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Coverage for Treatment Due to Rape or Sexual Assault

Starting July 01, 2025, AB 2843 requires health care service plans to provide emergency room and follow-up care coverage for the medical treatment of rape or sexual assault with no member cost-share. Coverage without cost-sharing is required for the first nine months of treatment. This includes:

- Copays
- Coinsurance
- Deductibles (high deductible health plans (HDHP) are subject to plan deductible)

On July 1, 2025, Health Net will apply this change on all new, current and renewing Commercial group plans as follows:

- No cost-share for emergency room medical care and follow-up treatment for victims of rape or sexual assault. Follow-up care includes:
 - Behavioral health
 - Medical or surgical services
 - Prescription drugs
- Assembly Bill 2843 requires plans to provide this coverage at no cost to the member for the first nine months of treatment. Even so, Health Net will not apply this limit (this excludes SIMNSA on Salud plans).
- For cost-share to be waived, the member's in-network treating provider must submit all claims for payment using diagnosis codes specific to rape or sexual

assault.

- Out-of-Network Coverage:
 - HMO Plans: Will only be covered if relevant services are approved. Or if the services are not available within the network.
 - PPO Plans: Will be covered based on the member's plan benefits and with the proper:
 - Copay
 - Coinsurance
 - Deductibles

Note: Members who pay out-of-pocket should follow the Health Net standard claims filing process. For help, members can refer to their Evidence of Coverage. Or they can contact Health Net's Customer Contact Center at the number listed on the Health Net Member ID card.

On March 20, 2025, Health Net mailed notifications regarding the Coverage for Healthcare Treatment Due to Rape or Sexual Assault to all Health Net Commercial Employer Groups.

For Questions

Contact your Health Net Account Representative.

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