

ARIZONA



HEALTH NET | A *better* DECISIONSM



TAKE CARE

The logo features the words "TAKE" and "CARE" in a bold, magenta, sans-serif font. Between the two words is a stylized graphic consisting of two silhouettes: a taller one on the left and a shorter one on the right, representing an adult and a child. A magenta arc curves around the silhouettes, starting from the top of the taller figure and ending at the top of the shorter figure.

Health Net Take CareSM Program

Putting you at the center of everything we do.





Nothing's more important than your health. When you're healthy, you want to stay healthy. When you're sick or have a chronic condition, you want to be surrounded by support. We embrace this idea through the *Health Net Take CareSM* program — a comprehensive program that includes education and information to encourage health, and a network of medical and support services when you're in need

of care. From wellness programs and nurses ready to take your call, to services, programs and resources when you need it most, we focus on you so that you can focus on being well.

All elements of the *Health Net Take Care* program are offered to members of most of Health Net's Medicare Advantage medical plans at no extra cost beyond your monthly plan premium. And most programs offered are not available through Original Medicare and Medicare Supplement plans.

The benefit to you? Security, peace of mind, and the reassurance that everything we do is designed with you in mind. Our goal is to take the hassle out of health care and simplify your life. From answers to simple questions about your coverage, to coordinated care for a complicated condition, to support for pharmacy-related questions, the *Health Net Take Care* program takes care of you every step of the way. Let's take a look at the program, step by step.



CLEAR ANSWERS *when you need them*

When you call Health Net's **Customer Contact Center**, you're connected to a Member Advocate – with no long hold times or a long list of complicated buttons to press. Member Advocates are Customer Contact Center representatives who are highly-trained, service-oriented professionals who will personally assist you and help you understand your plan and benefits.

Member Advocates are empowered to support you, whether that means answering a simple question, or something more — such as connecting you to other departments that can coordinate your care or help you take care of a chronic condition. Member Advocates explain your benefits simply and clearly, helping you to understand and reduce any confusion.



IDENTIFYING A NEED: *helping us to help you*

All new Health Net Medicare Advantage plan members are mailed a **Senior Health Survey**, a series of questions that helps identify their need for assistance with specific medical problems. Their answers will help us to establish a specific plan of support to meet their needs, such as:

- Help with their chronic illness
- Educational materials
- Outreach from a Case Manager to help coordinate their care, when appropriate



PROMOTING A *healthy lifestyle*

HEALTH ADVICE LINE

Sprained ankle? Bee sting? A minor burn, or just a burning health care question? Health Net understands that your medical needs can arise at any

time. For this reason, our **Health Advice Line** is available to you 24/7, every day of the year. Health care professionals are conveniently available to you through our toll-free telephone number: 1-800-893-5597 (TTY 1-800-276-3821 for the hearing impaired).

Counseling and guidance on issues beyond chronic conditions, such as an injury, acute illness, or an upcoming surgery or procedure, are considered and supported as well. Support is provided over the phone, 24 hours a day, 7 days a week.

DISEASE MANAGEMENT PROGRAM

Our Disease Management Program focuses on the support and well-being of our members with certain chronic conditions. Members with chronic obstructive pulmonary disease (COPD), asthma, diabetes, coronary artery disease (CAD) or heart failure, are put in touch with Disease Management nurses who provide the following:

- *Education:* information about the disease and its treatment
- *Coaching:* information about how to follow the plan of care you agree to with your doctor
- *Coordination:* help using the benefits of the plan as well as benefits available in the community
- *Advocacy:* help making you understood when speaking with your doctors

Members are referred to the Disease Management Program by Member Advocates and doctors, as well as through the completed Senior Health Survey or through claims data. Once you are referred, a Health Coach will call you to invite you to join the program. If you choose to participate, you are assigned a nurse and given a direct line to contact him or her, should the need arise. Your nurse will conduct a personal evaluation over

the phone to determine your understanding of your condition, whether you are taking your prescribed medications, and areas where there may be an opportunity to improve your care.

