## **2024 SAIF Kaiser Permanente medical plan**

Premium rates	SAIF pays			Employee pays		
Level of plan coverage	Well-aware and engaged	Well-aware	Well	Well-aware and engaged*	Well-aware	Well
Employee only	\$815.45	\$780.23	\$727.22	\$0	\$33.00	\$66.00
Employee+spouse or domestic partner	\$1,630.90	\$1,561.46	\$1,455.45	\$0	\$65.00	\$131.00
Employee+child(ren)	\$1,467.81	\$1,403.82	\$1,306.80	\$0	\$60.00	\$121.00
Employee+family (includes spouse or domestic partner)	\$2,446.35	\$2,340.69	\$2,181.67	\$0	\$99.00	\$198.00
Spouse or domestic partner premium share		Spouse or domestic partner premium rates				
Spouse or domestic partner with no other group coverage		\$0				
Spouse or domestic partner with other group coverage or premium		\$324				
Spouse or domestic partner opts out of other group coverage		\$648				
Deductible & out-of-pocket expenses			K	iser network		
Level of plan coverage		Well-aware and	engaged	Well-aware	We	ell
Annual deductible per plan member		\$350		\$850	\$1,3	50
Annual family deductible (3 or more)		\$1,050		\$2,550	\$4,050	
Annual maximum per person (out-of-pocket)			\$2,500		\$3,500	
Annual family maximum (out-of-pocket—3 or more)		\$7,500		\$9,000	\$10,	500
Lifetime benefit maximum		None		None	Nor	ne
Preventive care services		Well-aware and engaged		<b>Well-aware</b>	We	ell
Routine preventive physical exam (adult, well baby, and well child)		\$0✓		\$0✓	\$0	<b>✓</b>
Immunizations		\$0✓		\$0✓	\$0	✓
Annual gynecological exams, pap tests exam		\$0✓		\$0✓	\$0	✓
X-ray and lab for preventive care		\$0✓		\$0✓	\$0·	✓
Colorectal cancer screening, including exam, bowel preparation medications, colonoscopy, sigmoidoscopy, and fecal occult test		\$0✓		\$0✓	\$0	<b>✓</b>
Mammogram		\$0✓		\$0✓	\$0	<b>✓</b>
Screening prostate-specific antigen (PSA) test (not including monitoring or ultrasensitive tests)		\$0✓		\$0✓	\$0	<b>✓</b>
Diabetes (following services HbA1c, retinal exam, urine test for kidney function, diabetic exams of mouth, teeth, and feet)		\$0✓		\$0✓	\$0	<b>✓</b>
Tobacco use cessation (8-12 weeks of treatment per attempt at quitting tobacco use. Only if in conjunction with a Kaiser tobacco cessation program approved by Kaiser that uses nicotine replacement therapy. Covered drugs include prescribed nicotine gum and patches. Medications must be purchased at a Kaiser pharmacy)		\$0✓		\$0✓	\$0	<b>√</b>

