

Your Aetna plan features and how to sign up



Learn about:

- > Member tools
- > How to enroll
- > Value-added programs

Welcome to Aetna!

At Aetna, we know that the true value of any health benefits and insurance plan is how it works for you and your family. Aetna also recognizes all families are different, each with their own unique needs. Some families need a plan with lower out-of-pocket costs when they see their doctor; some need lower monthly premiums; and some need the option to seek out-of-network care. With Aetna, each family can pick the plan that best suits their unique needs. The choice is yours!

Plus, each health plan from Aetna offers a number of valuable member tools and resources to help you and your family make more informed decisions about your health and well-being. Whether it's finding a doctor online, checking the status of a pending claim or finding the lowest-cost prescription for you and your family, Aetna provides you with the tools you need to manage your care.

Table of Contents

Aetna Navigator® secure member website	3
Personal Health Record	4
Aetna Health Care Transparency tools	6
Employee Assistance Program (EAP)	6
RelayHealth® program	7
Informed Health® Line	8
Walk-in clinics	8
Urgent care	8
Programs for the special needs of women	9
Preventive care	10
Medical products	12
Dental products	14
Aetna Group Life Insurance for small group employees	15
Getting to know your Aetna prescription drug plan	16
How will I find a doctor or specialist?	18
How to complete the enrollment form application	19
Your member ID card	20



Aetna Navigator — our secure member website

When you need up-to-date information about your health benefits or insurance plan or want information about a particular health condition, here's where you'll find it!

Aetna members can turn to Aetna Navigator, our secure member website that provides you with a single source for online health and benefits information. It's convenient, and easy to use:

1. Go to **www.aetna.com**.
2. Click on Member Log In.
3. Register as a new user, or log in using your secure user name and password.
4. Find a wealth of credible health care information and self-service functions — available to you anytime of the day or night — from wherever you have Internet access.

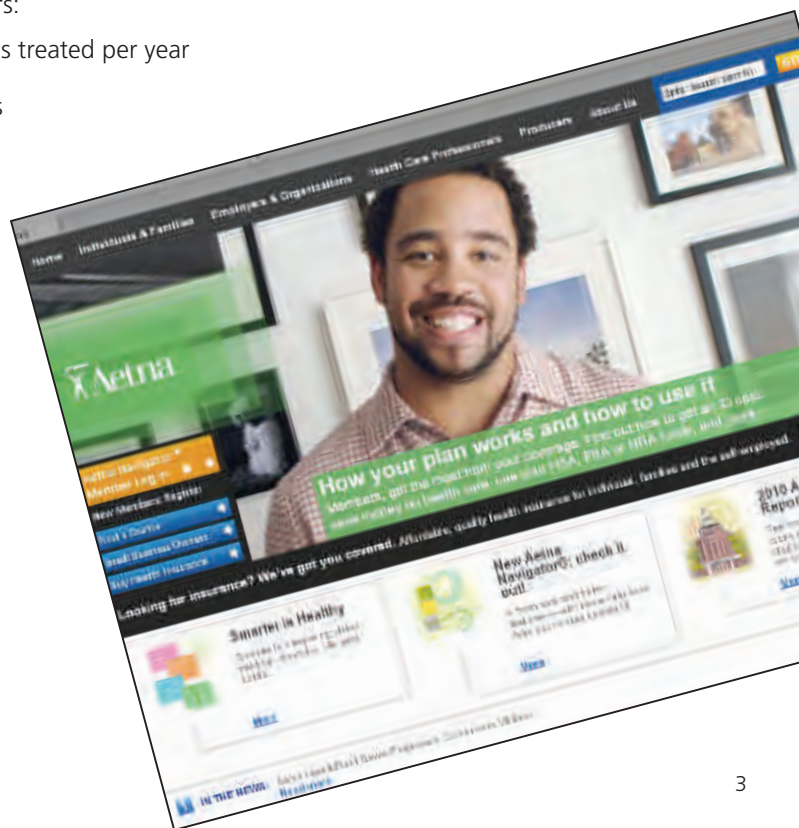
Our secure website lets you:

- View information about who is covered on your plan
- Find doctors, pharmacies or hospitals on our DocFind® online provider directory
- Check the status of a claim or review an Explanation of Benefits (EOB)
- Contact Member Services with benefits questions (also available in Spanish)

Use Aetna Navigator's online tools to manage your benefits and help you make more informed health decisions:

- **Hospital Comparison tool** — helps you decide where to receive care for specific procedures, conditions and diagnoses. You can compare hospitals based on four important factors:
 1. Number of patients treated per year
 2. Complication rates
 3. Mortality rates
 4. Length of stay

- **Price-A-DrugSM tool*** — helps you estimate the cost of prescriptions before you buy
- **Estimate the Cost of Care tool** — provides average in- and out-of-network costs for certain procedures based on geographic area
- **Pharmacy benefits summary** — allows you to locate retail pharmacies; order prescriptions through Aetna Rx Home Delivery® mail-order pharmacy; search and learn about medications; and review the medications available in the Aetna formulary



*If included in your plan.

And, if you're interested in learning more about a particular health condition, Aetna Navigator provides credible health information resources.

■ **Simple Steps To A Healthier Life® program** – an interactive online health and wellness program that can help employers enhance the health and productivity of their employees and support a more complete system of care.

