

Healthier happens together™

Explore your robust benefits right here



City of Roswell

Medical, Pharmacy & Vision Benefits

October 1, 2023 - September 30, 2024

[Aetna.com](https://www.aetna.com)





What's inside

Plans

Our network

Programs & resources

Support & access

Aetna® is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna). Aetna is part of the CVS Health® family of companies.

Health care made simple

Aetna is a proud CVS Health® company.

At Aetna® and CVS Health®, we take care of the whole you. This means you'll get connected, convenient and affordable health care wherever — and whenever — you need it.

We offer customized health benefits plans, large provider networks, support programs, special discounts and much more. So you can relax knowing you'll have the tools and resources you need to live healthy. And no matter where you are on your path to better health, count on us for ongoing support. That's how healthier happens together™.

If you have questions, call us at **800-370-4526** for medical plans and **877-973-3238** for vision plans.

To-dos before you choose

- Use our provider search tool**
Our network represents about two-thirds of doctors and three-fourths of acute care hospitals nationwide. So you're sure to find the providers you need.
- Get to know each plan**
Review your benefits enrollment site to see which plan is right for you.
- Review the extras**
See how the plan perks can add up to better care, more choices and lower costs, too.

Terms to know



Understanding your choices just got easier. If you find health insurance terms to be confusing, you're not alone. Here are some common terms you may hear and what they mean.



BASIC TERMS



Deductible is the amount you pay for covered services before the health plan begins to pay. Eligible preventive care is covered at 100% with no deductible when you use network providers.



Copays are fixed dollar amounts you pay for health care services. In some plans, you pay this after meeting your deductible. However, in the copay plan option offered to you by the City of Roswell, the deductible is waived for certain services meaning you are only responsible for your copay (i.e. PCP or Specialist office visits)



Coinsurance is what you pay for medical expenses after you meet your deductible. After you meet your deductible, coinsurance "kicks in" and is your share of the costs of a covered service, calculated as a percentage of the medical expenses for the service.



Out-of-pocket maximum is the maximum amount you pay each year for covered expenses. Once you hit your out-of-pocket maximum, the plan pays 100% of covered expenses for the rest of the plan year.

NETWORK



Network providers participate in the health plan's network. Network providers contract with the health plan and offer negotiated rates that are often lower than their regular fees. Network providers will send claims for services you receive and handle pre-approvals on your behalf. You will usually pay less when using a network provider.



Non-Network providers do not participate in the network and do not contract with the health plan. This means they normally charge more for their services and you may be balance billed. They generally do not submit claims or request pre-approvals on your behalf. So you may need to handle these details on your own. You will usually pay much more if you go out of network.

YOUR PLAN



Your POS medical plan allows you to have the freedom to choose network providers at lower out-of-pocket costs, or non-network providers at higher out-of-pocket costs. While encouraged, you are not required to choose a primary care physician (PCP) with this plan. You can access any participating provider for covered services without a referral.

COVERAGE & PROCESSING



Covered does not mean free. A covered health care service is one that your plan recognizes. Your plan pays for this service after you've paid the applicable deductible, coinsurance or copay. Eligible preventive care is covered at no charge.



Exclusions are charges, services or supplies that are not covered and do not apply towards your deductible and out-of-pocket maximum.



Prior Authorization is required for certain covered services. It can also be referred to as precertification or pre-approval. This process helps ensure that the test, treatment, and/or procedure your provider requests is effective, safe, and medically necessary. In-Network providers are responsible for obtaining any necessary precertification before you get the care. Network providers cannot bill you if they fail to ask for precertification. But if your physician requests precertification that is denied, and you still choose to get the care, you will have to pay for it yourself. When you go to an out-of-network provider, you are responsible to get any required precertification.



Predetermination of benefits occurs when you or your provider want the health plan to review a service before you receive care that does not require precertification.



A referral is like a permission slip from your primary care physician (PCP) to see a specialist or another provider. Referrals are not required on the plan offered to you by the City of Roswell.



Claims are requests for your plan to pay for services you receive. Claims are used to check what your plan will cover and the amount the health plan will pay. You can find updated status and amounts billed for your claim on your member website or the Aetna HealthSM app.



Explanation of Benefits (EOB) statements show a breakdown of how your claim is processed. It is not a bill and may not show the current balance you owe. Anytime something changes with your claim, you'll get a new statement.



