

# 2009 BENEFIT HIGHLIGHTS

HEALTH NET PEARL NORTH CAROLINA OPTION 1 *Alamance, Alexander, Brunswick, Buncombe, Burke, Caldwell, Catawba, Currituck, Davidson, Guilford, Haywood, Henderson, Madison, Orange, Pender, Person, Randolph and Rockingham counties*

<b>MEDICAL COVERAGE</b>	
Monthly Plan Premium	\$0
Calendar Year Out-Of-Pocket Maximum <sup>1</sup>	\$3,350
Inpatient Hospital Care (Includes substance abuse and rehabilitation services)	\$250/day (Days 1-12)
Mental Health Services	Inpatient: \$250 per day (Days 1-12) (190 day lifetime max) Outpatient: \$50/visit
Skilled Nursing Facility <sup>2</sup>	\$0/day (Days 1-14) \$100/day (Days 15-100)
Outpatient Surgery Hospital Ambulatory Surgical Center (ASC)	\$100 Hospital \$100 ASC
Home Health Care	\$0 copay for Medicare-covered home health visits
Physician Services	Primary Care Physician: \$15/visit Specialist: \$30/visit
Chiropractic (Medicare-covered)	\$30/visit
Podiatry (Medicare-covered)	\$30/visit
Routine Physical Exam	\$0 (Covered for 1 exam per year)
Outpatient Substance Abuse Care	\$50/visit
Outpatient Rehabilitation Services	\$30/visit
Emergency Room Visit	\$50
Urgently Needed Care	\$35/visit
Worldwide Emergency Coverage (\$50,000 annual limit)	\$0/visit
Ambulance Services	\$150
Durable Medical Equipment	30% of the cost for Medicare-covered items
Diabetes Self-Monitoring and Supplies	\$0 on self-monitoring training 30% on supplies
Diagnostic Tests, X-Rays and Lab Services	\$0 on Clinical/Diagnostic, 30% on Radiation Therapy/Therapeutic, \$30 on Standard X-rays
Dental Services (Medicare-covered)	\$30/visit
Vision Services (Medicare-covered)	\$30 on eye wear after each cataract surgery \$30 for eye exam
Hearing Exams (Diagnostic hearing exam)	\$30/exam
Immunizations and Preventive Screening Exams (Medicare-covered)	\$0

## OPTIONAL BUY-UP PACKAGE

For Added Dental, Vision and Chiropractic Coverage

\$23/month in addition to your monthly plan premium

<sup>1</sup> Contact the plan for services that apply.

<sup>2</sup> Covered for 100 days per 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.

Prior notification is recommended by not required. For Prior Notification, providers may contact Health Net through the Provider Line printed on the member's ID card. Members may contact Health Net using the Member Services number printed on their ID Card.

Health Net Life Insurance Company and Health Net Insurance of New York, Inc. are Medicare Advantage (MA) Organizations, each with a separate Medicare contract. These contracts are renewed annually and availability of coverage beyond the end of the contract year is not guaranteed. Anyone entitled to Medicare Part A and enrolled in Part B may apply for Health Net's MA plans. You must reside in the plan service area in order to apply for Health Net's MA plans. Medicare beneficiaries can only enroll in these plans during certain times of the year. Limitations, restrictions, copayments and coinsurances may apply. Plan benefits and cost sharing may vary by plan, county, and region.

A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. Your doctor or hospital is not required to agree to accept the plan's terms and conditions, and thus may choose not to treat you, with the exception of emergencies. If your doctor or hospital does not agree to accept our payment terms and conditions, they may choose not to provide health care services to you, except in emergencies. Providers can find the plan's terms and conditions on our website at: [https://www.healthnet.com/pffs\\_terms.pdf](https://www.healthnet.com/pffs_terms.pdf).

Medicare beneficiaries may enroll in Health Net's MA plans through the Centers for Medicare & Medicaid Services On-line Enrollment Center, located at [www.Medicare.gov](http://www.Medicare.gov). For more information contact Health Net at 1-800-200-0410, 8:00 a.m. to 8:00 p.m., Monday through Friday. TTY/TDD users should call 1-800-929-9955, 8:00 a.m. to 8:00 p.m., 7 days a week.

This document is available in alternative formats.

