

# 2014 Benefit *Highlights*

## Health Net Jade (HMO SNP)

Kern, Los Angeles, Orange, Riverside, San Bernardino, CA

<i>Plan benefits and copays/ coinsurance</i>	
Monthly plan premium	\$0
Maximum out-of-pocket (MOOP)	\$3,400
<b>Doctor office visits</b>	
• Primary care physician	\$0
• Specialist	\$0
Lab services and X-rays	\$0
Complex diagnostic imaging (CT, MRA/MRI, PET, etc.) and radiation therapy	\$60
Radiation therapy	\$60
Diabetic supplies	\$0
Inpatient hospital care	\$0
Outpatient services/surgery (hospital care)	\$0
Outpatient services/surgery (ambulatory care)	\$0
Emergency care	\$65
Worldwide emergency coverage – annual limit of \$50,000	
Urgently needed care	\$0
Routine podiatry	\$0
Routine hearing exam	\$0
Hearing aids (1 pair every 3 years)	Up to \$1,000 allowance
Routine vision exam	\$0
Routine eyewear	\$0; \$250 allowance every 2 years* *Multi-year benefits may not be available in subsequent years
Preventive dental	\$0

(continued)

<i>Plan benefits and copays/ coinsurance</i>	
Dental HMO comprehensive dental	\$0 - \$2,250
Transportation services (per one-way trip)/unlimited one-way trips per year	\$0
Health club membership/fitness classes	\$0
<i>Prescription drug coverage</i>	<i>C-SNP formulary</i>
Annual Part D deductible	\$0
<b>Copays and coinsurance</b>	<b>30-day retail/90-day preferred mail order</b>
Tier 1: Preferred generic drugs	\$0 / \$0
Tier 2: Non-preferred generic drugs	\$10 / \$20
Tier 3: Preferred brand drugs	\$45 / \$125
Tier 4: Non-preferred brand drugs	\$95 / \$275
Tier 5: Specialty tier	33%
Tier 6: Select care drugs	\$0
Initial coverage limit (ICL)	\$2,850

Once the ICL has been met, you move into the Coverage Gap phase. There is additional coverage provided in the Coverage Gap and Catastrophic Coverage stages. Please refer to your Evidence of Coverage (EOC) and/or Comprehensive Formulary for further information.

You can enroll in Health Net Jade (HMO SNP) if you are entitled to Medicare Part A and enrolled in Medicare Part B, and live in the service area. You must have been diagnosed by your doctor with a cardiovascular disorder, chronic heart failure, and/or diabetes to join this plan. Please call the plan to see if you are eligible to join.

Health Net of California, Inc. has a contract with Medicare to offer HMO SNP plans. Enrollment in a Health Net Medicare Advantage plan depends on contract renewal.

The benefit information provided is a brief summary, not a complete description of benefits. For more information, contact the plan. Limitations, copayments and restrictions may apply. Benefits, formulary, pharmacy network, provider network, premium and/or copayments/coinsurance may change on January 1 of each year. The actual complete terms and conditions of the health plan are set forth in the applicable Evidence of Coverage (EOC) document.

For additional information, please contact our Member Services number at 1-800-431-9007. (TTY/TDD users should call 1-800-929-9955). Hours are 8:00 a.m. to 8:00 p.m., 7 days a week.

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