Children’s Home Society of Florida

2014 Open Enrollment
Agenda

1. **2014 Medical Benefits (4 plan options)**
   - HSA (Health Savings Account) Health Network Only $2500
   - HSA (Health Savings Account) Health Network Option $2000
   - Health Network Only; HNOnly CoPay $2000
   - Health Network Only; HNOnly CoPay $3000

2. **Dental PPO plan**

3. **Tools and resources**

4. **Life & Disability, EAP plan**
Medical Benefits
Preventative Care

Covered 100%
No Copay
No Deductible

- Routine Adult Physical Exams/Immunizations
- Well Child Exams/Immunizations
- Routine Gynecological Care Exams
- Routine Mammograms
- Colorectal Cancer Screening
- Routine Digital Rectal Exams/Prostate Tests
- Routine Eye Exams
<table>
<thead>
<tr>
<th>Plan Design Feature</th>
<th>Participating Provider (In-Network)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$2,000 Individual $4,000 Family</td>
</tr>
<tr>
<td>Preventative Care</td>
<td>100%; deductible waived</td>
</tr>
<tr>
<td>Primary Care Office Visit</td>
<td>$30 copay; deductible waived</td>
</tr>
<tr>
<td>Specialist Office Visit</td>
<td>$50 copay; deductible waived</td>
</tr>
<tr>
<td>Inpatient Hospital Stay</td>
<td>20% per admission; after deductible</td>
</tr>
<tr>
<td>Outpatient Hospital</td>
<td>20% per visit; after deductible</td>
</tr>
<tr>
<td>Diagnostic Laboratory</td>
<td>100%; after deductible</td>
</tr>
<tr>
<td>Diagnostic X-Ray</td>
<td>100%; after deductible</td>
</tr>
<tr>
<td>Diag x-ray for Complex Imaging</td>
<td>$300 copay; after deductible</td>
</tr>
<tr>
<td>Urgent Care</td>
<td>$50 copay; deductible waived</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>$200 copay; deductible waived</td>
</tr>
<tr>
<td>Prescriptions</td>
<td>$10/$40/$70 Retail $20/$80/$140 Mail Order</td>
</tr>
<tr>
<td>Out of Pocket Maximum</td>
<td>$4,000 Individual $8,000 Family</td>
</tr>
<tr>
<td>Plan Design Feature</td>
<td>Participating Provider (In-Network)</td>
</tr>
<tr>
<td>-------------------------------------</td>
<td>-------------------------------------</td>
</tr>
<tr>
<td>Deductible</td>
<td>$3,000 Individual</td>
</tr>
<tr>
<td></td>
<td>$6,000 Family</td>
</tr>
<tr>
<td>Preventative Care</td>
<td>100%; deductible waived</td>
</tr>
<tr>
<td>Primary Care Office Visit</td>
<td>$30 copay; deductible waived</td>
</tr>
<tr>
<td>Specialist Office Visit</td>
<td>$60 copay; deductible waived</td>
</tr>
<tr>
<td>Inpatient Hospital Stay</td>
<td>20% per admission; after deductible</td>
</tr>
<tr>
<td>Outpatient Hospital</td>
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<tr>
<td>Emergency Room</td>
<td>$200 copay; deductible waived</td>
</tr>
<tr>
<td>Prescriptions</td>
<td>$10/$40/$70 Retail</td>
</tr>
<tr>
<td></td>
<td>$20/$80/$140 Mail Order</td>
</tr>
<tr>
<td>Out of Pocket Maximum</td>
<td>$6,000 Individual</td>
</tr>
<tr>
<td></td>
<td>$12,000 Family</td>
</tr>
</tbody>
</table>

HNOnly 8 CoPay $3000
Health Savings Account (HSA): It’s health coverage, plus a health savings account, rolled into one – with tax benefits

There are 2 components:
1. Health Savings Account (HSA)*
2. High Deductible Health Plan (HDHP)
Health Savings Accounts

• The HSA is a tax-advantaged account created to pay for qualified medical expenses, as defined by the Internal Revenue Code ("IRC") §213(d). To be eligible to contribute to an HSA, an individual must be enrolled in a qualified high-deductible health plan.

• Can not contribute to an HSA if covered by a non-HDHP plan, Medicare, Medicaid, Champus, or Tricare.

