



# Aetna International Plan Overview for CNMI Government

February 2016



# Agenda

- **Open Enrollment**
- **The Health Care Landscape**
- **Benefits Overview**
- **Member Resources**
  - International Member Services
  - International Health Advisory Team
- **Medical Services & Payment Options**
  - Direct Settlement Facilities
  - Claims Filing
- **Web Tools**
  - Aetna Navigator
  - Aetna International Website
- **Contact Information**
- **Next Steps**
- **Questions**

# Open Enrollment

- Open enrollment runs 2/1/2016 – 2/29/2016
- Elections will be effective January 1, 2016
- This is your opportunity to change elections, including plan and who you cover.
- If you do not make changes now, you will be locked into current selected plan for the 2016 plan year.
- Mid-year changes can only be made when you have a qualifying event, like marriage and birth of a baby.

# 2016 Highlight

- In an effort to ensure our members have access to quality and affordable care, a new Third Plan Option will be available for services in Guam and CNMI.
- Contributions towards the premium will be outlined later in this presentation.
- Enrollment in either of the plan options will require an active enrollment – this includes if you are not enrolled today and wish to be enrolled or if you are enrolled today and wish to change plan designs.

# Benefit Highlights

- **New PPO Basic Option**

- Similar coverage as the existing PPO Low Option, except higher deductible and Individual/Family Payment Limits.
- Overseas care is covered.

- **PPO Low Option**

- The PPO Low Option requires that all U.S. non-emergency care be received in the PPO network within the CNMI and Guam.
- No referrals are required to see specialists.
- Overseas care is covered.

- **PPO High Option**

- The PPO High Option allows you to seek care from any provider, but offers significant savings if you choose an Aetna PPO network provider.
- Access Aetna's Network in the continental United States, Hawaii, the CNMI and Guam. Out of Network Coverage within the United States is included.
- This plan also does not require referrals to see specialists.
- Overseas care is covered.
- If members would like to elect this plan, they will need to actively enroll.

# Benefits Overview

	*New PPO BASIC OPTION		
	INTERNATIONAL (OUTSIDE U.S.)	IN NETWORK (CNMI & GUAM Only)	U.S. OUT OF NETWORK (CONUS & HAWAII)
<b>Plan Features</b>			
Individual Deductible	\$1,500	\$1,500	Not covered
Family Deductible	\$4,500	\$4,500	Not covered
Individual Payment Limit	\$6,500	\$6,500	Not covered
Family Payment Limit	\$13,000	\$13,000	Not covered
Lifetime Maximum	Unlimited		
<b>Benefits</b>			
Preventive Care	100%	100%	Not covered
Physician Office Visits	80% after deductible	80% after deductible	Not covered
Allergy Testing and Treatment	80% after deductible	80% after deductible	Not covered
Allergy Injections	80% after deductible	80% after deductible	Not covered
Diagnostic Outpatient X-ray	80% after deductible	80% after deductible	Not covered
Diagnostic Outpatient Lab	80% after deductible	80% after deductible	Not covered
Hospital Inpatient	80% after deductible	80% after deductible	Not covered
Hospital Outpatient	80% after deductible	80% after deductible	Not covered
Emergency Room	80% after deductible	80% after deductible	80% after deductible
Urgent Care	80% after deductible	80% after deductible	Not covered
Inpatient	80% after deductible	80% after deductible	Not covered
Outpatient	80% after deductible	80% after deductible	Not covered
<b>Prescription Drug Coverage</b>			
Generic Drugs	80% after deductible	80% after deductible	Not covered
Formulary Brand Drugs	80% after deductible	80% after deductible	Not covered
Non-Formulary Brand Drugs	80% after deductible	50% after deductible	Not covered

