



Live it

2018 Aetna Federal Plans

Whoever you are, we have a plan that gets you

aetna[®]

aetnafeds.com

Choose a plan that fits your needs

We're all different — with unique interests, family situations, budgets and needs. That's why we offer a variety of health plans. So you can get the one that's right for you.

Here's a quick comparison of our plans, so you can see the key differences. Inside, you'll find out more, like how the plans work, how much they cost and how to enroll.

Feature	HMO plans	Value plan	HDHP plan	CDHP plan
Out-of-network coverage?	No	Yes	Yes	Yes
Deductible?	No	Yes, but not for office visits or prescriptions	Yes, but not for preventive care	Yes, but not for preventive care
Prescription coverage?	Yes	Yes	Yes	Yes
Basic dental and vision?	Yes	No	Yes	Yes
Health savings account or fund?	No	No	Yes	Yes
Flat copays for medical care?	Yes*	Yes, for office visits	No	No
Wellness rewards?	No	Yes	Yes	Yes

*Flat copays for most covered services in the health maintenance organization (HMO) plans. Certain regions require coinsurance (a percentage of the covered cost) for hospital coverage.

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Chat with us online, watch webinars, schedule a one-on-one appointment and more. Visit [AetnaFedsLive.com](https://www.aetna.com/life/etnafedslive).

Health benefits and insurance plans are offered, underwritten and/or administered by Aetna Health Inc., Aetna Health of California Inc. and/or Aetna Life Insurance Company (Aetna).

Highlights of your health plan

No matter which plan you choose, you can take advantage of the following:

A large national network

- More than 1.2 million health care professionals*
- Nearly 700,000 primary care physicians (PCPs) and specialists*
- More than 5,700 hospitals*

That means you can find a network provider nearly anywhere in the United States — whether you're at home or away on business or vacation. Chances are your doctor is in our network. To make sure, check our directory before signing up. Just go to aetnafeds.com and click on "Find Your Doctor."

Get discounts to help you save on:

- Gym memberships
- Weight-loss programs
- Vision products and services
- Chiropractic care, acupuncture, massage therapy and more

Online tools can help you:

- Find a doctor, hospital or walk-in clinic, close to home or out of state
- Create your own personal health record and review claims
- Save money by comparing costs. Use the Member Payment Estimator and Price-A-DrugSM tools

No referrals needed

You don't have to get a referral from your doctor to see a specialist.

Want to test drive the tools now? Log in at aetnafeds.com. Use "federal3" as your user name and password.

Visit doctors via phone, video or app



You can take advantage of the Teladoc network of providers. For \$40 or less, depending on your plan, you can consult with doctors over the phone, via online video or Teladoc mobile app.** Teladoc physicians are board certified and available 24 hours a day.

They can also write a prescription if medically necessary. Just set up an account at teladoc.com/aetna.

*Aetna Enterprise Preferred Provider Organization (PPO) Database, as of August 2017.

**No video consults offered at this time in Texas; only phone consults available. No phone consults offered at this time in Idaho; only video consults available.



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Aetna Open Access[®] HMO plan

National network of doctors, predictable costs, no referrals

How this plan works

It's simple.

1. Find a doctor in the Aetna HMO network. Just do a search at aetnafeds.com.
2. Visit any primary care physician (PCP) or specialist in the network. No referral needed.
3. Pay your copay — your share of the cost.

Dental, vision and pharmacy coverage are built into your Aetna HMO.

You pay \$0 for maternity care.

