KAISER PERMANENTE

ARE YOU PAYING TOO MUCH FOR YOUR MEDICAL CARE?

Coordination of benefits

If you or members of your family are covered by more than one health plan, you could be paying too much for your medical care.

But you could start saving money today by calling our Coordination of Benefits (COB) Department. From Portland, call 503-813-2000; from all other areas, call 1-800-813-2000. Or fill out the attached card and send it in. You could also ask a Membership Services representative about COB the next time you come in for an office visit.

Who should know about COB?

- You should, if any of the following apply:
- One or more of your family members are covered by both

DETACH HERE. For additional security, please tape all sides. Do not staple.

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

your employer-sponsored health plan and another health plan.

- Your children are covered under more than one parent's health plan.
- You have stepchildren who are covered under health plans of both a biological parent and a stepparent.

SEE FOR YOURSELF IF YOU ARE ELIGIBLE FOR COB.

Let us see if COB can help you save money. Fill out this card and return it to us.

1. Fill in the information about your other health insurance policy.

Name of other health plan

Plan address

Plan phone number

Policyholder's name

Policyholder's ID number

Date of birth

Policyholder's employer and policy number

Family members covered under this policy

Daytime phone

Today's date

Name

Kaiser Permanente health record number

2. Fill in your name, Kaiser Permanente health record

number, and daytime phone number below. Be sure to sign, date, and then mail the card back to us.

Your date of birth

Signature

How does COB keep money in my pocket?

By coordinating benefits for medical care and services through COB, Kaiser Foundation Health Plan of the Northwest (KFHPNW) and other health plans can provide quality care for their members without paying for services twice. And it helps you because the entire cost of covered services, including deductibles and copayments, is often completely covered by the participating health plans.

The primary plan (see the box titled "Terms You Should Know") usually pays the majority of the cost. The secondary plan coordinates benefits with the primary plan. The savings mean fewer out-of-pocket expenses for you during the year and better control over health care costs in the long run.

How does COB affect my benefits?

If KFHPNW is your primary plan, your benefits are unaffected. As usual, except for qualified emergencies and referrals, you must receive your care from KFHPNW facilities and health care providers.* Your secondary plan may reimburse you for copayments, deductibles, and coinsurance for our facilities and health care providers.

How does COB affect my family's benefits?

If KFHPNW is the secondary plan, your copayment, deductible, and/ or coinsurance will be deferred at the time that KFHPNW services are provided. We will send a bill to the primary plan. If you owe a balance after we coordinate benefits with the primary plan, we will send you a bill.

TERMS YOU SHOULD KNOW

Subscriber: The person who, or the person whose employer, pays your health care premiums.

Dependent: Anyone other than the subscriber—usually children and/or a spouse—who is covered by the subscriber's health plan. **Primary plan:** A plan whose benefits must be determined without taking into account the benefits provided by another plan.

Secondary plan: A plan that is not a primary plan. The COB rules establish which plan is primary and which plan is secondary.

*Unless you are under an Added Choice® Plan. See your Evidence of Coverage for details.

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