

2014 Guide to Understanding Your Benefits

*Additional information about covered benefits available under the
Health Net Seniority Plus Amber I (HMO SNP)*

California

Kern, Los Angeles, Orange, Riverside and San Bernardino Counties



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Health Net

The Health Net

Seniority Plus Amber I (HMO SNP) Plan



The simple truth

Health care is complicated. Choosing a company, selecting a plan, understanding your coverage can be difficult, but it doesn't have to be. You simply have to know what choices you have so you can make the best decision possible.

At Health Net, we've built our business around the specific needs of the individuals we serve. We have a variety of easy-to-use plans to meet as many situations as possible. Our vast network of participating physicians, hospitals, pharmacies, and medical professionals has been built carefully over two decades for our Medicare line of business.

Another great reason to choose Health Net is because we have made it easier to understand both your benefits and your costs. The next several pages outline products and services available to you from Health Net, and we also clarify some of the benefits and services that may be a challenge to understand. We encourage you to review this information so you can take advantage of the many Health Net products, services and resources designed to help keep you healthy.

Understanding your benefits is the key to getting the most from your health care coverage

It's important that you understand your benefits, so you can get the health care services you need. At Health Net, we're here to make sure that each benefit is easy to understand and simple for you to use. The following sections will help explain some of your benefits in more detail.

Vision/eyewear services

There is a \$250 maximum payable* every two years for one pair of frames or contact lenses (not applicable to medically necessary contact lenses).

Contact lenses are covered in lieu of eyeglasses. There is no charge for standard plastic eyeglass lenses. Multi-year benefits may not be available in subsequent years.

*You pay 80% of the remaining balance over the maximum payable for frames and 85% of the balance for conventional contact lenses. You pay 100% of the remaining balance for disposable contact lenses.

Skilled nursing facility

You pay all costs for each day after day 100 in a benefit period. A benefit period begins the day you go to a hospital or skilled nursing facility. The benefit period ends when you have not received hospital or skilled nursing care for 60 days in a row. If you go into the hospital or skilled nursing facility after one benefit period has ended, a new benefit period begins. There is no limit to the number of benefit periods you can have.

Hearing aids

Hearing aids are provided to you by Hearing Care Solutions, Inc. There is a \$1,000 coverage limit for two hearing aids (one pair) or \$500 coverage limit for one hearing aid every 3 years (all sizes and styles) at digital basic plus technology level. The benefit maximum covers the cost of your hearing aid(s) in full.

You will have no out-of-pocket cost sharing. There is no copayment for the hearing aid fitting exam. Multi-year benefits may not be available in subsequent years.

DHMO Dental services

With the exception of emergency and urgent dental care, all covered services must be provided by a contracted dentist. Most covered services will be available from, and provided by, your selected primary care general dentist. Comprehensive copay amounts vary by service/procedure:

	<i>In-network</i>
Diagnostic services	\$0
Restorative services (includes crowns/ fillings)	\$0
Endodontics/ periodontics/ extractions	\$0
Oral/maxillofacial surgery/other Prosthodontics (includes partials/ dentures)	\$0*
Orthodontics	\$0-\$1,450*

*Some orthodontic dental services are offered at a discount, which means your cost sharing may be higher than \$1,450.



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

Prescription drugs (Part D)

If you do not qualify for Extra Help, you will be subject to the following 2014 Part D benefit:

Annual Part D deductible	\$310
Copays and coinsurance	30-day retail/90-day preferred mail order
Tier 1: Preferred generic	\$0/\$0
Tier 2: Non-preferred generic	\$12/\$24
Tier 3: Preferred brand	\$41//\$113
Tier 4: Non-preferred brand	\$95/\$275
Tier 5: Specialty tier	25%/25%
Tier 6: Select care drugs	\$0/\$0
Initial coverage limit (ICL)	\$2,850

Once the ICL has been met, you move into the Coverage Gap phase. There is limited 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.

