



Individual & Family Plans
Effective January 1, 2018

Meet EnhancedCare PPO

Choose how and where you get health care.

EnhancedCare PPO gives you the freedom of choice of a full-network PPO for less. By using a slice of our full PPO provider network, we work to keep quality high and premiums lower. Plus, EnhancedCare PPO offers more ways to get health care!



Health Net®

Your path to health care with EnhancedCare PPO is more in your control. You choose a primary care physician (PCP) from the EnhancedCare PPO network so you have a doctor who knows you. It's your choice whether to see your PCP, or to choose from a range of in-person, over-the-phone, and virtual health care options available 24/7. And when you choose from many in-network options, you pay less than if you choose an out-of-network option. Give us a call at 1-844-463-8188 or visit us online at www.myhealthnetca.com.

Choices for where and how you get health care care with EnhancedCare PPO



See your PCP – the main doctor you choose from the EnhancedCare PPO network.



Go directly to any doctor or specialist in the EnhancedCare PPO network for health care. You don't have to see your PCP first or get referrals.

The network includes all the specialists you may need for your health care – from cardiologists to dermatologists.



Access Teladoc telehealth services by phone, mobile app or web for a \$0 copayment. Teladoc providers may be used when your physician's office is closed or you need quick access to health care services.

Teladoc providers can treat many non-emergency common illnesses such as sinus problems, upper respiratory infections, allergies, bronchitis, and pinkeye.



Speak to a registered nurse by phone 24/7 for advice on handling urgent health concerns, and caring for minor injuries and illness, like fevers and the flu.



Visit a walk-in clinic, like a CVS MinuteClinic, where you can get health care care for common illnesses, wellness screenings, vaccinations, and more.



Use urgent care when you need treatment right away for things like minor sprains, earaches, colds, or back pain.

Go immediately to the nearest emergency room or call 911 in the event of an emergency.



Call your Health Benefit Navigator team. They're here to help you make the most of your benefits, help you decide when to go where for health care, and help solve other health coverage issues for you.

Let Health Net be your guide!

We can tell you
more about
EnhancedCare PPO
and help you find
the coverage that
fits your health, your
budget and your life.

Spotlight on Health Benefit Navigator: your personal management team when you need us



EnhancedCare PPO comes with extra support for you via our Health Benefit Navigator team. We'll help you get the most from your benefits and make decisions about when to go where for health care. And if there's a problem, we'll help solve it for you.

Among the extras you can count on from the Health Benefit Navigator team are:

- Support from a highly-trained team of customer service associates based right here in the United States.
- Welcome calls to get you acquainted with EnhancedCare PPO.
- Follow-up after you see your doctor for the first time to make sure it's a good fit, and to help you make a change if it's not.
- 360-degree view of all your plan details and contact history, so you don't spend time repeating information you told us previously.
- Outreach the way you want it — phone, email, chat, mobile, or text.
- Local knowledge to connect you to urgent care centers, doctors and other sources.

Plus, more for your health

- **Go to any pharmacy in the Advanced Choice Pharmacy Network** for prescription medicine. It includes many pharmacies like CVS, Safeway, Costco, and Vons.
- **Give your emotional health some TLC.** Take care of your whole self with **myStrength**, a Health Net program devoted to helping you manage anxiety, stress and depression.
- **Reach your health goals** with support and encouragement from a health coach if you're hoping to:
 - Maintain a healthy weight and body mass index (BMI).
 - Quit smoking.
 - Increase your physical activity.
 - Make healthier food and nutrition choices.
 - Learn to manage stress.

Choose your goal, and a health coach will work with you **up to six months** by phone to help you succeed!

Health Benefit

Navigator team

1-844-463-8188

(TTY: 711)

Give us a call!

We're here Monday

through Friday from

8:00 a.m. to 6:00 p.m.,

except on federal

holidays.

Is EnhancedCare PPO right for you?

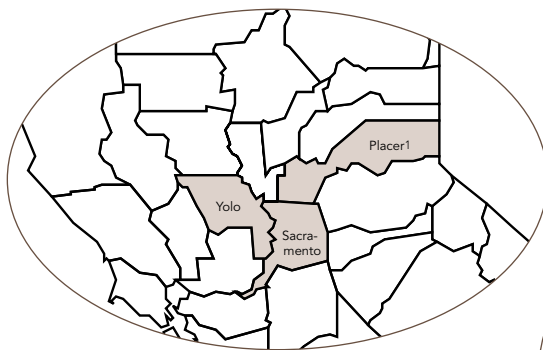
See how it compares to other plan types.

