

## Summary of Benefits (1/1/22 – 09/30/22)

Services	SISC \$10 Senior Advantage	SISC \$25 Senior Advantage
Lifetime Maximum	None	None
Annual Out-of-Pocket Maximum (Not all services apply to Annual OOPM)	\$1,500 per calendar year	\$1,500 per calendar year
Deductible	None	None
Office Visits	\$10 per visit	\$25 per visit
Lab/X-rays	No charge	No charge
Outpatient Surgery	\$10 per procedure	\$25 per procedure
Hospitalization Services	No charge	\$500 per stay
Emergency Services	\$50 per visit	\$50 per visit
Ambulance Services	\$50 per transport	\$150 per transport
Prescription Drugs		
• Generic	\$10 for up to a 100-day supply	\$30 for up to a 100-day supply
• Brand	\$20 for up to a 100-day supply	\$75 for up to a 100-day supply
Durable Medical Equipment	No charge	20% coinsurance
Eyewear (every 24 months at KP)	\$150 allowance	\$150 allowance
Hearing Aids (every 36 months at KP)	\$500 allowance per aid	\$500 allowance per aid
Home health care	No charge	No charge
Skilled Nursing Facility Care	No charge for up to 100 days per benefit period	No charge for up to 100 days per benefit period
Gym Membership/Discount Program	No charge	No charge

**Important note:** this is a benefit overview of SISC's Kaiser Permanente Senior Advantage group plan for **in-network services**. All benefits are subject to the definitions, limitations, and exclusions set forth in the Kaiser Permanente Senior Advantage Plan Evidence of Coverage.