

Alternative Care

FOR HEALTH NET MEMBERS

Health Net has teamed up with American Specialty Health Group, Inc. (ASH Group) to offer quality, affordable coverage for acupuncture, chiropractic, therapeutic massage, and naturopathic care.¹

Although you're always welcome to consult your primary care physician, you won't need a referral to see a participating provider. With this program, you're free to obtain care by self-referring to a participating provider. Providers can be found online at ashlink.com/ash/hnetorcom or by calling 1-800-678-9133.

Chiropractic (Unlimited visits)		Acupuncture (36 visits combined in and out-of-network)		Massage therapy (27 visits combined in and out-of-network)		Naturopath (Unlimited visits)	
In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network
Office visits are covered at the PCP copay under your medical plan	20%	Office visits are covered at the PCP copay under your medical plan	20%	Office visits are covered at the PCP copay under your medical plan	20%	Office visits are covered at the PCP copay under your medical plan	Office visits are covered at the PCP out-of-network cost share under your medical plan

What's covered?²

- Initial examination, subsequent office visits and re-examination are included in this benefit.
- All services, except for the initial exam, must be medically necessary, and may be subject to medical necessity verification. Your provider will obtain any needed verification.
- A \$50 annual chiropractic allowance is also available to purchase medically necessary items such as: supports, collars, pillows, heel lifts, ice packs, cushions, orthotics, rib belts, or home traction units.

- Services from out-of-network providers. For details on out-of-network coverage, see page 2.

Covered conditions

Therapeutic massage care

- Myofascial/musculoskeletal disorders and functional disorders such as:
 - Sprain/strain injuries to the spine and extremities
 - Muscular spasms and myalgias
 - Fibromyalgia/myofascial pain
 - Extremity pain/bursitis/tennis elbow/carpal tunnel syndrome
 - Local pain syndromes

(continued)



 **Questions?**

Call ASH at **1-800-678-9133**

¹Only chiropractic, acupuncture and naturopath benefits available on Oregon State Standard Plans.

²All HDHP plans require that deductible be met prior to receipt of the outlined ASH benefits.

Chiropractic care

- Musculoskeletal and related conditions, including conditions such as:
 - Sprain/strain injuries to the spine and extremities
 - Muscular and ligamentous injuries, joint injuries, cartilaginous and meniscus injuries
 - Fibromyalgia/myofascial pain
 - Extremity pain/bursitis/tennis elbow/carpal tunnel syndrome
 - Intervertebral disc injuries/disorders
 - Muscular spasms and myalgias
 - Inflammatory disorders: tendonitis, synovitis, tenosynovitis, myositis, capsulitis, etc.
 - Entrapment/compressive syndromes: carpal tunnel, tarsal tunnel, etc.

- Degenerative joint diseases/arthropathies: osteoarthritis/osteoarthrosis, degenerative disc disease, enthesopathies, etc.
- Neurological conditions: radicular symptoms, sciatic, cervical/lumbar radiculopathies, nerve plexus injuries, etc.
- Headaches
- Local pain syndromes

Naturopathic care

- Naturopaths can treat a wide variety of health conditions, diseases or illnesses using a system of practice that bases the treatment on natural laws governing the body using physiotherapy, mechanotherapy or natural modalities.

Acupuncture care

- Headache (e.g., tension-type headache, migraine headache).
- Hip or knee joint pain associated with osteoarthritis (OA).
- Other extremity joint pain (e.g., tennis elbow, carpal tunnel syndrome, shoulder pain, etc.).
- Other pain syndromes involving the joints and associated soft tissues.
- Musculoskeletal neck and back pain.
- Nausea associated with pregnancy, post-surgical recovery or chemotherapy.

Out-of-Network Coverage

Members have access to out-of-network coverage for alternative care services through ASH Group. Approval for these visits depends on medical necessity, so members must submit an ASH Group medical necessity form. Although it's the member's responsibility, out-of-network providers can help submit the form.

If approved, ASH Group will reimburse the visit directly to either the member or the provider. Members are responsible for any out-of-network co-insurance costs, which will be reimbursed according to their benefit schedules.

How to Submit an Out-of-Network Claim:

Download the ASH Group Medical Necessity Form: go to ashlink.com select *Resources>Members>NON-PARTICIPATING PRACTITIONER CLAIMS PACKETS*

Complete the Form: Fill out the form with your information, your provider's details, and all requested clinical information.

