The Kaiser Permanente

A Kaiser Permanente Signature HMO Plan
A community service of Kaiser Foundation Health Plan of Georgia, Inc.

Bridge Program
Millions of Americans remain uninsured across the country. In our state, Georgians may work for employers who do not provide coverage for workers’ dependents. Others may not have access to employer-sponsored health coverage or government assistance.

In response to this growing problem, Kaiser Permanente, a nonprofit health plan, created The Kaiser Permanente Bridge Program.

This unique program is designed to help individuals and families, whose family income is at or below current program income guidelines, obtain health care coverage at a reduced cost. Members of this program obtain health care coverage at a reduced cost for up to 24 months if all eligibility requirements continue to be met. Kaiser Permanente may periodically confirm members are still meeting the subsidy eligibility requirements.

Through the Kaiser Permanente Bridge Program, Kaiser Permanente will offer health benefits for a very low monthly charge. Individuals and families will pay a fraction of the normal cost. As a community service, Kaiser Permanente will subsidize this cost.

To apply, please contact a Kaiser Permanente Bridge Program participating agency.
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The Kaiser Permanente advantage

You’ve probably heard about our dedication to quality care, excellent service, and unmatched convenience. But there are more reasons than ever to make Kaiser Permanente your partner in health.

Healthy Solutions.

Get your own personal health coach 24 hours a day, 7 days a week by phone—at no cost—through Kaiser Permanente Healthy Solutions.

- Talk about tests or procedures, upcoming appointments, medications, diet, or exercise.
- Get information about conditions, general health, and wellness.
- Learn about new techniques to help take control of specific conditions or overall health.
- Receive personalized check-in calls.
- Get additional health information mailed to your home.

Great care and service

For 25 years, Kaiser Permanente has been providing metro-Atlanta with quality health care that’s convenient, simple, and affordable. It’s our distinct approach to health care that keeps our members coming back year after year:

- Total health
  At Kaiser Permanente, we’re committed to your total health—mind, body, and spirit. You’ll like how we make it easier for you to take an active role in your own health. We help you live well through health education classes, discounts on health-related services, and much more. And you’re covered for the preventive care you need, like routine physicals, well-child care, mammograms, immunizations, and more. So you can stay healthy and live your life to the fullest.

- Personalized care
  When you choose a Kaiser Permanente doctor, you’ll get quality care from a doctor who takes the time to get to know you and your health needs. You’ll have all the things you need to get the personalized care you deserve—compassionate people backed by medical excellence, advanced technology, and leading-edge research.

- Convenience
  Enjoy the ease of getting many services all in one place. That means you’ll save time by seeing a doctor and getting laboratory, X-ray, and pharmacy services all in one building at most Kaiser Permanente medical facilities. You can also see a doctor in the evening or weekend at select locations, or receive nurse advice 24-hours a day by phone.
  
  You’ll also enjoy the convenience of many online services. On our website, kp.org, you can empower yourself with many 24-hour health resources including:

  - Health assessment tools
  - Personalized health improvement plans
  - Health encyclopedia
  - Online prescription refills
  - Routine appointment requests
  - Nurse advice by email

Upon acceptance in the program, you will need to register on our member website, kp.org in order to use online services.

Log on to kp.org and click the “Register to get a User ID” link to get started.
Kaiser Permanente Medical Facilities

When you join Kaiser Permanente, you’ll have the freedom to choose to get care at one of our growing number of modern medical facilities, and you’ll see why members keep coming back.

- Save time by seeing a doctor, getting lab tests or X-rays, and picking up a prescription all in the same building.*
- See a doctor at night or on weekends at our after-hours locations.
- Get a same-day appointment when you need one.
- Receive quality, personalized care from a doctor who takes the time to listen.

A few things that might surprise you.

Want more reasons to choose Kaiser Permanente? Here are some that may surprise you:

- Top-notch doctors
  Our doctors come from some of the top medical schools and training programs in the country including: Duke University, Emory University, Harvard University, Johns Hopkins University, Medical College of Georgia, Vanderbilt University, and Yale University.

- Easy access
  You can see any specialists practicing in our medical facilities—without a referral.

- Emergency care
  You’ll have peace of mind knowing you’re covered for emergency care anywhere you travel.

- Coordinated care
  All of our caregivers—primary, select specialists, lab technicians, and pharmacists—share access to members’ electronic health records, helping avoid drug interactions, allergic reactions, and redundant tests.

