

Large Business Group 2023 Plan Portfolio

YOUR GUIDE TO PLANS FOR 51+ EMPLOYEES



Table of Contents

- Smart, Sustainable Solutions 3
- Large Group Portfolio: Expanding Your Sales Opportunities 4
- Enhanced Choice Packages: We Invite You to be Choosy!..... 9
- Product and Network Details10
- Supplemental Coverage 11
- Behavioral Health.....12
- \$0 Copay Telemedicine13
- Decision Power: Health & Wellness14
- Focus on Early Access and Prevention.....15
- Contact Information..... Back cover

Smart, Sustainable Solutions

When it comes to health care, experience matters, and for 80+ years, Health Net has been making quality health care easier to get and more affordable. We're your source for Large Group products with rich benefit plans without the big price tag.

Product portfolio

To help keep your business growing, our Large Group portfolio delivers a strong mix of whole-health benefits and extra-value programs – making our plans attractive to your clients and easy for you to sell.

Our portfolio includes a full range of PPO products that make it easy for you to offer affordable plan choices that give your clients and their employees peace of mind – helping them to live well and work well.



Putting the power of Centene® to work for you

A wholly owned subsidiary of Centene Corporation, Health Net has the financial strength to innovate for the health of our community.

- #26 on the 2022 Fortune 500 list.¹
- Total assets of approximately \$78.4 billion as of 12/31/2021.²
- 2022 expected revenue of \$135.9 –137.9 billion.²
- \$29.8 billion in cash and investments.²



¹Source: 2022 Fortune 500 list (health care: insurance and managed care industry)

²2021 10-K, earnings release, and Annual Statement. <https://investors.centene.com/financial-info/financial-results>

Large Group Portfolio: Expanding Your Sales Opportunities

To help you sell Health Net Large Group products, refer to our benefit grid below. Detailed plan overviews are available at healthnetoregon.com/broker > *Forms & Brochures* > *Large Business Groups*.

Health Net's Plan Portfolio gives you more ways to satisfy your customers and expand your sales opportunities.

We built our portfolio for large group employers seeking the simplicity and innovation of our best-selling plans and networks – with sustainable cost savings. Knowing our customers helps us meet their health care needs by designing coverage options they can afford – and you can sell!

Our 2023 portfolio continues to include our most affordable employer group plan solutions. Our broad PPO options and Flexible High Deductible Health Plans (HSA-qualified) will help you find the right benefits to suit your client's business needs.

PPO

PPO insurance plans make it possible for employees to get the flexibility they want when it comes to a health care provider.

Insureds can go to any doctor or hospital in our statewide PPO Network. They can even see a provider outside of our network.

We offer a wide range of traditional PPO plans supported by an extensive medical and pharmacy network.


HSA-Compatible PPO

Our low-premium, high-deductible PPO insurance plans give employees broad benefits and access to our statewide PPO network, along with the tax-saving potential of a Health Savings Account (HSA).


These smart plans are an effective way for clients to take a consumer-directed health care approach to the way they offer benefits. HSA integration is available on our high deductible health plans through HealthEquity.