# 2009 BENEFIT HIGHLIGHTS

## HEALTH NET PEARL NORTH CAROLINA OPTION 2

*Ashe, Chatham, Durham, Forsyth, Graham, Jackson, Lincoln, Macon, McDowell, Mecklenburg, Rowan, Wake, and Yancey counties*

<b>MEDICAL COVERAGE</b>	
Monthly Plan Premium	\$36
Calendar Year Out-Of-Pocket Maximum <sup>1</sup>	\$3,350
Inpatient Hospital Care (Includes substance abuse and rehabilitation services)	\$250/day (Days 1-12)
Mental Health Services	Inpatient: \$250 per day (Days 1-12) (190 day lifetime max) Outpatient: \$50/visit
Skilled Nursing Facility <sup>2</sup>	\$0/day (Days 1-14) \$100/day (Days 15-100)
Outpatient Surgery Hospital Ambulatory Surgical Center (ASC)	\$100 Hospital \$100 ASC
Home Health Care	\$0 copay for Medicare-covered home health visits
Physician Services	Primary Care Physician: \$15/visit Specialist: \$30/visit
Chiropractic (Medicare-covered)	\$30/visit
Podiatry (Medicare-covered)	\$30/visit
Routine Physical Exam	\$0 (Covered for 1 exam per year)
Outpatient Substance Abuse Care	\$50/visit
Outpatient Rehabilitation Services	\$30/visit
Emergency Room Visit	\$50
Urgently Needed Care	\$35/visit
Worldwide Emergency Coverage (\$50,000 annual limit)	\$0/visit
Ambulance Services	\$150
Durable Medical Equipment	30% of the cost for Medicare-covered items
Diabetes Self-Monitoring and Supplies	\$0 on self-monitoring training 30% on supplies
Diagnostic Tests, X-Rays and Lab Services	0% on Clinical/Diagnostic, 30% on Radiation Therapy/Therapeutic, \$30 on Standard X-rays

Dental Services (Medicare-covered)	\$30/visit
Vision Services (Medicare-covered)	\$30 on eye wear after each cataract surgery \$30 for eye exam
Hearing Exams (Diagnostic hearing exam)	\$30/exam
Immunizations and Preventive Screening Exams (Medicare-covered)	\$0
<b>OPTIONAL BUY-UP PACKAGE</b>	
For Added Dental, Vision and Chiropractic Coverage	\$23/month in addition to your monthly plan premium

<sup>1</sup> Contact the plan for services that apply.

<sup>2</sup> Covered for 100 days per 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.

Prior notification is recommended but not required. For Prior Notification, providers may contact Health Net through the Provider Line printed on the member's ID card. Members may contact Health Net using the Member Services number printed on their ID Card.

Health Net Life Insurance Company and Health Net Insurance of New York, Inc. are Medicare Advantage (MA) organizations, each with a separate Medicare contract. These contracts are renewed annually and availability of coverage beyond the end of the contract year is not guaranteed. Anyone entitled to Medicare Part A and enrolled in Part B may apply for Health Net's MA plans. You must reside in the plan service area in order to apply for Health Net's MA plans. Medicare beneficiaries can only enroll in these plans during certain times of the year and must continue to pay their Medicare Part B premiums. Limitations, restrictions, copayments and coinsurances may apply. Plan benefits and cost sharing may vary by plan, county, and region.

A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. Your doctor or hospital is not required to agree to accept the plan's terms and conditions, and thus may choose not to treat you, with the exception of emergencies. If your doctor or hospital does not agree to accept our payment terms and conditions, they may choose not to provide health care services to you, except in emergencies. Providers can find the plan's terms and conditions on our website at: [https://www.healthnet.com/pffs\\_terms.pdf](https://www.healthnet.com/pffs_terms.pdf).

Medicare beneficiaries may enroll in Health Net's MA plans through the Centers for Medicare & Medicaid Services On-line Enrollment Center, located at [www.Medicare.gov](http://www.Medicare.gov). For more information contact Health Net at 1-800-200-0410, 8:00 a.m. to 8:00 p.m., Monday through Friday. TTY/TDD users should call 1-800-929-9955, 8:00 a.m. to 8:00 p.m., 7 days a week.

This document is available in alternative formats.