- Great discounts
  We even make it more affordable to live healthy. Through our SelfWise program, you can take advantage of a variety of health-related discounts** including:
  - Health club membership
  - Weight Watchers membership
  - Massage therapy, chiropractic, acupressure, and acupuncture services
  - Vision care

Consumer Choice Option

As part of a state law, you have another option available to you through The Kaiser Permanente Bridge Program. The Consumer Choice Option (CCO) allows you to nominate and use providers not normally available through our health plan, while still receiving benefits comparable to those you would receive when using in-network providers. This option costs an additional 17.5 percent and is based on the full monthly premium, not on the portion you pay after the subsidy.

If you would like more information on the CCO—including an election form, information on how to nominate a provider, and rate information—please call our consumer choice representative at (404) 364-4900. If you are interested in enrolling in the CCO, please wait until after you receive and review the CCO materials to return your medical questionnaire. The medical questionnaire and CCO election form must be returned to Kaiser Permanente at the same time.

* Most medical facilities.

** Available to Kaiser Permanente members and their enrolled family members. Discounts and services are provided on a fee-for-service basis, do not replace and cannot be combined with any existing benefit, and are not covered benefits. Kaiser Permanente assumes no responsibility for the arrangement, nature, quality, or outcome of the services. For more information, call (404) 261-2590.

Stay connected with My health manager†

With the My health manager section of kp.org, you have secure 24-hour access to your health record online. Kaiser Permanente’s electronic patient health record system enables you to stay connected to your health, and it allows your doctor to view your information instantly right in the exam room. Below are just some of the features available to you:

- Email your doctor’s office
- Review past office visits
- Schedule, request, cancel, and view appointments
- View most lab test results
- Access the health records of your children
- View immunization history
- Order prescription refills and view current medications

†Available to members receiving care/filling prescriptions at Kaiser Permanente medical facilities.
The Kaiser Permanente Bridge Program—How does it work?

The Kaiser Permanente Bridge Program members will receive benefits comparable to those offered to other Kaiser Permanente members through our Signature HMO plans. Eligible members will be billed by Kaiser Permanente and pay the designated portion of their premium directly to Kaiser Permanente each month.

To be covered, all health care services must be provided, authorized, or prescribed by a Kaiser Permanente Plan provider, except in cases of a medical emergency. If any program eligibility requirement changes for the member (or dependent), he/she must notify The Kaiser Permanente Bridge Program in writing. Please send changes to:

fax: 1-866-449-4921
email: bridge@kp.org

How is The Kaiser Permanente Bridge Program Administered?

Persons interested in The Kaiser Permanente Bridge Program must apply through a participating agency.

Membership in The Kaiser Permanente Bridge Program at the subsidized amount is limited to 24 months from the date of initial enrollment. At the completion of 24 months, members will receive notification of other coverage options.

Target Audiences

The Kaiser Permanente Bridge Program is intended for individuals and families facing short-term problems. It is for persons who are not eligible for Medicaid, Medicare, or PeachCare; and who do not have access to employer-sponsored health care insurance.

Enrollment in The Kaiser Permanente Bridge Program is limited; Kaiser Permanente reserves the right to stop accepting new enrollments at any time without prior notice.

Who is Eligible?

Before you review the specific plan information, check to make sure you live within our Service Area. You’re eligible to apply for The Kaiser Permanente Bridge Program if you live in one of the following counties: Barrow, Bartow, Butts, Carroll, Cherokee, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Hall, Haralson, Heard, Henry, Lamar, Meriwether, Newton, Paulding, Pickens, Pike, Rockdale, Spalding, and Walton.

All persons applying to The Kaiser Permanente Bridge Program must meet the requirements outlined below to qualify:

- The applicant and applying dependents must live in Kaiser Permanente’s Georgia Region Service Area.
- The annual household income must be at or less than the current income guidelines for enrollment.
- The applicant and all applying dependents cannot be eligible for any other health insurance program including Medicare, Medicaid, PeachCare, and employer-sponsored health care.
- The applicant and all applying dependents cannot be enrolled in any other health insurance program including Medicare, Medicaid, PeachCare, and employer-sponsored health care.
- The applicant must be actively enrolled with a participating community partner.
- The applicant and all applying dependents may not have been previously enrolled in The Kaiser Permanente Bridge Program.

Age 64 and under.