2023

 Plan name	Member(s) In-Network responsibility									
	Deductible ¹ (single / family)	Out-of-pocket maximum ² (single / family)	Office / specialist visit	Coinsurance ³ (in-network / out-of-network)	Lab / x-ray	CT / MRI / PET / SPEC	Inpatient hospital	Outpatient surgery (ASC / hospital)	Emergency room (copay waived if admitted)	Urgent care
Advantage LX PPO										
LX20-500-2-4000	\$500 / \$1,000	\$4,000 / \$8,000	\$20 / \$40	20% / 40%	\$20	20% ⁴	20%	20% / 10%	\$250 + 20%	\$50
LX25-1000-2-5000	\$1,000 / \$2,000	\$5,000 / \$10,000	\$25 / \$50	20% / 40%	\$20	20% ⁴	20%	20% / 10%	\$250 + 20%	\$50
Advantage PPO										
A10-0-2-4000	\$0 / \$0	\$4,000 / \$8,000	\$10 / \$20	20% / 40%	\$20	20%	20%	20% / 10%	\$250 + 20%	\$50
A15-250-2-4000	\$250 / \$500	\$4,000 / \$8,000	\$15 / \$30	20% / 40%	\$20	20%	20%	20% / 10%	\$250 + 20%	\$50
A20-500-2-4000	\$500 / \$1,000	\$4,000 / \$8,000	\$20 / \$40	20% / 40%	\$20	20%	20%	20% / 10%	\$250 + 20%	\$50
A20-750-2-5000	\$750 / \$1,500	\$5,000 / \$10,000	\$20 / \$40	20% / 40%	\$20	20%	20%	20% / 10%	\$250 + 20%	\$50
A20-2000-2-6600	\$2,000 / \$4,000	\$6,600 / \$13,200	\$20 / \$40	20% / 40%	\$20	20%	20%	20% / 10%	\$250 + 20%	\$50
A25-1000-2-5000	\$1,000 / \$2,000	\$5,000 / \$10,000	\$25 / \$50	20% / 40%	\$20	20%	20%	20% / 10%	\$250 + 20%	\$50
A30-1500-2-6600	\$1,500 / \$3,000	\$6,600 / \$13,200	\$30 / \$60	20% / 40%	\$20	20%	20%	20% / 10%	\$250 + 20%	\$50
A30-2500-3-6600	\$2,500 / \$5,000	\$6,600 / \$13,200	\$30 / \$60	30% / 50%	\$20	30%	30%	30% / 20%	\$250 + 30%	\$50
A30-3000-2-7350	\$3,000 / \$6,000	\$7,350 / \$14,700	\$30 / \$60	20% / 40%	\$20	20%	20%	20% / 10%	\$250 + 20%	\$50
A35-3000-3-7350	\$3,000 / \$6,000	\$7,350 / \$14,700	\$35 / \$70	30% / 50%	\$20	30%	30%	30% / 20%	\$250 + 30%	\$50
A35-5000-2-7350	\$5,000 / \$10,000	\$7,350 / \$14,700	\$35 / \$70	20% / 40%	\$20	20%	20%	20% / 10%	\$250 + 20%	\$50
A35-5000-3-7350	\$5,000 / \$10,000	\$7,350 / \$14,700	\$35 / \$70	30% / 50%	\$20	30%	30%	30% / 20%	\$250 + 30%	\$50
Value PPO										
V20-500-2-4000	\$500 / \$1,000	\$4,000 / \$8,000	\$20 / \$40	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
V25-1000-2-5000	\$1,000 / \$2,000	\$5,000 / \$10,000	\$25 / \$50	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
V30-2000-2-6000	\$2,000 / \$4,000	\$6,000 / \$12,000	\$30 / \$60	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
V35-5000-2-7350	\$5,000 / \$10,000	\$7,350 / \$14,700	\$35 / \$70	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
Essentials PPO										
E25-1000-2-5000	\$1,000 / \$2,000	\$5,000 / \$10,000	\$25 / \$50	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
E30-2000-2-6600	\$2,000 / \$4,000	\$6,600 / \$13,200	\$30 / \$60	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
E35-3000-2-7350	\$3,000 / \$6,000	\$7,350 / \$14,700	\$35 / \$70	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
E50-3000-5-7350	\$3,000 / \$6,000	\$7,350 / \$14,700	\$50 / \$100	50% / 50%	50%	50%	50%	50% / 40%	50%	\$50
E35-4000-2-7350	\$4,000 / \$8,000	\$7,350 / \$14,700	\$35 / \$70	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
E35-5000-2-7350	\$5,000 / \$10,000	\$7,350 / \$14,700	\$35 / \$70	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
E50-5000-5-7350	\$5,000 / \$10,000	\$7,350 / \$14,700	\$50 / \$100	50% / 50%	50%	50%	50%	50% / 40%	50%	\$50
E35-6000-2-8150	\$6,000 / \$12,000	\$8,150 / \$16,300	\$35 / \$70	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
E50-6000-5-8150	\$6,000 / \$12,000	\$8,150 / \$16,300	\$50 / \$100	50% / 50%	50%	50%	50%	50% / 40%	50%	\$50
E5000-5-8150	\$5,000 / \$10,000	\$8,150 / \$16,300	50% / 50%	50% / 50%	50%	50%	50%	50% / 40%	50%	50%
E6000-5-8150	\$6,000 / \$12,000	\$8,150 / \$16,300	50% / 50%	50% / 50%	50%	50%	50%	50% / 40%	50%	50%
Essentials First Dollar PPO (First \$500 on lab, x-ray and advanced imaging combined covered at 100%)										
FE25-1000-2-5000	\$1,000 / \$2,000	\$5,000 / \$10,000	\$25 / \$50	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
FE25-1500-2-7350	\$1,500 / \$3,000	\$7,350 / \$14,700	\$25 / \$50	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
FE30-2000-2-7350	\$2,000 / \$4,000	\$7,350 / \$14,700	\$30 / \$60	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
FE35-3000-2-7350	\$3,000 / \$6,000	\$7,350 / \$14,700	\$35 / \$70	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
FE35-5000-2-7350	\$5,000 / \$10,000	\$7,350 / \$14,700	\$35 / \$70	20% / 40%	20%	20%	20%	20% / 10%	20%	\$50
FE50-5000-5-7350	\$5,000 / \$10,000	\$7,350 / \$14,700	\$50 / \$100	50% / 50%	50%	50%	50%	50% / 40%	50%	50%
FE5000-3-8150	\$5,000 / \$10,000	\$8,150 / \$16,300	30% / 30%	30% / 50%	30%	30%	30%	30% / 20%	30%	30%