2018 Basic HMO benefits (available in DC, MD, VA)

Key benefits	What you pay
Preventive care Routine physical	\$0 \$0 (one per calendar year)
PCP care	\$20
Specialist care Teladoc consult	\$45 \$40
Maternity Prenatal care Hospital care	\$0 \$0
Inpatient hospital	\$200 per day, \$1,000 max per stay Note: You pay no coinsurance for inpatient hospital care. Just pay your copay.
Outpatient surgery	\$175 per visit
Urgent care	\$50
Emergency	\$175
Chiropractic	\$45 specialist
Lab/X-ray/diagnostic services	\$20 PCP/\$45 specialist (\$100 for certain tests)
Prescription drugs* 30-day supply at a retail pharmacy	\$5 for generics, \$50 for brand name, 50% up to \$200 max for non-formulary generic or brand name**
90-day supply through mail-order service	2 copays, not 3 (based on copay amount indicated above) for generic and brand name. 50% up to \$300 for nonformulary generic or brand name drugs.

Built-in vision

Routine eye exam — You pay a \$45 copay.

Money toward prescription eyewear — You get \$100 that you can use toward the purchase of prescription glasses and contact lenses every 24 months.

Discounts — You get discounts on eyeglasses, contacts, eye exams and more.

Built-in dental — In-network cleanings, X-rays, composite fillings

- \$5 copay when you use the basic dental network
- \$0 copay (after \$20 deductible) when you use the dental PPO network***

You are automatically covered under the basic network option.

Call **1-800-537-9384** to select your designated primary care dentist **or** to switch to our PPO network at no additional cost.

*For specialty drug information, see the federal brochure at aetnafeds.com.

**Like other health plans, this plan uses a formulary, which is a list of generic and brand-name drugs your health plan prefers.

***If you see an out-of-network dentist, you pay 50 percent of the negotiated rate plus any difference between our allowance and the billed amount.

Two HMO plans



What appears here is information about **our most popular plan: the Basic HMO plan.**

For information about our High HMO plan, refer to aetnafeds.com.

2018 Aetna HMO rates (what you pay every other week)

	Code	Non-postal	Postal 1	Postal 2
Self only	JN4	\$76.68	\$70.31	\$63.95
Self + one	JN6	\$160.73	\$146.26	\$133.41
Self + family	JN5	\$178.55	\$164.06	\$149.57

Please see the Aetna federal brochure at aetnafeds.com for full plan details, service areas and rates.



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Aetna Value plan with a national PPO network

Wellness rewards, low rates and no referrals

How this plan works

1. This plan rewards you for taking care of yourself. How?

By giving you credits (money) when you get preventive care like flu shots. Those credits you've earned can then go toward paying your deductible or medical costs.

See how the wellness rewards work on the next page. Or visit aetnafeds.com.

2. You can visit any doctor in the Aetna PPO network. No need to get a referral to see a specialist.
3. You can also use any doctor outside Aetna's network. But your out-of-pocket costs will be higher.

You pay \$0 for maternity care in the network and no deductible.

No deductible for prescription drugs, lab/X-ray, maternity or in-network office visits.

2018 Aetna Value benefits (available nationwide)

Key benefits	What you pay in the network*
Preventive care Routine physical	\$0 \$0 (one per calendar year)
PCP care	\$25
Specialist care	\$40 Note: You don't need to meet a deductible for PCP or specialist care. Just pay your copay.
Maternity Prenatal care Hospital care	\$0 \$0
Teladoc consult	\$40 no deductible
Lab, X-ray and diagnostic services	20% no deductible
Deductible	\$600 (self)/\$1,200 (self + one or self + family)
Inpatient hospital charges	20% after deductible
Outpatient surgery	20% after deductible
Emergency room	20% after deductible
Urgent care center	20% after deductible
Prescription drugs**	Note: You don't need to meet a deductible for prescription drugs. Just pay your copay or coinsurance (as noted below).
30-day supply at a retail pharmacy***	\$10 for generics, 30% of cost of brand name up to \$600 max, 50% of cost of nonformulary up to \$600 max [†]
90-day supply through mail-order service	You'll generally pay less for a 3-month supply than for 3 separate 1-month supplies.

*The costs for out-of-network care are higher. To pay the least out of pocket, use network doctors and hospitals.

