

A better choice for good health

Nationwide, over 9 million people turn to us as their trusted partner for better-informed care and support for total health. Take a look, and you'll see why Kaiser Permanente is your best choice.

CalPERS members:

Join Kaiser Permanente!

Open enrollment is September 16 through October 11, 2013.



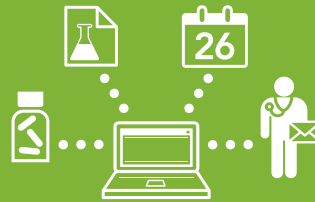
your choice of top doctors

Our doctors are among the best, and caring for people is their passion. Plus, you've got the power to change doctors anytime.



excellent, personalized care

Your doctors, nurses, and specialists are connected to your electronic health record, so they can work together to deliver informed care that's right for you.



online access anytime, anywhere

Use your computer, smartphone, or mobile device to email your doctor's office, schedule routine appointments, view lab test results, refill prescriptions, and more.



under-one-roof convenience

At most locations you can see your doctor, pick up medications, and get a lab test or an X-ray without leaving the building.

To learn more about Kaiser Permanente, call us 24 hours a day, 7 days a week (closed holidays):

- ▶ **1-800-464-4000** English
- ▶ **1-800-788-0616** Spanish
- ▶ **1-800-757-7585** Chinese dialects
- ▶ **1-800-777-1370** TTY for the hearing/speech impaired

kp.org/calpers

Note: Many features discussed here are available only to members receiving care at Kaiser Permanente medical facilities.

CalPERS Summary of Benefits (1/1/2014 –12/31/2014)

These benefits reflect the 2014 contract year. For a complete explanation of benefits, exclusions, and limitations, refer to the *2014 Combined Evidence of Coverage and Disclosure Form (Evidence of Coverage)*. For details about changes to your prescription drug benefits, please see your *Evidence of Coverage*, and check with your agency for information about your monthly premiums.

Services offered	Basic Plan
Physician services	\$15 per visit
Hospital services	No charge
Emergency care	\$50 per Emergency Department visit (does not apply if you are held for observation in a hospital unit outside the Emergency Department or if you are admitted directly to the hospital as an inpatient)
X-ray and lab tests	No charge
Online resources (Available through My Health Manager at kp.org/calpers)	Email your doctor's office: No charge Take a Total Health Assessment: No charge View most lab test results: No charge Schedule routine appointments: No charge View portions of your medical record: No charge Refill prescriptions: No extra charge for delivery
Prescription drugs	\$5 generic/\$20 brand, up to a 30-day supply from a Plan pharmacy ¹ \$10 generic/\$40 brand, up to a 100-day supply by mail-order service (delivery at no extra charge) ¹ Drugs prescribed for treatment of sexual dysfunction covered at 50% coinsurance for up to a 100-day supply from a Plan pharmacy or by mail-order service (delivery at no extra charge) ²
Routine preventive care	Periodic health exam, including well-woman exam: No charge Scheduled prenatal care and first postpartum visit: No charge Well-child visits (0–23 months): No charge Vaccines (immunizations): No charge Eye refraction exam: No charge (no charge for eyeglasses or contact lenses following cataract surgery) 24-hour advice nurse: No charge
Women's preventive care services	Well-woman exams: No charge Contraceptives (prescribed contraceptive methods): No charge Breastfeeding support, supplies, and counseling: No charge
Mental health	Outpatient visits: \$15 per individual visit; \$7 per group visit Inpatient psychiatric hospitalization: No charge
Hearing services	Routine preventive hearing tests: No charge Hearing aid(s): \$1,000 allowance every 36 months
Allergy services	Allergy injection visits: No charge Allergy testing visits: \$15 per visit

¹Includes covered outpatient items in accord with our drug formulary guidelines.

²Episodic drugs prescribed for the treatment of sexual dysfunction are covered up to a maximum of eight doses in any 30-day period or 27 doses in any 100-day period.

This is only a summary of some benefits and their copays and coinsurance. Please see your *Evidence of Coverage* for more information about coverage, limitations, and exclusions for all benefits, including those not listed in this summary.