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Getting started

Your Kaiser Permanente Medicare Advantage plan is a lot more than just benefits and coverage. It’s a whole-person approach to health care that gives you tools to take control of your health. Here’s what you need to know right from the get-go:

Get answers to your questions
You can find specific contact information listed on page 20 of this booklet. Also keep in mind these two main resources for finding the answers and guidance you need:

• Go to kp.org/wa/medicare. You’ll find lots of useful tools and information, including the provider and facility directory, pharmacy information, and links to set up online accounts.

• Call Member Services. Representatives can help you with just about anything, from replacing a lost ID card to obtaining a language interpreter, to answering questions about benefits, referrals, coordination with other insurers, and more.

Watch for your ID card in the mail
If you are a new member, you’ll soon receive a Kaiser Permanente identification (ID) card that features your member number. You’ll be asked for your number when you get care, so keep your ID card handy. You’ll also receive your Evidence of Coverage (EOC). It details your benefits and services, what is and isn’t covered, and information about costs.

Choose your Kaiser Permanente doctor
Your personal doctor helps guide your total health care program. It’s important to choose one now, before you need a test, X-ray, or any other type of care. (You can change your personal doctor at any time, for any reason.)

To select a doctor:

• Choose from the many doctors who practice at Kaiser Permanente medical offices. When you get care from Kaiser Permanente physicians, your doctor, the pharmacy, lab, and X-ray are usually in one location.

• You can choose from hundreds of additional doctors in our HMO network, all of whom meet our high standards of care.

You will find a directory of primary care physicians online at kp.org/wa/provider-directory. The directory also includes pharmacies, hospitals, and urgent care facilities. Select your physician online or call Member Services and notify them of your choice, or request their help in choosing a doctor.

In most cases, you must use network providers to get your medical care. The only exceptions are emergencies and special circumstances such as out-of-area urgent care and dialysis.

Our Medicare Advantage HMO members can also get covered care at Kaiser Permanente facilities outside the Washington region. This includes Oregon, California, Hawaii, Colorado, Maryland, Georgia, Virginia, and Washington, D.C. Before seeking care in other Kaiser Permanente regions, call Member Services to set up visiting member access.

Once you’ve chosen a doctor and registered for online services at the Kaiser Permanente member website at kp.org/wa, complete your
Health Profile. This health questionnaire gives you a personalized health assessment and gives you and your doctor insight into your current health status.

Get the care you need
Now that you have a doctor and have completed your Health Profile, make an appointment. It’s easy; just call your doctor’s office. Or, if your doctor practices at Kaiser Permanente, you can go online or use the Kaiser Permanente Washington mobile app to request an appointment. Remember that you’re covered for preventive care services, including well-care immunizations and a range of health screenings, so be sure to see your doctor for this care. Specific copay and coinsurance costs, and a list of covered preventive care services, are detailed in your Evidence of Coverage.

New member helpline
If you’re in the middle of treatment with your current providers and pharmacy and would like assistance in your transition to Kaiser Permanente, call 206-630-0029 or 1-888-844-4607. Our dedicated new member team will help you transition your care and prescriptions. You can also read more about transferring prescriptions on page 6.

No matter where you are or what day of the week it is, the Consulting Nurse Service is available 24 hours a day. Call 1-800-297-6877 or 206-630-2224 anytime to get advice and answers to your medical questions. Experienced registered nurses work directly with an on-site physician.
Self-referrals

Seeing a specialist
Much of specialty care doesn’t require a referral from your personal primary care physician, but there are exceptions. Here’s how specialty care works with the different physician groups:

• **Kaiser Permanente physicians**
  You can get specialty care from many specialists at Kaiser Permanente medical offices without a referral by calling the specialist’s office directly, or by calling Member Services. You can find a complete list of physicians in the provider directory.

• **Other specialists in the network**
  A referral may be required from your personal doctor for specialty care from doctors who are in the Medicare Advantage network and do not practice at Kaiser Permanente medical offices.

Notes about specific services
The information below answers some common questions about coverage and referrals. Coverage varies, so check your Evidence of Coverage for details. See the provider directory for locations for these and other services.

• **Audiology/hearing care**
  You can self-refer for a hearing evaluation from a Kaiser Permanente Audiology/Hear Center. Following the hearing evaluation, you’re eligible for a visit with a Hear Center audiologist to discuss your options. Some of our plans include coverage for hearing hardware.

