Quality health plans & benefits
Healthier living
Financial well-being
Intelligent solutions

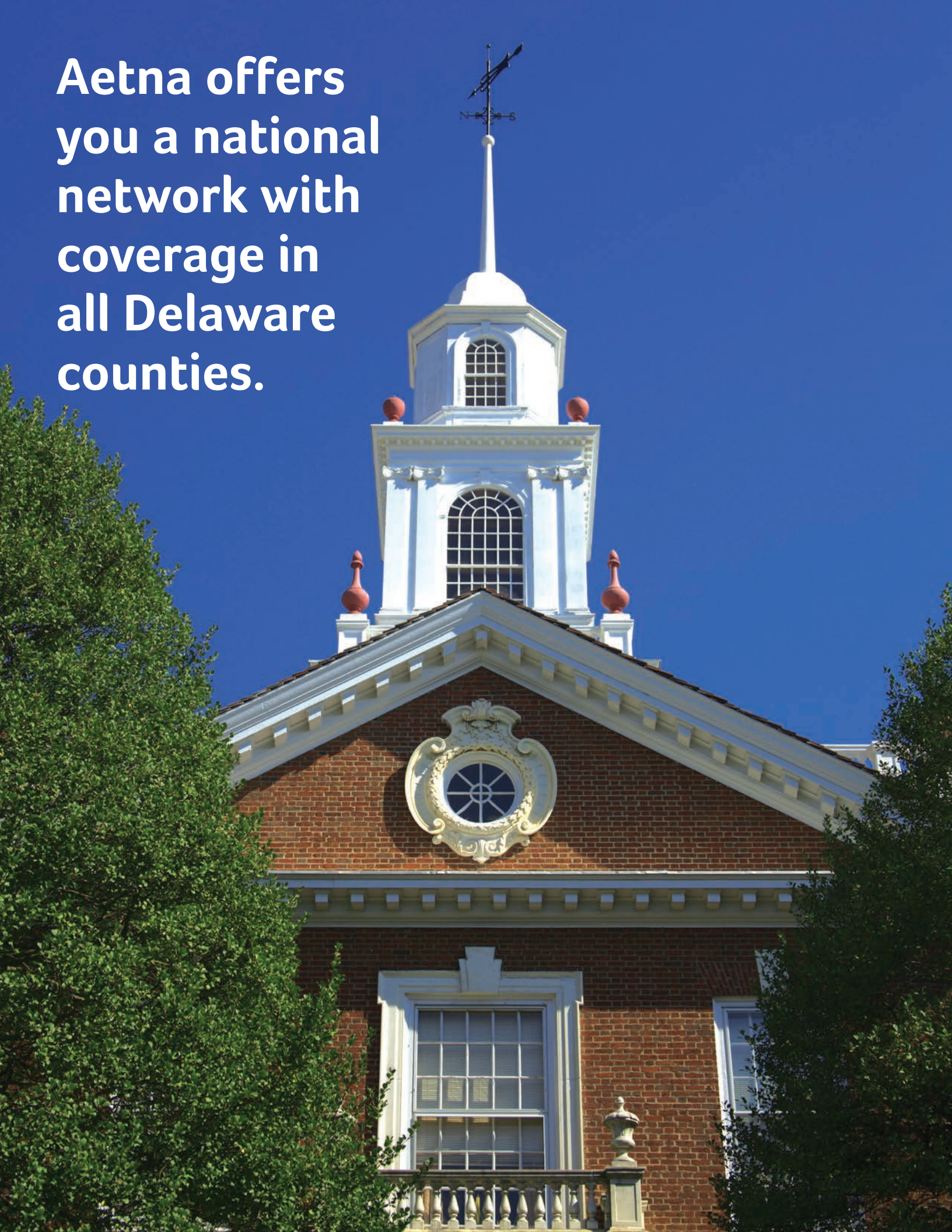
aetna®

# State of Delaware Employees and Pre-65 Pensioners

# 2017 Aetna Health Plans

## Effective July 1, 2017

©2017 Aetna Inc.
00.02.489.1-DE (4/17)



# Aetna offers you a national network with coverage in all Delaware counties.

# Your doctor. Your hospital. Your choice.

## Welcome to the State of Delaware 2017-2018 Annual Open Enrollment — featuring two Aetna health plans: the Aetna CDH Gold Plan with an HRA Fund and the Aetna HMO Plan

### The true worth of any health benefits plan is how it works for you.

That's why, with an Aetna* plan, we put you and your health at the center of everything we do — with excellent member services, programs to keep you healthy and discounts to help you save money.