The program can help employers:

- > Reduce employee health risks
- > Keep healthy people healthy
- > Build employee responsibility for making informed health decisions
- > Support business goals to help improve employee health status and productivity
- > Gain valuable insight to help make strategic decisions for offering employee benefits
- > Integrate with Aetna services and other health outreach programs

Simple Steps To A Healthier Life helps participants turn knowledge about their health into action for making positive health changes with:

- > An online Health Assessment
- > Tailored Health Reports
- > Personalized Action Plan and online wellness programs
- > Easy-to-find health information, resources and tools

■ **Aetna SmartSourceSM website** – delivers relevant health information that's specific to each member based on where they live, their Aetna health plan and other information. Aetna SmartSource scans our vast resources to bring members, in a single search:

- > Specialists in their local area
- > Related medications, treatment options and estimated health costs
- > Aetna programs that may help them manage their condition
- > Easy-to-understand health articles and tips

■ **Aetna IntelliHealth® website** – our interactive consumer website for credible health, dental and wellness information provided by Harvard Medical School

■ **Healthwise® Knowledgebase** – a user-friendly online information tool that lets you research your own issues and preferences for health information. Healthwise Knowledgebase also has interactive and streaming videos about topics such as asthma and heart health.

Personal Health Record

Put your Personal Health Record to work and make history!

Members with Aetna medical coverage can now use the Aetna Personal Health Record.*

Your Personal Health Record is a secure online tool that makes it easy to:

- Keep your health information in a single, safe place
- Track doctor visits, prescriptions and more, for you and your family
- Give your doctor a more complete health history
- Receive timely, personalized health alerts and preventive care reminders

Much of your health information is ready for you to see now

Information from your Aetna health claims automatically appear in your Personal Health Record. And, you can easily add more information. List your allergies, your family history and more. It's up to you. The more you enter, the better picture you and your doctors will get of your overall health.

*The Aetna Personal Health Record should not be used as the sole source of information about the member's health history.



Use it to talk to your doctors with ease

The Personal Health Record can help you team up with your doctors. You can share your Personal Health Record online with individual doctors by making it available through a secure website many doctors already use. You also can print your Health Summary to share at office visits or to help you fill out medical forms when you see a new doctor.

Stay safe and healthy with alerts and reminders

The Personal Health Record helps you get the care you need. If you're due for a checkup or other important screenings, you might see a reminder when you log on. You may also receive a message if there's an alternative treatment that may improve your care. And, if you give Aetna permission, you can get e-mails about new alerts or reminders in your secure Personal Health Record.

Portability ensures your personal health records go where you go

Our relationship with Microsoft provides our members portability of their personal health information. You can transfer a copy of your Aetna Personal Health Record from Aetna Navigator directly to Microsoft HealthVault at www.healthvault.com/personal. Your information will be stored on this secure, web-based consumer health platform and remains available if you change jobs or health plans.

You can also print and save a PDF copy of your health record for your own files through the same Navigator location.

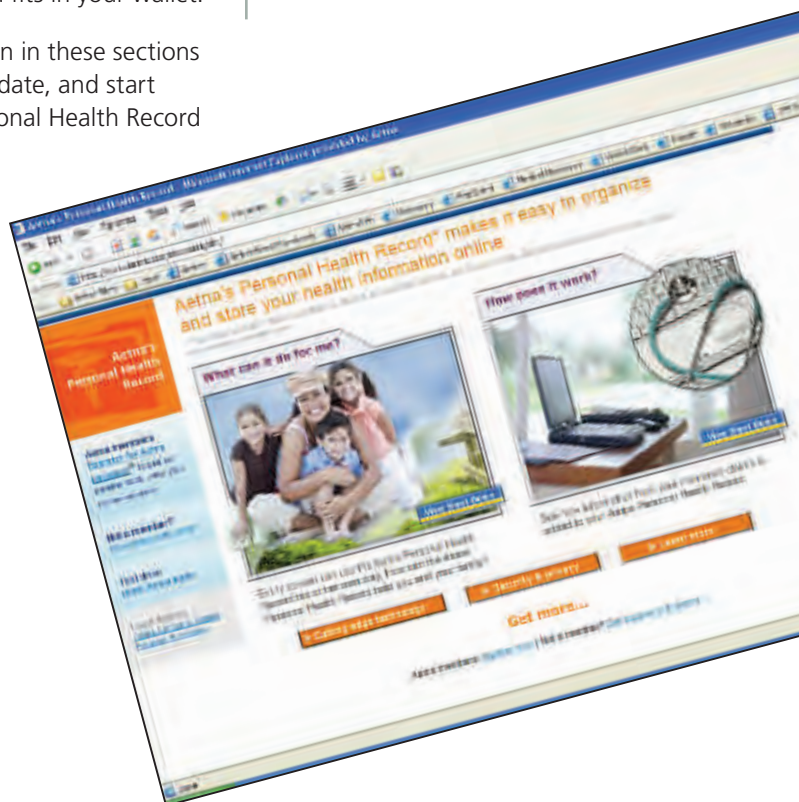
Print your personalized Emergency Card

You can print an Emergency Information Card that pulls information from several sections of your Personal Health Record. It provides first responders your emergency contact's name and phone number, your insurance details, any medications you are taking, allergies if you have any and if you have a living will or have designated your organs for donation. The personalized Emergency Care card includes all this detail in a printout that folds and fits in your wallet.

Be sure the information in these sections is accurate and up-to-date, and start using your Aetna Personal Health Record today!

It's easy to get started.

Visit your Personal Health Record today, or use our Walk Me Through guide to explore how this resource works on your own. Visit www.aetna.com/showcase/phr/ for answers to the most common questions from our members.



Aetna Health Care Transparency tools

Since 2005, Aetna has empowered members with our suite of member tools that inform you about doctors, hospitals and other medical facilities. You can make more informed health care decisions by using our online transparency tools before visiting a doctor or hospital.*

Our transparency tools allow you to:

- View and compare rates for participating doctors
- Look up costs for medical procedures at facilities in select locations around the country and quickly identify medical specialists who are high-performers in their field based on clinical quality and efficiency**
- Use at your convenience since the information is available 24/7 through Aetna Navigator, our secure member website, and DocFind, our online directory of doctors and facilities

Your access as a member to this combination of physician-specific rates, clinical quality and efficiency, and facility-specific medical procedure costs is a first from a national health carrier and demonstrates our commitment to you.

