



Live it

2024 Aetna® Federal health plans

A total approach to health

Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna).

AetnaFeds.com

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From the comfort of your home

Getting in touch is easier than ever

Whether it's a health plan question for us, or a health care question for a doctor, we'll work with you to make it happen.

We're excited to offer you AetnaFedsLive, an online portal where you can connect live with our team. You can ask questions and get answers at your own pace. Just visit **AetnaFedsLive.com**



Chat online and get answers

You can connect with our online staff on demand. Feel free to ask questions about your plan options. Or you can simply get guidance on plan selection.



Schedule an appointment for personalized support

Want more than a quick chat? Just schedule a one-on-one appointment with one of our team members to talk about your health plan choices. You can even handpick which team member you'd like to meet with before your session.



Use self-service tools for round-the-clock help

If you're the type of person who likes to figure things out for yourself, then you're in luck. You don't have to talk to anyone to understand your plan options. You can access plenty of features on your own, like:

- **On-demand webinars** — recorded meetings to get an overview of your health plan options
- **Your Aetna® member website** — an online tool that lets you save time and make informed health choices
- **A provider directory** — an online directory where you can find in-network doctors

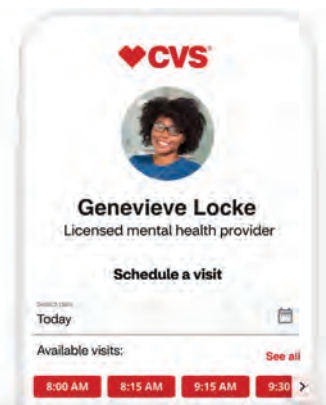
Your care. Your way.

Getting the care you need just got easier.

Introducing CVS Health Virtual Care™

From quick care to your therapy appointments, as an Aetna® FEHB plan member, we've got you covered.

Easily schedule virtual appointments in addition to using your traditional network of providers. Access is included as part of your medical plan because **healthier happens together™**.



On-demand care

Access 24/7 quick care for nonemergency conditions like colds, sinus infections, allergies and more.



Mental health services

Take care of your mental well-being. Talk with a therapist for anxiety or stress. Or schedule with a psychiatrist for medication management.

Get started today with CVS Health Virtual Care

- 1 Activate your virtual care benefit by visiting **CVS.com/virtual-care** or scan the QR code to the right
- 2 Create an account and confirm our details
- 3 Schedule a mental health appointment, or request on-demand care 24 hours a day, 7 days a week



Register today at
CVS.com/virtual-care



Highlights of your health plan

No matter which plan you choose, you can take advantage of the following:

A large national network

- More than 1.2 million health care professionals*
- Over 700,000 primary care physicians (PCPs) and specialists*
- More than 5,700 hospitals*

That means you can find a network provider nearly anywhere in the United States — whether you're at home or away on business or vacation. Chances are your doctor is in our network. To make sure, check our [directory](#) before enrolling. Just go to **AetnaFeds.com** and select "Find Your Doctor."

No need for referrals

You don't have to get a referral from your doctor to see a specialist.

MinuteClinic® locations

Care that's convenient and reliable, for low or no cost.**

MinuteClinic locations are walk-in clinics inside select CVS Pharmacy® stores. They are the largest provider of retail health care in the United States — with over 1,100 locations in 33 states and the District of Columbia.

MinuteClinic locations are open every day, including evenings, and offer scheduled appointment options.

MinuteClinic health care providers treat a variety of illnesses, injuries and conditions for low or no cost.**

Programs to help keep you healthy

- Gym memberships
- Weight-loss programs

- Vision products and services
- Chiropractic care, acupuncture, massage therapy and more

Online tools that can help you:

- Find a doctor, hospital or walk-in clinic, close to home or out of state
- Create your own personal health record and review claims
- Save money by comparing costs. Our cost estimator provides personalized cost information
- Manage prescriptions

Want to test drive the tools now? Just go to **AetnaFeds.com** and select "Member Login/Register." Use "federal3" as your user name and password.

*Aetna Enterprise Preferred Provider Organization (PPO) Database, as of August 2023.

** Includes select MinuteClinic services. Not all MinuteClinic services are covered. Please consult benefit documents to confirm which services are included. Members enrolled in qualified high-deductible health plans must meet their deductible before receiving covered non-preventive MinuteClinic services at no cost-share. However, such services are covered at negotiated contract rates. This benefit is not available in all states.

Information is believed to be accurate as of the production date; however, it is subject to change.