2023

Plan name 	Member(s) In-Network responsibility									
	Deductible ¹ (single / family)	Out-of-pocket maximum ² (single / family)	Office / specialist visit	Coinsurance ³ (in-network / out-of-network)	Lab / x-ray	CT / MRI / PET / SPEC	Inpatient hospital	Outpatient surgery (ASC / hospital)	Emergency room (copay waived if admitted)	Urgent care
Primary Advantage PPO										
PA0-0-4-2500	\$0 / \$0	\$2,500 / \$5,000	\$0 / \$25	40% / 50%	\$0	40%	40%	40% / 30%	\$300	\$25
PA0-500-4-5000	\$500 / \$1,000	\$5,000 / \$10,000	\$0 / \$50	40% / 50%	\$0	40%	40%	40% / 30%	\$300	\$50
PA0-1000-4-5000	\$1,000 / \$2,000	\$5,000 / \$10,000	\$0 / \$70	40% / 50%	\$0	40%	40%	40% / 30%	40%	\$70
PA10-3000-5-7350	\$3,000 / \$6,000	\$7,350 / \$14,700	\$10 / \$70	50% / 50%	\$0	50%	50%	50% / 40%	50%	\$70
PA20-5000-5-7350	\$5,000 / \$10,000	\$7,350 / \$14,700	\$20 / \$70	50% / 50%	\$0	50%	50%	50% / 40%	50%	\$70
PPO HDHP⁵										
HDE30008060 w/HD80	\$3,000 / \$6,000	\$5,600 / \$11,200	20%	20% / 40%	20%	20%	20%	20% / 10%	20%	20%
HDE35008060 w/HD80	\$3,500 / \$7,000	\$6,550 / \$13,100	20%	20% / 40%	20%	20%	20%	20% / 10%	20%	20%
HDE50008060 w/HD80	\$5,000 / \$10,000	\$6,750 / \$13,500	20%	20% / 40%	20%	20%	20%	20% / 10%	20%	20%
HD300010060 w/HD100	\$3,000 / \$6,000	\$3,000 / \$6,000	0%	0% / 40%	0%	0%	0%	0%	0%	0%
HDE650010060 w/HD100	\$6,500 / \$13,000	\$6,500 / \$13,000	0%	0% / 40%	0%	0%	0%	0%	0%	0%

