

VISITING MEMBER SERVICES

Getting care away from home

For travel in other Kaiser Permanente service areas

Getting care in Kaiser Permanente service areas

This brochure will help you get a wide range of care¹ in Kaiser Permanente service areas, which include all or parts of:

- California
- Colorado
- Georgia
- Hawaii
- Maryland
- Oregon
- Virginia
- Washington
- Washington, D.C.

You can get care in these areas and find Kaiser Permanente locations at kp.org/kpfacilities. You're also covered for urgent and emergency care from any non-Kaiser Permanente provider.

Outside Kaiser Permanente service areas

You're covered for urgent and emergency care anywhere in the world.² Routine services aren't covered, so make sure to get them before your trip if you're traveling elsewhere. Routine services include prevention, exams, checkups, and services for ongoing medical conditions.

¹Subject to requirements and limitations in your *Evidence of Coverage* or other coverage documents.

²Please refer to your *Evidence of Coverage* or other coverage documents for details.

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Do you have one of these plans?

If so, this brochure may not apply to you, or the services available may be different than what's described. Check the details below. If you aren't sure if you have one of these plans, check your *Evidence of Coverage*, *Certificate of Insurance*, or *Summary Plan Description*, or call Member Services in your home area.

- **Medicare:** This brochure doesn't apply to you. Please refer to the On the Go brochure or call Member Services in your home service area for details.
- **Medicaid:*** This brochure doesn't apply to you. Please call Member Services in your home service area for details.
- **Preferred provider organization (PPO) and out-of-area plans:** These plans offer nationwide access to care. Please see your *Certificate of Insurance* for additional information.

Kaiser Permanente Insurance Company (KPIC) PPO plan members can get care from PHCS providers or any licensed provider in the United States.

- **Medigap (offered by Kaiser Permanente Washington):** This brochure doesn't apply to you. Please call Member Services in your home service area for details.

*Otherwise known as Medi-Cal in California and QUEST Integration in Hawaii.

Kaiser Permanente Washington Options PPO members:

- May receive routine care at an out-of-network benefit level from any licensed provider in the United States. Routine care from Kaiser Permanente providers in service areas outside the home area isn't currently treated as in-network and may be subject to out-of-pocket expenses for services.

For more information, call **1-800-446-4296**.

Indemnity plan members can get care from any licensed provider, regardless of where they live or travel.

If you're in one of the following 3 plans, your coverage is the same in another Kaiser Permanente service area as in your home service area:

- Self-funded exclusive provider (EPO) plans
- Point-of-service (POS) plans (see your *Certificate of Insurance* for additional details)
- Kaiser Permanente Northwest PPO plans

For plan details, see page 10.



Care while traveling

What types of care can I get in other Kaiser Permanente service areas?

As a member, you can get most of the same services¹ you would get in your home service area when visiting another Kaiser Permanente service area.

You can get these services as long as they're provided or referred by a Kaiser Permanente doctor in the service area you're visiting.

Types of care

Anything can come up when you travel, and different health needs require different types of care. See the following examples.

What is an emergency care need?

Emergency care is for a medical or psychiatric condition, including severe pain, that requires immediate medical attention to prevent serious jeopardy to your health.²

Examples include:

- Chest pain or pressure
- Severe stomach pain that comes on suddenly
- Severe shortness of breath
- Decrease in or loss of consciousness

¹Subject to the terms and conditions, including prior authorization, approval, and cost-sharing requirements of your plan coverage issued in your home service area.

²If you reasonably believe you have an emergency medical condition, call **911** (if you are in the U.S.) or go to the nearest emergency department. An emergency medical condition is a medical or psychiatric condition that requires immediate medical attention to prevent serious jeopardy to your health. For the complete definition of an emergency medical condition, please refer to your *Evidence of Coverage* or other coverage documents.

What is an urgent care need?

An urgent care need is one that requires prompt medical attention, usually within 24 or 48 hours, but isn't an emergency medical condition.

Examples include:

- Minor injuries, cuts, backaches, earaches, upper respiratory symptoms, sore throats, frequent or severe coughs, frequent urination, or a burning sensation when urinating

What is a routine care need?

An expected need. Examples include:

- Physical exams
- Well-child checkups
- Immunizations (shots)

If you're not sure what kind of care you need, and you have a secure login and password, you can use kp.org to send a nonurgent message to your primary care physician.