### Enrollment in an Aetna plan puts these advantages on your side...

**Excellent member services.**

- Nationally, our network includes more than 1 million health care professionals and specialists, and 5,427 hospitals serving 18,459 million members**
- Our custom DocFind® online directory — exclusively for State of Delaware employees at www.myaetnanetwork.com
- The Aetna Navigator® secure member website, featuring information on your personal benefits
- Customer service staff with many years of Aetna experience

**Coverage that goes where you go**

- Nationwide network with coverage in all Delaware counties
- Broad local network*** of providers in Delaware, District of Columbia, Pennsylvania and Maryland
  - All major acute-care hospitals
  - Participating urgent care facilities
  - Walk-in clinics
- Preventive care is covered
- Emergency coverage — anytime, anywhere
- Information and technology to help you be your healthiest

**A benefit plan with lots of EXTRAS**

- Behavioral health support for you and your loved ones
- A maternity program to keep mom and baby healthy
- A wide range of online tools and resources
- A variety of discount programs for extra savings

**New — HMO has enhanced clinical support powered by Carelink CareNow**

- Aetna HMO with Carelink CareNow services are organized to support primary care physicians and their patients in achieving optimal health through the integration of care management services
- Addresses all of the individual's health care needs including medical, mental health and substance abuse
- Designated registered nurse care coordinator as the single point of contact for the physician

## Have a Question?

Your designated toll-free Member Services number is **1-877-54-Aetna** (1-877-542-3862).

* Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies. For self-funded accounts, plan coverage is offered by your employer, with administrative services only provided by Aetna Life Insurance Company (Aetna).

** Provider counts as of April 2013.

*** Provider counts as of April 2013.

# How the Aetna CDH Gold Plan with HRA Fund works

## You get a health plan for coverage — and a fund to help pay for it

The Aetna CDH Gold Plan is designed with your needs in mind:

- You can see any doctor you want, in- or out-of-network
- Preventive care is covered at 100 percent
- The State of Delaware provides you with an HRA Fund to help cover the deductible
- Health Reimbursement Account dollars remain with members that remain in the CDH Gold plan

**There are three parts to your plan — the HRA Fund, the deductible and the health plan.**

Here's how they work:

**1. The HRA Fund**

Each year, the State of Delaware will fund a health reimbursement account —the HRA fund — for you.

You can use the HRA dollars to pay eligible out-of-pocket health care costs.

If you don't use the whole fund in one year, no worries. Unused amounts will roll over to the next year. However, if you change employers or leave the Aetna CDH Gold Plan, you can't take the HRA fund with you.

**2. Your Deductible**

This is an amount you must pay for eligible expenses. Once you pay the full deductible, your health plan begins to pay benefits.

As you use the fund, the payments count toward your deductible. So the fund helps pay your deductible. That means you have less to pay out of your own pocket!

And if you've been in the CDH Gold plan for over a year, the HRA fund can grow as unused funds will roll over to the next year. It might build up enough to pay your full deductible.

**3. Your Health Plan**

Once you meet your deductible, your health plan pays its share for eligible expenses. You pay a smaller share of these costs from your own pocket.

Note: The HRA fund will be prorated for members who enroll or change their level of coverage (an example: from employee and spouse to family, etc.) mid-year, depending on the date of enrollment or change. However, members are responsible for the entire deductible for the plan year.

## CDH Gold Plan: choose from three ways to get health care

**1. Visit your PCP**

You don't have to pick a primary care physician (PCP). But there are advantages when you do. Your PCP can develop a better understanding of your health needs, and that can help you make important medical decisions.

**2. Visit any network doctor or hospital for care**

No referrals are needed and you pay less out of pocket. Your doctor will:

- Strong local network
- Provide routine and preventive care and treat you for some illnesses and injuries
- Get approval from Aetna (called precertification) before providing some services
- File claims for you

**3. Go to any licensed doctor or specialist without a referral**

The Aetna CDH Gold Plan has a fund to help you pay for medical expenses. But you may have to:

- Get your own approval before receiving some services by calling Member Services at **1-877-54-Aetna** (1-877-542-3862).
- Meet the annual deductible
- File your own claims
- Pay the difference between the amount paid by your health plan and the amount charged by your doctor

Your out-of-pocket costs are usually higher when you see a doctor who is not in the Aetna network. Find a provider near you at www.myaetnanetwork.com.

## Pay attention to valuable features

You also get:

**Preventive care**

Preventive care is covered in full by the Aetna CDH Gold when received by an in-network provider. It doesn't count toward your deductible and nothing is paid from the fund. It includes:

- Routine exams and shots
- Wellness exams for children and adults
- Women's preventative services, including:
  - Prenatal Care
  - Breastfeeding Supplies
  - Well-woman Care
  - Contraceptive Coverage
  - Immunizations
- Select screenings
- Routine mammograms (3D mammograms not covered)
- Routine hearing exams

**Out-of-pocket maximum**

You're protected by a limit on how much you pay in a plan year. First, your out-of-pocket costs must reach this limit. After they do, your health plan covers your remaining eligible expenses at 100 percent for the rest of that plan year.

Remember to check your plan documents so you know your responsibilities.

