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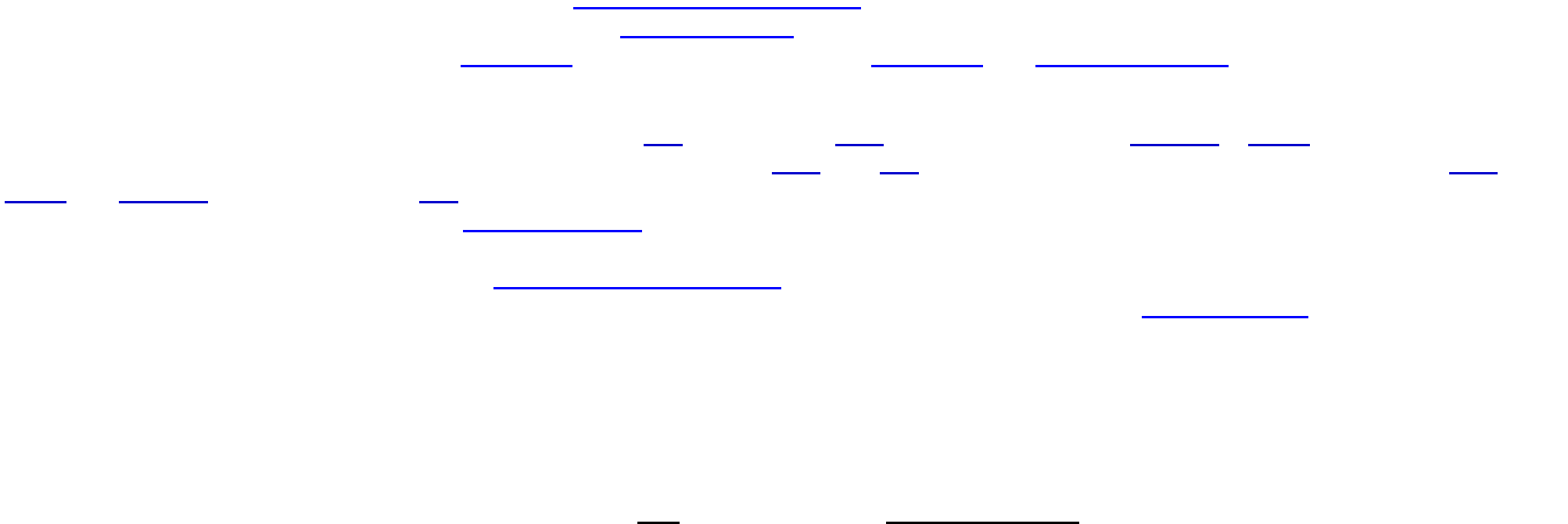
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<ul style="list-style-type: none"> <li>€ Acupuncture</li> <li>€ Cosmetic surgery</li> <li>€ Dental care (Adult)</li> </ul>	<ul style="list-style-type: none"> <li>€ Hearing aids</li> <li>€ Long-term care</li> <li>€ Non-emergency care when traveling outside the U.S.</li> </ul>	<ul style="list-style-type: none"> <li>€ Private-duty nursing</li> <li>€ Routine eye care (Adult)</li> <li>€ Routine foot care</li> <li>€ Weight loss programs</li> </ul>
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<ul style="list-style-type: none"> <li>€ Abortion-termination of pregnancy and related services are covered in full.</li> </ul>	<ul style="list-style-type: none"> <li>€ Bariatric surgery</li> <li>€ Chiropractic care-\$10 copay/visit (PPO);</li> </ul>	<p style="text-align: right;">ed</p>
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[Minimum Essential Coverage](#) generally includes [plans](#), [health insurance](#) available through the [Marketplace](#) or other individual market policies, Medicare, Medicaid, CHIP, TRICARE, and certain other coverage. If you are eligible for certain types of [Minimum Essential Coverage](#), you may not be eligible for the [premium tax credit](#).

If your [plan](#) doesn't meet the [Minimum Value Standards](#), you may be eligible for a [premium tax credit](#) to help you pay for a [plan](#) through the [Marketplace](#).

Spanish (Español): Para obtener asistencia en Español, llame al 1-800-522-0088.

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa 1-800-522-0088.

Chinese ( ): 1-800-522-0088.

Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwijigo holne' 1-800-522-0088.

To see examples of how this [plan](#) might cover costs for a sample medical situation, see the next section.

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Characteristics listed above can be a source of discrimination. Health Net's Customer Contact Center at 1-800-444-4444 and toll-free number 1-800-444-4444 are available to you. Health Net's Customer Contact Center is available to you. Health Net also has a Health Net email at:

Health Net of California, Health Net Licensee, Health Net of California, Inc.  
1000 N. 1st St.

