


Kaiser Medical California Plan Option

What is an HMO Plan?

In an HMO, a defined network of health care providers (doctors, nurses, and specialists) contract with a health plan to provide care and services at preset, preapproved rates. Your primary care doctor manages your care and refers you to specialists within the network. And some specialty areas of care, like ob-gyn and optometry, are available directly.

You'll mostly get care inside the network, but HMO plans sometimes refer members to out-of-network specialists when they need additional services. HMO plans also cover medical emergencies, so members can get care from the closest emergency room.

CA MEDICAL PLAN OPTION #600784 KAISER HMO CA Member Service: 800.731.4661 / www.kp.org		 KAISER PERMANENTE®
		Kaiser HMO
DESCRIPTION	IN NETWORK	
Calendar Year Deductible	\$0	
Out-of-Pocket Maximum (Calendar Year)	\$1,500 Individual \$3,000 Family	
		You Pay:
Professional Services - Primary Care Doctor - Specialist	\$20 copay \$20 copay	
Hospital Services - Inpatient - Outpatient - Emergency Room - Urgent Care	\$500 copay \$20 copay \$100 copay \$20 copay	
Most Labs & X-rays Specialty Scans MRI/CT/PET	No charge No charge	
Well Care Exams (Baby/Adult)	No charge	
Mental Health & Chem Dependency - Inpatient - Outpatient	\$500 copay \$20 copay	
Prescription Drugs - Tier 1 (30 days) - Tier 2 (30 days) - Tier 3 (30 days)	\$15 copay \$30 copay \$30 copay	