Selling Kaiser Permanente Medicare plans to individuals

GO BEYOND COVERAGE. LEAD WITH CARE.



Thank you for partnering with us

Understanding how to sell the advantages of our health plan can help you grow your book of business and show prospects why members stay with Kaiser Permanente. Our Medicare members renew with us at exceptional rates, with only 2.5% choosing other coverage compared to a national average of 16%.[1]

Whether you're offering Kaiser Permanente for the first time or brushing up on the basics, this easy-to-follow guide will give you insights about our unique value – and help you position yourself as a trusted adviser.

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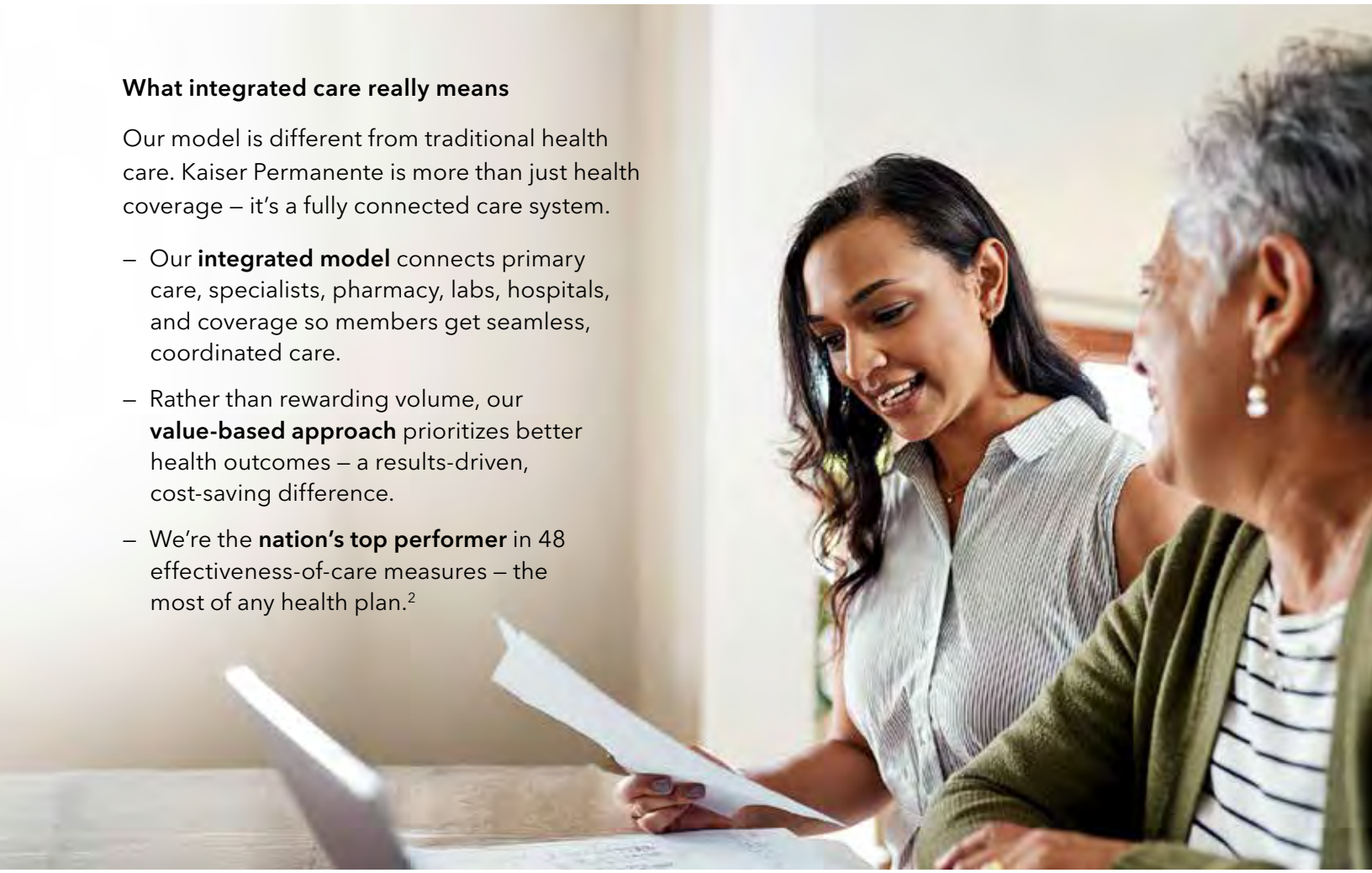
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A radically better model for radically better results

Your clients need high-quality, cost-effective health care that's easy to manage – and you need solutions that set you apart. With Kaiser Permanente, you can offer a unique model that delivers better outcomes, simpler administration, and built-in cost control.



