
Disclosure Form

SISC-SELF INSURED SCHOOLS OF CALIFORNIA

**Principal benefits for
Kaiser Permanente Traditional Plan**

(10/1/15—9/30/16)

The Services described below are covered only if all of the following conditions are satisfied:

- The Services are Medically Necessary
- The Services are provided, prescribed, authorized, or directed by a Plan Physician and you receive the Services from Plan Providers inside our California Service Areas (your Home Region), except where specifically noted to the contrary in the *Evidence of Coverage (EOC)* for authorized referrals, hospice care, Emergency Services, Post-Stabilization Care, Out-of-Area Urgent Care, and emergency ambulance Services

Out-of-Pocket Maximum for Certain Services

For Services subject to the maximum, you will not pay any more Cost Share during a calendar year if the Copayments and Coinsurance you pay for those Services add up to one of the following amounts:

For self-only enrollment (a Family of one Member)	\$1,500 per calendar year
For any one Member in a Family of two or more Members	\$1,500 per calendar year
For an entire Family of two or more Members	\$3,000 per calendar year

Plan Deductible None**Lifetime Maximum** None**Professional Services (Plan Provider office visits)****You Pay**

Most primary and specialty care consultations, evaluations, and treatment	\$10 per visit
Routine physical maintenance exams, including well-woman exams	No charge
Well-child preventive exams (through age 23 months)	No charge
Family planning counseling and consultations	No charge
Scheduled prenatal care exams	No charge
Eye exams for refraction	No charge
Hearing exams	No charge
Urgent care consultations, exams, and treatment	\$10 per visit
Most physical, occupational, and speech therapy	\$10 per visit

Outpatient Services**You Pay**

Outpatient surgery and certain other outpatient procedures	\$10 per procedure
Allergy injections (including allergy serum)	No charge
Most immunizations (including the vaccine)	No charge
Most X-rays and laboratory tests	No charge
Covered individual health education counseling	No charge
Covered health education programs	No charge

Hospitalization Services**You Pay**

Room and board, surgery, anesthesia, X-rays, laboratory tests, and drugs	No charge
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Emergency Health Coverage**You Pay**

Emergency Department visits	\$100 per visit
Note: This Cost Share does not apply if admitted directly to the hospital as an inpatient for covered Services (see "Hospitalization Services" for inpatient Cost Share).	

Ambulance Services**You Pay**

Ambulance Services	\$50 per trip
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Prescription Drug Coverage**You Pay**

Most covered outpatient items in accord with our drug formulary guidelines at Plan Pharmacies or through our mail-order service	\$10 for up to a 100-day supply
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Durable Medical Equipment**You Pay**

Covered durable medical equipment for home use in accord with our durable medical equipment formulary guidelines	No charge
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Mental Health Services**You Pay**

Inpatient psychiatric hospitalization	No charge
Individual outpatient mental health evaluation and treatment	\$10 per visit
Group outpatient mental health treatment	\$5 per visit

(continues)

Disclosure Form*(continued)*

Chemical Dependency Services**You Pay**

Inpatient detoxification	No charge
Individual outpatient chemical dependency evaluation and treatment	\$10 per visit
Group outpatient chemical dependency treatment	\$5 per visit

Home Health Services**You Pay**

Home health care (up to 100 visits per calendar year)	No charge
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Other**You Pay**

Skilled nursing facility care (up to 100 days per benefit period)	No charge
Covered external prosthetic devices, orthotic devices, and ostomy and urological supplies	No charge
All Services related to covered infertility treatment	50% Coinsurance
Hospice care	No charge

This is a summary of the most frequently asked-about benefits. This chart does not explain benefits, Cost Share, out-of-pocket maximums, exclusions, or limitations, nor does it list all benefits and Cost Share amounts. For a complete explanation, please refer to the *EOC*. Please note that we provide all benefits required by law (for example, diabetes testing supplies).

Your Kaiser Permanente CHIROPRACTIC and ACUPUNCTURE benefits



When you need chiropractic or acupuncture care, follow these simple steps:

1. Find an ASH Plans Participating Chiropractor or Participating Acupuncturist near you.
 - Call **1-800-678-9133** or **711** (TTY), weekdays from 5 a.m. to 6 p.m. (Pacific time).
2. Schedule an appointment.
3. Pay for your office visit when you arrive for your appointment.

(See the reverse for more details.)

