

## ■ Kaiser Permanente – HMO

Dependent age is 19, and age 23 for full-time students.

COVERED SERVICES	COPAYMENT
<b>Outpatient Care</b> <b>Office Visits including:</b> Physician exams, well-child care, vision and hearing tests Minor surgery Specialist's treatment	\$10 per visit \$10 per visit \$10 per visit No Charge
<b>Prenatal</b>	No Charge
<b>Urgent Care Services</b> At Kaiser Permanente Facilities or outside the Service Area Inside service area	\$10 per visit, waived if admitted Not covered if received at non plan facility
<b>Short-term Physical, Speech, and Occupational Therapy</b> Up to 2 months or 30 visits per therapy, whichever is greater, per medical episode	\$10 per visit
<b>Diagnostic Services</b> Laboratory and diagnostic testing, X-rays	No Charge
<b>Hospital Inpatient Care</b> <b>No limit on covered days, including:</b> Physician and surgeon services Room and Board Anesthesia Operating and recovery rooms Laboratory and diagnostic testing, x-rays	No charge
<b>ALTERNATE CARE</b> Home Health Services Hospice Home Care/Respite Care Extended Care in a Skilled Nursing Facility, Up to 100 days per calendar year	No charge No charge No Charge
<b>Emergency Department Visits</b> <b>If provided at Plan Facility,</b> Available 24 hours a day at Kaiser Permanente emergency facilities at the Cleveland Clinic and Parma Medical Center Emergency medical advice is available 24 hours a day Charges waived if admitted <b>If Provided at other Facility</b> Charges waived if admitted	\$30 per visit  \$30 per visit
<b>Ambulance Service</b> Only when transportation in any other vehicle would endanger your health	No charge
<b>Mental Health Care</b> <b>Outpatient – 20 visits per calendar year</b> Individual therapy Group Therapy (each visit counts as one-half visit against maximum) <b>Inpatient</b> 30 days (per calendar year)	\$10 per visit \$5 per visit  No charge
<b>Chemical Health Services</b> <b>Inpatient</b> Detoxification in general hospital Detoxification in a specialized facility – 1 admit per year <b>Outpatient</b> Detoxification Individual Therapy Group Therapy	No charge No charge  \$10 per visit \$10 per visit \$5 per day
<b>Infertility Services</b> Infertility Diagnosis All covered services after diagnosis for further evaluation and treatment	30% of Total Charges 30% of Total Charges
<b>Durable Medical Equipment</b> Durable medical equipment and supplies	20% MAC

### How the Kaiser Permanente Plan Works

Choose a primary care physician from the Ohio Permanente Medical Group, The MetroHealth System or from a list of affiliated community-based physicians.

- Physicians, x-ray and lab are all under one roof at most locations.
- Health care advice is available 24 hours a day by telephone.
- Emergency care is available round-the-clock.
- Access to same day appointments
- Few, if any claim forms need to be filed

For specific questions about coverage call 216-479-5770 or toll-free at 800-400-1907. The TTY line is 216-635-4444 for the hearing impaired. Or visit Kaiser's Web site at [www.kaiserpermanente.org](http://www.kaiserpermanente.org).

#### Coordination of Benefits:

If you or your family members are covered by more than one health care plan, you may not be able to collect benefits from both plans. Each plan may require you to follow its rules or use specific doctors and hospitals, and it may be impossible to comply with both plans at the same time. Before enrolling, read all the rules and compare them with any other plan in which you or your family are enrolled.

This benefits summary contains highlights only. Specific benefits, including exclusions and limitations are contained in the Group Agreement and the Evidence of Coverage you will receive when you become a member.