Aetna® Value plan with a national PPO network

Wellness rewards and no referrals

How this plan works

1. This plan rewards you for taking care of yourself. How?

By giving you monetary credits when you get preventive care like flu shots. Those credits you've earned can then go toward paying your deductible or medical costs.

See how the wellness rewards work on the next page. Or visit **AetnaFeds.com**
2. You can visit any doctor in the Aetna PPO network. No need to get a referral to see a specialist.
3. You can also use any doctor outside of the Aetna network. But your out-of-pocket costs will be higher.

2024 Aetna Value benefits (available nationwide)

Key benefits	What you pay in the network*
Preventive care Routine physical	\$0 \$0 (one per calendar year)
PCP care	\$25
Specialist care	\$40 Note: You don't need to meet a deductible for PCP or specialist care. Just pay your copay.
MinuteClinic®	\$0†
CVS Health Virtual Care™ consult	\$0
Lab, X-ray and diagnostic services	20%
Deductible	\$700 (self)/\$1,400 (self + one or self + family)
Inpatient hospital charges	20% after deductible
Outpatient surgery	20% after deductible
Maternity Routine prenatal care Hospital care	\$0 no deductible 20% after deductible
Emergency room	20% after deductible
Urgent care center	20% after deductible
Covered prescription drugs**	Note: You don't need to meet a deductible for prescription drugs. Just pay your copay or coinsurance (as noted below).
30-day supply at a retail pharmacy***	\$10 preferred generic (PG), 30% preferred brand (PB) \$600 max, 50% non-preferred (NP) (generic or brand) \$600 maximum
90-day supply through mail-order service or CVS Pharmacy®	\$20 preferred generic (PG), 30% preferred brand (PB) \$1,200 max, 50% non-preferred (NP) (generic or brand) \$1,200 maximum

* The costs for out-of-network care are higher. To pay the least out of pocket, use network doctors and hospitals.

** For specialty drug information, go to **AetnaFeds.com** and view the federal brochure. Like other health plans, this plan uses a formulary, which is a list of generic and brand-name drugs your health plan prefers.

*** If you use an out-of-network retail pharmacy, you pay 50 percent of the negotiated rate for all types of drugs, plus any difference between our allowance and the billed amount.

† Includes select MinuteClinic services. Not all MinuteClinic services are covered. Please consult benefit documents to confirm which services are included. However, such services are covered at negotiated contract rates. This benefit is not available in all states.

Get rewarded for being healthy

You can earn up to \$250 in credits for yourself or \$500 per family. And those credits then go toward helping pay your deductible or medical costs. It's extra money just for taking part in certain healthy activities.

It's easy money



All you need to do is get preventive care — like routine physicals and flu shots.

You'll then receive a \$50 credit for each activity. Just call your doctor's office to schedule a visit. Remember: Preventive care is a \$0 copay.



Earn another \$50 credit when you get a biometric screening.

This blood test, blood pressure check and waist measurement can help you see if you're at risk for certain medical conditions, like heart attack or stroke.

2024 Aetna® Value rates (what you pay every other week)

These rates do not apply to all enrollees. If you are in a special enrollment category, please refer to the FEHB Program website or contact the agency or Tribal Employer which maintains your health benefits enrollment.

	Code	Bi-weekly premium
Region 1 (available in CT, DE, ME, MA, NH, NJ, NY, RI, VT)		
Self only	EP4	\$239.24
Self + one	EP6	\$559.93
Self + family	EP5	\$523.20
Region 2 (available in AL, AR, DC, FL, GA, LA, MD, NC, TN, VA, WV)		
Self only	F54	\$201.17
Self + one	F56	\$474.49
Self + family	F55	\$436.05
Region 3 (available in AZ, CO, KS, MI, MO, NV, NM, SD, UT, WA)		
Self only	G54	\$158.04
Self + one	G56	\$377.85
Self + family	G55	\$337.44
Region 4 (available in ID, IL, IA, KY, MN, MS, MT, NE, ND, OR, PA, WY)		
Self only	H44	\$242.28
Self + one	H46	\$569.32
Self + family	H45	\$532.75
Region 5 (available in AK, CA, HI, IN, OH, OK, SC, TX, WI)		
Self only	JS4	\$268.92
Self + one	JS6	\$634.86
Self + family	JS5	\$587.36

Aetna® HDHP with a health savings account

A national PPO network, low rates and a tax-free account

How this plan works

1. We set up a health savings account (HSA) for you to help you pay for your health care.* We add money to it each month.

Here's what you get in your HSA:

- **Self only:** \$800 a year (\$66.67 a month)
- **Self + one:** \$1,600 a year (\$133.34 a month)
- **Self + family:** \$1,600 a year (\$133.34 a month)

You can add money to it too. And you don't pay taxes on it. The account earns interest tax free, so it builds up over time. And all the money in there is yours to keep — even if you leave the plan.

