

# **Health plan benefit changes**

Here are the updated benefit changes for our 2026 plans. Your 2026 plan name is stated in the breakout by subscriber page. Refer to your plan name to see any updates.

Health Plan	Changes for 2026	
<b>KP GA Platinum 0/0/20/S13</b> (formerly KP GA Platinum 0/0/20/S12)	<ul style="list-style-type: none"> <li>Ambulance changed to \$400</li> <li>Emergency Room changed to \$400</li> <li>Hospital (facility) changed to \$600 per day</li> <li>Mental Health/Chemical Dependency changed to \$600 per day</li> </ul>	<b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs changed to \$50 KP / \$70 Affiliated</li> <li>Mail Order Tier 3 changed to \$100 KP</li> <li>Tier 4 Non-Preferred Drugs changed to \$100 KP / \$130 Affiliated</li> <li>Mail Order Tier 4 changed to \$200 KP</li> </ul>
Health Plan	Changes for 2026	
<b>KP GA Platinum 500/20/20/S13</b> (formerly KP GA Platinum 500/20/20/S12)	<ul style="list-style-type: none"> <li>Ambulance changed to \$400</li> <li>Emergency Room changed to \$400</li> </ul>	<b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs changed to \$50 KP / \$70 Affiliated</li> <li>Tier 4 Non-Preferred Drugs changed to \$100 KP / \$130 Affiliated</li> <li>Mail Order Tier 3 changed to \$100 KP</li> <li>Mail Order Tier 4 changed to \$200 KP</li> </ul>
Health Plan	Changes for 2026	
<b>KP GA Gold 0/0/30/S13</b> (formerly KP GA Gold 0/0/30/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$10,000/\$20,000</li> </ul>	<b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026	
<b>KP GA Gold 0/0/40/S13</b> (formerly KP GA Gold 0/0/40/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,000/\$18,000</li> </ul>	<b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026	
<b>KP GA Gold 1000/20/30/S13</b> (formerly KP GA Gold 1000/20/30/S12)	<ul style="list-style-type: none"> <li>No significant benefit changes for 2026</li> </ul>	
Health Plan	Changes for 2026	
<b>KP GA Gold 2000/0/30/S13</b> (formerly KP GA Gold 2000/0/30/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,500/\$19,000</li> </ul>	<b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>

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Health Plan	Changes for 2026
<b>KP GA Gold 2250/20/30/S13</b> (formerly KP GA Gold 2250/20/30/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,500/\$19,000</li> </ul>
Health Plan	Changes for 2026
<b>KP GA Gold 2500/0/30/S13</b> (formerly KP GA Gold 2500/0/30/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,500/\$19,000</li> </ul> <b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026
<b>KP GA Gold 3500/0/30/S13</b> (formerly KP GA Gold 3500/0/30/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,500/\$19,000</li> </ul> <b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026
<b>KP GA Gold 3750/20/30/S13</b> (formerly KP GA Gold 3750/20/30/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$7,300/\$14,600</li> </ul> <b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026
<b>KP GA Gold 4500/0/30/S13</b> (formerly KP GA Gold 4500/0/30/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,500/\$19,000</li> </ul> <b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026
<b>KP GA Silver 2700/35/50/S13</b> (formerly KP GA Silver 2700/35/50/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,500/\$19,000</li> </ul> <b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs changed to \$70 KP / \$90 Affiliated</li> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 3 changed to \$140 KP</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026
<b>KP GA Silver HDHP 3500/20/S13</b> (formerly KP GA Silver HDHP 3500/20/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$7,500/\$15,000</li> </ul>

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Health Plan	Changes for 2026
<b>KP GA Silver 3700/35/50/S13</b> (formerly KP GA Silver 3700/35/50/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,800/\$19,600</li> </ul> <b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs change to \$70 KP / \$90 Affiliated</li> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 3 changed to \$140 KP</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026
<b>KP GA Silver 4700/35/50/S13</b> (formerly KP GA Silver 4700/35/50/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$10,000/\$20,000</li> </ul> <b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs change to \$70 KP / \$90 Affiliated</li> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 3 changed to \$140 KP</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026
<b>KP GA Silver 5500/0/50/S13</b> (formerly KP GA Silver 5500/0/50/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$10,000/\$20,000</li> <li>Hospital (facility) changed to \$600</li> <li>Mental Health/Chemical Dependency changed to \$600</li> <li>Outpatient Hospital or Surgical Facility changed to \$300</li> </ul> <b>Prescription Benefits</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs change to \$70 KP / \$90 Affiliated</li> <li>Mail Order Tier 3 changed to \$140 KP</li> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026
<b>KP GA Silver 6000/30/50/S13</b> (formerly KP GA Silver 6000/30/50/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,200/\$18,400</li> </ul>
Health Plan	Changes for 2026
<b>KP GA Silver HDHP 5000/20/S13</b> (formerly KP GA Silver HDHP 5000/20/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$7,500/\$15,000</li> </ul>
Health Plan	Changes for 2026
<b>KP GA Bronze HDHP 7250/0/S13</b> (formerly KP GA Bronze HDHP 7250/0/S12)	<ul style="list-style-type: none"> <li>No significant benefit changes for 2026</li> </ul>

