

Begin your Health Journey!

MEMBER QUICK START GUIDE

Employer Group Plans





This guide is designed to help you make the most of all that your health plan has to offer – whether you're:

- New to the Health Net family
- New to this type of health coverage
- A renewing member

First the Basics:

A wide range of plans

Health Net offers many types of health plans. Most of the information in this handbook applies to all plan types.

Refer to your Plan Contract for the exact benefits that come with your health plan. To make things simple, this guide has been split into sections on how to get started using your health coverage.



- 1** Find Doctors And Facilities In Your Network
- 2** Set Up Your Online Member Account
- 3** Get Your ID Card
- 4** Learn Where to Get Care
- 5** Understand Your Costs and Benefits
- 6** Fill Your Prescriptions
- 7** Health and Wellness
- 8** Telehealth and Resource Options
- 9** Know Who to Contact
- 10** Healthcare Terms to Know

1 Find Doctors and Facilities in Your Network

Northwest health providers

Your Health Net health plan gives you access to a broad network of Oregon providers – doctors, nurses, and specialists. Your provider network depends on the health plan you choose.

It's easy to find out who's in your network:

- 1 Start by visiting our home page **HealthNetOregon.com**.
Scroll down to click on *Find a Provider*.
- 2 Enter a location (address, city, county or zip code).
- 3 Select your health plan or network, and then click *Continue*.
- 4 Choose to search by:
 - Specialty
 - Facility/group name
 - Provider name
 - NPI (National Provider Identifier)

Or, click *Choose a Category* and select the type of provider you need (medical professionals, medical facilities, etc.).

- 5 You can narrow your search within these categories. You can then further filter the results using the filter options on the left side of the screen which include:
 - Distance
 - Languages spoken
 - Gender
 - Office features



Visit us online to find a provider in your network at **HealthNetOregon.com**.



PPO plans

With a Health Net PPO plan, you are not required to choose a PCP, but you can if you'd like. If you do, you'll have a doctor you know when you're sick or need health advice. Note that while you don't have to choose a network doctor, it will save you money compared to seeing a doctor outside the network.

Out of State or Traveling Members Coverage Outside of Oregon

Health Net PPO members with out-of-state coverage as well as members traveling outside of Oregon will have access at the in-network coverage level through the First Health PPO network. First Health has a wide national network and multiple ancillary providers across the country.

**You can call First Health at 800-226-5116. or
Locate First Health Providers here:**

providerlocator.firsthealth.com/healthnet



Tip! You can change your PCP at any time.

- Simply log in to your online account and click on *Find a Provider*.
- Then select *Change my Primary Care Provider* and follow the directions to select a new PCP.

2 Set Up Your Online Member Account

To set up your online account, go to **HealthnetOregon.com**. Follow the steps to register/create an account. **You will need your member ID number to sign up.** Once your account is set up and your health coverage begins, you can:

- 1 Access your digital ID card or order a new one
- 2 Find a doctor, urgent care, hospital or other provider in your network
- 3 Change your PCP
- 4 Review your health plan and pharmacy benefits
- 5 Find programs to help you manage your weight or stop smoking and more



3 Get your Member ID Card

***All new members** will get a Health Net member ID card in the mail.*



Your ID card includes:

- ➔ Your member ID number
- ➔ Starting date of your health coverage
- ➔ Your PCP name and contact info

Show this card to your provider when you get services. If you need services and have not received your ID card by your plan's starting date, please call the Customer Contact Center.

The Customer Contact Center can be reached at 888-802-7001 Monday through Friday, 8:00 a.m. to 5:00 p.m. Pacific time.

Help for the hearing and speech impaired: TTY call 711 Monday through Friday, 8:00 a.m. to 5:00 p.m. Pacific time.



4 Learn Where to Get Care

Your plan offers many ways to get the care you need, when you need it.



At home

Teladoc Health – Access to video appointments 24/7

Teladoc Health offers an easy option for non-emergency telehealth care when your normal doctor isn't available. Use your smartphone or computer to consult with a U.S. licensed doctor, 24/7. What could be more simple?

How about a \$0 copayment!