2. You can visit any doctor in the Aetna PPO network. No need to get a referral to see a specialist.
3. You can also use any doctor outside of the Aetna network. But your out-of-pocket costs will be higher.

Dental, vision and pharmacy coverage are built in.

2024 Aetna HDHP benefits (available nationwide)

Key benefits	What you pay in the network**
Preventive care Routine physical	\$0 \$0 (one per calendar year)
Deductible	\$1,800 (self)/\$3,600 (self + one or self + family) Bonus: You can use your HSA money to help pay your deductible.
PCP care	15% after deductible
Specialist care	15% after deductible
MinuteClinic®	\$0 after deductible†
CVS Health Virtual Care™ consult	\$0 after deductible; \$55 before the deductible
Inpatient hospital charges	15% after deductible
Outpatient surgery	15% after deductible
Emergency room	15% after deductible
Urgent care center	15% after deductible
Lab, X-ray and diagnostic services	15% after deductible
Covered prescription drugs***	After deductible:
30-day supply at a retail pharmacy	\$10 preferred generic (PG), 50% preferred brand (PB) \$200 max, 50% non-preferred (NP) \$300 max
90-day supply through mail-order service or CVS Pharmacy®	\$20 preferred generic (PG), 50% preferred brand (PB) \$400 max, 50% non-preferred (NP) \$600 max

Built-in vision

Routine eye exam — You pay \$0 when you visit network doctors.

Money toward prescription eyewear — You get \$100 that you can use toward the purchase of prescription glasses and contact lenses every 24 months.

Discounts — You get discounts on eyeglasses, contacts, eye exams and more.

Built-in dental

Cleanings and X-rays — You pay \$0 when you visit network dentists.

* To open an HSA, you must meet certain Internal Revenue Service eligibility requirements. If you don't, let us know by calling **1-877-459-6604 (TTY: 711)**. You can enroll in a similar plan called HDHP with HRA. See the federal brochure at **AetnaFeds.com** to learn more.

** The costs for out-of-network care are higher. To pay the least out of pocket, use network doctors and hospitals.

*** For specialty drug information, go to **AetnaFeds.com** and view the federal brochure. Like other health plans, this plan uses a formulary, which is a list of generic and brand-name drugs your health plan prefers.

† Includes select MinuteClinic services. Not all MinuteClinic services are covered. Please consult benefit documents to confirm which services are included. Members enrolled in qualified high-deductible health plans must meet their deductible before receiving covered non-preventive MinuteClinic services at no cost-share. However, such services are covered at negotiated contract rates. This benefit is not available in all states and on indemnity plans.

Bank more money in your HSA

You can earn up to \$75 for yourself or \$150 per family. And the money goes right into your health savings account (HSA). It's extra money just for completing certain wellness activities.

Here's what you need to do



Step 1:

Go to **AetnaFeds.com** and sign up. Already registered? Then log in with your user name and password.



Step 2:

Complete the online health assessment on your Aetna® member website.



Step 3:

Get a biometric screening. This blood test, blood pressure check and waist measurement can help you see if you're at risk for certain medical conditions, like heart attack or stroke.

2024 Aetna® HDHP with HSA rates (what you pay every other week)

These rates do not apply to all enrollees. If you are in a special enrollment category, please refer to the FEHB Program website or contact the agency or Tribal Employer which maintains your health benefits enrollment.

	Code	Bi-weekly premium
Self only	224	\$125.82
Self + one	226	\$272.59
Self + family	225	\$230.06

It's easy to enroll



Step 1:

Choose a plan



Step 2:

Find your plan's enrollment code. They're listed in the rate charts in this brochure.



Step 3:

Your agency may use an online system like MyPay, Employee Express or PostalEASE. Or they may use a 2809 paper form. Go to **AetnaFeds.com/Enroll** for more information.

Aetna Open Access[®] plan

DC, MD, VA area

Our most popular plan in DC, MD and VA, with a national network, predictable costs and no referrals

For information on Open Access plans in other areas visit our website or contact us.

How this plan works

It's simple.

1. Find a doctor in our network.
Just do a search at **AetnaFeds.com**
2. Visit any primary care physician (PCP) or specialist in the network. You don't need a referral.
3. Pay your copay — your share of the cost.

Dental, vision and pharmacy coverage are built into your Open Access Basic plan.