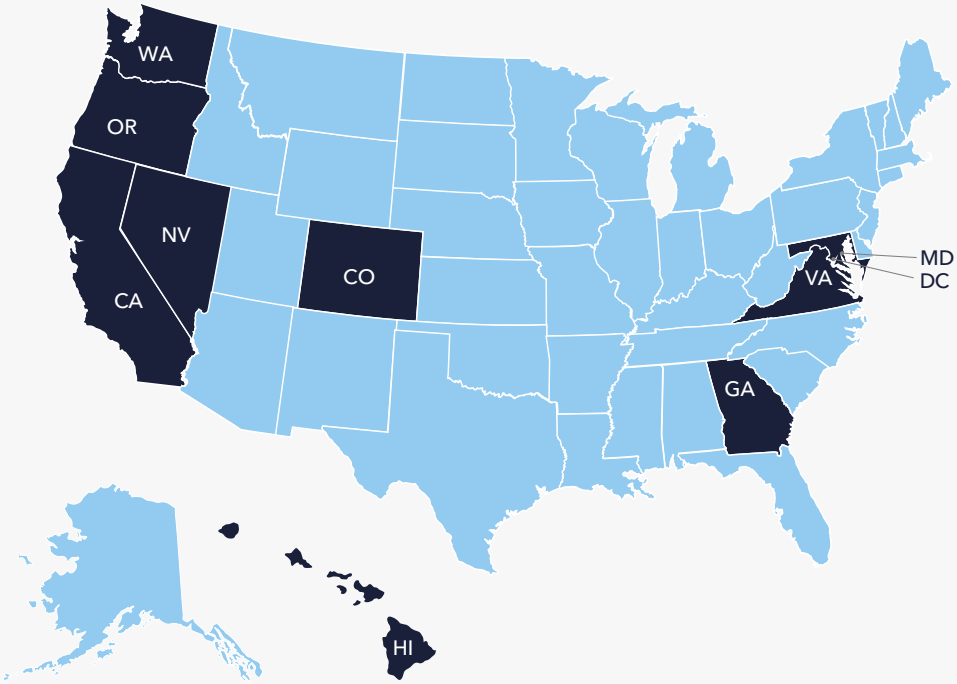
What integrated care really means

Our model is different from traditional health care. Kaiser Permanente is more than just health coverage – it's a fully connected care system.

- Our **integrated model** connects primary care, specialists, pharmacy, labs, hospitals, and coverage so members get seamless, coordinated care.
- Rather than rewarding volume, our **value-based approach** prioritizes better health outcomes – a results-driven, cost-saving difference.
- We're the **nation's top performer** in 48 effectiveness-of-care measures – the most of any health plan.[2]

Local care on a national scale

Kaiser Permanente is one of the nation's largest health organizations, and we're growing steadily. Your clients have access to care in 9 regions, providers in other states, and 24/7 virtual care nationwide.



Kaiser Permanente areas
(CO, GA, HI, Mid-Atlantic States (DC, MD, VA), NCAL, NV, Northwest (OR, SW WA), SCAL, WA)