In case of an emergency

If you have a medical emergency, call **911** or go to the nearest hospital.

What services are available?¹

Inpatient services

Hospitalization, including inpatient surgery and other services you may get while you're admitted

Outpatient services

- Office visits
- Outpatient surgery (with certain exceptions)
- Allergy tests and allergy injections
- Physical, occupational, and speech therapy²
- Prenatal and postnatal care
- Chemotherapy
- Vision exams

X-ray and laboratory services

In or out of the hospital

Prescription drugs

If the drug is covered in your home service area

Mental health/chemical dependency services

Same coverage as in your home service area

Skilled nursing facility services

Home health care services³

Part-time or intermittent home health care services inside a Kaiser Permanente service area

Hospice services

Home-based hospice services inside a Kaiser Permanente service area

¹This brochure does not include a complete list of available services or exclusions. Services may vary by service area. For more specific information about visiting member services, call the Away from Home Travel Line at **951-268-3900**.

²For members in Maryland, coverage for physical, occupational, and speech therapy is different. Call Member Services to learn more.

³Certain limitations apply to home health care.

What services may be available with prior approval from your home service area?

If these services are included in your plan as described in your *Evidence of Coverage*, *Certificate of Insurance*, *Summary Plan Description*, or *Member Handbook*, and are available in the host region, they're available to you but require prior approval from your home service area:

- Services related to infertility and artificial conception
- Gender-confirming surgery and related services, other than services determined to be provided by all regions
- Services related to bariatric surgery and treatment
- Organ and blood/marrow transplants and related care
- Durable medical equipment
- Chronic dialysis
- Orthotics and prosthetics

What services aren't available?

These services, equipment, and supplies aren't available to you in other Kaiser Permanente service areas:

- Services not covered under your plan as described in your *Evidence of Coverage*, *Certificate of Insurance*, *Summary Plan Description*, or *Member Handbook*
- Dental services and dental X-rays (nonemergency or nonurgent dental services/ X-rays are covered under a different benefit)
- Alternative medicine and complementary care
- Hearing aids, eyeglasses, and contacts



Care where you need it

How do I get care in other Kaiser Permanente service areas?¹

Call the Away from Home Travel Line² at **951-268-3900** and let them know you plan to visit another Kaiser Permanente service area for care.

- You'll get a medical record number (MRN) or health record number (HRN) for the other Kaiser Permanente service area and information on making an appointment.

You'll only use this MRN or HRN in the service area you're visiting. You'll use the same MRN or HRN whenever you visit the service area. There's no need to get a new MRN or HRN if you visit the service area again.

When you get back home, you'll use your home MRN or HRN to get care.

Do I need approval first?

Certain types of care require approval by Kaiser Permanente.

Call the Away from Home Travel Line² at **951-268-3900** for more information.

What happens if I move?

If you move to another Kaiser Permanente service area, you may not be able to keep your current membership. You may be able to enroll in a Kaiser Permanente plan in the service area you've moved to.³

¹When you get care in other Kaiser Permanente service areas, your home-area claims and grievance processes still apply. Members can file a grievance with or without a denial letter. See your *Evidence of Coverage, Certificate of Insurance, or Summary Plan Description* for details.

²This number can be dialed inside and outside the United States. Before the phone number, dial "001" for landlines and "+1" for mobile lines if you're outside the country. Long-distance charges may apply, and we can't accept collect calls. The phone line is closed on major holidays (New Year's Day, Easter, Memorial Day, July Fourth, Labor Day, Thanksgiving, and Christmas). It closes early the day before a holiday at 10 p.m. Pacific time (PT), and it reopens the day after a holiday at 4 a.m. PT.

³This does not apply to Federal Employees Health Benefits Program members.



What costs should I expect?

If your plan covers your care when you visit another Kaiser Permanente service area, you'll pay what you normally would in your home region – for example, a copay, coinsurance, or deductible payment. If what you pay doesn't cover all that you owe for the care you received, you'll get a bill for the difference later.

For more specific information on your coverage, please check your plan details.



For more information

Extra resources

For more information about getting care in another Kaiser Permanente service area:

- Refer to your *Evidence of Coverage, Certificate of Insurance, or Summary Plan Description*.
- Contact Member Services in your home service area.
- If you're in a self-funded EPO plan or a POS, PPO, or out-of-area plan, call the number on your Kaiser Permanente ID card.