2024 Open Access Basic benefits (in DC, MD, VA area)	
Key benefits	What you pay in the network
Preventive care Routine physical	\$0 \$0 (one per calendar year)
PCP care	\$25
Specialist care	\$55
CVS Health Virtual Care™ consult	\$0
MinuteClinic®	\$0***
Maternity Routine prenatal care Hospital care	\$0 20% of plan allowance
Inpatient hospital	20% of plan allowance
Outpatient surgery	\$350 per visit
Urgent care	\$50
Emergency	\$200
Chiropractic	\$55 specialist
Lab/X-ray/diagnostic services	\$25 PCP/\$55 specialist (\$100 for certain tests)
Note: If you are enrolled in Medicare Part A and/or Part B and it's primary, see the following page for your prescription drug coverage.	
Covered prescription drugs* 30-day supply at a retail pharmacy	\$10 preferred generic (PG), 50% preferred brand (PB) \$200 max, 50% non-preferred (NP) \$300 max
90-day supply through mail-order or retail service	\$20 preferred generic (PG), 50% preferred brand (PB) \$400 max, 50% non-preferred (NP) \$600 max
Built-in vision <ul style="list-style-type: none">• Routine eye exam — You pay a \$55 copay.• Money toward prescription eyewear — You get \$100 that you can use toward the purchase of prescription glasses and contact lenses every 24 months• Discounts — You get discounts on eyeglasses, contacts, eye exams and more.	
Built-in dental — In-network cleanings, X-rays, composite fillings <ul style="list-style-type: none">• \$5 copay when you use the basic dental network• \$0 copay (after \$20 deductible) when you use the dental PPO network** You're automatically covered under the basic network option. Call 1-800-537-9384 (TTY: 711) to select your designated primary care dentist or to switch to our PPO network at no extra cost to you.	

New for 2024: When you have Medicare Part A and/or Part B as primary your prescriptions will be covered under Aetna Medicare Rx offered by SilverScript[®]. This is a Medicare Part D plan and you'll receive a separate ID card to use for prescriptions. Visit **AetnaFeds.com/pharmacy** to learn more and view the formulary list. You can also call the number on the back of your ID card or schedule a one-on-one meeting at **AetnaFedsLive.com**

If you would like to opt out of this coverage (and keep the health plan's prescription coverage shown above) call **1-833-271-9775 (TTY: 711)** Monday–Friday 8 AM—8 PM ET. Or visit **AetnaRetireeHealth.com/FEHBP**

Prescription drug benefits when you're retired and enrolled in Medicare Part A and/or Part B:

Key benefits	What you pay in the network
Rx Retail Pharmacy Aetna Medicare Rx® offered by SilverScript® (30-day supply of a covered drug)	<ul style="list-style-type: none"> • Tier 1 Preferred generic: \$0 copay • Tier 2 generic: \$4 from a preferred pharmacy; \$5 from a standard pharmacy • Tier 3 Preferred brand: \$40 • Tier 4 Non-preferred brand: \$100 • Tier 5 Specialty: 25% up to \$150
Rx Retail or Mail Order with Aetna Medicare Rx offered by SilverScript (90-day supply of a covered drug)	<ul style="list-style-type: none"> • Tier 1 Preferred generic: \$0 copay • Tier 2 Generic: \$8 from preferred mail order or pharmacy; \$10 from standard mail order or pharmacy • Tier 3 Preferred brand: \$80 • Tier 4 Non-preferred brand: \$200 • Tier 5 Specialty: Limited to a one-month supply

Visit [AetnaFeds.com/pharmacy](https://www.aetnafed.com/pharmacy) to learn more and view the formulary list.

Save time and money

With flat copays and no referrals, the Open Access plan is our most popular plan in your area. Know exactly what you'll pay when you visit most providers with this option. And with mainly copays, there's little to no paperwork hassles so you can focus on more important things.

2024 Aetna Open Access® Basic plan rates (what you pay every other week)

These rates do not apply to all enrollees. If you are in a special enrollment category, please refer to the FEHB Program website or contact the agency or Tribal Employer which maintains your health benefits enrollment.

2024 Aetna Open Access Basic plan rates (DC, MD, VA area)		
	Code	Bi-weekly premium
Self only	JN4	\$100.03
Self + one	JN6	\$195.15
Self + family	JN5	\$212.51

Open Access plans

What appears here is information about **our most popular plan: the Open Access Basic plan.**

Refer to [AetnaFeds.com](https://www.aetnafed.com) for information about our Open Access High plan.

Please see the Aetna® federal brochure at [AetnaFeds.com](https://www.aetnafed.com) for full plan details, service areas and rates.

