Health Net of California, Inc. (Health Net)

Health Net's 2027 HSA-Compatible PPO Plans

YOUR HEALTH CARE, YOUR DOLLARS, YOUR DECISION

HealthNet.com

HSA-Compatible PPO Plans Put You in Control

Need a smart way to save for qualified medical expenses – on a tax-free basis? HSA-compatible PPO plans combine a Health Net HSA-eligible health plan with a Health Savings Account.

HSA-Compatible PPO Health Plans

PPO health plan options offer greater freedom to visit the doctor of your choice without a referral.[2] You get the benefit of in-network copayments when seeing a doctor in the Health Net-contracted network.

Features

- **No referrals** for most covered services.
- **Reduced out of pocket costs** when using our robust network of physicians, practitioners, health professionals, and hospitals.
- **A combined medical and pharmacy deductible.** You pay the full cost of your prescriptions and medical care (at our negotiated rates when using in-network pharmacies and providers) until your yearly deductible is met.
- Explanation of Benefits statements that explain exactly what you owe.

Save time online –
Plan benefit information, ID card ordering and more are available anytime you want them at www.healthnet.com.

Your Health Savings Account (HSA)

This easy-to-use program lets you contribute to your account, earn interest and pay for qualified medical expenses, while gaining tax advantages along the way. You can save for current and future medical expenses because the unused funds in your HSA roll over from year to year. Your HSA account stays with you even if you change jobs or retire.[4]

Features

- You can make **tax-deductible contributions** up to the IRS maximum, as well as tax-free withdrawals to pay for qualified medical and pharmacy expenses.[4]
- **Unused funds roll over year after year while earning interest tax-free**.[4]
- **You control how your health care dollars are spent.**
- **The HSA belongs to you;** you keep it even if you change jobs or retire.
- You can save for **future medical expenses**.

Footnotes found on the back of this brochure.

Step-by-Step Enrollment

Once Health Net sets up your company in our systems, we will send you a Health Net PPO Member ID card and a welcome letter.

1 Enroll in the Health Net HSA-compatible PPO health plan by completing your Health Net enrollment form.

You will also enroll in a financial institution (instructions will be provided to you by your employer or by your authorized Health Net agent/producer).

2 Decide how much you'd like to contribute to your HSA.

For 2027, the maximum contribution is $4,500 for individuals and $9,000 for families. Some key questions to consider:

How much is my deductible?

What are the HSA annual contribution limits?

How often does my family visit the doctor?

Refer to *"Is an HSA-Compatible PPO Plan Right for Me?"* as well as the HSA questions and answers section of this brochure for help. HSA contributions may be made in a one time, lump sum amount, or they may be made through pre-tax payroll deductions if offered by your employer.

Is an HSA-Compatible PPO Plan Right for Me?

The following examples assume that plan deductibles have not been met. Medical and pharmacy expenses are rough estimates for illustrative purposes only.

CASE STUDY #1 – The Lee family of four

The Lee family had a few medical situations the previous year. Even though their medical expenses were around $1,500 last year, they decided to increase their HSA contribution to $2,000 for the coming year. With a growing family, the increase gives the Lees peace of mind against unplanned medical expenses. The Lees will also pay their appropriate monthly plan premium and applicable deductible.

Covered service	**Cost**	**Deductible**	**Health Net pays**	**Employee pays (using HSA account)**
Four preventive care visits[1]	**$720**	Deductible is waived for preventive care[1]	**$720**	**$0**
Two unexpected office visits	**$225**	Must first meet deductible	**$0**	**$225**
Three drug prescriptions	**$150**	Must first meet deductible	**$0**	**$150**
One outpatient surgery	**$500**	Must first meet deductible	**$0**	**$500**
Three physical therapy visits	**$360**	Must first meet deductible	**$0**	**$360**
			Total medical expenses	**$1,235**
			Balance left in HSA account ($2,000 HSA – $1,235 expenses)	**$765**

Tax savings:[7] $660 (based on the Lees' 33% tax bracket, their tax savings is $660 for an effective contribution cost of only $1,340)

CASE STUDY #2 – Chelsea

During the previous year, Chelsea had routine preventive services and also experienced several mild illnesses. So based on her medical expenses from a year earlier, she chose to contribute a total of $400 to her HSA for the coming year. In addition, she will also pay her appropriate monthly plan premium and applicable deductible.

