

Care for all that is you



Experience health care designed with you in mind

You deserve high-quality care for your total health, whatever you need – from routine checkups to complex treatments to mental wellness support.

No matter what your priority is, ours is providing excellent care – for the you who's feeling great, the you who needs support, and every you in between.



Discover how we can help you stay healthy and doing what you love at kp.org/learnthebasics.



Go where you feel like your best self

Care at Kaiser Permanente feels easier and faster, with the help of connected caregivers, more ways to get care, and support for a healthy mind, body, and spirit. Welcome to care for all that is you.

Important open enrollment dates for 2025

- The open enrollment period for 2025 coverage runs from **November 1, 2024**, through **January 15, 2025**.
- You can change or apply for coverage through Kaiser Permanente, or we can help you apply through Connect for Health Colorado.
- For coverage that starts on **January 1, 2025**, we must receive your Application for health coverage no later than **December 15, 2024**.

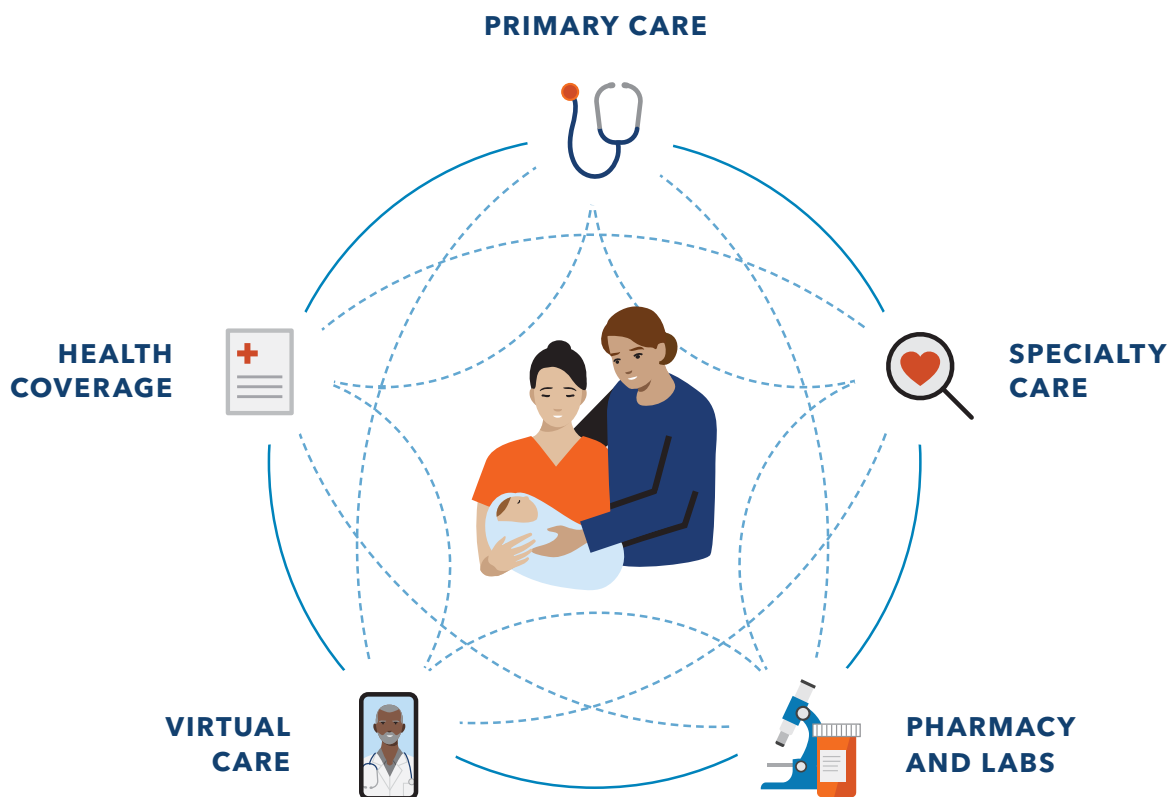
Enrolling during a special enrollment period

- Are you getting married, moving, or losing your health coverage? You can also enroll or change your coverage at other times throughout the year if you have a qualifying life event.
- Visit kp.org/specialenrollment for a list of qualifying life events and instructions.

Want to talk? We're here to help.

A Kaiser Permanente enrollment specialist can answer your questions – like where to get care or what healthy extras are included. Call **1-800-494-5314** (TTY 711).





A different kind of care

Your health care should make your life easier – with doctors, hospitals, and health plan benefits that are all connected and focused on providing you with exceptional care.

With Kaiser Permanente, you get

Personalized care from
high-quality specialists

24/7 access to care
wherever you are

Predictable costs and
less paperwork

Members stay with Kaiser Permanente nearly 3 times as long
as other health plans.¹

Care that's **personalized**

For the you who deserves to be seen and heard

You need a doctor who understands you. Someone who'll learn your lifestyle, health risks, and goals. At Kaiser Permanente, you typically don't have to repeat yourself every time you visit the doctor. Your care team has access to your entire Kaiser Permanente medical history through your electronic health record, so they know you and your story.

You can also change your doctor anytime and choose from many clinicians who speak more than one language, so it's easy to find the perfect match for you.

“ From seeing the doctor to getting lab work, I knew exactly where to go and the flow was seamless. ”

– Kaiser Permanente member

We guide you through every step of your care^{2,3}



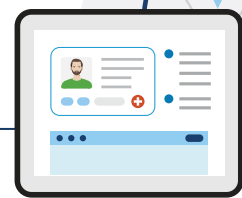
Your Kaiser Permanente health history lives in your electronic health record.



Your care team helps guide you through appointments and referrals.



Your health record is available to you and your care team 24/7.



Your care team lets you know when to schedule checkups and tests.



Care that's world class

For the you who expects high quality

No matter your needs – mental health, maternity, cancer care, heart health, and beyond – you have access to highly skilled doctors, cutting-edge technology, and advanced evidence-based care.



Explore high-quality care options for every health need at buykp.org.

We're a national leader in outcomes

We are one of the national leaders in outcomes for conditions like cancer and heart disease, and we're among the top-rated health plans in every state we serve. ^{4,5,6,7,8}



Kaiser Permanente members are

33% more likely to **survive heart disease**⁷

52% more likely to **survive colorectal cancer**⁸

20% **less likely to die early** of cancer⁷



Recognized for excellence

- Number one on Insure.com's 2024 Best Health Insurance Companies list⁹
- Highest-performing 2023 commercial plan in Colorado by NCQA for 36 of approximately 150 effectiveness-of-care measures¹⁰
- 332 Kaiser Permanente physicians named Top Doctors by 5280 magazine in 2024
- Best Health Care Insurer in *ColoradoBiz* magazine's 2024 Best Of issue¹¹

Care that's convenient

For the you with a busy schedule

Visit kp.org or use our app to make a routine same-day or next-day appointment, or talk to a clinician 24/7 by phone or video.¹² No matter how you connect, you'll always speak with a medical professional who can see your Kaiser Permanente health history and pick up where you left off.



Your health at your fingertips

- Get 24/7 virtual care.
- Email your care team.
- View most lab results and doctor's notes.
- Refill most prescriptions.
- Check in for appointments.
- Pay bills and view statements.