# Aetna CDH Gold Plan Summary of Benefits

| | In-Network | Out-of-Network |
|---|---|---|
| **Benefits Deductible** | **$1,500 Employee/ $3,000 Family*** | **$1,500 Employee/ $3,000 Family*** |
| **Out-of-Pocket Maximum** | **$4,500 Employee/ $9,000 Family**** | **$7,500 Employee/ $15,000 Family**** |
| **HRA Fund Amount** | **$1,250 Employee/ $2,500 Family** | **$1,250 Employee/ $2,500 Family** |
| Inpatient Room and Board | 90% after deductible | 70% after deductible |
| Inpatient Physicians' and Surgeons' Services | 90% after deductible | 70% after deductible |
| Outpatient Services | 90% after deductible | 70% after deductible |
| Prenatal Care | 90% after deductible | 70% after deductible |
| Postnatal Care | 90% after deductible | 70% after deductible |
| Delivery Fee | 90% after deductible | 70% after deductible |
| Hospice | 90% after deductible | 70% after deductible |
| Home Care Services | 90% after deductible for up to 240 days per plan year | 70% after deductible for up to 240 days per plan year |
| Urgent Care | 90% after deductible | 70% after deductible |
| Emergency Services | 90% after deductible | 90% after deductible |
| **MENTAL HEALTH AND SUBSTANCE ABUSE** | | |
| Inpatient Acute/Partial Hospitalization | 90% after deductible | 70% after deductible |
| Outpatient | 90% after deductible | 70% after deductible |

*Once the Family Deductible Limit is met, all family members will be considered as having met their deductible.

**Out-of-pocket maximums apply to each benefit year and includes your deductible. Preventive services are listed on page 5.

This Summary of Benefits highlights the health plans available. Summary Plan Description Booklets are available at **www.ben.omb.delaware.gov/medical**. The account contract is the final determination of the benefits and rules of your plan.

| | In-Network | Out-of-Network |
|---|---|---|
| **OTHER COVERED SERVICES** | | |
| Durable Medical Equipment | 90% after deductible | 70% after deductible |
| Skilled Nursing Facility | 90% after deductible for up to 120 days per confinement | 70% after deductible for up to 120 days per confinement |
| Emergency Ambulance | 90% after deductible | 70% after deductible |
| Physician Home/Office Visits (non-routine) | 90% after deductible | 70% after deductible |
| Telemedicine | 90% after deductible | Not Applicable |
| Specialist Care | 90% after deductible | 70% after deductible |
| Chiropractic Care | 90% after deductible for up to 30 visits per benefit year | 75% after deductible for up to 30 visits per benefit year |
| Allergy Testing/Allergy Treatment | 90% after deductible | 70% after deductible |
| Complex Imaging | 90% after deductible | 70% after deductible |
| Diagnostic Tests*** (x-ray, blood work, ultrasound) | 90% after deductible | 70% after deductible |
| Short-term Therapies | 90% after deductible Physical, Speech, Occupational | 70% after deductible Physical, Speech, Occupational |
| Routine Physical Exam and Immunizations | 100%, no deductible | 70% after deductible |
| Routine Hearing Exam — 1 exam every 12 months | 100%, no deductible | 70% after deductible |
| **HEARING AIDS** | | |
| Covers 1 hearing aid per ear every 3 years for child to age 24 | 90% after deductible | 70% after deductible |
| **ALL INFERTILITY SERVICES** | | |
| | 75% after deductible; $10,000 lifetime maximum for medical services. 75% covered; $15,000 lifetime maximum for prescription services. | 55% after deductible; $10,000 lifetime maximum for medical services. 55% covered; $15,000 lifetime maximum for prescription services. |
| **BARIATRIC SURGERY** | | |
| | 90% after deductible if "Institute of Excellence for Bariatric" is used; 75% after deductible if authorized hospital/surgical center is used. | 55% after deductible |

***Quest Diagnostics® is the preferred provider for diagnostics services.

# Manage your health care and health care spending

The following pages give examples of how the Aetna CDH Gold Plan works over a two-year period for both an individual and a family.

## Aetna CDH Gold Plan with an HRA Fund: Employee-Only Plan

**Here is an example of how the Aetna CDH Gold Plan with an HRA Fund works over two years.**

This example is for an employee-only plan:

- You use in-network doctors and hospitals
- Preventive care is covered at 100 percent and does not count toward your deductible
- The State of Delaware contributes $1,250 to the fund
- The Aetna CDH Gold Plan has a $1,500 deductible

### Year One

- You visit your doctor for a routine physical exam. The exam charge is $100. The Aetna CDH Gold Plan covers preventive care at 100 percent. So, you pay nothing and nothing is paid from the HRA fund.
- Later in the year, you sprain your ankle. During the office visit, your doctor takes X-rays. Your total expense is $300 — $175 for the X-rays and $125 for the office visit.
- If you have not yet met your deductible, you are responsible for paying that $300. Under the Aetna CDH Gold Plan, this amount is paid in full out of the HRA fund. That means you pay nothing out of your own pocket, and the amount paid from the fund reduces your deductible. Your remaining deductible is $1,200. You have no other health care expenses for the rest of the year.
- At the end of Year One, $950 remains in the fund. That amount will be rolled over to the next year if you remain enrolled in a CDH Gold Plan through the State of Delaware.