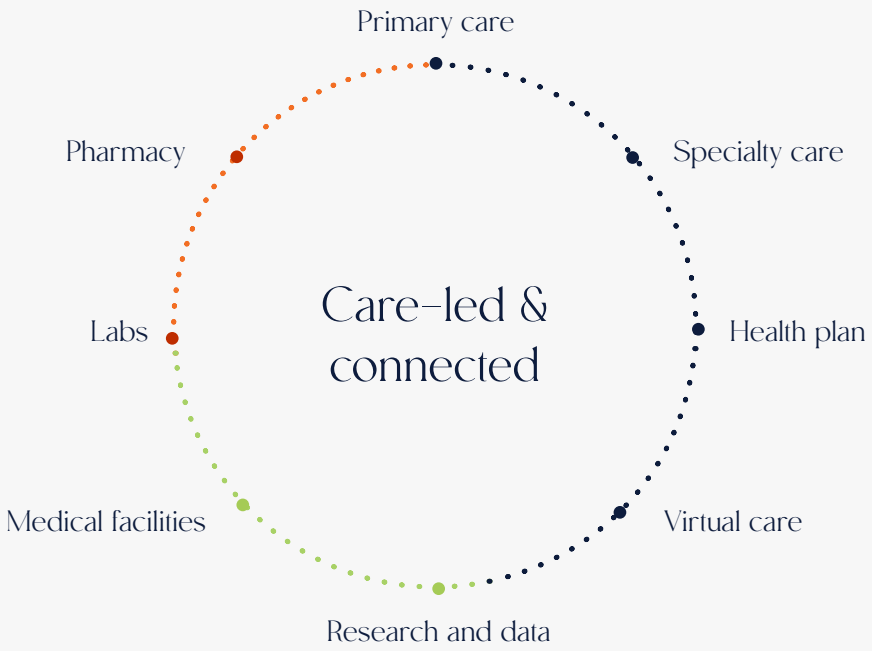
Other areas

BY THE NUMBERS[3]

12.9M MEMBERS	78K+ NURSES	609 MEDICAL OFFICES
243,652 EMPLOYEES	25,000+ PHYSICIANS	40 HOSPITALS

What happens when the whole system works together

At Kaiser Permanente, care and coverage come together in one convenient package. Integrated care allows seamless coordination and communication across all care touchpoints, leading to high-value, cost-effective coverage.



When everything is connected, your clients get:

- **Affordable, high-quality care:** Our integrated care model continually finds new opportunities to reduce costs, improve quality, drive innovation, and personalize care for members.
- **Care that's connected:** Our care teams work together in the same electronic health record system – unlike disconnected providers or vendors who can't see patients' full medical histories.
- **Simple, easy access:** We're not a claims-based organization. When our doctors determine a member needs treatment, they order it – no red tape.
- **More care in fewer trips:** Many of our locations have doctors, specialists, labs, and a pharmacy in one place, saving members time and money.

We pioneered a model for preventive care that others are still trying to copy

Kaiser Permanente was founded to keep people healthy. From our early days in shipyards, steel mills, and construction sites, we pioneered the idea that it's more cost effective to prevent illnesses than to treat them.

Today, we proudly continue that commitment to providing affordable, high-quality health care.

80 years ahead of the curve

In 1945, our cofounder Sidney R. Garfield, MD, developed a revolutionary prepayment plan for health coverage that rewarded doctors for keeping their patients healthy.

Built with purpose

To provide high-quality, affordable health care services and improve the health of our members and the communities we serve.

Fee-for-service drives volume. We drive value.

Most U.S. care systems depend on "fee-for-service" care models that largely rely on providing higher volume of medical services to generate revenue. For the past 80 years, Kaiser Permanente has used a value-based care approach that focuses on healthy outcomes while making care more affordable.

Traditional fee-for-service		Kaiser Permanente's value-based care
FOCUS ON QUANTITY	vs	FOCUS ON QUALITY
REACTIVE – TREATING ILLNESS AFTER IT OCCURS		PREVENTIVE – STOPS ILLNESS BEFORE IT WORSENS
FRAGMENTED CARE, POOR PROVIDER COORDINATION		INTEGRATED MODEL, COORDINATED CARE
HIGHER COSTS FROM UNNECESSARY TREATMENTS		COST-EFFECTIVE, PREVENTIVE MEASURES



Virtual care, built in from day one

At Kaiser Permanente, virtual care is part of our commitment to transform the member experience. It's also built into every member's health plan from day one.

Care on their terms – anytime, anywhere

With telehealth services, your prospects get care that's tailored to fit their needs and lifestyle. It's the same high-quality care they'd get in person – completely covered by their plan and captured in their electronic health record.

