



By your side

2018 Aetna Medical Plan Resource Guide State of Illinois

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Read this guide and any enclosed documents to learn about the medical plan options and programs available to you on July 1, 2018. Choose the medical plan that works best for you, based on your needs, budget and family situation. Enroll in your benefits during Open Enrollment: May 1 – May 31.

Open Enrollment is your annual opportunity to make changes to your benefits elections and to choose the best coverage for you and your family for 2018.

Plan resources at your fingertips

When you enroll in an Aetna health plan, you automatically get these tools and resources.



Aetna Concierge:

Get answers to all of your benefits and claims questions when you call **1-855-339-9731** (TTY: 1-800-628-3323), Monday – Friday from 7 a.m. – 5 p.m. CT.

Your secure member site:

After you enroll in the medical plan, register at aetnastateofillinois.com. 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. You'll also find the following online tools.

Online directory: Use the online directory on aetnastateofillinois.com to search for network providers, including specialists, walk-in and urgent care centers, and hospitals. You can even find network labs — however, it's important to know that Quest Diagnostics® is the preferred laboratory.

Member Payment Estimator*: Use this tool to get actual costs of procedures and treatments using providers and facilities in your area. This tool factors in plan details like your remaining deductible and your copay or coinsurance. You can review and compare average cost ranges for over 30 common medical procedures at specific facilities. You can also compare costs for up to 10 doctors or hospitals at a time.

Aetna Mobile app: Use your smartphone to access a modified version of your member website. You can even pull up a digital copy of your Aetna ID card and search for network doctors and facilities when you're on the go.

*Estimated costs not available in all markets or for all procedures. Actual costs may differ for a number of reasons, including if additional or different services are performed by the doctor or facility at the time of your visit, and/or if additional claims/member payments are processed before the actual claim for the estimated service is received.

2018 medical plans at a glance

You have three medical plans to choose from. The summaries below show your share of costs when you use the doctors and hospitals in our network. You can go outside the network, but you'll usually pay more. Your Open Enrollment materials from the State of Illinois will include more details.

Note: MAC is the Maximum Allowable Charge.

	HMO	OAP			QCHP	
		Tier 1	Tier 2	Tier 3	In-network	Out-of-network
Deductible	Single: \$0 Family: \$0	Single: \$0 per person Family: \$0 per person	\$250 per enrollee	\$350 per enrollee	Single: \$375-\$525 Family: \$937-\$1,312 (salary based)	Single: \$375-\$525 Family: \$937-\$1,312 (salary based)
Coinsurance	100% (80% for DME)	100% (80% for DME)	90% of network charges (80% for DME)	60% of MAC	85% of network charges	60% of MAC
PCP office visit	\$20 copay	\$20 copay	90% of network charges	60% of MAC	85% of network charges	60% of MAC after deductible
Specialist office visit	\$30 copay	\$30 copay	90% of network charges	60% of MAC	85% of network charges after deductible	60% of MAC after deductible
Emergency room visit	\$250 copay	\$250 copay	\$250 copay	\$250 copay	\$450 copay, deductible applies	\$450 copay, deductible applies
Urgent care services	100% coverage	100% coverage	100% coverage	Covered under Tier 1 and 2 only	85% of network charges after deductible	60% of MAC after deductible
Inpatient services	\$350 per admit copay	\$350 per admit copay	90% of network charges after \$400 copay	60% of MAC after \$500 copay	\$100 per hospital admittance copay, 85% of network charges, after deductible	\$500 per hospital admittance copay, 60% of MAC after deductible
Outpatient surgery	\$250 copay	\$250 copay	90% of network charges after \$250 copay	60% of MAC after \$250 copay	85% of network charges after deductible	60% of MAC after deductible
Annual out-of-pocket maximum	Single: \$3,000 Family: \$6,000	Single: \$6,600 Family: \$13,200	Single: \$6,600 Family: \$13,200	Not applicable	Single: \$1,500 Family: \$3,750	Single: \$6,000 Family: \$12,000
Prescription drugs	Retail: Separate \$100 per person deductible applies • Generic: \$8 • Preferred: \$26 • Non-preferred: \$50	Administered through the state self-insured prescription benefits manager	Administered through the state self-insured prescription benefits manager	Administered through the state self-insured prescription benefits manager	Administered through the state self-insured prescription benefits manager	Administered through the state self-insured prescription benefits manager

Questions? We're here to help.

Medical benefits information: aetnastateofillinois.com

Medical benefits questions:

Aetna Member Services: 1-855-339-9731 (TTY: 1-800-628-3323),
Monday – Friday from 7 a.m. – 5 p.m. CT

Enrollment information or to make changes to your benefits:

Contact MyBenefits Marketplace Service Center: 1-844-251-1777 (TTY: 1-844-251-1778),
Open Enrollment hours 7:30 a.m. – 7 p.m. CT



Enjoy these wellness programs and extras!

Call 1-855-339-9731 (TTY: 1-800-628-3323), Monday – Friday from 7 a.m. – 5 p.m. CT, or log in to aetnastateofillinois.com to learn more.



Informed Health® Line:

With this 24-hour nurse line, you can speak with a registered nurse about health issues — anytime, day or night. While only your doctor can diagnose, prescribe or give medical advice, the Informed Health Line nurses can provide information on more than 5,000 health topics.



Aetna In Touch CareSM outreach:

If you have an upcoming hospital stay or a chronic condition, like diabetes, high blood pressure or asthma, an Aetna In Touch Care nurse or consultant can help. Your personal nurse doesn't replace your doctor but can help you stay on track with your program and 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. It's included with your health plan and you'll learn strategies to manage your weight, deal with stress, quit smoking and more.



Aetna 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.

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)

Health benefits and health insurance plans are offered and/or underwritten by Aetna Health Inc. and/or Aetna Life Insurance Company (Aetna). Each insurer has sole financial responsibility for its own products.

This material is for information only. Health benefits and health insurance plans contain exclusions and limitations. Not all health services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change. Health information programs provide general health information and are not substitutes for diagnosis or treatment by a physician or other health care professional. Discount programs provide access to discounted prices and are not insured benefits. 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. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to aetna.com.

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