Health Net ExcelCare Network

An innovative, tailored network brought to you by Health Net



A guide for brokers



Health Net and Banner Health Network – trusted experts working together

At Health Net of Arizona, Inc., our commitment to sustainable network and benefit solutions is stronger than ever. As a result, we're pleased to offer our Health Net ExcelCare Network.

Supported by an array of comprehensive medical experts and wellness resources throughout the Banner Health Network, Health Net ExcelCare Network offers affordability and flexibility. This valuable network is available with our **reliable HMO plans or our flexible, tax-saving HMO HSA-compatible plans**. When combined with Health Net ExcelCare Network, these plans give your clients the most value for their money.

A network built to serve the marketplace

A cost-effective tailored network, Health Net ExcelCare Network is a subset of our full HMO network available in all of Maricopa County and parts of Pinal County. To create this tailored network, we worked with Banner Health – not only one of Arizona's largest health care providers, but recognized nationally for clinical leadership and innovation. This dedication to excellent patient care has been extended into the Banner Health Network. The result is a quality, local network that:

- provides significant cost-saving advantages over our full HMO network,
- gives employees access to trusted health care resources, and
- is available to employer groups of all sizes.

Our Health Net ExcelCare Network offers:

- Quality and cost advantages A smart value, this tailored network gives employers local experts and sustainable cost-savings over our full HMO network with like benefits.
- Plan selection Our HMO and HMO HSA-compatible benefit plans are the perfect pairings to our Health Net ExcelCare Network! Competitively priced, this collection gives employers the choices that make it easy to find the right cost and coverage combination.
- More coverage options It's easy to mix and match with Health Net ExcelCare Network. You have the option to pair one of our full network HMO or PPO plans alongside Health Net ExcelCare Network, giving you more ways to sell.
- High-caliber network Recognized for its clinical excellence and innovation, Banner Health is a well-respected health care system and is distinguished by the quality of people who serve our community.
- Provider choice Available in all of Maricopa County, and Pinal County excluding ZIP codes 85292, 85618, 85623, 85631, 85658, and 85739, Health Net ExcelCare Network is made up of health care providers in the Banner Health Network: 650 primary care physicians and more than 2,000 specialists. This network offering is available to employees if they live or work in the service areas stated above.

Health Net and Banner Health Network – delivering expertise and innovation

When it comes to choosing health care coverage, Health Net and Banner Health Network work together to provide expert solutions for your clients and their employees.



Health Net and Banner Health Network: in pursuit of quality care and sustainable cost-savings.

- **Banner Health Network** has the experience, accomplishment and community insight to make a difference in people's lives through excellent patient care and innovation.
 - Banner Health has been ranked one of the top five health systems in the nation.¹
- With over 30 years serving Arizonans, Health Net leverages our longstanding presence to generate ideas – like Health Net ExcelCare Network – that respond to local needs. We work collaboratively with our business partners to provide innovative solutions that meet the needs of our customers.

For eight years in a row, Health Net of Arizona has been ranked #1 HMO in the state.

Source – Ranking Arizona Magazine: The Best of Arizona Business 2011

For the past five consecutive years, the National Committee for Quality Assurance (NCQA) has ranked Health Net of Arizona **the #1 commercial HMO plan in the state** in its annual Health Insurance Plan Rankings.

The value of our HMO benefit plans

With so many plan options, your client might ask, "Why an HMO?" Beyond predictable costs and comprehensive benefits, our HMOs leverage the trusted relationship between doctor and patient, which is key to maximizing and improving health. And the healthier any group of people is, the lower the costs.

Health Net ExcelCare Network promotes the health care experience by facilitating the doctor-patient relationship and giving people resources for lasting engagement in their health – ultimately encouraging workforce productivity. Our HMO plans offer:

- A wide range of covered services.
- No claim form filing (except for out-ofnetwork emergency care).
- No waiting period for pre-existing conditions.
- Emergency services are covered worldwide.
- The ability to choose a separate PCP for each family member.