Do more in one visit

Many of our facilities have pharmacies and labs in the same building, so you can see your doctor, get your tests, and pick up your prescriptions all in one stop.



More than half of members avoided a trip to the ER or urgent care by meeting a clinician for a video visit.¹³



Urgent care at home: Members who live in the Denver/Boulder area can get in-home urgent care from DispatchHealth.

Care you can **count on**

For the you who wants dependable service

You should always have the right care – when and where you need it. Choose the Kaiser Permanente doctors and locations that work best for you, and know your care team is connected to a national network of specialists and services.

At Kaiser Permanente, most members say they get primary care appointments as soon as they expect – or sooner.¹⁴

You can get timely, convenient service with:

- ✓ More primary care appointments
- ✓ Quick lab results
- ✓ 24/7 virtual care
- ✓ A large clinician network



See how to get care that meets you where you are at kp.org/connectedtocare.



Mail-order pharmacy

- Easy refills online, in person, or over the phone
- Most are same-day pickup
- Most prescriptions delivered to your front door¹⁵
- Same-day or next-day home delivery available for an additional fee¹⁵



Care while traveling

- Help with vaccinations, prescription refills, and more
- Urgent and emergency care worldwide – not just at Kaiser Permanente facilities

24/7 virtual care

You're covered for 24/7 virtual care anywhere in the U.S. Talk to a clinician anytime over video or phone for quality care when you need it – no appointment needed.¹²

Care that's **all-encompassing**

For the you who wants to explore all your health options

Kaiser Permanente members can get help with depression, anxiety, addiction, and mental or emotional health. You don't need a referral for routine mental health services at Kaiser Permanente or a contracted provider. Share your concerns with anyone on your care team at any time, and they can connect you to the support you need.

- Individual or group therapy
- Health classes¹⁶
- Medication
- Self-care resources
- Mental wellness apps¹⁷

Not sure where to start? Talk to your personal doctor about your concerns or call us to talk with our mental health team.



Resources for your everyday wellness

Take advantage of classes, services, and programs to help you achieve your health goals.¹⁸

- Acupuncture, massage therapy, and chiropractic care
- Healthy lifestyle programs¹⁸
- Wellness coaching¹⁸



Enjoy special deals

on fitness programs, gym memberships, and online resources.

Choosing your health plan

We offer a variety of plans to help fit your needs and budget. All of them offer the same quality care, but the way they split the costs is different.

Available plans

Kaiser Permanente offers plans with your choice of 3 provider networks designed to meet different needs and affordability.

- **KP CO plans** are available for individuals and families who would like a greater choice among affiliated providers and hospitals.
- **KP Select CO plans**¹⁹ offer an affordable option with a tailored network of affiliated providers and hospitals in the Denver/Boulder and Colorado Springs area. To learn more about the KP Select plans, visit kp.org/kpselect/co.
- **Colorado Option plans** are standardized plans designed by the State Division of Insurance (DOI). For more information on the Colorado Option plans, go to kp.org/co-option.

With all our plans, members can receive care, including virtual options, from primary care providers and specialists at any of the 29 Kaiser Permanente medical offices throughout the front range. The plans vary by participating affiliated providers,²⁰ hospitals, and urgent and emergency care locations.²¹

The plans are available in different areas based on where you live.

Denver/ Boulder	Northern Colorado & Pueblo	Colorado Springs area
• KP CO • KP Select CO • Colorado Option	• KP CO • Colorado Option	• KP Select CO • Colorado Option

For information about doctors and locations in your area, go to kp.org/doctors.

Copay plans – gold

Copay plans are the simplest. You know in advance how much you'll pay for care like doctor visits and prescriptions. This amount is called your copay. Your monthly premium is higher, but you'll pay much less when you get care.

Deductible plans – gold, silver, bronze, and catastrophic

With a deductible plan, your monthly premium is lower, but you'll need to pay the full charges for most covered services until you reach a set amount, known as your deductible. Then you'll start paying less – a copay or coinsurance. Depending on your plan, some services, like office visits or prescriptions, may be available at a copay or coinsurance before you reach your deductible.

HSA-qualified high deductible health plans – silver and bronze

HSA-qualified deductible plans are deductible plans with a special feature. With this plan, you can set up a health savings account (HSA) to pay for health costs like copays, coinsurance, and deductible payments. And you won't pay federal taxes on the money in this account. You can use your HSA anytime to pay for care, including some services that may not be covered by your plan, such as eyeglasses or adult dental.²² And if you have money left in your HSA at the end of the year, it will roll over for you to use the next year.

Example of your costs for care

Let's say you hurt your ankle. You visit your personal doctor, who orders an X-ray. It's just a sprain, so the doctor prescribes a generic pain medication. Here's an example of what you'd pay out of pocket for these services with each type of health plan.

Plan name	Office visit	X-ray	Generic drug
KP CO Gold 0/25 RX Copay (no deductible)	\$25	40%	\$15*
KP CO Silver 5500/25 X (\$5,500 deductible)	\$25	40% after deductible	\$25*
KP CO Bronze 6500/35%/ HSA (\$6,500 deductible)	35% after deductible	35% after deductible	\$35 after deductible*

You may qualify for federal or state financial assistance

Under health care reform, the federal or state government may provide financial assistance for many people, depending on their income.

- Financial assistance is available for premiums and out-of-pocket expenses.
- Assistance is available based on income and family size.



You may be eligible for federal or state financial assistance to help you pay for care or coverage. Visit buykp.org for details.



*Mail order: 90-day supply of qualified prescriptions for the cost of a 60-day supply.

The cost estimates above are from kp.org/treatmentestimates. Visit this site anytime to get an idea of what the charges for common services might be before you reach your deductible.

Understanding the plans: benefit highlights

The charts on the next few pages show you a sample of each plan's benefits. Review the diagram below to help you understand how to read those charts.

Here's a quick look at how to use the chart

Benefit highlights		KP	E
		KP CO Silver 2200/25 KP Select CO Silver 2200/25 KP CO Silver 2200/25 X KP Select CO Silver 2200/25 X	
Plan type	Deductible		
Annual medical deductible (individual/family)	\$2,200/\$4,400		
Annual out-of-pocket maximum (individual/family)	\$8,800/\$17,600		
Benefits			
Virtual care			
Chat, Email, E-visit, Phone, and Video visit	No charge		
Preventive care			
Routine physical exam, mammograms, etc.	No charge		
Outpatient services (per visit or procedure)			
Primary care office visit	\$25		
Specialty care office visit	\$50		
Most X-rays	35% after deductible		
Most lab tests	\$30		
MRI, CT, PET	\$500		
Outpatient surgery	25% after deductible Ambulatory Surgery Center/35% after deductible Outpatient Department of hospital		
Mental health visit	\$25		
Inpatient hospital care			
Room and board, surgery, anesthesia, X-rays, lab tests, medications, mental health care	35% after deductible		
Maternity			
Routine prenatal care visit, first postpartum visit	35% after deductible		
Delivery and inpatient well-baby care	35% after deductible		
Emergency and urgent care			
Emergency department visit	35% after deductible		
Urgent care visit	\$100		
Prescription drugs (up to a 30-day supply)			
Generic	\$20*		
Preferred brand	\$85 after \$1,000 pharmacy deductible*		
Non-preferred brand	35% after \$1,000 pharmacy deductible		
Specialty	35% after \$1,000 pharmacy deductible		
Whole health			
Healthy services			
		Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	

KP Offered through Kaiser Permanente
E Offered through the health benefit exchange, Connect for Health Colorado

Annual deductible

You need to pay this amount before your plan starts helping you pay for most covered services. Under this sample plan, you'd pay the full charges for covered services until you reach \$2,200 for yourself or \$4,400 for your family. Then you'd start paying copays or coinsurance.

