Connect/Alliant Plus

Getting the care you need
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Connect/Alliant Plus network</td>
<td>1</td>
</tr>
<tr>
<td>Provider locations</td>
<td>2</td>
</tr>
<tr>
<td>Care outside of our service area</td>
<td>3</td>
</tr>
<tr>
<td>Specialty care</td>
<td>4</td>
</tr>
<tr>
<td>Alternative care</td>
<td>5</td>
</tr>
<tr>
<td>Prescriptions and our formulary</td>
<td>6</td>
</tr>
<tr>
<td>Extras to help you stay healthy</td>
<td>8</td>
</tr>
</tbody>
</table>
You can access in-network care from three major health organizations in the Puget Sound region and thousands of practitioners across the state. You can choose from Washington’s top-ranked medical group—Washington Permanente Medical Group,* as well as physicians at Virginia Mason and The Everett Clinic, plus any in-network provider in the state.

If you’re willing to pay higher out-of-pocket costs, you can see any out-of-network provider in the regional First Choice Health network, national First Health Network, or any other licensed provider in the U.S. And you can switch personal physicians at any time.

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### IN NETWORK

**Kaiser Permanente Medical Offices**
In-network care at 25 locations with more than 1,000 doctors.**

**Virginia Mason**
In-network care at 8 locations with more than 450 doctors.**

**The Everett Clinic**
In-network care at 24 locations with nearly 500 physicians.**

**Other In-Network Providers**
In-network care with more than 9,000 additional providers** around Washington state.

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### OUT OF NETWORK

**First Choice Health**
Out-of-network care at discounted costs with more than 50,000 regional doctors in Washington, Oregon, Idaho, Alaska, and Montana.

**First Health Network**
Out-of-network care at discounted costs with more than 590,000 doctors nationwide (outside of Washington, Oregon, Idaho, Alaska, and Montana).

**Any Licensed Provider**
Out-of-network care without any discounts from any licensed provider in the U.S.

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*The Washington Health Alliance 2016 Community Checkup ranked Kaiser Foundation Health Plan of Washington (formerly Group Health Cooperative) the highest of 70 medical groups in the state. Based on 50 clinical measures of quality.

**Source: OIC Provider Network Form A
Here’s a list of cities and towns where you can find network providers. When you receive primary or specialty care at these Kaiser Permanente medical offices, you get access to our full breadth of services, including email access to your doctor, online medical records, and much more. You can also receive primary or specialty care at Virginia Mason, The Everett Clinic, or thousands of other network providers.
Other in-network providers
All provider locations may not be listed below. For the most current list of providers, visit our website at kp.org/wa/provider and click “Doctors and Other Facilities,” then select “Connect/Alliant Plus.” Or you can call Member Services.

Aberdeen  Enumclaw  Mount Vernon  Toppenish
Airway Heights  Everett  Mountlake  Troy
Anacortes  Everson  Mukilteo  Tukwila
Arlington  Fairfield  Naches  Tumwater
Athol  Federal Way  Napavine  Union Gap
Auburn  Ferdale  North Bend  University Place
Bainbridge Island  Fife  Olympia  Vashon
Belfair  Freeland  Palouse  Waitsburg
Bellevue  Friday Harbor  Pasco  Walla Walla
Bellingham  Garfield  Point Roberts  Wapato
Benton City  Gig Harbor  Port Orchard  West Richland
Black Diamond  Grandview  Post Falls  Woodinville
Blaine  Granite Falls  Poulsbo  Yakima
Bonney Lake  Greenbank  Prosser  Yelm
Bothell  Hayden  Pullman  Zillah
Bremerton  Hayden Lake  Redmond  
Buckley  Hoquiam  Renton  
Burien  Issaquah  Richland  
Burlington  Kenmore  Rochester  
Camano Island  Kennewick  Saint John  
Centralia  Kent  Sammamish  
Chattaroy  Kingston  SeaTac  
Chehalis  Kirkland  Seattle  
Cheney  La Conner  Sedro Woolley  
Clarkston  Lacey  Selah  
Cle Elum  Lake Forest Park  Shelton  
Clinton  Lake Stevens  Shoreline  
Coeur d’Alene  Lakewood  Silverdale  
Colfax  Langley  Snohomish  
College Place  Lewiston  Spanaway  
Connell  Liberty Lake  Spirit Lake  
Coupeville  Lopez Island  Spokane  
Covington  Lynden  Spokane Valley  
Darrington  Lynnwood  Stanwood  
Dayton  Marysville  Sultan  
Deer Park  McKenna  Sumner  
Des Moines  Meadow  Sumas  
Duvall  Medical Lake  Sunnyside  
Eastsound  Mercer Island  Tacoma  
Eatonville  Mill Creek  Tenino  
Edgewood  Milton  
Edmonds  Milton-Freewater  
Ellensburg  Monroe  
Elma  Moscow  

Wherever you go, you’re never far from expert care.

