

TRAVELING AS A KAISER PERMANENTE MEMBER:
VISITING MEMBER SERVICES



Stay healthy on the go

Getting the care you need while traveling
in other Kaiser Permanente regions or Group
Health Cooperative service areas



KAISER PERMANENTE®

What to know before you go

Harness the power of prevention and take time—before you leave town—to prepare for a healthy trip. Here’s a convenient checklist to help you get ready:

- **Schedule a routine checkup** if you haven’t had one in the past year.
- **Catch up on vaccinations.** Ask your doctor about any recommended immunizations.
- **Stock up on prescriptions.** Make sure you pack enough medication to last you through your trip.
- **Don’t forget sunscreen,** insect repellent, or other important items.
- **Plan for exercise** and don’t forget to pack some workout clothing.
- **Boost your immune system** by keeping healthy snacks and vitamins on hand, and getting lots of rest.
- **Read this brochure** to learn about visiting member services. (Check the chart on pages 5 and 6 for types of coverage to which this brochure may not apply.)
- **Carry your Kaiser Permanente ID card** with you at all times and keep this brochure as a handy reference in case you need care.

HEALTH ON THE MOVE

Life is full of movement. You might head in different directions to visit family, friends, or any number of unique destinations across the country. Fitting it all in can be a challenge, but it’s much easier when you’re at your healthiest. To stay healthy while traveling, get preventive services before you leave town and plan for any special accommodations you’ll need. But if you do have unexpected health challenges while you’re away from home, visiting member services may be of aid.

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What are visiting member services?

Visiting member services provide members with access to certain routine and specialty health services while they are temporarily visiting a Kaiser Permanente region other than their home region (the region in which they are enrolled). These services also make it possible for members with chronic conditions to get ongoing care while traveling in those regions.

Outside of Kaiser Permanente regions, you can also access visiting member services in parts of Washington state and northern Idaho—through our collaboration with Group Health Cooperative (GHC).^{*} For more information, including locations, visit ghc.org/about_gh/index.jhtml.

^{*}Group Health Cooperative is a consumer-governed, nonprofit health care system that coordinates care and coverage. Founded in 1947 and based in Seattle, Washington, Group Health and its subsidiary health carriers, Group Health Options, Inc., and KPS Health Plans, serve more than 600,000 residents of Washington state and Idaho.

Who is eligible?

You may qualify for visiting member services if you are

- temporarily traveling up to 90 days in a Kaiser Permanente region other than your home region (where you are enrolled), or
- temporarily traveling up to 90 days in a GHC service area (in parts of Washington state and northern Idaho).

Services may vary for different plans. Members enrolled in certain plans may not be eligible for visiting member services. See the chart below for these exceptions.

YOUR PLAN	WHAT TO DO
Medicare If you have Medicare coverage through Kaiser Permanente, the information in this brochure does not apply to you.	Please contact your Medicare Member Service Call Center for details on your Medicare benefits.
Medicaid (including Medi-Cal and similar programs) If you have Medicaid coverage, you might not be eligible for visiting member services, or services may differ from those described here.	Please call Member Services in your home region for more information.
Deductible plans with HSAs or the Federal Employee Health Benefits (FEHB) High Deductible Health Plan (HDHP) You are not eligible for visiting member services if you are enrolled in a deductible plan for use with a health savings account (HSA) or the FEHB High Deductible Health Plan.	If you're enrolled in one of these plans in either the Northern California or Southern California region, you may receive visiting member services in the other California region.

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YOUR PLAN	WHAT TO DO
Self-funded plans If you're enrolled in an employer's self-funded plan (including those with an HSA), your visiting member services may differ from those described here.	For more information, call the Customer Service number on the back of your Plan ID card or see your Summary Plan Description.
Kaiser Permanente Insurance Company (KPIC) plans Visiting member services do not apply to most KPIC plans.	If you have point-of-service coverage that includes KPIC coverage, you can access visiting member services for the Kaiser Foundation Health Plan HMO (tier 1) portion of your benefits only. See your <i>Explanation of Coverage (EOC)</i> for more information.