Annual out-of-pocket maximum

This is the most you'll pay for care during the calendar year before your plan starts paying 100% for most covered services. In this example, you'd never pay more than \$8,800 for yourself and no more than \$17,600 for your family for your copays, coinsurance, and deductible in a calendar year.

Covered before you reach the deductible

With some services, you'll only pay a copay or coinsurance, regardless of whether you've reached your deductible. Under this plan, primary care visits are covered at a \$25 copay—even before you meet your deductible. With our Silver deductible plans, primary care, specialty care, and urgent care visits all are covered before you reach the deductible.

Coinsurance

After reaching your deductible, this is a percentage of the charges that you may pay for covered services. Here, you'd pay 35% of the cost per day for your inpatient hospital care after you reach your deductible. Your plan would pay the rest for the remainder of the calendar year.

Copay

This is the set amount you pay for covered services, usually after you reach your deductible. In this example, you'd start paying a \$100 copay for urgent care visits, whether or not you have met your deductible.

Prescription fill

New prescriptions for maintenance medications can be filled at any plan pharmacy. Refills for maintenance medications must be filled at Kaiser Permanente medical office pharmacies or through our mail-order program.

*Mail order: 90-day supply of qualified prescriptions for the cost of a 60-day supply.
 After the first fill, maintenance drugs are required to be filled at a Kaiser Permanente medical office pharmacy, or through mail order.

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E Offered through the health benefit exchange,
Connect for Health Colorado

Financial assistance options are available for certain plans, and for
Native Alaskans and American Indians on connectforhealthco.com.

Benefit highlights	KP E KP CO Bronze 8500/50 KP Select CO Bronze 8500/50	KP E KP CO Bronze 7500/60 RX Copay KP Select CO Bronze 7500/60 RX Copay	KP E KP Colorado Option Bronze
Plan type	Deductible	Deductible	Deductible
Annual medical deductible (individual/family)	\$8,500/\$17,000	\$7,500/\$15,000	\$7,500/\$15,000
Annual out-of-pocket maximum (individual/family)	\$9,200/\$18,400	\$9,200/\$18,400	\$9,200/\$18,400
Benefits			
Virtual care			
Chat, Email, E-visit, Phone, and Video visit	No charge	No charge	No charge
Preventive care			
Routine physical exam, mammograms, etc.	No charge	No charge	No charge
Outpatient services (per visit or procedure)			
Primary care office visit	First visit \$50; additional visits no charge after deductible	First 2 visits \$60; additional visits no charge after deductible	First 3 visits no charge; additional visits \$50 after deductible
Specialty care office visit	50% after deductible	45% after deductible	50% after deductible
Most X-rays	50% after deductible	45% after deductible	50% after deductible
Most lab tests	50% after deductible	45% after deductible	50% after deductible
MRI, CT, PET	50% after deductible	45% after deductible	50% after deductible
Outpatient surgery	40% after deductible Ambulatory Surgery Center/50% after deductible Outpatient Department of hospital	40% after deductible Ambulatory Surgery Center/50% after deductible Outpatient Department of hospital	50% after deductible
Mental health visit	No charge after deductible	No charge	No charge
Inpatient hospital care			
Room and board, surgery, anesthesia, X-rays, lab tests, medications, mental health care	50% after deductible	45% after deductible	50% after deductible
Maternity			
Routine prenatal care visit, first postpartum visit	50% after deductible	45% after deductible	First 3 visits no charge; additional visits \$50 after deductible
Delivery and inpatient well-baby care	50% after deductible	45% after deductible	50% after deductible
Emergency and urgent care			
Emergency department visit	50% after deductible	45% after deductible	50% after deductible
Urgent care visit	First visit \$150; additional visits 50% after deductible	First 2 visits \$150; additional visits 45% after deductible	50% after deductible
Prescription drugs (up to a 30-day supply)			
Generic	\$30*	\$35*	\$30*
Preferred brand	50% after deductible	\$250*	\$200*
Non-preferred brand	50% after deductible	\$450*	\$350*
Specialty	50% after deductible	\$750*	\$700*
Whole health			
Healthy services	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .

*Mail order: 90-day supply of qualified prescriptions for the cost of a 60-day supply.

After the first fill, maintenance drugs are required to be filled at a Kaiser Permanente medical office pharmacy, or through mail order.

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KP Offered through Kaiser Permanente

E Offered through the health benefit exchange,
Connect for Health Colorado

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Native Alaskans and American Indians on connectforhealthco.com.

Benefit highlights	KP E KP CO Bronze 6500/50 KP Select CO Bronze 6500/50	KP E KP CO Bronze 6500/35%/HSA KP Select CO Bronze 6500/35%/HSA	KP KP CO Silver 5500/25 X KP Select CO Silver 5500/25 X
Plan type	Deductible	HSA-qualified	Deductible
Annual medical deductible (individual/family)	\$6,500/\$13,000	\$6,500/\$13,000	\$5,500/\$11,000
Annual out-of-pocket maximum (individual/family)	\$9,200/\$18,400	\$7,500/\$15,000	\$9,200/\$18,400
Benefits			
Virtual care			
Chat, Email, E-visit, Phone, and Video visit	No charge	No charge after deductible	No charge
Preventive care			
Routine physical exam, mammograms, etc.	No charge	No charge	No charge
Outpatient services (per visit or procedure)			
Primary care office visit	First 3 visits \$50; additional visits no charge after deductible	35% after deductible	\$25
Specialty care office visit	40% after deductible	35% after deductible	\$70
Most X-rays	40% after deductible	35% after deductible	40% after deductible
Most lab tests	40% after deductible	35% after deductible	40% after deductible
MRI, CT, PET	40% after deductible	35% after deductible	40% after deductible
Outpatient surgery	30% after deductible Ambulatory Surgery Center/40% after deductible Outpatient Department of hospital	25% after deductible Ambulatory Surgery Center/35% after deductible Outpatient Department of hospital	30% after deductible Ambulatory Surgery Center/40% after deductible Outpatient Department of hospital
Mental health visit	No charge after deductible	35% after deductible	\$25
Inpatient hospital care			
Room and board, surgery, anesthesia, X-rays, lab tests, medications, mental health care	40% after deductible	35% after deductible	40% after deductible
Maternity			
Routine prenatal care visit, first postpartum visit	40% after deductible	35% after deductible	40% after deductible
Delivery and inpatient well-baby care	40% after deductible	35% after deductible	40% after deductible
Emergency and urgent care			
Emergency department visit	40% after deductible	35% after deductible	40% after deductible
Urgent care visit	First 3 visits \$150; additional visits 40% after deductible	35% after deductible	\$100
Prescription drugs (up to a 30-day supply)			
Generic	\$30*	\$35 after deductible*	\$25*
Preferred brand	40% after deductible	35% after deductible	\$100*
Non-preferred brand	40% after deductible	35% after deductible	40% after deductible
Specialty	40% after deductible	35% after deductible	40% after deductible
Whole health			
Healthy services	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .