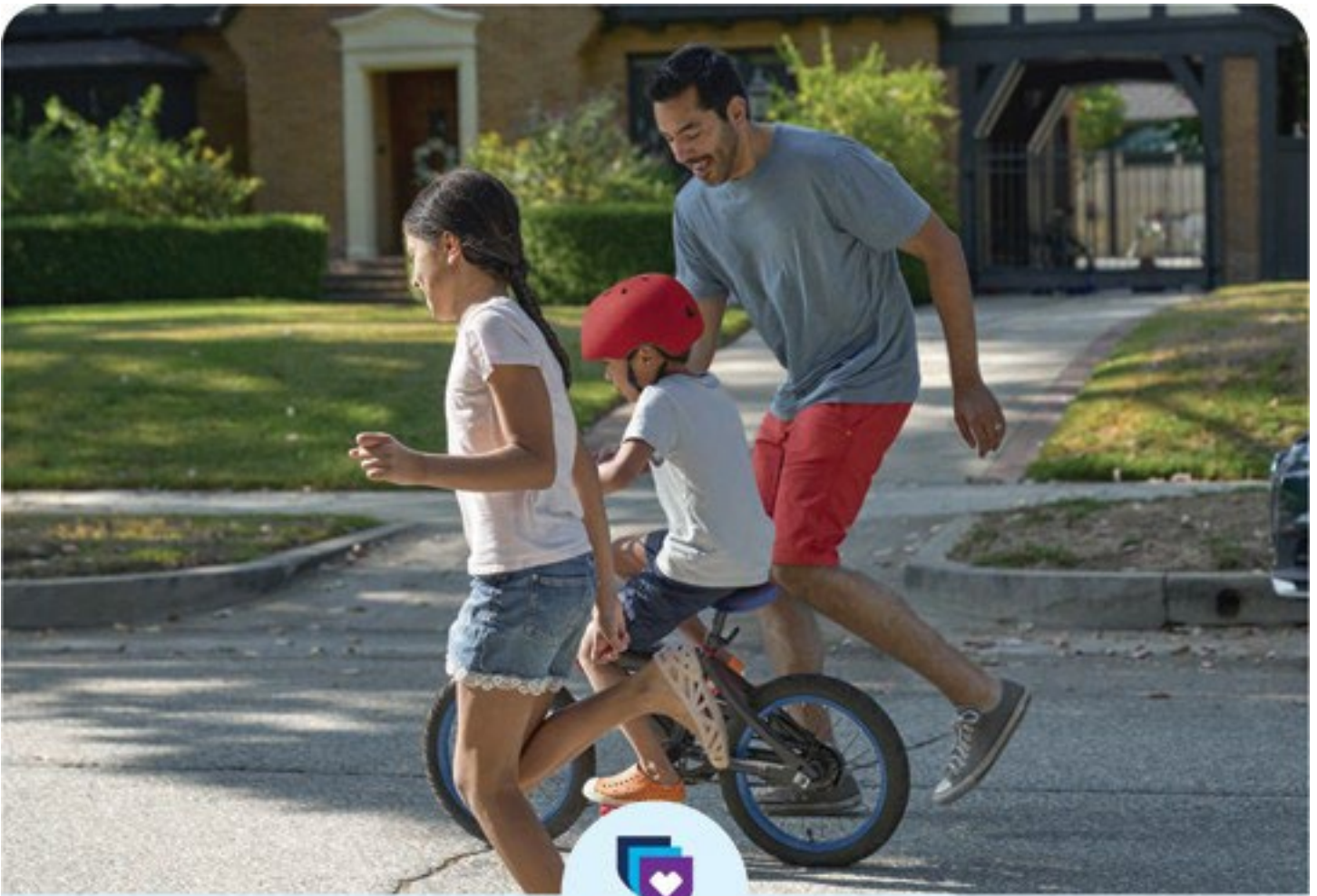
Coordination of Benefits (COB) occurs if you have health coverage under more than one health plan. When this happens, your health plan will work with the other carriers to decide which plan pays first and which plan pays second, based on the rules in your plan documents.



Provider bills show the amount you actually owe for services after a claim has been submitted and processed. You'll get this from your provider. You can typically make payments on the provider's billing portal or by check via mail.



Balance bills are issued when an Out-of-Network provider charges you with the amount your insurance does not "allow" or pay. In-Network providers have a contracted rate with Aetna and are not permitted to bill over the contracted/allowed rate. Out-of-Network providers can bill you for anything over the amount that Aetna recognizes or allows.



Plans

Choosing a plan that's right for you and your family is so important. That's why we offer affordable options to meet your unique needs. And we'll be right there to help you find the perfect fit.

Stay in network to help lower costs

When you go for care, keep in mind that staying in network has special perks. You may have lower out-of-pocket costs, because these providers have agreed to accept our contracted rate for services. Plus, they'll file claims for you, so you don't have to worry about any extra work.

Know what to expect if you go out of network

Your plans have out-of-network benefits, too. Just know you may have higher out-of-pocket costs. Plus, you may have to file your own claims and/or get preapproval for some services.

Understand that we cover emergency care

In case of an emergency, we'll cover care both in and out of network. So whatever plan you choose, know you can count on us when the unexpected happens.

Medical

Aetna Choice® POS II health benefits and insurance plan

When choosing a medical plan, it is important to understand how each option works, your healthcare utilization and how it will impact your budget. Take the time to review the plans and determine which plan best meets your needs and provides you the best health and financial protection in the long run. You don't have to choose a primary care physician (PCP) with this plan. But selecting a PCP is still important because they do more than give you a checkup. They get to know you and your medical history, guide you on important health decisions and direct your care and file claims for you. Keep in mind — you don't need a referral to see any network doctor. And you can visit any licensed doctor out of our network. But if you go out of network, you may have to file your own claims and pay more out of pocket.

Preventive Care

Getting regular checkups and exams can help you stay well and catch problems early. It may even save your life. When you get these services from doctors in your plan's network, there is no cost to you.

Preventive vs Diagnostic Care: What's the difference?

Let's say your doctor wants you to have an osteoporosis screening (bone density test) because of your age. If you have the screening, it's considered preventive care, and this usually costs you nothing extra. If your doctor suggests an osteoporosis screening because you're having symptoms, that's diagnostic care. You may have to pay part of the costs if you have the procedure. Ask your doctor if you're unsure of the difference between preventive and diagnostic care, so you're not surprised by any costs.



Keep your health in check with preventive care

You can get:

- Annual routine physical exam for adults and children
- Immunizations
- Well-woman exam, including cervical cancer screening
- Preventive mammogram
- Diabetes screening for pregnant women
- Colorectal cancer screening, based on age
- Prostate cancer screening, based on age
- Counseling (alcohol, smoking, nutrition and more)

These are just a few examples of the services available. Be sure to check your plan for details. And talk with your doctor about the care that's right for you.

