Health Net Group Retiree Plans

HMO Medicare Coordination of Benefits (COB)





Health Net HMO Medicare Coordination of Benefits

for group retirees

At Health Net, we're working to change your idea of a "health plan." Our mission is to support your quest for optimal health. Beyond comprehensive benefits and predictable copayments, our Coordination of Benefits plans include extra health-boosting resources.

Whatever you're looking for – affordability, broad benefit coverage, choice in doctors, or wellness programs to keep you healthy – you'll find it here.



The Health Net Difference

Health Net, Inc., through its subsidiaries, provides a variety of health and wellness benefits and services to over 5.4 million people nationwide. As one of the country's leading health care companies, we support individuals and families through all stages of life. It is what we've been doing for over 30 years – And we're just getting started.

Reasons to choose Health Net HMO Coordination of Benefits (COB) coverage include:

1 We know California.

For over 30 years, Health Net of California, Inc. has given Californians access to broad networks, personal service and useful resources so they can manage their health the way they want.

We're all about quality.

Ongoing service monitoring helps ensure the care you receive is the kind of care you expect and deserve. We put our provider and hospital comparison reports online at www.healthnet.com/medicare so you can view provider network quality and service ratings for yourself.

Broad networks for more choices.

Thousands of doctors and hospitals give you the choices you deserve. And with such large provider networks, there is a good chance your doctor is part of ours. You can search for doctors at www.healthnet.com/medicare. Just click on *ProviderSearch*. You can also change doctors, download maps and more.

4 Strength.

Health Net, Inc. is one of the nation's largest publicly traded managed health care companies, and ranked #236 on the 2013 list of Fortune 500 companies. This means we have the strength and stability to focus on care delivery and the resources to innovate.

How Coordination of Benefits Works

Health Net offers a variety of Coordination of Benefits (COB) plan choices to meet the varying needs of retirees. Whichever you choose, you can count on comprehensive coverage, friendly service and health-boosting extras.

You must be enrolled in both Medicare Part A and Part B to enroll in a Health Net Medicare COB plan offered by your employer, union or trust. To be eligible, retirees must also reside within the Health Net HMO commercial service area. If either you or your spouse is over the age of 65 and actively employed, neither are eligible for the COB Plan.



Health Net's HMO Medicare Coordination of Benefits (COB) plan is offered to Medicare eligibles through your employer, union or trust.

HMO COB: How does it work?

Health Net's Medicare COB plan works like a traditional HMO plan where your primary care provider (PCP) coordinates your care.

- If you need care from a specialist, your PCP makes arrangements for you to see a specialist within your participating physician group (PPG). (You can make an appointment with a gynecologist without needing a referral.)
- If you go outside your PPG network, and use the services of a non-contracted Health Net physician or access services that are not coordinated through your PCP and approved by Health Net, you will be responsible for Medicare deductibles and coinsurance.
- Should you need surgery or hospital services, your PCP will make all the arrangements.

Coordination of care

With COB plans, Medicare is the primary plan and Health Net is the secondary plan. This means that Health Net pays the difference between the amount Medicare pays and the Health Net allowed amount for the covered service.

- The provider submits claims to Medicare for determination and payment of covered services.
- Medicare then sends a claim payment summary to the provider of service, who will then submit the claim to Health Net. The member receives a Medicare Summary Notice that explains Medicare's payment of that claim.

Note: Some secondary claims are sent electronically by Medicare to Health Net (as the secondary plan) and do not require that the provider of service submit the claim.

• Health Net and/or the medical group is responsible for paying the difference between the amount Medicare paid and the Health Net allowed amount for the covered service. With a COB plan, Health Net will cover benefits as a supplemental payer only to the extent that services are coordinated by the member's physician and/or authorized by Health Net or the medical group.



Herminia Escobedo, Health Net We get members what they need.



Can I still see my primary care physician if I don't have my ID card?

Yes. If you don't have your ID card yet, please take the yellow copy of your Health Net Employer Group Medical Coordination of Benefits Enrollment Request Form with you to your participating physician group. This will serve as your temporary ID card until you receive your permanent ID card.

How do I find a doctor?

With our vast network of physicians and other specialists, finding a doctor is easy:

- Log in to www.healthnet.com/medicare and click on *ProviderSearch*. You can search by name or specialty, find out if the doctor is accepting new patients, even get a printable map or driving directions.
- Call Customer Service at 1-800-522-0088 (TTY/TDD 1-800-929-9955), 8:00 a.m. to 8:00 p.m., seven days a week for assistance.

Hospital coverage and medical emergencies.

Your primary care

physician will handle all of the care you need and will arrange all non-emergency hospital admissions. For medical emergencies, call 911(in areas where the system is established and operating) or go to the closest emergency facility. Do not worry about whether it is a Health Net network facility. Immediately following an ER visit, call your primary care physician to inform your doctor of your situation, so that your doctor can help with any additional care.

How do I enroll?

Check with your employer group/union administrator or benefits office to find out how they handle your Health Net enrollment.

Make the Most of Your Health with Decision Power®

Decision Power brings together the information, resources and personal support that fit you, your health and your life. Whether you're focused on staying fit, making health care decisions or facing a serious diagnosis, we're here to help you work with your doctor and make informed decisions.

Decision Power is available 24 hours a day, 7 days a week. Call the Decision Power line to:

- Talk to a registered nurse 24/7. By using the Nurse24SM line,¹ you can reach a Decision Power clinician who is available 24/7 to answer questions and address your concerns:
 - Questions about ongoing illnesses, such as asthma, congestive heart failure, heart disease, or diabetes.
 - Understanding all your options when you need treatment.
- Learn more about our Quit for Life® tobacco cessation program which provides an in-depth, personalized smoking cessation plan. Participants can access up to four proactive, one-on-one counseling calls, plus unlimited calls to their Quit Coach.
- Talk to a Decision Power Wellness Coach to set a specific health goal, such as weight and cholesterol management, quitting smoking, stress reduction, and blood pressure control.

Resources available online

- Take the Health Risk Questionnaire (HRQ). It's a fast and easy way to rate your health and learn how to improve it. Share the results with your doctor the next time you have a checkup.
- Access your Personal Health Record
 (PHR). You can record your appointments,
 medical history, medications, test results,
 preventive screenings, and shots. You can
 also print a summary of your PHR to share
 with your doctor.
- Enroll in a Healthy Living program on healthy aging, exercise, nutrition, tobacco cessation, and more. These six-week programs provide you with the tools and guidance to get healthier.
- Learn more with the in-depth article library, plus health-related videos and audio resources for most health conditions.
- Try the online questionnaires to test your knowledge of the pros and cons of various treatments.

You can start using Decision Power as soon as your Health Net benefits become effective! Just log in to www.healthnet.com/medicare, or call us toll-free at 1-800-893-5597 (TTY/TDD 1-800-276-3821). Interpretation services are available 24 hours a day.



Decision Power – Use it whenever and as much as you like. Because when it comes to your health, there's more than one right answer.

¹Decision Power nurses are not for emergency situations. If you have an emergency, call 911 or go to the emergency room.

Health Net

PO Box 10198 Van Nuys, CA 91410-0198

1-800-522-0088 8:00 a.m. to 8:00 p.m., seven days a week TTY/TDD users should call 1-800-929-9955

www.healthnet.com/medicare

You have access to Decision Power through your current enrollment with Health Net of California, Inc.

Decision Power is not part of Health Net's commercial medical benefit plans. It is not affiliated with Health Net's provider network and it may be revised or withdrawn without notice. Decision Power services, including clinicians, are additional resources that Health Net makes available to enrollees of the above listed Health Net company.

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