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Plan type	Deductible	Deductible	Deductible
Annual medical deductible (individual/family)	\$4,000/\$8,000	\$4,000/\$8,000	\$4,500/\$9,000
Annual out-of-pocket maximum (individual/family)	\$8,500/\$17,000	\$9,000/\$18,000	\$9,200/\$18,400
Benefits			
Virtual care			
Chat, Email, E-visit, Phone, and Video visit	No charge	No charge	No charge
Preventive care			
Routine physical exam, mammograms, etc.	No charge	No charge	No charge
Outpatient services (per visit or procedure)			
Primary care office visit	\$25	No charge	\$30
Specialty care office visit	\$85	\$80	\$90
Most X-rays	40% after deductible	40% after deductible	40% after deductible
Most lab tests	40% after deductible	40% after deductible	40% after deductible
MRI, CT, PET	40% after deductible	40% after deductible	40% after deductible
Outpatient surgery	30% after deductible Ambulatory Surgery Center/40% after deductible Outpatient Department of hospital	40% after deductible	30% after deductible Ambulatory Surgery Center/40% after deductible Outpatient Department of hospital
Mental health visit	\$25	No charge	\$30
Inpatient hospital care			
Room and board, surgery, anesthesia, X-rays, lab tests, medications, mental health care	40% after deductible	40% after deductible	40% after deductible
Maternity			
Routine prenatal care visit, first postpartum visit	40% after deductible	No charge	40% after deductible
Delivery and inpatient well-baby care	40% after deductible	40% after deductible	40% after deductible
Emergency and urgent care			
Emergency department visit	40% after deductible	40% after deductible	40% after deductible
Urgent care visit	\$100	\$80	\$100
Prescription drugs (up to a 30-day supply)			
Generic	\$15*	\$20*	\$25*
Preferred brand	\$80*	\$125*	\$100*
Non-preferred brand	40% after deductible	\$300*	\$400*
Specialty	40% after deductible	\$650*	\$700*
Whole health			
Healthy services	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .

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Plan type	HSA-qualified	Deductible	Deductible
Annual medical deductible (individual/family)	\$3,700/\$7,400	\$2,200/\$4,400	\$2,000/\$4,000
Annual out-of-pocket maximum (individual/family)	\$7,000/\$14,000	\$8,800/\$17,600	\$8,500/\$17,000
Benefits			
Virtual care			
Chat, Email, E-visit, Phone, and Video visit	No charge after deductible	No charge	No charge
Preventive care			
Routine physical exam, mammograms, etc.	No charge	No charge	No charge
Outpatient services (per visit or procedure)			
Primary care office visit	20% after deductible	\$25	\$20
Specialty care office visit	20% after deductible	\$50	\$50
Most X-rays	20% after deductible	35% after deductible	30% after deductible
Most lab tests	20% after deductible	\$30	30% after deductible
MRI, CT, PET	20% after deductible	\$500	30% after deductible
Outpatient surgery	10% after deductible Ambulatory Surgery Center/20% after deductible Outpatient Department of hospital	25% after deductible Ambulatory Surgery Center/35% after deductible Outpatient Department of hospital	20% after deductible Ambulatory Surgery Center/30% after deductible Outpatient Department of hospital
Mental health visit	20% after deductible	\$25	\$20
Inpatient hospital care			
Room and board, surgery, anesthesia, X-rays, lab tests, medications, mental health care	20% after deductible	35% after deductible	30% after deductible
Maternity			
Routine prenatal care visit, first postpartum visit	20% after deductible	35% after deductible	30% after deductible
Delivery and inpatient well-baby care	20% after deductible	35% after deductible	30% after deductible
Emergency and urgent care			
Emergency department visit	20% after deductible	35% after deductible	30% after deductible
Urgent care visit	20% after deductible	\$100	\$75
Prescription drugs (up to a 30-day supply)			
Generic	\$15 after deductible*	\$20*	\$5*
Preferred brand	\$85 after deductible*	\$85 after \$1,000 pharmacy deductible*	\$40 after \$195 pharmacy deductible*
Non-preferred brand	20% after deductible	35% after \$1,000 pharmacy deductible	30% after \$195 pharmacy deductible
Specialty	20% after deductible	35% after \$1,000 pharmacy deductible	30% after \$195 pharmacy deductible
Whole health			
Healthy services	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .

*Mail order: 90-day supply of qualified prescriptions for the cost of a 60-day supply.

After the first fill, maintenance drugs are required to be filled at a Kaiser Permanente medical office pharmacy, or through mail order.

This plan summary highlights the benefits, copays, coinsurance, and deductibles that are most frequently asked about. Please refer to the *Membership Agreement* for complete details on your plan or for specific limitations and exclusions. To request a copy of the *Membership Agreement*, please visit kp.org/plandocuments, call us at 1-800-632-9700 (TTY 711), or contact your broker. For services subject to the deductible, you'll have to pay health care expenses out of pocket until you meet your deductible. Most deductibles, copays, and coinsurance contribute to the out-of-pocket maximum.

KP Offered through Kaiser Permanente

E Offered through the health benefit exchange, Connect for Health Colorado

Financial assistance options are available for certain plans, and for Native Alaskans and American Indians on connectforhealthco.com.

Benefit highlights	KP E KP Colorado Option Gold	KP E KP CO Gold 1500/20 KP Select CO Gold 1500/20	KP E KP CO Gold 0/25 RX Copay KP Select CO Gold 0/25 RX Copay	KP E KP CO Catastrophic** KP Select CO Catastrophic**
Plan type	Deductible	Deductible	Copayment	Deductible
Annual medical deductible (individual/family)	\$1,875/\$3,750	\$1,500/\$3,000	None/None	\$9,200/\$18,400
Annual out-of-pocket maximum (individual/family)	\$8,700/\$17,400	\$8,500/\$17,000	\$7,500/\$15,000	\$9,200/\$18,400
Benefits				
Virtual care				
Chat, Email, E-visit, Phone, and Video visit	No charge	No charge	No charge	No charge after deductible
Preventive care				
Routine physical exam, mammograms, etc.	No charge	No charge	No charge	No charge
Outpatient services (per visit or procedure)				
Primary care office visit	No charge	\$20	\$25	First 3 visits no charge; additional visits no charge after deductible
Specialty care office visit	\$50	\$60	\$60	No charge after deductible
Most X-rays	30% after deductible	25% after deductible	40%	No charge after deductible
Most lab tests	30% after deductible	25% after deductible	40%	No charge after deductible
MRI, CT, PET	30% after deductible	25% after deductible	\$500	No charge after deductible
Outpatient surgery	30% after deductible	15% after deductible Ambulatory Surgery Center/25% after deductible Outpatient Department of hospital	30% Ambulatory Surgery Center/40% Outpatient Department of hospital	No charge after deductible
Mental health visit	No charge	\$20	\$25	No charge after deductible
Inpatient hospital care				
Room and board, surgery, anesthesia, X-rays, lab tests, medications, mental health care	30% after deductible	25% after deductible	40%	No charge after deductible
Maternity				
Routine prenatal care visit, first postpartum visit	No charge	25% after deductible	40%	No charge after deductible
Delivery and inpatient well-baby care	30% after deductible	25% after deductible	40%	No charge after deductible
Emergency and urgent care				
Emergency department visit	30% after deductible	25% after deductible	\$750	No charge after deductible
Urgent care visit	\$50	\$75	\$75	No charge after deductible
Prescription drugs (up to a 30-day supply)				
Generic	\$10*	\$10*	\$15*	No charge after deductible
Preferred brand	\$50*	\$40*	\$50*	No charge after deductible
Non-preferred brand	\$200*	25% after \$195 pharmacy deductible	\$375*	No charge after deductible
Specialty	\$600*	25% after \$195 pharmacy deductible	\$625*	No charge after deductible
Whole health				
Healthy services	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .

