

Transition of Care Guidelines & Information:

If you are in PacifiCare and transferring to Health Net: *

What's Available	What You Need to Do
<p>PCPs: Many PacifiCare PCPs are also Health Net PCPs. If your PCP is in both networks, Health Net will try to enroll you with your current PCP.</p>	<p>To ensure your PCP selection, go online (atyourservice.ucop.edu) to enroll in Health Net and choose your PCP. Give your new Health Net i.d. card to your provider after 1/1/08</p>
<p>Acute Conditions: If your PacifiCare provider is not a Health Net provider and you have an acute condition (defined as a sudden onset of symptoms due to an injury, illness that requires prompt attention for a limited duration) in active treatment (such as heart attack, stroke, etc.), you shall be able to continue with your current non-participating provider, provided that all applicable conditions of the California Knox-Keene Act are satisfied, through Health Net for the duration of the acute condition.</p>	<p>Discuss your transition of medical care with your current physician. Then, call Health Net Customer Service at 800-539-4072 after 11/1/07 to request a Transition of Care Application Complete and mail the form to Health Net by 12/14/07 or within the first 30 days of 2008. Health Net will be able to consider the application once it receives UC's eligibility file in mid-December. With complete information, Health Net can make a decision within 8 business days</p>
<p>Serious Chronic Conditions: If your PacifiCare provider is not a Health Net provider and you have a serious chronic condition (defined as a disease, illness or condition that persists without full cure or worsens over a period of time, requiring ongoing treatment to maintain remission or prevent deterioration) in active treatment (such as leukemia, multiple sclerosis, etc), you shall be able to continue with your current non-participating provider, provided that all applicable conditions of the California Knox-Keene Act are satisfied, through Health Net long enough to complete a course of treatment up to a period of 12 months.</p>	<p>Same as above</p>
<p>Pregnancy and Childbirth: If your PacifiCare provider is not a Health Net provider and you are pregnant (all trimesters) on 1/1/08 or within 6 weeks postpartum, you shall be able to continue with your current non-participating provider, provided that all applicable conditions of the California Knox-Keene Act are satisfied, through Health Net until 6 weeks postpartum.</p>	<p>Same as above</p>
<p>Newborns: If your 0-36 month old child's PacifiCare PCP is not a Health Net PCP, your child shall be able to continue with his/her current non-participating provider, provided that all applicable conditions of the California Knox-Keene Act are satisfied, through Health Net up to 12 months.</p>	<p>Same as above</p>

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<p>Hospitalizations: If you are in the hospital on 1/1/08 and the hospital is not a Health Net hospital, you shall be able to continue care either until discharged or until it is safe & appropriate to transfer care.</p>	<p>Same as above</p>
<p>Scheduled Surgery: If you are scheduled and authorized for surgery and it is scheduled within 180 days of 1/1/08, you shall be able to continue with your scheduled surgery with your non-participating provider, provided that all applicable conditions of the California Knox-Keene Act are satisfied, through Health Net.</p>	<p>Same as above</p>
<p>Prescription Co-Pay Differences: If you are taking maintenance medications in the last quarter of 2007 and the medication has a higher co-pay under Health Net, you will be able to continue to refill your prescription at the lower co-pay until 4/30/08. After May 1, unless you change to a Health Net formulary medication, you will pay the higher co-pay.</p>	<p>Adjustments will happen automatically; you don't need to do anything. To ensure a smooth transition, refill in December, if possible.</p>
<p>Prescription Open Refills: If you have open refills through PacifiCare's mail order pharmacy from a prescription dated within the last 12 months, your prescription should transfer automatically to Health Net. (NOTE: Federal law prohibits the transfer of prescriptions for controlled substances; these will require a new prescription)</p>	<p>Transfer of data between plans will happen automatically. For your first refill, you will need to complete the Prescriptions By Mail form posted on AYS or Health Net's website and attach your PacifiCare re-order slip or a letter including the PacifiCare prescription number. To ensure a smooth transition, refill in December if possible</p>
<p>Retail Prescriptions: Health Net is unable to obtain your records if you have open refills through a retail pharmacy that is not in the Health Net pharmacy network. You must obtain a new prescription from your physician and take it to a Health Net participating retail pharmacy.</p>	<p>Request a new prescription from your provider prior to 1/1/08; take it to a Health Net retail pharmacy for dispensing after 1/1/08 or use a pharmacy that is included in both PacifiCare's and Health Net's network</p>

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<p>Behavioral Health: For Non-Medicare members: If you are using a behavioral health provider under PacifiCare, you may already be using a United Behavioral Health (UBH) provider. Changing to Health Net should not impact your care.</p> <p>If your outpatient PacifiCare behavioral health provider is not a UBH provider, you shall be able to continue with your current non-participating provider, provided that all applicable conditions of the California Knox-Keene Act are satisfied, through UBH at the in-network benefit level until 6/30/08. You must have been receiving mental health or substance abuse outpatient services prior to 1/1/08 and extending in to 2008</p>	<p>Check with UBH or your provider to see if your provider is in the UBH network. If so, you don't need to do anything. If not, call UBH at 1-888-440-UCAL (8225) after November 1, 2007 or within the first 31 days of 2008 for a certification of the transition benefit.</p>

Appeal Process*: HMO transition of care rules are governed by the California Knox Keene Act regulations and approval of transition of care services is determined by Health Net based on the requirements of the California Knox-Keene Act. In the event transition benefits are denied, members may access an existing appeal process. Any appeals related to transition of care may be filed with Health Net and are subject to their standard appeals process. Appeals are reviewed by Health Net Medical Directors, with options for external review; also, binding arbitration may be pursued after the appeals process is exhausted.

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