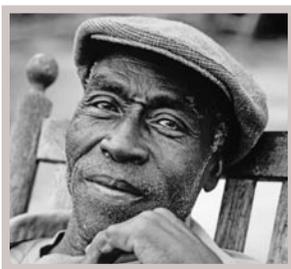
If your needs become more complex (such as the onset of a catastrophic illness), the nurse might suggest a Health Net Case Manager to help coordinate services.



COORDINATING *care*

Health Net **Case Managers** assist members who have complex needs and require assistance with the coordination of services. For example, if you were in need of home care, transportation, special equipment or the help of a social worker, our Case Managers would work on your behalf to coordinate the care and services through community resources. The end result for you is a coordination of care that is designed to improve and maintain your level of wellness, and to reduce your stress and confusion about your condition.

Some of our Medicare members need special attention when they become seriously ill. Health Net understands this. That's why Health Net's **Care Level Management** program sends the doctor into your home for intensive hands-on medical care. In this way, you can remain in the comfort of your own home, surrounded by family, while getting the specialized care your medical condition requires.



A SMOOTH TRANSITION FROM *hospital to home*

Health Net's **Hospital Care Management Team** can help you do just that — transition from a hospital setting to a skilled nursing facility, a long-term care facility, or your own home. Our nurses work to make sure your care is continuous so that your transition is a smooth one.

The Hospital Care Management Team may work with hospital discharge planners, Health Net Case Managers, and other internal staff at Health Net to arrange for services that will support your recovery and prevent you from having to return to the hospital. This includes arranging for skilled services through home health care, skilled nursing facility or a rehabilitation facility, depending on your specific needs.

A nurse may also call you after you leave the hospital to make sure you received the care needed, that necessary follow-up appointments have been made, that discharge instructions including orders for medications were understood and filled, that planned discharge services have started, and that barriers are identified and removed. And, if you are receiving in-home services, the Case Manager may stay in touch to ensure that your needs continue to be met.



ARMING YOU WITH *information*

In order to ensure that your needs are identified and addressed, **Health Net's Quality Improvement (QI)** programs are carefully coordinated with a focus on preventive health education and initiatives. This may include reminders for annual flu shots, mammograms or other preventive health needs.



SUPPORTING YOUR *medication needs*

Many of Health Net's Medicare Advantage plans include comprehensive drug coverage in addition to medical coverage. Questions about specific drugs covered, copayments required, drug interactions, side effects and alternative therapies are as common as questions directly related to medical coverage. Health Net's Member Advocates are trained to answer questions on drug coverage, but for more

detailed questions around drug alternatives, they have the ability to consult with the **Health Net Pharmaceutical Services Team** who can better assist you. The Health Net Pharmaceutical Services Team consists of pharmacists, pharmacy technicians and pharmacy benefits specialists who are dedicated to ensuring you receive the drug therapy that is best for you. They will call you back to discuss your questions within one business day.

Our Health Net Pharmaceutical Services Team is trained to offer only general information related to drugs and drug therapies, and not personal health advice. Information obtained through Health Net is by no means a substitute for consultation with your personal physician, pharmacist, or health care provider.



SUPPORT FOR *everyday life*

Member Matters is a Health Net program designed to help you with a wide range of everyday challenges and emotional health issues. With Member Matters, you can call Health Net's behavioral health subsidiary, MHN, any time you need a helping hand with stress, depression, grief or other emotional health issues, and family or relationship problems.

1-800-977-0281

TTY 1-866-726-1785

24 hours a day, 7 days a week

Clinical Consultations

You can call any time for help with emotional health issues. A qualified intake specialist will assess your needs and connect or refer you to a professional who can help. They are available 24 hours a day, 7 days a week, to help you with:

- Marriage, family and relationship issues
- Domestic violence
- Stress and anxiety
- Depression

- Grief and loss
- Anger management
- Alcohol and drug dependency
- Other emotional health issues

Eligible members are entitled to three telephonic clinical consultations per incident per calendar year.

