2027
Summary of Benefits

Kaiser Permanente Medicare Advantage (HMO) Group plan

Plan C++ with D for persons with Medicare Parts A & B

KAISER PERMANENTE®

H2172_EG_26_72

About this Summary of Benefits

Thank you for considering Kaiser Permanente Medicare health plans. You can use this **Summary of Benefits** to learn more about our plan. It includes information about:

- Premiums
- Benefits and costs
- Part D prescription drugs
- Additional benefits
- Member discounts for products and services
- Who can enroll
- Coverage rules
- Getting care
- Medicare prescription payment plan

For definitions of some of the terms used in this booklet, see the glossary at the end.

For more details

This document is a summary. It doesn't include everything about what's covered and not covered or all the plan rules. For details, see the **Evidence of Coverage (EOC)**, which we'll notify you how to view online. If you'd like to see it before you enroll, please ask your group benefits administrator for a copy.

Have questions?

- Please call Member Services at **1-888-777-5536** (TTY **711**).
- 7 days a week, 8 a.m. to 8 p.m.

Benefits and premiums	You pay
Doctor's visits • Primary care providers	You pay $10 per office visit.
• Specialists*	You pay $10 per office visit.
Preventive care* See the EOC for details.	$0
Emergency care We cover emergency care anywhere in the world.	You pay $50 per Emergency Department visit.
Urgently needed services We cover urgent care anywhere in the world.	You pay $10 per office visit.
Diagnostic services, lab, and imaging* • Lab tests	You pay nothing.
• X-rays	You pay nothing.
• Diagnostic tests and procedures (such as EKG)	You pay nothing.
• Other imaging procedures (such as MRI, CT, and PET)	You pay nothing.
Hearing services* Exams to diagnose and treat hearing and balance issues.	You pay $10 per office visit.

Benefits and premiums	You pay
Ambulance	You pay nothing.
Transportation • Rides provided to and from a network provider by taxis, rideshare services, vans, and medical transport as determined by our designated transportation provider.	You pay $0 per one-way ride. We cover up to 24 one-way rides per calendar year for nonurgent medical appointments at Kaiser Permanente medical centers and contracted facilities. See the **EOC** for details.
• Medically necessary, non-emergency medical transportation to home (within 100 miles), a skilled nursing facility (SNF), or another higher level of care, immediately following an inpatient hospitalization or after certain emergency, urgent care, or outpatient hospital encounters, **when ordered by a network provider.** Refer to the **EOC** for more details.	You pay nothing.
Medicare Part B drugs† Medicare Part B drugs are covered when you get them from a plan provider (see the **EOC** for details). Drugs that must be administered by a health care professional.	You pay nothing.

Initial coverage stage

You pay the copays shown in the chart below until your out-of-pocket costs reach **$2,400**. If you reach the **$2,400** limit in 2027, you move on to the catastrophic stage and your coverage changes.

Tier	Plan C++ with Part D				
	Preferred Pharmacy (up to a 60-day supply)	Standard Pharmacy (up to a 60-day supply)	OON Pharmacy (up to a 30-day supply)	LTC Pharmacy (up to a 31-day supply)	Mail Order (up to a 100-day supply)
Tier 1 (Preferred Generic)	$10	$15	$7.50	$7.50	$5
Tier 2 (Generic)	$10	$15	$7.50	$7.50	$5
Tier 3 (Preferred Brand)	$10	$15	$7.50	$7.50	$5
Tier 4 (Non-Preferred Brand)	$10	$15	$7.50	$7.50	$5
Tier 5 (Specialty Tier)	$10	$15	$7.50	$7.50	$5
Tier 6* (Vaccines)	$0	$0	$0	$0	Not Available

*Our plan covers most injectable Part D vaccines at no cost to you.

Note: Tier 6 (vaccines) are not available through mail order.

Important message about what you pay for insulin: You won't pay more than **$35** for up to a one-month supply, **$70** for up to a two-month supply or **$105** for up to a three-month supply of each covered insulin product regardless of the cost-sharing tier.

Catastrophic coverage stage

If you or others on your behalf spend **$2,400** on your Part D prescription drugs in 2027, you'll enter the catastrophic coverage stage. If you reach the catastrophic coverage stage, you pay nothing for your covered Part D drugs for the remainder of the year.

Lively™ Mobile Plus

Get a personal emergency response system that provides 24/7 help with the push of a button. Receive a reduced one-time device fee and choice of two monthly service plans (coverage limits may apply). Visit **shop.lively.com/pages/kp** or call **1-800-205-6548** (TTY **711**) for more information, Monday through Friday 8 a.m. to 9 p.m.

CareLinx

Kaiser Permanente has partnered with CareLinx to provide you with a discount for purchasing non-medical, in-home help with daily activities. Your caregiver can help you live an independent lifestyle in your own home by assisting with light housekeeping, meal preparation, companionship and more.