What services are available?

You can receive the following visiting member services when provided or referred by a Plan physician in the Kaiser Permanente region or GHC service area you are visiting (subject to the exclusions and preauthorization requirements that follow this list):

INPATIENT SERVICES

- Hospitalization, including inpatient surgery and other services you receive while admitted

OUTPATIENT SERVICES

- Office visits
- Outpatient surgery
- Allergy tests and allergy injections
- Physical, occupational, and speech therapy (up to two months per condition)
- Prenatal and postnatal care
- Dialysis care
- Chemotherapy

X-RAY AND LABORATORY SERVICES

In or out of the hospital

PRESCRIPTION DRUGS

Available if the drug would be covered for you in your home region

MENTAL HEALTH AND CHEMICAL DEPENDENCY SERVICES

Available under the same terms and conditions as in your home region

SKILLED NURSING FACILITY SERVICES

Up to 100 days per calendar year*

*Note that except for certain students, members can get visiting member services only during temporary visits of 90 days or less.



HOME HEALTH CARE SERVICES

Part-time or intermittent home health care services inside a Kaiser Permanente region or GHC service area

HOSPICE SERVICES

Home-based hospice services inside a Kaiser Permanente region or GHC service area

For Mid-Atlantic States members:

Physical, occupational, and speech therapy visiting member services differ for members enrolled in a Maryland-based contract. Please call Mid-Atlantic States Member Services for more information (see page 14).

What services need preauthorization?

Inpatient physical rehabilitation and certain other services may also be available to you as a visiting member, but you must obtain preauthorization for these services from your home region.

Other services may also require preauthorization from the region or service area you're visiting. Please contact Member Services in the Kaiser Permanente region you'll be visiting (or GHC Customer Service if you'll be visiting a GHC service area) for more information.

Are some services excluded?

The following services are not available to you as a visiting member. (Services include equipment and supplies.)

- Services that are not covered in your home region as described in your *Evidence of Coverage* or *Member Handbook*
- Services that are not medically necessary
- Physical examinations and related services for insurance, employment, or licensing
- Dental services and dental X-rays
- Infertility services
- Services related to conception by artificial means, such as in vitro fertilization
- Experimental services and all clinical trials
- Cosmetic surgery and other services performed primarily to change appearance
- Custodial care and care provided in an intermediate care facility
- Services related to sexual reassignment
- Organ transplants and related services
- Complementary and alternative medicine services, such as chiropractic services



- Services you receive as a result of a written referral from a Plan physician in your home region*
- Emergency services (including emergency ambulance services) and urgent care services*
- Durable medical equipment, orthotics and external prosthetics, eyeglasses, and hearing aids

*Emergency, urgent care, and services you receive as a result of a written referral from a Plan physician in your home region are included under your regular benefits even when you receive them outside of your home region. Please call Member Services in your home region for more information. If you are enrolled in an employer's self-funded plan, call the Customer Service number on the back of your Plan ID card.

How do I get care?

To arrange for services, call Member Services in the Kaiser Permanente region you are visiting and tell the representative you are a visiting member. He or she will give you all the information you need to make an appointment, including the Plan facility or physician name, phone number, and location.



If you are visiting a GHC service area, call GHC Customer Service to schedule an appointment or get location information.

Phone numbers are listed in the back of this brochure for your convenience. If you are enrolled in an employer's self-funded plan, call the Customer Service number on the back of your Plan ID card.

What costs are involved?

You may have to make out-of-pocket payments for visiting member services, which may be different from the copayments, coinsurance, or deductibles that you would pay in your home region.

How long are services available to me?

Visiting member services are limited to 90 days. The 90-day limit does not apply to members attending accredited colleges or accredited vocational schools, but you might need to show proof of student enrollment status.

If you are not an FEHB member, and you permanently move to another Kaiser Permanente region or GHC service area, or visit one for more than 90 days in a row, you may not be able to continue your home region membership. You may be able to enroll in a Kaiser Permanente or GHC plan in the region or service area of your new residence.

Who do I call about visiting member services?