Upon acceptance in The Kaiser Permanente Bridge Program, the Health Plan may periodically confirm members are still meeting the subsidy eligibility requirements outlined in the Evidence of Coverage. If the Health Plan determines that the Bridge Program member is no longer meeting the eligibility requirements, the Health Plan will terminate coverage at the end of the month under The Kaiser Permanente Bridge Program.
# The Kaiser Permanente Bridge Program Highlights

| **Deductible** - Individual / Family | None |
| **Coinsurance Out-of-Pocket Max** - Individual / Family | Not Applicable |
| **Maximum Benefit While Covered**<sup>1</sup> | Unlimited |
| **Coinsurance** | Not Applicable |

## Benefits

### Office Services
- Primary Care (Including Laboratory and Radiology Services) - $15 copay
- Specialty Care (Including Laboratory and Radiology Services) - $15 copay
- Preventive Services - Plan pays 100%
- Maternity (pre and postnatal care) - Plan pays 100%
- High Tech Radiology Services (MRI, CT, PET, others) - $15 copay

### Outpatient Services
- Rehabilitation Therapies - 20 visits per year (Physical and Occupational Therapies combined) - $15 copay
- Outpatient Hospital and Surgical Facility (Including Laboratory and Radiology Services) - $100 copay
- High Tech Radiology Services (MRI, CT, PET, others) - $100 copay

### Emergency Services
- Emergency Room Visit (per visit; copay waived if admitted) - $100 copay
- After-Hours Urgent Care (per visit) - $30 copay
- Ambulance (per trip) - $50 copay

### Inpatient Services
- Hospital (facility charge) per admission - $150 copay
- Maternity (hospital delivery) - $150 copay

### Mental Health Services
- Outpatient Mental Health<sup>2</sup> - Limited to 48 visits per calendar year - $15 copay
- Inpatient Mental Health Facility - per admission, 30 days per calendar year - $50 copay

### Pharmacy Services - 30 day supply
- Generic Drugs - Kaiser Permanente medical facilities only - Home Delivery available
- Brand Preferred Drugs - Kaiser Permanente medical facilities only - $10 copay

### Other Services
- Durable Medical Equipment/Prosthetics and Orthotics - Plan pays 100%
- Vision Exams - $15 copay

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1. Some benefits may have limitations.
2. Limited to 48 visits. Outpatient Mental Health and Outpatient Group Therapy combined.

This is a summary description and is not intended to replace your Kaiser Permanente Bridge Program Evidence of Coverage, which contains the complete provisions of this coverage. Some services require preauthorization.
Frequently asked questions

1. Do I go to Kaiser Permanente's medical facilities to get care?

Yes. As a participant in The Kaiser Permanente Bridge Program, you are enrolled in our Signature HMO plan and will receive primary care services at any of our growing number of Kaiser Permanente medical facilities across metro-Atlanta. Your primary care physician will coordinate any specialty care you may need. By visiting our medical facilities, you will enjoy the convenience of being able to see your doctor and get lab, X-ray, and pharmacy services all in the same building at most locations.

2. Who can I choose as my personal physician?

You can select a physician from our award-winning Medical Group who practice in our medical facilities. Our physicians work as members of a health care team, sharing information and expertise in order to provide you with high quality care. The team includes a select group of physicians, nurse practitioners and/or physician assistants, and nursing staff who work with and support your personal physician. You may choose to see another provider outside of our Medical Group at your own cost.

3. How do I find out which doctors are available?

Visit our online Medical Staff Directory at kp.org/medicalstaff and follow the prompts for Signature HMO plans. We also have a printed Signature HMO Physician Directory. For a copy, please call us at (404) 261-2590.

4. What if I need emergency care?

If you have an emergency, you should call 911 or go to the nearest emergency room. If you are admitted to the hospital, you should notify us within 24 hours of your admission, or as soon as reasonably possible so your personal physician can coordinate all of the necessary care. You will need to file a claim for care received outside the Service Area.

5. When should I seek emergency care?

If you think you have a medical emergency, you should call 911 or go to the nearest emergency room. An emergency is a condition that if not treated immediately, would put your life, health, limbs, or bodily functions in serious jeopardy. Examples of emergency conditions:
- Chest pain or pressure (i.e., heart attack)
- Sudden onset of severe abdominal pain
- Severe shortness of breath
- Sudden inability to talk or to move one side of body (i.e., stroke)
- Severe, persistent bleeding
- Major injuries

Keep in mind that, if your condition is not a medical emergency, after-hours care may be a better option for you. Emergency room care costs much more than a doctor's visit, so your copays will be higher than for a routine doctor visit or for after-hours care. You may also experience longer wait times to get care, and an emergency room can be a frightening place if you don't need to be there.

