

### Health coverage focused on you

We want to help you live your best life. That's why we provide a comprehensive approach to your health and well-being through plans offered by the Emeriti Retirement Healthcare Saving Plan (RHSP). Emeriti and Aetna have teamed up to provide retiree health insurance options just for eligible dependents under the age of 65. The national plans provide a range of benefit coverage and will follow you wherever you live in the United States.



## Stay connected with your member website

Get started by visiting **AetnaRetireePlans.com** and click on the "Member login" button. First-time users will need to create a username and password. Be sure to have your Aetna® member ID card or Social Security number on hand.

Once you're registered, you'll be able to:

- Find a doctor or hospital
- · Check your benefits
- Manage your claims
- Learn about wellness and discount programs
- Reduce paper by choosing electronic delivery of certain plan documents
- Lookup prescription drug information

After registering, be sure to agree to get electronic communications from Aetna. You'll get Explanation of Benefits statements, account updates and other paper communications sent straight to your email.



## **How to enroll**

1. Visit MyEmeritiBenefits.org to enroll online.

Or

2. Enroll by phone by calling the Emeriti Service Center at **1-866-EMERITI** (**1-866-363-7484**), Monday to Friday, 8:00 AM to 5:30 PM ET.

Be sure to have the following information available:

- Your Social Security number
- Social Security number for your spouse or domestic partner, if applicable

#### **EmeritiHealth.org**

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## Your 2023 Aetna retiree health plan options







#### Aetna Middle Plan

Enjoy the comprehensive coverage you get today, plus benefits and cost savings. The charts below compare your options and show what you can expect to pay with each plan. Premium rates are based on your ZIP code and can be calculated online at **EmeritiHealth.org**.

Aetna plan options	Aetna High Plan	Aetna Middle Plan	Aetna Low Plan
Deductible	\$750 in network	\$1,250 in network	\$2,500 in network
	\$1,500 out of network	\$2,500 out of network	\$5,000 out of network
Coinsurance	10% in network	20% in network	20% in network
	30% out of network	40% out of network	40% out of network
Annual out-of-pocket	\$2,500 in network	\$5,000 in network	\$7,500 in network
limit	\$7,500 out of network	\$10,000 out of network	\$12,500 out of network
Primary care physician	10% in network	20% in network	20% in network
visits (deductible waived in-network)	30% out of network	40% out of network	40% out of network
Physician specialist	10% in network	20% in network	20% in network
visits (deductible waived in-network)	30% out of network	40% out of network	40% out of network
Inpatient hospital	10% in network	20% in network	20% in network
	30% out of network	40% out of network	40% out of network
Outpatient surgery	10% in network	20% in network	20% in network
	30% out of network	40% out of network	40% out of network
Emergency care	0% after \$100 ER copay,	0% after \$100 ER copay,	0% after \$100 ER copay, no
	no plan deductible - in-	no plan deductible – in-	plan deductible – in- and out
	and out of network	and out of network	of network
Ambulance	100% after deductible	100% after deductible	100% after deductible
	30% out of network	40% out of network	40% out of network 20% in network
Urgent care provider (deductible waived in-	10% (deductible waived) in-network	20% in network	40% out of network
network)	30% out of network	40% out of network	4070 Out of Network
X-ray, laboratory services		20% in network	20% in network
and complex imaging	30% out of network	40% out of network	40% out of network
Durable medical	10% in network	20% in network	20% in-network
equipment/prosthetics	30% out of network	40% out of network	40% out of network
(\$10,000 maximum per			
calendar year)	400/ in a street	000/ in material	20% in network
Basic infertility services	10% in network 30% out of network	20% in network 40% out of network	40% out of network
	30% out of fietwork	40% out of Hetwork	-1070 Out of Hotwork

Mental health services and alcohol/drug abuse, inpatient and outpatient services (deductible waived for office visits)	10% in network 30% out of network	20% in network 40% out of network	20% in network 40% out of network
Prescription drug - Aetna Pharmacy Management (Preferred generic/ Preferred brand/Non- Preferred)	10%/30%/40% deductible waived, combined with medical OOP – in network Not covered out of network.	20%/40%/50% deductible waived, combined with medical OOP – in network Not covered out of network.	20%/40%/50% deductible waived, combined with medical OOP – in-network  Not covered out of network.



# Important phone numbers and resources

Aetna® Member Services 1-855-212-5666 (TTY:711)

Monday to Friday 8 AM to 8 PM ET

**AetnaRetireePlans.com** 

One-on-one support to help you with:

- Aetna medical and prescription drug coverage details
- Questions about your doctors and verifying that they accept your new plan

**Emeriti Service Center 1-866-EMERITI (1-866-363-7484)** 

Monday to Friday 8:00 AM to 5:30 PM ET

**EmeritiHealth.org** 

Emeriti can help you with:

- General enrollment and eligibility questions
- Enrolling in the plan
- Updating your personal information

Aetna Medicare is a HMO, PPO plan with a Medicare contract. Enrollment in our plans depends on contract renewal. Plan features and availability may vary by service area. Out-of-network/non-contracted providers are under no obligation to treat plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. To send a complaint to Aetna, call the Plan or the number on your member ID card. To send a complaint to Medicare, call **1-800-MEDICARE** (TTY users should call **1-877-486-2048**), 24 hours a day/7 days a week). If your complaint involves a broker or agent, be sure to include the name of the person when filing your grievance.



