



KAISER PERMANENTE®

Addendum to the 2020 Kaiser Permanente Basic Plan *Evidence of Coverage*

The following revisions have been made to the 2020 Kaiser Permanente Basic Plan *Evidence of Coverage (EOC)*.

Basic Plan

On page 1 and page 40, we have revised the Drug Out-of-Pocket Maximum to reflect the correct amounts.

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Out-of-Pocket Maximum(s) and Deductible(s)

For Services that apply to the Plan Out-of-Pocket Maximum or the Drug Out-of-Pocket Maximum, you will not pay any more Copayment or Coinsurance for the rest of the Accumulation Period once you have reached the amounts listed below.

Amounts Per Accumulation Period	Self-Only Coverage (a Family of one Member)	Family Coverage Each Member in a Family of two or more Members	Family Coverage Entire Family of two or more Members
Plan Out-of-Pocket Maximum	\$1,500	\$1,500	\$3,000
Drug Out-of-Pocket Maximum	\$6,650	\$6,650	\$13,300
Plan Deductible	None	None	None
Drug Deductible	None	None	None

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Drug out-of-pocket maximum

There is a limit to the total amount of Copayments and Coinsurance you must pay under this *EOC* in an Accumulation Period for covered outpatient prescription drugs, supplies, and supplements that you receive in the same Accumulation Period. The Services that apply to the maximum are described under the "Payments that count toward the drug maximum" section below. The limit is one of the following amounts:

- **\$6,650** per Accumulation Period for self-only enrollment (a Family of one Member)
- **\$6,650** per Accumulation Period for any one Member in a Family of two or more Members
- **\$13,300** per Accumulation Period for an entire Family of two or more Members

If you are a Member in a Family of two or more Members, you reach the outpatient prescription drug out-of-pocket maximum either when you meet the maximum for any one Member, or when your Family reaches the Family maximum. For example, suppose you have reached the \$6,650 maximum. For Services subject to the maximum, you will not pay any more Copayments or Coinsurance during the rest of the Accumulation Period, but every other Member in your Family must continue to pay Copayments or Coinsurance during the Accumulation Period until your Family reaches the \$13,300 maximum.