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**Only applicants younger than age 30 or applicants age 30 and older who receive an exemption due to lack of affordable coverage or hardship may enroll in this plan. To apply for an exemption, please go to marketplace.cms.gov/applications-and-forms/hardship-exemption.pdf and follow the instructions.

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This plan summary highlights the benefits, copays, coinsurance, and deductibles that are most frequently asked about. Please refer to the *Membership Agreement* for complete details on your plan or for specific limitations and exclusions. To request a copy of the *Membership Agreement*, please visit kp.org/plandocuments, call us at 1-800-632-9700 (TTY 711), or contact your broker. For services subject to the deductible, you'll have to pay health care expenses out of pocket until you meet your deductible. Most deductibles, copays, and coinsurance contribute to the out-of-pocket maximum.

E Offered through the health benefit exchange,
Connect for Health Colorado

Cost Share Reduction (CSR) Plans—You must qualify for and enroll
in the CSR plans on this page through connectforhealthco.com.

Benefit highlights	E KP CO Silver 3000/20/73% CSR KP Select CO Silver 3000/20/73% CSR	E KP CO Silver 75/10/94% CSR KP Select CO Silver 75/10/94% CSR	E KP Colorado Option Silver 73% AV
Plan type	Deductible	Deductible	Deductible
Annual medical deductible (individual/family)	\$3,000/\$6,000	\$75/\$150	\$2,600/\$5,200
Annual out-of-pocket maximum (individual/family)	\$7,250/\$14,500	\$2,200/\$4,400	\$7,350/\$14,700
Benefits			
Virtual care			
Chat, Email, E-visit, Phone, and Video visit	No charge	No charge	No charge
Preventive care			
Routine physical exam, mammograms, etc.	No charge	No charge	No charge
Outpatient services (per visit or procedure)			
Primary care office visit	\$20	\$10	No charge
Specialty care office visit	\$75	\$20	\$80
Most X-rays	35% after deductible	10% after deductible	40% after deductible
Most lab tests	35% after deductible	10% after deductible	40% after deductible
MRI, CT, PET	35% after deductible	10% after deductible	40% after deductible
Outpatient surgery	25% after deductible Ambulatory Surgery Center/35% after deductible Outpatient Department of hospital	10% after deductible	40% after deductible
Mental health visit	\$20	\$10	No charge
Inpatient hospital care			
Room and board, surgery, anesthesia, X-rays, lab tests, medications, mental health care	35% after deductible	10% after deductible	40% after deductible
Maternity			
Routine prenatal care visit, first postpartum visit	35% after deductible	10% after deductible	No charge
Delivery and inpatient well-baby care	35% after deductible	10% after deductible	40% after deductible
Emergency and urgent care			
Emergency department visit	35% after deductible	10% after deductible	40% after deductible
Urgent care visit	\$100	\$50	\$80
Prescription drugs (up to a 30-day supply)			
Generic	\$15*	\$5*	\$20*
Preferred brand	\$60*	\$10*	\$125*
Non-preferred brand	35% after deductible	10%	\$300*
Specialty	35% after deductible	10%	\$600*
Whole health			
Healthy services	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .

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E Offered through the health benefit exchange,
Connect for Health Colorado

Cost Share Reduction (CSR) Plans—You must qualify for and enroll
in the CSR plans on this page through connectforhealthco.com.

Benefit highlights	E KP Colorado Option Silver 94% AV	E KP CO Silver 4000/30 RX Copay 73% CSR KP Select CO Silver 4000/30 RX Copay 73% CSR	E KP CO Silver 50/5 RX Copay 94% CSR KP Select CO Silver 50/5 RX Copay 94% CSR
Plan type	Deductible	Deductible	Deductible
Annual medical deductible (individual/family)	\$100/\$200	\$4,000/\$8,000	\$50/\$100
Annual out-of-pocket maximum (individual/family)	\$1,225/\$2,450	\$7,350/\$14,700	\$2,500/\$5,000
Benefits			
Virtual care			
Chat, Email, E-visit, Phone, and Video visit	No charge	No charge	No charge
Preventive care			
Routine physical exam, mammograms, etc.	No charge	No charge	No charge
Outpatient services (per visit or procedure)			
Primary care office visit	No charge	\$30	\$5
Specialty care office visit	\$40	\$90	\$10
Most X-rays	20% after deductible	40% after deductible	10% after deductible
Most lab tests	20% after deductible	40% after deductible	10% after deductible
MRI, CT, PET	20% after deductible	40% after deductible	10% after deductible
Outpatient surgery	20% after deductible	30% after deductible Ambulatory Surgery Center/40% after deductible Outpatient Department of hospital	10% after deductible
Mental health visit	No charge	\$30	No charge
Inpatient hospital care			
Room and board, surgery, anesthesia, X-rays, lab tests, medications, mental health care	20% after deductible	40% after deductible	10% after deductible
Maternity			
Routine prenatal care visit, first postpartum visit	No charge	40% after deductible	10% after deductible
Delivery and inpatient well-baby care	20% after deductible	40% after deductible	10% after deductible
Emergency and urgent care			
Emergency department visit	20% after deductible	40% after deductible	10% after deductible
Urgent care visit	\$40	\$100	\$50
Prescription drugs (up to a 30-day supply)			
Generic	No charge	\$25*	\$5*
Preferred brand	\$20*	\$100*	\$10*
Non-preferred brand	\$40*	\$400*	\$150*
Specialty	\$60*	\$600*	\$250*
Whole health			
Healthy services	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .

