

Kaiser Permanente Senior Advantage (HMO) Summary of Medical Benefits Part D

All plans offered and underwritten by Kaiser Foundation Health Plan
of the Northwest, 500 NE Multnomah St., Suite 100, Portland, OR 97232

Member Services: 1-877-221-8221 (TTY 711)
8 a.m. to 8 p.m., 7 days a week

Prescription drugs ¹	\$15 per prescription, for up to a 30-day supply. When you get your drugs from our mail-order pharmacy, you may get up to a 31-90 day supply for two copayments. After you have paid \$7,400 in true out-of-pocket costs for Part D covered drugs in a calendar year, you will pay the lesser of your copayment or \$3 for generic drugs and \$7 for brand drugs, per prescription.
Administered medications, including injections (all outpatient settings) ¹	15% Coinsurance
Nurse treatment room visits to receive injections ¹	\$10
Hospital Services	You pay
Ambulance Services (per transport)	\$75
Emergency department visit	\$50
Inpatient Hospital Services ²	\$200 per admission
Outpatient Services (other)	You pay
Outpatient surgery visit ²	\$100
Chemotherapy/radiation therapy visit	

Outside Service Area Benefit

20%. The annual benefit maximum is \$1,250. Kaiser Permanente pays 80% up to \$1,000 per year. You pay 100%

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