

The UC Blue & Gold HMO is offered through Health Net of California, Inc.
(Health Net).

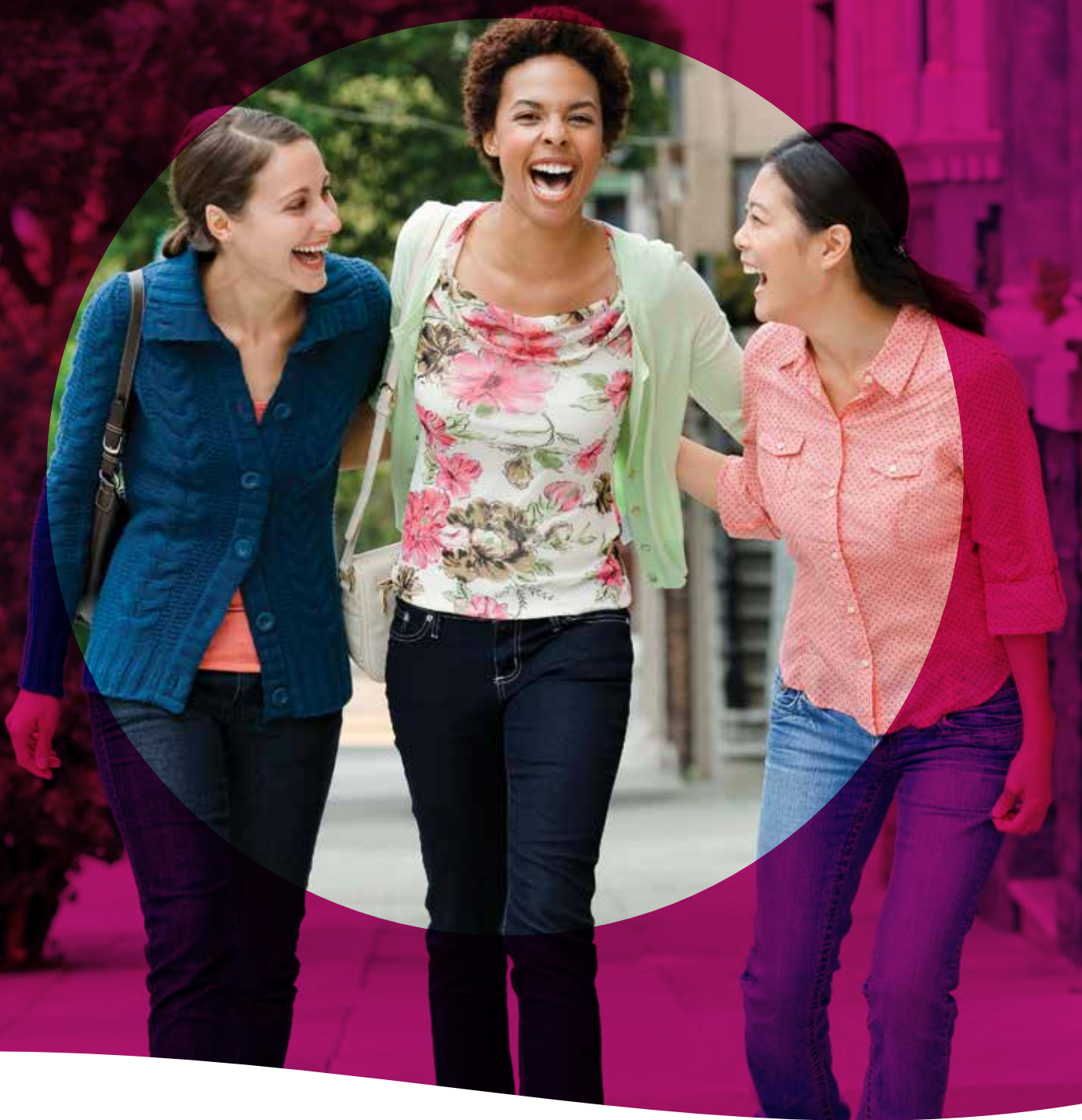


UC Blue & Gold HMO

FREQUENTLY ASKED QUESTIONS
2023 OPEN ENROLLMENT



HealthNet.com/uc



We created this Q&A to give you answers to some of the most common questions about the UC Blue & Gold HMO plan for 2023.

UC Blue & Gold HMO Basics

Are there any changes for 2023?

Yes. Effective January 1, 2023, UC has implemented the following changes:

In Vitro Fertilization (IVF), Zygote intrafallopian transfer (ZIFT) and Gamete intrafallopian transfer (GIFT) will now be covered at a 50% coinsurance, up to 2 cycles per lifetime combined. All infertility services are excluded from the out-of-pocket-maximum (OOPM)

What are Health Benefit Navigators?

This is a team of experienced Health Net Customer Service representatives, dedicated to UC with extensive training on the UC Blue & Gold HMO plan.