Teladoc Health doctors can diagnose and treat:

- 1 Cold and flu symptoms
- 2 Allergies
- 3 Upper respiratory infections
- 4 Skin problems and more

Teladoc Health doctors can also send prescriptions to your local pharmacy, in some cases.²

Talk to a doctor anytime, anywhere by phone or video.

Visit **TeladocHealth.com** or call **800-TELADOC** (835-2362).³

24/7 Nurse Advice Line

Get advice from a registered nurse on whether to seek medical care or how to care for illness and injury at home. You can get answers to self-care for minor injuries and illness like fevers and the flu. You can also get answers for types of medication to use. Our nurses are trained to ask the right questions to help you get the care you need. And they are trained to help you better manage your health.

Call **800-893-5597 (TTY: 711)**.



Doctor's office

Your main provider – PCP

Having a doctor who knows you is important. For many of our health plans, you choose a PCP when you enroll. For our PPO plans, you have the option to choose a PCP but it's not required.

Behavioral Health Providers

Your Health Net plan also allows for mental health benefits. You can get mental health services that include:

- ➔ Counseling
- ➔ Psychotherapy
- ➔ Treatment for addiction
- ➔ Psychiatric services

You don't need a referral from your primary doctor. And, you can check to see if you can have your sessions by phone or video chat. To locate an in-network Behavioral Health provider go to healthnetoregon.com and click on Find a Provider. Need extra help? Call member services at **800-977-8216**.¹



In a clinic

Urgent care centers

Get same-day care for non-emergency illnesses or injuries. Some urgent care centers now offer X-rays and lab tests.

To find an urgent care center in your Health Net Oregon network, visit **HealthNetOregon.com** and select *Find a Provider*.



If you have an emergency, go straight to the nearest emergency room or call 911.

5 Understand Your Costs and Benefits

Knowing what your plan covers is important.

When you visit a health care provider for covered services, you pay a portion of costs. These are called out-of-pocket costs. Your out-of-pocket costs are different based on which health plan you have.

Find details about your share of out-of-pocket costs in your Plan contract and Evidence of Coverage (EOC). You can learn about your:

- Copayments
- Coinsurance
- Deductibles in your Plan



You can also refer to your **Summary of Benefits and Coverage (SBC)** document. For a copy of your SBC, go to **healthnetoregon.com**, then under *Our Health Plans*, select *Plan Materials*.



Estimate costs and compare care options

Our Cost Estimator tool lets you compare ballpark costs to find the best prices. Get estimated average costs for:

- Hospital stays
- Surgeries
- X-rays and more

To use the tool:

Log in to your member account at **HealthNetOregon.com**

→ Click *Coverage*

→ Click *Cost and Care Options*

→ Click *Launch Cost Estimator*

6 Fill Your Prescriptions

Your Health Net health plan requires that you get your medications from a pharmacy in your network if you have prescription drug benefits. (In an emergency or when an in-network pharmacy is not available to you, you may get prescriptions filled at an out-of-network pharmacy.)



To find a pharmacy in your area:

- 1 Go to HealthnetOregon.com to Register or Log In
- 2 Select *Prescription Coverage*, then *Find a Pharmacy*
- 3 Select *Pharmacy Search*

When your doctor prescribes you medicine (drugs) there are a few things you need to know.



Rx



Generic drugs

Ask your doctor about generic drugs that may work for you. Generic drugs are proven to be safe and effective. As a rule they tend to cost less than brand-name drugs.



Essential RX Drug List

Health Net's Essential Rx Drug List (or formulary) is a list of covered drugs chosen by Health Net, along with a team of health care providers. These drugs are included because they are thought to be a key part of a quality treatment plan. **Note that the drug list can change as updates are made on a regular basis.**

The Essential RX Drug List can be found at HealthNetOregon.com under the Pharmacy Plan Information section. Please note, **your doctor should get prior approval from Health Net before prescribing some drugs.** And be sure to use **pharmacies in your health plan's Pharmacy Network.**



Order by mail

If you take medicine for a long-term medical condition, you may be able to fill your prescription through our mail order pharmacy program. A 90-day supply is available. Some drugs may not be available through the mail order pharmacy program.

For more detailed information about prescription drugs, go to Healthnetoregon.com/pharmacy.