- 24/7 VIRTUAL CARE
- VIDEO VISITS
- PHONE APPOINTMENTS
- ONLINE CHAT
- REMOTE PATIENT MONITORING
- MENTAL HEALTH APPS
- ONLINE PHYSICAL THERAPY
- E-VISITS
- 24/7 ADVICE

> Our model puts the patient, the doctor, the hospital, the employer and the insurance company all on the same side of the ledger. They all benefit by the patient remaining well.
>
> *– Kaiser Permanente founding physician Dr. Sidney R. Garfield, April 4, 1945*

Higher quality and a higher standard for our members

It starts with empowering doctors to be exceptional

Our integrated model is fueled by Permanente Medicine, a philosophy of person-centered, quality-driven care practiced by our doctors and medical groups every day. It's a time-tested, proven approach that reduces inefficiencies and produces better health outcomes – and it's how we translate quality into bottom-line value.

When doctors lead, best practices follow

Our highly trained doctors, nurses, and specialists are held to the high standards of Permanente Medicine – which makes care their chief concern. And without the administrative hassles of running a practice, they're empowered to focus on one thing: keeping members healthy.

Others chase claims. We chase results.

With traditional fee-for-service care delivery, providers get paid more when they submit more claims. Our doctors focus on meeting clinical quality benchmarks – meaning members get the right care, not more care. And since that care is integrated with coverage, our doctors are free to be:

- **Invested**: Doctors can focus on providing the right care at the right time.
- **Connected**: Electronic health records provide a member's care history, reducing unnecessary tests and overall costs.
- **Proactive**: Timely preventive care can help avoid costly chronic conditions and treatments.

The proof is in the outcomes

Health care should never be one-size-fits-all. Kaiser Permanente members get care from teams who take time to truly get to know them. They also get proactive preventive care and high-quality treatment, personalized and designed to help them spend more healthy years doing more of what they love.

We see what others miss

Offer your prospects world-class prevention – powered by an electronic health record system that automatically alerts clinicians when members need lifesaving screenings. Our coordinated care teams are empowered to catch problems earlier and start treatment faster.

Specialists work together to save lives

As one of the largest multispecialty groups in the country, our network of highly skilled doctors work together seamlessly to deliver exceptional treatment. That's why Kaiser Permanente members are less likely to lose years of life due to cancer and heart disease.

MORE HEALTHY YEARS

Top 5%

of all Medicare health plans for breast and colorectal cancer screenings[4]

In our communities, Kaiser Permanente members are[5]



less likely to lose years of life due to cancer



less likely to lose years of life due to heart disease



#1 health plan in America

We've held the top spot on Insure.com's rankings for 6 years in a row.[6] Kaiser Permanente was ranked number one overall, and among the best for affordability, customer satisfaction, and digital experience.

#1 in more Medicare measures. By a wide margin.

In 2025, we led the nation as the top performer in 48 effectiveness-of-care measures for Medicare plans – the most of any Medicare health plan. The closest national competitor led in only 15.[7]

The measures include:

- Preventive care
- Diabetes care
- Mental health and substance use disorder care
- Avoiding unnecessary care
- Coordinating care after a hospital discharge

Medicare health plans with star power in every region

Kaiser Permanente's Medicare Advantage health plans are highly rated, according to the Centers for Medicare & Medicaid Services 2026 Star Ratings.[8] All Kaiser Permanente Medicare health plan health plans earned either 4 or 4.5 stars out of a maximum of 5 stars.

Get the confidence that comes with having a highly rated Medicare health plan. As a Kaiser Permanente member, your clients will get quality and supportive services to help them live well and thrive.

Region	Ratings
California	4.5 stars
Colorado	4.5 stars
Georgia	4.5 stars
Hawaii	4.5 stars
Mid-Atlantic States (D.C., MD, VA)	4.5 stars
Nevada	4.5 stars
Northwest (OR, SW WA)	4 stars
Washington	4 stars



The prescription for affordable pharmacy. We write it — and fill it.

The Kaiser Permanente pharmacy program embodies the efficiency and advantages of our integrated system. It allows our doctors and pharmacists to work hand in hand to develop an optimized, cost-efficient formulary that saves and improves lives.

Better best practices

We're not immune to rising drug-cost trends. But our approach to pharmacy improves efficiency and reduces costs by:

- **Prescribing cost-saving biosimilars –** We prescribe biosimilars between 60% and 95% of the time – compared to 25% nationally.[9]
- **Using bulk purchasing –** We negotiate directly with manufacturers and pass the savings on to members.
- **Advocating for lower pricing –** When prices go up, we press pharmaceutical companies to demonstrate the medical value accompanying the cost increase.