• Contributions to an HSA are tax-deductible and can be made by anyone, including individuals, employers, family members or a combination, up to the annual contribution maximum.
  – $3,300 Individual, $6,550 Family (additional $1,000 catch-up contribution for age 55 and older
An HSA is like having a personal savings account for your health

- Money you contribute is **tax free** and can reduce your taxable income
- Money in the account **earns interest**, tax-free
- Money taken from this account to pay for your qualified health care is not taxed
- Money rolls over from year to year – **no “use it or lose it”** rule
- You choose how and when to use your dollars
- You **own** your HSA – it goes wherever you go
An HDHP helps you manage health costs

- Provides health care coverage with preventive care usually covered 100%
- Preventive Medications covered at pharmacy cost-share; no deductible
- You pay 100% until your deductible is met, then only pay a share of the cost
- Meet out-of-pocket maximum and then plan pays 100%
- Check your summary plan description and plan benefit information for details
Using your HSA and HDHP together puts you in control

• You choose how and when to pay for qualified medical expenses:
  – Use the money in your HSA or
  – Save that money and pay out of your own pocket

• You choose your payment method:
  – Debit card
  – Online bill payment
  – Online withdrawal
Enjoy the advantages of an Aetna HealthFund HSA

- Your HSA account will be set up with PayFlex, a 3rd party administrator that is part of the Aetna family.
- Contribute tax free, earn interest tax free AND reduce your taxable income.
- CHS will contribute $750/year for EE only & EE/Spouse coverage; $1,000/year for EE/Children & Family coverage; contributed in 4 quarterly installments.
- Take it with you! You own your HSA – it goes where you go.
- See it grow – money rolls over from year to year.
- You, your employer or an eligible family member can put money in your HSA.
- Put money in your account using payroll deduction, if available.
- Contribute to your HSA whenever you like, by check or electronic funds transfer.
- For today – pay for qualified expenses with tax-free dollars.
- For tomorrow – plan for future and retiree health-related costs.
<table>
<thead>
<tr>
<th>Plan Design Feature</th>
<th>Participating Provider (In-Network)</th>
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</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$2,500 Individual</td>
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<tr>
<td></td>
<td>$5,000 Family</td>
</tr>
<tr>
<td>Preventative Care</td>
<td>100%; deductible waived</td>
</tr>
<tr>
<td>Primary Care Office Visit</td>
<td>20%; after deductible</td>
</tr>
<tr>
<td>Specialist Office Visit</td>
<td>20%; after deductible</td>
</tr>
<tr>
<td>Inpatient Hospital Stay</td>
<td>20%; after deductible</td>
</tr>
<tr>
<td>Outpatient Hospital</td>
<td>20%; after deductible</td>
</tr>
<tr>
<td>Laboratory (Quest)</td>
<td>20%; after deductible</td>
</tr>
<tr>
<td>X-Ray</td>
<td>20%; after deductible</td>
</tr>
<tr>
<td>Urgent Care</td>
<td>20%; after deductible</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>20%; after deductible</td>
</tr>
<tr>
<td>Prescriptions</td>
<td>$10/$40/$70 Retail; after deductible</td>
</tr>
<tr>
<td>*Certain preventive</td>
<td>$20/$80/$140 Mail Order; after</td>
</tr>
<tr>
<td>medications covered at</td>
<td>deductible</td>
</tr>
<tr>
<td>copay; deductible waived</td>
<td></td>
</tr>
<tr>
<td>Out of Pocket Maximum</td>
<td>$5,000 Individual</td>
</tr>
<tr>
<td></td>
<td>$10,000 Family</td>
</tr>
</tbody>
</table>
## HNO Option HSA 2 $2000

<table>
<thead>
<tr>
<th>Plan Design Feature</th>
<th>Participating Provider (In-Network)</th>
<th>Non-Participating Provider (Out-of-Network)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$2,000 Individual $4,000 Family</td>
<td>$6,000 Individual $18,000 Family</td>
</tr>
<tr>
<td>Preventative Care</td>
<td>100%; deductible waived</td>
<td>30%; after deductible</td>
</tr>
<tr>
<td>Primary Care Office Visit</td>
<td>100%; after deductible</td>
<td>30%; after deductible</td>
</tr>
<tr>
<td>Specialist Office Visit</td>
<td>100%; after deductible</td>
<td>30%; after deductible</td>
</tr>
<tr>
<td>Inpatient Hospital Stay</td>
<td>100%; after deductible</td>
<td>30%; after deductible</td>
</tr>
<tr>
<td>Outpatient Hospital</td>
<td>100%; after deductible</td>
<td>30%; after deductible</td>
</tr>
<tr>
<td>Laboratory (Quest)</td>
<td>100%; after deductible</td>
<td>30%; after deductible</td>
</tr>
<tr>
<td>X-Ray</td>
<td>100%; after deductible</td>
<td>30%; after deductible</td>
</tr>
<tr>
<td>Urgent Care</td>
<td>100%; after deductible</td>
<td>30%; after deductible</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>100%; after deductible</td>
<td>30%; after deductible</td>
</tr>
<tr>
<td>Prescriptions</td>
<td>100% after deductible Retail and Mail Order</td>
<td>Not Covered</td>
</tr>
<tr>
<td>Out of Pocket Maximum</td>
<td>$2,000 Individual $4,000 Family</td>
<td>$8,000 Individual $24,000 Family</td>
</tr>
</tbody>
</table>
Dental Benefits
Your dentist...your choice

