

STATE OF HAWAII
DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS
DISABILITY COMPENSATION DIVISION

APPROVED HEALTH CARE PLANS

The following plans are approved under Section 393-7(a), Hawaii Revised Statutes (HRS).

Cigna Healthcare (Phone: 818-546-5100)

Hawaii Open Access Plus Coinsurance Plan
Hawaii Open Access Plus Copay Plan

Hawaii Management Alliance Association (Phone: 808-591-0088)

Option Plus One
Option Plus Two
Comprehensive Plus
HMAA 90/10 PPO

Hawaii Medical Service Association (Phone: 808-948-5555 or 1-800-618-4672)

Preferred Provider Plan
Preferred Provider Plan 2010
Preferred Provider Plan – A
CompMED
CompMED Choice
Health Plan Hawaii Plus
Health Plan Hawaii – A
HMSA's Small Business Preferred Provider Plan – A
HMSA's Small Business CompMED – A
HMSA's Small Business CompMED Choice – A
HMSA's Small Business Health Plan Hawaii – Plus
HMSA's Small Business Health Plan Hawaii Platinum – A

Kaiser Foundation Health Plan Inc. (Phone: 808-432-5919 or 808-432-5453)

Kaiser Permanente Group Plan
Kaiser Permanente Group Added Choice 80/20
Plan KP HI Platinum 0/15
KP HI Platinum 0/20
KP Gold – \$15L
KP Platinum Added Choice
KP HI Platinum 0/20 Rx Ded

United HealthCare Insurance Company

(Groups of 1-99 phone: 866-633-2446. Groups of 100+: 866-633-2446)

United HealthCare Options PPO
United HealthCare Options PPO – SB

University Health Alliance (Phone: 808-532-4009)

UHA 600
UHA 600 – S
UHA 600 – T
UHA 3000
UHA 3000 – S
UHA 3000 – T
One Plan
One Plan – T

Equal Opportunity Employer/Program
Auxiliary aids and services are available upon request to individuals with disabilities.
TDD/TTY Dial 711 then ask for (808) 586-9188

STATE OF HAWAII
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APPROVED HEALTH CARE PLANS (continued)

The following plans are approved under Section 393-7(b), HRS. Employers providing a plan approved under Section 393-7(b), HRS, are required to contribute at least one-half of the premium cost of dependent coverage.

Hawaii Management Alliance Association

Executive Plan Option
HMAA PPO Plan (7B)

Hawaii Medical Service Association

Preferred Provider Plan – B
CompMED – B
Health Plan Hawaii – B

Kaiser Foundation Health Plan, Inc.

Kaiser Permanente Group \$25/\$150 (20% Lab, Imaging, and Testing) Plan
Kaiser Permanente Group \$20/20%/\$300 Plan
KP HI Gold 300/20 – B