• **Mental health and chemical dependency (Behavioral Health Access Services)**
  While you don’t need a referral from your personal physician to get mental health and chemical dependency services, Behavioral Health Access Services coordinates and authorizes this care. If you’re a first-time patient, call 1-888-287-2680.

• **Vision care**
  Routine eye exams are covered by our plans, and some of our plans also provide coverage for vision hardware. Where available, go to a Kaiser Permanente Eye Care location. In areas not served by Kaiser Permanente staff doctors, contracted eye care providers serve Medicare Advantage members.

• **Women’s health care**
  Women can self-refer for routine gynecological care and general preventive care, such as Pap tests and breast exams.

• **Complex Case Management Program**
  Eligible patients with multiple health conditions work with a registered nurse who can help them understand and cope with their health concerns, learn about available resources, and become an active participant in their health care.
  To see if you’re eligible for this program, call Care Management at 1-866-656-4183.

• **Get a ride**
  At no additional cost, Medicare Advantage members with Basic, Vital, Essential, Optimal, or Columbia plans in covered areas can schedule transportation to medical and dental appointments or to shop for medical supplies. Call at least three days in advance. A driver will pick you up, take you to your destination, and if you have arranged a return trip, bring you back.
  To schedule, call Access2Care anytime at 1-877-828-4512 or TTY WA Relay 1-800-833-6388 or 711.
Our Medicare Advantage HMO plans provide access to a choice of doctors in our network who all accept Medicare Advantage patients. Please refer to the map on the opposite page and the list below, or visit our provider directory to find a doctor or facility nearest you. You can also switch to a different network doctor at any time.

In addition to more than 1,000 Kaiser Permanente providers, there are thousands of additional in-network community providers who meet our high standards for care and are available to provide primary care, specialty care, and alternative care across Washington state. The network includes both individuals and institutions, clinicians to cover virtually every medical need, and at least one major hospital in every community. Some services require prior authorization.

Locations where you’ll find community doctors who are part of our Medicare Advantage HMO network:

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<tr>
<th>Anacortes</th>
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<th>Mount Vernon</th>
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<td>Cheney</td>
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<td>Coupeville</td>
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<td>Eastsound</td>
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For the most up-to-date list of our providers, visit [kp.org/wa/medicare/providers](http://kp.org/wa/medicare/providers). The provider network may change at any time. You will receive notice when necessary.
Locations where you’ll find Kaiser Permanente physicians

Kaiser Permanente doctors come from medical schools and hospitals that include Johns Hopkins, Cleveland Clinic, Mayo Clinic, Harvard, and University of Washington.¹ They practice in locations across Puget Sound and Spokane, and offer nearly 60 specialties. Physicians, nurses, and other specialists all work together to keep you healthy – connected to each other and to you through our electronic medical record.

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¹ Source: Credentialing (Employed MD and DO Education Data), June 2017.
² Some Kaiser Permanente Spokane locations were formerly named Columbia Medical Associates.
What’s covered
Most of our Medicare Advantage HMO plans include Part D prescription drug coverage (the Basic plan does not), so you’re covered for outpatient prescription drugs. If you have retiree coverage through a plan offered by your employer (a group plan), your outpatient prescription drug coverage may be different.

Your plan has a drug “formulary,” which is a list of generic and certain brand-name drugs that are covered by your plan. In most cases, we cover only medications on the formulary. If your personal physician determines that you need a particular drug that is not on the formulary, your doctor’s request will be reviewed and the drug may be covered. Copay or coinsurance may apply.

What’s not covered
- Nonprescription or over-the-counter medicines
- Cosmetic or hair-growth medicines
- Drugs for weight loss or gain
- Drugs for symptomatic relief of cough and cold
- Prescription vitamins and minerals
- Sexual or erectile dysfunction drugs
- Drugs used to promote fertility
- Drugs that Medicare will not cover (Members must pay the full cost of these drugs. Contact Member Services for additional information.)

Filling your prescriptions
You can fill your prescriptions at a Kaiser Permanente pharmacy or at a network pharmacy (see the provider directory).

If you need a new prescription when your regular pharmacy is closed, you can try to fill the prescription at another pharmacy in your plan’s network. If that’s not possible, you can fill the prescription at the pharmacy of your choice, pay the full cost of the drug, and then submit a claim to be considered for reimbursement. Depending on the medication you need, prescriptions will be filled for a 90-day or 30-day supply at one time at Kaiser Permanente pharmacies and at participating network pharmacies.