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E Offered through the health benefit exchange,
Connect for Health Colorado

Cost Share Reduction (CSR) Plans—You must qualify for and enroll
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Benefit highlights	E KP CO Silver 2900/20%/73% CSR KP Select CO Silver 2900/20%/73% CSR	E KP CO Silver 200/5%/94% CSR KP Select CO Silver 200/5%/94% CSR	E KP CO Silver 2200/25/73% CSR KP Select CO Silver 2200/25/73% CSR	E KP CO Silver 50/5/94% CSR KP Select CO Silver 50/5/94% CSR
	Deductible	Deductible	Deductible	Deductible
Plan type				
Annual medical deductible (individual/family)	\$2,900/\$5,800	\$200/\$400	\$2,200/\$4,400	\$50/\$100
Annual out-of-pocket maximum (individual/family)	\$6,000/\$12,000	\$2,600/\$5,200	\$7,100/\$14,200	\$2,250/\$4,500
Benefits				
Virtual care				
Chat, Email, E-visit, Phone, and Video visit	No charge	No charge	No charge	No charge
Preventive care				
Routine physical exam, mammograms, etc.	No charge	No charge	No charge	No charge
Outpatient services (per visit or procedure)				
Primary care office visit	20% after deductible	5% after deductible	\$25	\$5
Specialty care office visit	20% after deductible	5% after deductible	\$50	\$15
Most X-rays	20% after deductible	5% after deductible	35% after deductible	10% after deductible
Most lab tests	20% after deductible	5% after deductible	\$30	\$5
MRI, CT, PET	20% after deductible	5% after deductible	\$500	\$25
Outpatient surgery	10% after deductible Ambulatory Surgery Center/20% after deductible Outpatient Department of hospital	5% after deductible	25% after deductible Ambulatory Surgery Center/35% after deductible Outpatient Department of hospital	10% after deductible
Mental health visit	20% after deductible	5% after deductible	\$25	\$5
Inpatient hospital care				
Room and board, surgery, anesthesia, X-rays, lab tests, medications, mental health care	20% after deductible	5% after deductible	35% after deductible	10% after deductible
Maternity				
Routine prenatal care visit, first postpartum visit	20% after deductible	5% after deductible	35% after deductible	10% after deductible
Delivery and inpatient well-baby care	20% after deductible	5% after deductible	35% after deductible	10% after deductible
Emergency and urgent care				
Emergency department visit	20% after deductible	5% after deductible	35% after deductible	10% after deductible
Urgent care visit	20% after deductible	5% after deductible	\$100	\$50
Prescription drugs (up to a 30-day supply)				
Generic	\$15 after deductible*	\$5 after deductible*	\$20*	\$5*
Preferred brand	\$60 after deductible*	\$10 after deductible*	\$85 after \$875 pharmacy deductible*	\$10*
Non-preferred brand	20% after deductible	5% after deductible	35% after \$875 pharmacy deductible	10%
Specialty	20% after deductible	5% after deductible	35% after \$875 pharmacy deductible	10%
Whole health				
Healthy services	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .	Mental health wellness exam, chiropractic and acupuncture visits, and gender-affirming health services are included in your plan. For more healthy offerings, visit kp.org/healthyliving .

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Find your rate



Apply on buykp.org to have your rate calculated automatically.

How is your rate determined?

Your rate is based on:

- The plan you choose
- Where you live, based on your county and ZIP code
- Your age on your plan start date (effective date)
- If you qualify for federal financial assistance. Visit buykp.org or call us at **1-800-494-5314 (TTY 711)** to see if you may qualify.
- If you use tobacco

Interested in a family plan?

Find the rate for each family member, based on their age on the start date.

Family members include:

- You
- Your spouse/domestic partner
- All adult children 21 through 25
- Your 3 oldest children under 21

If you have more than 3 children under 21, you only need to pay for the 3 oldest. The other children under 21 will be covered at no charge.

The rates apply to these counties. Please check that your county is listed. If it isn't, call us at **1-800-494-5314 (TTY 711)** for information on other rate areas.

KP Select CO plans

Available in: Adams, Arapahoe, Boulder, Broomfield, Clear Creek, Denver, Douglas, El Paso, Elbert, Gilpin, Jefferson, Park, and Teller

KP CO plans

Available in: Adams, Arapahoe, Boulder, Broomfield, Clear Creek, Denver, Douglas, Elbert, Fremont, Gilpin, Jefferson, Larimer, Park, Pueblo, and Weld

Colorado Option plans

Available in: Adams, Arapahoe, Boulder, Broomfield, Clear Creek, Denver, Douglas, El Paso, Elbert, Fremont, Gilpin, Jefferson, Larimer, Park, Pueblo, Teller, and Weld

Pediatric dental care

Kaiser Permanente health plans at the Bronze, Silver, and Gold levels provide essential health benefits, including pediatric dental benefits for children 18 and younger.

A reason to smile

Pediatric dental benefits are provided by Delta Dental of Colorado, one of the nation's largest and most experienced dental providers. Delta Dental provides members with the convenience of local customer service and a statewide network of more than 2,500 Delta Dental PPO™ providers.

Important to note

Children must see a Delta Dental PPO dentist for care. Services provided by dentists outside of the PPO network are not covered.

Kaiser Permanente individual and family health plans do not include dental benefits for adults 19 and older. If you want adult dental benefits, you may purchase separate adult dental benefits from Connect for Health Colorado or another health insurance carrier. The Kaiser Permanente Catastrophic plan does not include pediatric dental benefits.

Benefits

Dental benefits are for covered children up through the month they turn 19. Coverage is listed under the child's name.

Features	
Deductible*	\$50 (applies to all services)
Annual maximum	None
Covered services	
Diagnostic & preventive services	
Oral exams & cleanings, limited to 2 per calendar year	100% after deductible is met*
Fluoride treatments, limited to 2 per calendar year	
Sealants, 1 per tooth per year	
Bitewing X-rays, 1 set per calendar year	
Intraoral X-rays, 2 per calendar year	
Panoramic of full-mouth X-rays, once every 60 months	
Space maintainers, 1 per lifetime per primary tooth	
Palliative treatment, 1 per calendar year	
Basic services (limited to 2 basic procedures per year)	
Fillings	50% after deductible is met*
Oral surgery	
Endodontics	
Major services (limited to 1 major procedure per year)	
Crowns	50% after deductible is met*

*Dental deductible does not apply to Native Americans or Native Alaskans.

Finding a dentist

Delta Dental makes it easy to get dental benefits for children covered on your Kaiser Permanente plan.

- **Website:** Visit deltadentalco.com and use the Find a Dentist search tool. Search by city, state, or ZIP code for a listing in your area. Make sure the dentist information says "This provider participates in: Delta Dental PPO."
- **Email:** Contact us at customer_service@ddpco.com
- **Mobile app:** With Delta Dental's free mobile app for Android and iOS, you can search for dentists, download an ID card, and look at benefits coverage and claims.
- **Phone:** Call Delta Dental of Colorado at **1-800-610-0201**. You can speak with a customer service agent Monday through Friday, 7:30 a.m. to 5 p.m., or get automated assistance 24/7.