Check the EnhancedCare PPO network before you enroll to make sure the doctors and other providers you need are included. That way, you'll be able to stay in-network and enjoy lower out-of-pocket costs each time you use a service.

	EnhancedCare PPO	PPO	CommunityCare HMO
You choose a PCP	Yes	No	Yes
Network size and quality	Smaller – a subset of the full PPO network; same quality	Large	Smaller – a select network of local doctors; same quality
Specialists available	Yes, all types	Yes, all types	Yes, all types
You need a referral from PCP to see a specialist	No	No	Yes
OK to get services out-of-network	Yes	Yes	No, except for urgent or emergency care
Pay more out-of-network	Yes	Yes	N/A
Health Benefit Navigator service	Yes	No	No
Virtual doctor visits	Yes	No	Yes

Available locations

You can sign up for EnhancedCare PPO if you live in any of these places.



¹Partial county – not all ZIP codes available.

These plans are available through Covered California and directly through Health Net

The amounts shown here are what you would pay for the services you use, depending on the plan you choose.

With Gold 80 EnhancedCare PPO, for example, your cost for a doctor office visit is \$25.

Reminder! Your share of costs is in addition to the monthly premium you pay for your health coverage.

Benefit	Platinum 90 EnhancedCare PPO	Gold 80 EnhancedCare PPO	Silver 70 EnhancedCare PPO	Bronze 60 EnhancedCare PPO	Minimum Coverage EnhancedCare PPO ¹
Deductible For one person / for family	\$0 / \$0	\$0 / \$0	\$2,500 / \$5,000	\$6,300 / \$12,600	\$7,350 / \$14,700
Out-of-pocket maximum For one person / for family	\$3,350 / \$6,700	\$6,000 / \$12,000	\$7,000 / \$14,000	\$7,000 / \$14,000	\$7,350 / \$14,700
Doctor office visit	\$15	\$25	\$35 ²	\$75 ³	0% ³
Teladoc consultation telehealth services⁴	\$0	\$0	\$0 ²	\$0 ²	\$0 ³
Specialist	\$30	\$55	\$75 ²	\$105 ³	0%
Hospital stay	10%	20%	20%	100%	0%
Outpatient surgery	10%	20%	20% ²	100%	0%
Urgent care	\$15	\$25	\$35 ²	\$75 ³	0% ³
Emergency care⁵	\$150 facility / \$0 physician	\$325 facility / \$0 physician	\$350 facility ² / \$0 physician ²	100% facility / \$0 physician ²	0% facility / \$0 physician ²
Prescription drugs Tier 1 (most generics and low-cost preferred brands) / Tier II (non-preferred generics and preferred brands) / Tier III (non-preferred brands only)	\$5 / \$15 / \$25	\$15 / \$55 / \$75	\$15 / \$55 / \$80 prescription drug calendar year deductible is \$130 per member / \$260 per family	100% up to \$500/script prescription drug calendar year deductible is \$500 per member / \$1,000 per family	0% ⁶

This is a summary only. The EnhancedCare PPO disclosure has plan overviews with more details about what services are covered with our EnhancedCare PPO insurance plans. Pediatric vision and dental coverage for children up to age 19 is included with our health plans available through Covered California.

¹Minimum coverage plans are available to individuals who are under age 30. You may also be eligible for this plan if you are age 30 or older and are exempt from the federal requirement to maintain minimum essential coverage. Once you are enrolled, you must re-apply for a hardship exemption from the Marketplace and re-submit the Marketplace notice showing your exemption certificate number to Health Net every year – by January 1 – in order to remain on this plan.

²Your deductible does not apply to these services.

³You get coverage for visits 1–3 before you pay your deductible. You just pay the copayment. For visits 4 and more, you pay the full cost until you have paid your deductible.

⁴Should not replace regular doctor visits. Only telehealth services provided by Teladoc are covered.

⁵You do not pay the copayment if you are admitted to the hospital.

⁶Your medical deductible applies to prescription drugs for all tiers.

These plans are available through Covered California only

Some people qualify for extra help paying for the health services they use. Instead of paying \$35 to visit the doctor, the cost could be as low as \$5. The extra help comes with silver-level plans that are called Enhanced Silver.

Individuals with income between 138 percent and 250 percent of the federal poverty level qualify for Enhanced Silver.

