



No limits

Open Choice® preferred provider organization (PPO) plan*

*Known as Open Choice PPO plan in CA.

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

Manage your benefits, connect to care, handle claims — from anywhere

The Aetna HealthSM app and your Aetna[®] member website are personalized, seamless and easy to use. Once you're a member, here's how you can connect:



Get the Aetna Health app by texting “GETAPP” to **90156** for a link to download the app and create an account. Message and data rates may apply.*



Go to **Aetna.com** to create an account and log in to your member website.

More ways to connect



Use our provider search tool

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. Visit **Aetna.com** to try it out.



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.

*Terms and conditions: [Bit.ly/2nIJFYG](https://bit.ly/2nIJFYG). Privacy policy: Aetna.com/legal-notices/privacy.html. By texting **90156**, you consent to receive a one-time marketing automated text message from Aetna with a link to download the Aetna Health app. Consent is not required to download the app. You can also download it from the App Store[®] or the Google Play[™] store.

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.	When you visit the doctor, you may have to: • Get approval from us before receiving certain 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 option may cost you more.

**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.

**We place you and your family first.
Get a plan with freedom of choice.**

Enroll in the Open Choice PPO plan today.

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Visit **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.

Policy forms issued in Idaho include: GR-29/GR-29N, AL SG HGrpPol 05.

Policy forms issued in Oklahoma include: AL COC 00010.

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

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