Visit **carelinx.com/kp-affinity** or call toll-free **1-844-636-4592,** Monday through Friday, 9 a.m. to 8 p.m., and on weekends, 11 a.m. to 7 p.m.

Comfort Keepers in-home care and assistance

In-home care services to help you maintain independence at home with everything from 24-hour care, respite and personal care, meal preparation, and light housekeeping. Receive a discount on all services and get a free in-home safety assessment. Visit **comfortkeepers.com/kaiser-permanente** or call **1-800-611-9689** (TTY **711**) for more information, 24 hours a day, 7 days a week.

Mom's Meals healthy meal delivery

Getting the right nutrition is essential to achieving and maintaining good health. Receive delivery of refrigerated ready-to-heat-and-eat meals to homes nationwide. Crafted by chefs and registered dietitians, meals are medically tailored to support most major chronic conditions and overall wellness. Kaiser Permanente members enjoy discounted pricing and free shipping from Mom's Meals. Visit **momsmeals.com/kaiser** or call **1-866-224-9483** (TTY **711**) for more information, Monday through Friday 8 a.m. to 7 p.m.

Kaiser Permanente members may continue to use or select these products or services from any company of their choice, but Kaiser Permanente discounts are only available with the partner listed above. The products and services described above are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the Kaiser Permanente Senior Advantage grievance process. BEST BUY HEALTH, GREATCALL, LIVELY and LINK are trademarks of Best Buy and its affiliated companies. ©2022 Best Buy. All rights reserved.

For details about coverage rules, including services that aren't covered (exclusions), see the **Evidence of Coverage**.

Getting care

At most of our plan facilities, you can usually get all the covered services you need, including specialty care, pharmacy, and lab work. You aren't restricted to a particular plan facility or pharmacy, and we encourage you to use the plan facility or pharmacy that will be most convenient for you. To find our provider locations, see our **Provider Directory** or **Pharmacy Directory** at **kp.org/directory** or ask us to mail you a copy by calling Member Services at **1-888-777-5536**, 7 days a week, 8 a.m. to 8 p.m. (TTY **711**).

The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

Your personal doctor

Your personal doctor (also called a primary care physician) will give you primary care and will help coordinate your care, including hospital stays, referrals to specialists, and prior authorizations. Most personal doctors are in internal medicine or family practice. You may choose any available plan provider to be your personal doctor. You can change your doctor at any time and for any reason. You can choose or change your doctor by calling Member Services or at **kp.org/finddoctors**.

Help managing conditions

If you have more than 1 ongoing health condition and need help managing your care, we can help. Our case management programs bring together nurses, social workers, and your personal doctor to help you manage your conditions. The program provides education and teaches self-care skills. If you're interested, please ask your personal doctor for more information.

Medicare prescription payment program

The Medicare Prescription Payment Plan is a payment option that can help you manage your drug costs by spreading them out during the year as monthly payments. This program is available to anyone with Medicare Part D and works with your drug coverage. It can be especially helpful to people with high drug cost sharing earlier in the plan year and help manage out-of-pocket drug costs, but it doesn't save you money or lower your drug costs. Contact us or visit Medicare.gov to learn more about this program.

Notices

Appeals and grievances

You can ask us to provide or pay for an item or service you think should be covered by submitting a claim to us within a specific time period that includes the date you received the item or service. If we say no, you can ask us to reconsider our decision. This is called an appeal. You can ask for a

Non-plan provider

A provider or facility that doesn't have an agreement with Kaiser Permanente to deliver care to our members.

Plan

Kaiser Permanente Medicare Plus and Kaiser Permanente Medicare Advantage

Plan provider

A plan or network provider can be a facility, like a hospital or pharmacy, or a health care professional, like a doctor or nurse.

Prior authorization

Some services or items are covered only if your plan provider gets approval in advance from our plan (sometimes called prior authorization). Services or items subject to prior authorization are flagged with a † symbol in this document.

Region

A Kaiser Foundation Health Plan organization. We have Kaiser Permanente Regions located in Northern California, Southern California, Colorado, Georgia, Hawaii, Maryland, Oregon, Virginia, Washington, and Washington, D.C.

Retail plan pharmacy

A plan pharmacy where you can get prescriptions. These pharmacies are usually located at plan medical offices.