Care that's accessible

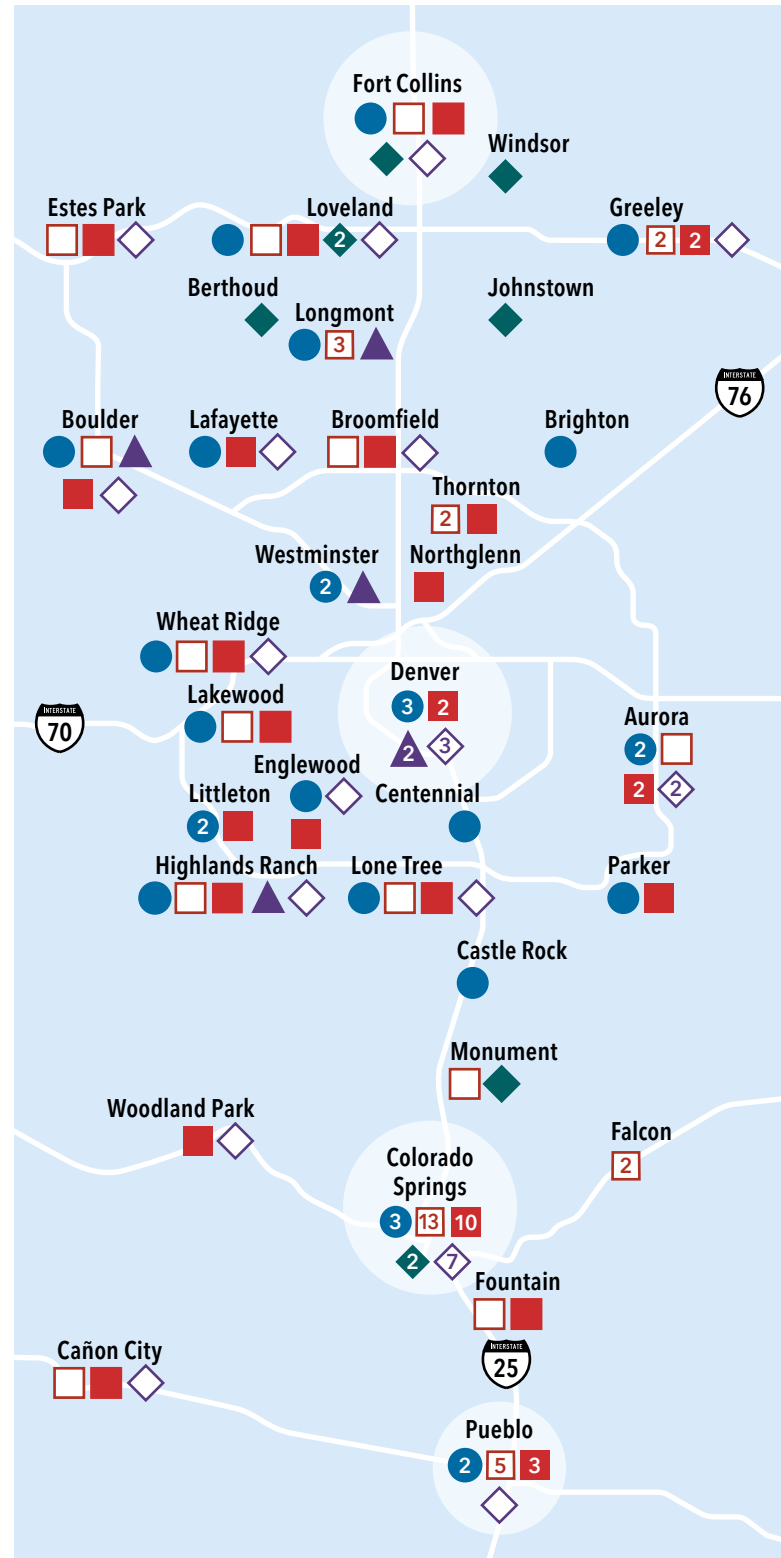
For the you who needs choices

Colorado medical facilities

29	Kaiser Permanente medical offices	●
41	Urgent care facilities	□
35	Emergency care facilities	■
6	Behavioral health offices	▲
9	Affiliated providers with extended hours	◆
25	Affiliated hospital/inpatient care	◇

There are **1,200+** Kaiser Permanente physicians and **21,000+** affiliated plan providers at locations across Colorado. Choice of providers varies by plan, service area, and availability, and is subject to change. Provider and location information is current at the time of publication and is subject to change.

For the most up-to-date list of providers and facilities included in your plan, visit kp.org/locations. For KP Select plans, visit kp.org/kpselect/co. For Kaiser Permanente Colorado Option plans, visit kp.org/co-option. Affiliated plan facilities provide selected inpatient and/or outpatient hospital and emergency services.



● Kaiser Permanente medical offices

Central

Aurora

Aurora Centrepont
14701 E. Exposition Ave.
Aurora, CO 80012

Smoky Hill

16290 E. Quincy Ave.
Aurora, CO 80015

Boulder

Baseline
580 Mohawk Drive
Boulder, CO 80303

Brighton

Brighton
859 S. 4th Ave.
Brighton, CO 80601

Castle Rock

Castle Rock
4318 Trail Boss Drive
Castle Rock, CO 80104

Centennial

Arapahoe
5555 E. Arapahoe Road
Centennial, CO 80122

Denver

East Denver
10400 E. Alameda Ave.
Denver, CO 80247

Franklin

2045 Franklin St.
Denver, CO 80205

Skyline

1375 E. 20th Ave.
Denver, CO 80205

Englewood

Englewood
2955 S. Broadway
Englewood, CO 80113

Highlands Ranch

Highlands Ranch
9285 Hepburn St.

Highlands Ranch, CO 80129

Lafayette

Rock Creek
280 Exempla Circle
Lafayette, CO 80026

Lakewood

Lakewood
8383 W. Alameda Ave.
Lakewood, CO 80226

Littleton

Ken Caryl
7600 Shaffer Parkway
Littleton, CO 80127

Southwest

5257 S. Wadsworth Blvd.
Littleton, CO 80123

Lone Tree

Lone Tree
10240 Park Meadows Drive
Lone Tree, CO 80124

Longmont

Longmont
2345 Bent Way
Longmont, CO 80503

Parker

Parker
10168 Parkglenn Way
Parker, CO 80138

Westminster

Hidden Lake
7701 Sheridan Blvd.
Westminster, CO 80003

Westminster

11245 Huron St.
Westminster, CO 80234

Wheat Ridge

Wheat Ridge
4803 Ward Road
Wheat Ridge, CO 80033

Northern

Fort Collins

Fort Collins
2950 E. Harmony Road, Suite 190
Fort Collins, CO 80528

Greeley

Greeley
2429 35th Ave. Greeley, CO 80634

Loveland

Loveland
4901 Thompson Parkway
Loveland, CO 80534

Southern

Colorado Springs

Briargate
4105 Briargate Parkway, Suite 125
Colorado Springs, CO 80920

Parkside

215 Parkside Drive
Colorado Springs, CO 80910

Premier

3920 North Union Blvd.
Colorado Springs, CO 80907

Pueblo

Acero
2625 W. Pueblo Blvd.
Pueblo, CO 81004

Pueblo North

3670 Parker Blvd., Suite 200
Pueblo, CO 81008

Coming soon: More ways to get care

Building on our more than 50-year history of caring for members in Colorado, we're constructing state-of-the art medical offices in Lakewood, Parker, and Pueblo North. Visit kp.org/co-newbuilds to learn more.

Complete care to help you live a fuller, healthier life

With Kaiser Permanente, our trusted care teams coordinate and personalize your care – so you can spend more time doing what you love.

Have questions about your plan options?



Visit buykp.org
to get started.

Call **1-800-494-5314 (TTY 711)** to talk to an enrollment specialist.

Current members with questions can call Member Services at **1-800-632-9700 (TTY 711)**, Monday through Friday, 8 a.m. to 6 p.m. Mountain time.