# Benefits Overview

	PPO LOW OPTION		
	INTERNATIONAL (OUTSIDE U.S.)	IN NETWORK (CNMI & GUAM Only)	U.S. OUT OF NETWORK (CONUS & HAWAII)
<b>Plan Features</b>			
Individual Deductible	\$500	\$500	Not covered
Family Deductible	\$1,500	\$1,500	Not covered
Individual Payment Limit	\$5,000	\$5,000	Not covered
Family Payment Limit	\$10,000	\$10,000	Not covered
Lifetime Maximum	Unlimited		
<b>Benefits</b>			
Preventive Care	100%	100%	Not covered
Physician Office Visits	80% after deductible	80% after deductible	Not covered
Allergy Testing and Treatment	80% after deductible	80% after deductible	Not covered
Allergy Injections	80% after deductible	80% after deductible	Not covered
Diagnostic Outpatient X-ray	80% after deductible	80% after deductible	Not covered
Diagnostic Outpatient Lab	80% after deductible	80% after deductible	Not covered
Hospital Inpatient	80% after deductible	80% after deductible	Not covered
Hospital Outpatient	80% after deductible	80% after deductible	Not covered
Emergency Room	80% after deductible	80% after deductible	80% after deductible
Urgent Care	80% after deductible	80% after deductible	Not covered
Inpatient	80% after deductible	80% after deductible	Not covered
Outpatient	80% after deductible	80% after deductible	Not covered
<b>Prescription Drug Coverage</b>			
Generic Drugs	80% after deductible	80% after deductible	Not Covered
Formulary Brand Drugs	80% after deductible	80% after deductible	Not Covered
Non-Formulary Brand Drugs	80% after deductible	50% after deductible	Not Covered

# Benefits Overview

	PPO HIGH OPTION		
	INTERNATIONAL (OUTSIDE U.S.)	IN NETWORK (CNMI, GUAM, HAWAII & CONUS)	U.S. OUT OF NETWORK (HAWAII & CONUS)
<b>Plan Features</b>			
Individual Deductible	\$500	\$500	\$1,500
Family Deductible	\$1,500	\$1,500	\$4,500
Individual Payment Limit	\$6,350	\$6,350	\$10,000
Family Payment Limit	\$12,700	\$12,700	\$20,000
Lifetime Maximum	Unlimited		
<b>Benefits</b>			
Preventive Care	100%	100%	Not covered
Physician Office Visits	80% after deductible	80% after deductible	50% after deductible
Allergy Testing and Treatment	80% after deductible	80% after deductible	50% after deductible
Allergy Injections	80% after deductible	80% after deductible	50% after deductible
Diagnostic Outpatient X-ray	80% after deductible	80% after deductible	50% after deductible
Diagnostic Outpatient Lab	80% after deductible	80% after deductible	50% after deductible
Hospital Inpatient	80% after deductible	80% after deductible	50% after deductible
Hospital Outpatient	80% after deductible	80% after deductible	50% after deductible
Emergency Room	80% after deductible	80% after deductible	80% after deductible
Urgent Care	80% after deductible	80% after deductible	50% after deductible
Inpatient	80% after deductible	80% after deductible	50% after deductible
Outpatient	80% after deductible	80% after deductible	50% after deductible
<b>Prescription Drug Coverage</b>			
Generic Drugs	80% after deductible	80% after deductible	50% after deductible
Formulary Brand Drugs	80% after deductible	80% after deductible	50% after deductible
Non-Formulary Brand Drugs	80% after deductible	50% after deductible	50% after deductible