For 24/7 travel support anytime, anywhere, call the Away from Home Travel Line at **951-268-3900** or visit **kp.org/travel**.*

*Washington members, visit **kp.org/wa/travel**.



FOR MORE INFORMATION

Keep this information handy

Take note of any medical/health record numbers for getting care in other Kaiser Permanente service areas.

Trip 1

Kaiser Permanente service area you're visiting

Medical/health record number

Notes

Trip 2

Kaiser Permanente service area you're visiting

Medical/health record number

Notes

Trip 3

Kaiser Permanente service area you're visiting

Medical/health record number

Notes

For plan details

You'll find more detailed, up-to-date information about getting care in the following document(s) that apply to your health coverage:

- *Evidence of Coverage (EOC)*, if your coverage is directly through Kaiser Foundation Health Plan
- *Certificate of Insurance (COI)*, if your coverage is directly through Kaiser Permanente Insurance Company
- *Summary Plan Description (SPD)*, if your coverage is through your employer's self-funded plan

Contact Member Services in your home service area to request a copy of your *EOC* or *COI*. To request a copy of your *SPD*, contact your employer.

Terms of visiting member services are subject to change: Kaiser Permanente may change the terms, conditions, and eligible service areas of visiting member services at any time.

Services covered under your health plan are provided and/or arranged by Kaiser Permanente health plans: Kaiser Foundation Health Plan, Inc., in Northern and Southern California and Hawaii • Kaiser Foundation Health Plan of Colorado • Kaiser Foundation Health Plan of Georgia, Inc., Nine Piedmont Center, 3495 Piedmont Road NE, Atlanta, GA 30305, 404-364-7000 • Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc., in Maryland, Virginia, and Washington, D.C., 2101 E. Jefferson St., Rockville, MD 20852 • Kaiser Foundation Health Plan of the Northwest, 500 NE Multnomah St., Suite 100, Portland, OR 97232 • Kaiser Foundation Health Plan of Washington or Kaiser Foundation Health Plan of Washington Options, Inc., 601 Union St., Suite 3100, Seattle, WA 98101 • Services for self-insured plans are administered by Kaiser Permanente Insurance Company, One Kaiser Plaza, Oakland, CA 94612. Services for fully insured PPO plans are provided and/or arranged by Kaiser Permanente Insurance Company.

Nondiscrimination Notice

Kaiser Permanente does not discriminate on the basis of age, race, ethnicity, color, national origin, cultural background, ancestry, religion, sex, gender identity, gender expression, sexual orientation, marital status, physical or mental disability, source of payment, genetic information, citizenship, primary language, or immigration status.

Language assistance services are available from our Member Services Contact Center 24 hours a day, seven days a week (except closed holidays). Interpreter services, including sign language, are available at no cost to you during all hours of operation. We can also provide you, your family, and friends with any special assistance needed to access our facilities and services. In addition, you may request health plan materials translated in your language, and may also request these materials in large text or in other formats to accommodate your needs. For more information, call **1-800-464-4000** (TTY users call **711**).

A grievance is any expression of dissatisfaction expressed by you or your authorized representative through the grievance process. For example, if you believe that we have discriminated against you, you can file a grievance. Please refer to your *Evidence of Coverage or Certificate of Insurance* or speak with a Member Services representative for the dispute-resolution options that apply to you. This is especially important if you are a Medicare, Medi-Cal, MRMIP, Medi-Cal Access, FEHBP, or CalPERS member because you have different dispute-resolution options available.

You may submit a grievance in the following ways:

- By completing a Complaint or Benefit Claim/Request form at a Member Services office located at a Plan Facility (please refer to *Your Guidebook* for addresses)
- By mailing your written grievance to a Member Services office at a Plan Facility (please refer to *Your Guidebook* for addresses)
- By calling our Member Service Contact Center toll free at **1-800-464-4000** (TTY users call **711**)
- By completing the grievance form on our website at **kp.org**

Please call our Member Service Contact Center if you need help submitting a grievance.

