

Your Health Net Elect Open Access Plan

MAKE AN INFORMED CHOICE FOR YOUR FUTURE HEALTH CARE

Your employer is offering Health Net Elect Open Access (EOA) as a plan option this open enrollment.

Your benefits - you decide

Your Health Net EOA plan is flexible, yes. But that's just the beginning. When you need care, you choose which benefit option is right for you.

- **Through the HMO option**, your primary doctor will coordinate your routine and hospital care.
 - Plus, you'll get fixed-dollar amount copayments for most services.
- **Through the PPO option**, you have the freedom to see specialists in the PPO Network for exams and evaluations without referrals.
- No need to file claim forms (except for out-of-network emergency care).





WHEN IT'S TIME TO PICK A DOCTOR

Having the right doctor can be key to getting on a healthy path – and staying that way. When you enroll in your EOA plan, you'll pick a doctor. Here's what that process looks like:

- 1 Choose a participating physician group (PPG) from our network.
- 2 Then choose a primary care physician (PCP) from that group.

Each of your covered dependents can choose a different PCP and a different PPG to meet their needs.



Have questions or need help?

Call our Customer Contact Center at 1-800-522-0088, or use the number on your ID card.

For details about your plan,
please see the enclosed **Summary of Benefits** booklet.

(continued)

Health Net Life Insurance Company (Health Net) complies with applicable federal civil rights laws and do not discriminate, exclude people or treat them differently on the basis of race, color, national origin, ancestry, religion, marital status, gender, gender identity, sexual orientation, age, disability, or sex.

Health Net:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact Health Net's Customer Contact Center at 1-800-522-0088 (TTY: 711)

If you believe that Health Net has failed to provide these services or discriminated in another way, you can file a grievance by calling the number above and telling them you need help filing a grievance; Health Net's Customer Contact Center is available to help you. You can also file a grievance by mail, fax or online at:

Health Net Life Insurance Company Appeals & Grievances

PO Box 10348

Van Nuys, CA 91410-0348

Fax: 1-877-831-6019

Email: Member.Discrimination.Complaints@healthnet.com (Covered Persons) or Non-Member.Discrimination.Complaints@healthnet.com (Applicants)

You may submit a complaint by calling the California Department of Insurance at 1-800-927-4357 or online at https://www.insurance.ca.gov/O1-consumers/101-help/index.cfm. If you believe you have been discriminated against because of race, color, national origin, age, disability, or sex, you can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights (OCR), electronically through the OCR Complaint Portal, at https://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 (TDD: 1-800-537-7697).

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

English

No Cost Language Services. You can get an interpreter. You can get documents read to you and some sent to you in your language. For help, call us at the number listed on your ID card or call 1-866-392-6058 (TTY: 711)

Arabic

Armenian

Անվձար լեզվական ծառայություններ։ Դուք կարող եք բանավոր թարգմանիչ ստանալ։ Փաստաթղթերը կարող են կարդալ ձեզ համար։ Օգնության համար զանգահարեք մեզ ձեր ID քարտի վրա նշված հեռախոսահամարով կամ զանգահարեք 1-866-392-6058 (TTY: 711).

Chinese

免費語言服務。您可使用口譯員。您可請人使用您的語言將文件內容唸給您聽,並請我們將有您語言版本的部分文件寄給您。如需協助,請致電您會員卡上所列的電話號碼與我們聯絡,或致電1-866-392-6058 (TTY: 711)。

Hindi

बिना लागत की भाषा सेवाएँ। आप एक दुभाषिया प्राप्त कर सकते हैं। आपको दस्तावेज पढ़ कर सुनाए जा सकते हैं। मदद के लिए, आपके आईडी कार्ड पर दिए गए सूचीबद्ध नंबर पर हमें कॉल करें, या 1-866-392-6058 (TTY: 711)।

Hmong

Kev Pab Txhais Lus Dawb. Koj xav tau neeg txhais lus los tau. Koj xav tau neeg nyeem cov ntaub ntawv kom yog koj hom lus los tau. Xav tau kev pab, hu peb tau rau tus xov tooj ntawm koj daim npav los yog hu 1-866-392-6058 (TTY: 711).

Japanese

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Khmer

សេវាភាសាដោយឥតគិតថ្លៃ។ អ្នកអាចទទួលបានអ្នកបកប្រែផ្ទាល់មាត់។ អ្នកអាចស្ដាប់គេអានឯកសារឱ្យអ្នក។ សម្រាប់ជំនួយ សូម ទាក់ទងយើងខ្ញុំតាមរយៈលេខទូរសព្ទដែលមាននៅលើកាតសម្គាល់ខ្លួនរបស់អ្នក ឬ ទាក់ទងទៅមជ្ឈមណ្ឌលទំនាក់ទំនងពាណិជ្ជកម្ម នៃក្រុមហ៊ុន 1-866-392-6058 (TTY: 711).។

Korean

무료 언어 서비스. 통역 서비스를 받을 수 있습니다. 귀하가 구사하는 언어로 문서의 낭독 서비스를 받으실 수 있습니다. 도움이 필요하시면 보험 ID 카드에 수록된 번호로 전화하시거나 1-866-392-6058 (TTY: 711).

Navajo

Saad Bee Áká E'eyeed T'áá Jíík'e. Ata' halne'ígíí hóló. T'áá hó hazaad k'ehjí naaltsoos hach'į' wóltah. Shíká a'doowoł nínízingo naaltsoos bee néího'dólzinígíí bikáa'gi béésh bee hane'í bikáá' áajį' hodíílnih éí doodaii' 1-866-392-6058 (TTY: 711).

Persian (Farsi)

خدمات زبان به طور رایگان. می توانید یک مترجم شفاهی بگیرید. می توانید درخواست کنید که اسناد برای شما قرائت شوند. برای دریافت راهنمایی، با ما به شماره ای که روی کارت شناسایی شما درج شده تماس بگیرید یا با مرکز تماس بازرگانی (TTY: 711) 738-6058-1.

English

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Arabic

خدمات اللغة مجانية. يمكنك الحصول على مترجم فوري. ويمكنك الحصول على وثائق مقروءة لك. للحصول على المساعدة، اتصل بنا على الرقم الموجود على بطاقة الهوية، أو اتصل على مركز الاتصال التجاري (TTY: 711) 866-392-666-1

Armenian

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