Note: Tier 5 drugs can only be filled for a 30-day supply.

Get refills delivered to you
You can refill most regular medications and have them mailed to your home with no shipping or handling fees by using our mail order pharmacy.

If you are now getting your prescriptions filled at non-Kaiser Permanente pharmacies, first you’ll need to transfer your prescriptions into the Kaiser Permanente pharmacy system. You can do this online, or by calling the Kaiser Permanente mail order pharmacy, 1-800-245-7979.

Once your prescriptions are transferred, you have several options for setting up mail-order delivery.

- **Online:** First, register with the Kaiser Permanente member website at kp.org/wa and complete a one-time ID verification process. Then, to complete your request, go to kp.org/wa/pharmacy and click Mail Order Services.
• **Mail or fax:** Call for a mail-order request form, complete it, and drop it in the mail or fax it to **206-630-7950**.

• **Phone:** To order refills, call the mail order pharmacy, **1-800-245-7979**, 24 hours a day. You’ll need your prescription number (the 11-digit number on the label), your member ID number, and your credit card number.

Deliveries can take up to 10 business days, although in most cases they arrive sooner. If your order does not arrive within 10 days, call **1-800-245-7979** or TTY Relay **711**, Monday through Friday, 8 a.m. to 6 p.m.; Saturday through Sunday, 8 a.m. to 4:30 p.m.

**About drug restrictions**
We apply restrictions to some drugs to help you use them safely and effectively.

• For certain drugs, you or your provider need to get approval, known as “prior authorization,” from us before we will agree to cover those drugs for you. Without an approval, your drug may not be covered.

• In some cases, you are required to try a less costly – but just as effective – drug before we’ll cover the more expensive drug. This requirement is called “step therapy.”

• For certain drugs, we limit the amount of the drug that you can have each time you fill your prescription. For example, if it is normally considered safe to take only one pill per day for a certain drug, we may limit coverage for your prescription to no more than one pill per day.

**OptumRx – your pharmacy claims manager**
If your plan includes Medicare Part D, you can sign on to the OptumRx website to see your prescriptions and claim history.

You can also look up pricing information and find pharmacies in your network.

First, sign on at [kp.org/wa](http://kp.org/wa) and find Pharmacy Services. Then, to use OptumRx services you’ll need to:

1. Register for an account on the OptumRx website.
2. Log in with the user ID and password you create, then check out the site’s features.
Urgent care

An urgent care situation is one that does not pose an immediate, serious health threat, but does require prompt medical attention within 24 hours of its onset. Some conditions that might be urgent are:

- Stomach or abdominal pain
- Urinary tract infections
- Cuts that might require stitches
- Minor injuries such as sprains
- Respiratory infections

For urgent care during the day, call your personal physician’s office or the Consulting Nurse Service to get immediate advice. You’ll be directed to the nearest facility, when necessary.

For urgent care after business hours, on weekends, or on holidays, call the Consulting Nurse Service for assistance to make sure you don’t incur unnecessary expenses. Kaiser Permanente has several locations that offer urgently needed care services during evening and weekend hours. Some are open 24/7. When you’re out of our service area, you’re covered for urgently needed care worldwide.

Emergency care

If you’re having a medical emergency, get care immediately. Call 911 or your local emergency number and ask for an ambulance if you need it. You don’t need approval or a referral from your personal physician.

You have worldwide coverage for emergency care. If you’re traveling, be sure to find out what the local emergency number is – it’s not always 911.

What is an emergency?
Emergency medical conditions include those that make you feel you need immediate medical attention to avoid a serious threat to your body or your health. These conditions may include:

- Severe pain
- Suspected heart attack or stroke
- Sudden or extended difficulty in breathing
- Bleeding that will not stop
- Major burns
- Seizures
- Sudden onset of severe headache
- Suspected poisoning

Costs and coverage
Most emergency room visits require a copay. Emergency ambulance service is also a covered benefit that may require a copay. Nonemergency ambulance service requires prior authorization from your health plan. Check your Evidence of Coverage or retiree employer group benefits booklet to find out about your costs for emergency care and get details about ambulance service.
Care while traveling

In addition to emergency and urgently needed care being covered worldwide, you can use your “visiting member” privileges at additional Kaiser Permanente medical facilities in the United States.

You can get covered care at Kaiser Permanente facilities outside the Washington region. This includes Oregon, California, Hawaii, Colorado, Maryland, Georgia, Virginia, and Washington, D.C.