## 2009 BENEFIT HIGHLIGHTS

### HEALTH NET PEARL NORTH CAROLINA OPTION 3

*Alleghany, Avery, Beaufort, Cabarrus, Camden, Carteret, Caswell, Cherokee, Chowan, Clay, Craven, Dare, Davie, Franklin, Gaston, Granville, Hyde, Lee, Mitchell, Moore, New Hanover, Onslow, Pasquotank, Perquimans, Polk, Stokes, Transylvania, Tyrrell, Union, Vance, Warren, Washington, Watauga and Yadkin counties*

<b>MEDICAL COVERAGE</b>	
Monthly Plan Premium	\$66
Calendar Year Out-Of-Pocket Maximum <sup>1</sup>	\$3,350
Inpatient Hospital Care (Includes substance abuse and rehabilitation services)	\$250/day (Days 1-12)
Mental Health Services	Inpatient: \$250/per day (Days 1-12) (190 day lifetime max) Outpatient: \$50/visit
Skilled Nursing Facility <sup>2</sup>	\$0/day (Days 1-14) \$100/day (Days 15-100)
Outpatient Surgery Hospital Ambulatory Surgical Center (ASC)	\$100 Hospital \$100 ASC
Home Health Care	\$0 copay for Medicare-covered home health visits
Physician Services	Primary Care Physician: \$15/visit Specialist: \$30/visit
Chiropractic (Medicare-covered)	\$30/visit
Podiatry (Medicare-covered)	\$30/visit
Routine Physical Exam	\$0 (Covered for 1 exam per year)
Outpatient Substance Abuse Care	\$50/visit
Outpatient Rehabilitation Services	\$30/visit
Emergency Room Visit	\$50
Urgently Needed Care	\$35/visit
Worldwide Emergency Coverage (\$50,000 annual limit)	\$0/visit
Ambulance Services	\$150
Durable Medical Equipment	30% of the cost for Medicare-covered items
Diabetes Self-Monitoring and Supplies	\$0 on self-monitoring training 30% on supplies
Diagnostic Tests, X-Rays and Lab Services	\$0 on Clinical/Diagnostic, 30% on Radiation Therapy/Therapeutic, \$30 on Standard X-rays

Dental Services (Medicare-covered)	\$30/visit
Vision Services (Medicare-covered)	\$30 on eye wear after each cataract surgery \$30 for eye exam
Hearing Exams (Diagnostic hearing exam)	\$30/exam
Immunizations and Preventive Screening Exams (Medicare-covered)	\$0
<b>OPTIONAL BUY-UP PACKAGE</b>	
For Added Dental, Vision and Chiropractic Coverage	\$23/month in addition to your monthly plan premium

<sup>1</sup> Contact the plan for services that apply.

<sup>2</sup> Covered for 100 days per 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.

Prior notification is recommended but not required. For Prior Notification, providers may contact Health Net through the Provider Line printed on the member's ID card. Members may contact Health Net using the Member Services number printed on their ID Card.

Health Net Life Insurance Company and Health Net Insurance of New York, Inc. are Medicare Advantage (MA) organizations, each with a separate Medicare contract. These contracts are renewed annually and availability of coverage beyond the end of the contract year is not guaranteed. Anyone entitled to Medicare Part A and enrolled in Part B may apply for Health Net's MA plans. You must reside in the plan service area in order to apply for Health Net's MA plans. Medicare beneficiaries can only enroll in these plans during certain times of the year and must continue to pay their Medicare Part B premiums. Limitations, restrictions, copayments and coinsurances may apply. Plan benefits and cost sharing may vary by plan, county, and region.

A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. Your doctor or hospital is not required to agree to accept the plan's terms and conditions, and thus may choose not to treat you, with the exception of emergencies. If your doctor or hospital does not agree to accept our payment terms and conditions, they may choose not to provide health care services to you, except in emergencies. Providers can find the plan's terms and conditions on our website at: [https://www.healthnet.com/pffs\\_terms.pdf](https://www.healthnet.com/pffs_terms.pdf).

Medicare beneficiaries may enroll in Health Net's MA plans through the Centers for Medicare & Medicaid Services On-line Enrollment Center, located at [www.Medicare.gov](http://www.Medicare.gov). For more information contact Health Net at 1-800-200-0410, 8:00 a.m. to 8:00 p.m., Monday through Friday. TTY/TDD users should call 1-888-929-9955, 8:00 a.m. to 8:00 p.m., 7 days a week.