When you visit a dentist in the dental PPO network...
• Meet your deductible
• Coinsurance
• No claim forms

When you see any other licensed dentist...
• Out-of-pocket expenses may be higher
• You may have to file a claim form
• You may be subject to balance billing
# Dental Active High PPO

<table>
<thead>
<tr>
<th>Plan Design Feature</th>
<th>Participating Provider (In-Network)</th>
<th>Non-Participating Provider (Out-of-Network)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$50 Individual</td>
<td>$50 Individual</td>
</tr>
<tr>
<td></td>
<td>$100 Family</td>
<td>$100 Family</td>
</tr>
<tr>
<td>Preventative (Oral Exams, Cleanings, X-rays)</td>
<td>100%; deductible waived</td>
<td>100%; deductible waived</td>
</tr>
<tr>
<td>Basic (Fillings, Root Canals, Extractions, Oral Surgery)</td>
<td>80%; after deductible</td>
<td>60%; after deductible</td>
</tr>
<tr>
<td>Major (Inlays, Onlays, Crowns, Dentures)</td>
<td>60%; after deductible</td>
<td>40%; after deductible</td>
</tr>
<tr>
<td>Annual Benefit Maximum</td>
<td>$1,500 per individual covered</td>
<td>$1,500 per individual covered</td>
</tr>
</tbody>
</table>
## Dental Active Low PPO

<table>
<thead>
<tr>
<th>Plan Design Feature</th>
<th>Participating Provider (In-Network)</th>
<th>Non-Participating Provider (Out-of-Network)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$0 Individual</td>
<td>$200 Individual</td>
</tr>
<tr>
<td></td>
<td>$0 Family</td>
<td>$600 Family</td>
</tr>
<tr>
<td>Preventative (Oral Exams, Cleanings, X-rays)</td>
<td>100%</td>
<td>70%; deductible waived</td>
</tr>
<tr>
<td>Basic (Fillings, Root Canals, Extractions, Oral Surgery)</td>
<td>40%</td>
<td>30%; after deductible</td>
</tr>
<tr>
<td>Major (Inlays, Onlays, Crowns, Dentures)</td>
<td>40%</td>
<td>30%; after deductible</td>
</tr>
<tr>
<td>Annual Benefit Maximum</td>
<td>$1,500 per individual covered</td>
<td>$500 per individual covered</td>
</tr>
</tbody>
</table>
Transparency and Web Decision Support Tools
How does it work?

You wake up one morning with sudden cold-like symptoms. You call your doctor, but he’s booked until next Tuesday. Instead, you:

**Step 1. Contact Teladoc.**
You simply log on to their account or call Teladoc, 24/7, to request either a telephone or video consult (video consults are not available in TX).

**Step 2. Talk with a doctor.**
A board-certified doctor licensed in their state reviews their Electronic Health Record (EHR) and provides a consult over the phone or through video, just like an in-person visit.

**Step 3. Resolve the issue.**
The doctor recommends the right treatment for your medical issue. If a prescription is necessary, it’s phoned into your pharmacy of choice.

**Step 4. Settle up.**
You pay your member responsibility amount on a debit card, credit card, or ACH, and Teladoc submits a claim to Aetna for the remainder, if applicable.

**Step 5. Smile.**
Your medical issue gets resolved a fraction of the time and cost.

22 Minute Average Response Time
Intuitive, easy navigation

Provides
- Claims
- Balances
- DocFind
- Health information
- And more!

