



Member FIRST MI LASTNAME  
 Subscriber FIRST M LASTNAME  
 Effective Date 01/01/2020  
 Group Name From ABS or PEGA  
 Group # 234532  
 Plan Xxxxxx

PCP visit \$XX  
 Specialist \$XX  
 MinuteClinic \$XX  
 Urgent Care \$XX  
 ER \$XX

**Primary EPO**

**Member ID # [XXXXXXXXXXXX]**

**Medical Group and PCP**

OU7 Health Care Partners of Los Angeles  
 1-818-773-4433  
 Effective date with PPG: MM/DD/YYYY

Dr. Martin Short  
 4747 Buena Vista St.  
 Burbank, CA 91505-7865  
 1-818-773-4433

In case of emergency call 911

| Deductibles | In-Network | Out-of-Network | Out of Pocket Max | In-Network | Out-of-Network |
|-------------|------------|----------------|-------------------|------------|----------------|
| One Member  | \$X,XXX    | \$X,XXX        | One Member        | \$X,XXX    | \$X,XXX        |
| Family      | \$X,XXX    | \$X,XXX        | Family            | \$X,XXX    | \$X,XXX        |

**www.healthnet.com**

Member Services 1-800-522-0088 (TTY: 711)  
 Mental Health Benefits and Appointments 1-800-730-6191 (TTY: 711)  
 24-hour Nurse Advice Line 1-800-893-5597 (TTY: 711)  
 24/7 Video Doctor Appointment www.teladoc.com

**Provider Services 1-800-641-7761**

**Pharmacy Help Desk 1-800-600-0180**

RxBIN #004336 RxPCN 'HNET' Processor Caremark

**California Medical & Mental Health Benefit Claims**

Health Net Commercial Claims  
 Payer ID 95567, PO Box 9040  
 Farmington, MO 63640-9040

**Outside of California Medical & Mental Health Benefit Claims**

Cigna Medical Claims  
 Payer ID 62308, PO Box 188061  
 Chattanooga, TN 37422-8061



Access may vary

Health Net of California, Inc. provides the health benefits under this plan

Benefits are not insured by Cigna or affiliates

AWAY FROM HOME CARE

### **Your Health Net ID card**

Attached is a new Health Net ID card. If there is an error on this card, or you have any questions about your coverage, please call Health Net's Member Services and provide them with your Group and Subscriber ID number. You will find the Member Services phone number on the back of this card and your Group and Subscriber ID number on the face of this card.

Carry this ID Card with you at all times, and present it to your health care provider when getting the care you need.

See your plan documents for a description of your benefits.

### **Your Primary Care Physician**

Your PCP oversees all your health care and provides referrals if specialty care is needed. Your health plan uses the EPO provider network. In order to be covered please make sure you use doctors, hospitals, etc. that are in the EPO provider network. If your situation is an emergency, call 911 or go to the nearest hospital or emergency care facility.

### **Teladoc 24/7 Video Doctor Visits**

Your new telehealth service provider is Teladoc. Teladoc gives you 24/7 access to U.S. board-certified doctors. You can access them with ease – either through the web, your phone or through the Teladoc app. Get the care you need in minutes from the comfort of home or at work. Or, get care even while traveling!

You may receive services on an in-person basis or via telehealth, if available, from your primary care provider, a treating specialist or from another contracting individual health professional, contracting clinic, or contracting health facility consistent with the service and existing timeliness and geographic access standards required under California law. Any cost share for services received through Teladoc will accrue toward your out-of-pocket maximum and deductible (if your plan has a deductible). By scheduling through Teladoc, you consent to receive services via telehealth through Teladoc. See your health plan coverage document for coverage information and for the definition of telehealth services. You have a right to access your medical records for services received through Teladoc. Unless you choose otherwise, any services provided through Teladoc shall be shared with your primary care provider.