Before seeking services from Kaiser Permanente in other parts of the country, call Member Services to set up visiting member access.

For unexpected health issues, you can also call the 24/7 Consulting Nurse helpline for assistance. The nurse can assess your symptoms and advise you on next steps.

Hospitalization

If you need to be admitted to a hospital, your personal physician will refer you to a facility in your plan’s network. You can find a complete list of the hospitals Kaiser Permanente contracts with in the provider directory. Major hospitals and medical facilities in your plan’s network include:

In Western Washington
- Swedish Hospital Medical Centers at First Hill and Cherry Hill in Seattle
- Overlake Medical Center in Bellevue
- CHI Franciscan St. Joseph Medical Center in Tacoma
- PeaceHealth St. Joseph Medical Center in Bellingham
- Providence St. Peter Hospital in Olympia
- Providence Regional Medical Center in Everett
- Island Hospital in Anacortes

In Eastern Washington
- Providence Holy Family Hospital in Spokane
- Providence Sacred Heart Medical Center & Children’s Hospital in Spokane
- Valley Hospital in Spokane Valley

If you’re admitted to a nonparticipating facility in an emergency, you or a family member must call the Notification Line at 1-888-457-9516 within 24 hours or as soon as reasonably possible following the emergency. After your situation is under control, your personal physician may be contacted if you require follow-up care.
Dental care

Dental coverage is optional for individual Medicare Advantage members. If you chose dental coverage when you elected your Medicare Advantage plan, your Delta Dental Premier plan is provided by Delta Dental of Washington.

The dental plan is designed to provide you with full coverage for your semiannual dental checkups when you see a Delta Dental Premier provider, so dental health problems can be detected early. If your dentist finds that treatment beyond a checkup is needed, your plan also provides coverage toward basic restorative care, as well as for major expenses such as crowns, bridges, and dentures. The dental plan doesn’t have an out-of-network benefit, but does let you choose from a large network of dentists. If you have questions about your dental plan, contact Delta Dental at 1-800-554-1907 or visit deltadentalwa.com.

Online tools

The Kaiser Permanente member website at kp.org/wa gives you access to online health information, tools, and services that make health care accessible and convenient, 24 hours a day.

To get started, go to kp.org/wa/register and set up your account.

All members:
• Choose your doctor
• Order prescription refills
• Take a health risk assessment
• Review your health plan usage status
• View your coverage documents
• Browse a library of thousands of health topics
• Email Member Services
• Online visits for quick diagnosis and prescriptions for certain non-urgent conditions

Available only when you receive primary care at Kaiser Permanente medical offices locations:
• Schedule an appointment
• Email your health care team for non-urgent matters
• See lab and test results
• Check your allergies and immunizations
• Access your online medical record
• Review after-visit summaries
• Access these services on the go with our mobile app

The Kaiser Permanente website for members is a secure website. The privacy of your personal health information is always a top priority at Kaiser Permanente.
Call Member Services or go online for information about these resources and discounts. All contact information is listed on page 20.

**Kaiser Permanente Resource Line**
The Resource Line provides information about health education, fitness classes, community resources, senior services, and support groups in your area. For more information, email the Resource Line at resource.l@ghc.org, or call 206-326-2800 or 1-800-992-2279.

**SilverSneakers® Fitness**
Take fitness classes taught by certified instructors at local participating fitness centers, or hit the weights, stationary bikes, and treadmills at your own pace. Classes, walking groups, and other programs are also available through SilverSneakers® FLEX™ at recreation centers, older-adult communities, and local parks. Enrollment is automatic when you’re a Kaiser Permanente Medicare Advantage HMO member. To find a participating facility, visit silversneakers.com.

**Enhance® Fitness**
These one-hour fitness classes, led by nationally certified instructors, are available at no additional cost to Kaiser Permanente Medicare Advantage plan members. If you are unable to stand, you are welcome to sit while exercising.

The National Council on Aging has honored EnhanceFitness as one of the top 10 physical activity programs for older adults in the United States.

EnhanceFitness classes are offered at Kaiser Permanente facilities as well as participating senior centers and community centers. Enrollment is automatic when you’re a Kaiser Permanente Medicare Advantage HMO member.

To see a list of classes, times, dates, and locations, visit the projectenhance.org website and click Locations.