Secure, personal website
- 24/7 availability
Aetna Navigator – Secure Member Website

Aetna Navigator (www.aetna.com)

- Transactions, Decision Support and Health Information
- Check claims, balances, enrollment
- DocFind®
- Hospital Comparison Tool
- Estimate the Cost of Care
- Price-A-DrugSM
- Simple Steps To A Healthier Life Health Risk Assessment®
- Personal Health Record
Aetna Mobile

- The Aetna Mobile App works with iPhone, Blackberry Smartphone, and Android
- Features of Aetna Mobile
  - Find a doctor
  - Check benefits and coverage information
  - Search claims
  - Track your health and claims
  - Pull up you medical ID card information
  - Urgent care finder
  - Contact Aetna
- Visit your phone’s app store and Download the App for free today
**Member Payment Estimator**

- Estimates based on member’s actual benefits plan (including deductible, coinsurance, copayments, and plan limits).
- Allows members to:
  - Compare up to ten in-network providers or facilities and view estimates for certain out-of-network physician services
  - Generate estimates for themselves and their covered dependents
- Provides estimates for “service bundles”
  - Multiple services typically performed together as one procedure or visit (for example, office visit, colonoscopy) with the option to view details
- Uses member-friendly terminology instead of industry language
Education through information

Estimate the cost of care – one of the many decision-support tools available from Aetna to help members become better-informed health care consumers
Estimate the cost of care tool

• Provides cost and health related information to help members make more informed health care decisions
• Helps members better plan for their health care expenses
• Provides cost information for
  – Dental procedures
  – Diagnostic tests and vaccines
  – Office visits
  – Surgical and scope procedures
  – Diseases and conditions
  – Prescription drugs (Price-A-Drug℠)
Key information and features

• Available to all Aetna Navigator® registered subscribers
• Provides estimated average costs for approximately 200 medical and dental procedures, tests, office visits, diseases and conditions
• Access to Price-A-Drug with costs for approximately 9,000 prescription drugs
• Illustrates potential cost advantage of using in-network providers
• Uses data sourced directly from Aetna’s systems
• Available at no additional cost to members or plan sponsors
How to access estimate the cost of care
Hospital Comparison Tool

Decision-support, web-based tool available to members registered for Aetna Navigator

Gives members information to make more informed health care decisions

Helps members and their doctors select a hospital for their medical care

Tool includes:
• Data and information from third-party sources
• Evidence-based, inpatient hospital outcomes data
• Quality measures
• Links to health content
Hospital comparison report for a procedure, condition or diagnosis

**Member’s search criteria**
- Procedure, condition or diagnosis
- Geographic area and distance willing to travel to hospital
- Level of importance they place on each of four inpatient outcomes measures
- Patients per year, complications, mortality, length of stay

**Report**
Report contains All-Patient and Medicare publicly reported inpatient hospital outcomes data plus other quality information:
- The Leapfrog Group Hospital Patient Safety Survey results
- CMS measures
- The Joint Commission
- Hospital patient satisfaction results
- Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) patient experience survey information

**Tool**
Tool is made available by Aetna through WebMD Health Services
Access the tool

### Aetna Care & Treatment Overview
- Care & Treatment Overview
- Get Health Information
- Health Topics A-Z
- Simple Steps To Better Dental Health
- Employee assistance program
- Dealing with advanced illness

### I want to...
- Find a doctor, pharmacy or facility
- Add/Change primary care doctor
- Add/Change primary care dentist
- Order medications
- Estimate Cost of Care
- Research treatments
- Talk to a nurse
- View my health history report
- Prepare for surgery
- Compare hospital quality information

### Get personalized search results
Search a health topic with Aetna SmartSource™ and you'll get results based on your health plan, zip code and profile. Find local doctors, treatment options, estimated costs, and more!

### Search smarter now

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### Your Claims

<table>
<thead>
<tr>
<th>Member Name</th>
<th>All Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Claim</td>
<td>Medical</td>
</tr>
<tr>
<td>Dates</td>
<td>Last 365 Days</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HealthFund</th>
<th>Cost of Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount Remaining</td>
<td>In network: $7,916</td>
</tr>
<tr>
<td>Remaining - 2012</td>
<td>Out of network: $20,812</td>
</tr>
<tr>
<td>Remaining - 2011</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

Find out what YOU will pay for common services based on YOUR medical plan.