Covered service	Cost	Deductible	Health Net pays	Employee pays (using HSA account)
One preventive care visit[1] (covered at 100%)	**$180**	Deductible is waived for preventive care[1]	**$180**	**$0**
Routine OB/GYN visit[1] (covered at 100%)	**$200**	Deductible is waived for preventive care[1]	**$200**	**$0**
Two unexpected office visits	**$225**	Must first meet deductible	**$0**	**$225**
Two drug prescriptions	**$100**	Must first meet deductible	**$0**	**$100**
			Total medical expenses	**$325**
			Balance left in HSA account ($400 HSA – $325 expenses)	**$75**

Tax savings:[7] $100 (based on Chelsea's 25% tax bracket, her tax savings is $100 for an effective contribution cost of only $300)

Footnotes found on the back of this brochure.

Benefit from a Health Savings Account (HSA) by saving money into a tax-advantaged account for current and future qualifying medical expenses.

Questions and Answers

The HSA

What is a Health Savings Account (HSA)?

A Health Savings Account (HSA) is a tax-advantaged savings account (under IRS Code Section 223) that you may establish and put money into on a tax-advantaged basis to save for current and future qualifying medical expenses. The HSA is designed to work together with an HSA-eligible health plan – Use the funds in the HSA to pay for qualified medical expenses such as doctor visits, prescriptions and even some over-the-counter medications. The HSA is often referred to as a "medical 401(k)" because the account is owned by you (it is not a group plan), and it earns tax-free interest,[8] rolls over from year to year, and stays with you whether you change jobs, health plans or even in retirement.

Who is eligible for an HSA?

You can contribute to an HSA only if enrolled in a qualified high-deductible health plan (HDHP). Also, you must not be enrolled in Medicare, claimed as a dependent on another's tax return or enrolled in another health plan that is not a qualified HDHP.[9]

What are the advantages of an HSA?

- The HSA belongs to you. You keep it even if you change jobs or retire.
- HSA funds can be invested, and earnings are tax-free.[8] Contributions to your HSA are tax-free.[8]
- Withdrawals for qualified medical expenses are tax-free.[8] There is no time limit for withdrawing or using funds as long as the funds are withdrawn for medical expenses that were incurred in the same tax year.

What kinds of expenses can be paid with a Health Savings Account?

Only those expenses described as qualified medical expenses in IRS Code Section 223 can be paid with funds from an HSA. Generally, these include, but are not limited to, the following:[10]

- standard medical services such as office visits and annual medical physicals;
- insulin, health care products and prescription medicine;
- preventive and restorative dental care, as well as orthodontia for children and adults;
- eyeglasses, contact lenses and solutions, and laser eye surgery;
- copayments, coinsurance and deductibles; and
- acupuncture and chiropractic services.

A comprehensive list of qualified medical expenses as defined by the IRS can be found at www.irs.gov/pub/irs-pdf/p502.pdf. (Please note that some of the expenses listed in publication 502 cannot be reimbursed from an HSA. You should check with a qualified tax or legal advisor for more information.)

Note: If a withdrawal is made from an HSA to pay for items other than qualified medical expenses, the IRS may impose a 20% excise tax. Certain exclusions apply. You should consult with your personal tax advisor.

How much can be contributed to an HSA?

For 2027, the maximum annual contribution for single coverage is $4,500 and $9,000 if you have family coverage.

If you are or will be age 55 or older before the end of 2026, you may also contribute an additional $1,000. Each year, contribution amounts may be subject to annual cost-of-living adjustments.

The HSA-compatible health plan

What is an HSA-compatible health plan?

This is a plan that meets federal requirements for qualifying an individual to establish a tax-advantaged HSA. Among other things, for 2027 the plan must have a combined medical and pharmacy deductible of at least $1,750 (self-only) and $3,500 (family).

