

Kaiser Renewal - Current Plan and Two Sample Options for 2015-16

Benefits	Kaiser HMO	Kaiser HMO Renewal Option 1	Kaiser HMO Renewal Option 2
Calendar Year Deductible Individual/Family	None	None	None
Annual Out-of-Pocket Maximum Individual/Family	\$1,500/\$3,000	\$1,500/\$3,000	\$1,500/\$3,000
Physician & Special Office Visit	\$10 per visit	\$15 per visit	\$20 per visit
Preventive Care	No Charge	No Charge	No Charge
Lab and X-Ray	No Charge	No Charge	No Charge
Hospitalization			
In Patient Non-emergency Facility Services	No Charge	No Charge	\$200 per admit
Outpatient surgery in a hospital	\$10 per procedure	\$15 per procedure	\$20 per procedure
Emergency Room	\$100 per visit (waived if admitted)	\$100 per visit (waived if admitted)	\$100 per visit (waived if admitted)
Ambulance	No Charge	No Charge	No Charge
Durable Medical Equipment	No Charge (In Accordance with EOC)	No Charge (In Accordance with EOC)	No Charge (In Accordance with EOC)
Mental Health			
Inpatient	No Charge	No Charge	No Charge
Outpatient	\$10 per visit	\$15 per visit	\$20 per visit
Substance Abuse			
Inpatient	No Charge	No Charge	No Charge
Outpatient	\$10 per visit	\$15 per visit	\$20 per visit
Rx	Generic Brand	Generic Brand	Generic Brand
Retail	\$5 (100 days) \$5 (100 days)	\$10 (30 days) \$20 (30 days)	\$15 (30 days) \$30 (30 days)
Mail Order	\$5 (100 days) \$5 (100 days)	\$20 (90 days) \$40 (90 days)	\$30 (90 days) \$60 (90 days)
2014-15 Rate Increase	+5.4%	TBD	TBD