6. When should I visit an after-hours care location?

You should visit an after-hours care location when your doctor's office is closed and you have a health need that you feel requires prompt medical attention, but is not an emergency condition. Examples of after-hours care conditions:
- Minor injuries
- Acute backache
- Severe sore throat
- Migraine headaches
- Earache
- Upper respiratory symptoms
- Persistent cough

If you think you may need Urgent Care, you can call the advice nurse at (404) 365-0966. Or refer to your Signature HMO Plan Physician Directory for a complete list of Kaiser Permanente and affiliated after-hours facilities. The Signature HMO Plan Physician Directory can be found online at kp.org/medicalstaff or you can obtain a printed copy in advance by calling us at (404) 261-2590.

7. Why is Kaiser Permanente subsidizing the premiums for this program?

As part of our Community Benefit Program, we support initiatives that increase access to healthcare. The Kaiser Permanente Bridge Program is a demonstration of our commitment to our community's health.
For a current provider listing, visit our searchable Medical Staff Directory at kp.org/medicalstaff

Where to get care

KP Kaiser Permanente Medical Facilities
H Affiliated Hospitals*

* The hospital that you will be admitted to will be determined by the primary care physician you select.

For more information, visit kp.org/facilities
Our medical facilities

**Cherokee County**
Holly Springs Medical Office
684 Sixes Road, Suite 275
Holly Springs, GA 30115

**Clayton County**
Southwood Medical Center*
2400 Mt. Zion Parkway
Jonesboro, GA 30236

Southwood Specialty Center
2470 Mt. Zion Parkway
Jonesboro, GA 30236

**Cobb County**
Cumberland Medical Center
2525 Cumberland Parkway
Atlanta, GA 30339

East Cobb Medical Office
1205 Johnson Ferry Road
Suite 107
Marietta, GA 30068

TownPark Medical Center
750 TownPark Lane
Kennesaw, GA 30144

West Cobb Medical Center
3640 Tramore Point Parkway
Austell, GA 30106

West Marietta Medical Office*
2505 Dallas Highway
Marietta, GA 30064

**Coweta County**
Newnan Medical Office
205 Newnan Crossing Bypass
Newnan, GA 30263

**DeKalb County**
Crescent Medical Center
200 Crescent Centre Parkway
Tucker, GA 30084

Downtown Decatur Medical Office
201 W. Ponce de Leon Avenue
Suite A
Decatur, GA 30030

Panola Medical Center*
5440 Hillandale Drive
Lithonia, GA 30058

Stonecrest Medical Center
8011 Mall Parkway
Lithonia, GA 30038

**Douglas County**
Douglasville Medical Office
6875 Douglas Blvd
Suite A
Douglasville, GA 30135

**Fayette County**
Fayette Medical Office
101 Banks Road
Fayetteville, GA 30214

**Forsyth County**
Forsyth Medical Office
1400 Northside Forsyth Drive
Suite 350
Cumming, GA 30041

**Gwinnett County**
Lawrenceville Medical Office
455 Philip Blvd.
Suite 130
Lawrenceville, GA 30046

Medical Center at Gwinnett*
3650 Steve Reynolds Boulevard
Duluth, GA 30096

Snellville Medical Office
2240 Fountain Drive
Snellville, GA 30078

Sugar Hill-Buford Medical Center
1435 Broadmoor Boulevard
Sugar Hill, GA 30518

**Henry County**
Henry Towne Centre Medical Center
1125 Towne Centre Village Drive
McDonough, GA 30253

**Rockdale County**
Conyers Medical Office
1478 Dogwood Drive
Conyers, GA 30013

* Medical facilities designated as After Hours Urgent Care Centers.
Our privacy practices

Notice of privacy practices

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

In this notice we use the terms “we,” “us” and “our” to describe the Kaiser Permanente, Georgia Region. For more details, please refer to section IV. of this notice.

I. What is “Protected Health Information?”

Your protected health information (“PHI”) is individually identifiable health information, including demographic information, about your past, present, or future physical or mental health or condition, health care services you receive, and past, present or future payment for your health care. Demographic information means information such as your name, address, and date of birth.

