

# Senior Advantage for Postal Service Members (HMO)

Enrolling in Senior Advantage for Postal Service Members does not change your PSHB premium.

## Northern California

2025 Benefits and Services	High Option		
	Without Medicare	Senior Advantage 1	Senior Advantage 2
<b>Deductible</b>	None	None	None
<b>Outpatient services</b>			
Preventive care	\$0	\$0	\$0
Telehealth	\$0	\$0	\$0
Primary care office visit	\$15	\$5	\$10
Specialty care office visit	\$25	\$5	\$10
Most lab tests and X-rays	\$0	\$0	\$0
Chiropractic – 20 visits per year	\$15	\$15	\$15
<b>Hospital services</b>			
Outpatient surgery	\$50	\$5	\$50
Inpatient hospital	\$250	\$100	\$250
<b>Emergency and urgent care</b>			
Urgent care	\$15	\$5	\$10
Emergency care	\$100	\$75	\$75
Ambulance	\$50	\$50	\$50
<b>Prescription drugs**†</b>			
Generic	\$10	\$10	\$10
Brand	\$40	\$30	\$40
Specialty	\$100	\$100	\$100
<b>Additional Senior Advantage benefits</b>			
Dental	Not covered	Included	Not covered
Eyewear allowance (every 24 months)	Not covered	\$200	Not covered
Fitness membership	Not covered	One Pass	One Pass
Hearing aid allowance for adults (per ear, every 36 months)	Not covered	Not covered	\$500
Nonemergency transportation and meal-delivery	Not covered	Included	Not covered
Over-the-counter health and wellness items allowance (every quarter)	Not covered	\$70	\$70
Part B reimbursement	None	None	Up to \$250 per month
<b>Out-of-Pocket Maximum</b>	\$2,000	\$2,000	\$2,000

\*Deductible applies. \*\*Copayments are for a 30-day supply, or 100-day supply for High Option Senior Advantage 1, at Kaiser Permanente pharmacies. You pay only 2 copays for up to a 100-day supply for most drugs through Kaiser Permanente's mail-order program. †Plan providers determine the drug that is medically necessary. If you request another drug, you pay prices charged to members for non-covered drugs. Some drugs may not be eligible for mail-order delivery or mail-order discounts.

### Notes:

- Deductible and out-of-pocket maximum amounts are per person, but no more than 2 times per family.
- Coinsurance (%) is based on our allowance.

Without Medicare	Standard Option		Prosper	
	Senior Advantage 1	Senior Advantage 2	Without Medicare	Senior Advantage
\$100	None	None	\$500	None
\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0
\$30	\$15	\$25	\$25	\$25
\$40	\$15	\$25	\$35	\$25
\$10*	\$10	\$10	20%*	\$0
\$15	\$15	\$15	\$15	\$15
\$200*	\$15	\$25	20%*	\$25
\$500*	\$250	\$500	20%*	\$250 per day up to \$1,000
\$30	\$15	\$25	\$25	\$25
\$150*	\$75	\$75	20%*	\$75
\$150*	\$125	\$150	20%*	\$150
\$15	\$10	\$10	\$15	\$10
\$50	\$40	\$47	\$60	\$47
\$150	\$150	\$150	\$200	\$200
Not covered	Included	Not covered	Not covered	Not covered
Not covered	\$150	Not covered	Not covered	\$150
Not covered	One Pass	One Pass	Not covered	One Pass
Not covered	Not covered	\$500	Not covered	Not covered
Not covered	Not covered	Not covered	Not covered	Not covered
Not covered	Not covered	Not covered	Not covered	Not covered
None	None	Up to \$250 per month	None	None
\$3,000	\$2,000	\$2,000	\$5,500	\$2,000

• Telehealth options include video, phone, email, and more.

• Beginning 2025, CMS guidelines have decreased the Part D prescription drug OOP maximum to \$2,000.

• Beginning 2025, One Pass® is replacing the previous Silver&Fit® fitness program.

This is a summary of the features of the Kaiser Permanente health plan, including Kaiser Permanente Senior Advantage for Postal Service Members. Before making a final decision, please read the Postal Service Health Benefits (PSHB) brochure RI 73-921. All benefits are subject to the definitions, limitations, and exclusions set forth in the PSHB brochure and the Kaiser Permanente Senior Advantage for Postal Service Members *Evidence of Coverage*.