Our HMO HSA-compatible benefit plans

Make it easy to give your clients budgetfriendly solutions with real tax-savings. With an HMO HSA-compatible plan, your clients' employees have:

- More control over their health care dollars.
- Preventive care covered right away, not subject to yearly plan deductible.
- A health savings account that makes it possible to:
 - Contribute to their account, earn interest and pay for qualified medical expenses.
 - Retain unused funds they roll over from year to year while earning interest tax-free.
 - Feel confident the HSA savings account stays with them even if they change jobs or retire.

But we don't stop there!

We offer a tangible incentive to Health Net ExcelCare Network members! Employees receive a \$50 gift card simply by completing their Health Risk Questionnaire (HRQ) at **www.healthnet.com** and sharing it with their doctor. It's one more way we help promote the important doctor-patient relationship. It's a small step with big rewards.



Health Net ExcelCare Network

HMO and HMO HSA-compatible plan portfolio

HMO plans

Benefit description	HMO EC8 ExcelCare \$15 / \$30 / \$250	HMO EC7 ExcelCare \$25 / \$50 / \$500	HMO EC5 ExcelCare \$35 / \$70 / \$750
Deductible per calendar year	None	None	None
Coinsurance	Subject to applicable coinsurance amounts, as stated herein	Subject to applicable coinsurance amounts, as stated herein	Subject to applicable coinsurance amounts, as stated herein
Copayment maximum	Limited to stated copays. \$2,000 single / \$4,000 family per calendar year. Excluding copay for pharmacy benefits and office visits.	Limited to stated copays. \$2,500 single / \$5,000 family per calendar year. Excluding copay for pharmacy benefits and office visits.	Limited to stated copays. \$3,000 single / \$6,000 family per calendar year. Excluding copay for pharmacy benefits and office visits.
Out-of-pocket maximum	N/A	N/A	N/A
Maximum benefits	Unlimited	Unlimited	Unlimited
Primary care physician (PCP) office visit	\$15 copay/visit	\$25 copay/visit	\$35 copay/visit
Specialist physician office visit	\$30 copay/visit	\$50 copay/visit	\$70 copay/visit
OB/GYN office visit	\$15 copay/visit	\$25 copay/visit	\$35 copay/visit
Preventive care – preventive office visits, preventive lab and X-ray, Pap smear and mammogram, prostate screening, immunizations, colorectal cancer screening (including, but not limited to colonoscopy), women's preventive services ¹ , and vision and hearing screenings	\$0 copay PCP, \$0 copay specialist	\$0 copay PCP, \$0 copay specialist	\$0 copay PCP, \$0 copay specialist
Emergency care	\$250 copay/visit	\$250 copay/visit	\$250 copay/visit
Urgent care	\$50 copay/visit	\$50 copay/visit	\$50 copay/visit
Inpatient hospital	\$250 copay/day, up to 3 day(s)	\$500 copay/day, up to 3 day(s)	\$750 copay/day, up to 3 day(s)
Outpatient hospital and surgical	\$150 copay/visit	\$250 copay/visit	\$500 copay/visit
Chiropractic (max. 12 visits per calendar year)	\$30 copay/visit	\$50 copay/visit	\$70 copay/visit
Lab and X-ray services At physician's office or independent, nonhospital-affiliated facility ²	No charge	No charge	No charge
At hospital	No charge	No charge	No charge
Imaging and testing services (including but not limited to MRIs, MRAs and PET/SPECT scans) At physician's office or independent, nonhospital-affiliated facility ²	\$50 copay/visit	\$50 copay/visit	\$50 copay/visit
At hospital	\$250 copay/visit	\$250 copay/visit	\$250 copay/visit
Mammography	No charge	No charge	No charge
Pharmacy	Varying plan options available	Varying plan options available	Varying plan options available

¹As of 8/1/2012, preventive care services for women also include: female contraceptive services, devices and supplies, female family planning, female preventive sterilizations, screening for gestational diabetes, domestic violence and HIV, breastfeeding devices and supplies, applicable female counseling for sexually transmitted infections, HIV, domestic violence, contraceptives and breastfeeding support.

²Some facilities are affiliated with a hospital. Members will be charged a higher copay for services at a hospital-affiliated facility.

These are brief summaries only. For benefit details, refer to the Schedules of Benefits or Evidences of Coverage. See the back of this brochure for important disclosures, exclusions and limitations.