PHI may be in oral, written or electronic form. Examples of PHI include your medical record, claims record, enrollment or disenrollment information, and communications between you and your health care practitioner about your care.

If you are a Kaiser Foundation Health Plan member and also an employee of any Kaiser Permanente company, PHI does not include the health information in your employment records.

II. About our responsibility to protect your PHI

By law, we must

1) protect the privacy of your PHI;
2) tell you about your rights and our legal duties with respect to your PHI; and
3) tell you about our privacy practices and follow our notice currently in effect.

We take these responsibilities seriously and, have put in place administrative safeguards (such as security awareness training and policies and procedures), technical safeguards (such as encryption and passwords), and physical safeguards (such as locked areas and requiring badges) to protect your PHI. As in the past, we will continue to take appropriate steps to safeguard the privacy of your oral, written, and electronic PHI.

III. Your rights regarding your PHI

This section tells you about your rights regarding your PHI, for example, your medical and billing records. It also describes how you can exercise these rights.

Your right to see and receive copies of your PHI

In general, you have a right to see and receive copies of PHI in designated record sets such as your medical record or billing record. If you would like to see or receive a copy of such a record, please write to us. When you know the Kaiser Permanente facility or medical center where you received your care, please write to us at that address.
Your right to correct or update your PHI

If you believe there is a mistake in your PHI or that important information is missing, you may request that we correct, delete, or add to the record. Please write to us and tell us what you are asking for and why we should make the correction, deletion, or addition.

Your request should be sent as described above in the section entitled “Your right to see and receive copies of your PHI.” If we approve your request, we will make the correction or addition to your PHI. If we deny your request, we will tell you why and explain your right to file a written statement of disagreement.

Your right to an accounting of disclosures of PHI

You may ask us for a list of our disclosures of your PHI. If you would like a list of disclosures, please write to us as described above in the section entitled “Your right to see and receive copies of your PHI.” The list we give you will include disclosures made in the last six years, unless you request a shorter time period or if fewer than six years have passed since April 14, 2003. For example, if you requested a list of disclosures on April 14, 2005, the list would cover only two years.

You are entitled to one disclosure accounting in any 12-month period at no charge. If you request any additional accountings fewer than 12 months later, we may charge a fee.

Except as may otherwise be required under state law, an accounting does not include certain disclosures, for example, disclosures to carry out treatment, payment and health care operations; disclosures that occurred prior to April 14, 2003; disclosures for which Kaiser Permanente, Georgia Region had a signed authorization; disclosures of your PHI to you; disclosures for notifications for disaster relief purposes; or disclosures to persons involved in your care and persons acting on your behalf.

Your right to request limits on uses and disclosures of your PHI

You may request that we limit our uses and disclosures of your PHI for treatment, payment, and health care operations purposes. However, by law, we do not have to agree to your request. Because we strongly believe that this information is needed to manage care of our members/patients appropriately, it is our policy not to agree to requests for restrictions.

Your right to receive a paper copy of this notice

You also have a right to receive a paper copy of this notice upon request.

IV. Kaiser Permanente companies subject to this notice

This notice applies to the Kaiser Permanente, Georgia Region which includes:

- The Southeast Permanente Medical Group, Inc. (TSPMG)
- Kaiser Foundation Hospitals (KFH), as described below; and
- Kaiser Foundation Health Plan, Inc. (KFHP, Inc.), as described below

Our health care delivery sites include Kaiser Permanente medical facilities, our member call advice and appointment centers, and our member website.

To provide you with the health care you expect when treating you, paying for your care, and conducting our operations, such as quality assurance, accreditation, licensing and compliance, these Kaiser Permanente companies share your PHI with each other.

Our personnel may have access to your PHI as employees, physicians, volunteers, persons working with us in other capacities, or professional staff members and others authorized to enter information into a medical record of a Kaiser Permanente Medical Facility. Our region may also share your PHI with KFH and KFHP, Inc. in connection with shared services and other national Kaiser Permanente activities for treatment, payment, or health care operations purposes. For example, if you are being considered for a transplant, we will share your PHI with our Kaiser Permanente National Transplant Network.
V. How we may use and disclose your PHI

Your confidentiality is important to us. Our physicians and employees are required to maintain the confidentiality of the PHI of our members/patients and we have policies and procedures and other safeguards to help protect your PHI from improper use and disclosure.