1000

Email: [discrimination@healthnet.com](mailto:discrimination@healthnet.com) or  
Non-discrimination@healthnet.com

If you are not satisfied with a decision or it has been more than 60 days since you filed a complaint with Health Net of California, you may file an independent administrative complaint with the Department of Health Care Services. You may file a complaint form at [www.dhs.ca.gov](http://www.dhs.ca.gov) or call 1-800-444-4444.

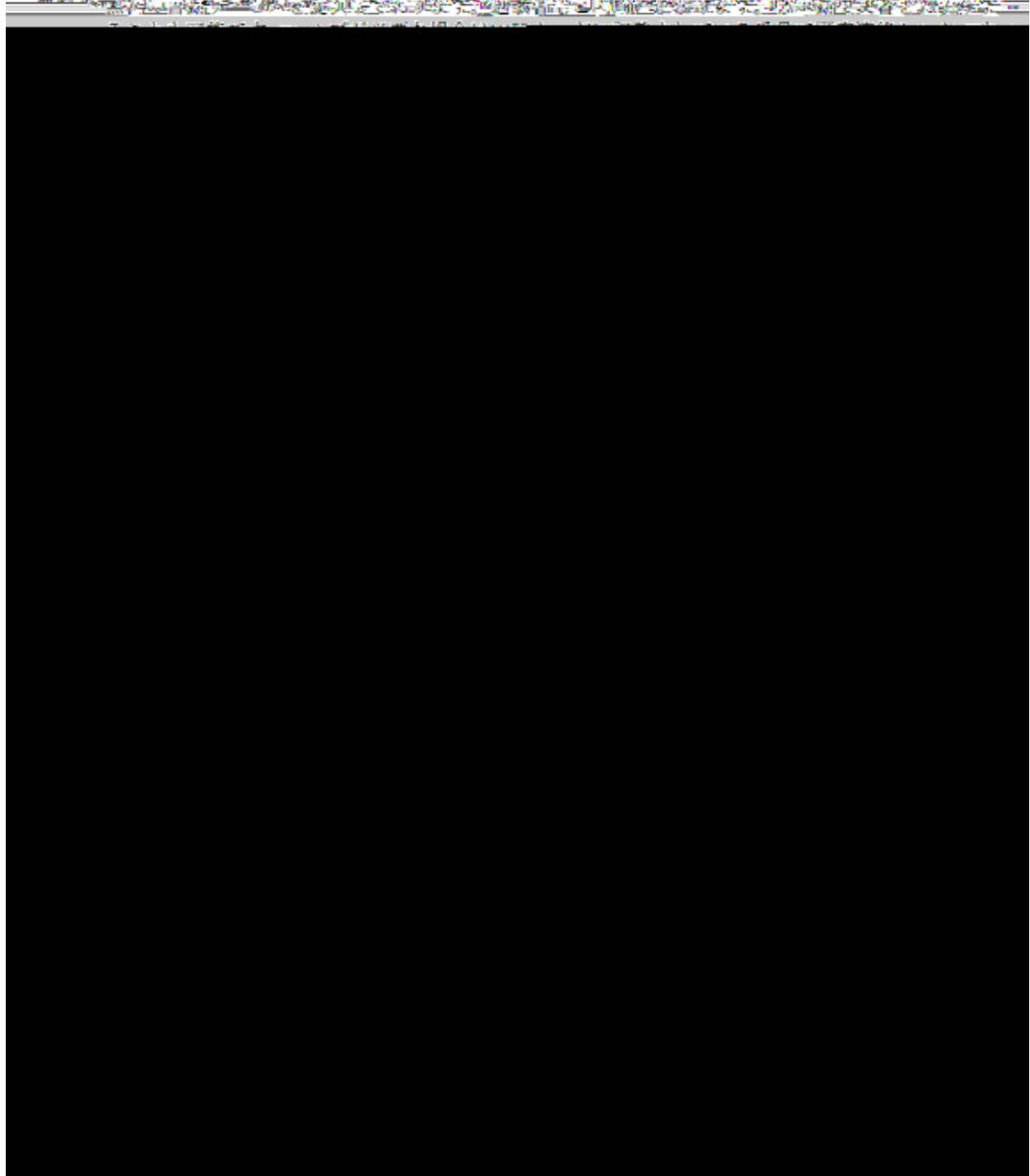
If you have been discriminated against on the basis of race, national origin, ancestry, or sex, you may also file a civil rights complaint with the Department of Health and Human Services or the Department of Health and Human Services, Independence Avenue, Room 400, HH Building, San Francisco, CA 94133.

Complaint forms are available at [www.dhs.ca.gov](http://www.dhs.ca.gov) or call 1-800-444-4444.





## Japanese





Vietnam

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Ngày: \_\_\_\_\_ Số báo: \_\_\_\_\_  
Địa điểm: \_\_\_\_\_  
Điện Thoại: \_\_\_\_\_