Representatives receive detailed training based on specific plan details, so you will speak with someone familiar with your plan and your geographic area. Hours of operation; Monday through Friday, 8 a.m.–8 p.m. Pacific Time (PT). You can reach a Health Benefit Navigator at 800-539-4072.

Why should I join UC Blue & Gold HMO?

We designed UC Blue & Gold HMO to make health care easy.

Affordable premium, \$0 deductible and fixed copayments. Choice of providers – including all UC medical centers and physician groups. Flexible and easy-to-use HMO plan \$0 copayment for virtual visits through Health Net’s preferred telehealth provider. Dedicated team of Health Benefit Navigators proven record – over 120,000 UC employees, retirees and their dependents already have UC Blue & Gold HMO.

When it comes to your health, experience matters. Health Net has been serving UC members for over 40 years.

Will I be getting a new ID card for 2023?

Yes, all UC Blue & Gold HMO members will receive a new ID card for 2023. You will receive your new ID card before January 1, 2023.



About the UC Blue & Gold HMO Network

What makes the UC Blue & Gold HMO Network special?

The University works closely with Health Net to establish criteria for the UC Blue & Gold HMO Network. Affordability was a key factor, but other factors included:

- Offering access in 30 California counties.
- Incorporating the largest possible number of doctors currently caring for UC employees, non-Medicare retirees and their families into the network.
- Participation of all University of California physician groups and medical centers.

Where can I find a full list of doctors in the UC Blue & Gold HMO network?

For a complete listing of available doctors, behavioral health providers, medical groups, and hospitals in the Blue & Gold HMO Network, visit www.healthnet.com/uc and click **Find a Provider** to begin your search.

You can also call the **Health Benefit Navigator team at 800-539-4072**, Monday through Friday, 8 a.m. – 8 p.m. PT. The team is dedicated to UC members and can help you find the right doctors or medical groups for your needs.

If my provider is not in the UC Blue & Gold HMO network, how do I request continuity of care?

If you or your family member(s) are enrolling in the UC Blue & Gold HMO plan and are currently receiving ongoing medical treatment or treatment from a non-participating provider, **call the Health Benefit Navigator team at 800-539-4072**. A representative will help you determine if you're eligible for continuity of care assistance.

Are the UC medical groups and medical centers included in the UC Blue & Gold HMO Network?

Yes, all UC medical groups and medical centers are included in the UC Blue & Gold HMO Network.

You have your choice of medical groups near where you live or work – including all the UC medical centers and physician groups.

Are there any changes to the UC Blue & Gold HMO network?

There are no changes to the network for 2023.



UC Blue & Gold HMO Prescription Drug Benefits

Where can I locate Health Net's prescription drug formulary of covered medications?

The Health Net Drug List is available on www.healthnet.com/uc. Go to Plan Details, Pharmacy and click on *Drug List*.

The UC Blue & Gold HMO plan offers a 3-Tier drug formulary plan, meaning that even if a medication is not on Health Net's formulary, you may still be able to obtain the medication at a higher copayment.

How can I obtain a 90 day supply of maintenance prescriptions?

The UC Blue & Gold HMO plan gives you several options for filling your three-month supply of maintenance prescriptions, with only **TWO** copayments.

- Call CVS Caremark Prescriptions Services at 888-624-1139 to have your prescriptions filled through the CVS Caremark Mail Service Pharmacy or at a CVS Pharmacy retail location.
- Go to your nearest CVS retail pharmacy or UC designated Medical Center pharmacy. The pharmacy will contact your doctor to obtain your three-month prescription.
- Have your doctor send your three-month prescription to the CVS Caremark Mail Service Pharmacy in one of the following ways:
 - Call 800-378-5697
 - Fax 800-378-0323



Are there any changes to my prescription drug benefit for 2023?

There are no changes to the prescription drug benefit for 2023.

Health Net Extras

Are there any extra features that I get for being a UC Blue & Gold HMO member?

Yes. Health Net offers you a convenient care option through MinuteClinic. With access to locations inside select CVS Pharmacy stores throughout 34 states, open 7 days a week, you now have more options for care when you just can't get to your primary care physician.

MinuteClinic providers can evaluate your symptoms and come up with a treatment plan, and even write prescriptions, when needed – all on a walk-in basis, at a \$20 copayment (\$0 if preventive)!

Covered services and conditions include:

- Allergies
- Coughs and bronchitis
- Ear infections and earaches
- Flu-like symptoms
- Heartburn and indigestion
- Minor burns
- Sprains, strains and joint pain
- Screenings and monitoring
- Skin conditions
- Travel health

To find a MinuteClinic location near you, go to www.minuteclinic.com. Note that although the plan doesn't normally cover routine care outside California, members may receive care at any MinuteClinic in the country at the in-network benefit level.