Benefit	Silver 94 EnhancedCare PPO	Silver 87 EnhancedCare PPO	Silver 73 EnhancedCare PPO
Deductible For one person / for family	\$75 / \$150	\$650 / \$1,300	\$2,200 / \$4,400
Out-of-pocket maximum For one person / for family	\$1,000 / \$2,000	\$2,450 / \$4,900	\$5,850 / \$11,700
Doctor office visit¹	\$5	\$10	\$30
Teladoc consultation telehealth services^{1,2}	\$0	\$0	\$0
Specialist¹	\$8	\$25	\$75
Hospital stay	10%	15%	20%
Outpatient surgery¹	10%	15%	20%
Urgent care¹	\$5	\$10	\$30
Emergency care^{1,3}	\$50 facility / \$0 physician	\$100 facility / \$0 physician	\$350 facility / \$0 physician
Prescription drugs Tier 1 (most generics and low-cost preferred brands) / Tier II (non-preferred generics and preferred brands) / Tier III (non-preferred brands only)	\$3 / \$10 / \$15	\$5 ⁴ / \$20 / \$35 prescription drug calendar year deductible is \$50 per member / \$100 per family	\$15 / \$50 / \$75 prescription drug calendar year deductible is \$130 per member / \$260 per family

This is a summary only. The EnhancedCare PPO disclosure has plan overviews with more details about what services are covered with our EnhancedCare PPO insurance plans. Pediatric vision and dental coverage for children up to age 19 is included with our health plans available through Covered California.

¹Your deductible does not apply to these services.

²Should not replace regular doctor visits. Only telehealth services provided by Teladoc are covered.

³You do not pay the copayment if you are admitted to the hospital.

⁴Your prescription drug calendar year deductible does not apply.

These plans are available directly through Health Net only

The amounts shown here are what you would pay for the services you use, depending on the plan you choose. With Gold Value EnhancedCare PPO, for example, your cost for a doctor visit is \$20.

Reminder! Your share of costs is in addition to the monthly premium you pay for your health coverage.

Benefit	Gold Value EnhancedCare PPO	Silver Value EnhancedCare PPO
Deductible For one person / for family	\$1,000 / \$2,000	\$4,500 / \$9,000
Out-of-pocket maximum For one person / for family	\$6,000 / \$12,000	\$7,000 / \$14,000
Doctor office visit¹	\$20	\$45
Teladoc consultation telehealth services^{1,2}	\$0	\$0
Specialist¹	\$50	\$60
Hospital stay	20%	30%
Outpatient surgery	20%	30%
Urgent care¹	\$25	\$45
Emergency care³	\$325 facility / \$0 ¹ physician	\$350 facility / \$0 ¹ physician
Prescription drugs Tier 1 (most generics and low-cost preferred brands) / Tier II (non-preferred generics and preferred brands) / Tier III (non-preferred brands only)	\$10 / \$50 / \$85	\$15 ⁴ / \$55 / \$85 prescription drug calendar year deductible is \$500 per member / \$1,000 per family

This is a summary only. The EnhancedCare PPO disclosure has plan overviews with more details about what services are covered with our EnhancedCare PPO insurance plans. Pediatric vision and dental coverage for children up to age 19 is included with our health plans.

¹Your deductible does not apply to these services.

²Should not replace regular doctor visits. Only telehealth services provided by Teladoc are covered.

³You do not pay the copayment if you are admitted to the hospital.

⁴Your prescription drug calendar year deductible does not apply.

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 employer group applicants please call 1-800-522-0088 (TTY: 711). Individual & Family Plan (IFP) applicants please call 1-877-609-8711 (TTY: 711). For more help: If you are enrolled in a PPO or EPO insurance policy from Health Net Life Insurance Company, call the CA Dept. of Insurance at 1-800-927-4357. If you are enrolled in an HMO or HSP plan from Health Net of California, Inc., call the DMHC Helpline at 1-888-HMO-2219.

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 يرجى من مقدمي طلبات مجموعة أصحاب العمل الاتصال بمركز الاتصال 1-800-522-0088 (TTY: 711). يرجى من مقدمي طلبات خطة الأفراد والعائلة (IFP) الاتصال على الرقم 1-877-609-8711 (TTY: 711). وللحصول على المساعدة: في حال كنت مسجلاً في بوليصة تأمين المنظمة المزودة المفضلة PPO أو المنظمة المزودة الحصرية EPO من Health Net Life Insurance Company، اتصل على قسم التأمين في كاليفورنيا على الرقم 1-800-927-4357. في حال كنت مسجلاً في منظمة المحافظة على الصحة HMO أو خطة التوفير الصحية HSP من شركة Health Net of California, Inc.، اتصل على خط المساعدة في قسم الرعاية الصحية المدارة DMHC على الرقم 1-888-HMO-2219.