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Children's Home Society of Florida Open Enrollment Meeting
Search by hospital name or procedure

Find a hospital for a procedure or condition...
Select a body part or use the menus below to select a Category and a Procedure/Diagnosis:

MALE
FEMALE

Category:
Orthopedic

Procedure/Diagnosis:
Knee Replacement

Location (city, state or zip)
Hartford CT

Within:
50 miles

Or find a hospital by name...
Hospital Name (at least 3 characters)

Location (city, state or zip)

CONTINUE

Explanation
A total knee replacement occurs when all the moving parts of the knee joint are replaced with metal or plastic parts. The most painful part of this operation is the cartilage in the leg.
Compare hospitals from list

1. CHOOSE REPORT  2. CHOOSE HOSPITALS  3. RANK CRITERIA  4. VIEW REPORT

Shown below are hospitals within 50 miles of Hartford, CT for Knee Replacement.

This list is based upon data from Medicare.

1 - 45 | New Search

<table>
<thead>
<tr>
<th>Name</th>
<th>City, State</th>
<th>Distance</th>
<th>Number of Patients</th>
<th>Hospital Network</th>
<th>Compare</th>
</tr>
</thead>
<tbody>
<tr>
<td>St Francis Hospital &amp; Medical Center</td>
<td>Hartford, CT</td>
<td>1 mi</td>
<td>705</td>
<td>Participating</td>
<td>✔</td>
</tr>
<tr>
<td>Hospital Of St Raphael</td>
<td>New Haven, CT</td>
<td>33 mi</td>
<td>402</td>
<td>Participating</td>
<td>✔</td>
</tr>
<tr>
<td>Baystate Medical Center</td>
<td>Springfield, MA</td>
<td>26 mi</td>
<td>366</td>
<td>Participating</td>
<td>✔</td>
</tr>
<tr>
<td>Hartford Hospital</td>
<td>Hartford, CT</td>
<td>1 mi</td>
<td>289</td>
<td>Participating</td>
<td>✔</td>
</tr>
<tr>
<td>Danbury Hospital</td>
<td>Danbury, CT</td>
<td>46 mi</td>
<td>278</td>
<td>Participating</td>
<td>✔</td>
</tr>
<tr>
<td>Waterbury Hospital Health Center</td>
<td>Waterbury, CT</td>
<td>25 mi</td>
<td>234</td>
<td>Participating</td>
<td></td>
</tr>
<tr>
<td>Bridgeport Hospital</td>
<td>Bridgeport, CT</td>
<td>46 mi</td>
<td>223</td>
<td>Participating</td>
<td></td>
</tr>
<tr>
<td>The Hospital of Central Connecticut</td>
<td>New Britain, CT</td>
<td>10 mi</td>
<td>214</td>
<td>Participating</td>
<td></td>
</tr>
<tr>
<td>St Vincent's Medical Center</td>
<td>Bridgeport, CT</td>
<td>47 mi</td>
<td>159</td>
<td>Participating</td>
<td></td>
</tr>
<tr>
<td>Lawrence &amp; Memorial Hospital</td>
<td>New London, CT</td>
<td>41 mi</td>
<td>155</td>
<td>Participating</td>
<td></td>
</tr>
<tr>
<td>Middlesex Hospital</td>
<td>Middletown, CT</td>
<td>16 mi</td>
<td>144</td>
<td>Participating</td>
<td></td>
</tr>
<tr>
<td>William W Backus Hospital</td>
<td>Norwich, CT</td>
<td>37 mi</td>
<td>99</td>
<td>Participating</td>
<td></td>
</tr>
<tr>
<td>John Dempsey Hospital</td>
<td>Farmington, CT</td>
<td>8 mi</td>
<td>98</td>
<td>Participating</td>
<td></td>
</tr>
<tr>
<td>Milford Hospital, Inc</td>
<td>Milford, CT</td>
<td>42 mi</td>
<td>87</td>
<td>Participating</td>
<td></td>
</tr>
<tr>
<td>Mercy Medical Center</td>
<td>Springfield, MA</td>
<td>26 mi</td>
<td>83</td>
<td>Participating</td>
<td></td>
</tr>
</tbody>
</table>
Price-A-Drug
Cost and decision-support information for prescription drugs

- Estimated member out-of-pocket costs
- Mail-order savings
- Drug information links
- Generic alternatives
Managing Your Health
Informed Health Line

• Speak to a registered nurse
  1-800-556-1555

• 24/7 availability

• Confidential

• Health & Wellness Information
Savings for their health, their wellness, and their life

Through the Aetna Discount Program, Aetna members get discounts on millions of products and services in the following categories:

**At home products**  
(blood pressure monitor, clothing, toys)

**Books**  
(books, DVDs, magazine subscriptions)

**Fitness**  
(gym memberships, fitness plans, sports equipment)

**Hearing**  
(hearing exams, hearing aids, batteries)

**LifeMart® shopping website**  
(travel, electronics, family care, home, auto)

**Natural products and services**  
(acupuncture, chiropractic, online medical consultations, skin care)

**Oral health care**  
(water-jet flossers, cavity-fighting products)

**Vision**  
(eye exams, frames, contact lenses, LASIK surgery)

**Weight management**  
(weight loss programs and products, diet and meal plans)
Simple Steps - Confidential Website

Key Program Features

- Health Risk Questionnaire
- Available for all employees

- Healthy Living Programs

- Tailored Health Reports

- Personalized Action Plan
Life & Disability
Basic Life Insurance

Basic Life & AD&D

100% Employer Paid

• Employee

  1 x annual earnings (maximum $200,000)

• AD&D

  Equal to Basic Life
Optional Life & AD&D

Optional Life

• Employee
  
  Increments of $10,000 to a maximum of lesser of 5x earnings or $500,000

• Spouse
  
  Increments of $5,000; to a maximum of $250,000 (not to exceed 100% of employee’s basic and optional amount)

• Children
  
  Age 14 days to age 26; Increments of $2,000; to a maximum of $10,000 (Not to exceed 100% of employee’s basic and optional amount)
Optional Life & AD&D

Optional AD&D

• Employee

  Increments of $10,000 to a maximum of $250,000 (Cannot exceed 10 times BAE)

• Spouse

  50% of the employee’s amount (40%, if child(ren) included)

• Children

  15% of the employee’s amount (10%, if spouse included)
Optional Life
Evidence of Insurability Rules

• **Employee and Spouse:**

  If not already covered and not elected within 31 days of eligibility, this would be a late enrollment and EOI is needed for any amount.

  If already covered, you can go up one increment (within the guarantee issue amount) without EOI. EOI is needed if the increase is more than one increment or over the guarantee issue.

• **Children**

  EOI is not required.

  *Evidence of Insurability is not required for Supplemental AD&D coverage.*
Long Term Disability (LTD)

- Eligibility: All regular full-time and part-time employees working 30 or more hours per week with one or more years of service
- 100% employer paid
- Elimination Period: 180 days of continuous disability due to occupational or non-occupational injury or illness
- Monthly Benefit: Replace up to 60% of pre-disability monthly earnings
- Maximum Monthly Benefit: $8,000
- Benefit Duration: Normal retirement age as defined by Social Security
Aetna Life Essentials

While You’re Living (Caring for Yourself)

Financial advice services

At the End of Life (Caring Support and Resources)

• Accelerated Death Benefit

• Access to legal advice – estate planning

Emotional

• Access to end-of-life Info – Compassionate Care website

• Bereavement counseling

Physical

Discount programs

After You’re Gone (Caring for Loved Ones)

Financial counseling

• Access to legal advice – estate planning*

Medical case management

• Service for members with Supplemental Life

• Service for members with ADB

Children’s Home Society of Florida Open Enrollment Meeting
Everest Funeral Planning

• **24/7 Advisor Planning Assistance**
  – Funeral planning issues
  – Creating a personal funeral plan for the family/client

• **PriceFinder Research Reports**
  – Detailed local funeral home price comparisons available on demand via Everest’s website

• **Online Funeral Planning Tools**
  – Information stored and maintained in a secure data warehouse

• **At-Need Family Support, 24/7**
  – Family assistance and plan implementation
  – Communicate the client’s Personal Funeral Plan to the funeral home; removing the family from a sales-focused environment

• **Negotiation Assistance**
  – Gather pricing information and present to family in an easy-to-read format
  – Negotiate funeral service pricing with local funeral homes
  – Help the family compare prices of caskets and other products
Employee Assistance Program (EAP)

- Eligibility: All employees, household members and dependent children not living in household
- Unlimited telephonic or
- Five face to-face consultations
- Referrals to community services
- Internet access to EAP website 24 hours/7 days a week
- Work/life services
- Child/elder care, legal and financial services
Employee Assistance Program (EAP)

• Confidentially discuss:
  – Mental health and well-being
  – Personal and professional relationships
  – Substance abuse
  – Family life
  – Daily stress

• Contact the Aetna EAP anytime toll-free or visit via the web 24/7
  1-888-AETNA-EAP (1-888-238-6232)
  www.mylifevalues.com (Aetna EAP/CHSFLEAP)
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Policy forms issued in Oklahoma include: HMO OK COC-5 09/07, HMO/OK GA-3 11/01, HMO OK POS RIDER 08/07, GR-23 and/or GR-29/GR-29N.

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