7 Health and Wellness

Members can access Health Net's wellness programs by visiting healthnetoregon.com. Select **Members**, scroll down and choose **Wellness Center**.



Active&Fit Direct™ program

The **Active&Fit Direct program**¹ offers access to 12,700+ standard fitness centers plus 9,400+ premium exercise studios across the country, and more, for just \$28 a month (plus \$28 enrollment fee and taxes).



Health Coaching program

- **Health Coaching Program (telephonic):** With one-on-one support, you and your Health Coach find what motivates you and address the specific health behaviors that affect short-term health risks and long-term goals.
- **Health Coaching Program (digital):** Consists of multiple lessons related to stress, smoking cessation, exercise, weight, gaps in care and more!



RealAge® Test

The **RealAge Test** provides members with a personalized report of their behavioral and medical health risks. Immediately after taking the online RealAge Test, members will receive a personalized action plan.



RealAge® program

The **RealAge Program** is our healthy behavior program targeting the 4 highest lifestyle risks – Stress, Sleep, Nutrition, and Activity. The program is personalized to the individual based on risk level for each lifestyle category gleaned through RealAge test responses and personal interest. It's fully integrated with other features of the Sharecare platform, such as trackers, to drive sustained engagement and promote behavior change that can help lead to a lower RealAge.



Care reminder messages

Members get useful reminders about steps they can take to help prevent gaps in their care. These include tests to help keep them healthy, yearly shots and more!

Doctors may also get these reminders so that they can better observe the member's health status.

¹Members/spouses must be 18 years or older to take part. Fees 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 any time.



Eat Right Now program

Eat Right Now is a 28-day program that helps members build healthier eating habits and better understand their cravings. It uses mindfulness and behavior-based tools to support lasting changes. Members can:

- Learn to recognize eating triggers and patterns
- Build healthier habits through guided activities
- Access tools and resources to support long-term success



Unwinding by Sharecare

Unwinding by Sharecare is an evidence-based digital program that uses mindfulness to help members build resilience. Members will be able to use it throughout the day whenever they find themselves feeling stressed to get a quick dose of calm when they need it. Through breathing exercises, meditations, sleep support, visual relaxation and more, they'll get help to start living a less-stressed life.



Craving to Quit®

Craving to Quit tobacco cessation program covers most types of tobacco, lets members talk with a quit coach for encouragement and support, and offers a personalized plan to quit. The innovative 21-day program teaches awareness of cravings and habits to help participants quit smoking, dipping or vaping.



The Teladoc Mental Health (Digital Program):

The Teladoc Mental Health (Digital Program) is available 24/7 online and via the mobile app, this self-help program offers proven ways to support users in making positive changes. With this program, members will find help in topics such as stress, sleep, depression, anxiety, chronic pain, substance use, trauma and much more. This program provides features such as easy e-learning modules, weekly action plans, and daily words and tips to bring hope and healing. Members can sign up for this program at [TeladocHealth.com](https://www.TeladocHealth.com).





Health Net Member Extras

The Health Net Wellness Rewards Program is designed to reward members who take an active role in their health! Qualified¹ members can earn up to \$100 in incentives by completing these actions:

What can I do	Reward
Take the online RealAge [®] test	\$50
Share the results with your PCP or complete 3 health coaching calls to earn \$25	\$25
Complete two online Sharecare ² offerings to earn \$25	\$25

¹The reward program is open to any Health Net member age 18 and over who is enrolled in a participating plan listed. This includes enrolled employees, spouses, domestic partners, children ages 18 and over, COBRA beneficiaries, and employees on disability leave. All Oregon commercial PPO group products are part of the incentive program.

²Complete the Eat Right Now; Craving to Quit tobacco cessation program; and/or participate in health challenges.

8 Telehealth and Resource Options

Health Net offers convenient alternatives for accessing care when a primary care physician is not readily available.

(Teladoc Health, Behavioral health and Nurse Advice Line; services vary by line of business).

Teladoc Health



- Telehealth care through member's smart phone or computer
- Speak with a U.S. board-certified doctor
- Whether it's a medical concern or behavioral health support, help is available
- Check symptoms or find treatment services
- Available 24/7¹
- Provider's can send prescriptions to your local pharmacy, in some cases²
- Call 1-800-TELADOC (835-2362), visit [TeladocHealth.com](https://www.teladoc.com), or download the Teladoc app.

