

Kaiser Permanente covers routine primary care for out-of-state dependent children. That means out-of-state dependent children are covered for non-urgent medical needs, in addition to emergency and urgent care.

For Group Members

We've got out-of-state dependent children covered.

Out-of-Area Dependent Child Coverage

BENEFIT HIGHLIGHTS:

BENEFIT*	MEMBER PAYS
Office visits	\$20 copay per visit
Basic lab & imaging	\$10 copay per service
Testing	20% of applicable charges
Prescription drugs	20% of applicable charges

* Office visits are limited to 10 primary care visits per year. Lab, imaging, and testing are limited to 10 combined services per year. Prescription drugs are limited to 10 prescriptions per year. *See your Benefit Summary.*

QUESTIONS? WE CAN HELP

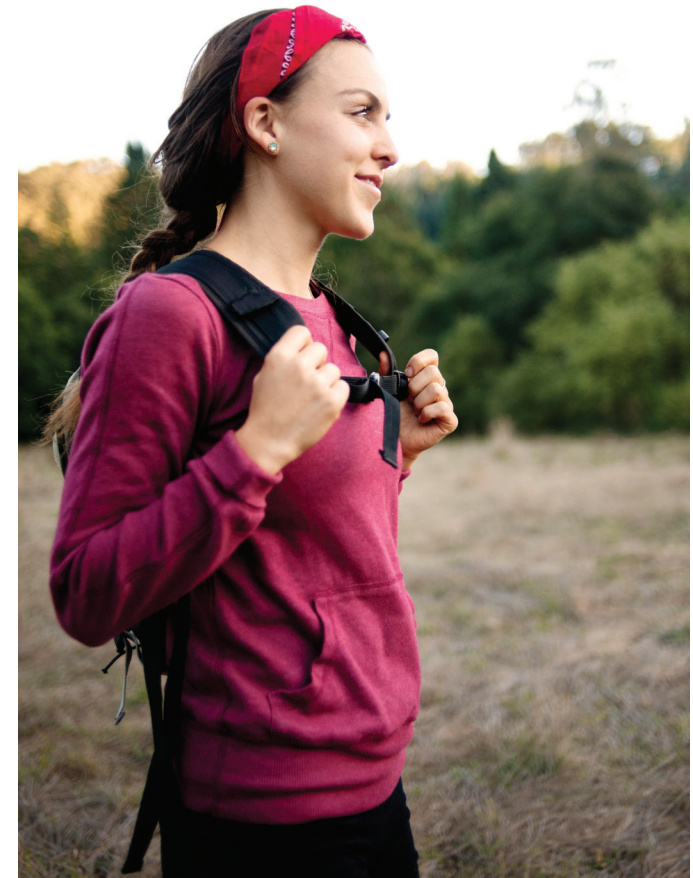
If you or your dependent child have questions about the out-of-area dependent child benefit, call Member Services at **1-800-966-5955** (Oahu, neighbor islands, or U.S. mainland), Monday through Friday, 8 a.m. to 5 p.m., and Saturday, 8 a.m. to noon.

For questions about where to find care while away from home, you or your child can call our Away from Home Travel Line at **951-268 3900**** (TTY 711), 24 hours a day, 7 days a week, or go to **kp.org/travel**.

This is a summary of the Kaiser Permanente Hawaii out-of-area dependent child benefit features. Please refer to your *Benefit Summary* for complete information about coverage, limitations, and exclusions, including those not listed in this summary. The out-of-area dependent child benefit is not available to Medicare, Medicaid (QUEST Integration), and Added Choice plan members.

** The Away from Home Travel Line can be dialed from inside and outside the United States. Outside, you must dial the U.S. country code "001" for landlines and "+1" for mobile before the phone number. Long-distance charges may apply and we cannot accept collect calls. The phone line is closed on major holidays.

kp.org



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For Group Members

Coverage for dependent children while they're away

Out-of-Area Dependent Child Coverage



CLAIMS

If your dependent child receives out-of-area care, he or she may be required to pay the full amount for services when receiving care or picking up medication. Your child or the provider can submit the bill to us for reimbursement at:

Kaiser Permanente
Hawaii Claims Administration
P.O. Box 378021
Denver, CO 80237

WHO IS ELIGIBLE?

To be eligible for this benefit, the following requirements must be met:

- The health plan subscriber must live in the Kaiser Permanente Hawaii service area.
- The dependent child must meet group eligibility requirements.
- The dependent child must receive services within the United States.
- The services received must not be within another Kaiser Permanente service area.

CARE WITHIN ANOTHER KAISER PERMANENTE SERVICE AREA:

If your dependent child receives care within another Kaiser Permanente service area, our Visiting Member policy applies. Visit [kp.org/formsandpubs](https://www.kp.org/formsandpubs) and see our Visiting Member brochure for details.

PRESCRIPTION DRUG COVERAGE:

Eligible out-of-area dependent children can get medically necessary prescription drugs at non-Kaiser Permanente pharmacies when they're outside Kaiser Permanente service areas. Some exclusions and limitations may apply. For details, please see your *Benefit Summary*.

