

# A BETTER DECISION STARTS WITH A CLEAR UNDERSTANDING

**Small Business Group**  
**Flex Net**  
(22A)



**Health Net®**  
A BETTER DECISION

**When is the best time to know what your health plan covers? Now. Before you enroll, and well before you need care.**

**At Health Net, we keep things simple, so that you can make your health care decisions with confidence.**

## WHAT IS FLEX NET?

Flex Net is an out-of-area managed indemnity plan that combines traditional fee-for-service coverage and managed care. Flex Net is for people who live outside of both the Health Net of California and First Health (our nationwide coverage area) networks.

This plan is available in the U.S. wherever there are lapses in network coverage.

Members pay for all services out-of-pocket first and then submit claims to Health Net for reimbursement.

**Call Health Net at 1-800-361-3366 to determine if you live in an out-of-network area.** Our networks change frequently, so please call to ensure if you are currently eligible for this plan.

### HOW MUCH WILL YOU OWE?

The Flex Net plan requires that members pay the entire cost of treatments at the time of service and submit a claim form to Health Net for reimbursement.

After reimbursement, the member may still be responsible for:

- 1) **Deductible** – This is the amount you must pay for services *before* the plan begins covering them. This amount *may not* apply to routine and preventive care visits.
- 2) **Copayments** – These are the set dollar amounts you pay, usually for office visits.
- 3) **Coinsurance** – This is the percentage that you must pay for *most* covered services under your plan.

A better decision means looking carefully at the benefit details that follow, so that you have a clear understanding of what is covered, at what expense, *before* you enroll.

### HOW TO ACCESS CARE

Your personal doctor plays a key role in helping you stay healthy. A good decision is to find a doctor with whom you are comfortable, and be sure you visit that doctor on a regular basis for the routine care he or she recommends.

With the Flex Net plan, visits to specialists and facilities can be made without a referral from your personal doctor.

### EMERGENCY CARE

If you feel that you are in an emergency, call 911 or go immediately to the nearest hospital emergency room.

Emergency visits are covered at the same rate, regardless of whether or not the hospital is in the Health Net PPO network. What's more, you are covered for emergency visits anywhere in the world.

## WHAT ELSE DO YOU GET?

### DECISION POWER<sup>SM</sup>

If you face a significant medical condition or procedure, you may ask: How do I learn more? What are my options? Maybe you'll be too panicked to get this far.

Decision Power puts you in touch with professional Health Coaches, 24 hours a day, seven days a week. Whether you are facing an upcoming surgery or an ongoing health concern, a Health Coach is there to support you, each step of the way. The goal is to help you maintain optimal health, and work closely with your doctor in making health care decisions with confidence.

**Of those who have used Decision Power – 80% have more confidence in dealing with their health and medical concerns. 80% say talking with a Health Coach helped them to improve their condition. 95% would recommend the service to a friend.<sup>4</sup>**

### HEALTHGATE<sup>®</sup> EBM SOLUTIONS

Better health care decisions begin with learning about your condition. But, where can you find information that is trustworthy and easy to understand?

Once enrolled in a Health Net plan, you can log in at [www.healthnet.com](http://www.healthnet.com) to access HealthGate EBM Solutions. Here you will be able to research health improvement tips, treatment options and other important information. You can search by symptoms or diagnosed condition.

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<sup>4</sup>Health Dialog Services Corporation member survey

# FLEX NET

## KEY BENEFITS<sup>1</sup>

### Plan maximums

Annual deductible
Maximum out-of-pocket costs
Lifetime maximum

## Flex Net Fee-for-Service (22A)<sup>2</sup>

\$300 single / \$900 family
\$1,500 single / \$4,500 family
\$1,000,000

### Professional services

Office visit	20%
Well-Child care (through age 17), including child immunizations	20%
Adult Preventive Care (age 18 and older)	20%
Adult annual routine physical exam (age 18 and older)	Not covered
Specialist consultation	20%
X-ray / Laboratory (includes mammograms) <sup>3</sup>	20%
Rehabilitation therapy (includes physical, speech, occupational, cardiac and pulmonary rehabilitation therapy)	20% (60 visits per calendar year)
Self-injectables	20%

