



What to Expect after You Enroll

in a Health Net Medicare Advantage plan

**Herminia
Escobedo**
Health Net

At Health Net, we recognize the importance of your health and wellness. Please use this new member checklist to keep your health moving in the right direction.

Expect welcome communications from Health Net

Health Net will call you to confirm that we received your application and to verify your enrollment status. You may use your enrollment application as temporary proof of insurance for doctor appointments.

Complete a Health Risk Assessment (HRA) Questionnaire

The comprehensive HRA questions serve to establish your health baseline.

- Within 30 days of membership, you will receive a call from a trusted Health Net partner to go through the HRA questionnaire with you.
- If you cannot complete the HRA with us over the phone, we will mail the HRA questionnaire to you. Please complete the form and mail it back to Health Net in the envelope provided.

- Regardless of your current health status, you should aim to complete your HRA questionnaire within the first 60 days of membership.

Annual wellness visit

If it has been longer than 12 months since your last annual wellness exam, please call Health Net as soon as you receive your ID card. We can assist you to schedule a no-cost health assessment. Simply call 1-877-899-0535, press Option 3 (TTY/TDD 1-877-899-0526) Monday through Friday, 8:00 a.m. to 5:00 p.m. Pacific time, except holidays.

- As a member, you may qualify to receive a no-cost health assessment in the comfort of your own home from a trusted Health Net contracted health professional.
- Or, we'll facilitate your annual wellness visit with your personal physician.

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Prescription drug list and mail order pharmacy

If your plan includes Part D medications, a prescription drug list will be mailed to your home, or you can view the list online at www.healthnet.com.

- Review the Health Net prescription drug list to make sure your medications are covered. If a drug you are taking is not listed, you can:
 - talk with your doctor about changing to a covered alternative drug, or
 - you can ask us to make an exception to our coverage rules.
- Ask your doctor or pharmacist about using generic drugs instead of brand-name drugs. Generic drugs have the same active ingredients as brand-name drugs and usually cost less.
- Consider using Health Net's mail order pharmacy. You get a lower copayment, and we'll deliver up to a 90 day supply of your medication to your home.

Electronic document delivery and web education

Visit www.healthnet.com and register for an online member account. This lets you access your plan information and manage your account preferences.

- Review your personal plan information and access a wide range of member programs and Web-based resources.

- Select your preference for electronic document delivery. Choose the documents you would prefer to receive electronically to cut down on paper waste.

Health Net case management team

If you are enrolled as a member of a chronic Special Needs Plan (SNP), your plan integrates Health Net's member-centered case management program. It includes an assessment of your health needs and risks and may include developing a personalized care plan with specific health goals.

- The case management team can also help you complete your HRA questionnaire.
- If you are assessed as high risk, your physician may receive care alert health monitoring and reporting information to assist in managing your ongoing health.

Health Net communicates with members in a variety of ways

- Expect ongoing communication from your health plan, as appropriate, about member medications, benefits, wellness initiatives, case management interactions, and opportunities to maintain or improve health status.

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Enrollment milestones

After you are enrolled, we take the following steps to make sure that you are enrolled correctly.

<i>Timeline</i>	<i>What to expect</i>
Enrollment application form completed, signed and dated	<ul style="list-style-type: none">• Outside of the Annual Election Period (AEP), enrollment will generally be effective the 1st of the month after we receive your application. If you are turning 65 and enrolling in Medicare Part A and Part B, enrollment will generally be effective on the first day of your birthday month.
Within 5–7 days after enrolling	<ul style="list-style-type: none">• You will receive a letter confirming that we have received your application. You may use the yellow copy of your application as temporary proof of insurance for doctor appointments.
Within 10–14 days after enrolling	<ul style="list-style-type: none">• Once the Centers for Medicare & Medicaid Services (CMS) approves your application, Health Net will send you a letter to confirm coverage. You will receive a plan post-enrollment kit and ID card(s) in a separate mailing.• If your plan has a premium, you will also receive an enrollment billing statement to establish a paper bill or pre-bill for an automatic bank draft (ABD) option.
Within 15 days after enrolling	<ul style="list-style-type: none">• We will call you to verify your enrollment with Health Net. If we cannot reach you by phone, we will follow up with a letter explaining the rules of your Medicare Advantage plan.
Within 60 days after enrolling	<ul style="list-style-type: none">• If you selected ABD, you can start paying with this option. It takes up to 60 days for withdrawals to begin. Health Net will deduct any pending balance once ABD begins.• If you enrolled in a Jade HMO SNP¹ plan, you may receive communications about physician attestation².
Within 90 day after enrolling	<ul style="list-style-type: none">• If you selected the Social Security Administration (SSA) deduction option, this payment process may begin.

¹For Arizona (Jade) Chronic SNP enrollees: This plan is available to all people with Medicare who have been diagnosed with congestive heart failure (CHF) and/or diabetes. For California and Oregon (Jade) Chronic SNP enrollees: This plan is available to all people with Medicare who have been diagnosed with cardiovascular disorders, chronic heart failure (CHF) and/or diabetes.

²The requirement that the attending physician certify, in writing, the accuracy and completion of the clinical information used for diagnosis-related group (DRG) assignment.

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Health Net is a Medicare Advantage organization with a Medicare contract. 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. Premiums, copays, coinsurances, and deductibles may vary based on the level of Extra Help. Please contact the plan for further details. Benefits, formulary, pharmacy network, premium and/or copayments/coinsurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium. The actual complete terms and conditions of the health plan are set forth in the applicable Evidence of Coverage (EOC) document. For more information, contact the plan.

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