Alternative Care plans

Alternative Care ⁶ 	Member pays			
	Chiropractic office visit (visit are unlimited)	Acupuncture office visit (visit limits apply)	Massage Therapy office visit (visit limits apply)	Out-of-network
Base	\$15	\$15 (24 visits)	\$25 (18 visits)	Not covered
Buy-Up 1 w/OON	\$15	\$15 (24 visits)	\$25 (18 visits)	20%
Buy-Up 2	\$15	\$15 (36 visits)	\$25 (27 visits)	Not covered
Buy-Up 3 w/OON	\$15	\$15 (36 visits)	\$25 (27 visits)	20%

Vision plans

Vision 	Member pays			
	Exam	Frame allowance	Lenses (single / bifocal / trifocal / progressive)	Frequency (months) (examination / lenses or contact lenses / frames)
Elite 1010-1	\$10	\$150 plus 20% off balance over allowance	\$10 / \$10 / \$10 / \$75	12 / 12 / 12
Supreme 010-2	\$0	\$120 plus 20% off balance over allowance	\$10 / \$10 / \$10 / \$75	12 / 12 / 24
Preferred 1025-2	\$10	\$100 plus 20% off balance over allowance	\$25 / \$25 / \$25 / \$90	12 / 12 / 24
Preferred 1025-3	\$10	\$100 plus 20% off balance over allowance	\$25 / \$25 / \$25 / \$90	12 / 24 / 24
Preferred Value 10-3	Not covered	\$100 plus 20% off balance over allowance	\$10 / \$10 / \$10 / \$75	Not covered / 24 / 24
Plus 20-1	\$20	35% discount off retail price	\$50 / \$70 / \$105 / \$135	12 / Unlimited / Unlimited
Exam Only	\$0	Not covered	Not covered	24 / Not covered / Not covered

(continued)

2023

Dental plans

Dental 	Member pays					
	Annual deductible per person	Calendar year maximum	Coinsurance (preventive & diagnostics / basic / major / ortho)	Cleanings	Exams	X-rays
Plus D25-185- 1500	\$25	\$1,500	0% / 20% / 50% / Not covered	0%	0%	0%
Plus D25-1855-1500	\$25	\$1,500	0% / 20% / 50% / 50%	0%	0%	0%
Plus D25-1855-2000	\$25	\$2,000	0% / 20% / 50% / 50%	0%	0%	0%
Plus D50-185-1000	\$50	\$1,000	0% / 20% / 50% / Not covered	0%	0%	0%
Plus D50-185-1500	\$50	\$1,500	0% / 20% / 50% / Not covered	0%	0%	0%
Plus D50-1855-1500	\$50	\$1,500	0% / 20% / 50% / 50%	0%	0%	0%
Plus D50-185- 2000	\$50	\$2,000	0% / 20% / 50% / Not covered	0%	0%	0%
Plus D50-1855- 2000	\$50	\$2,000	0% / 20% / 50% / 50%	0%	0%	0%
Plus D100-185-1000	\$100	\$1,000	0% / 20% / 50% / Not covered	0%	0%	0%
Plus D100-1855-1000	\$100	\$1,000	0% / 20% / 50% / 50%	0%	0%	0%
Plus D100-185-1500	\$100	\$1,500	0% / 20% / 50% / Not covered	0%	0%	0%
Plus D100-185-2000	\$100	\$2,000	0% / 20% / 50% / Not covered	0%	0%	0%
Plus D100-1855-2000	\$100	\$2,000	0% / 20% / 50% / 50%	0%	0%	0%
Preferred Plus DP50-1855-1500	\$50	\$1,500	0% / 20% / 50% / 50%	0%	0%	0%
Value D50-185-1500V	\$50	\$1,500	0% / 20% / 50% / Not covered	0%	0%	0%
Value D100-185-1000V	\$100	\$1,000	0% / 20% / 50% / Not covered	0%	0%	0%
Preferred Value DP100-185-1000V	\$100	\$1,000	0% / 20% / 50% / Not covered	0%	0%	0%
Essential D50-16-500	\$50	\$500	0% / 40% / Not covered / Not covered	0%	0%	0%
Fifty D100-555-1000V	\$100	\$1,000	50% / 50% / 50% / Not covered	0%	0%	0%