### Hospital services<sup>3</sup>

Inpatient care	20%
Outpatient facility services	20%
Outpatient surgery (hospital or outpatient surgery center charges only)	20%
Skilled nursing facility	20% (60 days per calendar year)

### Emergency services

Professional services	20%
Emergency room facility	20%
Urgent care facility	20%
Ambulance services (ground and air)	20%

### Behavioral health services<sup>3</sup>

Severe mental health (outpatient / inpatient) <sup>4</sup>	20% / 20%
Non-severe mental health (outpatient / inpatient)	50% (20 visits per calendar year, \$50 maximum payable per visit) / 50% (30 days per calendar year)
Acute care detoxification	50% (3 days per calendar year)

### Other services

Durable medical equipment <sup>3</sup>	20%
Diabetic supplies	20%
Chiropractic care	20% (15 visits per calendar year, \$25 maximum payable per visit)
Acupuncture	Not covered

### Prescription drug coverage

Deductible (per member, per calendar year)	\$75
Prescription drugs (up to a 30 day supply)	20%

<sup>1</sup>This is a summary of plan benefits. Please refer to the Plan Documents for more details. All forms, brochures and current standard rates are available online for print. Flex Net is only available to OOA subscribers, subject to standard OOA guidelines. Health Net must be the sole carrier.

<sup>2</sup>Percentage is a portion of the covered expense based on (C & R) Customary & Reasonable. You are also responsible for any charges in excess of the covered expense.

<sup>3</sup>These services require prior certification. If prior certification is not acquired benefits are reduced to 50%.

<sup>4</sup>The following conditions are considered severe mental illnesses: schizophrenia, schizoaffective disorder, bipolar disorder, major depressive disorders, panic disorders, obsessive-compulsive disorder, pervasive developmental disorder or autism, anorexia nervosa, bulimia nervosa, serious emotional disturbances of children under age 18. Refer to your Plan Documents for other mental health services.

## HOSPITAL COMPARISON REPORT

Not all hospitals provide the same outcomes for the same procedures. In addition, not all hospitals have the same services and experience.

If your PCP has admitting privileges to more than one hospital, log in at [www.healthnet.com](http://www.healthnet.com) to access our Hospital Comparison Report. The report lets you compare our network hospitals based on experience with the procedure, patient volume, ICU staffing and more.

## WELL REWARDS

We give you the credit you deserve for taking charge of your health. Rewards include exclusive member discounts for health-related products and services.

## MHN, INC. – WITH A MIND ON YOUR FUTURE

Good health is not always wrapped up in physical well being. It extends to the emotional and behavioral concerns that we sometimes don't see, or are afraid to address. That is why your benefit plan includes emotional and behavioral health coverage from MHN, Inc.

Maybe you are undergoing major changes in your life. Perhaps you are feeling run down, or that something is just not right. Sometimes, the answer lies in knowing you have support.

When you call MHN, you can speak with a specialist who will listen to your concerns with sensitivity, while fully respecting your privacy. If appropriate, you will be referred to a clinician who can further evaluate your situation and recommend a treatment plan. Either way, the decisions are yours to make. We're here to provide an easy and confidential first step.

You have access to Decision Power<sup>SM</sup> through your current enrollment with any of the following Health Net companies: Health Net of Arizona, Inc.; Health Net of California, Inc.; Health Net of Connecticut, Inc.; Health Net of New Jersey, Inc.; Health Net of New York, Inc.; Health Net Health Plan of Oregon, Inc.; Health Net Insurance of Connecticut, Inc.; Health Net Insurance of New York, Inc.; Health Net Life Insurance Company.

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