To access our health care transparency tools, log in to Aetna Navigator. Click on Cost of Care from the home page. There, you can use the easy online instructions to:

- Check rates for doctors and specialists for common treatments and procedures
- Compare hospital costs side by side
- Get personalized cost estimates to find out what you'll pay before you go

Employee Assistance Program (EAP)

The Aetna Employee Assistance Program is a confidential program that gives employees and members of their household access to useful services and support to help them manage the everyday challenges of work and home. The EAP is available at no charge to members and their family members and includes:

- **Choice** – They'll find a range of resources to help them balance their personal and professional lives.
- **Easy access** – Aetna Small Group EAP can be reached anytime toll-free at **1-866-672-5417** or on the web at **www.aetnaeap.com**.

- **Professional assistance** – Our workplace-trained specialists provide confidential phone support assessing needs and recommending an appropriate course of action. Employees and their household members receive three phone consultations per member in a calendar year.

Employers can also take advantage of EAP Resources:

- **Management and Human Resources assistance** – Employers get unlimited phone consultations with workplace-trained clinicians who can provide help in dealing with complex employee issues that may arise.
- **Online tools** – Employers can also get online tools and materials to encourage employees to use the EAP by visiting **www.aetnaeap.com** (enter your company ID and select the "Promotional Materials" link).

*Always consult your doctor about your health care decisions. Members cannot view rates for dentists, vision providers or certain types of health care professionals with these tools.

**Clinical quality and efficiency information is based on Aexcel® designation for specialists in 12 specialty categories. You can learn more about our Aexcel designation in our Understanding Aexcel brochure available under the Learn More section of DocFind. We regularly upgrade our tools to provide the latest cost and clinical quality and efficiency information about our network providers.

RelayHealth® program

Visit your doctor online with webVisit®

Our latest innovative health care benefit in collaboration with RelayHealth* offers members “webVisits.” Now you can communicate effectively and securely online with your doctor to seek non-urgent medical care. You pay any required copays or deductibles through the system as if you had made an office visit.

webVisit is easy to use:

1. Enter the RelayHealth website for non-urgent medical care.
2. Complete a questionnaire.
3. Submit it directly and confidentially to your doctor.
4. Once your doctor reviews your questionnaire, you will get a diagnosis, instructions and information — just like at an actual visit.

Simply register on the RelayHealth website at www.relayhealth.com/Patients/Registration.aspx to get started.

Once registered, log in at your convenience to take advantage of the many features available to registered members in addition to the webVisit service:

- Consult with your doctor
- Make and/or cancel appointments
- Obtain referrals
- Request lab and test results
- Order prescription refills
- Send a note to your doctor’s office

What’s the difference between online RelayHealth site and e-mailing my doctor?

e-mail	webVisit
<ul style="list-style-type: none">■ May not be secure or compliant with HIPAA (Health Insurance Portability and Accountability Act).■ Free form – you may not know the medical questions to address so your doctor can diagnose your ailment.■ Non-chargeable – eligibility needs to be determined, and you must submit a claim.	<ul style="list-style-type: none">■ HIPAA compliant – secure and authenticated with user log in.■ Clinically structured questionnaire focuses on your symptoms to help your doctor determine an accurate diagnosis.■ Reimbursable – checks eligibility in real time, collects copayment and submits claim automatically.

A few things to note before you get started:

- > You must have an established relationship with a doctor before webVisit can be used.
- > Your doctor must be a member of the Aetna network and be registered as a participating provider in the RelayHealth physician network — participating providers are identified on DocFind through Aetna Navigator.

webVisit through RelayHealth links you with your doctor, the Aetna health plan and your pharmacy in a single secure network.

*Small Group employers do not need to do anything as this service will be automatically added to their employees’ coverage. This feature does not apply to any HMO plan a prospective member may choose. Plan sponsors offering Traditional plans can customize the copay required for an online visit (webVisit). This service includes plans that have health funds when the fund limit is exhausted. Physicians will be paid for services provided according to the terms of their contract. As always, a member’s financial responsibility depends on the terms of his or her plan, which may vary.



A convenient solution for care on the go

Informed Health[®] Line

Access to a registered nurse — 24/7!

With the Aetna Informed Health Line, you can talk to a registered nurse anytime, day or night. Just call our 24-hour toll-free number (available upon enrollment). While only your doctor can diagnose, prescribe or give medical advice, the Informed Health Line nurses can provide information on thousands of health topics. They can also tell you how to ask the right questions and describe health symptoms more effectively during your next visit to your doctor. Remember, always contact your doctor first with any questions or concerns regarding your health care needs.

Walk-in clinics

Looking for a convenient way to get medical care? Consider a walk-in clinic. It's a convenient alternative to the doctor's office. If you aren't feeling well and have trouble getting an appointment with your doctor, it's your answer to non-emergency care right away.

And walk-in clinics are not just for when you are sick. You might be surprised by the full spectrum of services available at a walk-in clinic, many of which are staffed by physician assistants and nurse practitioners. They offer:

- Treatment for minor burns, stings or bites, sprains, strains and cuts
- Care for earaches, flu and cold symptoms, sinus infections and allergies
- Physicals and pediatric and gynecologic services
- Flu shots and other vaccinations
- X-ray and lab services

Urgent care

For care that is not minor, such as fractures, sprains or other urgent injuries, we contract with urgent care centers to offer you an economical alternative to visiting an emergency room. Urgent care sites are staffed with physicians to handle urgent medical needs, whereas walk-in clinics are staffed by nurse practitioners to care for minor ailments. And just like walk-in clinics, some urgent care centers offer evening and weekend hours with no appointments needed.

Check your Plan Design and Benefits summary to get more information about coverage and costs to visit a walk-in clinic or urgent care center.* To find the closest clinic or care center near you, simply log in to Aetna Navigator, select DocFind and follow the easy online instructions.

*California HMO members must contact their medical group or primary care physician for walk-in clinic and urgent care center use.