**For specialty drug information, see the federal brochure at aetnafeds.com.

***If you use an out-of-network retail pharmacy, you pay 50 percent of the negotiated rate for all types of drugs, plus any difference between our allowance and the billed amount.

[†]Like other health plans, this plan uses a formulary, which is a list of generic and brand-name drugs your health plan prefers.

Get rewarded for being healthy

You can earn up to \$250 in credits for yourself or \$500 per family. And those credits then go toward helping pay your deductible or medical costs. It's extra money just for taking part in certain healthy activities.

It's easy money



All you need to do is get preventive care — like routine physicals and flu shots.

You'll then receive a \$50 credit for each activity. Just call your doctor's office to schedule a visit. Remember: Preventive care is a \$0 copay.



Earn another \$50 credit when you get a biometric screening

This blood test, blood pressure check and waist measurement can help you see if you're at risk for certain medical conditions, like heart attack or stroke. Schedule your screening by calling **1-866-908-9440**.

2018 Aetna Value rates (what you pay every other week)

	Code	Non-postal	Postal 1	Postal 2
Self only	F54	\$67.27	\$61.21	\$55.83
Self + one	F56	\$151.01	\$137.42	\$125.34
Self + family	F55	\$154.04	\$140.17	\$127.85

It's easy to enroll



Step 1:

- Choose a plan



Step 2:

- Find your plan's enrollment code. They're listed in the rate charts in this brochure.



Step 3:

- Fill out the form.
- Get yours at aetnafeds.com/enroll.

Aetna HDHP with a health savings account

A national PPO network, low rates and a tax-free account

How this plan works

1. We set up a health savings account (HSA) for you to help you pay for your health care.* Aetna adds money to it each month.

Here's what you get in your HSA:

- **Self only:** \$750 a year (\$62.50 a month)
- **Self + one:** \$1,500 a year (\$125 a month)
- **Self + family:** \$1,500 a year (\$125 a month)

You can add money to it, too — and pay no taxes on it. The account earns interest tax free, so it builds up over time. And all the money in there is yours to keep — even if you leave the plan.

2. You can visit any doctor in the Aetna PPO network. No need to get a referral to see a specialist.

3. You can also use any doctor outside Aetna's network. But your out-of-pocket costs will be higher.

Dental, vision and pharmacy coverage are built in.

2018 Aetna HDHP benefits (available nationwide)

Key benefits	What you pay in the network**
Preventive care Routine physical	\$0 \$0 (one per calendar year)
Deductible	\$1,500 (self)/\$3,000 (self + one or self + family) Bonus: You can use your HSA money to help pay your deductible.
PCP care	10% after deductible
Specialist care	10% after deductible
Teladoc consult	10% after deductible (\$40 maximum)
Inpatient hospital charges	10% after deductible
Outpatient surgery	10% after deductible
Emergency room	10% after deductible
Urgent care center	10% after deductible
Lab, X-ray and diagnostic services	10% after deductible
Prescription drugs***	After deductible:
30-day supply at a retail pharmacy	\$10 for generics, \$35 for brand name, \$75 for nonformulary [†]
90-day supply through mail-order service	2 copays, not 3 (based on copay amount indicated above)
Built-in vision	
<i>Routine eye exam</i>	— You pay \$0 when you visit network doctors.
<i>Money toward prescription eyewear</i>	— You get \$100 that you can use toward the purchase of prescription glasses and contact lenses every 24 months.
<i>Discounts</i>	— You get discounts on eyeglasses, contacts, eye exams and more.
Built-in dental	
<i>Cleanings and X-rays</i>	— You pay \$0 when you visit network dentists.

*To open an HSA, you must meet certain Internal Revenue Service eligibility requirements. If you don't, let us know by calling **1-877-459-6604**. You can enroll in a similar plan called HDHP with HRA. See the federal brochure at aetnafeds.com to learn more.