When you’re away from home, you can get out-of-network care through the regional First Choice Health and national First Health Network or see any other licensed provider in the U.S. Your out-of-network any-licensed-provider option includes Kaiser Permanente providers in other regions that are not in-network for this plan.

What about emergency care?
You’re covered for emergency and medically necessary urgent care anywhere in the world. If you’re admitted to a non-Kaiser Permanente Washington facility, you or a family member must call the Notification Line within 24 hours, or as soon as reasonably possible. If you need urgent care, call the Consulting Nurse helpline for assistance. We may be able to arrange for you to go to a facility where your cost shares will be lower. If your plan has a copayment, coinsurance, or deductible for emergency or urgent care, you’ll be billed accordingly.

What if I need to be reimbursed?
If you receive care at a non-affiliated hospital or medical center, you may be required to pay in full at the time of service. But don’t worry. When you get home, just mail us your completed claims form and medical receipts so we can reimburse you for any covered charges.
SPECIALTY CARE

You can self-refer to many in-network specialists, but your personal primary care physician can advise you and help guide your total health care program. That’s why it’s a good idea to select the doctor who’s right for you right from the start. From arranging your laboratory tests, X-rays, and hospital care, to prescriptions, referring you to certain specialists, physical therapy, and more, your doctor is your partner in getting the care you need and improving your health.

Access to specialty care

IN NETWORK

**Doctors with Washington Permanente Medical Group, Virginia Mason, and The Everett Clinic**

You can self-refer for specialty care from many specialists within these three medical groups, regardless of who provides your primary care. Once you’ve found an in-network specialist who you’d like to see, or one your primary care doctor has recommended to you, just call the specialist’s office and request an appointment. Or you can call Kaiser Permanente Member Services for assistance. But again, it’s always a good idea to talk first with your personal physician as there are some exceptions. Specialists are listed online at kp.org/wa/provider in the provider directory.

**Other in-network specialists**

This network includes nearly 4,500* in-network specialty care providers and services across the state. Your personal physician will need to request preauthorization from Kaiser Permanente before referring you to most of these other in-network specialists.

OUT OF NETWORK

You can access out-of-network specialty care with participating providers or any licensed provider in the U.S. However, care received out of network generally will cost you more than in-network care. Preauthorization from Kaiser Permanente is required for some specific specialty services.

**First Choice Health and First Health Network specialists**

Because Kaiser Foundation Health Plan of Washington Options, Inc. contracts with the regional First Choice Health and national First Health Network, these providers can offer covered services at discounted rates. As a result, when you see these providers:

- Your out-of-pocket expenses are based on the lower, negotiated fee.
- You’re not billed for any charges above what has been negotiated.
- There’s no paperwork for you. Providers send bills directly to Kaiser Foundation Health Plan of Washington Options, Inc.

**All other specialists**

If you see out-of-network licensed doctors who are not First Choice Health or First Health Network participating providers, you’ll be covered at your out-of-network benefit level for any covered services but the charges will not be discounted. These providers will bill you directly so you will have more paperwork than with in-network providers or out-of-network discounted providers. You will need to submit claim forms for covered care received out of network.

*Source: OIC Provider Network Form A*
Access to alternative care

We know choice is important to you. That’s why you can choose from a variety of treatment options, including alternative medicine. From naturopathy to chiropractic care, what really matters is making sure you have access to the full range of health care that you might want to use. See your Summary of Benefits and Coverage for details about your plan’s coverage.

How can I access alternative care providers?
You can self-refer to a licensed chiropractor, acupuncturist, or naturopath in the Connect/Alliant Plus network. And if you need to see a massage therapist, your personal physician can write a prescription and care plan for you.

How much of my alternative care is covered?
Some plans include a specific number of covered visits for naturopathy, acupuncture, and chiropractic care. Once you exhaust those visit limits, you may be eligible for more covered visits for naturopathy and acupuncture. Coverage for additional visits is dependent upon a provider review of your medical history and current health status. If more visits are deemed medically necessary, they will be covered at your plan’s benefit level.