Programs for the special needs of women

Ongoing health management

Work, family, friends. Too much to do, too little time to do it. That's today's woman. Add health needs that change over time, and you'll know why we offer services and information to help you manage your health.

Prevention programs for women

Our preventive programs can help women benefit from:

- Preventive screening reminders for breast and cervical cancer
- Culturally focused initiatives to help reduce health disparities among women of diverse ethnic backgrounds

Women's health online

Go to <http://womenshealth.aetna.com> for information on women's health issues — from heart health, breast cancer and pregnancy to baby care and other topics important to women, as well as:

- An interactive body mass index
- A pregnancy guide
- Food pyramid recommendations
- Information on diet and nutrition

For ob/gyn care, no referrals needed

For an annual well-woman exam, unlimited visits for gynecological problems and routine maternity care, women may schedule an appointment with participating obstetrical, gynecological or women's health care professionals.

Special maternity care

From the start of pregnancy to birth, our maternity management program offers expectant mothers services and educational materials to help give their newborns a healthy start. Moms-to-be receive:

- Educational materials, available in English or Spanish, that cover:
 - > Prenatal care
 - > Labor and delivery
 - > Newborn and baby care
 - > Breastfeeding
 - > Postpartum depression
- A pregnancy risk survey and nurse care coordination for high-risk pregnancies
- A program to help you stop smoking

Beginning Right® maternity program

Beginning Right maternity program offers information and services to expectant mothers.

We want to make sure expectant mothers have the information needed to make informed decisions about health care while pregnant or planning a pregnancy. Members enrolled in both our medical and dental plans, as well as our Beginning Right maternity program, may receive enhanced dental benefits (additional cleaning or treatment of periodontal (gum) disease, fully covered with no deductible) during pregnancy.



Preventive care

Good health begins with prevention. So we've developed an array of wellness programs and services to help you and your family stay healthy through all the stages of your life.

Member health education reminders

To help prevent, detect and monitor problems early on, we mail women age 40 and over reminders encouraging them to schedule an annual mammogram. We also send important health information, a chart of recommended preventive care guidelines and a tear-off wallet card to schedule and track this important information.

Aetna Health ConnectionsSM disease management

This program features Aetna nurses and programs, including the MedQuery[®] program and is an important part of our new Aetna Health Connections health and wellness portfolio. Our newly redesigned capabilities support 35 conditions and integrate care for members with multiple conditions. The program includes cutting-edge technology to help improve patient safety, doctor communication and more.

This integrated, holistic approach using capabilities unique to Aetna delivers premiere medical management for our members that no one in the industry can match. It includes innovative and individualized clinical programs, information and support for totally integrated health management that optimizes our members' state of health. Members are viewed holistically — considering multiple diseases or conditions across all benefit plans — to deliver customized programs based on their individual needs and preferences.





Prevention programs — helping you and your family stay healthy

Aetna Health Connections SM disease management program conditions and content		
<p>Vascular</p> <ul style="list-style-type: none"> ■ Heart Failure ■ Diabetes – Adult & Pediatric ■ Coronary Artery Disease (CAD) ■ Peripheral Artery Disease (PAD) ■ Hypertension – Adult & Pediatric (High Blood Pressure) ■ Cerebrovascular Disease/Stroke (CVA) ■ Hyperlipidemia (High Cholesterol) <p>Pulmonary</p> <ul style="list-style-type: none"> ■ Asthma – Adult & Pediatric ■ Chronic Obstructive Pulmonary Disease (COPD) 	<p>Orthopedic / Rheumatologic</p> <ul style="list-style-type: none"> ■ Osteoporosis ■ Osteoarthritis (OA)* ■ Rheumatoid Arthritis (RA) ■ Chronic Lower Back Pain <p>Gastrointestinal</p> <ul style="list-style-type: none"> ■ Gastro Esophageal Reflux Disease (GERD) ■ Peptic Ulcer Disease ■ Inflammatory Bowel Disease (IBD) (Crohn’s Disease) ■ Chronic Hepatitis <p>Neuro-Geriatric</p> <ul style="list-style-type: none"> ■ Geriatrics ■ Migraines ■ Seizures ■ Parkinsonism 	<p>Cancer</p> <ul style="list-style-type: none"> ■ General Cancer ■ Breast Cancer ■ Lung Cancer ■ Lymphoma/Leukemia ■ Prostate Cancer ■ Colorectal Cancer <p>Renal</p> <ul style="list-style-type: none"> ■ Chronic Kidney Disease ■ End Stage Renal Failure <p>Other</p> <ul style="list-style-type: none"> ■ Weight Management – Adult & Pediatric ■ Cystic Fibrosis – Adult & Pediatric ■ HIV ■ Hypercoagulable State ■ Sickle Cell Disease – Adult & Pediatric ■ Depression**

*Not scored by Clinical Stratification and Identification (CSID) identification process.

**Addressed as a comorbid condition.

Medical products

How do I pick the right health benefits and insurance plan?

Aetna offers six families of plans in California:

Plan features	HMO DED/ HMO COINS	AVN HMO	HMO	MC	MC HSA*	MC HRA
Coverage for preventive care	•	•	•	•	•	•
No PCP requirement				•	•	•
No referrals				•	•	•
Out-of-network access				•	•	•
No claim forms	•	•	•			
A fund established to pay for eligible out-of-pocket health care expenses					•	•
Tax-preferred account					•	
Affordability Scale (\$-\$\$\$ from lowest to highest costs)	\$	\$\$	\$\$\$	\$\$	\$	\$

Use DocFind to search for a provider or select a primary care physician (PCP).

www.aetna.com/docfind

Call us at **1-888-702-3862** to order a provider directory.

Our provider network in California has more than 65,000 physicians and 400 hospitals.** So whichever plan you choose, you will be able to find the provider to best suit your needs.