The Kaiser Permanente Civil Rights Coordinator will be notified of all grievances related to discrimination on the basis of race, color, national origin, sex, age, or disability. You may also contact the Kaiser Permanente Civil Rights Coordinator directly at One Kaiser Plaza, 12th Floor, Suite 1223, Oakland, CA 94612.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at ocrportal.hhs.gov/ocr/portal/lobby.jsf or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at hhs.gov/ocr/office/file/index.html.

Aviso de no discriminación

Kaiser Permanente no discrimina a ninguna persona por su edad, raza, etnia, color, país de origen, antecedentes culturales, ascendencia, religión, sexo, identidad de género, expresión de género, orientación sexual, estado civil, discapacidad física o mental, fuente de pago, información genética, ciudadanía, lengua materna o estado migratorio.

La Central de Llamadas de Servicio a los Miembros brinda servicios de asistencia con el idioma las 24 horas del día, los siete días de la semana (excepto los días festivos). Se ofrecen servicios de interpretación sin costo alguno para usted durante el horario de atención, incluido el lenguaje de señas. También podemos ofrecerle a usted, a sus familiares y amigos cualquier ayuda especial que necesiten para acceder a nuestros centros de atención y servicios. Además, puede solicitar los materiales del plan de salud traducidos a su idioma, y también los puede solicitar con letra grande o en otros formatos que se adapten a sus necesidades. Para obtener más información, llame al **1-800-788-0616** (los usuarios de la línea TTY deben llamar al **711**).

Una queja es una expresión de inconformidad que manifiesta usted o su representante autorizado a través del proceso de quejas. Por ejemplo, si usted cree que ha sufrido discriminación de nuestra parte, puede presentar una queja. Consulte su *Evidencia de Cobertura (Evidence of Coverage)* o *Certificado de Seguro (Certificate of Insurance)*, o comuníquese con un representante de Servicio a los Miembros para conocer las opciones de resolución de disputas que le corresponden. Esto tiene especial importancia si es miembro de Medicare, Medi-Cal, el Programa de Seguro Médico para Riesgos Mayores (Major Risk Medical Insurance Program MRMIP), Medi-Cal Access, el Programa de Beneficios Médicos para los Empleados Federales (Federal Employees Health Benefits Program, FEHBP) o CalPERS, ya que dispone de otras opciones para resolver disputas.

Puede presentar una queja de las siguientes maneras:

- completando un formulario de queja o de reclamación/solicitud de beneficios en una oficina de Servicio a los Miembros ubicada en un centro del plan (consulte las direcciones en *Su Guía*)
- enviando por correo su queja por escrito a una oficina de Servicio a los Miembros en un centro del plan (consulte las direcciones en *Su Guía*)
- llamando a la línea telefónica gratuita de la Central de Llamadas de Servicio a los Miembros al **1-800-788-0616** (los usuarios de la línea TTY deben llamar al **711**)
- completando el formulario de queja en nuestro sitio web en **kp.org**

Llame a nuestra Central de Llamadas de Servicio a los Miembros si necesita ayuda para presentar una queja.

Se le informará al coordinador de derechos civiles de Kaiser Permanente (Civil Rights Coordinator) de todas las quejas relacionadas con la discriminación por motivos de raza, color, país de origen, género, edad o discapacidad. También puede comunicarse directamente con el coordinador de derechos civiles de Kaiser Permanente en One Kaiser Plaza, 12th Floor, Suite 1223, Oakland, CA 94612.

También puede presentar una queja formal de derechos civiles de forma electrónica ante la Oficina de Derechos Civiles (Office for Civil Rights) en el Departamento de Salud y Servicios Humanos de los Estados Unidos (U.S. Department of Health and Human Services) mediante el portal de quejas formales de la Oficina de Derechos Civiles (Office for Civil Rights Complaint Portal), en ocrportal.hhs.gov/ocr/portal/lobby.jsf (en inglés) o por correo postal o por teléfono a: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, D.C. 20201, 1-800-368-1019, 1-800-537-7697 (línea TDD). Los formularios de queja formal están disponibles en hhs.gov/ocr/office/file/index.html (en inglés).