**The costs for out-of-network care are higher. To pay the least out of pocket, use network doctors and hospitals.

***For specialty drug information, see the federal brochure at aetnafeds.com.

[†]Like other health plans, this plan uses a formulary, which is a list of generic and brand-name drugs your health plan prefers.

Bank more money in your HSA

You can earn up to \$75 for yourself or \$200 per family. And the money goes right into your HSA. It's extra money just for completing certain wellness activities.

Here's what you need to do



Step 1: Go to **aetnafeds.com**, select "Member Login/Register" and sign up. Already registered? Then log in with your user name and password.



Step 2: Complete the following activities on your member website:

- ✓ An online health assessment
- ✓ One online wellness program



Step 3: Get a biometric screening. This blood test, blood pressure check and waist measurement can help you see if you're at risk for certain medical conditions, like heart attack or stroke. Schedule your screening by calling **1-866-908-9440**.

2018 Aetna HDHP with HSA rates (what you pay every other week)

	Code	Non-postal	Postal 1	Postal 2
Self only	224	\$70.09	\$63.78	\$58.17
Self + one	226	\$151.57	\$137.93	\$125.81
Self + family	225	\$154.60	\$140.69	\$128.32



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Chat with us online, watch webinars, schedule a one-on-one appointment and more. Just visit **AetnaFedsLive.com**.

Aetna CDHP with a national PPO network

A national PPO network and a fund to help pay medical, dental or vision costs

How this plan works

1. You get a fund. The plan puts a set amount into dental and medical funds for you.

Here's what you get in each fund*:

	Medical	Dental
Self only:	\$1,000	\$300
Self + one:	\$2,000	\$600
Self + family:	\$2,000	\$600

The fund pays for health expenses — you pay nothing until the money in your fund is all used up.

Any unused amounts roll over from year to year, unless you switch health plans or leave your job.**

2. You can visit any doctor in the Aetna PPO network. No need to get a referral to see a specialist.
3. You can also use any doctor outside Aetna's network. But your out-of-pocket costs will be higher.

Dental, vision and pharmacy coverage are built in.

*If you join after Open Season, the amount of your fund will be prorated.

**The most you can roll over is \$5,000 (self only) or \$10,000 (self + one or self + family). You must remain in the plan the following year for these amounts to roll over to next year's fund.

***The costs for out-of-network care are higher. To pay the least out of pocket, use network doctors and hospitals.

† For specialty drug information, see the federal brochure at aetnafeds.com.

†† Like other health plans, this plan uses a formulary, which is a list of generic and brand-name drugs your health plan prefers.

2018 Aetna CDHP benefits (available nationwide)

Key benefits	What you pay in the network***
Preventive care Routine physical	\$0 \$0 (one per calendar year)
Deductible	\$1,000 (self)/\$2,000 (self + one or self + family) Note: You have a deductible to meet after you have used all the money in your medical fund.
Office visit, inpatient and outpatient care	15% after you use the money in your fund and meet your deductible
Teladoc consult	15% after you use the money in your fund and meet your deductible (\$40 maximum)
Prescription drugs†	After you use the money in your fund and meet your deductible:
30-day supply at a retail pharmacy	\$10 for generics, \$35 for brand name, \$75 for nonformulary††
90-day supply through mail-order service	2 copays, not 3 (based on copay amount indicated above)
Built-in vision	
<i>Routine eye exam</i> — You pay \$0 when you visit network doctors.	
<i>Prescription eyewear</i> — You can use your medical fund to pay for prescription glasses and contact lenses.	
<i>Discounts</i> — You get discounts on eyeglasses, contacts, eye exams and more.	
Built-in dental	
<i>Cleanings and X-rays</i> — You pay \$0 when you visit network dentists.	
<i>Added bonus</i> — You get a dental fund (\$300 — self only; \$600 — self + one or self + family) to help pay for other covered services in or out of the network.	