What are the advantages of Health Net HSA-compatible PPO plans?

- You have the freedom to visit any licensed health care provider and be eligible for plan coverage – no referrals required.[11]
- You get reduced out of pocket costs when using our robust network of physicians, practitioners, health professionals, and hospitals.
- Preventive care is covered right away and is not subject to the yearly plan deductible.

How does the combined medical and pharmacy deductible work?

Unlike most plans, the deductible in an HSA-compatible PPO plan applies to the pharmacy benefit, as well as the medical benefit.

- **Self-only coverage:** You pay the full cost (at Health Net's negotiated rates) for all prescriptions and covered medical expenses until your deductible is met.
- **Family plan coverage (two or more members enrolled on your health plan):** Each individual enrolled in the plan pays the full cost (at Health Net's negotiated rate) for all prescriptions and covered medical expenses until the individual deductible is met. The family deductible is satisfied when two or more individuals in the family collectively satisfy the deductible amount.

Footnotes found on the back of this brochure.

Extras that Count

Every HSA-compatible PPO plan comes complete with valuable extras, including:

Health & Wellness

All of our plans come with wellness programs that can help you to make healthy lifestyle choices for you and your family. As a member, you have access to:

- RealAge® Program – This program targets the 4 highest lifestyle risks – stress, sleep, nutrition and activity.
- Health Coaching Programs Work one on one with a Health Coach to find what motivates you and address the specific health behaviors. A self paced model is also available. This includes multiple lessons related to stress, tobacco use, exercise, weight, and gaps in care.
- Craving to Quit® – This tobacco cessation program covers most types of tobacco, lets you talk with a quit coach for support, and offers a personalized plan to quit.
- Eat right now® – This is a 28-day program with the goal of helping you to rewire your brain so you can develop new eating habits. This could lead to weight loss and help you to maintain your ideal weight, with less stress and effort.

To access these programs and more, log in to **www.healthnet.com.**

Doula program

Our Doula program provides care that supports birthing people from diverse backgrounds and cultures. A Doula is a birth worker who supports members during pregnancy, birth and postpartum (the time after birth). Doulas help members in person or online. They offer support for a more positive time during pregnancy and postpartum. Doulas offer help with the aim of improving health outcomes for birthing parents and their babies.

Nurse Advice Line

Health Net members also have the option to reach out to a registered nurse – 24 hours a day – and get instant support. They can connect via phone to ask questions in real time. They get answers to questions about:

- Cold and flu symptoms
- Minor illness and injury
- Minor burns
- Bug bites and stings
- Chronic pain
- Medical tests and medications

Teladoc Health – Telehealth services

Teladoc Health offers an easy option for telehealth care when your regular doctor isn't available. Use your smartphone or computer to consult with a U.S. board-certified doctor, 24/7. What could be easier? How about a $0 copayment!

A Teladoc provider can diagnose and treat cold and flu symptoms, allergies, upper respiratory infections, and skin problems, as well as send prescriptions to your local pharmacy, in some cases[6].

You can book appointments through the Teladoc app, website or call 1-800-TELADOC (835-2362).[9]

To register or for more information, visit **teladoc.com.**

Footnotes found on the back of this brochure.

Do More with Our Online Tools

*As a Health Net member, you have access to many tools and resources to help you manage your health plan and improve your health – all at your fingertips! Once enrolled, you can register at **www.healthnet.com**.*

Find what you need, right at your fingertips:

- **Access** your digital Member ID Card
- **View** your health plan benefits and stay informed
- **Find care** – locate urgent care centers, hospitals or doctors
- **Find** LGBTQ+ resources and support
- **Get your benefit and copayment details.** Plus, review your *Evidence of Coverage* (EOC)
- **Get important updates** about your coverage andbenefits
- **Change** your Primary Care Physician (HMO members)

Get the information you need quickly and easily at **HealthNet.com**. Its mobile-friendly design is easy to use on-the-go.

Find a Provider

You may find yourself looking for a new doctor. Or you may need a specialist or local hospital. With *Find a Provider*, you'll get the most up-to-date listings of our provider network. These include doctors, hospitals, urgent care centers, and other types of health care providers.

