



# Learn more

Your Aetna® retiree health insurance just for Southern Methodist University retirees

Emeriti and Aetna have teamed up to provide retiree health insurance options just for Emeriti retirees. These plans include the Aetna Traditional Choice, Medicare Advantage, Medicare Part D prescription drug coverage and dental plans available to you.

Medicare Advantage plans are private medical plans that offer the same benefits as Original Medicare and programs that Original Medicare doesn't cover. In fact, you must have Original Medicare to be enrolled in a Medicare Advantage plan.

We've created this guide to help you understand benefit options. With over 35 years of Medicare experience, you'll see why more than 2.9 million retirees trust us to provide quality benefit coverage.\* Rest assured, you can too.

## Open Enrollment is just around the corner: October 15 to December 7, 2022

**If you're satisfied with your current Aetna coverage, you don't have to do anything.** You'll be automatically enrolled in the same plans for 2023. If you'd like to opt out of your current coverage or switch plans, follow one of the two steps below by December 7, 2022.



1. Visit **MyEmeritiBenefits.org** to enroll online.

Or



2. Enroll by phone by calling the Emeriti Service Center at **1-866-EMERITI (1-866-363-7484)**, Monday to Friday, 8:00 AM to 5:30 PM ET.

Be sure to have the following information available:

- Your Social Security number
- Social Security number for your spouse or domestic partner, if applicable
- Medicare number and effective dates of coverage (on Medicare card)

\*Monthly report by Country Contract, CMS, May 2022.

**EmeritiHealth.org/public/smu**

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### Key information to note:

- If you select a medical plan, you must also select a prescription drug plan. You cannot select a medical plan only. However, you may select only the Rx Standard Plan as a standalone option and add medical coverage at a later date.
- If you are continuing enrollment in the Aetna retiree health insurance, do not sign up for another Medicare Part D drug plan offered by another source. If you sign up for another Part D plan outside of the Emeriti Plan, your Aetna retiree medical, prescription drug, and dental coverage will all be cancelled.

# How the Aetna Medicare Advantage PPO plan offers value

The Aetna Medicare Advantage PPO plan offers the same benefits as Original Medicare, plus access to other health and wellness programs.



**Enjoy comprehensive coverage:** Continue to get the medical and prescription drug benefits you have today at similar costs. You'll also enjoy a low out-of-pocket maximum and no deductible for prescription drug coverage, plus access to additional benefits at no extra cost.



**Keep your doctors:** You have the freedom to see any licensed provider, as long as they are eligible to receive Medicare payment and accept your plan. So you can continue to see your favorite doctors and hospitals.



**One-on-one support:** Have questions about your benefits, network or enrollment? The Aetna Member Services team is here to support you every step of the way. Just call us at the number on your member ID card.



**Stay healthy:** The Aetna Care Management team gives you the tools and support you need to take charge of your health. Our program includes wellness and preventive support, plus case management and disease management.



**Self-service technology:** You've got healthy handled with the Aetna member website and mobile app. With features that get you where you need to go, you can find care, review coverage and costs, manage claims, and stay healthy.

Visit **[AetnaRetireePlans.com](https://www.aetna.com/retireeplans)** to explore these features or register for an online account.



# Keep your doctors

The Aetna Medicare Advantage preferred provider organization (PPO) plans give you the freedom to see any licensed provider or hospital as long as they are eligible to receive Medicare payment and accept your plan.

Though you can see any provider or hospital, we have a broad network that already accepts the plan and receives Medicare payment.

With over **1,000,000** network providers and over **4,000** network hospitals you can continue to see your doctors you know and trust.\*

Generally, you will pay less when using providers in the Aetna® network. Keep in mind, you may pay more for out-of network services.

If you need help finding out if your doctor accepts the plan, just call us at **1-855-212-5666 (TTY:711)**, Monday to Friday, 8 AM to 8 PM ET. We'll contact your doctor and confirm for you. Or we can help you find other nearby doctors or hospitals to meet your needs.

\*Aetna Medicare Advantage PPO network as of April 2022.

## Your 2023 Aetna retiree health plan options



**One Traditional Choice Plan**



**Three Medicare Advantage PPO plans**



**Three Medicare Part D prescription drug plans**



**One optional dental plan**

Enjoy the comprehensive coverage you get today, plus benefits and cost savings. The charts below compare your options and show what you can expect to pay with each plan. Premium rates are based on your zip code and can be calculated online at [EmeritiHealth.org/public/smu](https://www.EmeritiHealth.org/public/smu).

Aetna Traditional Choice plan option	What you pay:
Deductible	\$200
Out-of-pocket maximum	\$1,250
Member coinsurance	20%
Lifetime maximum	Unlimited except where otherwise indicated.
Referral requirement	None
Annual wellness visit	0% (only covers immunizations and routine lab and X-ray charges associated with routine exam)
Primary care office visit	20%
Inpatient hospital	20%
Outpatient hospital	20%
Emergency care	20%
Urgent care	20%
Telehealth	20%
Hearing and vision exams	0%
Hearing aids	0%; maximum 1 hearing aid per ear every 3 years.