Behavioral health



- Behavioral health providers include Therapists, Psychologists and Psychiatrists
- Services include:
 - Outpatient sessions with a therapist
 - Outpatient medication management with a psychiatrist
 - Inpatient, residential treatment, or other types of care if medically required³
- Customer service reps and licensed Care Managers available 24/7
- Call 800-977-8216 to connect with Behavioral Health Services

Nurse Advice Line



- Licensed nurse access
- Telephone support
- Nurses can assess medical conditions and symptoms
- Nurses can recommend next steps for care
- Available 24/7, call 800-893-5597 to connect with the Nurse Advice Line

¹Behavioral health services are available from 7 a.m. to 9 p.m., Pacific Time.

²Access to telehealth services does not guarantee that a prescription will be written.

³Preauthorization is required, except in an emergency.

Telehealth services include coverage provided by Teladoc. Teladoc provides supplemental telehealth services in addition to the mandated telemedicine services for medical, mental disorders and chemical dependency conditions. Teladoc services are not intended to replace services from your physician. Teladoc consultation services do not cover specialist services; and prescriptions for substances controlled by the DEA, non-therapeutic drugs or certain other drugs which may be harmful because of potential abuse.

9 Know Who to Contact

Health Net has a Customer Care Contact Center that is available to help you when you have questions about your Health Net plan.

Call our Customer Contact Center when you need to:

- Ask questions about benefits and eligibility
- Get help finding resources
- Find info on billing and premium payments
- Change your primary doctor/PCP
- Get claims info



Health Net Oregon Member Support:

Call these numbers Monday through Friday from 8 a.m. through 5 p.m. Pacific time.

And visit us online at healthnetoregon.com/member.

- **Customer Center:** 888-802-7001
(For benefit/eligibility verification & claims)
- **Dental:** 877-410-0176
- **Vision:** 866-392-6058
- **Alternative Care:** 800-678-9133
- **Behavioral Health/Substance Use Disorders:**
Members can call the number on their Member ID card.



10 Healthcare Terms to Know

Sometimes it seems like health coverage comes with its own language! Use our glossary as you read this guide and consider your choices.

Glossary

Benefits (also called Covered Services)

The healthcare items or services that are covered.

Coinsurance

Your share of the costs of a covered health care service. It's calculated as a percentage (for instance, 20%) of the allowed amount for the service. Let's say your coinsurance is 20% and the medical bill is \$100. You would pay \$20 and the health plan would pay the rest.

Copayment (also called Copay)

A fixed amount you pay for the services you use. For instance, in a doctor visit that might cost \$150, you could pay a \$15 copayment and the health plan pays the rest.

Cost-sharing

The share of costs covered by your health plan that you pay out of your own pocket. This term usually includes:

- Deductibles
- Coinsurance
- Copayments
- Other similar charges

Deductible

The amount you owe for covered health care services before your health plan begins to pay for those services. For instance, if your deductible is \$1,000, you have to pay a total of \$1,000 before the health plan starts paying. Your deductible **may not apply to all services.**

Dependents

Spouses, children or domestic partners of the main subscriber or policyholder.

Excluded services

Health care services that your health plan doesn't pay for or cover.

Member (Subscriber)

The person who receives benefits under a health plan. The primary member is called the Subscriber.

Network

The doctors, hospitals and other health care providers that your health plan has contracted with to provide health care services.

Out-of-pocket maximum

The amount you will pay for out-of-pocket costs in a calendar year. This includes your:

- Deductible
- Coinsurance
- Copays

Once you meet your out-of-pocket max, your benefits will pay at 100% for the rest of the calendar year. This limit **does not include your premium.** And it **doesn't include healthcare charges** for services your health plan doesn't cover.

Preferred Provider Organization (PPO)

A type of health plan. With a PPO, you do not have to choose a PCP (but you can if you'd like to). And you do not need referrals from your PCP when you visit specialists.

You also have the option of using either in-network or out-of-network providers. Your out-of-pocket costs will most likely be lower when you stay in the network.

Premium

The amount you and/or your employer pay every month for health coverage.