This document is available in alternative formats.

## 2009 BENEFIT HIGHLIGHTS

### HEALTH NET PEARL NORTH CAROLINA OPTION 4

*Alamance, Alexander, Buncombe, Burke, Caldwell, Catawba, Currituck, Haywood, Henderson, Madison and Orange counties*

<b>MEDICAL COVERAGE</b>	
Monthly Plan Premium	\$56
Calendar Year Out-Of-Pocket Maximum <sup>1</sup>	\$2,500
Inpatient Hospital Care (Includes substance abuse and rehabilitation services)	\$100/day (days 1-5)
Mental Health Services	Inpatient: \$100 per day days 1-5 (190 day lifetime max) Outpatient: \$25/visit
Skilled Nursing Facility <sup>2</sup>	\$0/day (Days 1-11) \$75/day (Days 12-100)
Outpatient Surgery Hospital Ambulatory Surgical Center (ASC)	\$50 Hospital \$50 ASC
Home Health Care	\$0 copay for Medicare-covered home health visits
Physician Services	Primary Care Physician: \$10/visit Specialist: \$15/visit
Chiropractic (Medicare-covered)	\$20/visit
Podiatry (Medicare-covered)	\$20/visit
Routine Physical Exam	\$0 (Covered for 1 exam per year)
Outpatient Substance Abuse Care	\$25/visit
Outpatient Rehabilitation Services	\$20/visit
Emergency Room Visit	\$50
Urgently Needed Care	\$15/visit
Worldwide Emergency Coverage (\$50,000 annual limit)	\$0/visit
Ambulance Services	\$100
Durable Medical Equipment	30% of the cost for Medicare-covered items
Diabetes Self-Monitoring and Supplies	\$0 on self-monitoring training 30% on supplies
Diagnostic Tests, X-Rays and Lab Services	\$0 on Clinical/Diagnostic, 30% on Radiation Therapy/Therapeutic, \$15 on Standard X-rays

Dental Services (Medicare-covered)	\$15/visit
Vision Services (Medicare-covered)	\$30 on eye wear after each cataract surgery \$0 for eye exam
Hearing Exams (Diagnostic hearing exam)	\$5/exam
Immunizations and Preventive Screening Exams (Medicare-covered)	\$0
<b>OPTIONAL BUY-UP PACKAGE</b>	
For Added Dental, Vision and Chiropractic Coverage	\$23/month in addition to your monthly plan premium

<sup>1</sup> Contact the plan for services that apply.

<sup>2</sup> Covered for 100 days per 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.

Prior notification is recommended but not required. For Prior Notification, providers may contact Health Net through the Provider Line printed on the member's ID card. Members may contact Health Net using the Member Services number printed on their ID Card.

Health Net Life Insurance Company and Health Net Insurance of New York, Inc. are Medicare Advantage (MA) organizations, each with a separate Medicare contract. These contracts are renewed annually and availability of coverage beyond the end of the contract year is not guaranteed. Anyone entitled to Medicare Part A and enrolled in Part B may apply for Health Net's MA plans. You must reside in the plan service area in order to apply for Health Net's MA plans. Medicare beneficiaries can only enroll in these plans during certain times of the year and must continue to pay their Medicare Part B premiums. Limitations, restrictions, copayments and coinsurances may apply. Plan benefits and cost sharing may vary by plan, county, and region.

A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. Your doctor or hospital is not required to agree to accept the plan's terms and conditions, and thus may choose not to treat you, with the exception of emergencies. If your doctor or hospital does not agree to accept our payment terms and conditions, they may choose not to provide health care services to you, except in emergencies. Providers can find the plan's terms and conditions on our website at: [https://www.healthnet.com/pffs\\_terms.pdf](https://www.healthnet.com/pffs_terms.pdf).

Medicare beneficiaries may enroll in Health Net's MA plans through the Centers for Medicare & Medicaid Services On-line Enrollment Center, located at [www.Medicare.gov](http://www.Medicare.gov). For more information contact Health Net at 1-800-200-0410, 8:00 a.m. to 8:00 p.m., Monday through Friday. TTY/TDD users should call 1-800-929-9955, 8:00 a.m. to 8:00 p.m., 7 days a week.

This document is available in alternative formats.