**Complementary Choices℠**
Access noncovered alternative care services beyond your covered benefit at a discount, including acupuncture, naturopathy, chiropractic care, massage therapy, yoga, Pilates, tai chi, and personal trainers.

**Classes, workshops, and support groups**
We offer programs ranging from preparing advance directives to living with chronic conditions such as diabetes, arthritis, and heart disease. Call the Resource Line for details.

**Tobacco cessation support**
The nationally recognized Quit For Life Program is designed to help tobacco users quit for good at no additional cost. Available by phone or online.

Call 1-800-462-5327 to register or go to quitnow.net/kpwa.

* These products and services are neither offered nor guaranteed under our contract with the Medicare program. In addition, they’re not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the Medicare Advantage grievance process. If a problem arises with any of the services listed in this section, please call Member Services.
**Access to new treatments**
Use of experimental, unproven methods of treatment may lead to unintended negative health outcomes. We have a rigorous process in place to evaluate the effectiveness of experimental treatments. We also require that a new test, technology, or treatment has an established body of scientific evidence that supports it before encouraging patients and doctors to use it. Such treatments are reviewed by medical, legal, administrative, coverage, and member teams.

**Advance directives**
You have the right to make decisions about your care at the end of life by using advance directives. The goal of advance directives is to allow you to make such decisions when you are healthy – not when you are ill and under stress. It also allows you to designate whom you would like to make health care decisions for you if you are unable to. An advance directive can take the form of a living will (Directive to Physicians) or a durable power of attorney. Both are written documents. You should discuss these decisions with your doctor and family members ahead of time. For more information, and to get the forms you need plus a booklet to help you understand advance directives, call the Resource Line at 206-326-2800 or 1-800-992-2279.

**Appeals**
An “appeal” is a formal way of asking us to review and change a coverage decision we’ve made. You have the right to appeal any coverage decision. The type of appeal and time frame for resolution depend on what is being denied. We’ll tell you how to appeal in the letter we send you explaining our denial decision. We quickly review appeals involving urgently needed care and act as fast as necessary, given the clinical urgency of the condition. Clinically urgent reviews will take no longer than 72 hours.

**Claims**
You can be reimbursed for covered care received out of network when these steps are followed:
1. Download claim forms at kp.org/wa/forms or ask Member Services for forms.
2. Fill out the form.
3. Mail it to the appropriate address below, along with an itemized statement from the provider, describing the services received, and valid proof of payment.

- **Send claims for Medicare Advantage Part C services to:**
  Kaiser Permanente Claims Administration
  P.O. Box 34585
  Seattle, WA 98124-1585

  Some examples of Part C services include urgent care visits and doctor visits while traveling outside of the Kaiser Permanente Washington region service area.

- **Send claims for Medicare Advantage Part D (prescription drug) services to:**
  OptumRx
  P.O. Box 968021
  Schaumburg, IL 60196-8021

  Examples of Part D services are prescriptions filled at pharmacies for emergency or urgent situations while outside the Kaiser Permanente Washington region service area.

continues
Check your Evidence of Coverage for additional information. If you need more claim forms, please call Member Services.

**Compliments, concerns, and complaints**
Your compliments, concerns, complaints, and questions help us provide high-quality care and service. To share your opinions, contact Member Services or the medical facility or hospital where you received care.

**Privacy**
Kaiser Permanente and our contracted providers and facilities will protect the privacy of your protected health information (PHI). Your PHI is individually identifiable information about your health, health care services you receive, or payment for your health care. You may generally see and receive copies of your PHI, correct or update your PHI, and ask us for an accounting of certain disclosures of your PHI. Find our complete Notice of Privacy Practices and some other legally required disclosures at [kp.org/wa/disclosure](http://kp.org/wa/disclosure).

**Provider compensation, incentives, and additional financial information**
Call Member Services to obtain information about provider compensation or the financial condition of Kaiser Foundation Health Plan of Washington’s plan, including a summary of the most recently audited statements.

Kaiser Permanente is committed to providing appropriate, comprehensive, coordinated care to members. Our goal is to deliver high quality care in an appropriate setting, at the right time, by the most appropriate clinician. While we don’t cover every kind of treatment or procedure (no health plan does), we never use “gag rules” to prohibit doctors from discussing recognized medical alternatives with their patients. Decisions for applying members’ benefit coverage are based only on the appropriateness of care and service. Kaiser Permanente does not have any financial incentives or penalties that encourage doctors or other clinicians to withhold medically necessary services or issue coverage denials.

