

## KP/1500/0/30/S5

DEDUCTIBLE (Individual/Family) OUT-OF-POCKET MAXIMUM (Individual/Family) Applies to all services	\$1,500/\$3,000 \$7,250/\$14,500
OUT-OF-POCKET MAXIMUM (Individual/Family) Applies to all services	
MAXIMUM BENEFIT WHILE COVERED 1	Unlimited
COINSURANCE (after deductible)	0%
OFFICE SERVICES	
Primary Care	\$30
Specialty Care	\$50
Mental Health/Chemical Dependency	\$30
Chiropractic Care (spinal manipulation only; 20 visits per calendar year)	\$50
Vision Exam	\$30
Laboratory Services	\$0
Radiology Services	\$20
High Tech Radiology Services (MRI, CT, PET, others)	\$350
Preventive Services	\$0
EMERGENCY SERVICES	
Emergency Room (per visit; copay waived if admitted)	\$500
Ambulance (per trip)	\$350
Urgent Care (per visit)	\$60
OUTPATIENT SERVICES	
Laboratory Services	\$0
Radiology Services	\$20
High Tech Radiology Services (MRI, CT, PET, others)	\$350
Outpatient Hospital or Surgical Facility	\$500
Physician and Other Professional	\$0
INPATIENT SERVICES	
Hospital (facility)	0%
Physician and Other Professional	\$0
Mental Health/Chemical Dependency	0%
PHARMACY SERVICES <sup>2</sup>	
Tier 1 Generic Drugs	\$5 KP/\$15 Affiliated
Tier 2 Generic Drugs	\$10 KP/\$20 Affiliated
Prescription Drug Deductible	N/A
Tier 3 Preferred Brand Drugs	\$40KP/\$50 Affiliated
Tier 4 Non-Preferred Drugs	\$60KP/\$70 Affiliated
Tier 5 Specialty Drugs	25% KP/25% Affiliated
Mail Order <sup>3</sup>	\$10/\$20/\$80/\$120/25%

KP and HDHP plans are also available on the SHOP (with the exception of Platinum KP/0/0/20/S5).

- 1 Some benefits may have limitations.
- 2 Refills must be obtained at a Kaiser Permanente Pharmacy or through Mail Order.
- 3 Available 90 day supply at Kaiser Permanente Pharmacy.

Coverage is provided by Kaiser Foundation Health Plan of Georgia, Inc.

This is a summary description and is not intended to replace the *Group Agreement, Group Policy,* and/or *Evidence of Coverage,* which contain the complete provisions of this coverage. Some benefits may have specific limitations and/or exclusions.



Kaiser Foundation Health Plan of Georgia, Inc.

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