Are there coverage exceptions?
Yes. Chiropractic care, in most cases, cannot be extended past the covered visit limit. However, there are a few exceptions to this rule for chiropractic care. Also, some plans may not offer any coverage for alternative care and, again, limitations to visits apply. Be sure to check your benefits booklet for details about your coverage.

What if I want care beyond what my plan covers?
All members can get access to alternative care through a non-covered program called Complementary ChoicesSM. You can learn more in “Perks to help you stay healthy” on page 8.

To see our alternative care providers, visit kp.org/wa/provider.

Kaiser Permanente specialty care

As a plan member, regardless of where you get your primary care, you have access to award-winning Kaiser Permanente specialists. Simply call Member Services toll-free at 1-888-901-4636 for a location nearest you and you will be connected to the appropriate appointment line. Individual specialists are listed on the Provider and Facility Directory online at kp.org/wa/provider.

Western Washington
Activity, Sports, and Exercise Medicine
Allergy and Asthma
Audiology
Cardiology
Dermatology
Gastroenterology
General Surgery
Hematology
Hospice
Midwifery Services
Nephrology
Neurology
Obstetrics/Gynecology
Occupational Medicine
Oncology
Ophthalmology
Optometry
Orthopedics
Otolaryngology
Physical Therapy
Psychiatry
Psychology
Pulmonary/Sleep Medicine
Speech, Language & Learning Services
Urology

Spokane Area
Obstetrics/Gynecology
Occupational Medicine
Optometry
Physical Therapy
Psychiatry
Psychology
The basics

Where can I fill my prescription?
Kaiser Permanente Medical Offices in the Connect/Alliant Plus Network, Virginia Mason, and the Everett Clinic

When you receive care at any of these facilities, you can get your prescriptions filled at (or transferred to) a pharmacy location at any of these three clinic systems. So no matter where you get your in-network care, you get access to all of these pharmacy locations for your prescription needs.

Other In-Network Pharmacies
If you don’t have convenient access to a pharmacy at a Kaiser Permanente medical facility, Virginia Mason, or The Everett Clinic, or you receive care from another in-network doctor, you can have your prescriptions filled at any in-network pharmacy in your community. In-network pharmacies are listed in our provider directory. See link at kp.org/wa/provider.

By Phone or Online
For refills that have been filled at least once at a Kaiser Permanente pharmacy (or that have been transferred into our pharmacy system), you can phone in your prescription, use the Kaiser Permanente Washington mobile app (kp.org/wa/mobile), or make a request online (kp.org/wa/pharmacy) for pick-up at a Kaiser Permanente medical office pharmacy or for home delivery by mail.

Out-of-Network Coverage
Your plan includes out-of-network coverage for prescription drugs. You may have your prescriptions filled at any out-of-network pharmacy according to your prescription drug benefit plan. You can access out-of-network coverage through the OptumRx national network of pharmacies. Visit kp.org/wa/provider and use the link to OptumRx to set up an account and then view your plan’s out-of-network pharmacies. The OptumRx network includes major chains like Walgreens, Rite Aid, and Wal-Mart.

How Many Days Supply Can I Order?
Depending on the type of medication, a prescription will be filled for either a 90-day supply or a 30-day supply at one time at Kaiser Permanente pharmacies and at other in-network pharmacies. However, if the medication is not on the maintenance list, only a 30-day supply will be filled at a time.

Do You Have a Home-Delivery Service?
Yes. Kaiser Permanente’s pharmacy system lets you order refills online or by phone, fax, or mail and have them delivered anywhere in the U.S. with no shipping charge for regular mail. On average, refills arrive within 3–5 days, but should be allowed up to 10 days.

Can I use the Kaiser Permanente mail-order service even if a non-Kaiser Permanente or out-of-network provider wrote my prescription?
Yes. Just have the doctor’s office fax, phone, or mail your new prescription to the Kaiser Permanente Mail-Order Pharmacy. All members—even those without pharmacy coverage—can use this convenient service. You can find transfer forms online on kp.org/wa/pharmacy.

Safety Requirements

What Is a Maintenance List?
A maintenance list includes medications that are taken regularly for a chronic condition, and do not raise significant concerns related to potential misuse, safety, or toxicity problems, and do not require frequent monitoring or dosing changes.

