

Find your healthy place

with care designed to help you thrive



Highlights for 2021

\$0 copay for primary care office visits

\$0 copay for maternity office visits from PCP

\$375 medical deductible for families

Available to eligible PEBB members who live in King, Kitsap, Pierce, Snohomish, Spokane, and Thurston counties. Virtual care options include phone appointments, video visits, and 24/7 Care Chat – all at no additional cost.

Get high-quality health care that's affordable and convenient.

Cost-effective health plan

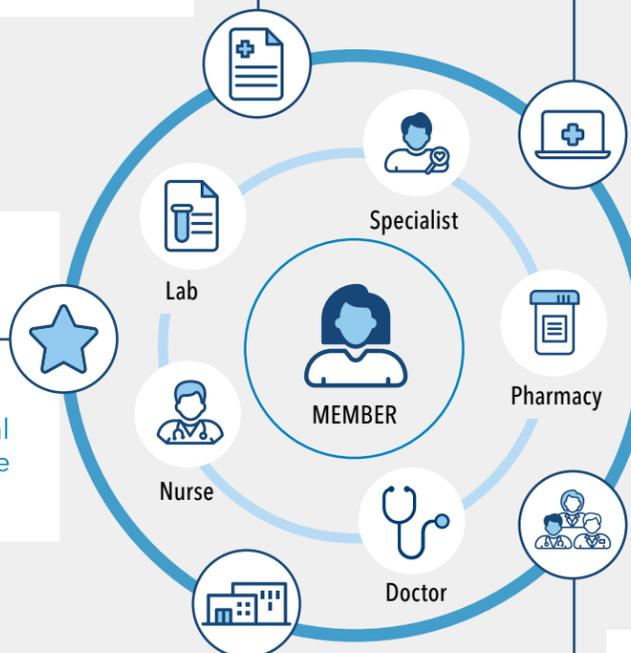
Our 2021 SoundChoice plan offers low monthly premiums and deductibles, and no copays for primary care.

Great care from great doctors

Washington Permanente Medical Group is among the highest-ranked medical groups in Washington state for the 12th year in a row.²

Many services under one roof

Do more in less time. At most of our care facilities, you can see your doctor, get a lab test or X-ray, and pick up prescriptions – all in a single trip.¹



Your care options

Click for a real-time Care Chat with a Kaiser Permanente clinician 24/7. Or email your care team with nonurgent questions.¹

Call our 24/7 Consulting Nurse Line for health care advice.

Connect with your doctor by scheduling a phone or video visit.

Come in to a medical facility to see your doctor for care.

Better care with a connected team

Doctors, nurses, and specialists at Kaiser Permanente medical facilities all work together to keep you healthy. They're connected to each other, and to you, through your electronic medical record.¹

2021 Kaiser Permanente WA SoundChoice Plan

For PEBB employees and non-Medicare retirees

Monthly premiums

State or higher education employee

Employee	\$55
Employee & spouse ³	\$120
Employee & child(ren)	\$96
Employee, spouse ³ & children	\$161

Non-Medicare retiree

Subscriber	\$641
Subscriber & spouse ³	\$1,277
Subscriber & child(ren)	\$1,118
Subscriber, spouse ³ & children	\$1,754

Annual costs

Medical deductible⁴	Individual: \$125 Family: \$375
Rx deductible	Individual: \$100 Family: \$300 Prescription drug deductible waived on value and tier 1 drugs
Out-of-pocket limit	Individual: \$2,000 Family: \$4,000
Rx out-of-pocket limit	Individual: \$2,000 Family: \$8,000

Benefits

This is an overview of benefits. See your Evidence of Coverage for full benefit details.

Primary care visit⁵	\$0 ♦
Preventive care visit	\$0 ♦
Specialty care visit⁵	15%
Prescription drugs	Retail 30-day supply Mail-order 90-day supply
Value tier	\$5 ♦ \$10 ♦
Preferred generic (tier 1)	\$15 ♦ \$30 ♦
Preferred brand (tier 2)	\$60 \$120
Non-preferred (tier 3)	50% 50%
Preferred specialty (tier 4)	\$150 N/A
Non-preferred specialty (tier 5)	50% to \$400 N/A
Manipulative therapy	\$0, 10 visits PCY
Massage therapy	15%, 16 visits PCY
Naturopathy	\$0, 3 visits per medical diagnosis PCY
Acupuncture	\$0, 12 visits PCY
Mental health	Inpatient: \$500 per admission Office visits: \$0 copay ⁵
Hospital	Inpatient: \$500 per admission Outpatient: 15%
Ambulance	20% ♦
Emergency care	\$75 + 15%
Lab and radiology	15%
Vision exam	\$0 ♦ ⁵
Glasses and contacts For members ages 19 and older	Enrollee pays any amount over \$150 every 24 months ♦
Pediatric glasses and contacts For members up to ages 19	Enrollee pays \$0 for one set of glasses or 50% coinsurance for contact lenses PCY ♦
Hearing exam	15%
Hearing aid benefit	One hearing aid per ear covered in full every 60 months ♦
Maternity care Applicable outpatient preventive services are covered as preventive	Inpatient: \$500 per admission Outpatient: 15% Office visits: \$0 copay ⁵
Rehabilitation therapy⁶ Rehabilitation visits are a total of combined therapy visits PCY	Inpatient: \$500 per admission (60 days PCY) Outpatient: 15% (60 visits PCY)

PCY = Per calendar year

♦ Not subject to annual deductible.

