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Member Services

- 1-888-901-4636
- 206-630-4636
- **711** (TTY)
- Monday through Friday, 8 a.m. to 5 p.m., except major holidays
- Also available via online chat when you sign in at **kp.org**

New Member Welcome Team

Get help transferring your care or prescriptions to Kaiser Permanente, Monday through Friday, 8 a.m. to 5 p.m., except major holidays.

- 1-888-844-4607
- 206-630-0029

24/7 advice line

Get health care advice from a licensed clinician 24 hours a day, 7 days a week.

- 1-800-297-6877
- 206-630-2244

Mental Health Access Center

Schedule first-time and follow-up appointments for mental health and for addiction and recovery services, Monday through Friday, 8 a.m. to 5 p.m.

- 1-888-287-2680
- 206-901-6300

Hospital Notification Line

Call 24/7 if you've been hospitalized for an emergency.

- 1-888-457-9516
- 206-901-4609

Website and mobile app support

Get help with our online services, Monday through Friday, 8 a.m. to 5 p.m.

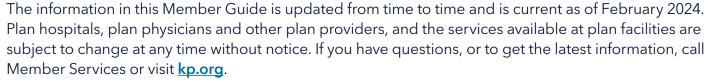
• 1-888-874-1620

Patient Financial Services

Get answers to questions about a bill or request a payment arrangement.

• 1-800-442-4014







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Hello!

Thank you for choosing Kaiser Permanente.

This guide will provide you with useful information about your plan, your care, and all the services that are available to you. It will also connect you to much more information on our website.

There's a lot to know, but you don't have to know it all now. This guide is yours to reference whenever you need it.

Introduction to care: Get started

Visit kp.org/wa/getstarted.

Register for your secure online account at kp.org/wa/register if you don't already have one.

With our website and mobile app you can:

- Find a doctor
- Order prescriptions
- Take a health assessment
- Access online care options
- See billing statements
- Pay bills
- Check your deductible status

When you get care from Kaiser Permanente doctors and care teams and sign in to your account, you can also:

- Email your health care team with nonurgent questions
- See preventive care reminders
- Make appointments
- Review scheduled appointments
- View lab and test results
- Review after-visit summaries
- See medical records



Get care on the go with our mobile app*

The Kaiser Permanente Washington mobile app gives you easy access to many features available in your secure online account for care anytime, anywhere. Go to **kp.org/wa/mobile** to download the app.

*To use the Kaiser Permanente Washington app, you must be a Kaiser Permanente Washington member registered on kp.org. If you travel out of state, some virtual care services may not be available due to licensing laws. Laws differ by state.

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Introduction to care: Get help

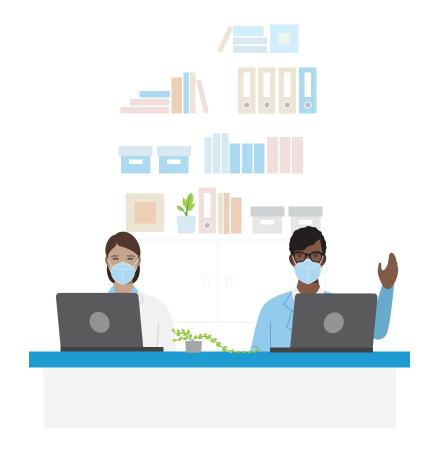
New Member Welcome Team

Are you new to Kaiser Permanente and in the middle of treatment elsewhere? Call the New Member Welcome Team. Our team can help you transition your care and prescriptions, find a doctor, answer plan questions, and more. Call 206-630-0029 or 1-888-844-4607 (TTY 711), Monday through Friday, 8 a.m. to 5 p.m., except major holidays.

Member Services

Contact Member Services at 1-888-901-4636 (TTY 711), Monday through Friday, 8 a.m. to 5 p.m., except major holidays. You can get help and information about most things, including:

- Choosing or switching doctors, where to go for care, referrals for specialists, and on-the-job injuries
- What your health plan does and doesn't cover, billing questions, and coverage while traveling
- Billing statements, payments, and reimbursements
- Language services if your primary language is not English





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Introduction to care: Get care

Select a doctor in your network

Know your network

You have access to a specific network of doctors and care providers, as well as hospitals, pharmacies, and other care facilities.