Sometimes we are allowed by law to use and disclose certain PHI without your written permission. We briefly describe these uses and disclosures below and give you some examples.

How much PHI is used or disclosed without your written permission will vary depending, for example, on the intended purpose of the use of disclosure. Sometimes we may only need to use or disclose a limited amount of PHI, such as to send you an appointment reminder or to confirm that you are a health plan member. At other times we may need to use or disclose more PHI such as when we are providing medical treatment.

- **Treatment:** This is the most important use and disclosure of your PHI. For example, our physicians, nurses, and other health care personnel, including trainees, involved in your care use and disclose your PHI to diagnose your condition and evaluate your health care needs. Our personnel will use and disclose your PHI in order to provide and coordinate the care and services you need, for example: prescriptions; X-rays; and lab work. If you need care from health care providers who are not part of Kaiser Permanente, such as community resources to assist with your health care needs at home, we may disclose your PHI to them.

- **Treatment alternatives and health-related benefits and services:** In some instances, the law permits us to contact you: 1) to describe our network or describe the extent to which we offer and pay for various products and services; 2) for your treatment; 3) for case management and care coordination; or 4) to direct or recommend available treatment options, therapies, health care providers, or care settings. For example, we may tell you about a new drug or procedure or about educational or health management activities.

- **Payment:** Your PHI may be needed to determine our responsibility to pay for, or to permit us to bill and collect payment for, treatment and health-related services that you receive. For example, we may have an obligation to pay for health care you receive from an outside provider. When you or the provider sends us the bill for health care services, we use and disclose your PHI to determine how much, if any, of the bill we are responsible for paying.

- **Health care operations:** We may use and disclose your PHI for certain health care operations, such as: quality assessment and improvement; training and evaluation of health care professionals; licensing; accreditation; activities relating to the creation, renewal or replacement of health insurance or health benefits; conducting medical review; legal services; auditing functions, including fraud and abuse detection and compliance programs; Member Services; and determining premiums and other costs of providing health care. We may also disclose your PHI for certain health care operations of other health plans and health care providers.

- **Business associates:** We may contract with business associates to perform certain functions or activities on our behalf, such as payment and health care operations. These business associates must agree to safeguard your PHI.

- **Appointment reminders:** Your PHI allows us to contact you about appointments for treatment or other health care you may need.
Specific types of PHI: There are stricter requirements for use and disclosure of some types of PHI, for example, drug and alcohol abuse patient information, mental health records, and HIV/AIDS information. However, there are still circumstances in which these types of information may be used or disclosed without your authorization. If you become a patient in our chemical dependency program, we will give you a separate written notice, as required by law, about your privacy rights for your chemical dependency program PHI.

Communications with family and others when you are present: Sometimes a family member or other person involved in your care will be present when we are discussing your PHI with you. If you object, please tell us and we won’t discuss your PHI or we will ask the person to leave.

Communications with family and others when you are not present: There may be times when it is necessary to disclose your PHI to a family member or other person involved in your care because there is an emergency, you are not present, or you lack the decision making capacity to agree or object. In those instances, we will use our professional judgment to determine if it’s in your best interest to disclose your PHI. If so, we will limit the disclosure to the PHI that is directly relevant to the person’s involvement with your health care. For example, we may allow someone to pick up a prescription for you.

Disclosure in case of disaster relief: We may disclose your name, city of residence, age, gender, and general condition to a public or private disaster relief organization to assist disaster relief efforts, unless you object at the time.

Disclosures to parents as personal representatives of minors: In most cases, we may disclose your minor child’s PHI to you. In some situations, however, we are permitted or even required by law to deny your access to your minor child’s PHI. Examples of when we must deny such access include situations involving your daughter’s pregnancy, the prevention of her pregnancy, childbirth, and abortion records where a court waives parental notification of abortion. In addition, the law denies access to your child’s PHI if your child is married or otherwise emancipated.

Research: Kaiser Permanente engages in extensive and important research. Some of our research may involve medical procedures and some is limited to collection and analysis of health data. Research of all kinds may involve the use or disclosure of your PHI. Your PHI can generally be used or disclosed for research without your permission if an Institutional Review Board (IRB) approves such use or disclosure. An IRB is a committee that is responsible, under federal law, for reviewing and approving human subjects research to protect the safety of the participants and the confidentiality of PHI.