- **Aetna Value NetworkSM** = 38,673 doctors and 470 hospitals
- **HMO Network** = 68,529 doctors and 489 hospitals
- **Managed Choice[®] Network** = 75,429 doctors and 507 hospitals
- **PPO Network** = 75,530 doctors and 507 hospitals

Choose the right health plan for you and your family in 3 easy steps:

1. How much are you spending?

Evaluate your pay stubs, receipts and canceled checks for all your medical spending and add the total amount to the total cost of your premium, copayments, deductibles and coinsurance. Think about your needs for next year. Here are some common scenarios:

- Are you or your dependents scheduled for any surgical procedures?
- Will you be seeing a specialist for a recently diagnosed condition?
- Are you or your spouse pregnant or planning a pregnancy?

*HSAs are currently not available to HMO members in California.

**According to the Aetna Enterprise Provider Database as of December 31, 2009. Network subject to change.



2. What are your choices?

Check with your company to see which plans are available.

- Compare the premium, deductibles, copayments and out-of-pocket maximums on each plan.
- Review the limitations on each plan: Chiropractic care, acupuncture and physical therapy are some common benefits with limited visits.

3. Choose the right plan.

Now that you know your health care spending for the past year and the plan choices offered by your employer, determine your needs for the coming year.

- Add up what you will pay for premiums, copayments and deductibles under your new plan based on last year's expenses or what you think might happen this year.
- Review the coinsurance maximum amount and decide if it's affordable should a major medical condition develop.
- Remember: The most expensive plan is not necessarily the best one for you and your family.
- Complete the process by submitting the necessary paperwork and updating your doctors of any changes.

Health care terms to know

Premiums are the amount you pay for your insurance policy, often deducted from your paycheck.

Deductibles are paid out of pocket each year before your medical plan covers expenses. Each family member usually has a separate deductible to meet before the medical plan starts coverage.

Copayments (copay) are flat fees charged each time you visit the doctor or use certain medical services, regardless of the cost of the procedure. Doctor's visits and pharmaceutical purchases are often subject to copays.

Coinsurance requires you to pay a percentage of the cost of the medical services. Most plans require either a coinsurance or copay — usually not both.

Coinsurance maximum or maximum out-of-pocket expense is the maximum amount you'll have to spend before all of your medical bills are covered by the medical plan. Sometimes, certain services, such as pharmacy, may not count toward the coinsurance maximum. Copayments may still apply.

Dental products

How do I pick the right dental benefits and insurance plan?*

You can choose your plan from any of our **DMO®, PPO and Freedom-of-Choice plan designs.**

Plan features	DMO	DENTAL PPO	FREEDOM-OF-CHOICE
Coverage for preventive care	•	•	•
No primary care dentist requirement		•	•
No referrals		•	•
Out-of-network access		•	•
No claim forms	•		
No deductibles	•		
No dollar annual maximums	•		

A healthy body starts with a healthy smile

Research suggests that serious gum disease, known as periodontitis, may be associated with many health problems. This is especially true if serious gum disease continues without treatment.^{1,2}

Now, here's the good news. Researchers are discovering that a healthy mouth may be important to your overall health.^{1,2}

Need to find a participating dentist?
Just visit DocFind or give us a call.

www.aetna.com/docfind

1-888-702-3862



*All family members must be enrolled in the same plan.

¹MayoClinic.com. "Oral health: A window to your overall health." Available online at www.mayoclinic.com/health/dental/DE00001. Accessed May 2010.

²R.C. Williams, A.H. Barnett, N. Claffey, M. Davis, R. Gadsby, M. Kellett, G.Y.H. Lip, and S. Thackray. "The potential impact of periodontal disease on general health: a consensus view." *Current Medical Research and Opinion*, Vol. 24, No. 6, 2008, 1635-1643.

**Aetna Life Insurance
Company plans
protect you from
financial loss.**

Aetna Group Life Insurance for small group employees — insurance solutions you can rely on

Nothing is more reassuring than knowing financial resources are available when you need them most. Aetna's products provide your dependents financial support when it counts.

Protection for the future

You'll be glad to know that if your employer selects Aetna to offer you a variety of life insurance products, your future is in good hands with more than 150 years of industry experience.

Basic Term Life

The building block of financial security. You get company-sponsored protection with flexible benefit schedules and guaranteed coverage up to a designated amount.

Dependent Term Life

Financial protection for your spouse and dependent children.

AD&D Ultra[®] coverage

This leading-edge product provides you better financial security than typical accidental death and dismemberment plans and then some. That's because AD&D Ultra includes coverage for education or dependent childcare expenses upon the death of the insured.





Find out what's covered and what requirements apply.

Getting to know your Aetna prescription drug plan

Know what drugs are covered

You and your doctor can choose from hundreds of quality, cost-effective drugs. Your plan covers brand-name and generic drugs on the Aetna Preferred Drug List (also called a "formulary"). It was developed based on advice from many different health care specialists. And all drugs on it are approved by the U.S. Food and Drug Administration (FDA).

Your plan also covers many drugs that are not on this list. Remember though, you'll often pay less for drugs on our list.

To see this list or learn about medication alternatives, go to www.aetna.com/formulary.

Understand precertification and how it helps you

Some drugs need precertification before your plan will cover them. This simply means we need to approve them first for you. Doing this helps make sure the drug is being used at the right dose, for the right reasons. This helps keep you safe. It can also help you find another drug that costs less and is just as effective — something you could talk about with your doctor.

Your doctor will contact us by phone, fax or e-mail. If your request is not approved and you still want the drug, you will have to pay the full price of the prescription.

All decisions are made based on FDA guidelines and current medical findings. Learn more about this at www.aetna.com/formulary.

Start your Aetna plan with peace of mind

New plans often come with new rules. We want to help make the change easier. Once your plan starts, you don't have to worry about getting approval for most covered drugs for your first 90 days.

In your first 90 days:

- If you need a covered drug that normally needs approval first, you'll be able to get that drug without the approval.
- For clinical reasons, some drugs will still need to be approved first, even in your first 90 days. This may be because of questions about dosing, quantity or other health concerns.