Pharmacy plans⁸

Pharmacy 	Member pays				
	Tier 1	Tier 2	Tier 3	Deductible	Specialty drug
No MAC					
NMSL5-10-25	\$5	\$10	\$25	No	20% up to \$250
NMSL10-20-40	\$10	\$20	\$40	No	20% up to \$250
NMSL10-35-60	\$10	\$35	\$60	No	20% up to \$250
NMSL10-50-75	\$10	\$50	\$75	No	20% up to \$250
NMSL15-30-50	\$15	\$30	\$50	No	20% up to \$250
NMSL15-40-65	\$15	\$40	\$65	No	20% up to \$250
NMSL15-30%-50%	\$15	30%	50%	No	50%
No MAC Deductible plans (deductible waived on Tier 1)					
NMSL10-35-60-100D	\$10	\$35	\$60	\$100	20% up to \$250
NMSL10-35-60-250D	\$10	\$35	\$60	\$250	20% up to \$250
MAC A					
MASL10-10-DR	\$10	\$10	Member pays 100% at HN discounted rate	No	20% up to \$250
MASL10-20%-DR	The greater of \$10 or 20%	The greater of \$10 or 20%	Member pays 100% at HN discounted rate	No	20% up to \$250
MASL15-50%-DR	The greater of \$15 or 50%	The greater of \$15 or 50%	Member pays 100% at HN discounted rate	No	20% up to \$250
MASL25-50%-DR	\$25	50%	Member pays 100% at HN discounted rate	No	50%
PPO HDHP Rx⁵ (No MAC)					
HD80	20%	20%	20%	Yes	20%
HD100	0%	0%	0%	Yes	0%

2023

¹The specified deductible must be met each calendar year (January 1 through December 31) before Health Net pays any claims.

²The annual out-of-pocket maximum includes the annual deductible, copayments and coinsurance. After the out-of-pocket maximum is reached in a calendar year, we will pay the covered services during the rest of that calendar year at 100% of our contract rates for participating provider services and at 100% of the maximum allowable amount (MAA) for out-of-network (OON) services. Members are still responsible for OON-billed charges that exceed MAA.

³Coinsurance is subject to the annual deductible.

⁴Deductible is waived.

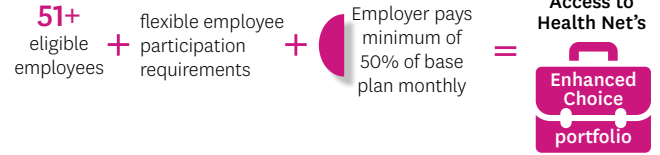
⁵All benefits including office visit copay, pharmacy, and alternative care are after deductible.

⁶All copayments accumulate to the medical out-of-pocket maximum.

⁷In- and out-of-network visits combined.

⁸Prescription drug tiers are Tier 1: Generic; Tier 2: Brand Preferred; Tier 3: Non-Preferred; SP: Specialty. Retail pharmacy – members may receive a 90-day fill at a retail pharmacy; one copayment coinsurance applies per 30-day supply. Tier 1, 2 or 3 prescription drugs may apply. Deductible waived unless otherwise noted. Essential Rx Drug List – A listing of preferred drugs and their corresponding benefit levels is shown on the Health Net Essential Rx Drug List (EDL). Log in as a Health Net member at www.healthnetoregon.com to view the Oregon Essential RX Drug List.

Enhanced Choice participation guidelines



Enhanced Choice Packages

WE INVITE YOU TO BE CHOOSY!