Modern care, made more personal

At Kaiser Permanente, we research and pioneer new ways of delivering better care every day. By investing in technology, we aim to dramatically improve health outcomes across all fronts – from the way care teams work together to how we save lives, time, and resources.

Artificial Intelligence (AI) that brings doctors and members closer – Everyone's talking about AI. We're using it to make care more human. Our ambient listening technology transcribes doctor visits in real time and automatically updates electronic health records – so doctors can stay focused on their patients, not their screens.



Smarter monitoring between visits

We don't wait for symptoms to escalate. We catch them early. With remote patient monitoring, we deliver proactive care in real time. Connected devices track key health indicators and update the member's health record automatically – giving our doctors the insights they need to act fast, adjust care, and help prevent complications.

The result:[11]

- Better medication adherence
- Fewer office visits
- Healthier members

The advantage of a research powerhouse

As one of the largest research organizations outside of university systems, we bridge the gap between discovery and delivery. Our collaborative model accelerates medical advancements, bringing new treatments and technologies to your clients 12 times faster than the competition.[12]

2024 RESEARCH HIGHLIGHTS[13]

9

KAISER PERMANENTE RESEARCH CENTERS NATIONWIDE

$360M

FUNDING FOR RESEARCH

2,180

STUDIES AND CLINICAL TRIALS UNDERWAY

1,940

ARTICLES PUBLISHED



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Contracting with Kaiser Permanente to sell individual Medicare Advantage

Brokers, also known as agents, can sell Kaiser Permanente's Medicare Advantage plans to Medicare-eligible individuals in Colorado, Hawaii, Georgia, Mid-Atlantic States (Maryland, Virginia, and the District of Columbia), the Northwest (Oregon and southwest Washington), and Washington. This doesn't include Medicare group sales.

Kaiser Permanente contracts with field marketing organizations (FMOs). We don't authorize individual brokers or agencies that aren't under contract with one of our participating FMOs to sell our Medicare health plans at this time.

Brokers wishing to participate in the Medicare broker program must contact one of the organizations below to be appointed and approved.

Participating FMOs	Markets and states served with contract IDs							Contact information to get started
	CO	HI	GA	Mid-Atlantic States MD	Mid-Atlantic States VA	Mid-Atlantic States DC	Northwest OR & SW WA	WA	
	H0630	H1230 H2704	H1170	H2172			H9003	H5050	
The Baldwin Group	●		●	●			●	●	**855-721-8088** contracting.health@baldwin.com
GS National Insurance	●		●	●			●	●	**855-330-5566** agentinfo@gsnational.com
HealthMarkets – Golden Outlook	●		●	●			●	●	**1-888-731-4447** hmfieldsupport@hmkts.com
Integrity Marketing	●	●	●	●			●	●	contracting@integritymarketing.com
Premier Benefit Consultants		●							**808-738-4500** curtis@pbchawaii.com
YourFMO (AmeriLife)	●		●	●			●		Info@YourFMO.com

The details in this broker guide aren't applicable to Kaiser Permanente Nevada appointments, commissions, or enrollment submissions. For details on contracting and appointments to sell Medicare Advantage in the Nevada market under contract H2960, please contact **brokeronboarding@hometownhealth.com** or visit **https://brokers.hometownhealth.com/medicare**.

Becoming Ready to Sell

Once you've selected your FMO, complete the following steps to start selling for Kaiser Permanente:

1 Provide your license and demographic information to your upline. It will be submitted to your FMO to begin the contracting process.

2 Your FMO's contracting team will submit agent licensing information to Kaiser Permanente on behalf of your upline. Kaiser Permanente verifies the information and appoints you for the active licensed states.

3 Complete required Medicare sales trainings:

- **AHIP Medicare + Fraud, Waste, and Abuse Certification:** Online training for CMS MFWA requirement, updated annually. Kaiser Permanente's discount rate: **https://www.ahipmedicaretraining.com/clients/kaiserpermanente**. On the platform, you can electronically share your Medicare + FWA certification with Kaiser Permanente.
- **Annual Kaiser Permanente Individual Medicare Products & Benefits Training:** A one-hour web-based course that covers region-specific Medicare products training. You'll receive an invite by email from EvolveNXT. Through the training platform, you can also access your AHIP certification.

