

Kaiser Permanente Virtual Complete™

Frequently asked questions for brokers and employers

How is Virtual Complete plans different from other Kaiser Permanente plans?

Virtual Complete is Kaiser Permanente's new virtual-first plan.

Virtual Complete plans offer unlimited \$0 virtual care and typically have a limit of 3 in-person office visits per year at a predictable copay.¹ After 3 in-person visits in a year, additional visits are subject to the deductible. Lab tests and generic prescriptions also have a copay and aren't subject to the deductible.

With incentives to choose virtual care first, employees can get more convenient care at more affordable prices. Employees can also address medical concerns faster, which means less time away from work for appointments.

Is a referral required for an in-person office visit with a Virtual Complete plan?

No referral or prior virtual visit is required for in-person primary care, routine visits with a nurse, or mental health office visits. Just like other Kaiser Permanente plans, some specialty office visits require a referral from the primary care doctor.

What services are included in the set number of in-person office visits at a copay?

It varies by market, but in general, visits for primary care, mental health treatment, and substance use disorder treatment count toward the set number of office visits at a copay. Preventive office visits, and routine visits with a nurse do not count toward the limit and are typically \$0. Specialist office visits do not count toward the limit and are subject to the deductible.

After 3 office visits at a copay, additional office visits are subject to the deductible.¹ What is the likelihood that my employees will exceed 3 office visits?

Most members generally use 3 or fewer office visits each year. However, it also depends on their overall health status and medical history.

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If a member doesn't use their limited number of in-person office visits at a copay in one year (e.g., 3 visits), do the remaining visits carry over to the next year?

No, the visit limit resets upon the group's renewal date.

Does the limited number of in-person office visits at a copay apply to the family or to individual family members?

The limit applies to each individual family member.

How can members find out how many in-person office visits at a copay they have left?

Members will need to call or chat online with Member Services to confirm. Some types of in-person office visits do not count towards the limit, depending on the market and state regulations.

What's the most affordable way to get care on this plan?

To pay the lowest cost, members should consider a virtual visit first, which is covered at no charge. In many situations, members can get the care and prescriptions they need virtually. Additionally, members can get in-person preventive care services at no additional cost, such as age-appropriate preventive screenings, immunizations, and routine physical exams.

How do members get their medications?

Members can order medications through our mobile app, or online at kp.org, over the phone, or they can fill a prescription at an in-network pharmacy.

Generic medications have a predictable copay and aren't subject to the deductible. Standard mail delivery to the member's home is no cost. Same-day or next-day delivery is available on most prescription orders for an additional fee.

What if a member needs emergency care?

Members have coverage for in-person emergency and urgent care anywhere in the world, and they don't need a referral. Their cost will depend on their plan benefits.

How do members get care if they travel outside of their home state?

Virtual care may not be available in some states due to state laws that prevent doctors from providing care across state lines. They can get in-person care at any Kaiser Permanente medical facility in the country, CVS MinuteClinic®, or Concentra Urgent Care clinics in states without Kaiser Permanente facilities. They don't need a referral for these in-person care options, but they'll have a cost, depending on their plan benefits.

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How does virtual care at Kaiser Permanente compare with other health plans?

With other health plans, virtual care is typically delivered by third-party providers and quality, cost, and available services can vary wildly.

Virtual care is as much a part of Kaiser Permanente's ecosystem as in-person care – and that's the key difference. When a Virtual Complete member switches between virtual care and in-person care at Kaiser Permanente, it's a more seamless and connected experience.

What tools and equipment should my employees consider when choosing a Virtual Complete plan?

They should feel comfortable with technology, such as email and texting. To use some services, they'll need access to an internet connection with good bandwidth. If they can reliably watch movies on their phone or computer from a streaming service, they most likely have what they need to connect with us using online chat, video visits, and other virtual care options.

Where are Virtual Complete plans available?

Virtual Complete plans are available in all Kaiser Permanente markets, except Hawaii, starting January 1, 2022.

What is the difference between Virtual Complete, Virtual Forward, and Virtual Plus plans?

Virtual Complete plans are available in all markets, except Hawaii. Virtual Forward plans are only offered in the Mid-Atlantic States market (Maryland, Virginia, and Washington, D.C.). Virtual Plus plans are only offered in the Washington state market. There are differences in plan design and network, depending on the market. Please speak with your Kaiser Permanente representative for additional details.

Where do I go for more information?

Visit our [Better Way landing page](#) to learn more about Virtual Complete plans.

1. Some Virtual Complete plans may have a different number of in-person office visits at a copay.