

Health Net Medicare Advantage - H5520

Medicare Plan Ratings

The Medicare Program rates how well Medicare health and drug plans perform in different categories (for example, detecting and preventing illness, ratings from patients, patient safety, drug pricing and customer service). The information provided below is an overall plan rating of our plan's performance. This information is available to help you make the best choice. If you would like to get additional information on our plan's performance please contact us at 800-949-6165 (toll-free) or 800-929-9955 (TTY/TDD) for prospective members, 888-445-8913 (toll-free) or 800-929-9955 (TTY/TDD) for current members, or you may visit www.medicare.gov.

Below is a summary of how our plan rated in quality and performance.

The number of stars shows how well our plan performs.

- ★★★★★ means excellent
- ★★★★ means above average
- ★★★ means average
- ★★ means below average
- ★ means poor

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Overall Plan Rating	★★★★ 3.5 Stars
	<p>The Overall Plan Rating combines scores for the types of services each plan offers:</p> <p>What is being measured?</p> <ul style="list-style-type: none">• For plans covering health services, the overall score for quality of those services covers 36 different topics in 5 categories:<ul style="list-style-type: none">○ Staying healthy: screenings, tests, and vaccines: Includes how often members got various screening tests, vaccines, and other check-ups that help them stay healthy.○ Managing chronic (long-term) conditions: Includes how often members with different conditions got certain tests and treatments that help them manage their condition.○ Ratings of health plan responsiveness and care: Includes ratings of member satisfaction with the plan.○ Health plan member complaints and appeals: Includes how often members filed a complaint against the plan.○ Health plan telephone customer service: Includes how well the plan handles calls from members.• For plans covering drug services, the overall score for quality of those services covers 17 different topics in 4 categories:

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- **Drug plan customer service:** Includes how well the drug plan handles calls and makes decisions about member appeals.
 - **Drug plan member complaints and Medicare audit findings:** Includes how often members filed a complaint about the drug plan.
 - **Member experience with drug plan:** Includes member satisfaction information.
 - **Drug pricing and patient safety:** Includes how well the drug plan prices prescriptions and provides updated information on the Medicare website. Includes information on how often members with certain medical conditions get prescription drugs that are considered safer and clinically recommended for their condition.
- **For plans covering both health & drug services,** the overall score for quality of those services covers **all of the 53 topics listed above.**

Where does the information for the Overall Plan Rating come from?

- For quality of **health services**, the information comes from sources that include:
 - Member surveys done by Medicare
 - Information from clinicians
 - Information submitted by the plans
 - Results from Medicare's regular monitoring activities
- For quality of **drug services**, the information comes from sources that include:
 - Results from Medicare's regular monitoring activities
 - Reviews of billing and other information that plans submit to Medicare
 - Member surveys done by Medicare

Why is the Overall Plan Rating important?

The Overall Plan Rating gives you a single summary score that makes it easy for you to compare plans based on quality and performance. Learn more about differences among plans by looking at the detailed ratings.