Armenian

Անվճար լեզվական ծառայություններ: Դուք կարող եք բանավոր թարգմանիչ ստանալ: Փաստաթղթերը կարող են կարդալ ձեզ համար ձեր լեզվով: Օգնության համար զանգահարեք մեզ ձեր ID քարտի վրա նշված հեռախոսահամարով, իսկ գործատուի խմբի դիմորդներին խնդրում ենք զանգահարել 1-800-522-0088 (TTY: 711) հեռախոսահամարով: Անհատական և Ընտանեկան Ծրագրի անդերեն հապավումը՝ (IFP) դիմորդներին խնդրում ենք զանգահարել 1-877-609-8711 (TTY: 711) հեռախոսահամարով: Լրացուցիչ օգնության համար. եթե անդամագրված եք Health Net Life Insurance Company-ի PPO կամ EPO ապահովագրությանը, զանգահարեք Կալիֆորնիայի Ապահովագրության բաժին՝ 1-800-927-4357 հեռախոսահամարով: Եթե անդամագրված եք Health Net of California, Inc.-ի HMO կամ HSP ծրագրին, զանգահարեք DMHC օգնության գիծ՝ 1-888-HMO-2219 հեռախոսահամարով.

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，雇主團體申請人請致電 1-800-522-0088 (TTY: 711)。個人與家庭計畫 (IFP) 申請人請致電 1-877-609-8711 (TTY: 711)。如需進一步協助：如果您透過 Health Net Life Insurance Company 投保 PPO 或 EPO 保單，請致電 1-800-927-4357 與加州保險局聯絡。如果您透過 Health Net of California, Inc. 投保 HMO 或 HSP 計畫，請致電 DMHC 協助專線 1-888-HMO-2219。

Hindi

बिना लागत की भाषा सेवाएँ। आप एक दुभाषिया प्राप्त कर सकते हैं। आपको दस्तावेज अपनी भाषा में पढ़ कर सुनाए जा सकते हैं। मदद के लिए, आपके आईडी कार्ड पर दिए गए सूचीबद्ध नंबर पर हमें कॉल करें, या नियोजक समूह आवेदक कृपया 1-800-522-0088 (TTY: 711) संपर्क केंद्र पर कॉल करें। कृपया व्यक्तिगत और पारिवारिक प्लैन (IFP) के आवेदक 1-877-609-8711 (TTY: 711) पर कॉल करें। अधिक मदद के लिए: यदि आप Health Net Life Insurance Company PPO या ईपीओ EPO बीमा पॉलिसी में नामांकित हैं, तो कैलिफोर्निया बीमा विभाग को 1-800-927-4357 पर कॉल करें। यदि आप Health Net of California, Inc., एचएमओ HMO या एचएसपी HSP प्लैन में नामांकित हैं, तो डीएमएचसी DMHC हेल्पलाइन के 1-888-HMO-2219 पर कॉल करें।

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 ntawm tus xov tooj nyob ntawm koj daim npav, los yog tias koj yog tus neeg tso npe xav tau kev pab kho mob los ntawm koj txoj hauj-lwm thov hu rau 1-800-522-0088 (TTY: 711). Yog koj yog tus tso npe xav tau kev pab kho mob rau Ib Tug Neeg & Tsev Neeg Individual & Family Plan (IFP) thov hu 1-877-609-8711 (TTY: 711). Xav tau kev pab ntxiv: Yog koj tau tsab ntawv tuav pov hwm PPO los yog EPO los ntawm Health Net Life Insurance Company, hu mus rau CA Dept. of Insurance ntawm 1-800-927-4357. Yog koj tau txoj kev pab kho mob HMO los yog HSP los ntawm Health Net of California, Inc., hu mus rau DMHC tus xov tooj pab Helpline ntawm 1-888-HMO-2219.