It's important to take care of the whole you.

This includes your physical and mental wellness. That's why your benefits include checkups, screenings, vaccines, prenatal care services, counseling and more. And there are no out-of-pocket costs when you stay in network. So it's good for your health — and your wallet.

Pharmacy

Aetna Standard Plans

Make the most of your pharmacy benefits

Your plan includes

- Brand and generic drugs that are hand-picked for their quality and effectiveness
- A specialty pharmacy that fills specialty prescriptions (ones that are injected, infused or taken by mouth) — and provides services that include personal support, helpful resources and training, and free secure home delivery
- A home delivery pharmacy that delivers maintenance drugs to your home or wherever you choose (for drugs that are taken regularly to treat conditions like diabetes or asthma)

What you can expect to pay

With your pharmacy plan, the amount you pay depends on the drug your doctor prescribes. It's either a flat fee or a percentage of the drug's/medicine's price.

Each drug is grouped as a generic, a brand or a specialty drug. The preferred drugs within these groups will generally save you money compared to a non-preferred drug. Typically, generic drugs are less expensive than brands.

Specialty prescription drugs typically include higher-cost drugs that require special handling, special storage or monitoring. These types of drugs may include, but are not limited to, drugs that are injected, infused, inhaled or taken by mouth.

You're covered for all types of medicine — some more expensive, and some less.

- **Generic:** the lowest cost
- **Preferred brand:** a slightly higher cost
- **Non-preferred brand:** a higher cost
- **Preferred Specialty:** lower cost for specialty drugs
- **Non-preferred Specialty:** higher cost for non-preferred specialty drugs

Terms to know

A formulary is a list of drugs covered by your health plan that are identified as the preferred treatment for specific conditions and diseases. The formulary can change throughout the year. Some reasons why it can change include: new drugs are approved, existing drugs are removed from the market, the drug becomes available OTC, brand-name drugs lose patent protection and generic versions become available.

Precertification is one way that we can help you and your doctor find safe, appropriate drugs and keep costs down. Precertification means that you or your doctor need to get approval from the plan before certain drugs will be covered.

Step therapy means that you must try one or more prerequisite drug(s) before a step therapy drug is covered. The prerequisite drugs treat the same condition as the step therapy drug, have U.S. Food and Drug Administration (FDA) approval and may cost less.

Quantity limits help your doctor and pharmacist make sure that you use your drug correctly and safely. We use medical guidelines and FDA-approved recommendations from drug makers to set these coverage limits.

What if I need a drug that requires an exception to the precertification, step therapy or quantity limits requirements? Or what if I need a drug that's not covered under my plan?

In certain cases, you or your prescriber can request a medical exception to the precertification, step therapy or quantity limits requirements or for a drug that's not covered on your plan. You can ask for your request to be expedited. Expedited coverage decisions are made within 24 hours. We'll then contact you or your prescriber with our decision. All medically necessary outpatient prescription drugs will be covered. The amount you pay is based on your pharmacy plan design.

Retail Pharmacy Network

Aetna's National Retail Pharmacy Network is a broad network with over 66,000 locations and includes most chain stores and many independent pharmacies. This network allows broad access nationwide and provides optimal access to in-network pharmacies.

CVS Caremark Mail Service Pharmacy™

You can have maintenance drugs sent right to your home or anywhere else you choose by CVS Caremark Mail Service Pharmacy. These are drugs that are taken regularly for chronic conditions like diabetes or asthma. You can get up to a 90-day supply of medicine for less cost. It's fast and convenient, and standard shipping is always free.

Your provider can submit your order online through e-prescribe or by fax to 1-877-270-3317. You can submit your own order using one of these options:

- 1. Online** — Visit your secure member website and sign into your account. There you can add or remove your prescriptions.
- 2. Phone** — Call us toll-free, 24/7 at **1-888-792-3862**. If you need the help of a telephone device for the hard of hearing, call **1-877-833-2779**.
- 3. Mail** — Get a new prescription from your doctor. Then mail it to us with a completed order form. You can find the form on your secure member website. The mailing address is on the form.

Specialty Pharmacy Network

A specialty pharmacy can fill your prescriptions for specialty drugs. These are the types of drugs that may be injected, infused or taken by mouth. They often need special storage and handling. And they need to be delivered quickly. A nurse or pharmacist may monitor you during your treatment, if needed. With this type of pharmacy, you can get this medicine sent right to your home. Ordering your prescriptions through our specialty pharmacy is easy. And we typically offer a 30-day medicine supply.

- **To transfer your prescription**, call us at **1-866-353-1892**.
- **For a new prescription**, your doctor can send it to us electronically (e-prescribe), by fax, phone or mail.



Formulary Search (Pre-Enrollment)

How to see if a drug is covered

Once enrolled, Aetna members can log on to their Aetna member website to search for drugs currently on the formulary. Pre-enrollment, anyone can see if a drug is covered through our public formulary search by taking the following steps:

1. Go to: Find a Medication*
2. Scroll down and choose the plan year and plan. Choose a plan year: 2023 / Choose a plan: "Aetna Standard Plans"
3. Click "View Plan" to continue
4. On this page, you can find the drug guide that includes the most commonly covered drugs under your plan, quarterly plan change guides, and more coverage details.

To easily search for a specific drug:

1. Follow steps #1-3 above
2. Click on "Find a covered drug"
3. Type the drug name you are looking for in the search bar and select the drug with proper dosage in the drop down and hit "Search".
4. Select the drug from the list that appears to continue.
5. On this page, you can see the formulary status and if there are any notes or restrictions (i.e. quantity limits).