³ Or state-registered domestic partner.

⁴ Annual deductible applies to most services.

⁵ Annual deductible and specialty care visit coinsurance will apply if service is rendered by a specialist. See Evidence of Coverage for the list of specialty providers.

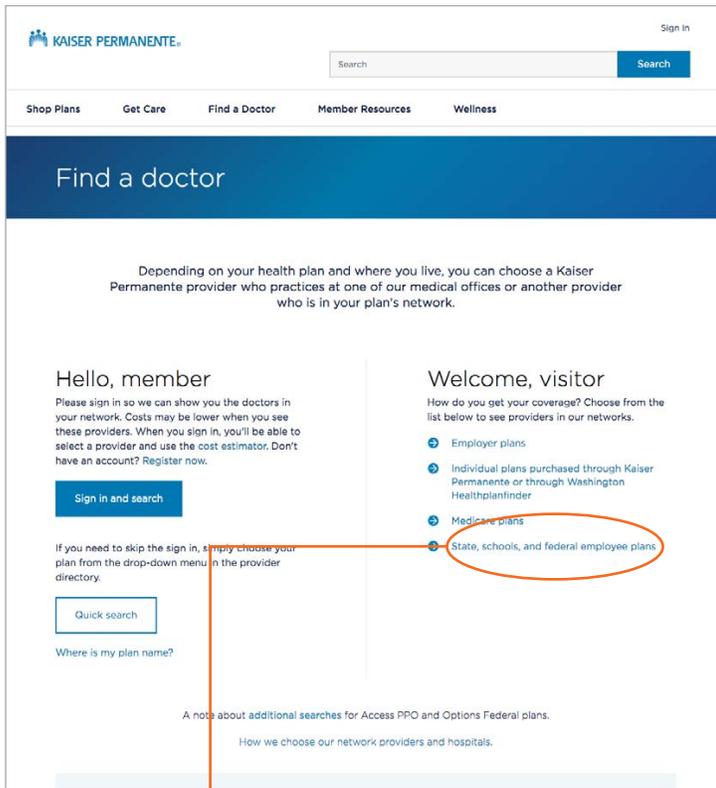
⁶ Services with mental health diagnoses are covered with no limit.

¹ Available when you get care at Kaiser Permanente facilities.

² Washington Health Alliance 2019 Community Checkup report, wacommunitycheckup.org. Ranking applies to Kaiser Permanente Washington's medical group, Washington Permanente Medical Group, P.C.

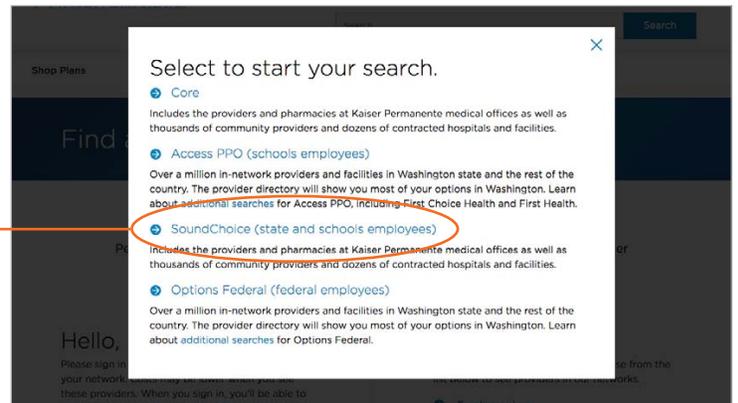
SoundChoice network providers

To find out if your doctor is in the SoundChoice network, or to choose another doctor, go to kp.org/wa/find-a-doctor and follow these steps.



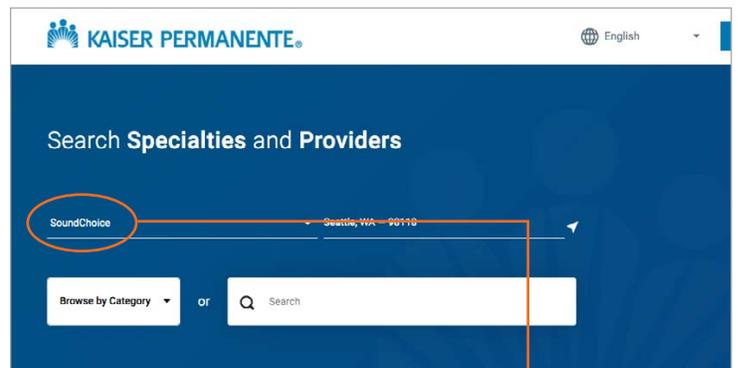
1

Click on
"State, schools, and federal
employee plans"



2

Click on
"SoundChoice".



3

"SoundChoice"
is now selected. Click on
"Browse by Category"
to search for care.

Want to learn more?

kp.org/wa/pebb

Call the dedicated Member Services phone line for PEBB members at **1-866-648-1928**, Monday through Friday, 8 a.m. to 6 p.m., or contact your payroll or benefits office. If you are a non-Medicare retiree or PEBB Continuation Coverage subscriber, call the PEBB program at **1-800-200-1004**.

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