- Your network is the Connect network. It's listed on your ID card, which you'll receive in the mail. (Your digital ID card has the same information. Find it at kp.org and in the Kaiser Permanente Washington mobile app once you've registered for a secure member account and signed in.)
- If you need help understanding your network, call Member Services.

Consider your options

A designated personal physician means you have someone to coordinate your overall health care and make sure you're connected with the resources you need.

- Depending on your health plan and where you live, you can choose a Kaiser Permanente doctor or another provider in your network.
- Choose a personal doctor who practices family medicine or adult/internal medicine or who specializes in pediatric or adolescent medicine for children up to 18.
- It's a good idea to select a doctor right away so you have one if you get sick or injured. You can change your doctor anytime, for any reason.



Here are some things to consider as you search for a personal physician:

- Gender
- Facility location
- Medical interests
- Languages spoken
- Years of experience
- Cultural or personal background

Browse doctor profiles and make a selection

Search kp.org/wa/find-a-doctor for doctors as well as pharmacies, medical facilities, hospitals, and more.

- Be sure to select your network as you begin your search.
- Make sure the doctor you're considering is accepting new patients.
- Contact Member Services if you need help.

Learn how your plan works and review your coverage

It's a good idea to get familiar with your plan's coverage. With a Virtual Plus plan, you'll start most care with a virtual visit.

- Learn about Virtual Plus at kp.org/wa/vpnewmember.
- Read the details at kp.org/wa/vp.
- Review your plan and coverage documents when you sign in at kp.org.



Review your care options

Learn about the many care options available to our members at kp.org/getcare.

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Specialty care

If you have a new health concern, the best place to start is with your personal physician. Your doctor can help determine if you should schedule an in-person primary care visit for evaluation or treatment or if you need to see a specialist. To learn more about providers near you, call Member Services or go to kp.org/wa/find-a-doctor.

Referrals

You'll need a referral for most specialty care. The referral can come from a provider during a virtual or in-person visit. You'll also need authorization from Kaiser Permanente for your visit to be covered. After talking with you, your personal doctor may call for a specialty referral that allows you to see the same specialist more than once without needing to get a new authorization each time.

To check on your referral status, you can call Member Services or sign in at kp.org to make sure your specialty visit is authorized.

Some specialty services do not require a referral or authorization for in-person care, but they may have limits on the number of covered visits. Additionally, if you self-refer, you might also end up paying higher costs than if you start with virtual care. Contact Member Services for more information.





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Information about specific specialty care services

Alternative care

No referral is needed to make an appointment with a licensed chiropractor, acupuncturist, or naturopath in your network. If you need to see a massage therapist for medical reasons, your personal doctor will need to write a prescription and care plan for you. Some plans have a visit limit for alternative care therapies. If you need more visits, they must be authorized by Kaiser Permanente, usually by request of the recommending physician.

• Search for providers in your network at kp.org/wa/find-a-doctor.

Dental care

Some plans offer coverage for adult or pediatric dental care through Delta Dental of Washington. For more information, call Member Services at 1-888-901-4636.

Inpatient care or surgery

Planned procedures are covered at a network facility when ordered by a Kaiser Permanente or other network physician. Your physician will request any needed preauthorization from the health plan.

Mental health care

Call the Mental Health Access Center at 1-888-287-2680 for mental health services. They'll coordinate and authorize all mental health, addiction, and recovery care.

- No referral is necessary.
- Coverage varies; check your Evidence of Coverage for details.
- Visit **kp.org/mentalhealth** for more information.

Vision care

Your plan covers routine eye exams, and many of our medical facilities have an optical center where you can fill your prescription for contact lenses or eyeglasses.