[*https://www.aetna.com/individuals-families/find-a-medication.html](https://www.aetna.com/individuals-families/find-a-medication.html)

Vision

Aetna VisionSM Preferred

Take care of your eyesight — and get the look you want

.Our vision plans come with coverage for:

- Routine eye exams
- Eyeglasses or contact lenses
- Choice of any available frames

A choice of many locations

With Aetna®, you'll have a huge selection of neighborhood retail locations — as well as national ones, like:



Freedom to use any provider

You can also visit any licensed eye care provider outside of the network. Keep in mind that you may pay more out of pocket and need to file your own claims.

Shop online

When you shop online for contacts or glasses at the retailers below, your vision benefits are applied automatically at checkout.



Enroll today in the vision plan designed with you in mind.



Discounts and savings

Find discounts on products and services through in-network providers, including:

20% off any balance over your frame allowance

15% off any balance over your conventional* contact lens allowance

Up to 40% off extra pairs of prescription eyeglasses and sunglasses

Up to 20% off noncovered items, including nonprescription sunglasses and lens extras/add-ons, like antireflective coatings

• **Up to 15% off** the retail price or 5% off the promotional price for LASIK laser eye surgery or photorefractive keratectomy from U.S. Laser Network



Features that fit your schedule

Flexibility

You can get your eye exam and buy your eyewear at different places.

Extended hours

Many provider locations are open seven days a week and evenings, and even accept walk-ins.

Convenient digital tools

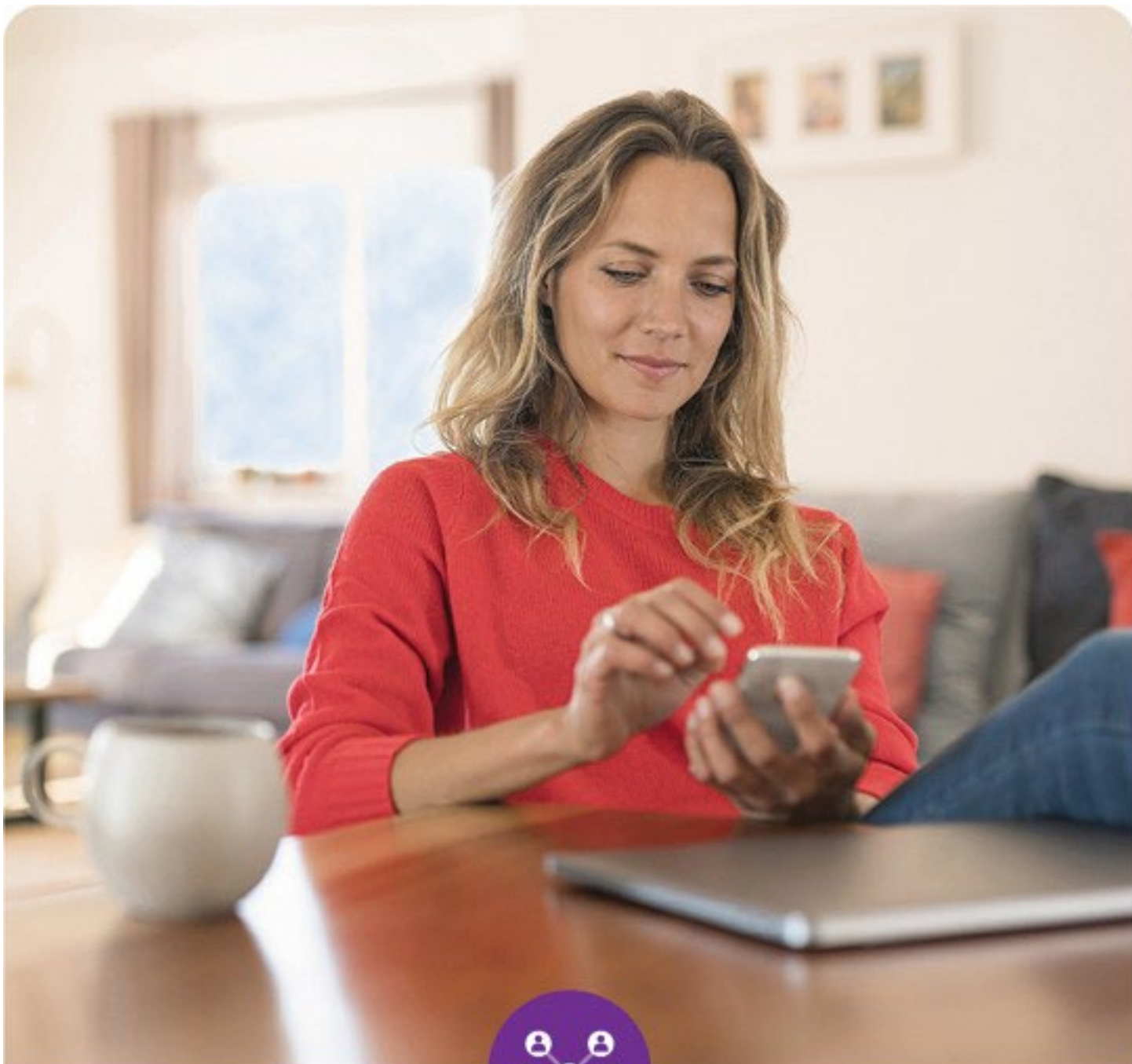
- Find providers, manage your benefits and view your ID card at [AetnaVision.com](https://www.aetnavision.com) or on our mobile app.
- Learn about costs and compare options with our Know-Before-You-Go cost estimator tool.**

Service

Our customer service reps are available seven days a week.



