

Here for you.

2024 Aetna® health plan resource guide State of Illinois — Local Government Health Plan (LGHP)



2024 health plans at a glance

You have four health plans to choose from. The summaries on the following pages show plan benefits levels when you use the doctors and hospitals in our network. You can go outside the network for care, but you'll usually pay more. Your Open Enrollment materials from the State of Illinois will include more details.

HMO plan					
Deductible	Individual: \$0 Family: \$0	Outpatient surgery	100% after \$300 copay		
Coinsurance	100%	Annual out-of-pocket maximum	Single: \$3,000 Family: \$6,000		
PCP office visit	100% after \$40 copay	Prescription drugs	Retail: \$175 deductible per person		
Teladoc Health	100% after \$10 copay		• Reduced Tier 1: \$4 per 30-day supply		
Specialist office visit	100% after \$45 copay		Tier 1: \$15 per 30-day supplyTier 2: \$30 per 30-day supply		
Emergency room visit	100% after \$300 copay		• Tier 3: \$60 per 30-day supply		
Preventive services	100% coverage		Specialty Tier: \$120 per 30-day supply		
Inpatient services	100% after \$350 copay per admission		Maintenance drugs: 31- to 90-day retail/ mail-order supplies are 2.5 times copay.		



Behavioral health support

We all need mental and emotional support at times. Your plan includes behavioral health resources to help with challenges like grief and loss, stress, depression and anxiety, substance misuse, and more. Log in to your Aetna® member website to:

- Check your emotional well-being
- Improve your mood with self-check tools
- Find caregiver support and resources
- Watch inspirational videos
- Read empowering stories



Questions? We're here to help.

Health benefits information: AetnaStateofIllinois.com

Health benefits questions: Aetna Member Services: 1-855-339-9731 (TTY: 711), Monday through Friday, 7 AM to 5 PM CT

Enrollment information or to make changes to your benefits: Contact MyBenefits Marketplace Service Center: <u>1-844-251-1777</u>

Open Enrollment hours: 7:30 AM to 7:00 PM CT

2024 health plans at a glance, continued

	OAP			LCDHP (HD)		LCHP	
	Tier 1	Tier 2	Tier 3	In network	Out of network	In network	Out of network
Deductible	Individual: \$0 Family: \$0	\$400 per enrollee	\$600 per enrollee	Individual: \$2,000 Family: \$4,000	Individual: \$4,000 Family: \$8,000	\$1,000 per benefits participant	\$1,000 per benefits participant
Coinsurance	100%	80% of network charges	50% of MAC	80% of network charges	50% of MAC	80% of network charges	50% of MAC
PCP office visit	100% after \$40 copay	80% of network charges after deductible	50% of MAC after deductible	80% of network charges after deductible	50% of network charges after deductible	80% of network charges after deductible	50% of MAC after deductible
Teladoc Health	100% after \$10 copay	Not covered	Not covered	80% of network charges after deductible	50% of network charges after deductible	80% of network charges after deductible	50% of MAC after deductible
Specialist office visit	100% after \$45 copay	80% of network charges after deductible	50% of MAC after deductible	80% of network charges after deductible	50% of MAC after deductible	80% of network charges after deductible	50% of MAC after deductible
Emergency room visit	100% after \$300 copay	100% after \$300 copay	100% after \$300 copay	80% of network charges after deductible	80% of network charges after deductible	80% of network charges after \$400 ER deductible; plan-year deductible applies	80% of network charges after \$400 ER deductible; plan-year deductible applies
Preventive services	100% coverage	100% coverage	Covered under Tiers 1 and 2 only	100% coverage	No coverage	100% coverage	No coverage
Inpatient services	100% after \$350 copay per admission	80% of network charges after \$400 copay and deductible	50% of MAC after \$500 copay and deductible	80% of network charges after deductible	50% of MAC after deductible	80% of network charges after \$350 hospital deductible; plan-year deductible applies	50% of MAC after \$600 hospital deductible; plan-year deductible applies
Outpatient surgery	100% after \$300 copay	80% of network charges after \$300 copay and deductible	50% of MAC after \$300 copay and deductible	80% of network charges after deductible	50% of MAC after deductible	80% of network charges after deductible	50% of MAC after deductible
Annual out-of-pocket maximum	Individual: \$7,250 Family: \$13,750	Individual: \$7,250 Family: \$13,750	Not applicable	Individual: \$5,000 Family: \$8,000	Individual: \$7,000 Family: \$14,000	Individual: \$2,000 Family: \$4,000	Individual: \$6,000 Family: \$12,000
Prescription drugs	Administered through the state self-insured prescription benefits manager	Administered through the state self-insured prescription benefits manager					

Note: MAC is the maximum allowable charge.