Go to **healthnet.com** and click on *Find a Provider* on the top menu bar. Then follow the easy search steps.

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 800-676-6976 (TTY: 711).

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) 800-676-6976

Armenian
Անվճար 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 800-676-6976 (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 800-676-6976 (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 800-676-6976 (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 800-676-6976 (TTY: 711).

Japanese
無料の言語サービス。通訳をご利用いただけます。文書をお読みします。援助が必要な場合は、IDカードに記載されている番号までお電話いただくか、800-676-6976 、(TTY: 711)。

Khmer
សេវាភាសាដោយឥតគិតថ្លៃ។ អ្នកអាចទទួលបានអ្នកបកប្រែផ្ទាល់មាត់។ អ្នកអាចស្ដាប់គេអានឯកសារឱ្យអ្នក។ សម្រាប់ជំនួយ សូមទាក់ទងយើងខ្ញុំតាមរយៈលេខទូរសព្ទដែលមាននៅលើកាតសម្គាល់ខ្លួនរបស់អ្នក ឬ ទាក់ទងទៅមជ្ឈមណ្ឌលទំនាក់ទំនងពាណិជ្ជកម្មនៃក្រុមហ៊ុន 800-676-6976 (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 800-676-6976 (TTY: 711).

Navajo
Saad Bee Áká E’eyeed T’áá Jíík’e. Ata’ halne’ígíí hóló̜. 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’ 800-676-6976 (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) 800-676-6976 .

Panjabi (Punjabi)
ਬਨਿਾਂ ਕਸਿੇ ਲਾਗਤ ਤੋਂ ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ। ਤੁਸੀਂ ਇੱਕ ਦੁਭਾਸ਼ਆਿ ਪ੍ਰਾਪਤ ਕਰ ਸਕਦੇ ਹੋ। ਤੁਹਾਨੂੰ ਦਸਤਾਵੇਜ਼ ਤੁਹਾਡੀ ਭਾਸ਼ਾ ਵੱਚਿ ਪੜ੍ਹ ਕੇ ਸੁਣਾਏ ਜਾ ਸਕਦੇ ਹਨ। ਮਦਦ ਲਈ, ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ ਤੇ ਦੱਤਿੇ ਨੰਬਰ ਤੇ ਸਾਨੂੰ ਕਾਲ ਕਰੋ ਜਾਂ ਕਰਿਪਾ ਕਰਕੇ 800-676-6976 (TTY: 711).

Russian
Бесплатная помощь переводчиков. Вы можете получить помощь устного переводчика. Вам могут прочитать документы. За помощью обращайтесь к нам по телефону, приведенному на вашей идентификационной карточке участника плана. Кроме того, вы можете позвонить в 800-676-6976 (TTY: 711).

Spanish
Servicios de idiomas sin costo. Puede solicitar un intérprete. Puede obtener el servicio de lectura de documentos y recibir algunos en su idioma. Para obtener ayuda, llámenos al número que figura en su tarjeta de identificación o comuníquese con el 800-676-6976 (TTY: 711).

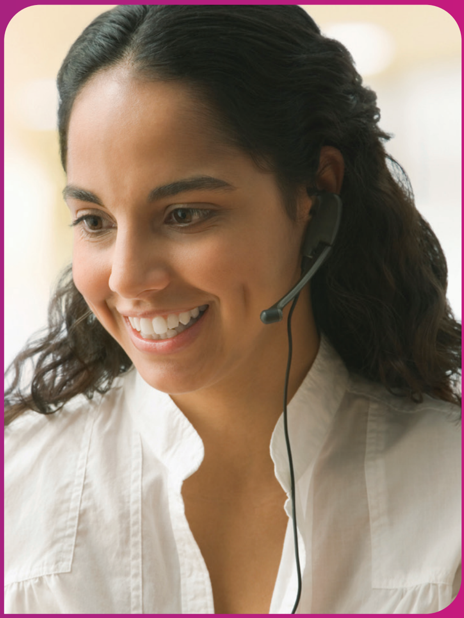
Tagalog
Walang Bayad na Mga Serbisyo sa Wika. Makakakuha kayo ng isang interpreter. Makakakuha kayo ng mga dokumento na babasahin sa inyo. Para sa tulong, tawagan kami sa nakalistang numero sa inyong ID card o tawagan ang 800-676-6976 (TTY: 711).