You can use your flexible spending account or health savings account toward out-of-pocket expenses.



Our network

When you need to find the right care, it's always reassuring to know you have choices. Our vast network includes primary care doctors and specialists, hospitals and other health care providers.

And it's never been easier to connect with care. Just use our provider search tool on your member website or use the Aetna HealthSM app when you're on the go.

Our network

Online directory

Find network doctors, right at your fingertips

We're here to help you stress less - and save more - when choosing your health plan. It's simple with our provider search tool. You'll be able to check plans to see if the doctors and sites of services you use are in network for our plans.

Use Aetna's provider search tool - in English or Spanish - to find doctors, hospitals, and other health care providers that participate in the Aetna network. You'll also find useful information, such as:

- Whether your plan is accepted
- Office locations and directions
- Provider's gender, where they went to school, hospital affiliations and languages spoken
- If providers are accepting new patients

Here's how it works (Pre-Enrollment)



1. Visit our website: [Aetna.com/individuals-families/find-a-doctor.html](https://www.aetna.com/individuals-families/find-a-doctor.html). Under "Guests," choose "Plan from an employer."
2. Enter your zip code and wait for the drop down to appear with your zip code and city . Select your zip and city that appears in the drop down.
3. Set range of miles around home location (up to 100-mile radius) and hit "Search".
4. Under "Select a Plan," scroll to and select the plan name "Aetna Choice® POS II (Open Access)" and search. Make sure the plan name matches the Aetna plan name exactly as outlined above.
5. Search by provider name, provider type or you'll also have the option to search by various categories.
6. Explore providers in list view or map view.
7. If you cannot locate your provider or your provider is showing as out-of-network, please contact your Aetna Account team. We will happily help you search or make outreach to the provider to attempt recruiting them into our network.

Once enrolled in an Aetna plan, you will be able to simply access our provider search and many other helpful tools on your member portal after registering for the Aetna member website and the Aetna HealthSM.mobile app.

Aetna Smart Compare™

Take the guesswork out of finding a provider

We make it easier for you to choose the right physician or specialist with the Aetna Smart Compare designation program. How does it work?

You will have access to more information to help you choose a doctor or practice. When you search for providers or procedures on our Aetna HealthSM app or member website, simply look for the "Quality Care" and "Effective Care" designations.

These doctors have demonstrated a higher standard for quality and cost effectiveness. This means they:

- Provide quality care
- Go above efficiency measures
- Manage costs well
- Recommend appropriate testing and treatments for their patients

You'll see designations on primary care physicians (which include family practice), internal medicine and pediatric practices, and orthopedic specialists who support hip and knee conditions.



Get started today

Visit [Aetna.com/individuals-families/find-a-doctor.html](https://www.aetna.com/individuals-families/find-a-doctor.html) to find providers near you.

24-Hour Nurse Line*

A simple call can make all the difference

Have questions about upcoming medical visits and choices? You can talk to a registered nurse for information about tests, procedures and treatment options, 24 hours a day, 7 days a week. And the call is free. To find the phone number, just visit [Aetna.com](https://www.aetna.com) and log in to your member website.

* While only your doctor can diagnose, prescribe or give medical advice, our 24-Hour Nurse Line nurses can provide information on a variety of health topics. Contact your doctor first with any questions about your health care needs

Our network

Participating urgent care centers

Say goodbye to emergency room visits and hello to savings

If you have an urgent but not life-threatening medical issue, think about going to an urgent care center, walk-in clinic or MinuteClinic® location. These centers can treat sinus infections, the flu, allergies, minor cuts and more. Many urgent care facilities are open seven days a week, with easy appointment scheduling and convenient hours. You'll typically pay less — and cut your waiting time, too. Look up the nearest urgent care center or health clinic on [Aetna.com](https://www.aetna.com). Select "Find a doctor" to use our directory. Or use the mobile app.

Participating retail walk-in clinics

Easy access, with no appointments needed

After office hours or inconvenient to get to the doctor? Try a retail clinic. Visit one for high-quality of minor illnesses like strep throat, seasonal allergies, and even vaccines. You'll enjoy:

- Convenient hours, with some open seven days a week with night and weekend hours
- Lower prices per clinic visit compared to the emergency room

We have many stand-alone and store-based clinics nationwide. Find them in our online directory at [Aetna.com](https://www.aetna.com) — just select "Find a doctor."

CVS MinuteClinics & HealthHUBs

Access MinuteClinic services at low costs

Get access to convenient, local care at a MinuteClinic® location at no cost to you. MinuteClinic is a walk-in clinic located inside select CVS Pharmacy® and Target stores, treating a variety of illnesses, injuries and conditions, including:

- Allergies
- Ear infections
- Flu like symptoms
- Bug bites, stings and more

MinuteClinic providers can also administer vaccines and write prescriptions, when medically appropriate. For your best health, we encourage you to have a relationship with a primary care physician or other doctor. Tell them about your visit to MinuteClinic, or MinuteClinic can send a summary of your visit directly to them.

Institutes of Excellence®

Specialized care when you need it

As an Aetna® member, you'll have access to the Institutes of Excellence. These selected facilities can help people who are facing a transplant or going through treatment for infertility. And the facilities must meet our strict standards for clinical quality and efficiency. We measure factors like the number of procedures performed and success rates. To see our list of Institutes of Excellence facilities, go to [Aetna.com](https://www.aetna.com) and choose "Find a doctor." Then use the filter tool to select "Institutes of Excellence facilities."®

Institutes of Quality® facilities

Meet our highest standards — and yours

As an Aetna® member, you'll have access to the Institutes of Quality. This network of hospitals and facilities specializes in bariatric, cardiac and orthopedic procedures. You may even pay less out of pocket at an Institutes of Quality facility.*

These approved facilities must meet our strict standards for clinical quality and efficiency. We measure factors like:

- The level of patient care
- How often people return to the hospital after surgery
- The number of procedures a facility performs

To see our list of Institutes of Quality facilities, go to [Aetna.com](https://www.aetna.com) and choose "Find a doctor." Then use the filter tool to select "Institutes of Quality facilities."