無歧視公告

Kaiser Permanente 禁止以年齡、人種、族裔、膚色、原國籍、文化背景、血統、宗教、性別、性別認同、性別表達、性取向、婚姻狀況、生理或心理殘障、付款來源、遺傳資訊、公民身份、主要語言或移民身份為由而歧視任何人。

會員服務聯絡中心每週七天24小時提供語言協助服務（節假日除外）。本機構在全部營業時間內免費為您提供口譯，包括手語服務。我們還可為您和您的親友提供使用本機構設施與服務所需要的任何特別協助。此外，您還可索取翻譯成您的語言的健康保險計劃資料，以及採用大號字體或其他格式的版本來滿足您的需求。若需更多資訊，請致電**1-800-757-7585**（TTY專線使用者請撥**711**）。

投訴指任何您或您的授權代表透過流程來表達不滿的做法。例如，如果您認為自己受到歧視，即可提出投訴。若需瞭解適用於自己的爭議解決選項，請參閱《承保範圍說明書》（*Evidence of Coverage*）或《保險證明書》（*Certificate of Insurance*），或諮詢會員服務代表。如果您是 Medicare、Medi-Cal、MRMIP（Major Risk Medical Insurance Program, 高風險醫療保險計劃）、Medi-Cal Access、FEHBP（Federal Employees Health Benefits Program, 聯邦僱員健康保險計劃）或 CalPERS 會員，向會員服務代表諮詢尤其重要，因為您可能會有不同的爭議解決方式選擇。

您可透過以下途徑投訴：

- 在健康保險計劃服務設施的會員服務處填寫《投訴或福利索賠/申請表》，地址見《健康服務指南》（Your Guidebook）。
- 將書面投訴信郵寄到健康保險計劃服務設施的會員服務處（地址見《健康服務指南》（Your Guidebook））。
- 給我們的會員服務聯絡中心打免費電話，電話號碼是**1-800-757-7585**（TTY專線使用者請撥**711**）。
- 在我們的網站上填寫投訴表，網址是 **kp.org**

如果您在投訴時需要協助，請致電我們的會員服務聯絡中心。

涉及人種、膚色、原國籍、性別、年齡或殘障歧視的一切申訴都將通知 Kaiser Permanente 的民權事務協調員（Civil Rights Coordinator）。您也可與 Kaiser Permanente 的民權事務協調員直接聯絡，地址：One Kaiser Plaza, 12th Floor, Suite 1223, Oakland, CA 94612。

您還可以電子方式透過民權辦公室的投訴入口網站向美國健康與公共服務部民權辦公室（U.S. Department of Health and Human Services, Office for Civil Rights）提出民權投訴，網址是 ocrportal.hhs.gov/ocr/portal/lobby.jsf 或者按照如下資訊採用郵寄或電話方式聯絡：U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, D.C. 20201, 1-800-368-1019, 1-800-537-7697（TDD 專線）。投訴表可從網站 hhs.gov/ocr/office/file/index.html 下載。

Language Assistance Services

English: Language assistance is available at no cost to you, 24 hours a day, 7 days a week. You can request interpreter services, materials translated into your language, or in alternative formats. Just call us at **1-800-464-4000**, 24 hours a day, 7 days a week (closed holidays). TTY users call **711**.

Arabic: خدمات الترجمة الفورية متوفرة لك مجانًا على مدار الساعة كافة أيام الأسبوع. بإمكانك طلب خدمة الترجمة الفورية أو ترجمة وثائق للغتك أو لصيغ أخرى. ما عليك سوى الاتصال بنا على الرقم **1-800-464-4000** على مدار الساعة كافة أيام الأسبوع (مغلق أيام العطلات). لمستخدمي خدمة الهاتف النصي يرجى الاتصال على الرقم (711).

Armenian: Ձեզ կարող է անվճար օգնություն տրամադրվել լեզվի հարցում՝ օրը 24 ժամ, շաբաթը 7 օր: Դուք կարող եք պահանջել բանավոր թարգմանչի ծառայություններ, Ձեր լեզվով թարգմանված կամ այլընտրանքային ձևաչափով պատրաստված նյութեր: Պարզապես զանգահարեք մեզ՝ **1-800-464-4000** հեռախոսահամարով՝ օրը 24 ժամ՝ շաբաթը 7 օր (տոն օրերին փակ է): TTY-ից օգտվողները պետք է զանգահարեն **711**:

Chinese: 您每週 7 天，每天 24 小時均可獲得免費語言協助。您可以申請口譯服務、要求將資料翻譯成您所用語言或轉換為其他格式。我們每週 7 天，每天 24 小時均歡迎您打電話 **1-800-757-7585** 前來聯絡（節假日 休息）。聽障及語障專線 (TTY) 使用者請撥 **711**。