Kaiser Permanente does not specifically reward, hire, promote, or terminate doctors or any other individuals for issuing coverage denials for needed care or service.

**Quality Improvement Program**
Each year we develop an annual work plan to guide our efforts to improve the quality of patient care. Go online to [kp.org/wa](http://kp.org/wa) or call Member Services to find or request the Quality Plan and Program Description report.

**Renal dialysis outside service area**
You have coverage for dialysis services when you are temporarily outside of the Medicare Advantage (HMO) service area. Please talk to your provider so that we can make travel dialysis arrangements for you.

**Senior Caucus**
Join other seniors to stay informed, ask questions, and advocate for your health care concerns. For information, call the Resource Line at 1-800-992-2279.
Your rights and responsibilities

As a Kaiser Permanente consumer, you have the right to:

- Be treated with respect and dignity by all Kaiser Permanente staff.
- Be assured of privacy and confidentiality regarding your health and your care.
- Have access to details about your rights and responsibilities as a patient and consumer.
- Be able to access information about Kaiser Permanente, our practitioners and providers, and how to use our services.
- Receive timely access to quality care and services.
- Have access to information about the qualifications of the professionals caring for you.
- Participate in decisions regarding your health care.
- Give informed consent to receive — or to refuse — care, and be told the consequences of consent or refusal.
- Have an honest discussion with your practitioner about all your treatment options, regardless of cost or benefit coverage, presented in a manner appropriate to your medical condition and ability to understand.
- Join in decisions to receive, or not receive, life-sustaining treatment including care at the end of life.
- Create and update your advance directives and have your wishes honored.
- Have your family provide input to care decisions consistent with your advance directives or with court orders.
- Choose a personal primary care physician affiliated with your health plan.
- Expect your personal physician to provide, arrange, and/or coordinate your care.
- Change your personal physician for any reason.
- Be educated about your role in reducing medical errors and the safe delivery of care.
- Be informed of unanticipated outcomes.
- Appeal a decision and receive a response within a reasonable amount of time.
- Suggest changes to consumer rights and responsibilities and related policies.
- Receive written information in prevalent non-English language (as defined by the State).
- Receive oral interpretation services free of charge for all non-English languages, and sign or tactile interpretation services for hearing-, sight-, and speech-impairments.
- Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation.
- Protection from all forms of abuse, neglect, harassment, or discrimination.
- Have access to protective services.
- Be free from discrimination, reprisal, or any other negative action when exercising your rights.
- Request and receive a copy of your medical records, and request amendment or correction to such documents, in accordance with applicable state and federal laws.
- Voice opinions, concerns, positive comments, complaints or grievances about your care, treatment or other services without fear of retribution or denial of care and receive timely resolution of your complaint. You may also contact the following agencies: Washington State Department of Health
Your responsibilities as a Kaiser Permanente consumer are to:

• Provide accurate information, to the extent possible, that Kaiser Permanente and your practitioner require to care for you or to make an informed coverage determination. This includes your health history and your current condition. Kaiser Permanente also needs your permission to obtain needed medical and personal information. This includes your name, address, phone number, marital status, dependents’ status, and names of other insurance companies.

• Use practitioners and providers affiliated with your health plan for health care benefits and services, except where services are authorized or allowed by your health plan, or in the event of emergencies.

• Know and understand your coverage, follow plan procedures, and pay for the cost of care not covered in your contract.

• Understand your health needs and work with your personal physician to develop mutually agreed upon goals about ways to stay healthy or get well when you are sick.

• Understand and follow instructions for treatment, and understand the consequences of following or not following instructions.

• Be active, informed, and involved in your care, and ask questions when you do not understand your care or the payment for the care or what you are expected to do.

• Be considerate of other members, your health care team, and Kaiser Permanente. This includes arriving on time for appointments, and notifying staff if you cannot make it on time or if you need to reschedule.

Questions?
Please contact Member Services at 1-888-901-4600 or TTY WA Relay 1-800-833-6388 or 711, 8 a.m. to 8 p.m., 7 days a week. Or email info@ghc.org.

For more information about member rights, visit kp.org/wa.
Kaiser Permanente Nondiscrimination Notice and Language Access Services

KAISER PERMANENTE NONDISCRIMINATION NOTICE
Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. ("Kaiser Permanente") comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity. Kaiser Permanente does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

Kaiser Permanente:
Provides free aids and services to people with disabilities to communicate effectively with us, such as:
• Qualified sign language interpreters
• Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:
• Qualified interpreters
• Information written in other languages

If you need these services, contact Kaiser Permanente Member Services.