Organ donation: Except as limited by applicable law, we may use or disclose PHI to organ-procurement organizations to assist with organ, eye or other tissue donations.

Public health activities: Public health activities cover many functions performed or authorized by government agencies to promote and protect the public’s health and may require us to disclose your PHI.

For example, we may disclose your PHI as part of our obligation to report to public health authorities certain diseases, injuries, conditions, and vital events such as births or abortions. Sometimes we may disclose your PHI to someone you may have exposed to a communicable disease, or who may otherwise be at risk of getting or spreading the disease.

The Food and Drug Administration (FDA) is responsible for tracking and monitoring certain medical products, such as pacemakers and hip replacements, to identify product problems and failures and injuries they may have caused. If you have received one of these products, we may use and disclose your PHI to the FDA or other authorized persons or organizations, such as the maker of the product.

We may use and disclose your PHI as necessary to comply with federal and state laws that govern workplace safety.
Health oversight: As health care providers and health plans, we are subject to oversight conducted by federal and state agencies. These agencies may conduct audits of our operations and activities and in that process, they may review your PHI.

Disclosures to your employer or your employee organization: If you are enrolled in Kaiser Foundation Health Plan of Georgia through your employer or employee organization, we may share certain PHI with them without your authorization but only when allowed by law. For example, we may disclose your PHI for a workers compensation claim or to determine whether you are enrolled in the plan or whether premiums have been paid on your behalf. For other purposes, such as for inquiries by your employer or employee organization on your behalf, we will obtain your authorization when necessary.

Workers’ compensation: In order to comply with workers’ compensation laws, we may use and disclose your PHI. For example, we may communicate your medical information regarding a work-related injury or illness to claims administrators, insurance carriers, and others responsible for evaluating your claim for workers’ compensation benefits.

Military activity and national security: We may sometimes use or disclose the PHI of armed forces personnel to the applicable military authorities when they believe it is necessary to properly carry out military missions. We may also disclose your PHI to authorized federal officials as necessary for national security and intelligence activities or for protection of the President and other government officials and dignitaries.

Marketing: Kaiser Permanente may use and, in some instances, disclose your PHI to contact you about benefits, services or supplies that we can offer you in addition to your KP coverage.

Fundraising: We may use or disclose PHI to contact you to raise funds for our organization.

Required by law: In some circumstances federal or state law requires that we disclose your PHI to others. For example, the Secretary of the Department of Health and Human Services may review our compliance efforts, which may include seeing your PHI.

Lawsuits and other legal disputes: We may use and disclose PHI in responding to a court or administrative order, a subpoena, or a discovery request. We may also use and disclose PHI to the extent permitted by law without your authorization, for example, to defend a lawsuit or arbitration.

Law enforcement: We may disclose PHI to authorized officials for law enforcement purposes, for example, to respond to a search warrant, report a crime on our premises, investigate fraud, or help identify or locate someone.

Serious threat to health or safety: We may use and disclose your PHI if we believe it is necessary to avoid a serious threat to your health or safety or to someone else’s.

Abuse or neglect: By law, we may disclose PHI to the appropriate authority to report suspected child abuse or neglect or to identify suspected victims of abuse, neglect, or domestic violence.

Coroners and funeral directors: We may disclose PHI to a coroner or medical examiner to permit identification of a body, determine cause of death, or for other official duties. We may also disclose PHI to funeral directors.

Inmates: Under the federal law that requires us to give you this notice, inmates do not have the same rights to control their PHI as other individuals. If you are an inmate of a correctional institution or in the custody of a law enforcement official, we may disclose your PHI to the correctional institution or the law enforcement official for certain purposes, for example, to protect your health or safety or someone else’s.
VI. All other uses and disclosures of your PHI require your prior written authorization

Except for those uses and disclosures described above, we will not use or disclose your PHI without your written authorization. When your authorization is required and you authorize us to use or disclose your PHI for some purpose, you may revoke that authorization by notifying us in writing at any time. Please note that the revocation will not apply to any authorized use or disclosure of your PHI that took place before we received your revocation. Also, if you gave your authorization to secure a policy of insurance, including health care coverage from us, you may not be permitted to revoke it until the insurer can no longer contest the policy issued to you or a claim under the policy.