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Health Plan	Changes for 2026	
<b>KP Virtual Complete Gold 3000/20/40/S13</b> (formerly KP GA Virtual Complete Gold 3000/20/40/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$5,400/\$10,800</li> </ul>	
Health Plan	Changes for 2026	
<b>KP Virtual Complete Silver 5000/30/40/S13</b> (formerly KP GA Virtual Complete Silver 5000/30/40/S12)	<ul style="list-style-type: none"> <li>Out of pocket max changed to \$10,000/\$20,000</li> </ul>	
Health Plan	Changes for 2026	
<b>KP Virtual Complete Bronze 6300/20/60/S13</b> (formerly KP GA Virtual Complete Bronze 6300/20/60/S12)	<ul style="list-style-type: none"> <li>No significant benefit changes for 2026</li> </ul>	
Health Plan	Changes for 2026	
<b>KP GA Platinum 0/0/20/S13 KP Plus</b> (formerly KP GA Platinum 0/0/20/S12 KP Plus)	<ul style="list-style-type: none"> <li>Ambulance (per trip) changed to \$400</li> <li>Emergency Room changed to \$400</li> <li>Hospital (facility) changed to \$600</li> <li>Mental Health/Chemical Dependency changed to \$600</li> </ul>	<b>Prescription Drugs</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs change to \$50 KP / \$70 Affiliated</li> <li>Mail Order Tier 3 changed to \$100 KP</li> <li>Tier 4 Non-Preferred Drugs changed to \$100 KP / \$130 Affiliated</li> <li>Mail Order Tier 4 changed to \$200 KP</li> </ul>

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Health Plan	Changes for 2026
<b>KP GA</b> <b>Gold 0/0/30/S13 KP Plus</b> (formerly KP GA Gold 0/0/30/S12 KP Plus)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$10,000/\$20,000</li> </ul> <b>Prescription Drugs</b> <ul style="list-style-type: none"> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026
<b>KP GA</b> <b>Gold 1000/20/30/S13 KP Plus</b> (formerly KP GA Gold 1000/20/30/S12 KP Plus)	<ul style="list-style-type: none"> <li>No significant benefit changes for 2026</li> </ul>
Health Plan	Changes for 2026
<b>KP GA</b> <b>Gold 2500/0/30/S13 KP Plus</b> (formerly KP GA Gold 2500/0/30/S12 KP Plus)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,500/\$19,000</li> </ul> <b>Prescription Drugs</b> <ul style="list-style-type: none"> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026
<b>KP GA</b> <b>Gold 3500/0/30/S13 KP Plus</b> (formerly KP GA Gold 2500/0/30/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,500/\$19,000</li> </ul> <b>Prescription Drugs</b> <ul style="list-style-type: none"> <li>Tier 4 Non-Preferred Brand Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>

Health Plan	Changes for 2026
<b>KP GA</b> <b>Silver 2700/35/50/S13 KP Plus</b> (formerly KP GA Silver 2700/35/50/S12 KP Plus)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,500/\$19,000</li> </ul> <b>Prescription Drugs</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs changed to \$70 KP / \$90 Affiliated</li> <li>Mail Order Tier 3 changed to \$140 KP</li> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>
Health Plan	Changes for 2026
<b>KP GA</b> <b>Silver 3700/35/50/S13 KP Plus</b> (formerly KP GA Silver 3700/35/50/S12 KP Plus)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,800/\$19,600</li> </ul> <b>Prescription Drugs</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs changed to \$70 KP / \$90 Affiliated</li> <li>Mail Order Tier 3 changed to \$140 KP</li> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>