After 90 days:

- You will need approval for any new drugs your doctor prescribes that would normally require precertification.
- Any prescription you filled during the first 90 days will still be covered as long as you get the drug at the same strength and quantity as originally prescribed.
- If your doctor changes the dosage of your medication, you may then need to get it approved first. This will happen if the dosage is more than what the FDA recommends.

Over-the-counter drugs may be an option

Many health conditions can be treated safely with drugs you can get without a prescription. We call these drugs “over the counter” because you can buy them at your local stores. You don’t have to go to a pharmacy.

These drugs have been approved by the FDA as safe and effective, and they often have the same active ingredients as an original prescription version. Always talk to your doctor before taking over-the-counter drugs.

Your plan does not cover prescription drugs if a similar drug is available over the counter. This includes drugs like Claritin® and Prilosec® 20 mg. Please ask your doctor what will work best for you.

Limitations and exclusions

Drugs not covered under the standard prescription drug benefit program include, but are not limited to:

- Drugs used for weight loss, including the treatment of obesity
- Certain over the counter drugs
- Nutritional supplements
- Growth hormones
- Prophylactic drugs for travel
- Test agents and devices, other than diabetic test agents
- Performance, athletic performance, or lifestyle enhancement drugs and supplies
- Cosmetics or any drugs used for cosmetic purposes or to promote hair growth, including health and beauty aids
- Replacement for lost or stolen prescriptions

For a complete list of what is not covered by your prescription drug plan, refer to your plan documents after enrollment.

Find out more

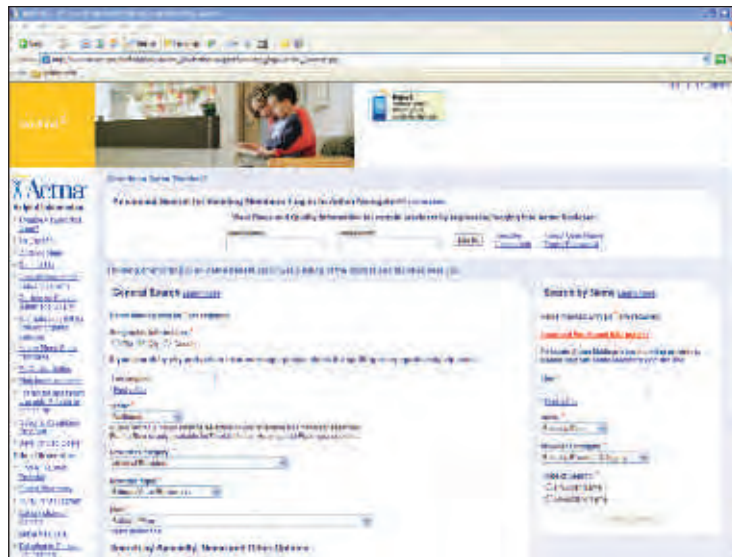
Once you are enrolled, log in to your secure member website at www.aetna.com. You’ll find benefits and claims information, the Preferred Drug List, cost estimates and more. You can also refer to your summary of benefits or call us at the toll-free number on your Aetna member ID card.





How will I find a doctor or specialist?

Start your search at www.aetna.com (or, if you are already a member, log on to Aetna Navigator). Click on Find a Doctor. Use the simple online instructions to perform a general search. You may also search for a particular physician by name, specialty or other options.



How to find your California plan

Some of the names for our California plans appear by their Aetna network names in DocFind. This screen shot is a quick reference guide to identify your plan.

Value Network HMO ●

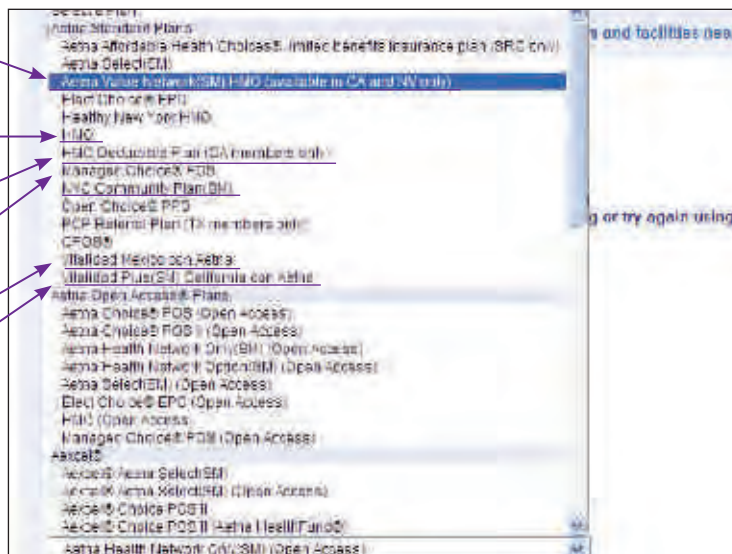
HMO ●

HMO Deductible \$1,000 ●

MC ●

Vitalidad Mexico con Aetna ●

Vitalidad Plus California con Aetna ●



How to complete the enrollment form application

Please be sure to complete your enrollment form thoroughly.

The sections noted below are frequently overlooked.

1. Insert your Social Security number here.
2. Select the medical plan(s) offered by your employer. If dental plans are offered, select your dental plan next.
3. Enter your doctor's (and dentist's if enrolling in a DMO plan) ID number if enrolling in a HMO plan.
4. Sign and date here to complete the form.
5. Sign here if you are waiving coverage for yourself or any dependents.

NOTE: Before submitting this completed form to your employer, you may wish to protect the confidentiality of your health information by faxing or stapling the form so that pages 3, 4 and 5 are not visible.

Actna California Small Group Business (2 - 50 Eligible Employees) Employee Enrollment/Change Form
 (TO COMPLY WITH CALIFORNIA LAW, WHENEVER THE TERM "SPOUSE" APPEARS IT SHALL BE CONSTRUED TO INCLUDE DOMESTIC PARTNER.)

