Staying Healthy

Get the most benefit from your medications

KAISER PERMANENTE • MEDICATION THERAPY MANAGEMENT (MTM) PROGRAM



Do I qualify for the MTM program?

You may be eligible if:

- You are a current member of Kaiser Permanente
- Your plan includes Medicare Part D covered medicines
- You have three or more chronic conditions and are taking five or more medications
- You spend over \$4,255 on drug costs annually

How do I enroll in the MTM program?

A member of our MTM team may contact you by letter or phone if you qualify for the program. For more information, you can visit **kp.org/seniorrx** or call our MTM team at **(706) 583-5042** (TTY **711**), Monday through Friday, 9 a.m. to 5 p.m.

You must reside in the Kaiser Permanente Medicare health plan service area in which you enroll.

Our Medication Therapy
Management (MTM) Program
connects you and your doctor with
specially trained pharmacists to
make sure all the medications you
take are necessary, safe and
effective.

- It starts with a short phone call from an MTM team member to review all your medicines:
 - Medications for chronic conditions like diabetes, high blood pressure and heart disease
 - Vitamins and other supplements
 - Over-the-counter (OTC) medicines like aspirin and Tylenol™
- We'll look for ways to reduce side effects, prevent harmful drug interactions, and lower drug costs.
- You'll receive an action plan based on your needs to help you get the most out of your medications.
- 4. We'll stay in touch to keep you on a healthy track.

The MTM program is not a benefit. It's an extra service offered at no additional cost to members who qualify.



Notice of nondiscrimination

Kaiser Permanente complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Kaiser Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. We also:

- Provide no cost aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters.
 - Written information in other formats, such as large print, audio, and accessible electronic formats.
- Provide no cost language services to people whose primary language is not English, such as:
 - Qualified interpreters.
 - ◆ Information written in other languages.

If you need these services, call Member Services at **1-800-232-4404** (TTY **711**), 8 a.m. to 8 p.m., seven days a week.

If you believe that Kaiser Permanente has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our Civil Rights Coordinator by writing to Attention: Member Services, Nine Piedmont Center, 3495 Piedmont Road NE, Atlanta, GA 30305 or calling Member Services at the number listed above. You can file a grievance by mail or phone. If you need help filing a grievance, our Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

Kaiser Permanente is an HMO plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal.

Multi-language Interpreter Services

English

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call **1-800-232-4404** (TTY: **711**).

Spanish

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-232-4404** (TTY: **711**).

Chinese

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-800-232-4404 (TTY:711)。

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **1-800-232-4404** (TTY: **711**).

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-800-232-4404** (TTY: **711**)번으로 전화해 주십시오.

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-800-232-4404** (телетайп: **711**).

Japanese

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。 1-800-232-4404(TTY:711)まで、お電話にてご連絡ください。

Hindi

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-232-4404 (TTY: 711) पर कॉल करें।

Amharic

ጣስታወሻ: የሚናንሩት ቋንቋ ኣጣርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያባዝዎት ተዘጋጀተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ 1-800-232-4404 (*ጦ*ስማት ለተሳናቸው: **711**).



Farsi

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با (۲۲: **711) ۵00-232-800** تماس بگیری

Arabic

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-404-232 (رقم هاتف الصم والبكم: -117).

German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-800-232-4404** (TTY: **711**).

French

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-800-232-4404** (ATS : **711**).

Portuguese

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para **1-800-232-4404** (TTY: **711**).

French Creole

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele **1-800-232-4404** (TTY: **711**).

Gujarati

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહ્યથ સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-232-4404 (TTY: 711).