YOUR KAISER PERMANENTE COMBINED CHIROPRACTIC AND ACUPUNCTURE BENEFIT

Services	Cost Sharing and Office Visit Maximums
<p>Chiropractic Services are covered when a Participating Chiropractor finds that the Services are Medically Necessary to treat or diagnose Neuromusculoskeletal Disorders. Acupuncture Services are covered when a Participating Acupuncturist finds that the Services are Medically Necessary to treat or diagnose Neuromusculoskeletal Disorders, nausea, or pain. You can obtain Services from any ASH Plans Participating Chiropractors and Participating Acupuncturists without a referral from a Kaiser Permanente Plan Physician.</p>	<p>Office visit cost share: \$10 copay per visit Office visit limit: Up to a combined total of 30 Chiropractic and Acupuncture visits per year Chiropractic appliance benefit: If the amount of the appliance in the ASH Plans fee schedule exceeds \$50, you will pay the amount in excess of \$50, and that payment will not apply toward any applicable deductible or out-of-pocket maximum. Covered chiropractic appliances are limited to: elbow supports, back supports, cervical collars, cervical pillows, heel lifts, hot or cold packs, lumbar braces and supports, lumbar cushions, orthotics, wrist supports, rib belts, home traction units, ankles braces, knee braces, rib supports, and wrist braces.</p>

Office visits: Covered Services are limited to Medically Necessary Chiropractic and Acupuncture Services authorized and provided by ASH Plans Participating Chiropractors and Participating Acupuncturists except for Emergency Chiropractic and Acupuncture Services, and Services that are not available from Participating Providers. Each office visit counts toward the year visit limit even if acupuncture or a chiropractic adjustment is not provided during the visit.

X-rays and laboratory tests: Medically Necessary X-rays and laboratory tests are covered at no charge when a Participating Chiropractor provides the Services or refers you to a Participating Provider for the Services.

Participating Chiropractors and Acupuncturists

ASH Plans contracts with Participating Chiropractors and other Participating Providers to provide covered Chiropractic Services (including laboratory tests, X-rays, and chiropractic appliances). ASH Plans contracts with Participating Acupuncturists to provide acupuncture care (including adjunctive therapies, such as acupressure, cupping, moxibustion, or breathing techniques, when provided during the same course of treatment and in conjunction with acupuncture). You must receive covered Services from a Participating Provider, except for Emergency Chiropractic and Acupuncture Services, Urgent Chiropractic and Acupuncture Services, and Services that are not available from Participating Providers that are authorized in advance by ASH Plans. The list of Participating Chiropractors and Acupuncturists is available from the ASH Plans Member Services Department at **1-800-678-9133**. The list of Participating Chiropractors and Acupuncturists is subject to change at any time without notice.

How to Obtain Covered Services

To obtain covered Services, call a Participating Chiropractor or Participating Acupuncturist to schedule an initial examination. If additional Services are required, verification that the Services are Medically Necessary may be required. Your Participating Chiropractor or Acupuncturist will request any required approvals. An ASH Plan's clinician in the same or similar specialty as the provider of Chiropractic or Acupuncture Services under review will decide whether Chiropractic or Acupuncture Services are or were Medically Necessary. ASH Plans will disclose to you, upon request, the written criteria it uses to make the decision to authorize, modify, delay, or deny a request for authorization. If you have questions or concerns, please contact the ASH Plans Member Services Department.

Second Opinions

You may request a second opinion in regard to covered Services by contacting another Participating Chiropractor or Acupuncturist. A Participating Chiropractor or Acupuncturist may also request a second opinion in regard to covered Services by referring you to another Participating Chiropractor or Acupuncturist in the same or similar specialty.

Your Costs

When you receive covered Services, you must pay your Cost Share as described in the *Combined Chiropractic and Acupuncture Services Amendment* of your Health Plan *Evidence of Coverage*. The Cost Share does not apply toward the out-of-pocket maximum described in the Health Plan *Evidence of Coverage* (unless you have a plan with an HSA option).

Emergency and Urgent Chiropractic Services/Emergency and Urgent Acupuncture Services

Covered Emergency Chiropractic Services are those emergency services provided for treatment of Neuromusculoskeletal Disorder, nausea, or pain. Covered Acupuncture Services are those emergency services provided for treatment of Neuromusculoskeletal Disorder, nausea, or pain. These conditions must manifest themselves by acute symptoms of sufficient severity, including severe pain, such that a reasonable person could expect the absence of immediate Chiropractic or Acupuncture Services to result in serious jeopardy to your health or body functions or organs. Covered Urgent Chiropractic Services and Acupuncture Services consist of Chiropractic Services and Acupuncture Services necessary to prevent serious deterioration of the health of a Member, resulting from an unforeseen illness, injury, or complication of an existing condition, including pregnancy, for which treatment cannot be delayed until the Member returns to the Service Area.

Getting Assistance

If you have questions about the Services you can get from an ASH Plans Participating Provider, you may call ASH Plans Member Services at **1-800-678-9133** (TTY users call **711**), weekdays from 5 a.m. to 6 p.m. Pacific time.

YOUR KAISER PERMANENTE COMBINED CHIROPRACTIC AND ACUPUNCTURE BENEFIT

Grievances

You can file a grievance with Kaiser Permanente regarding any issue. Your grievance must explain your issue, such as the reasons why you believe a decision was in error or why you are dissatisfied with Services you received. You may submit your grievance orally or in writing to Kaiser Permanente as described in your Health Plan *Evidence of Coverage*.

