

EOC Amendment

The changes in this *EOC Amendment* are incorporated into 2026 non-Medicare *Evidence of Coverage* (“EOC”) documents:

- Changes to Cost Share for Certain Services (Mental Health Parity and Addiction Equity Act) (“MHPAEA”), effective January 1, 2026
- Additional Changes to KP Plus Plans (MHPAEA), effective January 1, 2026

EOCs will be updated to reflect any changes to coverage or Cost Share upon renewal on or after January 1, 2027.

Changes to Cost Share for Certain Services (Mental Health Parity and Addiction Equity Act) (MHPAEA)

Cost Share for certain Services is changing as described below to comply with requirements in MHPAEA. If you have paid more than the Cost Share described below, a credit will be issued.

Please read the description of each change below to determine whether the *EOC* for your coverage is impacted.

Mental health and substance use disorder treatment visits and Urgent Care

When Cost Share for visits with a Plan Provider for mental health and substance use disorder treatment is a Copayment, Cost Share for individual and group visits, including visits for electroconvulsive therapy and transcranial magnetic stimulation, has been reduced to “No charge.”

Urgent Care related to a mental health or substance use disorder is covered at the same Cost Share as non-urgent care for the same condition.

Mental health and substance use disorder programs

Cost Share for the following mental health and substance use disorder programs from Plan Providers is changing in some plans:

- Partial hospitalization
- Other intensive psychiatric treatment programs for mental health conditions
- Behavioral Health Treatment for Autism Spectrum Disorder
- Intensive outpatient and day-treatment programs for substance use disorders
- Methadone maintenance treatment

Cost Share for these programs is changing as follows:

- If the Cost Share for any of these programs is a Coinsurance with per-day maximum, Cost Share for all of these programs is reduced to “No charge.”
- If the Cost Share for any of these programs is a Copayment greater than \$0, but at least one of these programs has a Cost Share of “No charge,” Cost Share for all of these programs is reduced to “No charge.”

Non-emergency psychiatric van transport

Non-emergency psychiatric transport van Services are covered at “No charge,” not subject to the Plan Deductible in all plans, except subject to the Plan Deductible in HSA-Qualified HDHP Plans.

Additional Changes to KP Plus Plans (MHPAEA)

In *EOCs* for KP Plus plans, Cost Share for certain Services from Non-Plan Providers is changing as described below to comply with requirements in MHPAEA. The process for submitting a claim for these Services is the same as any other Services that are part of the KP Plus benefit as described in the “Post-Service Claims and Appeals” section of the *EOC*.

Mental health and substance use disorder treatment visits

When the Cost Share for individual visits with a Plan Provider for mental health and substance use disorder treatment has been reduced to “No charge” as described above under “Changes to Cost Share for Certain Services,” the Cost Share for mental health and substance use disorder treatment visits with a Non-Plan Provider is as follows:

- a \$20 Copayment for individual mental health and substance use disorder treatment visits
- a \$10 Copayment for group mental health treatment visits
- a \$5 Copayment for group substance use disorder treatment visits

Mental health and substance use disorder programs

Coverage for the following Services has been added to your KP Plus out-of-network benefit (these services count toward the annual limit of a combined total of 10 covered outpatient Services from Non-Plan Providers):

- Partial hospitalization
- Other intensive psychiatric treatment programs for mental health conditions
- Behavioral Health Treatment for Autism Spectrum Disorder
- Intensive outpatient and day-treatment programs for substance use disorders
- Methadone maintenance treatment
- Physical, occupational, and speech therapy provided in an organized, multidisciplinary rehabilitation day-treatment program

The Copayment for these Services is \$20 more than when received from a Plan Provider.