

Connecticut Aetna Advantage Plan Options

Preventive and Hospital Care 3000 (HSA Compatible)

MEMBER BENEFITS	In-Network	Out-of-Network*
Deductible Individual Family	\$3,000 \$6,000	\$6,000 \$12,000
Coinsurance (Member's responsibility)	20% after deductible up to out-of-pocket max.	50% after deductible up to out-of-pocket max.
	<i>\$0 once out-of-pocket max. is satisfied</i>	
Coinsurance Maximum Individual Family	\$2,000 \$4,000	\$4,000 \$8,000
Out-of-Pocket Maximum Individual Family	\$5,000 \$10,000	\$10,000 \$20,000
	<i>Includes deductible</i>	
Lifetime Maximum* per insured	\$1,000,000	
Non-Specialist Office Visit General Physician, Family Practitioner, Pediatrician or Internist	Not covered	Not covered
Specialist Visit	Not covered	Not covered
Hospital Admission	20% after deductible	50% after deductible
Outpatient Surgery	20% after deductible	50% after deductible
Urgent Care Facility	Not covered	Not covered
Emergency Room	20% coinsurance after deductible	
Annual Routine Gyn Exam <i>No waiting period, no calendar year max.</i> Annual Pap/Mammogram	\$0 copay deductible waived	50% after deductible
Maternity	Not covered <i>Except for pregnancy complications</i>	
Preventive Health — Routine Physical <i>Aetna will pay up to \$250 per exam*</i> <i>No waiting period</i>	\$30 copay deductible waived	50% after deductible
	<i>Includes lab work and X-rays</i>	
Lab/X-Ray**	Not covered	Not covered
Skilled Nursing — instead of hospital <i>30 days per calendar year*</i>	20% after deductible	50% after deductible
Physical/Occupational Therapy and Chiropractic Care	Not covered	Not covered
Home Health Care — instead of hospital <i>80 visits per calendar year*</i>	20%	25%
Durable Medical Equipment***	Not covered	Not covered
PHARMACY		
Pharmacy Deductible per individual	Not Applicable	Not Applicable
Generic <i>Oral Contraceptives Included</i>	Not covered Aetna Negotiated Charge Applies	Not covered
Preferred Brand <i>Oral Contraceptives Included</i>	Not covered Aetna Negotiated Charge Applies	Not covered
Non-Preferred Brand <i>Oral Contraceptives Included</i>	Not covered Aetna Negotiated Charge Applies	Not covered
Self-Injectable Drug Copay/Coinsurance	Not covered Aetna Negotiated Charge Applies	Not covered
Calendar Year Maximum per individual*	Not Applicable	Not Applicable

- * Maximum applies to combined in and out-of-network benefits.
- ** Copay is billed separately and not due at time of service. Copay does not count towards coinsurance or out-of-pocket maximum.
- *** Diabetic and Ostomy supplies are covered. A maximum of \$1,000 per calendar year for ostomy supplies.
- + Payment for out-of-network facility covered expenses is determined based on Aetna's Market Fee Schedule. Payment for out-of-network non-facility covered expenses is determined based on the negotiated charge that would apply if such services were received from a Network Provider.
- ++ Outpatient Hospital Lab/X-Rays (including complex imaging) covered if such services would have been performed as an Inpatient. Aetna will pay \$100 per calendar year maximum. Outpatient Hospital - Any other services Aetna will provide coverage of maximum of \$50 paid if services rendered within 72 hours of accident.

A summary of exclusions is listed in the Aetna Advantage Plan brochure. For a full list of benefit coverage and exclusions refer to the plan documents. Plans may be subject to medical underwriting or other restrictions. Rates and benefits vary by location. Aetna receives rebates from drug manufacturers that may be taken into account in determining Aetna's Preferred Drug List. Rebates do not reduce the amount a member pays the pharmacy for covered prescriptions. Health insurance plans contain exclusions and limitations. Material subject to change. This material is for information only and is not an offer or invitation to contract. Investment services are independently offered by the HSA administrator.

Aetna Advantage Plans for Individuals, Families and the Self-Employed are underwritten by Aetna Life Insurance Company (Aetna) directly and/or through an out-of-state blanket trust or Aetna Health Inc. In some states, individuals may qualify as a business group of one and may be eligible for guaranteed issue, small group health plans. These plans are medically underwritten and you may be declined coverage in accordance with your health condition.