Coverage is provided by the following plan: Actna Health Care Plans, Inc. (HMO), Actna Federal of California, Inc. (FICA), (DRO) (self) and Actna Life Insurance Company for all other coverages.

Group Number
 Applicant Social Security Number

1

Company Name: **HEALTHY HOME** You have three months to pay for coverage from the start of the enrollment period. If you are not paid by the end of the enrollment period, you may be responsible for late payment and your illness. If enrolling, please be sure to sign this and Employee Signature on Page 6. If waiving coverage, please complete Sections E and F. (Section Number of Coverage on Page 3 only.)

Employee Data: New Hire All Plans - Coverage Employee COBRA/COBRA Family Employee Dependent

Reason for Hire: New Hire Change of Coverage Return Spouse Length of Continuation Spouse Self Other Other Coverage Dependents Other

A. Coverage Selection - Please print clearly and check all that apply.

Contract No. (A) (B) (C) (D) (E) (F) (G) (H) (I) (J) (K) (L) (M) (N) (O) (P) (Q) (R) (S) (T) (U) (V) (W) (X) (Y) (Z) (AA) (AB) (AC) (AD) (AE) (AF) (AG) (AH) (AI) (AJ) (AK) (AL) (AM) (AN) (AO) (AP) (AQ) (AR) (AS) (AT) (AU) (AV) (AW) (AX) (AY) (AZ) (BA) (BB) (BC) (BD) (BE) (BF) (BG) (BH) (BI) (BJ) (BK) (BL) (BM) (BN) (BO) (BP) (BQ) (BR) (BS) (BT) (BU) (BV) (BW) (BX) (BY) (BZ) (CA) (CB) (CC) (CD) (CE) (CF) (CG) (CH) (CI) (CJ) (CK) (CL) (CM) (CN) (CO) (CP) (CQ) (CR) (CS) (CT) (CU) (CV) (CW) (CX) (CY) (CZ) (DA) (DB) (DC) (DD) (DE) (DF) (DG) (DH) (DI) (DJ) (DK) (DL) (DM) (DN) (DO) (DP) (DQ) (DR) (DS) (DT) (DU) (DV) (DW) (DX) (DY) (DZ) (EA) (EB) (EC) (ED) (EE) (EF) (EG) (EH) (EI) (EJ) (EK) (EL) (EM) (EN) (EO) (EP) (EQ) (ER) (ES) (ET) (EU) (EV) (EW) (EX) (EY) (EZ) (FA) (FB) (FC) (FD) (FE) (FF) (FG) (FH) (FI) (FJ) (FK) (FL) (FM) (FN) (FO) (FP) (FQ) (FR) (FS) (FT) (FU) (FV) (FW) (FX) (FY) (FZ) (GA) (GB) (GC) (GD) (GE) (GF) (GG) (GH) (GI) (GJ) (GK) (GL) (GM) (GN) (GO) (GP) (GQ) (GR) (GS) (GT) (GU) (GV) (GW) (GX) (GY) (GZ) (HA) (HB) (HC) (HD) (HE) (HF) (HG) (HH) (HI) (HJ) (HK) (HL) (HM) (HN) (HO) (HP) (HQ) (HR) (HS) (HT) (HU) (HV) (HW) (HX) (HY) (HZ) (IA) (IB) (IC) (ID) (IE) (IF) (IG) (IH) (II) (IJ) (IK) (IL) (IM) (IN) (IO) (IP) (IQ) (IR) (IS) (IT) (IU) (IV) (IW) (IX) (IY) (IZ) (JA) (JB) (JC) (JD) (JE) (JF) (JG) (JH) (JI) (JJ) (JK) (JL) (JM) (JN) (JO) (JP) (JQ) (JR) (JS) (JT) (JU) (JV) (JW) (JX) (JY) (JZ) (KA) (KB) (KC) (KD) (KE) (KF) (KG) (KH) (KI) (KJ) (KK) (KL) (KM) (KN) (KO) (KP) (KQ) (KR) (KS) (KT) (KU) (KV) (KW) (KX) (KY) (KZ) (LA) (LB) (LC) (LD) (LE) (LF) (LG) (LH) (LI) (LJ) (LK) (LL) (LM) (LN) (LO) (LP) (LQ) (LR) (LS) (LT) (LU) (LV) (LW) (LX) (LY) (LZ) (MA) (MB) (MC) (MD) (ME) (MF) (MG) (MH) (MI) (MJ) (MK) (ML) (MM) (MN) (MO) (MP) (MQ) (MR) (MS) (MT) (MU) (MV) (MW) (MX) (MY) (MZ) (NA) (NB) (NC) (ND) (NE) (NF) (NG) (NH) (NI) (NJ) (NK) (NL) (NM) (NN) (NO) (NP) (NQ) (NR) (NS) (NT) (NU) (NV) (NW) (NX) (NY) (NZ) (OA) (OB) (OC) (OD) (OE) (OF) (OG) (OH) (OI) (OJ) (OK) (OL) (OM) (ON) (OO) (OP) (OQ) (OR) (OS) (OT) (OU) (OV) (OW) (OX) (OY) (OZ) (PA) (PB) (PC) (PD) (PE) (PF) (PG) (PH) (PI) (PJ) (PK) (PL) (PM) (PN) (PO) (PP) (PQ) (PR) (PS) (PT) (PU) (PV) (PW) (PX) (PY) (PZ) (QA) (QB) (QC) (QD) (QE) (QF) (QG) (QH) (QI) (QJ) (QK) (QL) (QM) (QN) (QO) (QP) (QQ) (QR) (QS) (QT) (QU) (QV) (QW) (QX) (QY) (QZ) (RA) (RB) (RC) (RD) (RE) (RF) (RG) (RH) (RI) (RJ) (RK) (RL) (RM) (RN) (RO) (RP) (RQ) (RR) (RS) (RT) (RU) (RV) (RW) (RX) (RY) (RZ) (SA) (SB) (SC) (SD) (SE) (SF) (SG) (SH) (SI) (SJ) (SK) (SL) (SM) (SN) (SO) (SP) (SQ) (SR) (SS) (ST) (SU) (SV) (SW) (SX) (SY) (SZ) (TA) (TB) (TC) (TD) (TE) (TF) (TG) (TH) (TI) (TJ) (TK) (TL) (TM) (TN) (TO) (TP) (TQ) (TR) (TS) (TT) (TU) (TV) (TW) (TX) (TY) (TZ) (UA) (UB) (UC) (UD) (UE) (UF) (UG) (UH) (UI) (UJ) (UK) (UL) (UM) (UN) (UO) (UP) (UQ) (UR) (US) (UT) (UU) (UV) (UW) (UX) (UY) (UZ) (VA) (VB) (VC) (VD) (VE) (VF) (VG) (VH) (VI) (VJ) (VK) (VL) (VM) (VN) (VO) (VP) (VQ) (VR) (VS) (VT) (VU) (VV) (VW) (VX) (VY) (VZ) (WA) (WB) (WC) (WD) (WE) (WF) (WG) (WH) (WI) (WJ) (WK) (WL) (WM) (WN) (WO) (WP) (WQ) (WR) (WS) (WT) (WU) (WV) (WW) (WX) (WY) (WZ) (XA) (XB) (XC) (XD) (XE) (XF) (XG) (XH) (XI) (XJ) (XK) (XL) (XM) (XN) (XO) (XP) (XQ) (XR) (XS) (XT) (XU) (XV) (XW) (XZ) (YA) (YB) (YC) (YD) (YE) (YF) (YG) (YH) (YI) (YJ) (YK) (YL) (YM) (YN) (YO) (YP) (YQ) (YR) (YS) (YT) (YU) (YV) (YW) (YZ) (ZA) (ZB) (ZC) (ZD) (ZE) (ZF) (ZG) (ZH) (ZI) (ZJ) (ZK) (ZL) (ZM) (ZN) (ZO) (ZP) (ZQ) (ZR) (ZS) (ZT) (ZU) (ZV) (ZW) (ZX) (ZY) (ZZ)