4 Once you've completed the above requirements and become Ready to Sell for Kaiser Permanente, you will receive a welcome email or letter inviting you to a regional training session to learn more about Kaiser Permanente products and services in specific markets. Your FMO will provide you with quoting and enrollment platform access.

NOTE: Agents must be fully Ready to Sell before the submission of any Medicare enrollments. Enrollments submitted prior to an agent's Ready to Sell date will be denied commission per Centers for Medicare & Medicaid Services requirements.



Submitting enrollments

Submit all Medicare Advantage enrollments through SunFire or Connecture DRX to receive credit of sale and commission payments.

No paper applications are accepted for Kaiser Permanente Medicare health plans, and broker/agent of record changes only occur when there is a change in base medical coverage. There is no separate broker/agent of record change process for Medicare.

Depending on your participating FMO, instructions for accessing enrollment portals may vary. If you have completed all of the Ready to Sell requirements, you'll have access to enrollment platforms for Kaiser Permanente Medicare health plans. Reach out to your upline if you have issues accessing the enrollment platform.

IMPORTANT ENROLLMENT NOTES:

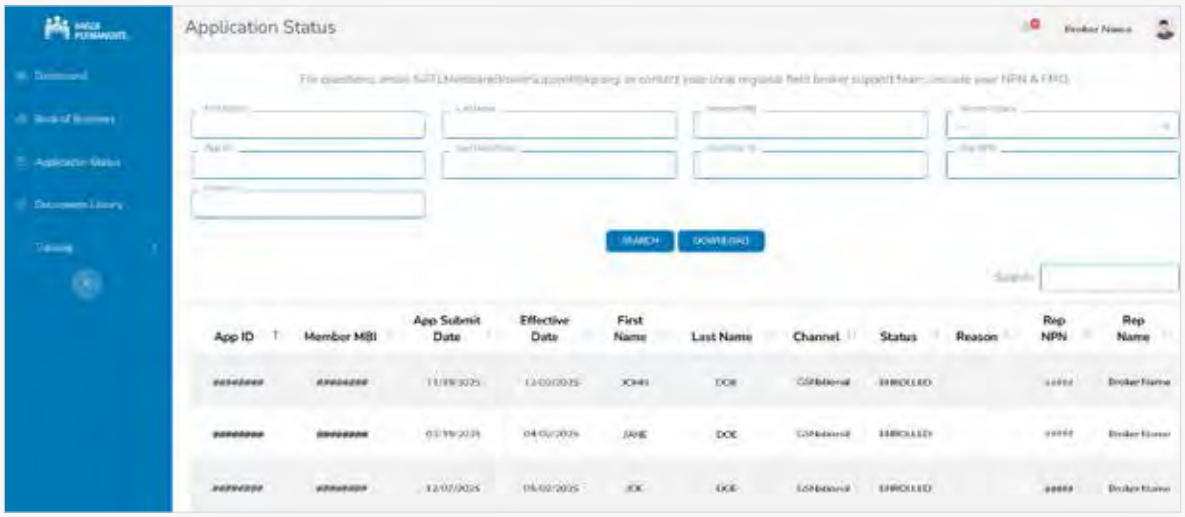
- When logging into enrollment platforms, be sure to use the email address associated with your FMO and your Ready to Sell process because permissions are often triggered using your email address. If you use a different email address, you may be denied access.
- You may have multiple instances for these enrollment platforms based on your affiliations. If you're having trouble seeing Kaiser Permanente plans, you may be logged into a nonparticipating instance. Check the URL with your FMO.
- To see Dual Eligible Special Needs plans and Medicare Advantage plans, be sure to select both from "plan type" drop downs.
- Selecting a doctor is not part of the Kaiser Permanente enrollment process. Members will select a doctor after the enrollment is complete and confirmed.
- During the quoting process, please remember to select a Kaiser Permanente pharmacy for the best prices on prescription drugs.