Exclusions and Limitations

- Acupuncture Services for conditions other than Neuromusculoskeletal Disorders, nausea, and pain
- Services for asthma or addiction, such as nicotine addiction
- Hypnotherapy, behavior training, sleep therapy, and weight programs
- Thermography
- Experimental or investigational Services
- CT scans, MRIs, PET scans, bone scans, nuclear medicine, and any other types of diagnostic imaging or radiology other than X-rays covered under the "Covered Services" section of your *Combined Chiropractic and Acupuncture Services Amendment*
- Ambulance and other transportation
- Education programs, nonmedical self-care or self-help, any self-help physical exercise training, and any related diagnostic testing
- Services for pre-employment physicals or vocational rehabilitation
- Acupuncture performed with reusable needles
- Air conditioners, air purifiers, therapeutic mattresses, chiropractic appliances, durable medical equipment, supplies, or similar devices or appliances
- Drugs and medicines, including non-legend or proprietary drugs and medicines
- Services you receive outside the state of California, except for Emergency Chiropractic Services, Emergency Acupuncture Services, Urgent Chiropractic Services, or Urgent Acupuncture Services
- Hospital services, anesthesia, manipulation under anesthesia, and related services
- For Chiropractic Services, adjunctive therapy not associated with spinal, muscle, or joint manipulations
- For Acupuncture Services, adjunctive therapies unless provided during the same course of treatment and in conjunction with acupuncture
- Dietary and nutritional supplements, such as vitamins, minerals, herbs, herbal products, injectable supplements, and similar products
- Massage therapy
- Services provided by a chiropractor that are not within the scope of licensure for a chiropractor licensed in California
- Services provided by an acupuncturist that are not within the scope of licensure for an acupuncturist licensed in California
- Maintenance care (services provided to Members whose treatment records indicate that they have reached maximum therapeutic benefit)

Definitions

Acupuncture Services: The stimulation of certain points on or near the surface of the body by the insertion of needles to prevent or modify the perception of pain or to normalize physiological functions (including adjunctive therapies, such as acupressure, cupping, moxibustion, or breathing techniques, when provided during the same course of treatment and in conjunction with acupuncture) when provided by an acupuncturist for the treatment of your Neuromusculoskeletal Disorder, nausea (such as nausea related to chemotherapy, postsurgical pain, or pregnancy), or pain (such as lower back pain, shoulder pain, joint pain, or headaches).

ASH Plans: American Specialty Health Plans of California, Inc., a California corporation.

Chiropractic Services: Services provided or prescribed by a chiropractor (including laboratory tests, X-rays, and chiropractic appliances) for the treatment of your Neuromusculoskeletal Disorder.

Neuromusculoskeletal Disorders: Conditions with associated signs and symptoms related to the nervous, muscular, or skeletal systems. Neuromusculoskeletal Disorders are conditions typically categorized as structural, degenerative, or inflammatory disorders, or biomechanical dysfunction of the joints of the body or related components of the motor unit (muscles, tendons, fascia, nerves, ligaments/capsules, discs, and synovial structures), and related neurological manifestations or conditions.

Participating Acupuncturist: An acupuncturist who is licensed to provide Acupuncture Services in California and who has a contract with ASH Plans to provide Medically Necessary Acupuncture Services to you. A list of Participating Acupuncturists is available from the ASH Plans Member Services Department toll free at **1-800-678-9133** (TTY users call **711**). The list of Participating Acupuncturists is subject to change at any time, without notice. If you have questions, please call the ASH Plans Member Services Department.

Participating Chiropractor: A chiropractor who is licensed to provide Chiropractic Services in California and who has a contract with ASH Plans to provide Medically Necessary Chiropractic Services to you. A list of Participating Chiropractors is available from the ASH Plans Member Services Department at **1-800-678-9133** (TTY users call **711**). The list of Participating Chiropractors is subject to change at any time, without notice. If you have questions, please call the ASH Plans Member Services Department.

Participating Provider: A Participating Chiropractor, Participating Acupuncturist, or any licensed provider with which ASH Plans contracts to provide covered care, including laboratory tests or X-rays that are covered chiropractic care.

This is a summary and is intended to highlight only the most frequently asked questions about the chiropractic and acupuncture benefit, including cost shares. Please refer to the *Combined Chiropractic and Acupuncture Services Amendment of the Kaiser Foundation Health Plan, Inc., Evidence of Coverage* for a detailed description of the chiropractic and acupuncture benefits, including exclusions and limitations, Emergency Chiropractic Services, Emergency Acupuncture Services, Urgent Chiropractic Services, or Urgent Acupuncture Services.

Kaiser Foundation Health Plan, Inc. (Health Plan) contracts with American Specialty Health Plans of California, Inc. (ASH Plans) to make the ASH Plans network of Participating Chiropractors and Participating Acupuncturists available to you. You can obtain covered Services from any Participating Chiropractor or Participating Acupuncturist without a referral from a Plan Physician. Your Cost Share is due when you receive covered Services. Please see the definitions section of your *Combined Chiropractic and Acupuncture Services Amendment of the Kaiser Foundation Health Plan, Inc., Evidence of Coverage* for terms you should know.