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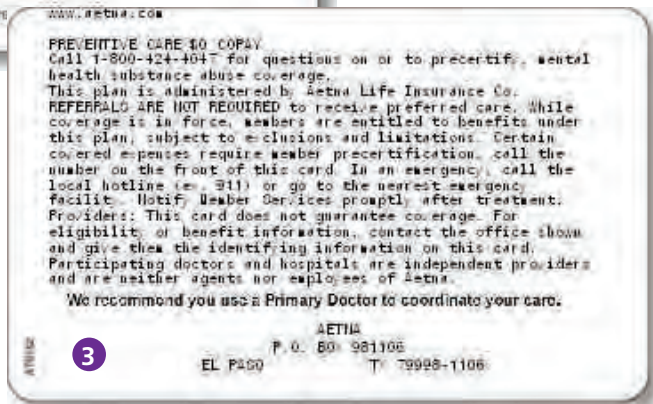
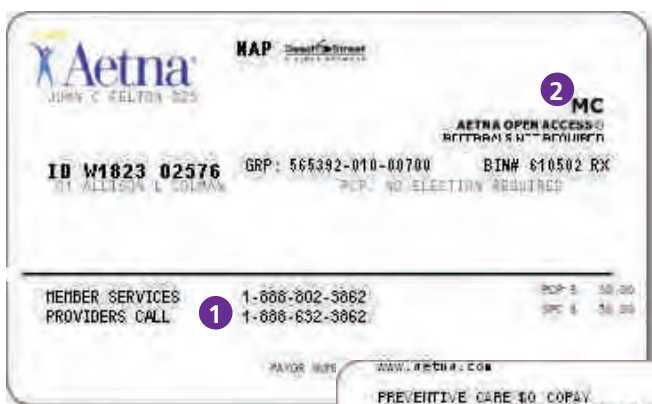
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Your member ID card

After you enroll, you will receive ID cards that look like this. If you need care before your ID card arrives in the mail, you may log in to Aetna Navigator and print a temporary ID card. Make sure to present your Aetna ID card when receiving care from participating providers or when accessing emergency care. Your ID card identifies you as an Aetna member.

1. Call this number to speak with a Member Services representative.
2. Plan in which you are enrolled.
3. Additional information, including precertification number for mental health and substance abuse services.



Review the material in this brochure and speak with your employer or human resources representative about the choices available to you.

We look forward to welcoming you and your family as our newest members!

If you need this material translated into another language, please call Member Services at 1-888-98-AETNA (1-888-982-3862).

Si usted necesita este documento en otro idioma, por favor llame a Servicios al Miembro al 1-888-98-AETNA (1-888-982-3862).

This material is for information only and is neither an offer or invitation to contract. An application must be completed to obtain coverage. Rates and benefits vary by location. The models depicted are not Aetna members. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care of guarantee access to health/dental services. If you are in a plan that requires the selection of a primary care physician and your primary care physician is part of an integrated delivery system or physician group, your primary care physician will generally refer you to specialists and hospitals that are affiliated with the delivery system or physician group. Health/dental benefits and health/dental insurance plans contain exclusions and limitations.

Not all health/dental services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change. Health/dental information programs provide general health information and are not a substitute for diagnosis or treatment by a physician or other health care professional.

HealthEquity, Inc. is the custodian of health saving accounts and independently offers investment services.

Aetna receives rebates from drug manufacturers that may be taken into account in determining the Aetna Preferred Drug List. Rebates do not reduce the amount a member pays the pharmacy for covered prescriptions. Aetna Rx Home Delivery refers to Aetna Rx Home Delivery, LLC, which is a licensed pharmacy providing prescription services by mail.

Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to www.aetna.com.

