

Your Health Net PPO Plan

MAKE AN INFORMED CHOICE FOR YOUR FUTURE HEALTH CARE COVERAGE

Your employer is offering a Health Net PPO as a plan option this open enrollment.

If you're familiar with PPO plans, you know they offer many options for how you access care.

If you're new to PPOs, here are some highlights to help you decide if this type of plan is right for you.

A PPO plan offers:

- **Ability to choose** in- and out-of-network doctors and hospitals. You'll most likely pay less when you use in-network providers.¹
- **Freedom** to see specialists without referrals.
- **No claim form filing** when using in-network services

Here's how a PPO plan works



Access care

You don't have to choose a primary care physician (PCP). We do suggest you see your doctor for your annual exams and other preventive care services.



Prior Certification

If you enroll in a PPO plan, you may need to request prior certification (or pre-approval) for a procedure or visit. For a full list of all treatments and services that require prior certification, or to request prior certification, please call us at **800-522-0088**.



Have questions or need help?

Call Member Services at **800-522-0088**, or use the number on your ID card.

For additional information, please see the enclosed *Disclosure Form and Summary of Benefits and Coverage (SBC)*. See the *Evidence of Coverage* for your plan, for complete coverage details.

¹To keep your costs as low as possible, go to doctors and specialists in the PPO network. Doctors who aren't in your network may charge more than Health Net will pay. You may have to pay the difference between what the out-of-network doctor charges and what Health Net pays. This is called balance billing. You pay these costs in addition to your deductible, copays, coinsurance and your monthly premium. And, balance billing amounts are not covered by your plan and won't apply to your annual deductible or your out-of-pocket maximum.

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