### Example: Employee Only, Plan Year One

| Here is the plan | |
|---|---|
| **The HRA fund:** | **$1,250** |
| Health plan deductible: | $1,500 |
| **After deductible is met:** | |
| Health plan pays: | 90% (In-network) |
| You pay: | 10% (In-network) |

| A look at Year One | |
|---|---|
| **Total expenses:** | **$400** |
| **The HRA fund:** | |
| You start with: | $1,250 |
| You use: | $300 |
| ***Remaining HRA fund:*** | ***$950*** |
| **Total amount paid by plan:** | **$100** |
| **Total amount paid by the HRA fund:** | **$300** |
| **Total amount you paid:** | **$0** |
| **HRA fund roll-over to the next plan year:** | **$950** |

## Year Two

- Early in the year, you need surgery. The cost is $9,200.
- You start the year with $2,200 in the HRA fund. This includes $1,250 from the State of Delaware for this year's HRA fund plus $950 rolled over from last year's HRA fund. If you have not yet met your $1,500 deductible, you must pay that $1,500 out of your pocket first.
- Now that you've met your deductible, there is a balance of $7,700 to pay for surgery.
- The health plan now begins to pay. You visited in-network doctors and facilities. So, your health plan pays 90 percent of the balance ($6,930) and you are responsible for 10 percent ($770). However, the HRA fund pays $700 and you are responsible for $70.
- At the end of Year Two, the fund balance is $0. You'll start Year Three with a new HRA fund balance of $1,250 if you remain in a CDH Gold Plan through the State of Delaware.

## Example: Employee Only, Plan Year Two

| A look at Year Two | |
|---|---|
| **Total expenses** | **$9,200** |
| **The HRA fund:** | |
| Year Two employer contribution: | $1,250 |
| Amount rolled over from Year One: | $950 |
| Year Two starting HRA fund balance: | $2,200 |
| You use: | $1,500 |
| ***Remaining expenses:*** | ***$7,700*** |

| Your deductible | |
|---|---|
| Health plan deductible (Year Two): | $1,500 |
| Amount paid from the HRA fund: | $1,500 |
| Remaining balance of expenses: | $7,700 |
| Amount you paid to meet the deductible: | $0 |
| ***Remaining expenses:*** | ***$7,700*** |

| Your health plan | |
|---|---|
| Amount paid by plan (90% of $7,700): | $6,930 |
| Balance due (10% of $7,700): | $770 |
| Amount paid by the HRA fund: | $700 |
| ***Remaining expenses:*** | ***$0*** |
| **Total amount paid by plan:** | **$6,930** |
| **Total amount paid by the HRA fund:** | **$2,200** |
| **Total amount you paid:** | **$70 (your share of the health costs)** |

# Manage your health care and health care spending

## Aetna CDH Gold Plan with an HRA Fund: Family Plan

**Here is another example of how the Aetna CDH Gold Plan with an HRA Fund works over two years.**

This example is for a family plan:

- Your family uses both in- and out-of-network doctors and hospitals
- Preventive care is covered at 100 percent and does not count toward your deductible
- The State of Delaware contributes $2,500 to the HRA fund at the family level
- The Aetna CDH Gold Plan has a $3,000 family deductible (the family deductible can be met by two or more family members, but no one individual is charged more than the individual $1,500 limit)

### Year One

- You visit an out-of-network specialist for an exam and testing. The charge is $1,000.
- If you have not yet met your family deductible, you are responsible for paying that $1,000. Under the Aetna CDH Gold Plan, this amount is paid in full out of the HRA fund. That means you pay nothing out of your own pocket, and the amount paid from the HRA fund reduces the family deductible. Your remaining family deductible is $2,000.
- Later in the year, your spouse has surgery performed by an in-network doctor. The charge is $1,000.
- Since your family deductible has not been met, you are responsible for paying that $1,000. But again, under the Aetna CDH Gold Plan, this amount is paid in full out of the HRA fund and you pay nothing out of your own pocket. The amount paid from the HRA fund reduces the family deductible. Your remaining family deductible is now $1,000, and your remaining HRA fund balance is $500.
- Your family has no other health care expenses for the rest of the year.
- At the end of Year One, $500 remains in the HRA fund. That amount will be rolled over to the next year if you remain enrolled in a CDH Gold Plan through the State of Delaware.

### Example: HRA Fund at the Family Level, Plan Year One

| Here is the plan | |
|---|---|
| **The HRA fund:** | **$2,500** |
| Health plan deductible: | $3,000 |
| **After deductible is met:** | |
| Health plan pays: | 90% (In-network)<br>70% (Out-of-network) |
| You pay: | 10% (In-network)<br>30% (Out-of-network) |

| A look at Year One | |
|---|---|
| **Total expenses:** | **$2,000** |
| **The HRA fund:** | |
| You start with: | $2,500 |
| You use: | $2,000 |
| ***Remaining HRA fund:*** | ***$500*** |
| **Total amount paid by plan:** | **$0** |
| **Total amount paid by fund:** | **$2,000** |
| **Total amount you paid:** | **$0** |
| **HRA roll-over to next plan year:** | **$500** |

## Year Two

- Your daughter has surgery performed by an in-network doctor at an in-network surgical facility. The charge is $5,000.
- You start the year with $3,000 in the HRA fund at the family level. This includes $2,500 from the State of Delaware for this year plus $500 rolled over from last year into your HRA fund.
- Your $3,000 family deductible has not been met yet; however, no one person must meet more than the $1,500 individual deductible. Under the Aetna CDH Gold Plan, the HRA fund pays $1,500 toward your family deductible, leaving a balance of $1,500 remaining in the HRA fund.
- Now that your daughter's portion of the family deductible has been met, there is a balance of $3,500 to pay for the surgery.
- The health plan now begins to pay. Your daughter visited an in-network doctor and facility, so, your health plan pays 90 percent of the balance ($3,150) and you pay 10 percent ($350). Under the Aetna CDH Gold Plan, your amount ($350) is paid in full out of the HRA fund.
- Your family has no other health care expenses for the rest of the year.
- At the end of Year Two, the HRA fund balance is $1,150. You'll start Year Three with a new HRA fund balance of $3,650 if you remain enrolled in a CDH Gold Plan through the State of Delaware.