For more information about visiting member services, please refer to your *Evidence of Coverage* or *Member Handbook* or contact Member Services in your home region. For information about GHC service areas, call GHC Customer Service. Phone numbers are listed below.

If you are enrolled in an employer's self-funded plan, please see your Summary Plan Description or call the Customer Service number on the back of your Plan ID card for more information.

CALIFORNIA

(Northern and Southern California Regions)

1-800-464-4000

1-800-777-1370 (TTY)

Mon.–Fri., 7 a.m.–7 p.m.

Sat.–Sun., 7 a.m.–3 p.m.

Note: If you are seeking services from a contracted non-Kaiser Permanente provider in Coachella Valley (Palm Desert, Palm Springs, Desert Hot Springs, Indio) in California, you may be required to contact your primary care physician in your home region to obtain an approved referral.

COLORADO

Denver/Boulder area

303-338-3800 (from Denver Metro area)

1-800-632-9700 (from other areas)

303-338-3820 (TTY, from Denver Metro area)

1-800-521-4874 (TTY, from other areas)

Mon.–Fri., 8 a.m.–5 p.m.

Southern Colorado area (including Colorado Springs, Pueblo, and Cañon City metro areas)

1-888-681-7878

1-800-521-4874 (TTY)

Mon.–Fri., 8 a.m.–5 p.m.

Note: You need a Southern Colorado ID number and primary care physician assignment to receive routine, follow-up, or non-emergency care in the Southern Colorado service area. Please call Southern Colorado Member Services for more information.

DISTRICT OF COLUMBIA

(Mid-Atlantic States Region)

301-468-6000 (from D.C. metro area)

1-800-777-7902 (from other areas)

301-879-6380 (TTY)

Mon.–Fri., 7:30 a.m.–5:30 p.m.

GEORGIA

Atlanta Metro area

404-261-2590 (from Atlanta Metro area)

1-888-865-5813 (from other areas)

1-800-255-0056 (TTY)

Mon.–Fri., 7 a.m.–7 p.m.

HAWAII

*Oahu, Maui, Hawaii, Kauai, Lanai,
and Molokai areas*

808-432-5955 (from Oahu area)

1-800-966-5955 (from other areas)

1-877-447-5990 (TTY)

Mon.–Fri., 8 a.m.–5 p.m.

Sat., 8 a.m.–noon

Note: The Hawaii Region excludes ZIP codes 96718, 96772, and 96777.

MARYLAND

(Mid-Atlantic States Region)

Baltimore and suburban D.C. area

1-800-777-7902

301-879-6380 (TTY)

Mon.–Fri., 7:30 a.m.–5:30 p.m.

OHIO

Northeast area

1-800-686-7100

1-877-676-6677 (TTY)

Mon.–Thu., 8:15 a.m.–5 p.m.

Fri., 9 a.m.–5 p.m.

OREGON

(Northwest Region)

1-800-813-2000

1-800-735-2900 (TTY)

1-800-324-8010 (language interpretation)

Mon.–Fri., 8 a.m.–6 p.m.

VIRGINIA

(Mid-Atlantic States Region)

Northern area

1-800-777-7902

301-879-6380 (TTY)

Mon.–Fri., 7:30 a.m.–5:30 p.m.

WASHINGTON STATE

(Northwest Region)

Southwest area

1-800-813-2000

1-800-735-2900 (TTY)

Mon.–Fri., 8 a.m.–6 p.m.

Group Health Cooperative (GHC)

Customer Service (all areas):

1-888-901-4636

1-800-833-6388 (TTY)

Mon.–Fri., 8 a.m.–5 p.m.

Note: Phone numbers beginning with **1-800**, **1-866**, **1-877**, or **1-888** are toll free. TTY numbers are for the deaf, hard of hearing, or speech impaired.

Terms of visiting member services are subject to change: Kaiser Permanente may change the terms, conditions, and eligible service areas of visiting member services at any time. If you have any questions, please call Member Services in your home region. If you are enrolled in an employer's self-funded plan, please call the Customer Service number on the back of your Plan ID card.

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