SMALL BUSINESS GROUP

PLAN OVERVIEW

Value EOA 40 (787)



About Health Net

Health Net, Inc. is one of the nation's largest publicly traded managed health care companies with over 6.3 million customers in 27 states and the District of Columbia, and more than 25 years of continuous operations. Our mission is to help our customers be healthy, secure and comfortable.

About Your EOA Plan

An EOA (Elect Open Access) health plan is an HMO (Health Maintenance Organization) plan with the added freedom of self-referral to specialists within the Health Net PPO provider network. When you enroll, you will need to choose a primary care physician (PCP). This doctor will be the first person you visit when you are sick, and the physician you visit for routine care. Your PCP belongs to a larger group of health professionals, called a Participating Physician Group.

With the EOA plan, you can access care from most specialists within the Health Net PPO network *without a PCP referral*. If you need facility-based care (excluding emergencies), your PCP will refer you to a hospital or facility within the group, and take care of any necessary pre-authorizations. If you feel that you are in an emergency, call 911 or go immediately to the nearest hospital emergency room. Emergency visits are covered anywhere in the world regardless of whether or not the hospital belongs to your assigned physician group.

To choose a PCP, visit www.healthnet.com, and click on *Search Our Doctor Network*. Once you do:

- 1) Click on California.
- 2) Select your plan type under HMO Group Plans.
- 3) Choose your search options by physician name, details or location.
- 4) Look for a doctor with the words "accepting new patients."
- 5) Click on the physician name to see their physician group and learn more.

Tip: Once you have identified the PCP for you and each covered family member, be sure to write down the PCP's ID#, as well as the Enrollment ID# of the physician group.

HOW MUCH WILL YOU OWE?

An advantage of enrolling in an EOA plan is that you have great flexibility in controlling your out-of-pocket expenses since you can choose from both HMO and PPO services and costs. Most office visits to a PCP or specialist require a modest copayment (set dollar amount). Some services require a percentage of the overall cost (coinsurance ¹). For a partial list of the benefits and service costs of your plan, refer to the plan summary contained in this document. For full details on the terms and conditions of coverage of your plan, reference your Evidence of Coverage booklet.

What else do you get?

Being a member of the Health Net family means having access to a broad variety of tools that can help you make better decisions about your health. Some of these tools are listed below.

DECISION POWERSM

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, every step of the way.

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. Want to compare them against each other? Log in at www.healthnet.com and click on "Compare hospitals" to access our Hospital Comparison Report. The report lets you compare our network hospitals based on experience with procedures, patient volume, intensive care unit staffing and more.

¹ Example: If the plan allows \$100 for a service, and your coinsurance is 20%, you pay \$20 and Health Net pays \$80.

KEY BENEFITS ¹	value eoa 40 (787)
PLAN MAXIMUMS	
Out-of-pocket maximum	\$4,500 single / \$9,000 family
Lifetime medical benefit maximum	No maximum
PROFESSIONAL SERVICES	
Office visit	HMO: \$40 copayment/ PPO: \$55 copayment ⁷
Well child care (including immunizations)	HMO: \$40 copayment (birth through age 2 covered in full), PPO: \$55 copayment ⁷
Adult preventive care (age 17 and older)	HMO: \$40 copayment/ PPO: \$55 copayment ⁷
Annual routine physical examination (age 17 and older)	Not covered
Specialist consultation	HMO: \$40 copayment, PPO: \$55 copayment ⁷
X-ray and laboratory procedures ^{2,4}	Covered in full
Physical therapy, speech therapy, occupational therapy, cardiac rehabilitation therapy and pulmonary rehabilitation therapy	HMO: \$40 copayment, PPO: \$55 copayment ⁷ (12 visits per calendar year)
Self-injectable drugs	30%
HOSPITAL SERVICES ³	
Inpatient hospital facility services (includes maternity)	40%
Outpatient facility services (other than surgery)	40%
Outpatient surgery (hospital or outpatient surgery center charges only) ⁴	40%
Skilled nursing facility	Days 1–10: covered in full, Days 11–100: \$25 per day
EMERGENCY SERVICES	
Professional services	Covered in full
Emergency room facility (copayment waived if admitted)	\$100 copayment
Urgent care facility	\$50 copayment
Ambulance services (ground and air)	\$100 copayment
OTHER SERVICES	
Durable medical equipment and orthotics ³	50% (\$2,000 maximum per calendar year)
Diabetic equipment	20%
Acupuncture, Chiropractic services ⁵	Optional rider available
PRESCRIPTION DRUG COVERAGE ⁶	
Brand name calendar year deductible (per covered person)	\$250
Prescription drugs (up to a 30-day supply)	\$15 Level I \$30 Level II \$50 Level III

¹ This is a summary of your benefits. It does not include all services, limitations, exclusions. Please refer to the Evidence of Coverage for terms and conditions of coverage.

² Complex radiology (includes CT, SPECT, PET, MUGA and MRI) requires a \$100 copayment. MRI, MUGA, PET and SPECT services are not covered through PPO level.

³ Under ELECT Open Access, inpatient hospital and professional services and durable medical equipment are covered when provided or coordinated by the Primary Care Physician only and approved by the PPG/IPA. Inpatient care and outpatient services are not covered on the PPO level.

⁴ Under ELECT Open Access, radiographic X-ray, laboratory and surgery services will be covered only when provided or coordinated by your Primary Care Physician and approved by the PPG/IPA, except when provided at a PPG physician's office.

⁵ Chiropractic and/or Acupuncture rider coverage is available as an optional benefit with the EOA plan shown above. Features of Health Net's chiropractic coverage include: \$10 per visit copayment and up to 20 visits per calendar year.

⁶ Prescription drugs filled through mail order (up to a 90 day supply) require twice the level of copayment. For details regarding a specific drug, go to www.healthnet.com.

 $^{^{7}}$ Self referral to a PPO network physician.

PHARMACY LOCATOR

Looking for a pharmacy close by? That has a drivethru? That's open 24 hours a day, seven days a week? Our pharmacy locator can help with these and several other pharmacy search criteria. To access this tool, log in at www.healthnet.com, click on "View Prescription Coverage" then on "Find a Pharmacy."

IT'S YOUR LIFESM

Life comes with a series of challenges that don't always have clear solutions. Our online It's Your Life - Wellsite can help. It's Your Life on www.healthnet.com has articles and information about four areas of life: emotional health, health and fitness, family and work, and financial and legal. To access this wellsite, log in at www.healthnet.com, click on "Make an Informed Decision" then "It's Your Life - Wellsite" and choose from the drop-down menu.

Questions?

If you have questions regarding your plan, please call the Customer Contact Center phone number listed on your ID card.

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