With Enhanced Choice, your clients have the option to offer multiple plans to their employees. They can mix and match our plan offerings to provide more network and benefit design choices! Our Enhanced Choice solution offers flexible, cost-saving choices that include:

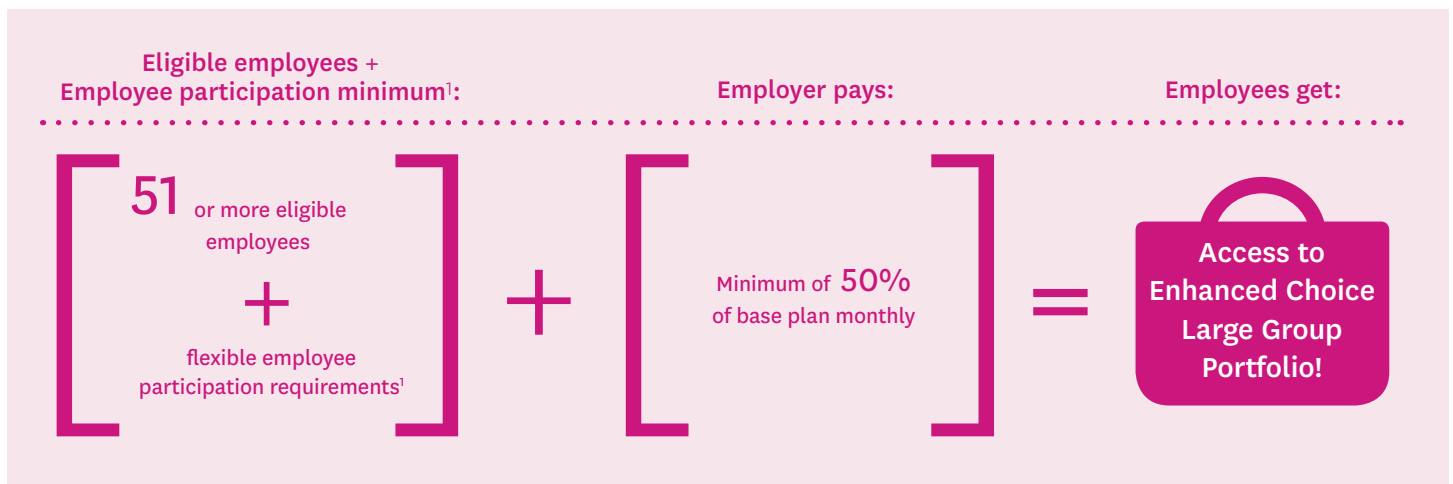
- A competitive, **defined contribution** arrangement for financial flexibility.
- **Broad employee choice** –w offering employees the potential to choose from a variety of plan options that you select.
- The ability to tie your contribution rate to the lowest-priced plan option.
- Less administrative burden and low-cost plan choices.



It's simple to help clients enroll in Enhanced Choice:




- 1** Select a base plan from the portfolio options.
- 2** Set their contribution to **50%** of the lowest-cost base plan.
- 3** Choose **unlimited plans** from the portfolio.
- 4** Employees then enroll in the plan they want from the options your clients offer.

How it works



¹Refer to the group's quote or renewal documents for details regarding the participation requirements.

Product and Network Details

Medical product or network 	Description 	Service area 
PPO	<p>PPO insurance plans make it possible for employees to get the flexibility they want when it comes to a health care provider.</p> <p>Insureds can go to any doctor or hospital in our PPO Network. They can even see a provider outside of our network.</p> <p>We offer a wide range of traditional PPO plans supported by an extensive medical and pharmacy network. HRA integration is available on our PPO plans through HealthEquity.</p>	Statewide PPO Network
HSA-Compatible PPO	<p>Our low-premium, high-deductible PPO plans give employees broad benefits, along with the tax-saving potential of a Health Savings Account (HSA).</p> <p>These smart plans are an effective way for clients to take a consumer-directed health care approach to the way they offer benefits. HSA integration is available on our high deductible health plans through HealthEquity.</p>	Statewide PPO Network



Supplemental Coverage

Helping employees gain and maintain healthier lifestyles is a key selling point! We offer the supplemental essentials to complement medical coverage and a variety of healthy life choices.