Transportation services

The transportation benefit is offered at a \$0 cost for 48 one-way trips per year to and from medical appointments for covered benefits that are medically necessary and received from contracted plan providers and facilities or as authorized by Health Net, and includes:

- Share-A-Ride vehicles: Ride with other passengers that have a similar appointment time or destination.
- Minivans, standard passenger vehicles or taxis may be used.
- Wheelchair vans are available.

Transportation providers may vary and cannot be guaranteed.

Decision Power® – Health and Wellness: A bridge to healthy actions

Information, resources and support for every person, every stage of health

When you choose Health Net, you get more than health care coverage. You get Decision Power. Decision Power brings together under one roof the information, resources and personal support that fit you, your health and your life. Whether you're focused on staying fit, dealing with back pain, or facing a serious diagnosis, we're here to help you work with your doctor and make informed decisions.

Staying healthy is just as important as getting well

Making the most of your health is what Decision Power is all about. We're focused on your whole health, not just one concern or disease. So we work with you to identify potential health risks, and help prevent minor concerns from becoming big problems. We're here should you face serious medical concerns.

Your health, your time, your choice

Whether you...

- have a question
- want help with a specific health goal
- need treatment but want to understand all your options
- are living with illness

You choose how and when to use the information, resources and support available. You can use Decision Power online or by calling. Try multiple resources at once, or one at a time. 24 hours a day, seven days a week, Decision Power is here for you.

The products and services indicated with an asterisk (*) in the following chart are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the Health Net grievance process.

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

Decision Power is part of Health Net's Medicare Advantage benefit plans. But it is not affiliated with Health Net's provider network. Decision Power services, including clinicians, are additional resources that Health Net makes available to enrollees of the above listed Health Net companies.

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When you choose Health Net, you get more than health care coverage. You get Decision Power. Decision Power brings together under one roof the information, resources and personal support that fit you, your health and your life.

The following is the at-a-glance reference guide to the benefits available to you through Decision Power.

<i>Recommendation</i>	<i>Health Net offering powered by Decision Power</i>
Healthy Aging	<p>Programs and resources</p> <ul style="list-style-type: none"> • Online wellness programs on exercise, healthy aging, condition management • Online Health Games to improve memory and concentration
Promoting weight management and nutrition	<p>Weight loss programs</p> <ul style="list-style-type: none"> • Discounts for Weight Watchers® and Jenny Craig®* Nutrition program • Access to a wellness health coach • Online nutrition program
Health & Wellness Information Line	<p>Nurse support</p> <ul style="list-style-type: none"> • Talk to a licensed nurse via phone, or chat about injuries, illnesses, chronic conditions and preventive care; available 24 hours, 7 days a week.
Managing stress	<p>Massage therapy</p> <ul style="list-style-type: none"> • Discounts on massage therapy services through contracted providers*
Avoiding tobacco	<p>Smoking cessation programs</p> <ul style="list-style-type: none"> • Telephonic and online support programs

More information

Want to know more before you choose Health Net? You can get additional benefit information by calling Member Services at 1-800-431-9007. Our hours of operation are 8:00 a.m. to 8:00 p.m., 7 days a week. TTY/TDD users call 1-800-929-9955. You can also visit us online at www.healthnet.com.



Health Net of California, Inc. has a contract with Medicare and the California state Medicaid program to offer HMO, PPO, 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. You must continue to pay your Medicare Part B premium.

Premiums, copays, co-insurance, and deductibles may vary based on your Medicaid eligibility category and/or the level of Extra Help you receive. Please contact the plan for further details.

This plan is available to anyone who has both Medical Assistance from the State and Medicare.

You can enroll in Health Net Seniority Plus Amber I (HMO SNP) if you are entitled to Medicare Part A and enrolled in Medicare Part B and live in the service area. You must also receive assistance from the State to join this plan. Please call the plan to see if you are eligible to join.

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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