### Example: HRA Fund at the Family Level, Plan Year Two

| A look at Year Two | |
|---|---|
| **Total expenses:** | **$5,000** |
| **The HRA fund:** | |
| Year Two employer contribution: | $2,500 |
| Amount rolled over from Year One: | $500 |
| Year Two starting fund HRA balance: | $3,000 |
| You use: | $1,500 |
| ***Remaining expenses:*** | ***$3,500*** |

| Your deductible: | |
|---|---|
| Health plan family deductible (Year Two): | $3,000 |
| Amount paid from the fund: | $1,500 |
| Remaining balance of expenses: | $3,500 |
| Amount you paid to meet the deductible: | $0 |
| ***Remaining expenses:*** | ***$3,500*** |

| Your health plan: | |
|---|---|
| Amount paid by plan (90% of $3,500): | $3,150 |
| Balance due (10% of $3,500): | $350 |
| Amount paid by HRA fund: | $350 |
| ***Remaining expenses:*** | ***$0*** |
| **Total amount paid by plan:** | **$3,150** |
| **Total amount paid by HRA fund:** | **$1,850** |
| **Total amount you paid:** | **$0** |
| **HRA roll-over to next plan year** | **$1,150** |

# How the Aetna HMO Plan works

The Aetna HMO plan lets you work with a primary care physician (PCP). Your PCP will work one-on-one with you to understand your needs. If you need care from another doctor, your PCP will give you a referral. Nothing is better than personal care!

## STEP #1

**Choose a Primary Care Physician (PCP)**

- You must choose a PCP and see HMO in-network doctors to receive benefits through this plan.
- Your PCP is the doctor you go to first. He or she will help you learn about your health and how to manage it.
- You can choose any PCP from a strong local Aetna HMO network — it's your choice. Plus, you'll feel good knowing that anyone you choose meets our standards.
- Choosing a doctor is a personal decision — that's why each member of your family can have his or her own PCP.
- You can change your PCP anytime. Just call Member Services at the number on your ID card. Or visit Aetna Navigator, your secure member website at **Aetna.com**.

## STEP #2

**Visit your PCP for care**

- Go to your PCP for checkups and whenever you are sick or hurt.
- Your PCP will help you decide if you need care from another doctor. If so, your PCP will give you a referral.
- Sometimes you may need care that requires Aetna approval before you get it. Your PCP and other network doctors will get this approval for you.

## STEP #3

**Pay your copay**

- When you visit the doctor, you pay a copay. This is a flat dollar amount you pay during your visit.
- See the Summary of Benefits on page 13 for your covered services and copay amounts.

## Pay attention to valuable features

You also get:

**Preventive care**

Preventive care is covered in full by the Aetna HMO Plan.

- Routine exams and shots
- Wellness exams for children and adults
- Women's preventative services, including:
  - Prenatal Care
  - Breastfeeding Supplies
  - Well-woman Care
  - Contraceptive Coverage
  - Immunizations
- Select screenings
- Routine mammograms (3D mammograms not covered)
- Routine hearing exams

**Out-of-pocket maximum**

You're protected by a limit on how much you pay in a plan year. First, your out-of-pocket costs must reach this limit. After they do, your health plan covers your remaining eligible expenses at 100 percent for the rest of that plan year.

Remember to check your plan documents so you know your responsibilities.

Building a relationship with a PCP is a good idea.
He or she will help you make informed decisions about your care.

### Finding a PCP is simple!

With our custom DocFind® online directory for State of Delaware employees and pre-65 pensioners, you can look for a doctor by specialty and location. All the information you need is there — including maps and directions to the doctor's office. You can even look for doctors who speak your language. Check out DocFind on our website at **www.myaetnanetwork.com**.

### You can change your PCP at any time.

You can change your designated PCP at any time by calling Member Services at **1-877-54-Aetna (1-877-542-3862)**, or by logging in to Aetna Navigator®.

# Aetna HMO Summary of Benefits

| | IN-NETWORK COVERAGE ONLY |
|---|---|
| **Primary Care Physician (PCP) Selection Required** | |
| **DEDUCTIBLE** | |
| Single | $0 |
| Family | $0 |
| Lifetime Maximum Benefit | Unlimited |
| Out-of-Pocket Maximum | $4,500 Employee / $9,000 Family |
| **PRIMARY CARE PHYSICIAN (PCP) VISITS** | |
| Office Visits | $15 copay |
| Telemedicine | $15 copay per visit |
| **SPECIALTY CARE** | |
| Office Visits | $25 copay |
| X-rays* | $20 copay |
| Lab/blood work | $10 copay |
| Outpatient Diagnostic Test | $20 copay |
| Complex Imaging | Complex imaging at freestanding radiology centers covered at 100%; $35 copay for outpatient hospital |
| Chiropractic Care | Lesser of either $15 copay or 20% of allowable charges |
| **PREVENTIVE CARE** | |
| Routine Physicals | $0 copay |
| Mammograms (3D mammograms not covered) | $0 copay per plan year age 40 and over |
| Routine Digital Rectal Exam/Prostate | $0 copay Specific Antigen Test (For males ages 40 and over) |
| Routine Ob/Gyn Exam | $0 copay – 1 exam per plan year |