# Claim Examples

IN NETWORK (CNMI & GUAM ONLY)				
Treatment		High	Low	Basic
Preventative Care	<b>Billed: \$150</b> Patient Balance	100% \$0	100% \$0	100% \$0
Hospital Outpatient	<b>Billed: \$2,000</b> Individual Deductible Amount Remaining % covered by Plan Patient Balance	80% after deductible \$500 \$1,500 80% of \$1,500 = \$1,200 20% of \$1,500 = \$300	80% after deductible \$500 \$1,500 80% of \$1,500 = \$1,200 20% of \$1,500 = \$300	80% after deductible \$1,500 \$500 80% of \$500 = \$400 20% of \$500 = \$100
Urgent Care	<b>Billed: \$1,000</b> Individual Deductible Amount Remaining % covered by Plan Patient Balance	80% after deductible \$0 Remaining \$1,000 80% of \$1,000 = \$800 20% of \$1,000 = \$200	80% after deductible \$0 Remaining \$1,000 80% of \$1,000 = \$800 20% of \$1,000 = \$200	80% after deductible \$0 Remaining \$1,000 80% of \$1,000 = \$800 20% of \$1,000 = \$200
<b>Member Payment Responsibility, YTD</b>				
	Deductible	\$500	\$500	\$1,500
	Coinsurance	\$500	\$500	\$300
	<b>Total</b>	<b>\$1,000</b>	<b>\$1,000</b>	<b>\$1,800</b>

This example is for illustration purposes only. Please refer to the Certificate of Coverage for specific plan coverages.

# Rates, per pay period

## Active Employees (26 pay periods)

	High Plan Option	Low Plan Option	Basic Plan Option
Single	\$86.64	\$27.67	\$2.39
Couple	\$177.63	\$56.66	\$4.84
Family	\$277.23	\$88.52	\$7.63

## Retired Employees (24 pay periods)

	High Plan Option	Low Plan Option	Basic Plan Option
Single	\$93.86	\$29.98	\$2.59
Couple	\$192.43	\$61.39	\$5.24
Family	\$300.34	\$95.90	\$8.27

*\*Retirees' premium appear higher than active employees' premium due to fewer pay periods (24 pay periods for retirees vs. 26 pay periods for active employees)*

# Member Resources

- **International Member Services**
- **International Health Advisory Team**

# International Member Service Center

## +1-800-231-7729 (toll-free)

*The Aetna International Member Service Center is available to assist you 24x7. You can get answers to benefits questions, assistance with claims and access to the International Health Advisory Team (IHAT) – a team of registered nurses who can provide one-on-one support.*

- **Member service center offers:**

- Multicultural, multilingual support. Our service center staff is able to assist you in more than 30 different languages – with access to specialists for other language needs.
- Global claim processing. You can contact the service center for help processing claims in almost any language and more than 100 currencies.
- If you are not yet enrolled under the Aetna International plan but have 'general' questions, you may contact Aetna International member services but make sure you identify yourself as being covered under the GHLITF Aetna International Plan
- One-on-one healthcare support. You can call the service center and ask to speak with an IHAT nurse to get help with things like pre-trip planning, coordination of routine and urgent care, help locating providers and specialists, benefit coordination and more.

# International Health Advisory Team

*The International Health Advisory Team (IHAT) is a team of local Registered Nurses that provide assistance with:*

- **Pre-trip planning**
- **Worldwide coordination of routine and urgent medical care**
- **Obtaining prescription medications**
- **Obtaining medical services**
- **Coordinating second opinions for complex cases**
- **Locating providers and specialists**
- **Discharge planning**
- **Benefit coordinating**
- **Coordination of care for return to home country after assignment completion**
- **Clinical Claim review and International Standards of Care Reviews**
- **Disease and Maternity Management**

# Member Resources

- **Guam & CNMI PPO Network**
- **Direct Settlement Facilities**
- **Claims Filing**

# Guam/CNMI PPO Network

## *Finding an Aetna PPO Provider:*

Visit [www.aetnainternational.com](http://www.aetnainternational.com) and follow the instructions to register. Then, you will make the following selections:

- 1. Select: Member
- 2. Select: Member on U.S.-based plans
- 3. Enter your user name and password
- 4. Select: Find Health Care
- 5. Select: International Direct Settlement providers
- 6. Select Northern Mariana Islands\*

\*Claims incurred on Guam or Saipan will be processed under the preferred (and non-preferred, if on the High Option PPO) benefit level(s).