Japanese

無料の言語サービス。通訳をご利用いただけます。日本語で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、雇用主を通じた団体保険の申込者の場合は、1-800-522-0088、(TTY: 711) までお電話ください。個人および家族向けプラン (IFP) の申込者の場合は、1-877-609-8711 (TTY: 711) までお電話ください。さらに援助が必要な場合: Health Net Life Insurance CompanyのPPOまたはEPO保険ポリシーに加入されている方は、カリフォルニア州保険局 1-800-927-4357 まで電話でお問い合わせください。Health Net of California, Inc.のHMO またはHSPに加入されている方は、DMHCヘルプライン 1-888-HMO-2219 まで電話でお問い合わせください。

Khmer

សេវាភាសាដោយឥតគិតថ្លៃ។ អ្នកអាចទទួលបានអ្នកបកប្រែផ្ទាល់មាត់។ អ្នកអាចស្តាប់គេអានឯកសារឱ្យអ្នកនៅក្នុងភាសារបស់អ្នក។ សម្រាប់ជំនួយ សូមទាក់ទងយើងខ្ញុំតាមរយៈលេខទូរសព្ទដែលមាននៅលើកាតសម្គាល់ខ្លួនរបស់អ្នក ឬ បេក្ខជនក្រុមនិយោជក អាចទាក់ទងទៅមជ្ឈមណ្ឌលទំនាក់ទំនងពាណិជ្ជកម្មនៃក្រុមហ៊ុន 1-800-522-0088 (TTY: 711)។ បេក្ខជនផែនការគ្រួសារ និងបេក្ខជនផែនការបុគ្គល សូមទូរសព្ទទៅលេខ 1-877-609-8711 (TTY: 711)។ សម្រាប់ជំនួយបន្ថែម ៖ បើសិនអ្នកបានចុះ ឈ្មោះក្នុងគោលការណ៍ធានារ៉ាប់រង PPO ឬ EPO Health Net Life Insurance Company សូមទាក់ទងទៅនា យកដ្ឋានធានារ៉ាប់រង CA តាមរយៈទូរសព្ទលេខ 1-800-927-4357។ បើសិនអ្នកបានចុះឈ្មោះក្នុងផែនការ HMO ឬ HSP ពីក្រុមហ៊ុន Health Net នៃរដ្ឋកាលីហ្វ័រញ៉ា សូមទាក់ទងលេខទូរសព្ទជំនួយ DMHC ៖ 1-888-HMO-2219។

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 고용주 그룹 신청인의 경우 1-800-522-0088 (TTY: 711) 번으로 전화해 주십시오. Individual & Family Plan (IFP) 신청인의 경우, 1-877-609-8711 (TTY: 711) 번으로 전화해 주십시오. 추가 도움이 필요하시면, Health Net Life Insurance Company의 PPO 또는 EPO 보험에 가입되어 있으시면 캘리포니아 주 보험국에 1-800-927-4357번으로 전화해 주십시오. Health Net of California, Inc.의 HMO 또는 HSP 플랜에 가입되어 있으시면 DMHC 도움라인에 1-888-HMO-2219번으로 전화해 주십시오.

Navajo

Saad Bee Áká E'eyeed T'áá Jíík'e. Ata' halne'ígíí hóló. T'áá hó hazaad k'ehjí naaltsos hach'í' wóltah. Shíká a'doowoł nínízingo naaltsos bee néího'dólzínígíí bikáa'gi béesh bee hane'í bikáa' áají' hodíílnih éí doodaii' employer groupqjí ninaaltsos sihtsoozgo éí 1-800-522-0088 (TTY: 711). T'áá hó dóó ha'álchíní bíł hak'é'éstí'ígíí ÍIFP wolyéhígíí'Ó éí kojí' hojilnih 1-877-609-8711 (TTY: 711). Shíká anáá'doowoł jinízingo: PPO éí doodaii' EPOqjí Health Net Life Insurance Company wolyéhíjí béeso ách'ááqáh naa'nil biniyé hwe'iina' bik'é'éstí'go éí CA Dept. of Insurance bich'í' hojilnih 1-800-927-4357. HMO éí doodaii' HSPqjí Health Net of Californiaqjí béeso ách'ááqáh naa'nil biniyé hats'íís bik'é'éstí'go éí kojí' hojilnih DMHC Helpline 1-888-HMO-2219.

