

Choose the Kaiser Permanente difference

At Kaiser Permanente, you're supported by an entire health system that connects your health plan, insurance, doctors, specialists, and medical facilities. You can view your health information and manage all your care at [kp.org](https://www.kp.org), which puts you in control. Our doctors can access your health information too, so you always get personalized care that meets your needs. This makes care more convenient and affordable for you, so you can focus on being healthy.



Top doctors and specialists

Many of our 1,800+ doctors and specialists are recognized as Top Doctors¹ for the quality care they provide—and they exclusively treat Kaiser Permanente members. They practice in 60+ specialties, so you're covered for any health concern.



Flexible care options

- Have in-person appointments at our medical centers, each with many services under one roof.
- Get preventive in-person care and preventive virtual care at \$0 copays.
- Visit our 24/7 Advanced Urgent Care centers without an appointment, and get care while traveling.



State-of-the-art facilities

Each of our medical centers has doctors, specialists, pharmacy, lab, and more under one roof, so you make fewer trips. With 35+ convenient medical centers across the region—and more on the way—you can always find care near you.



Affordable prices you control

Our care is easy on your budget with fixed payments for most in-network services, including \$0 copays for preventive care, telehealth care, and more.²

EXPLORE YOUR PLAN BENEFITS

SIGNATURE CARE

With our Signature care delivery system, you get quality care from 1,800+ physicians in the Mid-Atlantic Permanente Medical Group, P.C. (Permanente). Many of them have been recognized as Top Doctors.¹

SAVE WITH A HEALTH SAVINGS ACCOUNT (HSA)

An HSA allows you to set aside pretax dollars to pay for qualified medical expenses. Check with your human resources manager for details.

You may also choose a **health reimbursement arrangement (HRA)**.

Usually, an HRA makes you ineligible for an HSA. Check with your human resources manager for details.

UNDERSTANDING YOUR PAYMENTS

Each plan year, your **deductible** is the amount you must pay toward covered medical services before your health plan begins to pay its share. All non-preventive care services are subject to the deductible.³

Each plan year, your **out-of-pocket maximum** is the highest amount you must pay toward covered medical services before your health plan begins to cover all costs.⁴ This excludes service charges that exceed the maximum allowable charge.

FAMILY PLAN PAYMENTS

Family plans have both an individual deductible (described above) and **family deductible** that can be met by one or more family members. Once the family deductible is met, your health plan begins to pay its share for covered services for all family members.

Family plans have both an individual out-of-pocket maximum (described above) and **family out-of-pocket maximum** that can be met by one or more family members. Once the family out-of-pocket maximum is met, your health plan begins to cover all costs for all family members.

For detailed explanations of these terms, please visit kp.org/healthcoverageterms/mas.



Healthy extras to improve your well-being

Your plan includes many wellness resources to help you be your healthiest, at no additional cost. These self-care apps are just the start.⁵



The number one app for sleep, meditation, and relaxation.



One-on-one support for common emotional challenges.

Learn how our care can support you at kp.org.



¹ The physicians who practice at Kaiser Permanente are recognized as Top Doctors in *Northern Virginia Magazine* (2025), *Washingtonian* magazine (2024), *Baltimore* magazine (2024), *Arlington Magazine* (2024), and *Bethesda* magazine (2023).

² When appropriate and available. If you travel out of state, phone appointments and video visits may not be available in select states due to licensing laws. Laws differ by state.

³ Check your *Evidence of Coverage* for services that count toward meeting your deductible.

⁴ Check your *Evidence of Coverage* for services that count toward meeting your out-of-pocket maximum.

⁵ App services may not be covered under your health plan benefits and may not be subject to the terms set forth in your *Evidence of Coverage* or other plan documents. These services may be discontinued at any time without notice.