What Is Preauthorization?
For certain medications, specific medical criteria need to be met before that medication is covered to ensure the highest level of patient safety. The physician needs to communicate to Kaiser Permanente that the patient has met this criteria. Obtaining authorization before a medication is covered is called preauthorization.
What is a formulary?
A formulary is a list of preferred medications that are covered as a pharmacy benefit. For many medical conditions, there are multiple medications with similar effectiveness and safety. By monitoring the cost and availability of medications, we can often provide an equally effective drug while reducing overall health care costs. Our formulary is used as a guideline for our providers and does not dictate what your physician can or cannot prescribe. The extent your drug is covered depends on the specific plan purchased.

Why does the formulary sometimes list a generic drug and not a brand-name drug?
Generic-equivalent medications contain the same active ingredient as the brand-name medication but are more affordable. The generic medications become available as the patent for the more expensive brand runs out. The formulary will list the generic equivalent instead of the more expensive brand-name medication. If you opt for a brand-name drug, and it’s not medically necessary, you will be required to pay the difference in cost between the generic and brand-name drug in addition to a higher cost share.

Why do doctors sometimes prescribe nonformulary drugs?
There are situations when the use of nonformulary drugs are warranted. Those situations can include patients who have developed intolerance to formulary medications or patients who have tried and not responded to formulary alternatives.

Why can some drugs be refilled and others always need a new prescription?
How often a prescription can be refilled is related to its potential misuse, safety, or potential toxicity. For example:
- Noncontrolled prescriptions can be filled and refilled for one year from the date they are written before a new prescription from a physician is needed.
- Schedule 3–5 controlled prescriptions can be filled for six months from the date they are written or after they have been refilled five times (filled a total of six times) before a new prescription from a physician is needed.
- Schedule 2 controlled prescriptions are not refillable and would require a new prescription from the physician.

About coverage
How do I determine if there are requirements regarding my drug’s coverage?
Look up your medications in our formulary. You’ll find out if you need prior authorization or whether your medication requires step therapy, in which case you would need to try a generic alternative. If you’re on a drug that requires prior authorization and you obtained this with another company’s plan, please understand that in switching to a new plan carrier—Kaiser Permanente—you will still need to complete the preauthorization process with us.

If you have any medicines that fall into these categories, have your doctor initiate the coverage review process by contacting the Kaiser Permanente Pharmacy Drug Benefit Help Desk for Providers as soon as possible (1-800-729-1174). If approval isn’t obtained, your drug may not be covered.

If my drug isn’t on the formulary, what kind of coverage will I have?
Some plans provide limited coverage for nonformulary medications. Once you have a plan, contact your employer’s benefit office or Kaiser Permanente Member Services for information regarding your specific plan benefits for prescriptions.

Would my nonformulary drug be covered under the generic or brand-name copayment?
Neither. Some health plans provide limited coverage for nonformulary medications. These usually have a higher copay than the copay for a generic or brand-name drug. Once you have a plan, contact your employer’s benefit office or Kaiser Permanente Member Services for information regarding your specific plan benefits for prescriptions.

For pharmacy benefits and coverage questions, call Member Services at 206-630-4636 or toll-free 1-888-901-4636. Or visit the pharmacy services page at kp.org/wa/pharmacy for more detailed information, including a link to search for pharmacies.
Extras to help you stay healthy. Your health plan comes with a lot more than just coverage. These member perks provide additional ways for you to get care, take an active role in your health, and be the best you can possibly be.

**Classes, workshops, and support groups**
From cooking smart to living with chronic conditions such as diabetes, arthritis, and heart disease, these classes and other resources help you learn to live healthier. Support groups allow you to share with and learn from members going through similar health experiences. Visit kp.org/wa/member-info and select “Classes & Events.”

**Communication preferences**
Do you prefer to get information sent to your inbox rather than your mailbox? Kaiser Permanente members can choose to receive some information electronically, including plan information, news about events and services, health tips, and clinic updates. It’s as simple as signing up at kp.org/wa, and clicking the “Communication Preferences” link.

**Complementary Choices℠**
In addition to traditional medicine, we offer Complementary Choices. Receive a 20 percent discount on acupuncture, naturopathy, chiropractic care, massage, yoga, tai chi, Pilates, and personal trainers from a variety of network providers and other practitioners that participate in this program. Visit kp.org/wa and search “Complementary Choices” to learn more.

**Consulting Nurse Service**
Whether you have an illness, injury, or just want advice on symptoms, the Consulting Nurse Service is just a phone call away, 24/7. Nurses can also view your online medical record when you receive care at Kaiser Permanente. Call toll-free 1-800-297-6877.

