

MBA Health Plan – 2027 Transition FAQs

What Health Insurance Carrier will be offered through the MBA Health Plan as of January 1, 2027?

Beginning January 1, 2027, Kaiser will become the sole health plan carrier available through the MBA Health Plan.

What type of plans will be available with Kaiser through the MBA Health Plan?

Kaiser will offer two coverage paths to ensure flexibility and choice. The traditional HMO plans provide in-network access to Kaiser providers and facilities. The Dual Choice plans include Kaiser, as well as access to the First Choice PPO network, a broad network of non-Kaiser providers and facilities. There will also be plans available for individuals who live outside of the Kaiser service area.

Does this mean I have to change to a Kaiser physician?

Not necessarily. The Dual Choice PPO plans, and the PPO Plus plans for members outside the Kaiser service area, offer access to a broad network of physicians and facilities. To search for a PPO Provider in the Dual Choice Plans, visit: [Search for Dual Choice PPO Providers](#). To search for a PPO Provider in the PPO Plus plans, visit: [Search for PPO Plus Providers](#).

Did the Trustees explore other carrier options for the MBA Health Plan?

Yes. The MBA pursued health plan options with all available carriers in Oregon including: Moda, UnitedHealthcare, HealthNet, Samaritan, Aetna, Cigna, PacificSource, and Regence. All carriers declined to provide a proposal to replace Providence alongside Kaiser. The Oregon health insurance landscape is especially challenging due to inflationary pressures exerting cost pressures and provider shortages impacting access to care. After careful consideration, continuing with Kaiser as the sole carrier was determined to be the best available option for the MBA Health Plan.

The transition to a Kaiser-only model is an important change for the MBA Health Plan. While Kaiser represents the best available option for 2027, the Trustees will continue to actively explore opportunities to add additional carriers in future plan years. This includes evaluating the insurance market, provider access, costs, plan offerings, and member needs to identify options that provide greater choice and flexibility for participating firms and members.

Will plan designs and premiums change?

Yes. 2027 benefits and premiums will be distributed in mid-October.

What support will Kaiser provide for members during the transition?

Kaiser's Enrollment Specialists will be available Monday through Friday, from 7am to 6pm Pacific Time. Members may receive assistance by phone or chat with:

- Verifying providers, specialists, hospitals, and pharmacies
- Confirming prescription coverage and medication information
- Understanding how care will transition
- Reviewing plan-specific information, provided the relevant plan details have been supplied to the support team

Kaiser's New Member Transition Team will proactively reach out to new members to assist with medication transitions, provider selection, access to care and services, and other onboarding needs.

Members will also have access to:

- Office hours with Kaiser Engagement Specialists.
- Account Management Team support and "train-the-trainer" resources.
- Personalized transition guidance.
- Tailored enrollment packets and other tangible resources.
- Proactive communications and education throughout the transition.

How will continuity of care be handled?

Newly enrolled members with active treatment needs may request Transition of Care services. For members actively receiving treatment from an out-of-network provider at enrollment, Kaiser will conduct an individualized clinical review to determine whether temporary authorization to continue care with the current provider is appropriate.

Situations that may qualify include:

- High-risk pregnancy and ongoing prenatal care
- Active cancer treatment
- Recent surgery requiring postoperative follow-up
- Serious or complex medical conditions
- Active behavioral health treatment
- Terminal illness or hospice-related services

When approved, Kaiser may authorize continued services with the current provider for a defined transition period while care is transferred to Kaiser providers.

How will continuity of care work for members who seek care outside of Kaiser, either through a Dual Choice or PPO Plus plan?

Care will generally continue without interruption when the provider is contracted and in-network when prior authorization is not required. Members with active authorizations, ongoing treatment plans, or scheduled services may submit documentation from their current carrier and treating providers for expedited review.

Kaiser will make every effort to:

- Review existing authorizations promptly after enrollment
- Minimize disruption to medically necessary care
- Facilitate continuation of approved treatment when clinically appropriate
- Coordinate transfer of care to Kaiser providers when necessary

Clinical decisions will be based on Kaiser's medical-necessity criteria and applicable regulatory requirements.

How will Kaiser support the transition for prescriptions?

Kaiser will assist with formulary reviews, prior authorization changes, specialty medications, and transition fills.

The process generally includes:

1. Kaiser's pharmacy team reviews the new member's current prescriptions.
2. Each medication is compared with the Kaiser formulary to determine whether a covered alternative exists.
3. If an appropriate alternative exists, the member's provider may recommend transitioning to that medication.
4. If a non-formulary medication is medically necessary and no appropriate alternative exists, the provider may submit a prior authorization or formulary exception request.
5. Members receiving active treatment may receive continuity-of-care and transition-of-care support to help avoid interruptions.

To review coverage of your medication, please see the attached link:

<https://healthy.kaiserpermanente.org/content/dam/kporg/final/documents/formularies/nw/commercial-formulary-nw-en-2026-commercial.pdf>

Members taking specialty medications or medications requiring prior authorization should begin the review process prior to January 1, 2027 to avoid any delays or disruptions in treatment. Prior Authorization is required for all of medications on this list:

<https://healthy.kaiserpermanente.org/content/dam/kporg/final/documents/formularies/nw/medimpact-pharmacies/mi-all-pa-guidelines-nw-en.pdf>

Will new ID cards be issued?

Yes. All individuals enrolled in the MBA Health Plan will receive new Kaiser Permanente identification cards. Members should use their new Kaiser card for medical and pharmacy services beginning January 1, 2027.

Will all current Providence members need to enroll in a Kaiser plan?

Yes. Employees and dependents currently enrolled in Providence coverage will need to select a Kaiser plan during the enrollment period.

Will current Kaiser members need to change plans?

Yes. Employees and dependents currently enrolled in Kaiser coverage will need to select a new Kaiser plan during the applicable enrollment period.

What happens to Providence claims for services incurred prior to January 1, 2027?

Claims for covered services received before the end of the Providence coverage period will continue to be handled under the applicable Providence plan terms.

What should firms do now?

- Identify employees and dependents currently enrolled in Providence coverage.
- Watch for MBA communications regarding 2027 plans and enrollment.
- Share transition information with employees promptly.
- Encourage employees to review Kaiser plan materials and provider availability.
- Encourage members with ongoing treatment or specialty prescriptions to begin transition planning early.

Key Deliverables Timeframe

Deliverable	Timeframe	Description
W2 Verification Form	September 10	
2027 Renewal Rates	October 1 to 15	
Kaiser E-Packets		Information regarding Kaiser plans including benefit summaries, SBC's, care topics and value adds
Transition of Care / New Member Welcome Communication		Kaiser communication focused for new member education and transition of care for members currently receiving care
Benefits Guide	November 1	Comprehensive guide including all benefits available with the MBA
Kaiser – Educational Videos	November 1	Kaiser will create recorded presentations to support education regarding Kaiser plans, resources and value adds
Kaiser - Open Enrollment Office Hours	Available during Open Enrollment	Members can schedule virtual sessions with Kaiser representatives to learn about Kaiser and ask questions
Open Enrollment Period	November	Decisions and Enrollment forms due November 30 th
Final Enrollment Deadline	December 1	
Effective Date for Benefit Plans	January 1, 2027	

Who should firms contact with questions?

Please direct questions regarding the transition to Stephanie Carpentier at Stephanie.Carpentier@alliant.com or Tracey Davis at Tracey.Davis@alliant.com.