Preventive care

A no-cost yearly physical exam that may include:

- Vaccines
- Screening tests
- Well-baby care
- Gynecological exams and more

Review your plan for details.

Primary care physician (PCP)

A doctor who directly provides or manages a range of health care services for you. A PCP can be a:

- Medical doctor (MD)
- Doctor of osteopathy (DO)
- Physician assistant (PA)
- Nurse practitioner (NP)
- Naturopathic doctor (ND)

Special enrollment period

The time outside of the yearly open enrollment period when you can make a change in coverage. You can do this if you have a qualifying life event such as:

- Marriage or divorce
- Newborn baby
- Loss of coverage from a job and other events

English
No Cost Language Services. You can get an interpreter. You can get documents read to you and some sent to you in your language. For help, call the Customer Contact Center at the number on your ID card or call 1-888-802-7001 (TTY: 711).

Amharic
ለቋንቋ አገልግሎት ምንም ክፍያ የለውም። አስተርጓሚ ማግኘት ይቻላል። የተነበበለዎትን እና የተወሰኑ በቋንቋዎ የተላኩልዎትን ሰነዶች መግኘት ይቻላል። ለእርዳታ፣ ለደንበኞች ግንኙነት ማዕከል በመታወቂያ ካርድዎ ላይ ያለውን ቁጥር ይደውሉ ወይም በ 1-888-802-7001 (TTY: 711) ይደውሉ።

Arabic
الخدمات اللغوية المجانية. يمكنك الاستعانة بمترجم فوري، كما يمكنك طلب قراءة المستندات عليك وإرسال بعض منها إليك بلغتك. للحصول على المساعدة، يمكنك الاتصال بمركز اتصالات العملاء على الرقم الموجود على بطاقة معرف العضوية الخاصة بك أو الاتصال على 1-888-802-7001 (TTY: 711).

Chinese
免費語言服務。您可以取得口譯服務。我們可以把文件朗讀給您聽，也可以把部分翻譯成您語言的文件寄送給您。如需協助，請撥打會員卡上的電話號碼聯絡客戶聯絡中心，或撥打電話 1-888-802-7001 (聽障專線 (TTY)：711)。

Cushite (Oromo)
Tajaajila afaaniif kaffaltii hin qabu. Turjubaana argachuu ni dandeessu. Sanadii isiniif dubbifamee fi afaan keessaniin muraasaan isniif ergame argachuu ni dandeessu. Gargaarsaaf, Wiirtuu Qunnamtii Maamilaa tiif lakkoofsicha kaardii enyummaa keessan irra jirutti bilbilaa ykn 1-888-802-7001 (TTY: 711) itti bilbilaa.

German
Es stehen Ihnen kostenlose Sprachdienstleistungen zur Verfügung. Sie können einen Dolmetscher hinzuziehen. Die Dokumente können Ihnen vorgelesen werden und einige sind in Ihrer Muttersprache erhältlich. Für Unterstützung rufen Sie bitte unser Kundendienstzentrum unter der auf Ihrer Versicherungskarte angegebenen Nummer oder unter der Rufnummer 1-888-802-7001 (TTY: 711) an.

Japanese
無料の言語支援サービス。通訳をご利用いただけます。日本語で文書を読み上げたり、文書によっては日本語版をお届けすることも可能です。支援をご希望の方は、IDカードに記載の番号にてカスタマーコンタクトセンターまでお電話いただくか、1-888-802-7001 (TTY: 711)までお電話ください。

Korean
무료 언어 서비스. 귀하는 통역사를 이용하실 수 있습니다. 귀하에게 편한 언어로 서류 낭독 서비스 및 번역 서비스를 받으실 수 있습니다. 도움이 받으시려면 본인의 ID 카드에 기재된 고객 서비스 센터 안내번호 또는 1-888-802-7001 (TTY: 711)번으로 전화해 주십시오.