**Fitness center discounts**
This special resource gives you access to numerous affordable options to get fit and have fun. You’ll get discounts on more than 10,000 fitness facilities nationwide, plus exercise videos and equipment for the perfect home workout. Weight management programs are also available at valuable savings. Visit globalfit.com/kpwa.

**Eye Care Services**
Take advantage of discounts throughout the year on everything from designer frames and sunglasses to contact lenses at 14 Eye Care locations, most within Kaiser Permanente medical offices. Special discounts for federal employees, military, and retirees. Visit kp.org/wa/eyecare.
Health Profile assessment

Your Health Profile is an online health questionnaire about your lifestyle habits and any health conditions. Once completed, a personalized, color-coded report tells you how you’re doing, and offers recommendations for positive changes. Learn more at kp.org/wa.

Kaiser Permanente member website
(kp.org/wa/member)

Choose a doctor, complete your Health Profile, order prescription refills, access articles and information on health topics, and check your health coverage and benefit usage—all online. When you receive care at Kaiser Permanente medical offices, you can also email your health care team, view your lab results and online medical record, access the medical records of your children (aged 12 and younger), schedule appointments, and view your after-visit summaries.

Mobile app

Kaiser Permanente Washington’s mobile app gives you easy access to health care information, no matter where you are. The app is available for the iPhone® and Android™ smartphones, and includes many features available on our Kaiser Permanente members website.

Tobacco cessation support

If you’re a tobacco user, the Quit For Life® Program is designed to help you stop at no additional cost. Proven individual phone-based or online programs give you the tools and assistance to quit for good. More than 50,000 members have participated in the past nine years and 37 percent have quit using tobacco.** To register, call toll-free 1-800-462-5327 or visit quitnow.net/kpwa.

Walk & Talk program

Join other Kaiser Permanente members for the free Walk & Talk program organized by the Activity, Sports, and Exercise Medicine department and available at six locations. Get a health tip, followed by a walk with a member of the Kaiser Permanente medical staff. Visit kp.org/wa/walkandtalk for times and locations.

Do you have more questions about our plans—or just need help signing up? Call Member Services at 1-888-901-4636 and we’ll be happy to help you.

KAISER PERMANENTE NONDISCRIMINATION NOTICE

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. ("Kaiser Permanente") comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex. Kaiser Permanente does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Kaiser Permanente:

Provides free aids and services to people with disabilities to communicate effectively with us, such as:
- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:
- Qualified interpreters
- Information written in other languages

If you need these services, contact the Kaiser Permanente Civil Rights Coordinator.

If you believe that Kaiser Permanente has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:
Kaiser Permanente Civil Rights Coordinator, Kaiser Foundation Health Plan of Washington Headquarters, 320 Westlake Ave. N., Suite 100, GHQ-E2N, Seattle, WA 98109, 206-448-5819, 206-877-0645 (Fax), complianceoffice@kp.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Kaiser Permanente Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD).

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html

LANGUAGE ACCESS SERVICES

**English: ATTENTION:** If you speak English, language assistance services, free of charge, are available to you. Call 1-888-901-4636 (TTY: 1-800-833-6388 or 711).

**Español (Spanish): ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-901-4636 (TTY: 1-800-833-6388 / 711).

**中文 (Chinese): 注意：**如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-888-901-4636 (TTY: 1-800-833-6388 / 711)。

**Tiếng Việt (Vietnamese): CHÚ Ý:** Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-901-4636 (TTY: 1-800-833-6388 / 711) .

**한국어 (Korean): 주의:** 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-901-4636 (TTY: 1-800-833-6388 / 711) 번으로 전화해 주십시오.

**Русский (Russian): ВНИМАНИЕ:** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-901-4636 (телетайп: 1-800-833-6388 / 711).

Українська (Ukrainian): УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 1-888-901-4636 (телетайп: 1-800-833-6388 / 711).

(Khmer) ភាសាខ្មែរ ៖ របយ័ត៖ េេបើសិនអកនិយខ្រ, េសជំ ខយផក េយម ិនគិតល គឺចនសំប់ េរអក។ ចូរទូ រស័ព 1-888-901-4636 (TTY: 1-800-833-6388 / 711).

日本語 (Japanese): 注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。1-888-901-4636 (TTY: 1-800-833-6388 / 711) まで、お電話にてご連絡ください。

(Adamawa (Fulfulde): MAANDO: To a waawi [Adamawa], e woodi ballooji-ma to ekkitaaki wolde caahu. Noddu 1-888-901-4636 (TTY: 1-800-833-6388 / 711).