*How much you pay depends on your health plan.

National Medical Excellence Program® transplant care

Our program puts your needs first

You may never need an organ transplant, bone marrow treatment or CAR-T therapy.

But you can rest a little easier if you do, because you have access to this special program. It helps you get the care and resources you need — when you need them most.

You and your family get one-on-one support from:

- Dedicated medical directors
- Nurse care managers* with special experience
- Dedicated claims and Member Services staff

*While only your doctor can diagnose, prescribe or give medical advice, the nurse care managers can provide information on a variety of related topics.

Your care. Your way.

Get quality virtual care that fits into your busy life

From wellness visits to quick care, we've got you covered. You can use CVS Health Virtual Primary Care™ in addition to your traditional network of providers. Access is included as part of your medical plan from Aetna®, a CVS Health® company because healthier happens together.



On-demand care

Available to adults and children over 18 months

- Coughs, colds, flu and strep
- Joint, head, and stomach pain
- Infections (ear, sinus, skin, UTI)
- Medication refills



Mental health services

Available to adults ages 18+

- Anxiety and mood disorders
- Depression screening
- Medication management
- Support with stress, life adjustments and conflict resolution
- Sleep and related health behaviors



Primary care services

Available to adults ages 18+

- Chronic illnesses (asthma, diabetes)
- Sick care
- Wellness and annual health assessment
- Follow-ups from in-person visits
- Medication adjustments and refills

Some visits cost as low as zero dollars*

Get coordination of in-person care, when needed, to nearby MinuteClinic® locations** or in-network provider clinics.

*Members enrolled in HDHP plans must meet the deductible before receiving covered non-preventive services at no cost-share. **MinuteClinic® in-person services are subject to plan benefits.



Choose your Virtual Primary Care Team

Select a physician who leads the Care Team. Once selected you can start to get the care you need.

Angelina Arvis, MD



About Angelina

Based in GA, special interest in Internal Medicine and Primary Care where she can establish a

Schedule a virtual primary care visit quickly and easily

You get to choose your provider and enjoy flexible appointments that work with your busy lifestyle.








Get started today

Scan the QR code or go to [CVS.com/virtual-care](https://www.cvs.com/virtual-care) to register and schedule an appointment.

Know your options when you need care

Sometimes it's easy to know when you should go to an emergency room (ER), such as when you have severe chest pain or unstopable bleeding. At other times, it's less clear. Where do you go when you have an ear infection, or are generally not feeling well? The emergency room is always an option, but it can be an expensive one. You have choices for receiving in-network care that works with your schedule and give you access to the kind of care you need. Know when to use each for non-emergency treatment. You have several affordable and convenient options for immediate care. Keep this chart handy to help you make a smart choice the next time you need medical care. You may save time and money.

| Care from anywhere | In-person options for care | | | |
|---|---|--|--|---|
| Non-emergency | Non-emergency | Non-emergency | Urgent | Emergency |
|  <p>CVS Health Virtual Care™ or other telehealth provider</p> <p>CVS Health Virtual Care™ gives you 24/7 access to board-certified doctors by phone, video or mobile app. Talk to a doctor in minutes and get a diagnosis, treatment & prescriptions for non-emergency medical needs.</p> |  <p>MinuteClinic® or other Retail Clinic</p> <p>MinuteClinic offers convenient care 7 days a week from certified nurse practitioners and physician assistants at select CVS Pharmacy® and Target stores nationwide.</p> |  <p>Primary Care Physician (PCP)</p> <p>Your PCP is the best option for in-person, non-emergency care.</p> <p>To find in-network PCPs near you, log in to your member website.</p> |  <p>Urgent Care Center</p> <p>Urgent care centers provide quick care for serious, but not life-threatening, situations. Many urgent care centers offer imaging, X-ray and lab services.</p> |  <p>Emergency Room</p> <p>The emergency room (ER) is for emergencies that can permanently impair or endanger your life. Using the ER for non-life-threatening issues can be very costly and probably means a very long wait time.</p> |
| <ul style="list-style-type: none"> • Cough • Cold • Flu • Strep • Joint, head and stomach pain • Infections (ear, sinus, skin, UTI) • Mental Health services | <ul style="list-style-type: none"> • Minor illnesses & injuries • Screenings & monitoring • Skin conditions • Vaccinations & injections • Wellness & physicals • Women's services • Travel health <p>Visit minuteclinic.com to confirm services available at your location</p> | <ul style="list-style-type: none"> • Physicals (wellness, screening) • Vaccinations & injections • Chronic condition management (heart disease, diabetes, arthritis, etc.) • Acute care (sinus infections and injuries) | <ul style="list-style-type: none"> • Back/neck pain • Cuts that require stitches • Minor burns • Flu • Sprains • Fractures • Bronchitis • Headaches and more | <ul style="list-style-type: none"> • Chest pain • Severe abdominal pain • Trouble breathing • Uncontrollable bleeding • Symptoms that may put your life at risk |
| 24 hours a day 7 days a week 365 days a year | 7 days a week (including evenings and weekends) | Weekdays during business hours (May be open extended hours and/or Saturdays) | Many open 7 days a week with extended hours | 24 hours a day 7 days a week 365 days a year |
| Activate your virtual care benefit by visiting CVS.com/virtual-care | At select CVS Pharmacy and Target stores Schedule an appointment at minuteclinic.com or through the CVS Pharmacy app | By appointment only | Walk in (some by appointment or online waitlist) | Walk in |
| \$ | \$ | \$ \$ | \$ \$ \$ | \$ \$ \$ \$ |

Advanced imaging

If you're waiting for a diagnosis or to find out if your treatment is working, imaging exams like MRI scans or CT scans can be a turning point in your care. Worrying about the exam costs shouldn't be part of the process. You can save money by scheduling your next imaging exam at a non-hospital imaging center. You can avoid overpaying and get the same quality. Of course, depending on your plan, location and the exam you get, your savings will vary.