Dental PPO

Dental PPO plan choices provide clients with value, flexibility, simplicity, and a focus on prevention and wellness. Our dental plans offer comprehensive coverage and provide access to a statewide network of dental providers.

Find Health Net's dental providers by visiting:
Health Net Dental: yourdentalplan.com/healthnet

Vision PPO

Our Health Net Vision PPO insurance plans may be purchased in conjunction with our medical coverage. These plans provide these key features: no or low copayments; provider choice, including optical retailers, frame choice, contact lenses by mail; discounted LASIK or PRK (if authorized); secondary purchase plan.

Find Health Net's vision providers by visiting:
Health Net Vision: eyemedvisioncare.com

Alternative Care

Health Net has teamed up with American Specialty Health Group, Inc. (ASH Group) to offer quality, affordable coverage for acupuncture, chiropractic, therapeutic massage, and naturopathic care.

The Base plan is included in all of our medical. Groups may purchase one of the Buy-Up options, which offers their employees an increased number of office visits per calendar year, as well as an option that offers out-of-network benefits.

Health Net offers a full range of alternative care options to members, provided by American Specialty Health Group, Inc. (ASH Group).

With ASH Group, members can choose from a broad network of credentialed health care providers who offer alternative health care services.

Find an alternative care provider by visiting:
American Specialty Health—ashlink.com/ash/hnetorcom



For additional assistance in locating an ASH Group provider, please contact us at 800-678-9133.

Behavioral Health

Living well means taking care of physical health and mental health. Our Health Net plans include behavioral health benefits, administered by MHN Services. Behavioral health benefits include treatment for mental health and substance use disorders and may include:

- Sessions with a therapist, psychologist or psychiatrist.
- Treatment follow-up and aftercare.
- Other inpatient and outpatient services that are medically necessary.

Members can call MHN staff 24/7, including customer service reps and licensed clinical Care Managers, for:

- Answers to questions about benefits.
- Finding a MHN provider based on their needs.
- Getting help right away if they are experiencing a crisis or emergency.
- Help getting an appointment if they are having difficulty.

Find a therapist or psychiatrist at **www.mhn.com**. Under For Members, select Find a Provider. Members can search for a provider near them or for a provider who provides telehealth services.



Find a therapist or psychiatrist at www.mhn.com. Under For Members, select *Find a Provider*. Members can search for a provider near them or for a provider who provides telehealth services.



\$0 Copay Telemedicine¹

Telemedicine is an option for members who want to save a trip to their doctor's office. Convenient visits with their doctor by phone or video is a benefit on all of our health plans. Members should check with their doctor to see if they offer telemedical services.

Additional Telemedicine through Teladoc

Teladoc provides supplemental telehealth services for members who can't see their regular doctor. By scheduling a visit with one of Teladoc's U.S. board-certified and licensed medical doctors, members can be diagnosed, treated, and prescribed medication if necessary. Teladoc is available for non-emergency conditions like the flu, allergies, infections, and much more. Members also have access to therapists and psychiatrists by phone or video through Teladoc. Visit teladoc.com/hn for more information.

¹\$0 copay per visit, deductible waived except on HDHP plans. Members should refer to their Plan Contract or Schedule for benefit details.





Decision Power[®]: Health & Wellness

Decision Power is an integrated program created to engage people in their health. With personalized tools and achievable goals, employees can feel confident in their ability to make positive and lasting behavioral changes.

Through Decision Power, we deliver a personalized and accessible approach to wellness. Here are just a few of the ways we help employees achieve improved wellness:



Get help with a specific health goal.



Identify health risks with the RealAge Test.



Learn about treatment options.



Track diet, exercise or cholesterol.



Try an online improvement program.



Better manage chronic illness.