Participating FMO	Enrollment platform(s)	Enrollment instructions and support
The Baldwin Group	Primarily Connecture or Sunfire	– Log in to https://hub.health.baldwin.com/ – Leverage MedPlanHub (Connecture) or SunFire – For questions or assistance contact fmohealth.issues@baldwin.com or call **855-721-8088**.
GS National Insurance	Primarily SunFire, and Connecture for select downlines	– Log in to Propelicy, click on the "Enrollment" icon in the top right corner of the screen; click "Quote & Enroll," and you will automatically log into the SunFire account. – For questions or assistance, contact agentinfo@gsnational.com or call **855-330-5566**.
HealthMarkets / Golden Outlook	SunFire or Connecture	– Leverage Connecture DRX – Or SunFire via direct link: http://www.SunFirematrix.com/app/agent/hthmkts – SunFire Default Username = email address – SunFire Default Password = "X#[npn] first3lastnamelowercase]" – For questions or assistance, contact HealthMarkets' Field Support at **888-731-4447**.
Integrity Marketing	SunFire or Connecture	– Log in to IntegrityCONNECT to access MedicareLink (SunFire) or MedicareApp (Connecture) using credentials provided by Integrity. – For questions or assistance contact: agents@integrityconnect.com
Premier Benefit Consultants Hawaii	SunFire only	– Log in to SunFire: https://www.SunFirematrix.com/app/agent/pbc – SunFire Default Username = email address – SunFire Default Password = "X#[npn] first3lastnamelowercase]" – For questions or assistance, contact curtis@pbchawaii.com
YourFMO (Amerilife)	Primarily SunFire, and Connecture for select downlines	– Log in to YourFMOsunfire.com or visit YourFMO.com – Leverage SunFire to submit enrollments. – For questions or assistance, contact Info@YourFMO.com

How to check enrollment status and manage your book of business

There are 2 ways to check enrollment status:

1. You or your client can go to **https://medicareselfservice-individual.kp.org/home** after submission and enter the beneficiary's name and birthdate.
2. Or you can use EvolveNXT. Go to **https://kaiser.evolvenxt.com** and select the Application Status tool from navigation. You can enter beneficiary information to check the status of a single enrollment or check the status of all pending enrollments.



Stay connected to your Kaiser Permanente Medicare business

Use the Book of Business tool in EvolveNXT (**https://kaiser.evolvenxt.com**) to view client information, track member activity, and export reports. Information is updated daily and can be used for outreach and to help manage your business. Data is not tied to commissions.



New member welcome

We've made it safe and easy to get exceptional health care. A welcome agent will call to get a new member started with Kaiser Permanente.

To learn more about the new member experience, visit **kp.org/newmember**.

- **Create an online account:** Members can follow the simple steps online or download the Kaiser Permanente app.
- **Choose a doctor on kp.org/doctor:** Members select a convenient facility, then browse doctor profiles.
- **Transition prescriptions:** Members submit a prescription transfer request online.
- **Get care:** Members can schedule routine appointments online, with our app, or by phone.

2026–2027 Individual Medicare Field Broker Commission Schedule

This commission schedule applies to field agents selling Medicare Advantage through one of our participating Field Marketing Organizations (FMOs) on behalf of Kaiser Permanente in CO, DC, GA, HI, MD, OR, VA and WA. FMOs do not operate in CA. (Kaiser Permanente Nevada, formerly Hometown Health under contract H2960, is out of scope for this schedule.)

Participating FMOs include: The Baldwin Group, GS National Insurance, HealthMarkets / Golden Outlook, Integrity Marketing, Premier Benefit Consultants Hawaii, and YourFMO (AmeriLife).

Commissions and renewals for new-to-Kaiser Permanente and brokered age-in members in 2027 will remain consistent with 2026 payment levels.

Renewals for existing members in which credit of sale was established through a KP Medicare to KP Medicare plan change will be paid a commission of $243.

Plan Year	New-to-Kaiser Permanente Members	Existing Kaiser Permanente Members enrolling into a Kaiser Permanente Medicare plan	
	Initial / Renewal	Initial (Age-in) / Renewal	Medicare Plan Change Enrollments and Renewals for which there was no net membership gain when credit of sale was first established
2026	$694 / $347	$694 / $347	$347
2027	$694 / $347	$694 / $347	$243

ADDITIONAL COMPENSATION NOTES:

- Kaiser Permanente is 100% automated with electronic application submission through SunFire or Connecture: ask your FMO. No paper applications are accepted, and Agent of Record (AOR) changes only occur when there is a change in base medical coverage; there is no separate AOR change request process for Medicare outside of automation.
- Commissions are paid within 60 days AFTER the effective date. Payments are made to the FMO once annually (including renewals) per applicant, and CMS status is confirmed before making payment. Standard proration and chargeback rules apply. FMO may distribute commissions monthly; check with your agency.

