

FREQUENTLY ASKED QUESTIONS (FAQs)

Health Care Providers

For Health Net of Connecticut, Inc., Health Net of New York, Inc., Health Net Insurance Company of New York, Inc., and Health Net of New Jersey, Inc. Participating Providers

1. What was announced today?

UnitedHealthcare has completed the acquisition of Health Net's Northeast licensed subsidiaries and obtained rights to renew Health Net's membership in Connecticut, New York and New Jersey.

Health Net continues to be responsible for most administrative functions, other than contract renewals, to commercial, Medicare and Medicaid members and providers, including claims payment, provider relations, provider services, prior authorizations, concurrent reviews, recredentialing, appeals and grievances, and member services for all business enrolled in Health Net benefit plans until Health Net members enroll with UnitedHealthcare or another carrier or drop coverage.

2. Is UnitedHealthcare acquiring all of Health Net's operations?

No. UnitedHealthcare is only acquiring Health Net's Northeast licensed subsidiaries and obtaining rights to renew Health Net's membership in Connecticut, New York and New Jersey.

3. I currently participate with both UnitedHealthcare and Health Net in the Northeast. How will this impact my current contracts with each?

Health Net's current provider agreements remain in effect. The terms and compensation under your Health Net agreement apply to services you provide to Health Net members. Providers do not need to sign a new contract with UnitedHealthcare to continue to see Health Net members.

Since this transaction has closed, UnitedHealthcare now owns HNNE's licensed subsidiaries and will assume responsibility for contract renewals.

Health Net's contracted vendors for specialty management services – Quest Laboratories, CareCore National, Landmark Healthcare, OrthoNet, and Doral Dental – will continue to provide services to Health Net members.

Under the administrative services agreements between UnitedHealthcare and Health Net, Health Net continues to be responsible for most administrative functions, other than contract renewals, to commercial, Medicare and Medicaid members and providers, including claims payment, provider relations, provider services, prior authorizations, concurrent reviews, recredentialing, appeals and grievances, and member services for all business enrolled in Health Net benefit plans until Health Net members enroll with UnitedHealthcare or another carrier or drop coverage. Subsequently, Health Net will continue to manage claims and other administrative functions through the claims run-out period. UnitedHealthcare and Health Net are working together to ensure full continuity of both members' coverage and providers' reimbursement during the time that the Health Net benefit policies remain in force under existing Health Net contracts.

4. If I am currently a UnitedHealthcare-contracted physician, facility or health care professional will I have to sign a new contract with UnitedHealthcare?

No. Your current contract with UnitedHealthcare remains unchanged as a result of this transaction.

5. How will I be reimbursed?

Your Health Net contracted rates in the Northeast continue to apply to Health Net members in the Northeast. Providers should continue to submit claims for Health Net members to Health Net. Claims will continue to be processed in accordance with Health Net policy and providers' Health Net contracted rates.

6. Are my Health Net patients still covered by Health Net? Should I still submit claims to Health Net?

Your Health Net members in the Northeast (commercial, Medicare and Medicaid) continue to be covered under their Health Net benefit plan until they enroll with UnitedHealthcare or another carrier, or drop coverage. Health Net continues to be responsible for most administrative functions. You should continue to submit claims for Health Net members to Health Net. The Health Net claims, medical management and reimbursement policies and protocols remain in place.

Commercial:

Upon Health Net commercial plans' renewal dates, they may choose to renew with UnitedHealthcare or another carrier or drop coverage. As with any change in carrier, once the client chooses UnitedHealthcare, the member will receive a UnitedHealthcare medical identification (ID) card and UnitedHealthcare administrative processes should be followed.

Medicare Advantage (MA):

Health Net of Connecticut Inc.'s Medicare Advantage (MA) members continue to be covered by Health Net of Connecticut throughout 2010.

Medicaid (Healthy Options):

Health Net of New Jersey, Inc.'s Healthy Options (NJ Medicaid/Family Care) plan will be transitioned to UnitedHealthcare's AmeriChoice plan upon approval by the Division of Medical Assistance and Health Services (DMAHS). Healthy Options members will be notified prior to the transition date of their option to either remain with AmeriChoice or select another health plan. Those members who choose to remain with AmeriChoice will automatically be transitioned and will receive an AmeriChoice ID card.

TRICARE:

The UnitedHealthcare acquisition of Health Net's Northeast licenses and rights to renew membership does not affect your TRICARE provider contract.

7. For my Health Net patients currently undergoing treatment in the Northeast, whose policies do I follow? What happens if the customer/employer group renews while a member is in the process of receiving care?

Until members transition to a UnitedHealthcare benefit plan or another carrier, or drop coverage, members continue to be covered under the terms of their Health Net plan. The Health Net claims, medical management and reimbursement policies and protocols will apply. Members have the option to renew coverage with UnitedHealthcare or another carrier. If they choose a UnitedHealthcare or Oxford product, the member is subject to the terms and conditions of their new policy, including UnitedHealthcare's transition of care policy.

8. Will UnitedHealthcare notify health care professionals of a change in carrier, or will it be the patient's responsibility?

As with any change in carrier, the member will be sent a new ID card and should present that to his or her doctor, pharmacy or other health care professional to advise them of a change in coverage. Health Net also encourages members to contact their physicians to notify them of that change.

9. How will outstanding Health Net claims in the Northeast be paid after the transaction closes?

Health Net will process all claims for Health Net members in accordance with the terms of the member's benefit and the provider's Health Net contract.

10. Should I continue to work with my Health Net provider relations representative in the Northeast?

Yes, you should continue to work with your Health Net representative.

For contracting and contract renewals, providers should work with a UnitedHealthcare representative.

11. If a member has received prior authorization for a service to be performed past the transition date to a UnitedHealthcare plan, will this service continue to be approved through the UnitedHealthcare plan?

Refer to the UnitedHealthcare Web site for information regarding UnitedHealthcare transition of care policies and procedures.

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