Member Matters is not available to Health Net Violet or CoCare members.



AN OUNCE OF *prevention*

Sometimes, the best health care decisions are the ones you make to prevent medical conditions. Health Net's **Decision Power Health and Wellness** program, found online at www.healthnet.com and powered by WebMD, gives you a unique, integrated online resource for dealing with life's daily challenges. Features include:

- Discounts on a broad array of complementary health and wellness services
- Proactive health support programs, including smoking cessation, weight loss, health screenings and immunizations
- A health questionnaire that helps determine what health risks you have and how you can reduce them
- Help finding elder care resources

Want to know the cost for common health care services or view a list of health care services typically needed for common medical conditions? Members can log in to www.healthnet.com and access the **Treatment Cost Advisor**. After selecting a category, the tool provides a cost range for the service and related medication.

Health Net's **Hospital Comparison Report** is an online tool that allows you to receive an independent analysis of area hospitals, including their clinical outcomes, patient volume and charges for a particular procedure or medical condition. The Hospital Comparison Report helps you to compare several hospitals by providing a ranking based on what is most important to you. Available on www.healthnet.com, it's reliable and easy to use.



KEEPING YOU *active and engaged*

A way to meet new friends while staying healthy and strong is through Health Net's **Health Club Membership and Fitness Classes**. The program includes no-cost membership privileges at local fitness centers in your area. Our program also features group exercise classes to increase strength, flexibility and energy. To locate a contracted facility in your area, call our Customer Contact Center at 1-800-977-7522 (TTY 1-800-977-6757 for the hearing impaired), 8:00 a.m. to 8:00 p.m., 7 days week, or go to www.healthnet.com.

Health Club Membership and Fitness Classes are not available to Health Net Violet members.



WE'VE GOT YOU *covered*

As a Health Net Medicare Advantage plan member, you will have access to one of the largest networks of physicians in the state of Arizona, competitive premiums and copayments, and a company that has been committed to serving

the Medicare population for over 25 years. Often times you will find it surprising to learn of all the additional support that the *Health Net Take Care* program offers its members.

Health Net Medicare Program's philosophy is to put you at the center of everything we do. With the *Health Net Take Care* program, we're servicing our Medicare members not only with traditional benefits found in most plans, but also with resources, services, and programs you can only experience with Health Net.

- Access to Health Net's broad range of highly qualified medical professionals
- A primary care physician to work with you and coordinate your best course of treatment
- Virtually no paperwork or claim forms to file
- Access to an extensive range of medical services
- A simplified referral process for virtually any provider visit
- All health care needs coordinated through a single, convenient source
- Predictable costs for most common services

Some of the elements within the Health Net Take Care program are not part of the Medicare plan benefits and as such are subject to change or termination at any time without notice. Additionally, some of these services are not subject to the Health Net Medicare Appeals process, but may be subject to the Health Net Grievances process. The Health Net Take Care program is available to all Health Net Medicare Programs members in Arizona.

HEALTH NET MEDICARE PROGRAMS
WWW.HEALTHNET.COM

CURRENT MEMBERS CAN CALL 1-800-977-7522
(TTY 1-800-977-6757)
8:00 A.M. TO 8:00 P.M., MONDAY - FRIDAY

PROSPECTIVE MEMBERS CAN CALL 1-800-333-3930
(TTY 1-800-977-6757)
8:00 A.M. TO 8:00 P.M., MONDAY - FRIDAY

Health Net of Arizona, Inc. and Health Net Life Insurance Company are Medicare Advantage Organizations with separate Medicare contracts and are subsidiaries of Health Net, Inc. Anyone entitled to Medicare Part A and enrolled in Part B and residing in the service area of the plan may apply. For HMO plans, members must continue to use contracted providers for routine care. For the PPO plan, all covered benefits are available from in-network and out-of-network providers, however, with the exception of emergency care, it may cost more to get care from out-of-network providers. Benefits vary by plan. Health Net® is a registered service mark of Health Net, Inc. All rights reserved.

