YOUR KAISER PERMANENTE

CHIROPRACTIC BENEFIT

Kaiser Foundation Health Plan, Inc., contracts with American Specialty Health Plans of California, Inc. (ASH Plans), to make the ASH Plans network of Participating Chiropractors available to you. When you need chiropractic care, you have direct access to more than 3,100 licensed chiropractors in California. Just follow these simple steps:

- 1. Find an ASH Plans Participating Chiropractor near you.
 - Online at ashcompanies.com/kp
 - Or call 1-800-678-9133 (TTY users call 711), 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.

Services	Cost Sharing and Office Visit Maximums
Chiropractic Services are covered when a Participating Chiropractor finds that the services are medically necessary to treat or diagnose Neuromusculoskeletal Disorders. You can obtain services from any ASH Plans Participating Chiropractor without a referral from a Plan physician.	Office visit cost share: \$10 copay per visit Office visit limit: 30 visits per calendar 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 annual 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, ankle braces, knee braces, rib supports, and wrist braces.

Office visits: Each office visit counts toward the calendar year visit limit even if an 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 prescribed as part of your chiropractic care by a Participating Chiropractor and provided by an appropriately licensed Participating Provider that has contracted with ASH Plans to provide those services.

Participating Chiropractors

ASH Plans contracts with Participating Chiropractors and other Participating Providers to provide covered Chiropractic Services, including laboratory tests, X-rays, and chiropractic appliances. You must receive covered services from a Participating Provider, except for Emergency Chiropractic Services and services that are not available from Participating Providers that are authorized in advance by ASH Plans. The list of Participating Chiropractors is available on the ASH Plans website at **ashcompanies.com/kp** or by calling the ASH Plans Member Services Department toll free at **1-800-678-9133** (TTY users call **711**), weekdays from 5 a.m. to 6 p.m. The list of Participating Chiropractors is subject to change at any time without notice.

How to obtain services: To obtain covered services, call a Participating Chiropractor to schedule an initial examination. If additional services are required, your Participating Chiropractor will prepare a Treatment Plan. The ASH Plans Clinical Services Manager will authorize the Treatment Plan for you, as described under "Decision time frames" in the *Chiropractic Services Amendment*, if the services are covered and the services are Medically Necessary Chiropractic Services. For more information about how to obtain covered Chiropractic Services, please refer to the *Chiropractic Services Amendment* of your Health Plan *Evidence of Coverage*.

Emergency Chiropractic Services

Covered Chiropractic Services are provided for the treatment of a Neuromusculoskeletal Disorder which manifests itself by acute symptoms of sufficient severity (including severe pain) such that a reasonable person could expect the absence of immediate Chiropractic Services to result in serious jeopardy to your health or body functions or organs. We cover Emergency Chiropractic Services provided by both Participating Chiropractors and Non–Participating Chiropractors. We do not cover follow-up or continuing care from a Non–Participating Chiropractor unless ASH Plans has authorized the services in advance. Also, we do not cover services from a Non–Participating Chiropractor that ASH Plans determines are not Emergency Chiropractic Services.

Second Opinions

If you request a second opinion, it will be provided to you by a Participating Chiropractor who is an appropriately qualified chiropractor (a chiropractor who is acting within his or her scope of practice and who possesses a clinical background related to the illness or condition associated with the request for a second opinion). To get a second opinion, make an appointment with a Participating Chiropractor.

Your Costs

When you receive covered services, you must pay your Cost Sharing amount as described in the *Chiropractic Services Amendment* of your Health Plan *Evidence of Coverage*. The Cost Sharing does not apply toward the annual out-of-pocket maximum described in the Health Plan *Evidence of Coverage*.

Getting Assistance

If you have a question or concern regarding the services you received from an ASH Plans Participating Provider, you may call ASH Plans Member Services toll free at **1-800-678-9133** (TTY users call **711**), weekdays from 5 a.m. to 6 p.m., or write ASH Plans at:

ASH Plans Member Services P.O. Box 509002 San Diego, CA 92150-9002

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 about 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

- 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 the Health Plan Evidence of Coverage
- Ambulance and other transportation
- Education programs, non-medical self-care or self-help, any self-help physical exercise training, and any related diagnostic testing
- Services for pre-employment physicals or vocational rehabilitation
- Air conditioners, air purifiers, therapeutic mattresses, chiropractic appliances, durable medical equipment, supplies, devices, appliances, and any other item except those listed as covered under the Evidence of Coverage

- Drugs and medicines, including non-legend or proprietary drugs and medicines
- Services you receive outside the state of California except as stated in the *Chiropractic Services Amendment*
- Hospital services, anesthesia, manipulation under anesthesia, and related services
- For Chiropractic Services, adjunctive therapy not associated with spinal, muscle, or joint manipulations
- 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
- Maintenance care (services provided to members whose treatment records indicate that they have reached maximum therapeutic benefit)

Definitions

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 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 on the ASH Plans website at ashcompanies.com/kp, or by calling 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 or any licensed provider with which ASH Plans contracts to provide covered care, including laboratory tests or X-rays that are covered chiropractic care.

Treatment Plan: A proposed course of treatment for your Neuromusculoskeletal Disorder, which may include laboratory tests, X-rays, chiropractic appliances, and a specific number of visits for chiropractic manipulations, adjustments, and therapies that are Medically Necessary Chiropractic Services for you.

This is only a summary of your chiropractic coverage, and is intended to highlight only the most frequently asked questions about the benefit, including cost shares. Please refer to the *Chiropractic Services Amendment of the Kaiser Foundation Health Plan, Inc., Evidence of Coverage* for details about the terms and conditions of your chiropractic coverage, including exclusions and limitations and Emergency Chiropractic Services. To obtain the amendment to your *Evidence of Coverage*, please contact your group.

Some capitalized terms have special meaning in this document, as described in the "Definitions" section. Please also see the "Definitions" section of your *Chiropractic Services Amendment of the Kaiser Foundation Health Plan, Inc., Evidence of Coverage* for terms you should know.