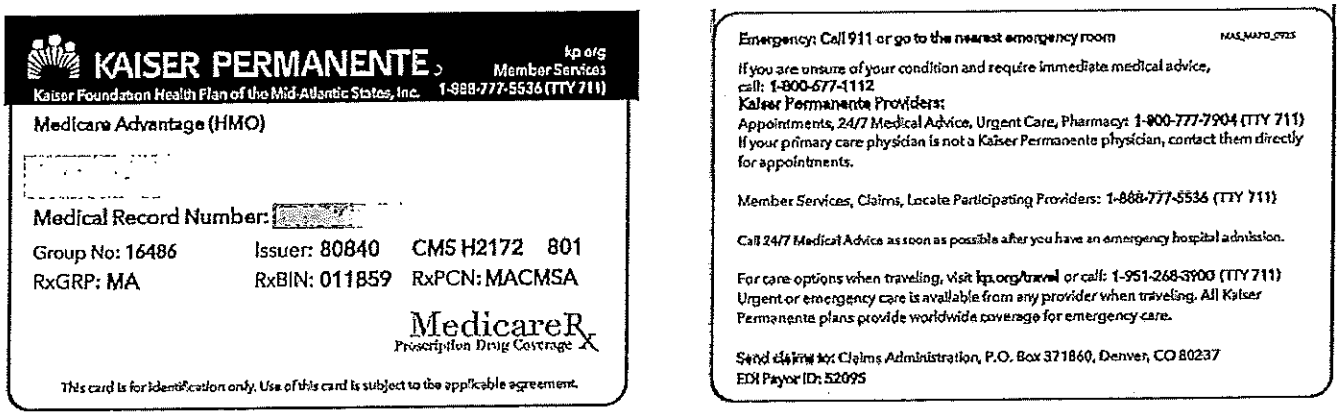
Service area

The geographic area where we offer Medicare Advantage plans. To enroll and remain a member of our plan, you must live in one of our Medicare Advantage plan's service area.

Kaiser Permanente is an HMO plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal. By law, our plan or CMS can choose not to renew our Medicare contract.

For information about Original Medicare, refer to your **"Medicare & You"** handbook. You can view it online at **medicare.gov** or get a copy by calling **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day, 7 days a week. TTY users should call **1-877-486-2048**.

Sample Group Medicare Advantage ID Card



KAISER PERMANENTE
Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

kp.org/s
Member Services
1-888-777-5536 (TTY 711)

Medicare Advantage (HMO)

Medical Record Number: [redacted]

Group No: 16486 Issuer: 80840 CMS H2172 801
RxGRP: MA RxBIN: 011859 RxPCN: MACMSA

MedicareRx
Prescription Drug Coverage

This card is for identification only. Use of this card is subject to the applicable agreement.

Emergency: Call 911 or go to the nearest emergency room

If you are unsure of your condition and require immediate medical advice, call: 1-800-677-1112

Kaiser Permanente Providers:
Appointments, 24/7 Medical Advice, Urgent Care, Pharmacy: 1-800-777-7904 (TTY 711)
If your primary care physician is not a Kaiser Permanente physician, contact them directly for appointments.

Member Services, Claims, Locate Participating Providers: 1-888-777-5536 (TTY 711)

Call 24/7 Medical Advice as soon as possible after you have an emergency hospital admission.

For care options when traveling, visit kp.org/travel or call: 1-951-268-3900 (TTY 711)
Urgent or emergency care is available from any provider when traveling. All Kaiser Permanente plans provide worldwide coverage for emergency care.

Send claims to: Claims Administration, P.O. Box 371860, Denver, CO 80237
EDI Payor ID: 52095

KAISER PERMANENTE

7/10/2026

Re: Arlington Public Schools 2027 Group Medicare Renewal

Dear Valued Partner,

Thank you for the opportunity to provide renewal information for your Group Medicare plan with Kaiser Permanente. We value your continued partnership and appreciate the trust you place in us to support your retirees' health and well-being.

As you evaluate your 2027 renewal, we recognize the importance of delivering high-quality coverage while maintaining affordability for your retirees. Kaiser Permanente is a highly rated Medicare Advantage plan, consistently recognized by the Centers for Medicare & Medicaid Services (CMS) for quality, member experience, and clinical outcomes.

- The Kaiser Permanente Medicare health plan in Maryland, Virginia, and Washington, D.C. is rated 4.5 out of 5 stars for 2026 by the Centers for Medicare & Medicaid Services (CMS) for quality, member experience, and clinical outcomes.

Our integrated care and coverage model allows us to manage the total cost of care while improving health outcomes and simplifying the member experience. Through coordinated, physician-led care, a strong focus on preventive services, and programs that support chronic condition management, we help retirees stay healthier and more connected to their care.

Enclosed, you will find your 2027 renewal package, which includes:

- 2027 Group Medicare rates
- Summary of Benefits
- Benefit and program updates for the upcoming plan year
- Additional information about the plan

Renewal pricing summary

For the 2027 plan year, your proposed renewal reflects a 0% rate increase for your medical base benefits.

Our Group Medicare program continues to leverage community rating, which:

- Provides predictable and stable pricing
- Protects against volatility from individual claims experience
- Allows us to spread risk efficiently across the population
- Supports long-term affordability for employer-sponsored retiree coverage

We can hold rates flat for 2027 due to disciplined pricing strategies, operational efficiencies, and continued alignment with CMS funding structures.

2027 plan updates and enhancements