refer directly to opm.gov and your employing agency or retirement office for FEHB coverage effective dates, enrollment procedures and deadlines, and other information.

Filing claims

You probably won't need to file a claim form when you have both Kaiser Permanente Options Federal and Original Medicare.

Most providers will submit the claims for you.

- When the Kaiser Permanente Options Federal plan is your primary coverage, we'll process the claim first.
- When Original Medicare is your primary coverage, Medicare will process your claim first. In most cases, you won't need to do anything. Your claim will be coordinated automatically, and your Kaiser Permanente Options Federal plan will then provide secondary benefits for covered services.

If you need to file a claim and Original Medicare is your primary coverage

Submit your claim to Medicare first. After processing the claim, Medicare will send you a Medicare Summary Notice (MSN). Send the MSN, plus copies of all related bills, to Kaiser Permanente for processing. We cannot process your claim without the MSN.

If you need to file a claim and the Kaiser Permanente Options Federal plan is your primary coverage

Submit your claim to us first. After processing your claim, we will send an Explanation of Benefits (EOB) to you. Send the EOB, plus copies of all related claims, to Medicare for processing.

If you have any questions about filing a claim or your primary coverage

Call Member Services at **206-901-4636** or **1-888-901-4636** (TTY **1-800-833-6388** or **711**), Monday through Friday, 8 a.m. to 5 p.m. Or visit **kp.org/feds/wa-options**.

If you go back to work and get coverage through your new employer

Kaiser Permanente is required to coordinate coverage with your other health plan. It is your responsibility to notify us of your other health care coverage. Call Member Services at **206-901-4636** or **1-888-901-4636** (TTY **1-800-833-6388** or **711**), Monday through Friday, 8 a.m. to 5 p.m., with any changes to your enrollment information.



Care when and where you need it

There are either Kaiser Permanente facilities or other network providers in your area offering a wide range of care and services.

Getting care when you travel

You can get routine care at any Kaiser Permanente location in another region. Call the travel line at **951-268-3900** (TTY **711**) or visit **kp.org/travel** to get a special visiting member identification number.

Urgent care within the Kaiser Permanente Washington service area:

- Nearest Kaiser Permanente urgent care or other urgent care location in our network

In another Kaiser Permanente region:

- Nearest Kaiser Permanente urgent care in California, Colorado, Georgia, Hawaii, Maryland, Oregon, Virginia, or Washington, D.C.*
- Nearest CVS MinuteClinic®**

In a state without Kaiser Permanente:

- Nearest CVS MinuteClinic®**
- Nearest urgent care*

Outside of the United States:

- Nearest urgent care*
- Nearest hospital

Emergency care away from home:

- Call 911 in the United States. If abroad, call the local emergency number of the country you're visiting or visit the closest emergency room.
- If admitted to a hospital, call our Hospital Notification Line at **1-888-457-9516** as soon as reasonably possible.

Resources while traveling

Call our 24/7 advice line at **1-800-297-6877** for care advice and guidance on next steps. Before seeking care outside your plan's service area, call Member Services at **1-888-901-4636** (TTY **711**). They'll help you find the nearest in-network care option.



Note: If you reasonably believe you have an emergency medical condition, which is a medical or psychiatric condition that requires immediate medical attention to prevent serious jeopardy to your health, call 911 or go to the nearest emergency department. For the complete definition of an emergency medical condition, please refer to your *Evidence of Coverage*.

*Urgent care services are covered subject to out-of-area cost share. **If you get care at a CVS MinuteClinic or any other urgent care facility within a state where Kaiser Permanente operates, you'll be asked to pay up front for services you receive and file a claim for reimbursement. If you get care at a CVS MinuteClinic outside a state where Kaiser Permanente operates, you'll be charged your standard copay or coinsurance.

Kaiser Foundation Health Plan of Washington

2715 Naches Ave. SW
Renton, WA 98057

(Mailing address)

P.O. Box 9813
Renton, WA 98057-9055

Have any questions?

Member Services: **206-901-4636** or **1-888-901-4636**

TTY WA Relay: **1-800-833-6388** or **711**

Monday through Friday, 8 a.m. to 5 p.m.

kp.org/feds/wa-options

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1. If you are not on a Kaiser Permanente FEHB plan, go to kp.org/feds to learn more. **2.** Washington Health Alliance 2024 Community Checkup report, **www.wacommunitycheckup.org**. Ranking applies to Kaiser Permanente Washington's medical group, Washington Permanente Medical Group, P.C.

Kaiser Permanente is an HMO plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal.