

Open Choice® preferred provider organization (PPO) plan

Health insurance plans are offered and/or underwritten by Aetna Life Insurance Company (Aetna).



aetna.com

A plan where your choice really matters

Our Open Choice PPO plan lets you visit any doctor you choose. And you don't need a referral when you visit one.

This health insurance plan also gives you access to tools, tips, programs and services. They can help you find network doctors, estimate costs and more.

Looking for your exact copay amounts? Let's see what's covered.

All employer health plans are different. This booklet shows how the Open Choice PPO plan works. And you'll learn how to get the most out of it.

For details like copays and what's covered, check your Summary of Benefits and Coverage document. It should be in your enrollment kit. If you don't have it, ask your employer.

Your options	Pick your doctor	How it works
Network option	Go to any doctor in our network. No referrals required. Network doctors contract with us to offer lower rates. This can help you save.	Your network doctor will: • Provide care • Get approval from us before giving you some services* • File claims for you You may have a deductible to pay first. This is the amount you pay each year before your plan begins to pay. You then pay a portion of your doctor's charges. This could be in the form of a copay (a fixed amount) or coinsurance (a percentage). This option may cost you less.
Out-of- network option	Visit any licensed doctor or specialist without a referral. A specialist is a doctor who focuses only on treating certain conditions or diseases. For example, a dermatologist treats skin conditions. A cardiologist treats heart problems.	You may have to: Get approval from us before receiving some services* Pay the full amount at the time of service File your own claims We'll process your claim and reimburse you based on your employer's specific plan and benefits details. For example, if you haven't met your deductible yet, that will be subtracted from your reimbursement. Note: If you choose an out-of-network doctor, your deductible may be higher. Try to choose an in-network doctor so you can pay less. Check your plan documents for your plan's details.

^{*}This approval is known as preauthorization. In Texas, it is known as "pre-service utilization review" and is not "verification" as defined by Texas law.

In case of emergency, call 911 or your local emergency hotline, or go directly to an emergency care facility.



Tools to help you find network doctors and more

Find the right doctor just for you

Use our online directory. You can find doctors by name, specialty and location. You'll also find maps, directions and more. You can even look for doctors who speak your language. Try it out at **aetna.com**.

Or get a printed directory. If you're already a member, call Member Services to get one. The toll-free number is on your ID card. If you're not an Aetna® member yet — or haven't received your ID card — call **1-888-982-3862**.

It's your website, so be sure to sign up

As a member with us, you'll get tools and resources to help you manage your health and your benefits. Get plan information and cost-saving tools in one place — your member website. You just need to sign up. Members can register at **aetna.com**.

You have our number — just call us

You can speak to Member Services anytime during regular business hours. Our representatives are here to help answer any questions you have about your plan. Just call the toll-free number on your ID card.

Your doctor. Your choice.

Enroll today.

Help for those who speak another language and for the hearing impaired

If you require language assistance, please call the Member Services number on your member ID card, and a representative will connect you with an interpreter. You can also get interpretation assistance for utilization management issues or for registering a complaint or appeal. If you're deaf or hard of hearing, use your TTY and dial 711 for the Telecommunications Relay Service. Once connected, please enter or provide the telephone number you're calling.

Ayuda para las personas que hablan otro idioma y para personas con impedimentos auditivos

Si usted necesita asistencia lingüística, llame al número de Servicios al Miembro que figura en su tarjeta de identificación de miembro, y un representante le conectará con un intérprete. También puede recibir asistencia de interpretación para asuntos de administración de la utilización o para registrar una queja o apelación. Si usted es sordo o tiene problemas de audición, usar su TTY y marcar 711 para el Servicio de Retransmisión de Telecomunicaciones (TRS). Una vez conectado, entrar o proporcionar el número de teléfono que está llamando.

This material is for information only and is not an offer or invitation to contract. An application must be completed to obtain coverage. Rates and benefits vary by location. Health insurance plans contain exclusions and limitations. 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. 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**.

Policy forms issued in Idaho include: GR-23, GR-29/GR-29N, GR-9/GR-9N, AL HGrpPol 04, AL SG HGrpPol 03.

Policy forms issued in Oklahoma include: GR-23 and/or GR-29N.

Policy forms issued in Missouri include: AL HGrpPol 01R5.