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<b>KP GA</b> <b>Silver 5500/0/50/S13 KP Plus</b> (formerly KP GA Silver 5500/0/50/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$10,000/\$20,000</li> <li>Hospital (facility) changed to \$600</li> <li>Mental Health/Chemical Dependency changed to \$600</li> <li>Outpatient Hospital or Surgical Facility changed to \$300</li> </ul> <b>Prescription Drugs</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs changed to \$70 KP / \$90 Affiliated</li> <li>Mail Order Tier 3 changed to \$140 KP</li> <li>Tier 4 Non-Preferred Brand Drugs changed to \$120 KP / \$150 Affiliated</li> <li>Mail Order Tier 4 changed to \$240 KP</li> </ul>

Health Plan	Changes for 2026
<b>KP GA</b> <b>Platinum PPO 0/0/20/S13</b> (formerly KP GA Platinum PPO 0/0/20/S12)	<ul style="list-style-type: none"> <li>Ambulance (per trip) changed to \$400</li> <li>Emergency Room changed to \$400</li> <li>Hospital (facility) changed to \$600</li> <li>Mental Health/Chemical Dependency changed to \$600</li> </ul> <b>Prescription Drugs</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs change to \$50 KP / \$70 MedImpact</li> <li>Tier 3 Mail Order changed to \$100 KP / \$210 MedImpact</li> <li>Tier 4 Non-Preferred Drugs changed to \$100 KP / \$130 MedImpact</li> <li>Mail Order Tier 4 changed to \$200 KP / \$390 MedImpact</li> </ul>

Health Plan	Changes for 2026
<b>KP GA</b> <b>Gold PPO 1000/20/30/S13</b> (formerly KP GA Gold PPO 1000/20/30/S12)	<ul style="list-style-type: none"> <li>No significant benefit changes for 2026</li> </ul>

Health Plan	Changes for 2026
<b>KP GA</b> <b>Gold PPO 2500/10/30/S13</b> (formerly KP GA Gold PPO 2500/10/30/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$9,500/\$19,000</li> <li>Out of Pocket Max Out of Network changed to \$19,000/\$38,000</li> </ul> <b>Prescription Drugs</b> <ul style="list-style-type: none"> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 MedImpact</li> <li>Mail Order Tier 4 changed to \$240 KP / \$450 MedImpact</li> </ul>

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<b>KP GA</b> <b>Silver PPO HDHP 3800/20/S13</b> (formerly KP GA Silver PPO HDHP 3800/20/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$7,600/\$15,200</li> <li>Out of Pocket Max Out of Network changed to \$15,200/\$30,400</li> </ul>
Health Plan	Changes for 2026
<b>KP GA</b> <b>Silver PPO 3850/30/50/S13</b> (formerly KP GA Silver PPO 3850/30/50/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$10,000/\$20,000</li> <li>Out of pocket Max Out of Network changed to \$20,000/\$40,000</li> </ul> <b>Prescription Drugs</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs change to \$70 KP / \$90 MedImpact</li> <li>Tier 3 Mail Order changed to \$140 KP / \$270 MedImpact</li> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 MedImpact</li> <li>Mail Order Tier 4 changed to \$240 KP / \$450 MedImpact</li> </ul>
Health Plan	Changes for 2026
<b>KP GA</b> <b>Silver PPO 4850/30/50/S13</b> (formerly KP GA Silver PPO 4850/30/50/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$10,100/\$20,200</li> <li>Out of Pocket Max Out of Network changed to \$20,200/\$40,400</li> </ul> <b>Prescription Drugs</b> <ul style="list-style-type: none"> <li>Tier 3 Preferred Brand Drugs change to \$70 KP / \$90 MedImpact</li> <li>*Tier 3 Mail Order changed to \$140 KP / \$270 MedImpact</li> <li>Tier 4 Non-Preferred Drugs changed to \$120 KP / \$150 MedImpact</li> <li>Mail Order Tier 4 changed to \$240 KP / \$450 MedImpact</li> </ul>
Health Plan	Changes for 2026
<b>KP GA</b> <b>Silver PPO HDHP 5000/20/S13</b> (formerly KP GA Silver PPO HDHP 5000/20/S12)	<ul style="list-style-type: none"> <li>Out of Pocket Max changed to \$7,600/\$15,200</li> <li>Out of Pocket Max Out of Network changed to \$15,200/\$30,400</li> </ul>

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KP GA Bronze PPO 6500/20/60/S13 (formerly KP GA Bronze PPO 6500/20/60/S12)	<ul style="list-style-type: none"><li>No significant benefit changes for 2026</li></ul>
Health Plan	Changes for 2026
KP GA Bronze PPO HDHP 7250/10/S13 (formerly KP GA Bronze PPO HDHP 7250/10/S12)	<ul style="list-style-type: none"><li>No significant benefit changes for 2026</li></ul>

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