# Direct Settlement Facilities

*You can access our direct-settlement network for easier admissions and payment. This network includes leading hospitals and clinics throughout the world. And it helps reduce your out-of-pocket costs at the point of service.*

## Here are just a few of the advantages:

- Easier claim submissions
- Additional reimbursement and prepayment choices
- Lower out-of-pocket costs at the point of service
- Verification of Benefits (VOB) letters sent directly to the treatment facility

## •How to find a direct-settlement facility:

- Search our list of providers online by logging into your secure member website from [www.aetnainternational.com](http://www.aetnainternational.com)
- Download our 'Provider Directory' app for your smartphone
- Call our Member Service Center for help

## •Direct-settlement process:

- Select the provider
- Request direct settlement via "Find health care" on [www.aetnainternational.com](http://www.aetnainternational.com) or contact Aetna Member Services.
- If provider is not on Aetna International website, you can request one-time direct settlement

# Philippines Network – Now Maxicare

## *Finding an Aetna PPO Provider:*

- Maxicare has about 1,100 accredited hospitals and 11,000 accredited physicians in the Philippines
- There are 7 Primary Care Centers and 3 Help Desks in the major hospitals in Metro Manila
- Contact Maxicare for a Letter of Authorization (LOA) before visiting a provider. This will reduce a members wait time.
  - » By email: [aetnasupport@maxicare.com.ph](mailto:aetnasupport@maxicare.com.ph)
- To Find a Maxicare provider, visit their website:  
<https://www2.maxicare.com.ph/Pages/AccreditedProviders.aspx>

# Claim Reimbursement

- Reimbursement Procedures:
  - Complete the claim form and attach all supporting documentation and receipts.
  - Submit completed claim form and documentation via: fax, mail, email, or online through the Aetna International website [www.aetnainternational.com](http://www.aetnainternational.com)
  - Check status of claims through Aetna Navigator [www.aetna.com](http://www.aetna.com)
  - Complete the Recurring Reimbursement Election (RRE) form to select your method of reimbursement and currency. Note: If you do not complete the RRE form you will always need to complete “Summary of Reimbursement” and “Bank information” section(s) on the claim form in section 5 and 6.
- Explanations of Benefits (EOBs) will be available on Aetna Navigator within 24 hours of completion of adjudication
- Claim reimbursements can be made via check, electronic funds transfer (EFT) or wire in over 100 currencies. Reimbursement can be made in a different currency than that used to pay for services.
- Claims are calculated using the exchange rate on the date of service.

# Web Tools

- **Aetna Navigator**
- **Aetna International Website**
- **Virtual Member Meetings**

# Technology that's not just extremely advanced, it's extremely useful

Aetna believes in the power of technology to enhance health, to make it easier to manage health, and to help lower costs. To these ends, we provide numerous online and mobile tools.



# Aetna Navigator®

[www.AetnaInternational.com](http://www.AetnaInternational.com)

Aetna Navigator® is a secure, online resource that gives you access to personalized benefits and health information. With Aetna Navigator, you can:

- View & Print temporary ID cards
- Order replacement ID cards
- Review claim status; download claim history
- View detailed claim status and Electronic Explanation of Benefits (EOB) statement

The screenshot displays the Aetna Navigator website interface. At the top, the Aetna logo is on the left, and navigation links (Logout, Your Profile, Site Map, Help & Resources, Contact Us, En español) are on the right. A search bar with the text 'Type your question here' and an 'ASK ANN' button is positioned below the navigation. A dark navigation bar contains links for Home, Coverage & Benefits, Claims, Care & Treatment, Health Records, Health Programs, and Aetna Pharmacy. Below this, a message states 'You are logged in as SUBSCRIBER'. The main content area is divided into several sections:

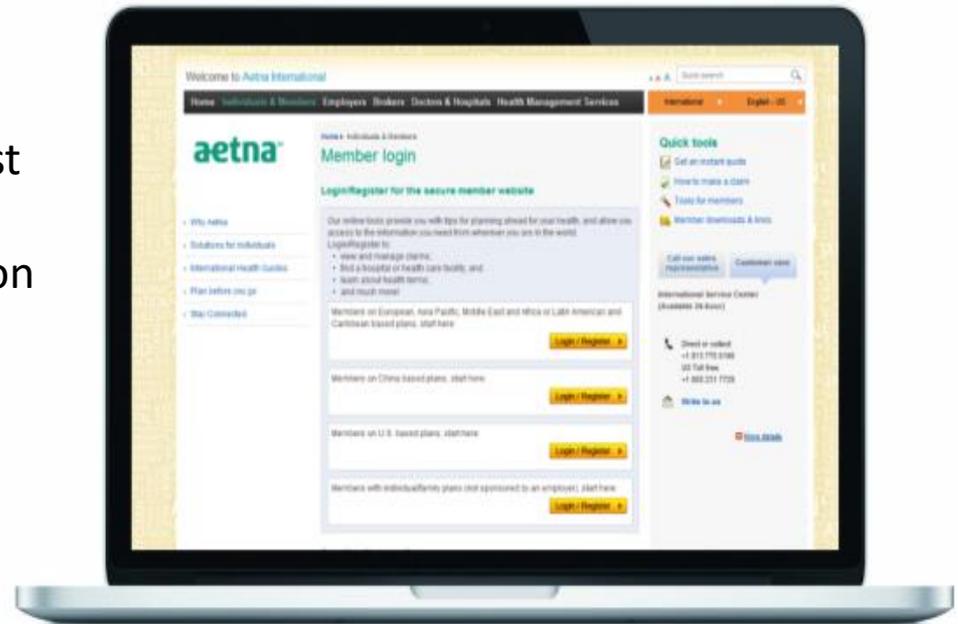
- I want to...**: A vertical menu with options like 'View Aetna International', 'Ask Ann to help me compare costs', 'Find a Doctor, Pharmacy or Facility', 'View Deductibles & Plan Limits', 'Get an ID Card', 'Take a Health Assessment', 'Order Medications', 'Check my Pharmacy Order Status', 'Estimate Drug Costs', 'Find a Form', and 'More...'. Below this is a 'We are here to help' section featuring the 'Ask Ann' virtual assistant.
- Welcome to your secure Aetna Navigator® website.**: A message with a link to 'You have no messages.' and a 'Check your deductible and plan limits' section. This section includes a text prompt: 'Have you met your deductible? What's your coinsurance limit? You can find out any time. Click on [Coverage & Benefits](#) to see deductible balances, coinsurance balances, remaining visits and more.' Below the text are five numbered tabs (1-5) and a 'Cost of Care' section.
- Cost of Care**: A section titled 'Stay in the Network and Save' for 'Cardiac Catheterization National Average'. It shows two columns: 'In network: \$7,916' and 'Out of network: \$20,812'. Below this is a text prompt: 'Find out what YOU will pay for common services based on YOUR medical plan.' and a link to 'Use Member Payment Estimator'.
- Your Claims**: A section with a 'Member Name' dropdown (set to 'All Members'), a 'Type of Claim' dropdown (set to 'Medical'), and a 'Dates' dropdown (set to 'Last 365 Days'). A 'VIEW CLAIMS' button is at the bottom, along with a link to 'View your Explanation of Benefits'.
- Discover CarePass Apps**: A section with three app icons and a text prompt: 'Use iTriage to find a doctor, make an appointment, understand symptoms, read the latest health news.' and a 'GET STARTED WITH CAREPASS' button.

# Aetna International Member Website

[www.AetnaInternational.com](http://www.AetnaInternational.com)

The secure Aetna International website gives employees access to a wide array of valuable tools and resources:

- On-line Claim submission
- Location based geographic content
- International physician and hospital search engine
- Health and security information for most countries
- Medical terminology and drug translation tools
- Online forms; including claim forms in a variety of languages
- Virtual Benefit Assistant
- Online Wellness Center
- Answers to frequently asked questions
- Aetna contact phone numbers and email address
- Access to Aetna Navigator