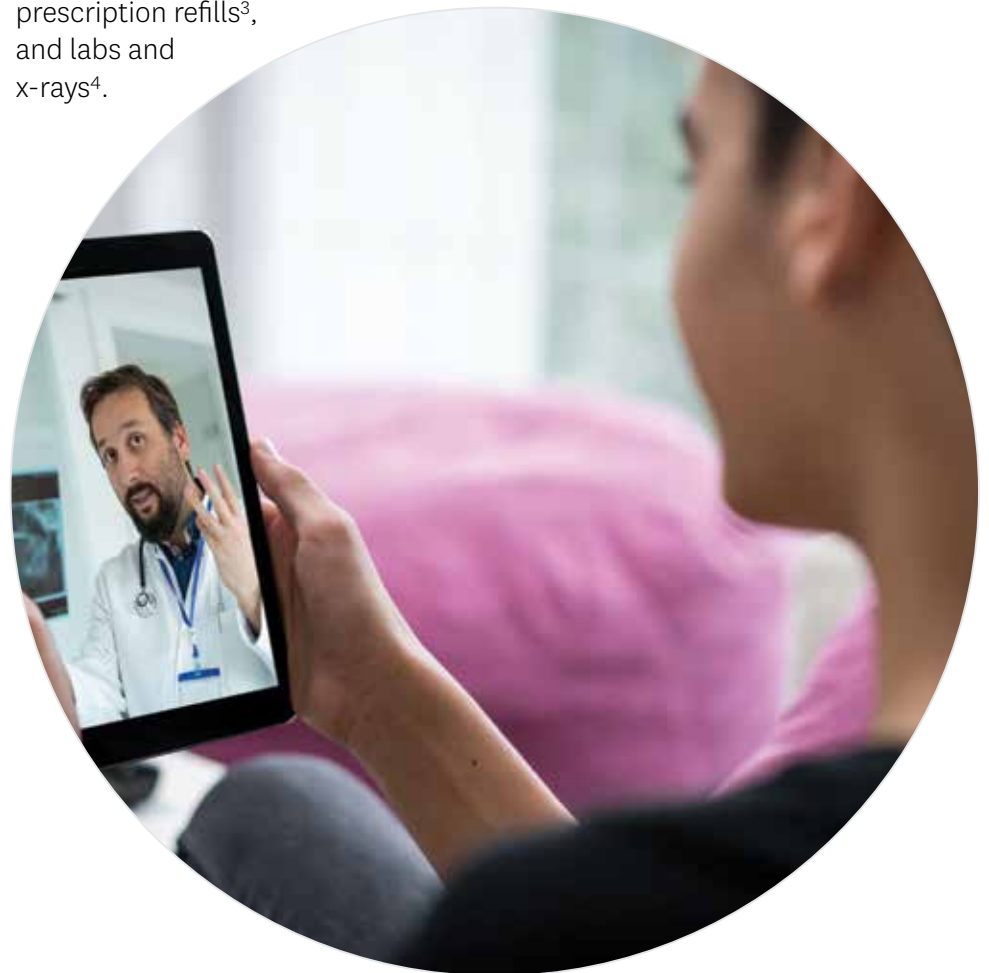
What about doctor visits by phone or video?

Yes. UC Blue & Gold HMO includes a telehealth¹ benefit.

Health Net members can speak to a doctor 24/7² through Health Net's preferred telehealth provider at no additional cost.

This is a convenient way for Health Net members to discuss non-emergency health issues like cough and sore throat, anxiety, and depression, cold and flu and more! During the video visit, members can get answers about, urgent prescription refills³, and labs and x-rays⁴.

Telehealth does not replace your primary care physician, but if you are considering the use of an urgent care center or emergency room for treatment of a non-emergency illness or injury, you should consider telehealth.



If I have more questions, where is the best place to get more information?

The best place to get more information about what Health Net offers is our website just for UC members – www.healthnet.com/uc or email Askblue&gold@healthnet.com. Emails are responded to within 24 hours, Monday through Friday.

To speak to a dedicated UC Customer Service representative about benefit questions, call our **Health Benefit Navigator team** Monday through Friday, **8 a.m.–8 p.m. PT** at **800-539-4072**. For behavioral health questions, call **MHN** at **800-633-9355**. Both centers are available **8 a.m.–8 p.m. PT**.



Health Net's Nondiscrimination Notice

¹ 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 the telehealth provider will accrue toward your out-of-pocket maximum and deductible (if your plan has a deductible). By scheduling through the telehealth provider, you consent to receive services via telehealth. 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 the telehealth provider. Unless you choose otherwise, any services provided through the telehealth provider shall be shared with your primary care provider.

² Behavioral health services are open Monday–Friday 8 a.m.–8 p.m.

³ Access to telehealth services does not guarantee that a prescription will be written.

⁴ Labs and X-rays may be ordered by the telehealth provider if medically necessary.

Health Net of California, Inc. is a subsidiary of Health Net, LLC and Centene Corporation. Health Net is a registered service mark of Health Net, LLC. All rights reserved.

BKT814403ELO1w(10/22)