Submit the Form: Send the completed form to American Specialty Health Group, Inc. (ASH Group) at the following address:

American Specialty Health Group, Inc.

Claims Administration
P.O. Box 509001
San Diego, CA 92150-9001
Or fax it to: 877-304-2746

If you have any questions Customer Service Agents are available at **800-678-9133 (TTY/TDD 711)**: Monday–Friday: 5am–8pm Pacific Time

Nondiscrimination Notice

Health Net Health Plan of Oregon, Inc., "Health Net" complies with applicable federal civil rights laws and does not discriminate, exclude people or treat them differently on the basis of race, color, national origin, ancestry, religion, marital status, gender, gender identity, sexual orientation, age, disability, or sex.

HEALTH NET:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact Health Net's Customer Contact Center at 1-888-802-7001 (TTY: 711).

If you believe that Health Net has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by calling the number above and telling them you need help filing a grievance. Health Net's Customer Contact Center is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019 (TDD: 1-800-537-7697).

Complaint forms are available at <https://www.hhs.gov/ocr/complaints/index.html>.

English

No Cost Language Services. You can get an interpreter. You can get documents read to you and some sent to you in your language. For help, call the Customer Contact Center at the number on your ID card or call 1-888-802-7001 (TTY: 711).

Amharic

አዲነ አገልግሎት ምንም ክፍያ የለም:: እስተርምሱ ማግኘት ችልላ:: የተዘጋጀውን እና የተወካቸውን ችሎት መግኘት ችልላ:: ለእርዳታ ለማንኛው ጥናቸው ማቅረብ እና የለም ላይ የለውን ቁጥር የሚመለከት ነው:: እና የለውን ቁጥር 1-888-802-7001 (TTY: 711) ደረሰኑ::

Arabic

الخدمات اللغوية المجانية. يمكنك طلب قراءة المستندات عليك وإرسال بعض منها إليك بلغتك. للحصول على المساعدة، يمكنك الاتصال بمركز اتصال العملاء على رقم الموجود على بطاقة معرف العضوية الخاصة بك أو الاتصال على (TTY: 711) 1-888-802-7001.

Chinese

免費語言服務。您可以取得口譯服務。我們可以把文件朗讀給您聽，也可以把部分翻譯成您語言的文件寄送給您。如需協助，請撥打會員卡上的電話號碼聯絡客戶聯絡中心，或撥打電話 1-888-802-7001 (聽障專線 (TTY) : 711)。

Cushite (Oromo)

Tajaajila afaaniif kaffalti hin qabu. Turjubaana argachuu ni dandeessu. Sanadii isiniif dubbifamee fi afaan keessaniin muraasaan isniif ergame argachuu ni dandeessu. Gargaarsaaf, Wiirtuu Qunnamtii Maamilaa tiif lakkofisicha kaardii enyummaa keessan irra jirutti bililiaa ykn 1-888-802-7001 (TTY: 711) itti bililiaa.

German

Es stehen Ihnen kostenlose Sprachdienstleistungen zur Verfügung. Sie können einen Dolmetscher hinzuziehen. Die Dokumente können Ihnen vorgelesen werden und einige sind in Ihrer Muttersprache erhältlich. Für Unterstützung rufen Sie bitte unser Kundendienstzentrum unter der auf Ihrer Versicherungskarte angegebenen Nummer oder unter der Rufnummer 1-888-802-7001 (TTY: 711) an.

Japanese

無料の言語支援サービス。通訳をご利用いただけます。日本語で文書を読み上げたり、文書によっては日本語版をお届けすることも可能です。支援をご希望の方は、IDカードに記載の番号にてカスタマーコンタクトセンターまでお電話いただくか、1-888-802-7001 (TTY: 711)までお電話ください。

Korean

무료 언어 서비스. 귀하는 통역사를 이용하실 수 있습니다. 귀하에게 편한 언어로 서류 낭독 서비스 및 번역 서비스를 받으실 수 있습니다. 도움이 받으시려면 본인의 ID 카드에 기재된 고객 서비스 센터 안내번호 또는 1-888-802-7001 (TTY: 711)번으로 전화해 주십시오.