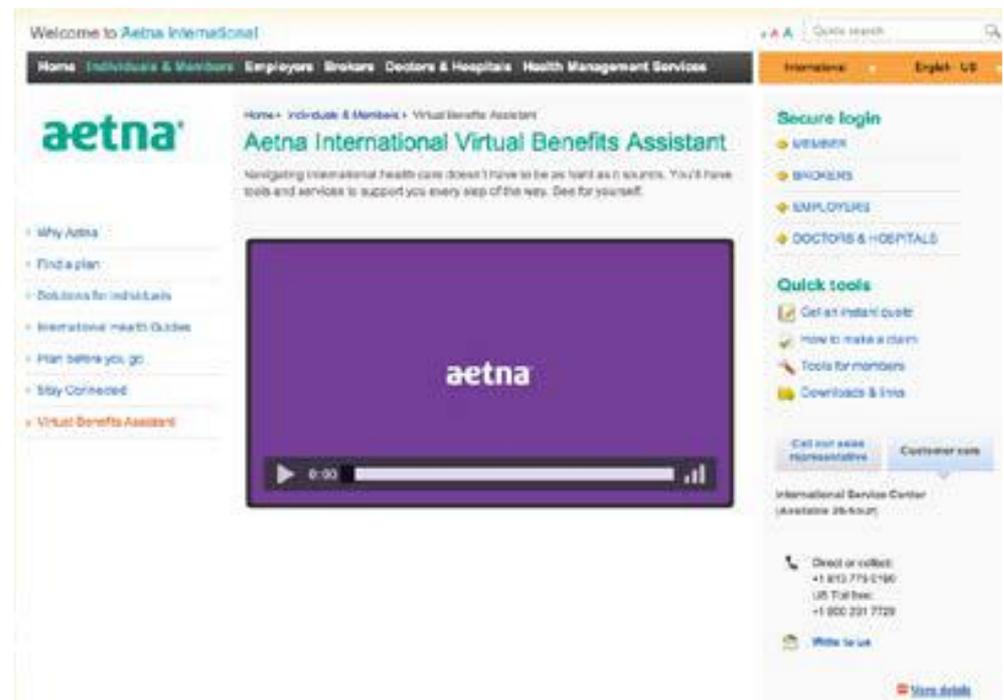


# Online Tools – Virtual Benefit Assistant

The Virtual Benefit Assistant takes you on a personal tour of your international benefits plan — online!

Here are just a few things Nick can help you with:

- Submit and/or view claims
- Find a health care provider
- Help with pre-trip planning
- And more ...



# Contact Aetna International!

International Member Service Center  
Accessible 24 hours a day, 365 days a year.

## **Inquiries**

(Customer Service Center, International Health Advisory Team, and more...)

Telephone:

+1-800-231-7729 (toll-free)

+1-813-775-0190 (collect)

**Email:**

[aiservice@aetna.com](mailto:aiservice@aetna.com)

## **Website Addresses**

[www.AetnaInternational.com](http://www.AetnaInternational.com)

[www.Aetna.com](http://www.Aetna.com)

## **Claim Submissions**

**Fax:**

+1-800-475-8751 (toll-free)

+1-859-425-3363 (outside of U.S.)

**Email:**

[aiservice@aetna.com](mailto:aiservice@aetna.com)

**Mail:**

Aetna International/Aetna

P.O. Box 981543

El Paso, TX 79998-1543 USA

# Next Steps

- If you are currently covered by Aetna International and do not wish to make any changes you do not need to re-enroll.
- Enrollment elections must be made by March 1.
- Enrollment elections, changes and terminations are made using the GGHI Enrollment/Waiver/Change forms, which are available at Pacifica Insurance Underwriters.
- Members should drop off their election forms to Pacifica Insurance Underwriters by March 1.

# Next Steps - Retirees

- Employees planning to retire under the defined benefit plan in the next twelve months should enroll during this open enrollment period if they want the option to continue their health insurance coverage into retirement.
- Employees not enrolled in the health insurance plan on the date of their retirement will not be allowed to enroll after retirement.
- Due to CNMI law, retirees who opt out of the plan are permanently locked out of the plan offerings.

**Questions?**