# 2009 BENEFIT HIGHLIGHTS

## HEALTH NET PEARL NORTH CAROLINA OPTION 5

*Ashe, Brunswick, Chatham, Davidson, Durham, Forsyth, Graham, Guilford, Jackson, Lincoln, Macon, McDowell, Pender, Person, Randolph, Rockingham, Rowan and Yancey counties*

<b>MEDICAL COVERAGE</b>	
Monthly Plan Premium	\$96
Calendar Year Out-Of-Pocket Maximum <sup>1</sup>	\$2,500
Inpatient Hospital Care (Includes substance abuse and rehabilitation services)	\$100/day (days 1-5)
Mental Health Services	Inpatient: \$100 per day days 1-5 (190 day lifetime max) Outpatient: \$25/visit
Skilled Nursing Facility <sup>2</sup>	\$0/day (Days 1-11) \$75/day (Days 12-100)
Outpatient Surgery Hospital Ambulatory Surgical Center (ASC)	\$50 Hospital \$50 ASC
Home Health Care	\$0 copay for Medicare-covered home health visits
Physician Services	Primary Care Physician: \$10/visit Specialist: \$15/visit
Chiropractic (Medicare-covered)	\$20/visit
Podiatry (Medicare-covered)	\$20/visit
Routine Physical Exam	\$0 (Covered for 1 exam per year)
Outpatient Substance Abuse Care	\$25/visit
Outpatient Rehabilitation Services	\$20/visit
Emergency Room Visit	\$50
Urgently Needed Care	\$15/visit
Worldwide Emergency Coverage (\$50,000 annual limit)	\$0/visit
Ambulance Services	\$100
Durable Medical Equipment	30% of the cost for Medicare-covered items
Diabetes Self-Monitoring and Supplies	\$0 on self-monitoring training 30% on supplies
Diagnostic Tests, X-Rays and Lab Services	\$0 on Clinical/Diagnostic, 30% on Radiation Therapy/Therapeutic, \$15 on Standard X-rays

Dental Services (Medicare-covered)	\$15/visit
Vision Services (Medicare-covered)	\$30 on eye wear after each cataract surgery \$0 for eye exam
Hearing Exams (Diagnostic hearing exam)	\$5/exam
Immunizations and Preventive Screening Exams (Medicare-covered)	\$0
<b>OPTIONAL BUY-UP PACKAGE</b>	
For Added Dental, Vision and Chiropractic Coverage	\$23/month in addition to your monthly plan premium

<sup>1</sup> Contact the plan for services that apply.

<sup>2</sup> Covered for 100 days per 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.

Prior notification is recommended but not required. For Prior Notification, providers may contact Health Net through the Provider Line printed on the member's ID card. Members may contact Health Net using the Member Services number printed on their ID Card.

Health Net Life Insurance Company and Health Net Insurance of New York, Inc. are Medicare Advantage (MA) organizations, each with a separate Medicare contract. These contracts are renewed annually and availability of coverage beyond the end of the contract year is not guaranteed. Anyone entitled to Medicare Part A and enrolled in Part B may apply for Health Net's MA plans. You must reside in the plan service area in order to apply for Health Net's MA plans. Medicare beneficiaries can only enroll in these plans during certain times of the year and must continue to pay their Medicare Part B premiums. Limitations, restrictions, copayments and coinsurances may apply. Plan benefits and cost sharing may vary by plan, county, and region.

A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. Your doctor or hospital is not required to agree to accept the plan's terms and conditions, and thus may choose not to treat you, with the exception of emergencies. If your doctor or hospital does not agree to accept our payment terms and conditions, they may choose not to provide health care services to you, except in emergencies. Providers can find the plan's terms and conditions on our website at: [https://www.healthnet.com/pffs\\_terms.pdf](https://www.healthnet.com/pffs_terms.pdf).

Medicare beneficiaries may enroll in Health Net's MA plans through the Centers for Medicare & Medicaid Services On-line Enrollment Center, located at [www.Medicare.gov](http://www.Medicare.gov). For more information contact Health Net at 1-800-200-0410, 8:00 a.m. to 8:00 p.m., Monday through Friday. TTY/TDD users should call 1-888-929-9955, 8:00 a.m. to 8:00 p.m., 7 days a week.

This document is available in alternative formats.

