



2027 Plan comparison

POS Kaiser Added Choice — Hawaii

Available for regular, part-time, and flexible employees in Hawaii

	You pay in network (Kaiser plan provider)	You pay out of network (contracted provider)	You pay out of network ¹ (noncontracted provider)
Annual deductible			
Individual	None	\$100	\$100
Family	None	\$300	\$300
Annual out-of-pocket maximum			
Individual	\$1,500	\$2,000	\$2,000
Family	\$4,500	\$6,000	\$6,000
Eligible preventive care services²	Plan pays 100%	Plan pays 100% up to allowed amount	Plan pays 100% up to allowed amount
Common health care services			
Primary care office visit	\$15 copay	20% after meeting annual deductible	20% after meeting annual deductible
Outpatient services	\$15 copay	20% after meeting annual deductible	20% after meeting annual deductible
Lab tests, X-rays	\$15 copay	20% after meeting annual deductible	20% after meeting annual deductible
Urgent care	\$15 copay at Kaiser Hawaii facility	20% after meeting annual deductible	20% after meeting annual deductible
Inpatient services			
Inpatient hospital care	Plan pays 100%	20% after meeting annual deductible	20% after meeting annual deductible
Maternity: in-hospital delivery	Plan pays 100%	20% after meeting annual deductible	20% after meeting annual deductible
Emergency services	\$50 copay	\$50 copay	\$50 copay

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Prescriptions

	You pay in network (Kaiser plan provider)	You pay out of network (contracted provider)	You pay out of network ¹ (noncontracted provider)
Retail (30-day supply)			
Maintenance generic	\$3 copay	20% but not less than \$3	Not covered
All other generic	\$15 copay	20% but not less than \$15	
Preferred brand-name	\$50 copay	20% but not less than \$50	
Nonpreferred brand-name	Not covered (except in some scenarios ³)	Not covered (except in some scenarios ³)	
Specialty	\$200 copay ³	20% but not less than \$200	
Mail order (90-day supply)			
Maintenance generic	\$6 copay	Not covered	Not covered
All other generic	\$30 copay		
Preferred brand-name	\$100 copay		
Nonpreferred brand-name	Not covered (except in some scenarios ³)		

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1. Benefits are determined using plan's allowed amounts.
2. Check with Kaiser to find out what is covered.
3. Must be prescribed and authorized through the nonpreferred drug process (subject to the brand copay).