## Senior Advantage for Federal Members (HMO)

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

| Northern California  | High Option      |                    |                      |
|--|------------------|--------------------|----------------------|
| 2025 Benefits and Services   | 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 drugs**,†   |                  |                    |                      |
| Generic  | \$10             | \$10               | \$10                 |
| Brand  | \$40             | \$30               | \$40                 |
| Specialty  | \$100            | \$100              | \$100                |
| Additional Senior Advantage benefits                                 |                  |                    |                      |
| Dental   | Not covered      | Included           | Not covered          |
| Eyewear allowance (every 24 months)                                  | Not covered      | \$200              | Not covered          |
| Fitness membership   | Not covered      | One Pass           | One Pass             |
| Hearing aid allowance for adults (per ear, every 36 months)          | Not covered      | Not covered        | \$500                |
| Nonemergency transportation and meal-delivery                        | Not covered      | Included           | Not covered          |
| Over-the-counter health and wellness items allowance (every quarter) | Not covered      | \$70               | \$70                 |
| Part B reimbursement   | None             | None               | Up to \$250 per mont |
| Out-of-Pocket Maximum  | \$2,000          | \$2,000            | \$2,000              |

<sup>\*</sup>Deductible applies. \*\*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. †Plan providers determine the drug that is medically necessary. If you request another drug, you pay prices charged to members for non-covered drugs. Some drugs may not be eligible for mail-order delivery or mail-order discounts.

## 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.

| 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*            | \$10               | \$10                  | 20%*             | \$0                         |
| \$15             | \$15               | \$15                  | \$15             | \$15                        |
|                  |                    |                       |                  |                             |
| \$200*           | \$15               | \$25                  | 20%*             | \$25                        |
| \$500*           | \$250              | \$500                 | 20%*             | \$250 per day up to \$1,000 |
|                  |                    |                       |                  |                             |
| \$30             | \$15               | \$25                  | \$25             | \$25                        |
| \$150*           | \$75               | \$75                  | 20%*             | \$75                        |
| \$150*           | \$125              | \$150                 | 20%*             | \$150                       |
|                  |                    |                       |                  |                             |
| \$15             | \$10               | \$10                  | \$15             | \$10                        |
| \$50             | \$40               | \$47                  | \$60             | \$47                        |
| \$150            | \$150              | \$150                 | \$200            | \$200                       |
|                  |                    |                       |                  |                             |
| Not covered      | Included           | Not covered           | Not covered      | Not covered                 |
| Not covered      | \$150              | Not covered           | Not covered      | \$150                       |
| Not covered      | One Pass           | One Pass              | Not covered      | One Pass                    |
| Not covered      | Not covered        | \$500                 | 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                     |

- Telehealth options include video, phone, email, and more.
- Beginning 2025, CMS guidelines have decreased the Part D prescription drug OOP maximum to \$2,000.
- Beginning 2025, One Pass® is replacing the previous Silver&Fit® fitness program.

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*.