VII. How to contact us about this notice or to complain about our privacy practices

If you have any questions about this notice, or want to lodge a complaint about our privacy practices, please let us know by calling or writing to Customer Service Department, Kaiser Foundation Health Plan of Georgia, Inc., Nine Piedmont Center, 3495 Piedmont Road, NE, Atlanta, Georgia 30305-1736. If you are enrolled in a plan other than Senior Advantage, you may call Customer Service at (404) 261-2590. Its hours of operation are Monday through Sunday from 8 a.m. through 2 p.m. If you are enrolled in Senior Advantage, you may call the Senior Advantage Customer Service Department at (404) 233-3700 or toll free at 1-800-252-4404 (TTY: 1-800-255-0056). Its hours of operation are Monday through Sunday from 8 a.m. through 2 p.m. You also may notify the Secretary of the Department of Health and Human Services (HHS).

We will not take retaliatory action against you if you file a complaint about our privacy practices.

VIII. Changes to this notice

We may change this notice and our privacy practices at any time, as long as the change is consistent with state and federal law. Any revised notice will apply both to the PHI we already have about you at the time of the change, and any PHI created or received after the change takes effect. If we make an important change to our privacy practices, we will promptly change this notice and provide a new notice on our member website at www.kp.org and our member publication, Partners in Health. Except for changes required by law, we will not implement an important change to our privacy practices before we revise this notice.

IX. Effective date of this notice

This notice is effective on April 14, 2003.
and effectiveness as determined from a review of medical literature and research. The Pharmacy and Therapeutics Committee meets monthly to consider adding and removing prescription drugs on the drug formulary. If you have any questions about the formulary, call (404) 261-2590.

**Utilization Management**

At Kaiser Permanente, the Utilization Management Program works with participating providers to plan, organize and deliver quality health care services by ensuring these services are medically appropriate, medically necessary and provided in a cost-effective manner. Some services require prior notification and/or prior authorization by the Utilization Management Program; examples include, but are not limited to: inpatient admissions; outpatient surgery; specialized services such as home health, medical supplies/equipment, and hospice care; skilled nursing and acute rehabilitation facilities.

Emergency care does not require prior authorization; however, you are strongly encouraged to contact Kaiser Permanente after emergency care is received so Kaiser Permanente can coordinate follow-up services.

**Questions?**

If you have questions, please call Kaiser Permanente Member Services at (404) 261-2590.

**Services that require preauthorization**

Preauthorization is required for certain services. For preauthorization, call 1-800-221-2412.

**General Exclusions**

The following services are excluded from all coverage: Services which an employer or any government agency is responsible to provide, including workers’ compensation; Custodial care or care in an inter-mediate care facility; Services ordered by administrators of criminal justice or mental health institutions; Cosmetic services (including drugs and injectables); Dental services other than those specified (including services and appliances for injuries to teeth resulting from chewing or extraction of wisdom teeth); Physical examinations required for obtaining or maintaining employment or participation in employee programs, or insurance or government licensing; Experimental or investigational services; Refractive surgery; Corrective lenses, eyeglasses and hearing aids; Orthoptics (eye exercises); Routine foot care services; Examinations for the prescription of hearing aids; All services and drugs related to sexual reassignment; Long-term physical, speech and occupational therapy and rehabilitation; Cognitive rehabilitation programs; Vocational rehabilitation; Services that are primarily educational in nature; Cost of semen and eggs; Services for conception by artificial means; Reversal of voluntary infertility or any other infertility treatment; Nonhuman and artificial organs and their implantation; Court-ordered services; Mental health services for chronic conditions and mental retardation after diagnosis; Testing for ability, aptitude, intelligence, or interest; Corrective shoes and orthotic foot supports and inserts; More than one device for the same part of the body or same function; Replacement of lost devices; Dental devices and appliances other than those specified; Electronic monitors of bodily functions (except infant apnea monitors and blood glucose monitors); Devices to perform medical testing of body fluids, excretions, or substances; Devices not medical in nature; Convenience, comfort or luxury items; Disposable supplies for home use; Reconstructive surgery following removal of breast implants that were inserted for cosmetic reasons; All services, drugs, and supplies related to the treatment of obesity; most disposable supplies.

This is a summary description and is not intended to replace your Kaiser Permanente Bridge Program Evidence of Coverage, which contains the complete provisions of this coverage. If you have questions or need additional information, please call Kaiser Permanente Member Services at (404) 261-2590.
The Kaiser Permanente Bridge Program