1. Kaiser Permanente internal data, 2020; Hanming Fang, PhD, et al., "Trends in Disenrollment and Reenrollment Within US Commercial Health Insurance Plans, 2006-2018," *JAMA Network*, February 24, 2022. 2. Affiliated providers may or may not have access to your Kaiser Permanente electronic health records. 3. These services are available when you see Kaiser Permanente providers. 4. Kaiser Permanente 2023 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 2023 and is used with the permission of NCQA. Quality Compass 2023 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. 5. 2022 Annual Report, Kaiser Permanente, about.kaiserpermanente.org/who-we-are/annual-reports/2022-annual-report. 6. NCQA's Private Health Insurance Plan Ratings 2023-2024, National Committee for Quality Assurance, 2023: Kaiser Foundation Health Plan of Colorado – HMO (rated 4 out of 5); Kaiser Foundation Health Plan of Georgia, Inc. – HMO (rated 4 out of 5); Kaiser Foundation Health Plan, Inc., of Hawaii – HMO (rated 4 out of 5); Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. – HMO (rated 5 out of 5); Kaiser Foundation Health Plan, Inc., of Northern California – HMO (rated 4.5 out of 5); Kaiser Foundation Health Plan of the Northwest – HMO (rated 4 out of 5); Kaiser Foundation Health Plan, Inc., of Southern California – HMO (rated 4.5 out of 5); Kaiser Foundation Health Plan of Washington – HMO (rated 4 out of 5). 7. Elizabeth A. McGlynn, PhD, et al., "Measuring Premature Mortality Among Kaiser Permanente Members Compared to the Community," Kaiser Permanente, July 20, 2022. 8. Theodore R. Levin, MD, et al., "Effects of Organized Colorectal Cancer Screening on Cancer Incidence and Mortality in a Large, Community-Based Population," *Gastroenterology*, November 2018. 9. "Best Health Insurance Companies For 2024," Insure.com, March 6, 2024. 10. Kaiser Permanente 2023 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 2023 and is used with the permission of NCQA. Quality Compass 2023 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. 11. Best of Colorado 2024, *ColoradoBiz* magazine, July 2024, pages 32-24. 12. When appropriate and available. If you travel out of state, phone appointments and video visits may not be available due to state laws that may prevent doctors from providing care across state lines. Laws differ by state. Video and phone services are offered at no additional cost for most of our health plans. With some high-deductible plans, a copay, coinsurance, or deductible must be met first before these services are provided at no additional cost. 13. Kaiser Permanente GCN Post-Visit Survey of 60,945 members, 2023. 14. Kaiser Permanente National Market Research, November 2023. 15. Not all prescriptions can be mailed, restrictions may apply. Please check with your local pharmacy. Same-day and next-day prescription delivery services may be available for an additional fee. These services are not covered under your health plan benefits and may be limited to specific prescription drugs, pharmacies, and areas. Order cutoff times and delivery days may vary by pharmacy location. Kaiser Permanente is not responsible for delivery delays by mail carriers. Kaiser Permanente may discontinue same-day and next-day prescription delivery services at any time without notice and other restrictions may apply. Medi-Cal and Medicaid beneficiaries should ask their pharmacy for more information about prescription delivery. 16. Some classes may require a fee. 17. The apps and services described above are not covered under your health plan benefits, are not a Medicare-covered benefit, and are not subject to the terms set forth in your *Evidence of Coverage* or other plan documents. The apps and services may be discontinued at any time. 18. The services described above are not covered under your health plan benefits and are not 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. 19. Available in select counties. 20. Affiliated providers practice outside Kaiser Permanente medical offices. Affiliated providers may or may not have access to your Kaiser Permanente electronic health records. Visit kp.org/findadoctor for a list of participating providers. 21. If you think you are experiencing an emergency medical condition, call 911, or if time and safety permit, go to the nearest emergency room. Your care will be covered. For a complete definition of an emergency medical condition, please refer to your *Evidence of Coverage*, Membership Agreement, or Certificate of Insurance at kp.org/eoc. 22. For a complete list of services you can use your HSA to pay for, see *Publication 502, Medical and Dental Expenses*, at irs.gov.

NONDISCRIMINATION NOTICE

Kaiser Foundation Health Plan of Colorado (Kaiser Health Plan) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Kaiser Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. We also:

- Provide no-cost aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats, such as large print, audio, and accessible electronic formats
- Provide no-cost language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, call **1-800-632-9700** (TTY **711**).

If you believe that Kaiser Health Plan 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 by mail at: Customer Experience Department, Attn: Kaiser Permanente Civil Rights Coordinator, 10350 E. Dakota Ave, Denver, CO 80247, or by phone at Member Services **1-800-632-9700** (TTY **711**).

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**, (TTY **1-800-537-7697**). Complaint forms are available at hhs.gov/ocr/office/file/index.html.

HELP IN YOUR LANGUAGE

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call **1-800-632-9700** (TTY **711**).

አማርኛ (Amharic) ማሳሰቢያ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያገዝዎት ተዘጋጅተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ **1-800-632-9700** (TTY **711**)፡፡

العربية (Arabic) ملحوظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم **1-800-632-9700** (TTY **711**)፡፡

Bàsɔ̀̀ Wùdù (Bassa) Dè dɛ nià kɛ dyédé gbo: ɔ jũ ké m̀̀ Bàsɔ̀̀̀- wùdù-po-nyò jũ ní, níí, à wuɖu kà kò dò po-poò béìn m̀̀ gbo kpáa. Đá **1-800-632-9700** (TTY **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 **1-800-632-9700** (TTY **711**)。

فارسی (Farsi) توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با **1-800-632-9700 (TTY 711)** تماس بگیرید.

Français (French) ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-800-632-9700 (TTY 711)**.

Deutsch (German) ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.
Rufnummer: **1-800-632-9700 (TTY 711)**.

Igbo (Igbo) NRUBAMA: O bụrụ na ị na asụ Igbo, ọrụ enyemaka asụsụ, n'efu, dijiri gi. Kpọọ **1-800-632-9700 (TTY 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。 **1-800-632-9700 (TTY 711)** まで、お電話にてご連絡ください。

한국어 (Korean) 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-800-632-9700 (TTY 711)** 번으로 전화해 주십시오.

Naabeehó (Navajo) Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hóló, koji' hódíilnih **1-800-632-9700 (TTY 711)**.

नेपाली (Nepali) ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निम्ति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ । **1-800-632-9700 (TTY: 711)** फोन गर्नुहोस् ।

Afaan Oromoo (Oromo) XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa **1-800-632-9700 (TTY 711)**.

Русский (Russian) ВНИМАНИЕ: если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-800-632-9700 (TTY 711)**.

Español (Spanish) ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-632-9700 (TTY 711)**.

Tagalog (Tagalog) PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.
Tumawag sa **1-800-632-9700 (TTY 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 **1-800-632-9700 (TTY 711)**.

Yorùbá (Yoruba) AKIYESI: Ti o ba nso ede Yoruba ofe ni iranlowo lori ede wa fun yin o. E pe ero ibanisoro yi **1-800-632-9700 (TTY 711)**.

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Colorado state law requires that an Access Plan be available that describes Kaiser Foundation Health Plan of Colorado's network of provider services. To obtain a copy, please call Member Services or visit kp.org.

All plans are offered and underwritten by Kaiser Foundation Health Plan of Colorado, 10350 E. Dakota Ave., Denver, CO 80247.