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, sex, sexual orientation, or gender identity, you can file a grievance by phone, mail, fax, or email. If you need help filing a grievance, a Kaiser Permanente Member Services Representative is available to help you. Language assistance is provided free of charge. The Kaiser Permanente Civil Rights Coordinator will be notified of all grievances related to discrimination on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

Phone: 206-630-4636
Toll-free: 1-888-901-4636
TTY Washington Relay Service: 1-800-833-6388 or 711
TTY Idaho Relay Service: 1-800-377-3529 or 711
Fax: 206-901-6205 or toll-free 1-888-874-1765
Address: Kaiser Foundation Health Plan of Washington
Civil Rights Coordinator, Quality GNE-D1E-07
P.O. Box 9812
Renton, WA 98057-9054
Email: csforms@ghc.org

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

For Medicare Advantage Plans Only: Kaiser Permanente is an HMO plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal.

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LANGUAGE ACCESS SERVICES

English: ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-888-901-4636 (TTY: 1-800-833-6388 or 711).


Note: 레HK001444-55-17
CONTACT INFORMATION

Member Services
For answers to most questions, call 1-888-901-4600 or 206-901-4600, or TTY WA Relay 1-800-833-6388 or 711, 8 a.m. to 8 p.m., 7 days a week.

Care Management
To see if you’re eligible to work with a registered nurse to better control your health conditions, call 1-866-656-4183.

Consulting Nurse Service
Call 1-800-297-6877 or 206-630-2244 for 24-hour health advice from experienced registered nurses.

Delta Dental of Washington
If you’ve elected this coverage, call Delta Dental at 1-800-554-1907, Monday through Friday, 8 a.m. to 5 p.m. with questions, or go online to deltadentalwa.com.

Drug Formulary
This list of drugs that are covered by your plan is online at kp.org/wa/medicare/formulary.

Hospital admission (Notification Line)
If you’re admitted to an out-of-network hospital, call the Notification Line at 1-888-457-9516 within 24 hours, or as soon as possible after admittance.

Interpretive Services
Professional language interpreters are available in any language, free of charge. For assistance, call Member Services.

Mail-Order Pharmacy
Have your prescription refills mailed to you at no additional cost. Order online at kp.org/wa, call 1-800-245-7979, or fax your mail-order request form to 206-630-7950.

Mental health and chemical dependency (Behavioral Health Access Services)
If you’re a first-time patient, call 1-888-287-2680. For follow-up visits, call your provider’s office.

Provider Directory
The online directory is at kp.org/wa/medicare.
If you prefer a printed copy, go to kp.org/wa/medicare/providers and fill out a short online form to request that a directory be mailed to you. You may also call Member Services or email medicare@ghc.org.

Resource Line
Call 1-800-992-2279 to get information on health education, community resources, senior services, and support groups in your area.

SilverSneakers® Fitness
Find a participating facility near you at silversneakers.com.

Tobacco cessation (Quit For Life® Program)
Call 1-800-462-5327 to register or go to quitnow.net/kpwa.

TTY WA Relay
Members who are hearing- or speech-impaired can call 1-800-833-6388 or 711, 8 a.m. to 8 p.m., 7 days a week, to access Kaiser Permanente department staff, Member Services, or Delta Dental of Washington.

Vision services (Kaiser Permanente Eye Care)
To find a location near you go online to kp.org/wa/provider-directory and click Eye Care, or call Member Services. To make an appointment call 1-800-664-9225.
For other providers available with your plan, call Member Services or visit kp.org/wa/medicare.
QUESTIONS?
Call Member Services at 1-888-901-4600
(TTY WA Relay 1-800-833-6388 or 711),
8 a.m. to 8 p.m. 7 days a week.
Or visit kp.org/wa/medicare.

Kaiser Permanente is an HMO plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums, and/or copayments/coinsurance may change on January 1 of each year and for group members, at other times in accord with your group’s contract with us. You must continue to pay your Medicare Part B premium and any other applicable Medicare premium(s), if not otherwise paid by Medicaid or another third party. The Formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary. If you enroll in an MA or MAPD plan, you may not enroll in a stand-alone Part D prescription drug plan unless you disenroll from your MA plan. Contact Kaiser Permanente for more information.

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