



Coverage you can count on

Your Aetna® retiree health insurance available through your Emeriti Retirement Healthcare Savings Plan

Emeriti and Aetna have teamed up to provide retiree health insurance options just for eligible dependents under the age of 65. The national plans provide a range of benefit coverage and will follow you wherever you live in the United States.

You have our commitment to provide you with coverage that supports your health needs. More than **4.2 million** retirees chose Aetna for their health care. Now we're here for you, too.

How to enroll



1. Visit **MyEmeritiHealth.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 AM to 8 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



Emeriti.AetnaMedicare.com

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Plan at a glance

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 [MyEmeritiHealth.org](https://www.MyEmeritiHealth.org).

Your 2025 Aetna retiree health plan options:

Aetna plan options	Aetna High Plan	Aetna Middle Plan	Aetna Low Plan
Deductible	\$750 in network \$1,500 out of network	\$1,250 in network \$2,500 out of network	\$2,500 in network \$5,000 out of network
Coinsurance	10% in network 30% out of network	20% in network 40% out of network	20% in network 40% out of network
Annual maximum out-of-pocket limit	\$2,500 in network \$7,500 out of network	\$5,000 in network \$10,000 out of network	\$7,500 in network \$12,500 out of network
Primary care physician visits (deductible waived in-network)	10% coinsurance in network 30% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network
Physician specialist visits (deductible waived in-network)	10% coinsurance in network 30% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network
Inpatient hospital	10% coinsurance in network 30% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network
Outpatient surgery	10% coinsurance in network 30% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network
Emergency care	0% coinsurance after \$100 ER copay, no plan deductible— in- and out of network	0% coinsurance after \$100 ER copay, no plan deductible— in- and out of network	0% coinsurance after \$100 ER copay, no plan deductible— in- and out of network
Ambulance	100% coinsurance after deductible 30% coinsurance out of network	100% coinsurance after deductible 40% coinsurance out of network	100% coinsurance after deductible 40% coinsurance out of network
Urgent care provider (deductible waived in-network)	10% coinsurance (deductible waived) in network 30% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network
X-ray, laboratory services and complex imaging	10% coinsurance in network 30% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network

Plan at a glance cont.

Aetna plan options	Aetna High Plan	Aetna Middle Plan	Aetna Low Plan
Durable medical equipment/prosthetics (\$10,000 maximum per calender year)	10% coinsurance in network 30% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network
Basic infertility services	10% coinsurance in network 30% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network
Mental health services and alcohol/drug abuse, inpatient and outpatient services (deductible waived for office visits)	10% coinsurance in network 30% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network	20% coinsurance in network 40% coinsurance out of network
Prescription drug - Aetna Pharmacy Management (Perferred generic/ Preferred brand/Non-preferred)	10%/ 30%/ 40% coinsurance deductible waived, combined with medical OOP - in network (Not covered out of network.)	20%/ 40%/ 50% coinsurance deductible waived, combined with medical OOP - in network (Not covered out of network.)	20%/ 40%/ 50% coinsurance deductible waived, combined with medical OOP - in network (Not covered out of network.)

Stay connected with your member website

Get started by visiting **Emeriti.AetnaMedicare.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.



Helpful resources

Aetna® Member Services

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

Monday to Friday, 8 AM to 8 PM ET

[Emeriti.AetnaMedicare.com](https://www.emeriti.aetnamedicare.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 AM to 8 PM ET

[MyEmeritiHealth.org](https://www.MyEmeritiHealth.org)

Emeriti can help you with:

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

Aetna Medicare is a 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.