Aetna Medicare Advantage plan options	Medicare Advantage PPO Premium Plan	Medicare Advantage PPO Plus Plan	Medicare Advantage PPO Standard Plan
Deductible	\$0	\$0	\$0
Out-of-pocket maximum	\$2,000	\$2,750 (in network) \$5,500 (out of network)	\$7,550 (in network) \$11,300 (out of network)
Preventive care	\$0	\$0 (in network) 25% (out of network)	\$0 (in network) 30% (out of network)
Primary care office visit	\$15	15% (in network) 25% (out of network)	\$15 (in network) 30% (out of network)
Specialty care office visit	\$15	15% (in network) 25% (out of network)	\$40 (in network) 30% (out of network)
Inpatient hospital	\$0 per stay	\$500 per stay (in network) 25% per stay (out of network)	\$200 per day, days 1-7 (in network) 30% per stay (out of network)
Outpatient surgery	\$0	15% (in network) 25% (out of network)	\$185 (in network) 30% (out of network)
Emergency care	\$50	\$50	\$75
Urgent care	\$15	\$35	\$50
Hearing and vision exams	\$0	0% (in network) 25% (out of network)	\$0 (in network) 30% (out of network)



<b>Aetna Medicare Part D prescription drug plan options offered by SilverScript</b>	<b>Rx Premium Plan</b>	<b>Rx Plus Plan</b>	<b>Rx Standard Plan</b>
Annual deductible	\$100	\$200	\$505
Pharmacy network*	P1	P1	P1
Formulary (drug list)	Comprehensive+	Comprehensive+	Classic
<b>Initial Coverage Limit: \$4,660. (Applies to retail, up to a 30- and 90-day supply, and mail-order supply)</b>			
<b>30-day supply through retail</b>			
Tier 1 – Generic	10% preferred pharmacy 15% standard pharmacy	10% preferred pharmacy 15% standard pharmacy	10% preferred pharmacy 15% standard pharmacy
Tier 2 – Preferred Brand	25%	25%	25%
Tier 3 – Non-preferred Brand	40%	50%	25%
<b>Coverage Gap Phase begins after you reach Initial Coverage Limit of \$4,660 and until you reach \$7,400 in prescription drug expenses. Applies to retail, up to a 30- and 90-day supply, and mail-order supply.</b>			
<b>30-day supply through retail</b>			
Tier 1 – Generic	10% preferred pharmacy 15% standard pharmacy	10% preferred pharmacy 15% standard pharmacy	25%
Tier 2 – Preferred Brand	25%	25%	25%
Tier 3 – Non-preferred Brand	25%	25%	25%
<b>Catastrophic Coverage Phase</b>			
<b>Catastrophic Coverage benefits start once \$7,400 in true out-of-pocket costs are incurred.</b>	You pay \$0	Greater of 5% of the cost of the drug or \$4.15 for a generic drug, or a drug that is treated like a generic, and \$10.35 for all other drugs.	Greater of 5% of the cost of the drug or \$4.15 for a generic drug, or a drug that is treated like a generic, and \$10.35 for all other drugs.

\*Visit **AetnaRetireePlans.com** to find a network pharmacy.

<b>Aetna Dental plan option</b>	<b>What you pay:</b>
Deductible (basic and major services)	You pay \$100
Preventive services	100% covered
Basic services coverage (fillings, standard crowns, extractions)	You pay 50%
Major services coverage (root canal therapy, surgical removals, dentures)	You pay 50%
Annual benefit maximum	\$2,000



## Programs available to you

Take advantage of the programs that address the whole you — physical, emotional and social. These benefits come with your Aetna Medicare Advantage plan options, at no extra cost to you.



### **MDLIVE®**

Get fast, affordable and convenient access to virtual behavioral health services. You can confidentially meet with an MDLIVE licensed therapist or board-certified psychiatrist by phone or video appointment. You'll have no limits on the number of visits and **\$0 copay**. Appointments are available 24/7.



### **SilverSneakers® fitness program:**

Join any of several thousand participating locations nationwide and/or get a home fitness kit.



### **Resources For Living® program:**

Get referrals to services in your area that offer help such as house cleaning and lawn care, transportation, social and recreational activities, and caregiver support. You just pay for the cost of the services you use.



### **Nurse support:**

Talk to our registered nurses, day or night. Based on your symptoms, they can help you decide if you need a doctor or urgent care visit.



### **Healthy Home Visit:**

If you choose to participate, a licensed doctor or nurse will come to your home to review your health needs, do a home safety assessment, review your medications and ask about your medical and family history.



