

STUDENT OUT-OF-AREA BENEFIT

Kaiser Foundation Health Plan of the Northwest (KFHPNW) covers routine, continuing, and follow-up care for out-of-area students. We also cover urgent and emergency care.

With the student out-of-area benefit, you pay 20 percent of the actual fee the provider, facility, or vendor charges for the service. If the health care provider bills us, no claim needs to be submitted. If the student pays out of

pocket, the student will need to submit a Non-Plan Care Information Form. This form is available at kp.org/formsandpubs.

Out-of-area students must be registered to receive this benefit. To register, please complete and mail the form below.

We will need your signature certifying student status on an annual basis.

Detach here. For additional security, fold and seal all sides with tape. Do not staple.

ELIGIBILITY

The following requirements apply:

- The subscriber must live in the KFHPNW service area or physically work in the service area at least 50 percent of the time.
- The dependent student must meet eligibility requirements and be under the age limit specified in the service agreement.
- The student must be registered full time at a recognized accredited college or vocational school, and the

school must be outside the KFHPNW service area. He or she must be a full-time student as defined by the educational institution.

- The student must be living outside the KFHPNW service area *temporarily*. Students who attend school in another Kaiser Foundation Health Plan service area or an allied plan's service area use their visiting member benefit.



All plans offered and underwritten by Kaiser Foundation Health Plan of the Northwest.
500 NE Multnomah St., Suite 100, Portland, OR 97232.

461KPC-15/6-15

Subscriber name

Subscriber health record number

Address

City

State

ZIP

Student name

Student health record number

Student date of birth

School name

School address

City

State

ZIP

I certify that my dependent is attending the school above as a full-time student, beginning _____ (month/year).

Subscriber signature

Date

IF YOU HAVE PRESCRIPTION DRUG COVERAGE

Out-of-area students may buy prescription drugs from:

- **Participating pharmacies or our Mail-Delivery Pharmacy (for members who are residents of Oregon or Washington).** Students will pay their normal copayment or coinsurance.
- **Non-participating pharmacies outside our service area. Students will pay the full cost and get reimbursed 80 percent.** We will reimburse only when the drugs are medically necessary.

SERVICE AREA ZIP CODES

In order to be eligible to enroll with KFHPNW, you must live or work within the ZIP codes listed below.

IN OREGON

Benton: 97330, 97331, 97333, 97339, 97370

Clackamas: 97004, 97009, 97011, 97013, 97015, 97017, 97022, 97023, 97027, 97034, 97035, 97036, 97038, 97042, 97045, 97049, 97055, 97067, 97068, 97070, 97086, 97089, 97222, 97267, 97268, 97269

Columbia: All ZIP codes

Hood River: 97014

Linn: 97321, 97322, 97335, 97348, 97355, 97358, 97360, 97374, 97377, 97389

Marion: 97002, 97020, 97026, 97032, 97071, 97137, 97301, 97302, 97303, 97305, 97306, 97307, 97308, 97309, 97310, 97311, 97312, 97314, 97317, 97325, 97342, 97346, 97352, 97362, 97373, 97375, 97381, 97383, 97384, 97385, 97392

Multnomah: All ZIP codes

Polk: All ZIP codes

Washington: All ZIP codes

Yamhill: All ZIP codes

IN WASHINGTON

Clark: All ZIP codes

Cowlitz: All ZIP codes

Online services and information

kp.org



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PORTLAND OR 97232-9814

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