

SEHP Aetna Medicare Advantage 2021 plan options

Follow these simple steps to choose Aetna® medical and prescription drug coverage:

1. Review key coverage highlights of Aetna's three medical and three Part D plan options. Part D is included with a Medicare Advantage plan. For complete coverage details, monthly plan premium costs and other important information, see your SEHP enrollment booklet or visit <https://healthbenefitsprogram.ks.gov>.
2. Select one medical and one Part D plan.
3. Want help understanding the differences between the Aetna plan choices? Call **1-844-233-1939 (TTY: 711)**, Monday through Friday, 8 AM to 9 PM ET.
4. To enroll, visit sehp.member.hrissuite.com.

Plan name	Freedom	Liberty	Elite
Annual deductible	\$0	\$0	\$150 (Waived for emergency room, ambulance in the US, and preventive care)
Annual maximum member would Potentially pay (plan covers 100% after that)	\$1,000	\$500	\$150

Key medical benefits: This is what you pay for network & out-of-network providers

Primary care physician visits	\$10	\$15	\$0
Physician specialist visits	\$25	\$15	\$0
Preventive services	\$0	\$0	\$0
Outpatient lab and x-ray	\$0	\$15	\$0
Urgently needed care	\$30	\$15	\$0
Emergency care	\$80	\$50	\$0
Inpatient hospital care	\$150 copay per day, days 1-5	\$0 per stay	\$0
Outpatient surgery	\$150	\$0	\$0
Home health agency care	\$0	\$0	\$0
Chiropractic services	\$20	\$15	\$0
Durable medical equipment	20%	15%	\$0
Podiatry services	\$25	\$15	\$0
Diabetic supplies	\$0	\$0	\$0

Key extra benefits

Hearing aid	\$500 reimbursement every 12 months
Fitness benefit	SilverSneakers® at no extra cost to you
Telehealth	Virtual visit with your PCP or an urgent care clinic for the cost of an in-person visit



Prescription drug plan options to pair with an Aetna Medicare Advantage medical plan

Choose one of these drug plans

Drug plan name	Aetna Standard Rx	Aetna High Rx	Aetna Low Rx
Rx deductible	\$0	\$0	\$350
Pharmacy network	S2 (Standard Network)	P1 (Preferred Network)	P1 (Preferred Network)
Formulary	GRP B2	GRP B2	GRP B2
Tiers	5	5	5
30 day supply vs. 90 day supply cost sharing	1. Retail - 30 day supply 2. Retail or preferred mail order - 90 day supply	1. Standard retail - 30 day supply 2. Preferred retail - 30 day supply 3. Standard retail or mail order - 90 day supply 4. Preferred retail or mail order - 90 day supply	1. Standard retail - 30 day supply 2. Preferred retail - 30 day supply 3. Standard retail or mail order - 90 day supply 4. Preferred retail or mail order - 90 day supply
Initial coverage limit (ICL)	\$4,130		
Tier 1 - Preferred generic	\$2 / \$0	25%, max \$30 / 20%, max \$30 / 25%, max \$45 / 20%, max \$45	\$15 / \$0 / \$30 / \$0
Tier 2 - Generic	\$6 / \$18	25%, max \$30 / 20%, max \$30 / 25%, max \$45 / 20%, max \$45	\$20 / \$10 / \$40 / \$20
Tier 3 - Preferred brand (& high cost generic)	\$47 / \$141	30 day: 25%, max \$100 90 day: 25%, max \$150	\$47 / \$47 / \$94 / \$94
Tier 4 - Non preferred brand (& high cost generic)	\$100 / \$300	30 day: 50%, max \$150 90 day: 50%, max \$225	50%
Tier 5 - Specialty	33% (limited to one month supply)	25% (limited to one month supply)	25% (limited to one month supply)
Coverage gap	Prior to \$6,550 TrOOP		
Tier 1 - Preferred generic	Same as above	N/A	Same as above
Tier 2 - Generic	Same as above	Same as above	Same as above
Tier 3 - Preferred brand (& high cost generic)	25%	Same as above	25%
Tier 4 - Non preferred brand (& high cost generic)	25%	Same as above	25%
Tier 5 - Specialty	25% (limited to one month supply)	Same as above	25% (limited to one month supply)
Catastrophic coverage	After \$6,550 TrOOP		
All tiers	Greater of 5% of the cost of the drug - or - \$3.70 for a generic drug and \$9.20 for all other drugs		
Precertification for Rx	Applies		
Step therapy	Applies		
Non Part D rider	N/A		

Government required disclosures:

Aetna Medicare is a HMO, PPO plan with a Medicare contract. Enrollment in our plans depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. 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 7-14 days. You can call 1-888-792-3862 (TTY: 711), 24 hours a day, 7 days a week 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. Out-of-network/non-contracted providers are under no obligation to treat Aetna members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. Participating physicians, hospitals and other health care providers are independent contractors and are neither agents nor employees of Aetna. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change. 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.

StateofKansas.AetnaMedicare.com