### **Teladoc®:**

Connect with a Teladoc physician by web, phone or mobile app from home, for nonemergency medical needs.



### **Telehealth services:**

Can't make it to the doctor's office? You can get care from any network provider that offers telehealth services. You'll pay the same amount as an in-person visit. Contact your doctor or walk-in clinic to find out details.



### **Hearing aids and hearing services:**

Aetna® offers a wide range of hearing discounts through Hearing Care Solutions and Amplifon Hearing Health Care so you can hear your world better. This includes discounts on:

- Hearing exams and hearing aids
- Batteries and repairs
- Routine cleanings and other hearing aid services

For more information on Hearing Care Solutions, just call **1-866-344-7756** or visit **HearingCareSolutions.com**. And for more information on Amplifon Hearing Health Care, just call **1-888-784-6050** or visit **AmplifonUsa.com**.

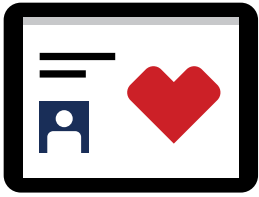


## We're here for you

Aetna is committed to providing Emeriti retirees with support and resources during COVID-19. The health and well-being of our members is our top priority. So, we're offering additional support to help you stay protected.

Just call us at **1-855-212-5666 (TTY:711)**, Monday to Friday, 8 AM to 8 PM ET. Or visit **AetnaRetireePlans.com**





## Stay connected with your member website

Get started by visiting **AetnaRetireePlans.com** and click on the “Login/Register” button. First-time users will need to create a user name and password. Be sure to have your Aetna® member ID card or Social Security number on hand.

Once you’re registered, you’ll be able to:

- Find a doctor or hospital
- Check your benefits
- Manage your claims
- Learn about wellness and discount programs
- Reduce paper by choosing electronic delivery of certain plan documents
- Lookup prescription drug information

After registering, be sure to agree to get electronic communications from Aetna. You’ll get Explanation of Benefits statements, account updates and other paper communications sent straight to your email.

### What happens next

#### Documents to look for after you enroll



1. **Plan confirmation letter** — This letter includes information to help ensure you understand your plan’s features. We’ll send it to you once the Centers for Medicare & Medicaid Services approves your enrollment.



2. **ID cards** — When you enroll in a new plan, you will receive a medical ID card, and/or a prescription drug ID card. These cards should be used each time you visit the doctor, hospital or pharmacy. You can tuck away your red, white, and blue Medicare ID card. If you elect dental coverage, you’ll also get a dental ID card.



3. **Evidence of Coverage** — This is a complete description of coverage under your Medicare plan and your member rights. It’s an important document — keep it in a safe place with your other plan information.





## Important phone numbers and resources

### Aetna® Member Services

**1-855-212-5666 (TTY:711)**

Monday to Friday

8 AM to 8 PM ET

**AetnaRetireePlans.com**

One-on-one support to help you with:

- Aetna medical, prescription drug, and dental coverage details
- Questions about your doctors and verifying that they accept your new plan

### Emeriti Service Center

**1-866-EMERITI (1-866-363-7484)**

Monday to Friday

8:00 AM to 5:30 PM ET

**EmeritiHealth.org/public/smu**

Emeriti can help you with:

- General enrollment and eligibility questions
- Enrolling in the plan
- Updating your personal information

Aetna Medicare is a HMO, PPO plan with a Medicare contract. Enrollment in our plans depends on contract renewal. See Evidence of Coverage for a complete description of plan benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by service area. SilverSneakers is a registered trademark of Tivity Health, Inc. © 2021 Tivity Health, Inc. All rights reserved. Resources For Living is the brand name used for products and services offered through the Aetna group of subsidiary companies. Aetna Medicare's pharmacy network includes limited lower cost, preferred pharmacies in: applicable areas. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including whether there are any lower-cost preferred pharmacies in your area, members please call the number on your ID card, non-members please call **1-855-338-7027 (TTY: 711)** or consult the online pharmacy directory at <http://www.aetnamedicare.com/pharmacyhelp>. Members who get "Extra Help" are not required to fill prescriptions at preferred network pharmacies in order to get Low Income Subsidy (LIS) copays. For mail-order, you can get prescription drugs shipped to your home through the network mail-order delivery program. Typically, mail-order drugs arrive within 7-10 days. You can call **1-855-212-5666 (TTY:711)** if you do not receive your mail-order drugs within this timeframe. Members may have the option to sign-up for automated mail-order delivery. The formulary, provider and/or pharmacy network may change at any time. You will receive notice when necessary.

Visit [Aetna.com/individuals-families/member-rights-resources/rights/disclosure-information.html](https://www.aetna.com/individuals-families/member-rights-resources/rights/disclosure-information.html) to view or print your medical, dental or vision plan disclosures. Here, you can also find state requirements and information on the Women's Health and Cancer Rights Act.