Health Net ExcelCare Network makes it easy to give your clients a variety of benefit plan options that fit the needs of their employees.

HMO EC3 ExcelCare \$45 / \$90 / \$1,000	HMO EC6 ExcelCare \$15 / \$30 / \$0 / 15%	HMO EC4 ExcelCare \$25 / \$50 / \$0 / 25%	HMO EC2 ExcelCare \$15 / \$30 / \$2,500 / 0%	HMO EC1 ExcelCare \$15 / \$30 / \$5,000 / 0%
None	None	None	\$2,500 single / \$5,000 family	\$5,000 single / \$10,000 family
Subject to applicable coinsurance amounts, as stated herein	Subject to applicable coinsurance amounts, as stated herein	Subject to applicable coinsurance amounts, as stated herein	Subject to applicable coinsurance amounts, as stated herein	Subject to applicable coinsurance amounts, as stated herein
Limited to stated copays. \$3,500 single / \$7,000 family per calendar year. Excluding copay for pharmacy benefits and office visits.	N/A	N/A	N/A	N/A
N/A	\$2,500 single / \$5,000 family coinsurance only (excludes deductible)	\$3,000 single / \$6,000 family coinsurance only (excludes deductible)	None	None
Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
\$45 copay/visit	\$15 copay/visit	\$25 copay/visit	\$15 copay/visit	\$15 copay/visit
\$90 copay/visit	\$30 copay/visit	\$50 copay/visit	\$30 copay/visit	\$30 copay/visit
\$45 copay/visit	\$15 copay/visit	\$25 copay/visit	\$15 copay/visit	\$15 copay/visit
\$0 copay PCP, \$0 copay specialist	\$0 copay PCP, \$0 copay specialist	\$0 copay PCP, \$0 copay specialist	\$0 copay PCP, \$0 copay specialist	\$0 copay PCP, \$0 copay specialist
\$250 copay/visit	\$250 copay/visit	\$250 copay/visit	\$250 copay/visit	\$250 copay/visit
\$50 copay/visit	\$50 copay/visit	\$50 copay/visit	\$50 copay/visit	\$50 copay/visit
\$1,000 copay/day, up to 3 day(s)	15%	25%	No charge, subject to deductible	No charge, subject to deductible
\$500 copay/visit	15%	25%	No charge, subject to deductible	No charge, subject to deductible
\$90 copay/visit	\$30 copay/visit	\$50 copay/visit	\$30 copay/visit	\$30 copay/visit
No charge	No charge	No charge	No charge	No charge
No charge	No charge	No charge	No charge, subject to deductible	No charge, subject to deductible
\$50 copay/visit	\$50 copay/visit	\$50 copay/visit	No charge, subject to deductible	No charge, subject to deductible
\$250 copay/visit	\$250 copay/visit	\$250 copay/visit	No charge, subject to deductible	No charge, subject to deductible
No charge	No charge	No charge	No charge	No charge
Varying plan options available	Varying plan options available	Varying plan options available	Varying plan options available	Varying plan options available