# 2009 BENEFIT HIGHLIGHTS

## HEALTH NET PEARL NORTH CAROLINA OPTION 6

*Alleghany, Avery, Beaufort, Cabarrus, Camden, Caswell, Cherokee, Chowan, Clay, Davie, Gates, Granville, Hyde, Martin, Mecklenberg, Mitchell, New Hanover, Onslow, Pasquotank, Perquimans, Polk, Stokes, Transylvania, Tyrrell, Union, Wake, Washington and Watauga counties*

<b>MEDICAL COVERAGE</b>	
Monthly Plan Premium	\$126
Calendar Year Out-Of-Pocket Maximum <sup>1</sup>	\$2,500
Inpatient Hospital Care (Includes substance abuse and rehabilitation services)	\$100/day (days 1-5)
Mental Health Services	Inpatient: \$100 per day days 1-5 (190 day lifetime max) Outpatient: \$25/visit
Skilled Nursing Facility <sup>2</sup>	\$0/day (Days 1-11) \$75/day (Days 12-100)
Outpatient Surgery Hospital Ambulatory Surgical Center (ASC)	\$50 Hospital \$50 ASC
Home Health Care	\$0 copay for Medicare-covered home health visits
Physician Services	Primary Care Physician: \$10/visit Specialist: \$15/visit
Chiropractic (Medicare-covered)	\$20/visit
Podiatry (Medicare-covered)	\$20/visit
Routine Physical Exam	\$0 (Covered for 1 exam per year)
Outpatient Substance Abuse Care	\$25/visit
Outpatient Rehabilitation Services	\$20/visit
Emergency Room Visit	\$50
Urgently Needed Care	\$15/visit
Worldwide Emergency Coverage (\$50,000 annual limit)	\$0/visit
Ambulance Services	\$100
Durable Medical Equipment	30% of the cost for Medicare-covered items
Diabetes Self-Monitoring and Supplies	\$0 on self-monitoring training 30% on supplies
Diagnostic Tests, X-Rays and Lab Services	\$0 on Clinical/Diagnostic, 30% on Radiation Therapy/Therapeutic, \$15 on Standard X-rays

Dental Services (Medicare-covered)	\$15/visit
Vision Services (Medicare-covered)	\$30 on eye wear after each cataract surgery \$0 for eye exam
Hearing Exams (Diagnostic hearing exam)	\$5/exam
Immunizations and Preventive Screening Exams (Medicare-covered)	\$0
<b>OPTIONAL BUY-UP PACKAGE</b>	
For Added Dental, Vision and Chiropractic Coverage	\$23/month in addition to your monthly plan premium

<sup>1</sup> Contact the plan for services that apply.

<sup>2</sup> Covered for 100 days per 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.

Prior notification is recommended but not required. For Prior Notification, providers may contact Health Net through the Provider Line printed on the member's ID card. Members may contact Health Net using the Member Services number printed on their ID Card.

Health Net Life Insurance Company and Health Net Insurance of New York, Inc. are Medicare Advantage (MA) organizations, each with a separate Medicare contract. These contracts are renewed annually and availability of coverage beyond the end of the contract year is not guaranteed. Anyone entitled to Medicare Part A and enrolled in Part B may apply for Health Net's MA plans. You must reside in the plan service area in order to apply for Health Net's MA plans. Medicare beneficiaries can only enroll in these plans during certain times of the year and must continue to pay their Medicare Part B premiums. Limitations, restrictions, copayments and coinsurances may apply. Plan benefits and cost sharing may vary by plan, county, and region.

A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. Your doctor or hospital is not required to agree to accept the plan's terms and conditions, and thus may choose not to treat you, with the exception of emergencies. If your doctor or hospital does not agree to accept our payment terms and conditions, they may choose not to provide health care services to you, except in emergencies. Providers can find the plan's terms and conditions on our website at: [https://www.healthnet.com/pffs\\_terms.pdf](https://www.healthnet.com/pffs_terms.pdf).

Medicare beneficiaries may enroll in Health Net's MA plans through the Centers for Medicare & Medicaid Services On-line Enrollment Center, located at [www.Medicare.gov](http://www.Medicare.gov). For more information contact Health Net at 1-800-200-0410, 8:00 a.m. to 8:00 p.m., Monday through Friday. TTY/TDD users should call 1-800-929-9955, 8:00 a.m. to 8:00 p.m., 7 days a week.

This document is available in alternative formats.