Professional and outpatient services	Well-aware and engaged	Well-aware	Well				
Office visits and primary care provider*	\$25√	\$25√	\$25√				
Office visits to specialist	\$35✓	\$35✓	\$35✓				
Naturopathic services (no visit limit)*	\$25✓	\$25√	\$25✓				
Chiropractic services (30 visit limit)	\$25✓	\$25√	\$25✓				
Acupuncture (24 visit limit)	\$25✓	\$25√	\$25✓				
Massage therapy (12 visit limit)	\$25✓	\$25√	\$25 ✓				
Physical, speech, occupational therapy (20 visits per therapy per year)	\$35✓	\$35√	\$35 ✓				
Laboratory	10%✓	10%✓	10%✓				
Outpatient surgery visit	10%✓	10%✓	10%✓				
Chemotherapy/radiation therapy visit	\$35✓	\$35√	\$35✓				
X-ray, imaging, and special diagnostic procedures	10%	10%	10%				
CT, MRI, PET scans	10%	10%	10%				
Telehealth	Well-aware and engaged	Well-aware	Well				
Video and phone visits with a provider	Covered in full√	Covered in full√	Covered in full√				
Maternity care	Well-aware and engaged	Well-aware	Well				
Scheduled prenatal care visits and postpartum visits	\$0✓	\$0√	\$0✓				
Laboratory	10%✓	10%✓	10%✓				
X-ray, imaging, and special diagnostic procedures	10%	10%	10%				
Inpatient hospital services	\$100/day, up to \$500 per admission√	\$100/day, up to \$500 per admission ✓	\$100/day, up to \$500 per admission√				
Fertility services	Well-aware and engaged	Well-aware	Well				
<ul> <li>Covered medical services are subject to a \$20,000 lifetime benefit maximum.</li> <li>Covered pharmacy services are subject to a \$10,000 lifetime benefit maximum.</li> <li>Fertility services accumulate toward the member's out-of-pocket maximum.</li> </ul>	50%	50%	50%				
Medical, equipment, supplies, devices	Well-aware and engaged	Well-aware	Well				
Durable medical equipment	10%	10%	10%				
Hospital services	Well-aware and engaged	Well-aware	Well				
Inpatient hospital services	\$100/day, up to \$500 per calendar year√	\$100/day, up to \$500 per calendar year√	\$100/day, up to \$500 per calendar year√				
Outpatient facility	10%✓	10%✓	10%✓				
Emergency and urgent services	Well-aware and engaged	Well-aware	Well				
Your emergency room copay is waived if admitted to hospital.							
Emergency services (for emergency medical conditions only)	\$150 <b>√</b>	\$150√	\$150√				
	·	\$35√	\$35√				
Urgent care services (for non-life-threatening illness or minor injury)	\$35✓	\$3 <b>5</b> Y	<b>\$33γ</b>				
Urgent care services (for non-life-threatening illness or minor injury)  Ambulance services (for emergency transportation only per transport)	\$35√ \$150√	\$35 <b>v</b> \$150√	\$150 <b>/</b>				

Inpatient skilled nursing services (up to 100 days per calendar year)	\$0	\$0	\$0				
Mental health and chemical dependency services	Well-aware and engaged	Well-aware	Well				
Inpatient hospital and residential services	\$100/day, up to \$500/calendar year√	\$100/day, up to \$500/calendar year√	\$100/day, up to \$500/calendar year√				
Outpatient provider services*	\$25✓	\$25√	\$25✓				
Prescription drugs	Well-aware and engaged	Well-aware	Well				
Annual prescription max per person (out-of-pocket)	None	None	None				
Prescription drugs (up to 30-day supply)							
Generic	\$10✓	\$10✓	\$10✓				
Preferred brand	\$30✓	\$30✓	\$30✓				
Non-preferred brand	50% up to \$100 max√	50% up to \$100 max√	50% up to \$100 max✓				
Mail-order prescription drugs (up to 90-day supply)							
Generic	\$20✓	\$20√	\$20✓				
Preferred brand	\$60✓	\$60✓	\$60✓				
Non-preferred brand	50% up to \$200 max√	50% up to \$200 max√	50% up to \$200 max✓				
Administered medications, including injections (all outpatient settings)	10%	10%	10%				
Nurse treatment room visits to receive injections	\$10✓	\$10✓	\$10✓				

<sup>\*\$5</sup> per visit for the first three outpatient visits combined for primary care, mental/behavioral health, substance abuse services, and other qualified visits.

Employees hired in 2024 are eligible for the Well-aware and engaged plan in 2024. In 2025, employees must follow the same requirements as existing employees. Please note for Virgin Pulse: the program restarts every October 1. Make sure you are participating in the program by this date as it could take the full year to reach 32,000 points. To qualify for the Well-aware and engaged plan in 2025, you must do two things:

- 1. Complete a biometric health screening between June 1 and August 31, 2024.
- 2. **Earn 32,000 points** in Virgin Pulse by September 30, 2024. Employees hired January 1, 2024 March 31, 2024, only need to reach 16,000 points to be eligible for Well-aware and engaged premium levels in 2025. Employees hired April 1 or after are automatically eligible for Well-aware and engaged for the 2025 benefit plan year.

This is not an all-inclusive summary of SAIF's policies with this health care provider. This is a summary only; it does not fully describe your benefits coverage. For detailed information on your benefits, refer to the online Kaiser Group Agreement and Evidence of Coverage.

<sup>✓</sup> No deductible needs to be met prior to receiving this benefit.