Aetna® Saver plan

Available in DC, MD, VA area only

A low cost, easy to use plan for DC, MD, VA

How this plan works

- 1. Find a doctor in our network. Search the online directory at **AetnaFeds.com**
- 2. Visit any primary care physician (PCP) or specialist in the network. You don't need a referral.
- 3. Pay your share of the cost.
- 4. Keep track of all your information and claims using your Aetna member website.

2024 Aetna Saver benefits (available in DC, MD, VA area only)	
Key benefits	What you pay in the network
Preventive care Routine physical	\$0 \$0 (one per calendar year)
Deductible	\$1,000 (self)/\$2,000 (self + one or self + family)
PCP visit	30% after deductible
Specialist	30% after deductible
MinuteClinic®	\$0 after deductible*
CVS Health Virtual Care™ consult	\$0 after deductible; \$55 before the deductible
Inpatient hospital	30% after deductible
Outpatient	30% after deductible
Emergency room	30% after deductible
Urgent care center	30% after deductible
Covered prescription drugs** 30-day supply at a retail pharmacy	After deductible: \$10 preferred generic (PG), 50% preferred brand (PB)
90-day supply mail order pharmacy	\$30 preferred generic (PG), 50% preferred brand (PB)

*Includes select MinuteClinic services. Not all MinuteClinic services are covered. Please consult benefit documents to confirm which services are included. However, such services are covered at negotiated contract rates. This benefit is not available in all states.

For additional drug information, go to **AetnaFeds.com and view the federal brochure. Like other health plans, this plan uses a formulary, which is a list of generic and brand-name drugs your health plan prefers.



Connect live with our team

Chat with us online, watch webinars, schedule a one-on-one appointment and more. Just visit **AetnaFedsLive.com**

2024 Aetna® Saver plan rates
(what you pay every other week)

These rates do not apply to all enrollees. If you are in a special enrollment category, please refer to the FEHB Program website or contact the agency or Tribal Employer which maintains your health benefits enrollment.

2024 Aetna Saver plan rates (available in DC, MD, VA area only)		
	Code	Bi-weekly premium
Self only	QQ4	\$71.80
Self + one	QQ6	\$150.89
Self + family	QQ5	\$164.32



Questions?

Just call us at **1-877-459-6604 (TTY: 711)** 8 AM—6 PM in all time zones, or go to **AetnaFeds.com**



Connect live with our team

Chat with us online, watch webinars, schedule a one-on-one appointment and more. Just visit **AetnaFedsLive.com**

It's easy to enroll



STEP 1: Choose a plan

Review the brochure or visit **AetnaFedsLive.com** to find a plan.



STEP 2: Find your plan's enrollment code

They're listed in the rate charts in this brochure. You can also find them at **AetnaFeds.com**



STEP 3: Fill out the form

Check with your human resources department to see if you can enroll online using an agency system like MyPay, Employee Express or PostalEASE. Or you may need to submit a paper 2809 form. **Need a form or more information?** Go to **AetnaFeds.com/Enroll**

Aetna, CVS Pharmacy® and MinuteClinic, LLC (which either operates or provides certain management support services to MinuteClinic-branded walk-in clinics) are part of the CVS Health® family of companies.

Aetna is not responsible for services received at MinuteClinic locations.

This is a brief description of the features of this Aetna plan. Before making a final decision, please read the Plan's Federal brochure(s). All benefits are subject to the definitions, limitations and exclusions set forth in the Federal brochure. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Log in to **Aetna.com** for a complete list of other participating providers and pharmacies. Aetna does not provide care or guarantee access to health services. 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 the number on the back of your ID card if you do not receive your mail-order drugs within this timeframe. Aetna Medicare Rx offered by SilverScript is a group standalone Medicare Prescription Drug Plan (PDP). This Plan is offered by SilverScript Insurance Company, which has a Medicare contract. SilverScript Insurance Company and Aetna are affiliated companies. Enrollment in the Plan depends on Medicare contract renewal. Aetna® and CVS Pharmacy® are a part of the CVS Health® family of companies. 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. To send a complaint to SilverScript, call the Plan or the number on your member ID card. To send a complaint to Medicare, call **1-800-MEDICARE** (TTY users should call **1-877-486-2048**), 24 hours a day/7 days a week. There may be fees associated with a Health Savings Account ("HSA"). These are the same types of fees you may pay for checking account transactions. Please see the HSA fee schedule in your HSA enrollment materials for more information. Health information programs provide general health information and are not a substitute for diagnosis or treatment by a physician or other health care professional. Incentive-based activity awards will only be given for completing select wellness programs as determined by the plan sponsor. For more information about Aetna plans, refer to **AetnaFeds.com**