HMO HSA-compatible plans

Benefit description	Member responsibility		
	HMO EC9 ED	HMO EC10 ED	HMO EC11 ED
	20% / 20% / \$5,000	20% / 20% / \$2,500	0% / 0% / \$3,000
eductible			
er calendar year	\$5,000 single / \$10,000 family	\$2,500 single / \$5,000 family	\$3,000 single / \$6,000 family
Coinsurance	Subject to applicable coinsurance amounts, as stated herein	Subject to applicable coinsurance amounts, as stated herein	0%
Out-of-pocket maximum ncluding deductible	\$6,000 single / \$12,000 family	\$5,000 single / \$10,000 family	\$6,050 single / \$12,100 family
Aaximum benefits	Unlimited	Unlimited	Unlimited
rimary care physician office visit	20%, subject to deductible	20%, subject to deductible	No charge, after deductible
pecialist physician office visit	20%, subject to deductible	20%, subject to deductible	No charge, after deductible
DB/GYN office visit	20%, subject to deductible	20%, subject to deductible	No charge, after deductible
Preventive care – preventive office visits, preventive lab and X-ray, Pap smear and mammogram, prostate screening, immunizations, colorectal cancer screening (including, but not limited to colonoscopy), women's preventive services ¹ , and vision and hearing screenings	\$0 copay PCP; \$0 copay specialist	\$0 copay PCP; \$0 copay specialist	\$0 copay PCP; \$0 copay specialist
mergency room	20%, subject to deductible	20%, subject to deductible	No charge, after deductible
Jrgent care	20%, subject to deductible	20%, subject to deductible	No charge, after deductible
npatient hospital	20%, subject to deductible	20%, subject to deductible	No charge, after deductible
Dutpatient hospital and surgical	20%, subject to deductible	20%, subject to deductible	No charge, after deductible
Chiropractic max. 12 visits per calendar year)	20%, subject to deductible Max 12 visits/calendar year	20%, subject to deductible Max 12 visits/calendar year	No charge, after deductible Max 12 visits/calendar year
.ab and X-ray services At physician's office or independent, 10nhospital-affiliated facility ²	20%, subject to deductible	20%, subject to deductible	No charge, after deductible
At hospital	20%, subject to deductible	20%, subject to deductible	No charge, after deductible
maging and testing services including but not limited to MRIs, MRAs and PET/SPECT scans)			
At physician's office or independent, nonhospital-affiliated facility ²	20%, subject to deductible	20%, subject to deductible	No charge, after deductible
At hospital	20%, subject to deductible	20%, subject to deductible	No charge, after deductible
Mammography	No charge	No charge	No charge
Pharmacy	Varying plan options available	Varying plan options available	Varying plan options available

²Some facilities are affiliated with a hospital. Members are charged a higher copay for services at a hospital-affiliated facility. Members can contact the place of service for more information or the Customer Contact Center at the number on the back of their ID card.

¹As of 8/1/2012, preventive care services for women also include: female contraceptive services, devices and supplies, female family planning, female preventive sterilizations, screening for gestational diabetes, domestic violence and HIV, breastfeeding devices and supplies, applicable female counseling for sexually transmitted infections, HIV, domestic violence, contraceptives and breastfeeding support.

Helping You Make the Sale

Health Net of Arizona champions innovative solutions for the health of Arizona businesses – it's a decades-old tradition. As your partner in this community and in the health care industry, Health Net is dedicated to helping you meet your business goals. We continue to ensure you have a wide portfolio of product options, because when you have a lot to offer, you make the sale.



Russell C. Whitney, Health Net We create solutions that work for your business.



Call us today!

Call your Health Net sales representative today for more information about our Health Net ExcelCare Network. Or visit us at **www.healthnet.com**.

Prior authorization is the standard industry process of receiving approval for certain procedures and medical services within an HMO plan. The member's PCP or specialist obtains this on his or her behalf. Locally staffed medical professionals answer calls to the Health Net prior authorization unit 24/7, 365 days a year.

Emergency services means health care services that are provided to a member in a licensed medical facility by a provider after the recent onset of a medical condition that manifests itself by symptoms of sufficient severity that the absence of immediate medical attention could reasonably be expected to result in any of the following: serious jeopardy to the patient's health, serious impairment to bodily functions, serious dysfunction of any bodily organ or part.

Not all physicians and hospitals who contract with Health Net are Health Net ExcelCare Network providers. With the exception of emergency services or urgent care attained outside of the service area, only those physicians and hospitals specifically identified as participating in the Health Net ExcelCare Network may provide services under these plans. The Health Net ExcelCare Network service area and a list of its physicians and hospital providers are shown in the Health Net ExcelCare Provider Directory. The Health Net ExcelCare Network physicians and hospitals are listed online at our website, www.healthnet.com (as of 1/1/2012). The Provider Directory can also be requested by calling Health Net Member Services at 1-800-289-2818.

Exclusions and limitations:

The following services and/or procedures are either limited in coverage or excluded from coverage under these health plans: convenience items, cosmetic surgery, court-ordered care, custodial care, employment counseling, exercise programs, experimental/investigational procedures and medications, foot orthotics, fraudulent services, gender alterations, household equipment/fixtures, infertility, long-term rehabilitative services, lost wages, missed appointments, obesity, paternity testing, radial keratotomy, routine foot care, self-inflicted injuries, temporomandibular joint disorder, thermography, and vocational programs.