

When you travel, does your health care come along?

Public Employees Benefits Board (PEBB) Program health plans have agreements with health providers at many destinations. This helps you get the medical care you may need. Contact your plan before you travel to find out about your options.

It's always a good idea to plan for a lengthy trip. Research the health care options at your destination in case you have a medical emergency or need a health care provider. It can save you time and confusion.

Start your research on the next page. Note that Medicare does not provide payment for medical services received outside the U.S.

If you live part of the year in another state

If you have a seasonal residence, contact the PEBB Program or your employer to keep your address up to date. Contact your health plan to see if it offers coverage in your area.

If you need emergency care

Accidental injury or sudden symptoms that require immediate medical attention are reasons to seek emergency care. If this occurs while you are traveling, you should go to the nearest emergency room.

If you go to a non-network facility, contact your plan as soon as possible.



Tips before you travel

- Contact your health plan before you travel to find out about your options.
- Pack your health plan's ID card (if you have one), and your plan's toll-free number.
- Pack your medications or prescriptions in the original bottle or package.
- Wear a medical bracelet for any allergies or other special medical problems.

How to Get Health Care When You Travel

Health Plans	Out-of-Area (Within U.S.)	Outside U.S.
Group Health Cooperative (GHC)	You can get care from Kaiser Permanente if you travel in its service area. Contact Group Health's Customer Service Center at 1-888-901-4636 for details. Otherwise, Group Health only covers emergency services received outside its service area. Except for emergency or urgent care outside the service area, services received from non—Group Health providers without authorization from Group Health are not covered. Dialysis is covered while you are temporarily outside of the service area; however, services must be authorized before you leave.	Group Health covers emergency services received outside the U.S. Call Group Health's Notification Line at 1-888-457-9516 as soon as possible after an emergency admission.
Kaiser Permanente	You can get limited routine or follow-up care while outside Kaiser's service area if you get authorization. See Kaiser's Summary of Benefits for details and limits. You must get all medical care through Kaiser except for emergency or urgent care outside of the service area, authorized referrals, and renal dialysis received outside its service area.	Kaiser covers emergencies and urgent care worldwide. Call Kaiser at 503-735-2596 or toll free at 1-877-813-5993 as soon as possible after an emergency admission.
Premera Blue Cross	You can get services from any Medicare provider in the U.S.	The Medicare supplement plan includes limited coverage for emergency care needed during the first 60 days of a trip outside the U.S.
Uniform Medical Plan Classic (UMP Classic), administered by Regence BlueShield	Retirees who have Medicare can see any provider who accepts Medicare and the plan pays at the network level. For services not covered by Medicare, you have network access to any Regence BlueShield or Blue Cross and Blue Shield plan providers worldwide. UMP Classic pays non-network providers at 60 percent of the plan's allowed amount (not 60 percent of the billed amount).	UMP Classic covers medically necessary health care services outside of the U.S., if the services would be covered within the U.S. Plan payment depends on the network status of the provider. You must get foreign claims submitted to the plan translated into English with the currency exchange rate noted.

How to	Get Denta	l Care	When	You	Travel

Dental Plans	Out-of-Area (Within U.S.)	Outside U.S.
DeltaCare, administered by Delta Dental of Washington	Normally, your primary care dentist will arrange for delivering emergency treatment. If you are out of the area, you may seek emergency treatment for relief of pain from any licensed dentist. Notify DeltaCare after receiving emergency care about the extent of such emergency dental treatment. DeltaCare will pay up to \$100 per 12-month period for emergency treatment.	If you or a family member is out of the area, you may seek emergency treatment for the relief of pain from any licensed dentist. DeltaCare will pay up to \$100 per 12-month period for emergency treatment.
Uniform Dental Plan, administered by Delta Dental of Washington	If you see a Delta Dental network provider anywhere in the U.S., UMP will pay the claim as it would if you had received treatment in Washington State (out-of-state benefit differential will apply). If you see a non-network provider, the plan pays either the dentist's actual charges or the maximum allowable fee normally paid to in-network providers for the same service, whichever is less. You must make sure to send the claim to Delta Dental of Washington.	If you seek emergency treatment, you must make sure to send the claim to Delta Dental of Washington. The plan will pay either the dentist's actual charges or the maximum allowable fee normally paid to in-network dentists for the same service, whichever is less.
Willamette Dental Plan	If you're traveling in Washington, Oregon, or Idaho, call toll-free 1-855-433-6825 to reach the Willamette Dental Appointment Center. If you travel more than 50 miles from a Willamette Dental Plan-designated provider office, you may go to any licensed dentist for emergency treatment, relief from pain, bleeding, or swelling. Willamette reimburses emergency dental treatment up to \$200, minus your copayments. Upon arriving home, contact the Willamette Dental Patient Relations Department at 1-800-360-1909 for reimbursement. Schedule follow-up care with your Willamette Dental primary care dentist.	If you travel outside of the U.S., you may go to any licensed dentist for emergency treatment, relief from pain, bleeding, or swelling. Willamette reimburses emergency dental treatment up to \$200, minus your copayments. Upon arriving home, contact the Willamette Dental Member Services toll-free at 1-855-433-6825 for reimbursement. Schedule follow-up care with your Willamette Dental primary care dentist.

Keep in mind:

- If you plan to travel and want more information about how to get health care, call your health plan's customer service staff.
- In most situations, Medicare won't pay for health care or supplies that you receive outside the U.S.
- Review the certificate of coverage from your health plan for details about covered services.
- Your copayments, coinsurance, deductibles, and other cost-sharing apply to covered services received outside the plan's service area or outside the U.S.