- No referral is necessary.
- Check your Evidence of Coverage for details about your vision coverage and your benefit for contacts or eyewear and lenses.
- Visit **kp.org/wa/eyecare** for Kaiser Permanente locations, hours, discounts, and frame selections. Find other network optometrists in your area at kp.org/wa/find-a-doctor.

Women's health care

Women can refer themselves to women's health care providers for routine reproductive health care, gynecological care, maternity care, and general preventive care such as Pap tests and breast exams. Women's health care providers include specialty doctors, such as gynecologists and obstetricians, and physician assistants or nurse practitioners specializing in women's health and midwifery.

• Search for providers in your network at kp.org/wa/find-a-doctor.





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Urgent and emergency care

You're covered for emergency care and medically necessary urgent care anywhere in the world. You do not need preauthorization.



Urgent care

Urgent care is for illness or injuries that require prompt medical attention but are not emergencies, such as wounds needing stitches, minor breathing issues, or stomach pain. Here are your options:

• During office hours, call your personal doctor's office to see if you can get a sameday appointment.



If your doctor isn't available, or you're unsure if urgent care is your best option, call the 24/7 advice line at 1-800-297-6877 or 206-630-2244 (TTY 711).

Emergency care

Seek emergency care for a medical or psychiatric condition that requires immediate medical attention to prevent serious risk to your health. Examples include:

- Chest pain or pressure that may move out to the arm, neck, back, shoulder, jaw, or wrist
- Severe stomach pain that comes on suddenly
- A sudden decrease in or loss of consciousness
- Severe shortness of breath

Hospital admission

If you need emergency care and are admitted to a hospital not in your network, you or a family member must let us know as soon as is reasonably possible. Call the Hospital Notification Line at 1-888-457-9516 (also listed on the back of your member ID card) to help make sure your claim is accepted.

Coverage details

- Your plan provides coverage for emergency services, including ambulance transportation used for a medical or psychiatric emergency. If your plan has a copayment, coinsurance, or deductible for these services, you'll receive a bill.
- You can review coverage for emergency services in your plan's Evidence of Coverage or Summary of Benefits and Coverage.

If you think you are experiencing an emergency, go immediately to the nearest emergency care facility or call 911.



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Prescription drugs

Whether you rely on prescription medication as part of your ongoing care or need a one-time drug for a sudden condition, you can depend on our pharmacy services, including convenient home delivery and help managing multiple medications.



^{*}Maintenance drugs are used on a continuing basis for the reatment of ongoing conditions, such as diabetes. The maintenance drug list is available at wa.kaiserpermanente. org/static/pdf/public/pharmacy/maintenance-drugs.pdf.

Things you need to know

Formulary

Your plan has a list – called a formulary – of approved drugs to help make sure that the safest, most appropriate, and most effective prescription medications are available to you. The formulary divides groups of medications into tiers that determine your portion of the drug cost. You may need to review your Summary of Benefits to know how many tiers your plan's formulary has.

Maintenance medication refills

The first time you fill a prescription for a maintenance drug,* you can use any pharmacy in your network. After that, it's simple to use mail order so you can receive refills quickly and safely at home, with no delivery charge. Some plans require the use of mail order for maintenance drug refills, and some also allow you to use Kaiser Permanente retail pharmacies; review your plan documents or contact Member Services for specifics about your plan.

Requirements for some drugs

A formulary usually includes some restrictions. Here's what you should know:

Step therapy (ST): If 2 drugs have been shown to be equally effective at treating a condition, we ask that you try the less costly drug first before we'll cover the other medication.

Quantity limit (QL): Based on a drug's safety, toxicity, and potential misuse, we may limit the amount of the drug you can have each time you fill the prescription.

Prior authorization (PA): This process is to confirm medical criteria have been met that will help ensure your safety. If you're on a drug that requires prior authorization and you got it while on another company's health plan, you will still need to complete the process with Kaiser Permanente.

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Support, resources, and tools

Good health goes beyond the doctor's office. That's why we offer these convenient resources to our members.