Where to go for help

BROKER

- Overarching program questions
- How to get involved in the program

Where to go: Regional Broker Support or Broker FAQ document

FMO

- In-person trainings
- Systemic operational or administrative issues
- Commissions
- Escalations

Where to go: Your FMO support teams

KAISER PERMANENTE

- Requests for materials
- Regional product questions

Where to go: Your Kaiser Permanente broker program manager

Medicare Marketing and Sales Materials
business.kp.org/business/broker/marketing-and-sales-materials

We're part of your community

Kaiser Permanente has medical facilities, doctors' offices, labs, pharmacies, and other health care services throughout the country. Our members enjoy a coordinated approach to care and coverage, combined with the convenience of treatment close to home.

REGIONAL CORPORATE OFFICES

Kaiser Foundation Health Plan, Inc.
393 E. Walnut St.
Pasadena, CA 91188-8514

Kaiser Foundation Health Plan of Colorado
10350 E. Dakota Ave.
Denver, CO 80247

Kaiser Foundation Health Plan of Georgia, Inc.
Nine Piedmont Center
3495 Piedmont Rd. NE
Atlanta, GA 30305

Kaiser Foundation Health Plan, Inc.
711 Kapiolani Blvd.
Honolulu, HI 96813

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
4000 Garden City Drive
Hyattsville, MD 20785

Kaiser Foundation Health Plan of the Northwest
500 NE Multnomah St., Suite 100
Portland, OR 97232

Kaiser Foundation Health Plan of Nevada
10315 Professional Circle
Reno, NV 89521

Kaiser Foundation Health Plan of Washington
2715 Naches Ave. SW
Renton, WA 98057

1. National average from Medicare 2026 Part C & D Star Ratings Technical Notes, Attachment C: National Averages for Part C and D Measures, 2026 CMS star measure C29, September 25, 2025; Kaiser Permanente rate is averaged from all contracts under Kaiser Foundation Health Plan, Inc. in the 2026 Star Ratings Data Table, October 8, 2025**. 2.** Kaiser Permanente 2025 HEDIS® scores. Benchmarks provided by the National Committee for Quality Assurance (NCQA) Quality Compass® and represent all lines of business. Kaiser Permanente combined region scores were provided by the Kaiser Permanente Department of Care and Service Quality. The source for data contained in this publication is Quality Compass 2025 and is used with the permission of NCQA. Quality Compass 2025 includes certain CAHPS data. Any data display, analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such display, analysis, interpretation, or conclusion. Quality Compass® and HEDIS® are registered trademarks of NCQA. CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality. **3.** Data as of March 31, 2026 except for physicians and nurses which is approximate as of December 31, 2025. **4.** See note 2. **5.** Elizabeth A. McGlynn, PhD, et al., "Measuring Premature Mortality Among Kaiser Permanente Members Compared to the Community," Kaiser Permanente, July 20, 2022. **6.** "Best Health Insurance Companies of 2026," Insure.com, January 27, 2026. **7.** See note 2. **8.** Every year, Medicare evaluates plans based on a 5-star rating system. **9.** Kaiser Permanente internal data; "Biosimilars in the United States 2023-2027," The IQVIA Institute for Human Data Science, January 31, 2023. **10.** Aaron A. Tierney, PhD, et al., "Ambient Artificial Intelligence Scribes to Alleviate the Burden of Clinical Documentation," *NEJM Catalyst*, February 21, 2024. **11.** Kaiser Permanente internal data, October 13, 2023; Kaiser Permanente Care Delivery Technology Services, accessed January 4, 2024. **12.** Shayna Henry et al., "E-SCOPE: A Strategic Approach to Identify and Accelerate Implementation of Evidence-based Best Practices," *Medical Care*, October 2019; Christine Chambers, "From Evidence to Influence: Dissemination and Implementation of Scientific Knowledge for Improved Pain Research and Management," *PAIN: The Journal of the International Association for the Study of Pain*, September 2018. **13.** "About Our Research," Kaiser Permanente, accessed July 29, 2026.

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