Find a doctor

It's easy to find a network provider. Use the provider search tool to look for doctors, specialists, walk-in clinics and urgent care centers, hospitals, and even labs.

- 1. Go to <u>AetnaStateofIllinois.com</u> and click on **Find a Doctor** at the top of the page.
- **2.** Click on your plan's link to access the provider search tool.
- **3.** Enter your ZIP code in the **Continue as a guest** section.
- **4.** Enter your doctor's name or the type of provider you'd like to find. You can also select a provider category for an automatic search.





Plan resources at your fingertips

Aetna[®] Member Services

Get answers to all your benefits and claims questions when you call <u>1-855-339-9731 (TTY: 711)</u>, Monday through Friday, 7 AM to 5 PM CT.

Your Aetna member website

After you enroll in a health plan, register for your Aetna member website at <u>Aetna.com</u>. Then log in anytime to confirm who's covered under your plan, check the status of claims, view Explanation of Benefits (EOB) statements and more.

Cost-estimator tool

Did you know that health care providers can charge very different costs for the exact same service? Compare costs on your Aetna member website and know what to expect before you receive care. Just search by name, type of provider or care needed.

Aetna Health℠ app

Download the app for all the best features of your member website on the go. View your ID card, find care, make appointments and more — right from your phone.

Teladoc Health

Teladoc Health is a service that connects you to board-certified primary care doctors, 24/7. Teladoc Health doctors can treat many non-emergency medical issues by phone or video, including colds, flu, bronchitis, infections and more. Set up your account at <u>TeladocHealth.com/Aetna</u>, or call <u>1-855-835-2362</u> to get started.

You can also download the no-cost Teladoc Health app.

Enjoy these wellness programs and extras

24-Hour Nurse Line

Speak with a registered nurse about health issues — anytime, day or night. While only your doctor can diagnose, prescribe or give medical advice, our nurses can provide information on a variety of health topics.

Aetna One® Choice

If you have an upcoming hospital stay or a chronic condition, such as diabetes, high blood pressure or asthma, an Aetna One Choice nurse or consultant can help. This nurse or consultant doesn't replace your doctor. But they can help you stay on track with your treatment plan and help coordinate your care.

Simple Steps To A Healthier Life® program

Want to leave those unhealthy habits behind for good? Try Simple Steps To A Healthier Life. You'll learn strategies to manage your weight, deal with stress, quit smoking and more.

Aetna member discounts*

As an Aetna member, you can take advantage of members-only savings on vision and hearing care, gym memberships, weight-management programs, natural products and services, vitamins, and much more.

*DISCOUNT OFFERS ARE NOT INSURANCE. They are not benefits under your insurance plan. You get access to discounts off the regular charge on products and services offered by third-party vendors and providers. Aetna makes no payment to the third parties — you are responsible for the full cost. Check any insurance plan benefits you have before using these discount offers, as those benefits may give you lower costs than these discounts.



TTY: 711

To access language services at no cost to you, call 1-855-339-9731. Para acceder a los servicios de idiomas sin costo, llame al 1-855-339-9731. (Spanish) 如欲使用免費語言服務,請致電 1-855-339-9731。(Chinese)

Aetna Behavioral Health refers to an internal business unit of Aetna®.

Not all services are covered. See plan documents for a complete description of benefits, exclusions and limitations of coverage. Plan features and availability may vary by location and are subject to change. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services. Estimated costs are not available in all markets or for all services. We provide an estimate for the amount you would owe for a particular service based on your plan at that very point in time. It is not a guarantee. Actual costs may differ from an estimate for various reasons, including claims processing times for other services, providers joining or leaving our network, or changes to your plan. Health maintenance organization (HMO) members can only get estimated costs for doctor and outpatient facility services. Discount vendors and providers are not agents of Aetna and are solely responsible for the products and services they provide. Discount offers are not guaranteed and may be ended at any time. Aetna may get a fee when you buy these discounted products and services. Health information programs provide general health information and are not a substitute for diagnosis or treatment by a health care professional. Refer to <u>Aetna.com</u> for more information about Aetna plans.

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