Cambodian (Khmer)
សេវាភាសាភក្តិភីស្ត្រី។ អ្នកអាចទទួលអ្នកបកប្រែបាន។ អ្នកអាចឱ្យគេអានឯកសារជូនអ្នក នឹងឆ្លើយឯកសារខ្លះជូនអ្នក ជាភាសារបស់អ្នក។ សំរាប់ជំនួយ ទូរស័ព្ទទៅមជ្ឈមណ្ឌលទំនាក់ទំនងអភិវឌ្ឍន៍ តាមលេខនៅលើកាត ID របស់អ្នក ឬលេខ 1-888-802-7001 (TTY: 711)។

Laotian
ການບໍລິການດ້ານພາສາທີ່ບໍ່ເສຍຄ່າ. ທ່ານສາມາດຂໍນາຍແປພາສາ. ທ່ານສາມາດອ່ານເອກະສານ ແລະ ຈຳນວນໜຶ່ງໄດ້ໜຶ່ງໃຫ້ທ່ານເປັນພາສາຂອງທ່ານແລ້ວ. ເພື່ອຂໍຄວາມ ຊ່ວຍເຫຼືອ, ໂທຫາສູນຕິດຕໍ່ລູກຄ້າໄດ້ທີ່ເລກໝາຍຍຸ່ງເທິງບັດ ID ຂອງທ່ານ ຫຼື ໂທ 1-888-802-7001 (TTY: 711).

Punjabi
ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ ਲਈ ਕੋਈ ਲਾਗਤ ਨਹੀਂ। ਤੁਸੀਂ ਦੁਭਾਸ਼ੀਆ ਪ੍ਰਾਪਤ ਕਰ ਸਕਦੇ ਹੋ। ਤੁਸੀਂ ਤੁਹਾਨੂੰ ਪੜ੍ਹ ਕੇ ਸੁਣਾਏ ਦਸਤਾਵੇਜ਼ ਪ੍ਰਾਪਤ ਕਰ ਸਕਦੇ ਹੋ ਅਤੇ ਕੁਝ ਤੁਹਾਡੀ ਭਾਸ਼ਾ ਵਿੱਚ ਤੁਹਾਨੂੰ ਭੇਜੇ ਗਏ ਹਨ। ਮਦਦ ਲਈ, ਆਪਣੇ ID ਕਾਰਡ 'ਤੇ ਗਾਹਕ ਸੰਪਰਕ ਕੇਂਦਰ ਨੂੰ ਕਾਲ ਕਰੋ ਜਾਂ 1-888-802-7001 (TTY: 711)।

Russian
Бесплатные услуги перевода. Вы можете воспользоваться услугами переводчика. Вам могут прочесть документы на русском языке и выслать переводы некоторых из них. Если вам требуется помощь, звоните в Центр обслуживания клиентов по номеру, указанному на вашей идентификационной карте, или по номеру 1-888-802-7001 (линия TTY: 711).

Spanish
Servicios de Idiomas Sin Costo. Usted puede solicitar un intérprete. Puede solicitar que se le lean los documentos y que algunos de ellos se le envíen en su idioma. Para obtener ayuda, llame al Centro de Comunicación con el Cliente al número que se encuentra en su tarjeta de identificación o llame al 1-888-802-7001 (TTY: 711).

Tagalog
Mga Walang Bayad na Serbisyo sa Wika. Maaari kayong kumuha ng tagasaling-wika (interpreter). Maaaring basahin sa inyo ang mga dokumento at ipadala sa inyo ang ilan nang nakasalin sa inyong wika. Para sa tulong, tumawag sa Customer Contact Center sa numero sa inyong ID card o tumawag sa 1-888-802-7001 (TTY: 711).

Ukrainian
Безкоштовні послуги перекладу. Ви можете скористатися послугами перекладача. Вам можуть прочитати документи на українській мові та надіслати переклади деяких із них. Якщо вам потрібна допомога, телефонуйте у Центр обслуговування клієнтів за номером, вказаним на вашій ідентифікаційній карті, або за номером 1-888-802-7001 (лінія TTY: 711).

Vietnamese
Dịch vụ ngôn ngữ miễn phí. Quý vị có thể yêu cầu phiên dịch viên. Quý vị có thể yêu cầu đọc các tài liệu và gửi một số tài liệu cho quý vị bằng ngôn ngữ của quý vị. Để được trợ giúp, hãy gọi đến Trung tâm Liên lạc Hội viên theo số điện thoại trên thẻ nhận dạng của quý vị hoặc gọi đến số 1-888-802-7001 (TTY: 711).



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