*Quest Diagnostics® is the preferred provider for diagnostics services.
The account contract is the final determination of the benefits and rules of your plan.

| | IN-NETWORK COVERAGE ONLY |
|---|---|
| Well-Child Exams/Immunizations | $0 copay |
| **OUTPATIENT SURGERY** | |
| | $100 copay at hospital/<br>$50 copay for surgical center per visit |
| **HOSPITALIZATION** | |
| | $100 per day for first two days per admission, thereafter covered at 100% |
| **EMERGENCY TREATMENT*** | |
| Emergency Room | $150 copay, waived if admitted |
| Ambulance | $50 copay per trip |
| Urgent Care Center | $15 copay |
| **HEARING AIDS** | |
| | Covers 2 hearing aids every 36 months; 1 additional hearing aid covered due to growth within the 36 month period for child to age 24. Covered at 80% |
| **MATERNITY** | |
| First Ob/Gyn visit | $25 copay initial visit, thereafter covered |
| Hospital/Birthing Center/<br>Global Maternity Charge | $100 per day for the first two days per admission, thereafter covered at 100% |
| **DURABLE MEDICAL EQUIPMENT** | |
| | Covered at 80% |
| **ALL INFERTILITY SERVICES** | |
| | 75% covered; $10,000 lifetime maximum status for all new members 75% covered; $15,000 lifetime maximum for prescription services |
| **BARIATRIC SURGERY** | |
| | 100% if "Institute of Excellence for Bariatric" is used; 75% if authorized hospital/surgical center is used |

*Non-emergency use of emergency services is not covered. Not all health services are covered. See your Summary Plan Description for a complete description of benefits, exclusions, limitations, and conditions of coverage.

# Enrolling is easy

## Enroll now! Here's how:

If you are not yet an Aetna member, find out what being a member can do for you!

- If you're an active employee, go to **www.ben.omb.delaware.gov/oe** to enroll online.
- Pre-65 pensioners must complete the enrollment form available on the Office of Pensions website at **www.delawarepensions.com**, or complete an enrollment form included in the packet sent to your home. Completed enrollment forms must be received by May 26, 2017. Mail completed forms to:

  State of Delaware
  Office of Pensions
  McArdle Building
  860 Silver Lake Boulevard, Suite 1
  Dover, DE 19904

- You will receive your ID card within two weeks from the time we receive your enrollment information.
- Already an Aetna Member? No action is needed if you want to remain in the Aetna plan you are currently enrolled in.
- Thinking about becoming an Aetna Member? Have questions? Contact Member Services at **1-877-54-Aetna** (1-877-542-3862).

## After you enroll.

New members will receive an ID card after your enrollment has been processed. Refer to your Summary Plan Description when you have questions about your Aetna benefits, limitations, exclusions and other details.

## Valuable tools to keep you informed.

Included in your plan are important tools and resources that make it easier to use your benefits and help you make more informed health care decisions.

**A summary of the programs available when you enroll in an Aetna plan begins on page 18.**

# Take advantage of your secure member website

## Visit your personalized website anytime, 24/7

### It all starts here.

Aetna Navigator® is your secure member website for planning and managing your health and health care. It's organized to help you do what you want to — more easily.

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

**Our secure connection lets you:**

- See who is covered in your plan.
- Search for a participating provider using DocFind®, Aetna's online provider directory. You can also change your primary care physician (PCP).
- Check the status of a claim or review an Explanation of Benefits (EOB).
- Get the phone number and mailing address for Member Services.
- Contact Member Services online with benefit questions.
- Send secure e-mails to Aetna Member Services.
- Sends messages from the page giving claim details about specific claims with important information already filled in.
- Ask for e-mail alerts when new information, such as EOB statements, becomes available.
- Print standard Aetna forms.

### Visit Aetna Navigator® today and take a FREE tour.

To take a tour of Aetna Navigator, go to **Aetna.com** and click on Log in/Register. Once on the home page, click on "Take the FREE Aetna Navigator tour!"

**Use Aetna Navigator® online tools to:**

- Look up diseases and conditions, like asthma, diabetes and pregnancy.
- Compare hospitals in your area to help decide where to receive medical care.
- Take a survey to rate medical professionals in the Aetna network.
- Review costs for medical treatments, office visits, medical tests and more.
- Find the average costs of health care services in your area and learn how much you might save by choosing a doctor who participates in the Aetna network.

### Find what you need — wherever, whenever — with Aetna Mobile

That's why it's great to know you can use your cell phone with web access to view your health plan information — whenever you want, wherever you are. The Aetna Mobile app is available for Android™ and iPhone® mobile devices.

**Use a different smartphone or mobile device?**
Instead of loading an app, just visit **www.aetna.com** and use the mobile web version of the site.

## Health info on the go.

Visit Aetna Navigator® anytime, anywhere.

You can log in using any mobile phone with web access. It's fast, easy and so convenient. **Go to Aetna.com**.