When you have precertification for an imaging exam at a hospital imaging center, there's no need to start over. Just call the number on the back of your ID card and explain that you want to change the location of an existing approved precertification.



Programs & resources

No health and benefits plan would be complete without extra support to help you feel your best. That's why you'll have a variety of ways to enhance your health and wellness.

So whether you're looking to improve your physical or mental health, or just need a little extra support, we've got the program that's right for you.

Programs & resources

Aetna One® Flex

Here to help you focus on your health

The health care system can be complex and confusing. But it doesn't have to be. With this program, we help you and your family work through the health system. So you can take care of yourself and be your best.

Your dedicated team* will be right there to help you with short- and long-term care management. And we'll provide support based on what you want and need.

*Our program and care teams do not diagnose or treat members. We assist you in getting the care you need, and our program is not a substitute for the medical treatment and/or instructions provided by your health care providers.

Transform Diabetes Care 2.0

A tailored approach to managing diabetes and high blood pressure

Diabetes is one of the most common, costly and difficult to manage health conditions. Even more so if you have hypertension. That's why Aetna's Transform Diabetes Care 2.0 program goes beyond a one-size-fits-all approach by offering convenient, customized and comprehensive support to those who need it, when they need it.

The Transform Diabetes Care® program is a 12-month program that helps keep your diabetes in check — at no extra cost to you. It gives you customized guidance based on your specific needs. With the Health Optimizer™ app, you can monitor your glucose and blood pressure; track and share readings; learn more about diabetes and maintaining a healthy lifestyle; make meals that align with your dietary restrictions; and more. To stay on track, you can get personalized support from Certified Diabetes Care and Education Specialist nurses. That's in addition to the support from your care management program. If you're managing diabetes, you're enrolled automatically. Sit tight — program details will be sent to you.

Cancer Support Center

Resources for your cancer journey

The Aetna Cancer Support Center brings resources to your fingertips, serving as your trusted source for information and guidance on what to expect while managing cancer treatment and care.

The Aetna Cancer Support Center:

- Serves as a free, convenient digital information hub designed around your needs
- Provides details about diagnostic tests, treatments and benefits specific to your coverage
- Offers self-service support for breast, colorectal, prostate, lung, ovarian, uterine and other cancers

Aetna Discount Program

Log into your member website to see how you can save on a variety of expenses including eye care, fitness, weight management, dental care and nutrition services. You can even get discounted rates on LASIK laser eye surgery or hearing exams.

Aetna® behavioral health

Feeling your best

From time to time, we all feel a bit down or stressed — but sometimes these feelings can persist and get in the way of daily life. They could be brought on by something related to physical health. It's important to know that these feelings are common and, most of all, treatable. But the condition must be diagnosed first.

Your medical plan includes mental health benefits. So you'll get the help and resources you may need to work toward feeling your best. These resources include:

- 24/7 support to help you find the right care
- Face-to-face counseling in the provider's office, virtually or through telehealth
- Online resources and tools, and more

Programs & resources

Behavioral Health Condition Management program

We'll get to know you with personalized support

Everyone occasionally feels sad or anxious. But when these feelings interfere with the way you think, sleep and engage in daily activities, it might be time to seek help to feel better. With our confidential program, you'll work side by side with your care team. We'll help you find your way through the health care system, so you can get care earlier and feel better sooner. And our care managers can connect you with the right support at the right time — and help you set realistic goals. You'll also get:

- Early screening for early help
- Online tools to check your risk for a condition
- Strategies and tips for everyday living and more

Aetna AbleTo Virtual Therapy

Focusing on health conditions and life changes

Sometimes life can be overwhelming, leading to worry, stress and sadness. But you don't have to go through it alone. With AbleTo, you'll get virtual, personalized support that can help you feel better. Plus, you'll learn how to better manage your emotions and improve your overall health in about eight weeks.

Once you connect with an Aetna® or AbleTo representative, they'll explain more about the program and how it can help. They'll also answer any questions you have.

Aetna® does not recommend the self-management of health problems. Health information programs provide general health information and are not a substitute for diagnosis or treatment by a health care professional.

Aetna Autism Spectrum Disorder

The right support when you need it

Families with children on the autism spectrum can face hurdles, like finding providers or figuring out plan coverage. But we're here to help, every step of the way. The most effective therapy considered for this condition is applied behavior analysis (ABA). So we'll help connect you with national services and treatment.

For more information, call 1-866-724-0604, option 5. And visit the BH Institutes of Quality™ (IOQ).

Aetna mental well-being Telehealth/Virtual Services

Meet with a counselor anywhere, at your convenience

With telehealth or virtual services, you have another way to get help from trained mental health providers. And whatever you're facing, you have the same support you'd get in person from psychiatrists, social workers, marriage counselors and more. You can easily connect with your provider by using your smart device or webcam-equipped computer that's connected to the internet.