Care at home

If you're unable to leave your home due to health issues, skilled professionals can visit you at home to help you work toward returning to independence. These services are available with your doctor's referral.

- In Seattle, call 1-800-332-5735.
- In Eastern/Central Washington and North Idaho, call 1-888-781-3573.



Chronic conditions

Registered nurses certified in case management offer phone-based support managing chronic asthma, diabetes, high blood pressure, cholesterol, or heart disease. Call 1-866-656-4183.

Community resources

To find community resources for financial, caregiving, food, transportation, and other needs, speak with a resource specialist at 1-800-260-7445.

Complex case management

A specially trained nurse – in partnership with your personal care doctor – can help members who need or want help managing multiple chronic conditions, medications, and providers. Call 1-866-656-4183.

Fitness deals

Stay active and fit with a variety of reduced rates on studios, gyms, fitness gear, inperson classes, and on-demand video workouts. Visit kp.org/wa/fitness.

Printed health information

To request printed health education materials or forms, leave a message at 1-800-992-2279.





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Mindfulness and meditation apps:1

Offered at no cost to members. Go to kp.org/selfcareapps.

- Calm is designed to lower stress, reduce anxiety, and much more.
- Headspace Care offers text-based emotional support coaching to help manage anxiety, reduce stress, and more.^{1,2}

Smoking cessation

Quit for good with one of the country's most successful tobacco cessation programs at no additional cost. Phone-based or online. Visit quitnow.net/kpwa.

Sponsored events

Find ways to connect with your community and improve overall wellness at kp.org/wa/community-events.

Support groups and classes³

Go to kp.org/classes for details about your options.

Gender affirming care

Members moving through the process of gender-affirming surgery can self-refer for clinical guidance and support from licensed social workers. Coverage depends on your plan. Contact 1-888-245-9004 or genderhealth@kp.org for details.

Wellness blog

wellness, fitness, and nutrition at thrive.kp.org/thrive-together.

Visit our trusted source of information about

Wellness coaching

Get phone support from experienced coaches to make positive life changes. Visit kp.org/wa/wellness-coach.



^{1.} These apps are not intended to replace treatment or advice. The services described above are not covered under your health plan benefits and are not subject to the terms set forth in your Evidence of Coverage or other plan documents. These services may be discontinued at any time without notice. Calm can be used by members 13 and over. The Headspace Care app and services are not available to any members under 18 years old. 2. The Headspace Care app and coaching services are neither offered nor quaranteed under contract with the Federal Employees Health Benefits Program but are made available to enrollees and family members, 18 and older, who become members of Kaiser Permanente. Kaiser Permanente members can text with a coach using the Headspace Care app for 90 days per year. After the 90 days, members can continue to access the other services available on the Headspace Care app for the remainder of the year at no cost.

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Care while traveling

If you become ill or injured while traveling, you're covered for urgent and emergency services anywhere in the world. And if you get your care from Kaiser Permanente doctors and care teams, you can email your care team's office with nonurgent questions.



For the best options for nonemergency urgent care away from home:

In your plan's Washington service area

You can access all providers in your network. Find links to providers at kp.org/wa/find-a-doctor.

Outside your plan's Washington service area

Call Member Services at 1-888-901-4636 for help finding the closest care. You'll also receive a visiting member ID number if you plan to get care at a Kaiser Permanente facility outside the Kaiser Permanente Washington service area.



Call 24/7 for care advice from a licensed clinician: 1-800-297-6877



Start a phone or video visit, available 24/7 across the U.S.¹



Email your Kaiser Permanente care team with nonurgent questions.²

Learn more about these care options at kp.org/getcare.

1. When appropriate and available. If you travel out of state, some virtual care services may not be available due to licensing laws. Laws differ by state.