Persian (Farsi)

خدمات زبان به طور رایگان. می توانید یک مترجم شفاهی بگیرید. می توانید درخواست کنید که اسناد به زبان شما برایتان قرائت شوند. برای دریافت راهنمایی، با ما به شماره ای که روی کارت شناسایی شما درج شده تماس بگیرید، یا درخواست کنندگان گروه کارفرما لطفاً با مرکز تماس بازرگانی 1-800-522-0088 (TTY: 711) تماس بگیرید. درخواست کنندگان برنامه انفرادی یا خانواده (IFP) لطفاً با شماره 1-877-609-8711 (TTY: 711) تماس بگیرید. برای دریافت راهنمایی بیشتر: اگر در بیمه نامه PPO یا EPO از سوی Health Net Life Insurance Company عضویت دارید، با CA Dept. of Insurance به شماره 1-800-927-4357 تماس بگیرید. اگر در برنامه HMO یا HSP از سوی Health Net of California, Inc. عضویت دارید، با خط راهنمایی تلفنی DMHC به شماره 1-888-HMO-2219 تماس بگیرید.

Panjabi (Punjabi)

ਬਿਨਾਂ ਕਿਸੇ ਲਾਗਤ ਤੋਂ ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ। ਤੁਸੀਂ ਇੱਕ ਦੁਭਾਸ਼ਿਤਾ ਪ੍ਰਾਪਤ ਕਰ ਸਕਦੇ ਹੋ। ਤੁਹਾਨੂੰ ਦਸਤਾਵੇਜ਼ ਤੁਹਾਡੀ ਭਾਸ਼ਾ ਵਿੱਚ ਪੜ੍ਹ ਕੇ ਸੁਣਾਏ ਜਾ ਸਕਦੇ ਹਨ। ਮਦਦ ਲਈ, ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ ਤੇ ਦਿੱਤੇ ਨੰਬਰ ਤੇ ਸਾਨੂੰ ਕਾਲ ਕਰੋ ਜਾਂ ਕਿਰਪਾ ਕਰਕੇ 1-800-522-0088 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ। ਵਿਅਕਤੀਗਤ ਅਤੇ ਪਾਰਿਵਾਰਕ ਪਲੈਨ (IFP) ਦੇ ਆਵੇਦਕ ਕਿਰਪਾ ਕਰਕੇ 1-877-609-8711 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ। ਵਧੇਰੀ ਮਦਦ ਲਈ: ਜੇ Health Net Life Insurance Company ਤੋਂ ਇੱਕ ਪੀਪੀਓ PPO ਜਾਂ ਈਓਪੀਏ EPO ਬੀਮਾ ਪਾਲਿਸੀ ਵਿੱਚ ਨਾਮਾਂਕਿਤ ਹੋ, ਤਾਂ ਕੈਲੀਫੋਰਨੀਆਂ ਬੀਮਾ ਵਿਭਾਗ ਨੂੰ 1-800-927-4357 'ਤੇ ਕਾਲ ਕਰੋ। ਜੇ ਤੁਸੀਂ ਹੈਲਥ ਨੈੱਟ ਆਫ ਕੈਲੀਫੋਰਨੀਆਂ, ਇੱਕ ਤੋਂ ਇੱਕ ਐਚਐਮਓ HMO ਜਾਂ ਐਚਐਸਪੀ HSP ਪਲੈਨ ਵਿੱਚ ਨਾਮਾਂਕਿਤ ਹੋ ਤਾਂ ਡੀਐਮਐਚਸੀ DMHC ਹੈਲਪਲਾਈਨ ਨੂੰ 1-888-HMO-2219 'ਤੇ ਕਾਲ ਕਰੋ।

Russian

Бесплатная помощь переводчиков. Вы можете получить помощь устного переводчика. Вам могут прочитать документы в переводе на ваш родной язык. За помощью обращайтесь к нам по телефону, приведенному на вашей идентификационной карточке участника плана. Если вы хотите стать участником группового плана, предоставляемого работодателем, звоните в коммерческий контактный центр компании 1-800-522-0088 (TTY: 711). Если вы хотите стать участником плана для семей и частных лиц (IFP), звоните по телефону 1-877-609-8711 (TTY: 711). Дополнительная помощь: Если вы включены в полис PPO или EPO от страховой компании Health Net Life Insurance Company, звоните в Департамент страхования штата Калифорния CA Dept. of Insurance, телефон 1-800-927-4357. Если вы включены в план HMO или HSP от страховой компании Health Net of California, Inc., звоните по контактной линии Департамента управляемого медицинского обслуживания (DMHC), телефон 1-888-HMO-2219.