With these counseling and medication management services, you:

- Get online, expert care and support
- Talk with a coach 24/7 - using apps, video chats and text messages
- Connect with the same provider throughout your care
- Choose when and how you meet — anywhere you're most comfortable
- Decide what works for you - at your own pace and convenience

A mental health telehealth or virtual session costs the same as a face-to face office visit. To find a provider in your area, just call us at the number on your member ID card. Or use our provider search tool on Aetna.com and search for "mental health."



Support & access

We make it easy to find what you need. Whether you want to look for the right care, manage your benefits, check on a claim, plan for an upcoming treatment or something else, it's easy to get simple, convenient information. All right at your fingertips.

Just connect with us however it's convenient for you. Call our team — we know the “ins and outs” of your benefits, and we're just a phone call away. Or use your member website as your one-stop online resource. And don't forget to download the Aetna HealthSM app, where you can see your ID card, find care, make appointments and more — when you're on the go.

Support & access

Aetna® Member Website and Aetna® Health App

Manage your **Medical and Pharmacy benefits** — from anywhere.

As a member, you can:

- ✓ View your health plan summary and get information about what's covered
- ✓ Track spending and progress toward your deductible or maximums for you and your family
- ✓ View and pay claims, and even see the breakdown of your costs, like what's covered by your plan and what you're responsible for
- ✓ Use tools to help you choose quality in-network providers
- ✓ Get personalized reminders to help improve your health
- ✓ Access your digital member ID card whenever you need it.

Once you're a member, here's how you can connect:



Your Aetna member website

Go to **Aetna.com** to create an account and log in to your member website.



The Aetna Health app

Get the Aetna Health app by texting "GETAPP" to 90156 for a link to download the app and create an account. Message and data rates may apply.*

 App Store

 Google Play

AetnaVision.com member website and Aetna VisionSM Preferred mobile app

Get the information you need about your **Vision benefits** — right at your fingertips

Whether you're on our website or mobile app, you can relax knowing you'll have the information you need, whenever you need it. You can:

- ✓ View benefits and eligibility
- ✓ Download ID cards and explanation of benefits
- ✓ Check claim status
- ✓ View wellness information
- ✓ Review LASIK information
- ✓ Access special offers
- ✓ Get information about emergency coverage while traveling out of the country

Once you're an Aetna® member, here's how we can connect:

AetnaVision.com member website

Go to **AetnaVision.com** to create an account and log in.

Aetna Vision Preferred mobile app

Download the app via Google or Apple®. Message and data rates may apply.



*Terms and conditions: [Bit.ly/2nLJFYG](https://bit.ly/2nLJFYG). Privacy policy: Aetna.com/legal-notices/privacy.html. By texting **90156**, you consent to receive a one-time marketing automated text message from Aetna with a link to download the Aetna Health app. You can also download it from the App Store® or the Google Play™ store.



Meet your Aetna® Concierge

Your personal
health care assistant











Have questions? Get answers.

- How can I find the right specialist?
- What do I do after my diagnosis?
- Is this service covered by my health plan?
- My doctor said I need surgery — where do I start?
- How much is this procedure going to cost me?

Your Aetna® Concierge has answers

Your Aetna Concierge is here for you. They'll listen, understand your needs and find solutions that are right for you.

A concierge can help you:

-  Get answers about a diagnosis
-  Select a doctor
-  Learn about your coverage
-  Plan for upcoming treatment
-  Find health care solutions that fit your needs
-  Learn how to use our online tools to make the right decisions
-  Find network providers based on your medical needs
-  Assist you in scheduling appointments

Plan for health

No more “surprises” — your concierge can show you:

- How to estimate costs before you make an appointment
- What doctors cost in-network versus out-of-network
- Differences between inpatient and outpatient care, including costs
- Your options and cost estimates in advance to help you make smarter decisions

Two ways to contact your concierge

Available Monday through Friday
from 8 AM to 6 PM ET local time



Log in at [Aetna.com](https://www.aetna.com) and chat online.



Call 800-370-4526

In-network care

Who pays for what

Highlights

Choosing in-network providers may help save you money.

These providers contract with us to offer rates that are often lower than their regular fees. They also work directly with us and send us claims for services you receive. Don't worry — this is all behind-the-scenes work when you stay in network.

Visit **Aetna.com** to find a network provider.

Benefits

- ✓ Lower out-of-pocket costs
- ✓ No balance billing
- ✓ Less paperwork

How it works



Visit your doctor and show your Aetna® member ID card.



There's no need to pay at your visit unless you have a copay.

(Out of network, you may need to pay the full amount at your visit.)



Your doctor files your claim.
(Out of network, you file your own claims.)

THE PLAN
PAYS


The plan pays your doctor any amount it owes based on the negotiated rate.

(Out of network, the plan pays you back what it owes, up to the "reasonable and customary" limit.)



Your doctor bills you for any amount you owe.



Not all services are covered. See plan documents for a complete description of benefits, exclusions and limitations of coverage. Plan features and availability may vary by location and are subject to change.

Providers are independent contractors and are not agents of Aetna®. Provider participation may change without notice.

Refer to [Aetna.com](https://www.aetna.com) for more information about Aetna® plans. You can view or print your plan disclosure from our [Aetna.com/individuals-families/member-rights-resources/rights/disclosure-information.html](https://www.aetna.com/individuals-families/member-rights-resources/rights/disclosure-information.html)

Not all services are covered. See plan documents for a complete description of benefits, exclusions and limitations of coverage. Plan features and availability may vary by location and are subject to change.

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