2. This feature is available when you get care from Kaiser Permanente doctors and care teams.





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Travel within the Kaiser Permanente Washington service area

- Nearest Kaiser Permanente urgent care
- Other urgent care location in your plan's network

Travel in another Kaiser Permanente region

- Nearest Kaiser Permanente urgent care
- Other urgent care location in your plan's network

Travel in a state without Kaiser Permanente

- Nearest CVS MinuteClinic, Concentra, or The Little Clinic urgent care center³
- Nearest urgent care⁴

International travel

- Nearest urgent care⁴
- Nearest hospital

Emergency care while traveling⁵

- In the United States, call 911.
- If abroad, call the local emergency number of the country you're visiting or go to the closest emergency room.
- If admitted to a hospital, call our Hospital Notification Line at **206-901-4609** or **1-888-457-9516** as soon as reasonably possible.
- 3. If you get care at a CVS MinuteClinic, Concentra urgent care center, or any other urgent care facility within a state where Kaiser Permanente operates, you'll be asked to pay up front for services you receive and file a claim for reimbursement.
- **4.** Urgent care services are covered subject to the applicable copay, coinsurance, or deductible. See your *Evidence of Coverage* for details.
- **5.** If you reasonably believe you have an emergency medical condition, which is a medical or psychiatric condition that requires immediate medical attention to prevent serious jeopardy to your health, call 911 or go to the nearest emergency department. For the complete definition of an emergency medical condition, please refer to your *Evidence of Coverage*.

Travel Advisory Service

Our Travel Advisory Service offers recommendations tailored to your travel outside the United States. Nurses certified in travel health will advise you on any vaccines or medications you need based on your destination, activities, and medical history. The consultation is not a covered benefit, and there is a fee for a Kaiser Permanente member using the service for the first time. Prices for travel vaccines and medicines may vary depending on your Kaiser Permanente plan.

For more information

Call Kaiser Permanente Member Services at **1-888-901-4636** or visit **kp.org/travel**.



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Medical treatment: rights and responsibilities

You have rights when it comes to your medical treatment. While some rights are set by state and federal law, you also have the right to choose treatments based on your personal values, beliefs, and what is important to you.

Making treatment decisions

When your doctor offers you treatment for a medical condition, you can choose to say "yes" or "no." To help you make a decision, your physician will tell you about your medical condition, the different treatments, and what their side effects might be. Your beliefs and values may guide you in deciding whether to go ahead with a treatment or not.

Discussing treatment alternatives

While Kaiser Permanente doesn't cover every kind of treatment or procedure (no health plan does), we don't have any financial incentives or penalties that might encourage doctors or other clinicians to withhold medically necessary services or to keep them from discussing recognized medical alternatives with you. The only financial incentives we ever use are rewards for medical groups and hospitals that meet quality care measures (such as cancer screenings) and patient satisfaction targets.

Documenting your care choices

What if you were in a serious accident and lost your ability to say "yes" or "no" to treatment? Advance directives are designed to document your wishes in case you find yourself in that situation. They can be completed by anyone 18 or older and changed or canceled at any time. There are 3 types of advance directives:

- Durable Power of Attorney for Health Care (DPOA): Names someone as your decisionmaker if you're unable to make health care decisions yourself.
- Health Care Directive Living Will: Tells your provider and your family what kinds of care you do not want if you are seriously ill or injured.
- Portable Orders for Life-Sustaining
 Treatment (POLST): Contains physician orders about the use of life-sustaining treatment such as CPR. It is intended to reflect your wishes around end-of-life care.

You can find these forms and an advance directive booklet at **kp.org/wa/forms**.



When you need hospital care

Your network includes community or regional hospitals in locations across our Washington state service area. The Leapfrog Group, a national hospital rating organization, publishes an annual survey on hospital safety performance.

You can review the most recent results for participating Washington hospitals at Leapfroggroup.org/compare-hospitals.



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Laws related to women's health

Contraception

Beginning in 2018, Washington state law requires non-Medicare health plans with contraceptive drug coverage to let members get a 12-month supply at once. All preferred contraceptives except NuvaRing are eligible for this extended supply. This regulation doesn't apply to employer self-funded plans or Federal Employees Health Benefits Program plans.