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. Los solicitantes del grupo del empleador deben llamar al 1-800-522-0088 (TTY: 711). Los solicitantes de planes individuales y familiares deben llamar al 1-877-609-8711 (TTY: 711). Para obtener más ayuda, haga lo siguiente: Si está inscrito en una póliza de seguro PPO o EPO de Health Net Life Insurance Company, llame al Departamento de Seguros de California, al 1-800-927-4357. Si está inscrito en un plan HMO o HSP de Health Net of California, Inc., llame a la línea de ayuda del Departamento de Atención Médica Administrada, al 1-888-HMO-2219.

Tagalog

Walang Bayad na Mga Serbisyo sa Wika. Makakakuha kayo ng isang interpreter. Makakakuha kayo ng mga dokumento na babasahin sa inyo sa inyong wika. Para sa tulong, tawagan kami sa nakalistang numero sa inyong ID card, o para sa grupo ng mga aplikante ng employer, mangyaring tawagan ang 1-800-522-0088 (TTY: 711). Para sa mga aplikante ng Plano para sa Indibiduwal at Pamilya Individual & Family Plan, (IFP), mangyaring tawagan ang 1-877-609-8711 (TTY: 711). Para sa higit pang tulong: Kung nakatala kayo sa insurance policy ng PPO o EPO mula sa Health Net Life Insurance Company, tawagan ang CA Dept. of Insurance sa 1-800-927-4357. Kung nakatala kayo sa HMO o HSP na plan mula sa Health Net of California, Inc., tawagan ang Helpline ng DMHC sa 1-888-HMO-2219.

Thai

ไม่มีค่าบริการด้านภาษา คุณสามารถใช้ล่ามได้ คุณสามารถให้อ่านเอกสารให้ฟังเป็นภาษาของคุณได้ สำหรับความช่วยเหลือ โทรหาเราตามหมายเลขที่ให้ไว้บนบัตรประจำตัวของคุณ หรือ ผู้สมัครกลุ่มนายจ้าง กรุณาโทรหาศูนย์ติดต่อเชิงพาณิชย์ของ 1-800-522-0088 (TTY: 711) ผู้สมัครแผนบุคคลและครอบครัว Individual & Family Plan (IFP) กรุณาโทร 1-877-609-8711 (TTY: 711) สำหรับความช่วยเหลือเพิ่มเติม หากคุณสมัครทำกรมธรรม์ประกันภัย PPO หรือ EPO กับ Health Net Life Insurance Company โทรหากรมการประกันภัยรัฐแคลิฟอร์เนียได้ที่ 1-800-927-4357 หากคุณสมัครแผน HMO หรือ HSP กับ Health Net of California, Inc. โทรหาสายด่วนความช่วยเหลือของ DMHC ได้ที่ 1-888-HMO-2219.

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 bằng ngôn ngữ của quý vị. Để nhận trợ giúp, hãy gọi cho chúng tôi theo số được liệt kê trên thẻ ID của quý vị, hoặc người nộp đơn vào chương trình theo nhóm của chủ sử dụng lao động vui lòng gọi 1-800-522-0088 (TTY: 711). Người nộp đơn thuộc Chương Trình Cá Nhân & Gia Đình viết tắt trong tiếng Anh là (IFP) vui lòng gọi số 1-877-609-8711 (TTY: 711). Để nhận thêm trợ giúp: Nếu quý vị đăng ký hợp đồng bảo hiểm PPO hoặc EPO từ Health Net Life Insurance Company, vui lòng gọi Sở Y Tế CA theo số 1-800-927-4357. Nếu quý vị đăng ký vào chương trình HMO hoặc HSP từ Health Net of California, Inc., vui lòng gọi Đường Dây Trợ Giúp DMHC theo số 1-888-HMO-2219.

Health Net Life Insurance Company (Health Net) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Health Net does not exclude people or treat them differently because of race, color, national origin, 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:

Group Employer Applicants 1-800-522-0088 (TTY: 711)

Individual & Family Plan Applicants 1-877-609-8711 (TTY: 711)

If you believe that Health Net has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, 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

PO Box 10348

Van Nuys, CA 91410-0348

Fax: 1-877-831-6019

Online: www.healthnet.com

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available 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>. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Let Health Net be your guide!

We can tell you more about EnhancedCare PPO and help you find the health coverage that fits your health, your budget, and your life.

Give us a call at 1-877-609-8711 or visit us online at www.myhealthnetca.com.



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