Increase the amount in the medical fund

You can earn up to \$100 for yourself or \$200 per family. And the money goes right into the medical fund. It's extra money just for completing certain wellness activities.

Here's what you need to do



Step 1: Go to aetnafeds.com and sign up. Already registered? Then log in with your secure user name and password.



Step 2: Complete the following activities on your member website:

- ✓ An online health assessment
- ✓ One online wellness program



Step 3: Get a biometric screening. This blood test, blood pressure check and waist measurement can help you see if you're at risk for certain medical conditions, like heart attack or stroke. Schedule your screening by calling **1-866-908-9440**.

2018 Aetna CDHP rates (what you pay every other week)

	Code	Non-postal	Postal 1	Postal 2
Self only	F51	\$142.73	\$136.36	\$130.00
Self + one	F53	\$348.75	\$335.11	\$321.47
Self + family	F52	\$326.57	\$312.08	\$297.59

It's easy to enroll



Step 1:

- Choose a plan



Step 2:

- Find your plan's enrollment code. They're listed in the rate charts in this brochure.



Step 3:

- Fill out the form.
- Get yours at aetnafeds.com/enroll.

Questions?

Just call us at **1-877-459-6604** or go to **aetnafeds.com**.



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It's easy to enroll



Step 1: Choose a plan

Review the brochure or visit **AetnaFedsLive.com** to find a plan.



Step 2: Find your plan's enrollment code

They're listed in the rate charts in this brochure. You can also find them at **aetnafeds.com**.



Step 3: Fill out the form

Check with your human resources department to see if you can enroll online, using an agency system like MyPay, Employee Express or PostalEASE. Or you may need to submit a paper 2809 form.

Need a form? Go to **aetnafeds.com/enroll**.

Health benefits and insurance plans are offered, underwritten and/or administered by Aetna Health Inc., Aetna Health of California Inc. and/or Aetna Life Insurance Company (Aetna).

This is a brief description of the features of these Aetna health benefits plans. Before making a decision, please read the plan's applicable federal brochure(s). All benefits are subject to the definitions, limitations and exclusions set forth in the federal brochure. Plan features and availability may vary by location and are subject to change. Pharmacy clinical programs such as precertification, step therapy and quantity limits may apply to your prescription drug coverage. 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. Discount offers may be available but are not guaranteed under our contract with the FEHB program. Incentive-based activity awards will only be given for completing select wellness programs as determined by the plan sponsor. There may be fees associated with a Health Savings Account ("HSA"). These are the same types of fees you may pay for checking account transactions. Please see the HSA fee schedule in your HSA enrollment materials for more information. This material is for informational purposes only and is not an offer of coverage. It does not contain legal or tax advice. You should contact your legal counsel if you have any questions or if you need additional information. Information is believed to be accurate as of the production date; however, it is subject to change. PayFlex cannot and shall not provide any payment or service in violation of any United States (U.S.) economic or trade sanctions. For more information about PayFlex, visit **payflex.com**. Teladoc is not available to all members and operates subject to state regulation. Teladoc and Teladoc physicians are independent contractors and are neither agents nor employees of Aetna or plans administered by Aetna. For complete description of the limitations of Teladoc services, visit **teladoc.com/aetna**. External website links are provided for your information and convenience only and does not imply or mean that Aetna endorses the content of such linked websites or third-party services. Aetna has no control over the content or materials contained therein. Aetna therefore makes no warranties or representations, express or implied, about such linked websites, the third parties they are owned and operated by, and the information and/or the suitability or quality of the products contained on them. Information is believed to be accurate as of the production date; however, it is subject to change. Alex® is a registered trademark of The Jellyvision Lab, Inc. Quest Diagnostics marks are the registered trademarks of Quest Diagnostics. Teladoc and the Teladoc logo are trademarks of Teladoc, Inc. and may not be used without written permission. For more information about Aetna plans, visit **aetnafeds.com**.

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