Focus on Early Access and Prevention

We don't wait until people get sick to help out. Our job, always, is to connect your clients' employees with the care they need. We want them to use their benefits!

That's why we do outreach – phone calls, mailings and more – to encourage our members to get their annual wellness exam. It costs \$0 out-of-pocket, and it's the best way for people to know their health status. It's also the most effective way for Health Net to know how best to meet their health needs.

From there, we can connect people to the care and resources they need to be their healthiest. Our resources span the full spectrum of health, from timesaving conveniences to in-depth support, such as:

- **The Active&Fit Direct™ program** allows members to stay active at the gym or at home with flexible fitness options starting at just \$25 a month¹.
- **Disease management** for people living with ongoing health challenges like diabetes, asthma, COPD, heart disease, and heart failure.
- **Wellness health coaching** is one-on-one phone support to help members reach their health goals and develop a healthy mindset and habits. Wellness coaches can help your clients' employees lose weight, eat healthier, quit smoking, manage stress or begin an exercise program. Coaches will help members reassess and stay on track with their goals – making it easier to achieve lasting, positive changes to their health.
- **Nurse advice line** offers advice from a registered nurse around the clock.



¹Fees will vary based on fitness center selection. There is a 2-month commitment required. The Active&Fit Direct program is provided by American Specialty Health Fitness, Inc., a subsidiary of American Specialty Health Incorporated (ASH). Active&Fit Direct is a trademark of ASH and used with permission herein. Not all services may be available in all areas and the program may be changed (including monthly and enrollment fees and/or the introductory period) or discontinued at anytime.

Questions? We're here with answers.



Call your Health Net Account Executive.



Visit us online at healthnetoregon.com/broker.

For benefit/eligibility verification or claims issues, members can call:

Customer contact center: 888-802-7001

For dental and vision questions, members can call:

Dental: 877-410-0176

Vision: 866-392-6058

For alternative care questions, members can call:

Alternative care: 800-678-9133

For behavioral health/substance use disorders questions, members can call:

MHN: 800-977-8216

For questions about broker commissions and contracting, brokers can contact:

Broker Relations: 888-802-7001, option 4

Email: orbrokerrelations@healthnet.com

View and download broker sales materials:

Go to healthnetoregon.com/broker > *Forms & Brochures* > *Large Group Plans*

healthnetoregon.com

This document is only a summary of health coverage and presents general information only. Members should refer to their Plan Contract, which they will automatically receive after enrolling. The Plan Contract contains the terms and conditions, as well as the governing and exact contractual provisions, of Health Net Health Plan of Oregon, Inc. coverage. Certain services require prior authorization or must be performed by a specialty care provider. Members should refer to their contract and other benefit materials for details, limitations and exclusions.

When services are performed by a provider who is not in our PPO network, member expenses include a calendar year deductible, fixed dollar amounts for certain services, and the amount by which billed charges exceed the Maximum Allowable Amount (MAA) for other services. We pay out-of-network providers based on the MAA rates, not on billed amounts. The MAA may often be less than the amount a provider bills for a service. Out-of-network providers may therefore hold members responsible for amounts they charge that exceed the MAA we pay. Amounts that exceed our MAA are not covered and do not apply to the annual out-of-pocket maximum. Member responsibility for any amounts that exceed our MAA payment is shown on this schedule as MAA.

Members have access to Decision Power through current enrollment with Health Net Health Plan of Oregon, Inc. (Health Net). Decision Power is not part of Health Net's commercial medical benefit plans. It is not affiliated with Health Net's provider network, and it may be revised or withdrawn without notice. Decision Power services, including clinicians, are additional resources that Health Net makes available to enrollees.

Health Net Health Plan of Oregon, Inc. is a subsidiary of Health Net, LLC and Centene Corporation. Health Net and Decision Power are registered service marks of Health Net, LLC. Managed Health Network, LLC (MHN) is a subsidiary of Health Net, LLC. All other identified trademarks/service marks remain the property of their respective companies. All rights reserved