Farsi: خدمات زبانی در 24 ساعت شبانه روز و 7 روز هفته بدون اخذ هزینه در اختیار شما است. شما می توانید برای خدمات مترجم شفاهی، ترجمه جزوات به زبان شما و یا به صورتهای دیگر درخواست کنید. کفایت در 24 ساعت شبانه روز و 7 روز هفته (به استثنای روزهای تعطیل) با ما به شماره **1-800-464-4000** تماس بگیرید. کاربران TTY با شماره **711** تماس بگیرند.

Hindi: बिना किसी लागत के दुभाषिया सेवाएँ, दिन के 24 घंटे, सप्ताह के सातों दिन उपलब्ध हैं। आप एक दुभाषिये की सेवाओं के लिए, बिना किसी लागत के सामग्रियों को अपनी भाषा में अनुवाद करवाने के लिए, या वैकल्पिक प्रारूपों के लिए अनुरोध कर सकते हैं। बस केवल हमें **1-800-464-4000** पर, दिन के 24 घंटे, सप्ताह के सातों दिन (छुट्टियों वाले दिन बंद रहता है) कॉल करें। TTY उपयोगकर्ता **711** पर कॉल करें।

Hmong: Muajkwc pab txhais lus pub dawb rau koj, 24 teev ib hnuv twg, 7 hnuv ib lim tiam twg. Koj thov tau cov kev pab txhais lus, muab cov ntau ntawv txhais ua koj hom lus, los yog ua lwm hom. Tsuas hu rau **1-800-464-4000**, 24 teev ib hnuv twg, 7 hnuv ib lim tiam twg (cov hnuv caiv kaw). Cov neeg siv TTY hu **711**.

Japanese: 当院では、言語支援を無料で、年中無休、終日ご利用いただけます。通訳サービス、日本語に翻訳された資料、あるいは資料を別の書式でも依頼できます。お気軽に **1-800-464-4000** までお電話ください（祭日を除き年中無休）。TTYユーザーは **711** にお電話ください。

Khmer: ជំនួយភាសា គឺមានឥតអស់ថ្លៃដល់អ្នកឡើយ 24 ម៉ោង មួយថ្ងៃ 7 ថ្ងៃមួយអាទិត្យ។ អ្នកអាចស្នើសុំសេវាអ្នកបកប្រែ សំភារៈ ដែលបានបកប្រែទៅជាភាសាខ្មែរ ឬជាទម្រង់ផ្សេងទៀត។ គ្រាន់តែ ទូរស័ព្ទមកយើង តាមលេខ **1-800-464-4000** បាន 24 ម៉ោងមួយ ថ្ងៃ 7 ថ្ងៃមួយអាទិត្យ (បិទថ្ងៃបុណ្យ)។ អ្នកប្រើ TTY ហៅលេខ **711**។

Korean: 요일 및 시간에 관계없이 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하는 통역 서비스, 귀하의 언어로 번역된 자료 또는 대체 형식의 자료를 요청할 수 있습니다. 요일 및 시간에 관계없이 **1-800-464-4000** 번으로 전화하십시오 (공휴일 휴무). TTY 사용자 번호 **711**.

Navajo: Saad bee áká'a'ayeed náhóló t'áá jiiik'é, naadiin doo bibaa' dǫ́í' ahéé'iikeed tsosts'id yiskáají damoo ná'ádleehjǫ́. Atah halne'é áká'adoolwołigíí jókí, t'áadoo le'é t'áá hóhazaadǫ́í hadilyaa'go, éí doodaii' nááná lá al'aa'ádaat'ehígíí bee hádadilyaa'go. Kojí hodiilnih **1-800-464-4000**, naadiin doo bibaa' dǫ́í' ahéé'iikeed tsosts'id yiskáají damoo ná'ádleehjǫ́ [Dahodiyin biniiyé e'e'aahgo éí da'deelkaaló. TTY chodeeyoolínígíí kojí hodiilnih **711**

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- Get our Kaiser Permanente mobile app** to stay connected when you're on the go.
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- Print a summary of your online medical record** in case you don't have internet access.*
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*These features are available when you register on kp.org and seek care from Kaiser Permanente physicians.