Mastectomies

The Women's Health and Cancer Rights Act of 1998 gives you the right to the following coverage after a mastectomy: reconstruction of the breast on which the mastectomy was performed, surgery and reconstruction of the other breast to produce a symmetrical (balanced) appearance, prostheses (artificial replacements), and treatment for physical complications resulting from the mastectomy.

New medical technology

New and emerging medical technologies are

evaluated on an ongoing basis by 2 Kaiser Permanente committees:

the Interregional New Technologies Committee and our local Pharmacy and Therapeutics Committee. These evaluators consider the new technology's benefits, whether it has been proven safe and effective, and under what conditions its use would be appropriate. The recommendations of these committees, which are led by physicians, inform what is covered and used by our clinicians.

Quality improvements

Each year we develop an annual work plan to guide our efforts to maintain and improve the quality of patient care and services. You can find the Quality & Safety Program description and Quality Plan work plan at kp.org/wa/quality, or call Member Services and ask for a copy.

Feedback on care quality or access

Your compliments, concerns, complaints, and questions help us provide high-quality care and service. You can call Member Services to share your comments or complete an online form and email it to Member Services at kp.org/wa/compliments-complaints.

Privacy, rights, and responsibilities

Know your rights and responsibilities

It's important to know what you can expect and what we need from you when you receive care from us. Visit **kp.org/wa/rights**.

Find out how we protect your privacy

Our regional Notice of Privacy Practices, which all members and patients receive, describes how medical information about you may be used and disclosed and how you can access it. It also describes our responsibility to notify you if there is a breach of your protected health information. Go to kp.org/wa/privacy.

Important resources

Visit kp.org/wa/important-resources to learn about coverage documents, other plan documents, and preventive care schedules. You can also read about our quality program and ratings on hospital care and safety, learn about women's health and cancer rights, and read important health plan and pharmacy disclosures.



Nondiscrimination and language services

We comply with all civil rights laws and do not discriminate in any way. We also provide language services to people whose primary language is not English. For details, visit kp.org/wa/ndn.

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Coverage decisions

Decisions about your benefit coverage are based solely on the appropriateness of care for your medical needs and what is covered by your health plan.

How utilization management works

Utilization management is a process used in the health care field to make sure patients are getting appropriate services at the right time and for the right length of time. You benefit because it requires continuous review and monitoring of your care. Some of the services we continuously monitor and evaluate are:

- Hospital admissions and average length of stay
- Referred services
- Post-service claims
- Case management services for certain medical conditions
- Clinical practice guidelines

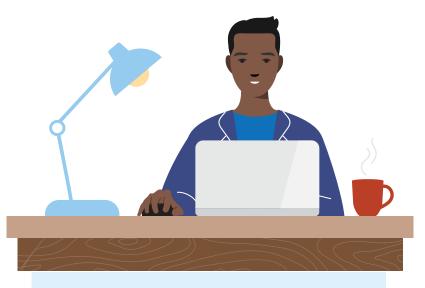
Some care, services, and supplies require prior approval (preauthorization) from Kaiser Permanente in order to be covered. This includes planned inpatient hospitalization, advanced imaging (CT scan, MRI, PET scan), clinical trials, dialysis, home health care, hospice, certain drugs, and more. Generally, the recommending provider will request the preauthorization on your behalf.

If at any time you feel you are not receiving coverage for an item or service that you believe is medically necessary, you have the right to:

- Make a request for services or supplies you have not received
- File a claim for payment of charges you've paid

If you don't agree with our decision regarding your request, you have the right to request an appeal.

You or your doctor can contact Member Services for help with questions about coverage determinations. If you contact us after regular business hours, we'll respond the next business day. If the communication is received after midnight, Monday through Friday, we'll respond the same business day.



Claims and appeals

Appeal a coverage or claim decision

If Kaiser Permanente denies coverage for a medical service or payment of a claim, you have the right to appeal that decision.

Go to kp.org/wa/appeals to learn how.

File a claim

Find instruction for filing claims at kp.org/wa/reimburse.