# Aetna programs to keep you healthy

## The Aetna plans available to State of Delaware employees and pre-65 pensioners include the following programs, at no cost to you

"My husband and I were so excited to find out we were having a baby. When I took the Beginning Right® Pregnancy Risk Survey, I was surprised to find out that I was considered high risk. I reached out to talk with an Aetna nurse who worked with me to understand my risks and how to address them. She kept in touch with me during my entire pregnancy and even called me after my daughter was born. Thank you for offering this program; it comforted us to know someone was there to help."

– SARAH AND RICHARD

### Go online to learn more about women's health.

Go to Aetna Women's Health at **womenshealth.aetna.com** for information on pregnancy and baby care, as well as:

- Reproductive health
- Breast health
- Migraines
- Menopause
- Heart health
- Depression

The more you know, the better chance you have for good health.

### Give your baby a healthy start.

### Beginning Right® Maternity Program

Our Beginning Right Maternity Program comes with your Aetna health plan. Use it throughout your pregnancy and after your baby is born.

**Learn what's best for a healthy pregnancy.**

Receive educational materials on:

- Prenatal care
- Signs of preterm labor
- What to expect before and after delivery
- Newborn care and more

Take our pregnancy risk survey. Find out if you have any health conditions or risk factors that could affect your pregnancy.

If you are identified as "at risk" or "high risk," you'll receive two follow-up calls after delivery. Your nurse case manager will check in to see if you and your baby are doing well. We can also do an initial screening for depression and give even more support if needed.

We have nurses and other health educators who speak English and Spanish. Our translation service offers help in over 170 languages. Plus, you can receive program materials in English and Spanish.

# Stay well, get fit and save money

## Discount programs and services from Aetna

**Who said nothing in life is free? Enroll in an Aetna plan and get — at no added cost — Aetna extras! Our discount programs and services are your ticket to the small luxuries that can help keep you happy and healthy.**

### Aetna Vision℠ discount program

**Save on seeing sharper**

Pay less for eye exams, contact lenses, and prescription and nonprescription eyeglasses. Even most designer frames!

Save at*:

- JCPenney® Optical
- LensCrafters®
- Target Optical®
- Sears Optical®
- Pearle Vision®
- Plus many doctors in private practice

To find a location near you, visit **Aetna.com**.

**More eye-opening perks**

- Contact lens replacements — delivered to your door
- Savings on LASIK eye surgery, including a FREE consultation
- 20% off eyecare items like sunglasses, contact cleaners and eyeglass chains

The Aetna Vision discount program is separate and not part of the State of Delaware Group Health Insurance Program vision plan available through EyeMed.

### Aetna Natural Products and Services℠ discount program

**Save on good health, naturally**

You get at least 25% off the normal fee on these services through the ChooseHealthy™ program**:

- Massage therapy
- Acupuncture
- Chiropractic care
- Dietetic counseling

**Get discounts on health and wellness products**

Save 15% on products, like over-the-counter vitamins, yoga equipment, homeopathic remedies and more through the ChooseHealthy program.

**Save on medical consultations online**

Get natural remedies for many conditions from medical doctors in the Vital Health Network. You'll get 30% off your first online consultation. Then 50% off each one after that. Topics include headaches, joint pain, allergies and more.

### Aetna Hearing℠ discount program

**Save on hearing aids and exams**

You have two options to meet your hearing needs.

*With Hearing Care Solutions, you get:*

- Up to 63% savings on a large choice of hearing aids
- A two-year supply of batteries (up to 96 cells), with a mail-order discount
- In-office service for one year
- Free routine cleanings, checks and battery-door replacements for the life of your hearing aid

*With HearPO®, you get:*

- Savings on many styles of hearing aids, including programmable and digital hearing aids from leading makers
- A two-year supply of batteries (up to 160 cells per hearing aid)
- A discounted rate of $48 for hearing exams
- Discounts on hearing aid repairs
- Free follow-up services for one year

"During a recent eye exam, my optometrist told me I needed glasses. I've never had to wear glasses so I was shocked to discover how much they can cost. I was, however, pleasantly surprised when I presented my Aetna ID card to pay for my glasses, and I received 20% off my new glasses thanks to the Aetna Vision discount program. I'm saving money and seeing better."

– STEVE

*EyeMed Select Network and Provider List, 3/13.

**The ChooseHealthy program is made available through American Specialty Health Networks, Inc. (ASH Networks) and Healthyroads, Inc., subsidiaries of American Specialty Health Incorporated (ASH). ChooseHealthy is a federally registered trademark of ASH and used with permission herein.

## After you enroll, go to Aetna Navigator at **Aetna.com** for details on how to get started with our discount programs.

### Aetna Fitness℠ discount program

**Save on gym memberships**

Get preferred rates at your choice of over 10,000** gyms in the GlobalFit® network.

You also get:

- A FREE guest pass at most gyms
- Flexible membership options
- Easy billing through your bank account or credit card
- Membership transfer to another gym***

**Save on home exercise equipment**

Build your home gym with discounts on elliptical trainers, treadmills, resistance bands, mats, yoga accessories and more.

**More healthy perks**

Getting fit is just the start to a healthier you. You can also:

- Try out an at-home weight-loss program
- Get one-on-one health coaching† to help you quit smoking, lower stress, lose weight and more

**GlobalFit website, **www.globalfit.com/gyms-and-more**, 3/13.
***Not available for month-to-month memberships.
†By WellCall, Inc., through GlobalFit.