Cambodian (Khmer)

សេវាភាសាតិជ្រើញ អ្នកអាជទទួលអុបកព្របាយ អ្នកអាជិព្យោតអាគនកសាស្សែខ្ពស់ និងផ្លូវការសាន្ត់ដូចម្នក ជាការបស់អ្នក សំរាប់ជនយុទ្ធសាស្ត្រទៅមែនដឹងទៀត តាមលេខទូរសព្ទ D បានសំរួល 1-888-802-7001 (TTY: 711)។

Laotian

ການບໍລິການດ້ານພາຫຼືບໍລະຍຄວ່າ. ທ່ານສາມາດຂໍ້ມາລັບພາສາ. ທ່ານສາມາດອ່ານເອກະສານ ແລະ ລຳນວຍໜຶ່ງໄດ້ສົ່ງໃຫ້ທ່ານເປັນພາສາຂອງທ່ານແລ້ວ. ແຜ່ນຂໍ້ຄວາມ
ຊ່ວຍເຫຼືອ, ໂທທາສູນຕິດຕໍ່ວູກຄ້າໄດ້ທີ່ເວກເໝາລຸ່ມທີ່ບັດ ID ແອງທ່ານ ຫຼື ໂທ 1-888-802-7001 (TTY: 711).

Punjabi

ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ ਲਈ ਕੋਈ ਲਾਗਤ ਨਹੀਂ। ਤੁਸੀਂ ਦੁਭਾਸ਼ੀਆ ਪ੍ਰਾਪਤ ਕਰ ਸਕਦੇ ਹੋ। ਤੁਸੀਂ ਤੁਹਾਨੂੰ ਪੜ੍ਹ ਕੇ ਸੁਣਾਏ ਦਸਤਾਵੇਜ਼ ਪ੍ਰਾਪਤ ਕਰ ਸਕਦੇ ਹੋ ਅਤੇ ਕੁਝ ਤੁਹਾਡੀ ਭਾਸ਼ਾ ਵਿੱਚ ਤੁਹਾਨੂੰ ਭੇਜੇ ਗਏ ਹਨ। ਮਦਦ ਲਈ, ਆਪਣੇ ID ਕਾਰਡ 'ਤੇ
ਗਾਹਕ ਸੰਪਰਕ ਕੇਂਦਰ ਨੂੰ ਕਾਲ ਕਰੋ ਜਾਂ 1-888-802-7001 (TTY: 711)।

Russian

Бесплатные услуги перевода. Вы можете воспользоваться услугами переводчика.
Вам могут прочесть документы на русском языке и выслать переводы некоторых из них. Если вам требуется помощь, звоните в Центр обслуживания
клиентов по номеру, указанному на вашей идентификационной карте, или по номеру 1-888-802-7001 (линия TTY: 711).

Spanish

Servicios de Idiomas Sin Costo. Usted puede solicitar un intérprete. Puede solicitar que se le lean los documentos y que algunos de ellos se le envíen en su
idioma. Para obtener ayuda, llame al Centro de Comunicación con el Cliente al número que se encuentra en su tarjeta de identificación o llame al
1-888-802-7001 (TTY: 711).

Tagalog

Mga Walang Bayad na Serbisyo sa Wika. Maaari kayong kumuha ng tagasaling-wika (interpreter). Maaaring basahin sa inyo ang mga dokumento at ipadala sa
inyo ang ilan nang nakasalin sa inyong wika. Para sa tulong, tumawag sa Customer Contact Center sa numero sa inyong ID card o tumawag sa
1-888-802-7001 (TTY: 711).

Ukrainian

Безкоштовні послуги перекладу. Ви можете скористатися послугами перекладача.
Вам можуть прочитати документи на українській мові та надіслати переклади деяких із них. Якщо вам потрібна допомога, телефонуйте у Центр
обслуговування клієнтів за номером, вказаним на вашій ідентифікаційній карті, або за номером 1-888-802-7001 (лінія TTY: 711).

Vietnamese

Dịch vụ ngôn ngữ miễn phí. Quý vị có thể yêu cầu phiên dịch viên. Quý vị có thể yêu cầu đọc các tài liệu và gửi một số tài liệu cho quý vị bằng ngôn ngữ của quý
vị. Để được trợ giúp, hãy gọi đến Trung tâm Liên lạc Hội viên theo số điện thoại trên thẻ nhận dạng của quý vị hoặc gọi đến số 1-888-802-7001 (TTY: 711).