Thai
ไม่มีค่าบริการด้านภาษา คุณสามารถใช้ล่ามได้ คุณสามารถให้อ่านเอกสารให้ฟังได้ สำหรับความช่วยเหลือ โทรหาเราตามหมายเลขที่ให้ไว้บนบัตรประจำตัวของคุณ หรือ โทรหาศูนย์ติดต่อเชิงพาณิชย์ของ 800-676-6976 (TTY: 711)

Vietnamese
Các Dịch Vụ Ngôn Ngữ Miễn Phí. Quý vị có thể có một phiên dịch viên. Quý vị có thể yêu cầu được đọc cho nghe tài liệu. Để nhận trợ giúp, hãy gọi cho chúng tôi theo số được liệt kê trên thẻ ID của quý vị hoặc gọi 800-676-6976 (TTY: 711).

Flexibility and Choice Meet Tax-Saving Opportunities!

THAT'S HEALTH NET'S HSA-COMPATIBLE PPO PLAN – SIMPLY MAKING HEALTH CARE WORK FOR YOU.



Questions? We're here with answers.

For questions about your health plan, call Health Net Member Services at:

800-676-6976

Scan the code below to Register/Log in and access Wellness programs, and many other tools.

SCAN ME

[1] Applies to nongrandfathered (NG) plans effective September 23, 2010, or later. $0 member cost-share applies to preventive care visits and preventive OB/GYN visits with in-network providers only.

[2] You may need to precertify certain types of hospital- and other facility-based care to be eligible for coverage. This overview provides benefit information highlights only. Your plan contract, which you will receive after you enroll, contains the exact terms and conditions of your Health Net coverage.

[3] This is federal tax information. State taxes may apply. Tax information is for general purposes only. For more detailed information about the tax implications of an HSA, please contact a professional tax advisor. Qualified medical expenses also include services such as vision, dental and prescription drugs. A list of qualified medical expenses can be found in IRS Publication 502 – Medical and Dental Expenses, which you can find at www.irs.gov. Simply enter "502" in the Search field.

[4] If you do not have online access, please contact your employer.

[5] Case study and tax savings examples are for illustrative purposes only. For more detailed information about the tax implications of an HSA, please contact a professional tax advisor.

[6] Exceptions include EAP plans, disease management programs, wellness programs, and "limited purpose" HRAs and FSAs, as well as AD&D, disability, vision, dental, long-term care, workers' compensation, or limited coverages, such as those for a specific disease or illness that pay fixed amounts per day of hospitalization.

[7] Qualified medical expenses generally do not include premiums paid for health coverage except for COBRA insurance, qualified long-term care insurance, health insurance for individuals receiving unemployment compensation, Medicare, and retiree health insurance. Medicare Supplement premiums are not qualified medical expenses.

[8] Out-of-network services result in lower benefits. You may need to precertify certain types of hospital- and other facility-based care to be eligible for coverage. This overview provides benefit information highlights only. Your plan contract, which you will receive after you enroll, contains the exact terms and conditions of your Health Net coverage.

[9] Access to telehealth services does not guarantee that a prescription will be written. You may receive services on an in-person basis or via telehealth, if available, from your primary care provider, a treating specialist or from another contracting individual healthprofessional, contracting clinic, or contracting health facility consistent with the service and existing timeliness and geographic access standards required under California law. Any cost share for services received through Teladoc Health (Teladoc) will accrue toward your out-of-pocket maximum and deductible (if your plan has a deductible). By scheduling through Teladoc, you consent to receive services via telehealth through Teladoc. See your health plan coverage document for coverage information and for the definition of telehealth services. You have a right to access your medical records for services received through Teladoc. Unless you choose otherwise, any services provided through Teladoc shall be shared with your primary care provider.

BKT066456EP00 (1/27)