## Aetna Weight Management℠ discount program

**Save and lose weight**

Lose weight, feel great and save on today's most popular weight-loss programs and meal plans.

**Save on eDiets®**

You can choose an online diet plan or a meal delivery plan with food shipped right to your door.

You get:

- 25% off online monthly plan membership dues
- 25% off the cost of food for a 5- or 7-day Meal Delivery Plan
- Customized menus, diet tools and more

**Save on Jenny Craig®**

Sensible weight-loss programs that help you lose the weight for good.

- Start with a FREE 30-day Trial Program*
- Then get 25% off a Jenny Craig Premium Program* when you sign up through:
  - Participating Jenny Craig Centres
  - Jenny Craig At Home
- Plus, get weekly one-on-one consultations, 24/7 online support and more

**Save on Nutrisystem®**

Over 150 single-serve food choices that are tasty and easy to make.

You get:

- 12% off on any 28-day weight-loss meal plan**
- An even bigger discount with Auto-Delivery**
- Other available offers when you sign up
- Food delivered right to your door, FREE online membership and more

## More healthy savings.

Enhance your healthy lifestyle with even more discounts.

Save on:

- Sonic toothbrushes and water-jet flossers from Waterpik®
- Gum, toothpastes and mouth rinses from Epic Dental
- An automatic Home Blood Pressure Monitor with ComFit™ Cuff
- Books and other items from the American Cancer Society® Bookstore and MayoClinic.com Bookstore
- Yoga DVDs, books and online videos through Pranamaya®

## What's more important than your health?

Start saving today on services and products that can help you stay well. And take advantage of others that respond to your special needs. They're the Aetna extras that are all here for you when you enroll in an Aetna plan. Use them often. And use them in good health.

*Food, and if applicable, shipping, is not included. Offer applies to initial membership fee only and is valid at participating centres in the U.S., Canada and Puerto Rico, and through Jenny Craig At Home. Each offer is a separate offer and can be used only once per person. Restrictions apply.

**For these plans: Basic, Silver, Diabetic, Vegetarian or NutriSystem® Select®, not Nutrisystem Flex. The Aetna discount does not apply to any program in which you are already enrolled. To receive the discounted rate, you must wait until your current program ends. If you are enrolled in Auto-Delivery, you must cancel it and then re-enroll to receive the discounted rate. With Auto-Delivery, you receive a 10% discount off Nutrisystem's regular 28-day Program price and free shipping to Continental U.S. only. Auto-Delivery offer is good on new 28-day Auto-Delivery programs only.

# Talk to a doctor anytime, anywhere

## Welcome to Teladoc

Aetna is providing you and your eligible dependents with access to U.S. board-certified doctors and pediatricians by online video. Video consults are available 24/7/365.

Less than an urgent care or ER visit, Teladoc's never more than a doctor visit.

### Anytime, Anywhere

Teladoc does not replace your primary care physician. It is a convenient and affordable option that allows you to talk to a doctor who can diagnose, recommend treatment and prescribe medication, when appropriate, for many of your medical issues.

### Experience You Can Trust

Teladoc doctors are U.S. board-certified, licensed in your state and average 15 years of practice experience. With your consent, Teladoc will provide information about your consult to your primary care physician.

### Treat Many Conditions

- Sinus problems
- Bronchitis
- Allergies
- Cold and flu symptoms
- Respiratory infection
- Ear infection
- Phone consultations not available in Delaware
- And more!

## Take a doctor with you

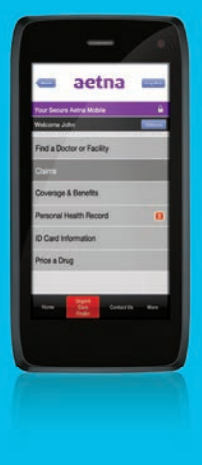
1. **Set up an account**
   Visit the Teladoc website and click "Set up account".
2. **Provide medical history**
   Log in and complete the "My Medical History" tab.
3. **Request a consult**
   A Teladoc doctor is always just a call or click away.

## Learn more about Teladoc:

Teladoc.com/Aetna
1-855-Teladoc (835-2362)
Teladoc.com/mobile
Facebook.com/Teladoc

made available through

We look forward to welcoming you and your family as Aetna plan members...and to providing the coverage, services, information and tools you may need. Enroll today!




**Aetna Mobile:** Text Apps to 23862 to download now.*
To learn more: visit us at **www.aetna.com/mobile**

*Standard Text Messaging rates may apply.

**If you need this material translated into another language, please call Member Services at 1-877-54-Aetna (1-877-542-3862).**

Si usted necesita este documento en otro idioma, por favor llame a Servicios al Miembro al **1-877-54-Aetna (1-877-542-3862)**.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company. Health benefits plans are administered by Aetna Life Insurance Company. Not all health 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 information programs provide general health information and are not substitutes for diagnosis or treatment by a physician or other health care professional. Discount programs provide access to discounted prices and are not insured benefits. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services. 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 **Aetna.com**.

aetna®

©2017 Aetna Inc.
00.02.489.1-DE (4/17)