

# Washington large employer groups

## Changes and clarifications for contract year 2008

Kaiser Foundation Health Plan of the Northwest (traditional copayment, deductible, and high-deductible plans) and Kaiser Permanente Health Alternatives (dental plans)

**These are preliminary 2008 contract changes. They do not include changes that may occur throughout the remainder for the year, including, but not limited to, mandated federal and state changes. Any additional changes or clarifications will be provided with your 2008 Evidence of Coverage. To the extent this preliminary summary of 2008 changes conflicts with, modifies, or supplements the information contained in your 2008 Evidence of Coverage, the information contained in your 2008 Evidence of Coverage packet shall supersede what is set forth below. This information is subject to approval by the Insurance Commissioner's office and therefore subject to change. Unless another date is listed, the changes in this document are effective when your group renews in 2008.**

Items below pertain to all groups' *Evidence of Coverage* documents for Washington large group plans, unless otherwise noted.

The products below are offered and underwritten by Kaiser Foundation Health Plan of the Northwest.

### Changes apply to all medical plans (except Senior Advantage)

- The chemical dependency maximum benefit will increase to \$14,000 for the benefit period January 1, 2008, through December 31, 2009.
- The outpatient surgery cost share applies to all procedures performed in ambulatory surgery centers.
- Physical, occupational, and speech therapy will be limited to 20 visits per therapy, per calendar year.
- As contracts renew, groups will be billed directly for their COBRA members. We will no longer bill members or accept payment directly from members.

- Bereavement services will be available from participating providers at the primary care office visit copayment or coinsurance. This benefit is limited to no more than eight visits per 12-month period.
- Other group-specific changes may apply, such as movement to standard benefits. See rate exhibit for details.

### Changes related to prescription coverage (except Senior Advantage)

- Drugs used for the treatment or prevention of sexual dysfunction are excluded from coverage.

### Benefit changes for deductible medical plans (except Senior Advantage)

- The following sentence will be added to the deductible definition in the evidence of coverage: "Deductible amounts include the deductible carry over amounts and annual deductible take over amounts as described in the 'Deductible and Lifetime Benefit Maximum' section of this *Evidence of Coverage*."

The products below are offered and underwritten by Kaiser Permanente Health Alternatives.

### Changes for dental group plans offered by Kaiser Permanente Health Alternatives

- The following exclusions will be added:
  - Speech-aid prosthetic devices and follow-up modifications.
  - Treatment to restore tooth structure lost due to attrition, erosion, or abrasion.

# 2008 contract changes and clarifications for group Senior Advantage members

This is a preliminary list. It is subject to change pending final approval. The changes in this document are effective on January 1, 2008, rather than when your group renews in 2008, unless otherwise noted.

## Changes for group Senior Advantage plans

- The exclusion for acupuncture treatment for Senior Advantage members will be modified: acupuncture treatment may be covered for certain medical conditions on a limited basis. A participating physician must prescribe the treatment. Referrals, if needed, will be to the designated network of providers specializing in this service.
- The cost share for Medicare Part B-covered outpatient self-administered prescription

drugs will change from the durable medical equipment cost share to the applicable generic/brand prescription drug cost share.

## Clarifications

- Prescription drugs cannot be provided through mail delivery to members who permanently reside outside of Oregon and Washington.
- The 2008 Senior Advantage *Evidence of Coverage* will be modified to reflect our practice of not charging for home dialysis drugs, equipment, and supplies.

## Changes for Senior Advantage members with Part D

- For Part D prescription drugs that are covered out of network, there will be a 30-day supply maximum per prescription.
- Drugs used for the *treatment* of sexual dysfunction are currently excluded from coverage, unless the group has purchased a sexual dysfunction rider. Effective January 1, 2008, drugs for the *prevention* of sexual dysfunction will also be excluded, unless the group has purchased the rider.