



MERITAIN[®]
HEALTH

An Aetna Company

A Quick Look at Your Health Plan

Abbington Management Corp.

Group #19255

When you enroll with Meritain Health[®], you're taking the next step towards a healthier, more balanced you.

It's important for you to understand how your health plan works. This way, you can make the changes you want in your health and in your life.

Get the support you need for a healthy balance

Chances are, you try every day to keep a healthy balance in your life. But time can get away from you, or you might put other details first. That's why we're here: to help you focus and to support you each step of the way. You can think of your health care benefits as your resource to protect your body, mind and spirit.

www.meritain.com

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Benefit Highlights

Protecting your healthy balance with preventive care



Question:

Which is better: Taking an hour or two out of your busy day to have your annual checkup—or missing hidden symptoms and paying the price in sick days, copays and missed events?



Answer:

Nothing makes more sense in these busy times than preventing illness before it happens. That's why your plan offers excellent benefits for preventive services.

Early detection, proper nutrition, and routine exercise are the keys to living a long and healthy life, and will also help to control long-term health care costs. Your employer encourages you to take the necessary steps—available to you right now—to ensure early detection and treatment of diseases.



Built into your health plan are preventive benefits that cover:

- Well-child care.
- Physical exams.
- Mammogram.
- Bone density test.
- Prostate blood exam.
- Pap smear.
- Fecal occult screening.

Save when you visit network providers

This plan offers a network of doctors and other health care professionals who have agreed to accept lower amounts than their standard charges, just for members of this plan. These lower amounts are negotiated and predetermined. That means when you see a network provider, your share of costs is based on a lower charge—so your costs are lower, too. Network providers are conveniently located in both urban and rural areas. Lower costs and convenient doctors and clinics are important ways that Meritain Health can support your efforts to stay well and have a healthy lifestyle—or to get care as simply as possible when you're sick.

Remember: if you go outside the network, you may still have benefits, but your share of costs will be higher, and the amount you pay will not be based on a lower rate.



Benefit Highlights

Health care for you and your family

When sickness or injury throw you off balance

Knowing you're in good hands when you're sick is one of the most comforting feelings there is. You can be assured your health plan has everything you'll need to get the right care if something goes wrong.

Balancing health care costs: what you pay and what the plan pays

The benefits schedule in this packet shows how much you pay for care, and how much the plan pays. It's a listing of what is and isn't included in your benefits plan. For more detailed information, see your Summary Plan Description (SPD).

After you pay your annual deductible and any up-front copays, the plan begins to pay a percentage of your provider's charges, for example 80 percent. The remaining percentage, for example 20 percent, is your responsibility—your *out-of-pocket* costs. You're protected from financial hardship by a maximum out-of-pocket amount each year—the most you'll have to pay before the plan covers costs at 100 percent. (Copays do not always apply to the out-of-pocket maximum. This varies by plan.)

File claims quickly and easily

If you visit a provider in your network, you shouldn't need to submit a claim for services or pay at the time of your service with the exception of a copay, if applicable. Your provider will submit the claim on your behalf and you will later receive a bill for any out-of-pocket or other balances due.

If you have visited an out-of-network provider, you may need to file a claim form to ensure that the service is billed properly. Claim forms can be found online at www.meritain.com or you can obtain one from your Human Resources department. Submit the claim by fax or by mail to the fax number or mailing address listed on the claim form.

Know your “numbers”

Are you secretly at risk for serious medical conditions?

It's possible to be at risk for developing serious conditions such as heart disease or diabetes, but not know it because you feel fine. That's why it's important to have your vitals checked regularly, such as your cholesterol levels, glucose and blood pressure (as advised by your doctor) and know your “numbers.” It helps to be able to understand what the numeric results of your clinical lab tests could mean and discuss any concerns with your doctor. An ounce of prevention is worth a pound of cure!

Benefit Highlights

Support for your health journey

Your employer wants you to get the best, most appropriate care, when and where you need it. That's why your plan includes the extra expertise of **Meritain Health's Medical Management program**. The Medical Management nurses are like personal health consultants who can help you make decisions about certain types of care you and your doctor may be considering. Registered nurses review treatment plans, then help to assure that you get the right treatment in the right setting, when you need it.

Some of these services include:

- Before admission to the hospital for elective or non-emergency services.
- Within 48 hours (two working days) after an emergency or urgent hospital admission.
- Before elective inpatient, outpatient or ambulatory surgery.
- Before inpatient substance-abuse treatment or treatment for a mental health disorder.
- Before entering an extended-care, rehabilitation or skilled-nursing facility.

Consult your Summary Plan Description for a complete listing of health care services that require precertification with a medical management nurse.

Vision discount program

To lead your busy life, you need to protect your vision, so your benefit plan includes a vision care discount program through **VSP**. This voluntary program provides vision care discounts on eye exams, eyeglasses and contact lenses. To obtain your discount, visit any participating VSP vision care provider and show your Meritain Health ID card. Your vision discount will be applied at the time of your visit. To locate a participating VSP provider, go to www.vsp.com.

On-demand medical advice from qualified physicians

Your Teladoc® program

With Teladoc, you can contact board-certified, licensed doctors by phone or email, 24 hours a day!

Sometimes you need to speak with a doctor when it's not possible to attend an office visit. That's why the Teladoc program is available to you and your family, and can be used in a variety of ways:

- During weekends, holidays or after business hours, when general practitioners don't typically schedule appointments.
- When you can't attend a medical appointment, such as when traveling or at work.
- If you need a prescription medication or refill for a common condition.

Contact a Teladoc physician at 1.800.835.2362, or send an email by logging in at www.meritain.com for advice on commonly treated conditions.

Some of these services include:

- Headaches/migraines
- Stomach ache/diarrhea
- Respiratory infections
- Urinary tract infections
- Prescription refills*
- Many other conditions

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Benefit Highlights

Nationwide provider access at a discount

When you and your family seek health care services, you have access to Aetna's broad national provider network of health care providers and facilities. Aetna's network contains more than 664,000 participating physicians and ancillary providers, with 5,667 hospitals.¹ When you visit providers in the Aetna network, you will receive services at strong, negotiated rates, helping you to save on the cost of health care.

¹ <https://www.aetna.com/about-us/aetna-facts-and-subsiidiaries/aetna-facts.html>


Locate your preferred providers



With Aetna's comprehensive provider participation, many of your preferred doctors may already be in the Aetna network. To verify whether or not a doctor or health care facility participates, visit <https://www.aetna.com/dsepublic/#/mymeritain>

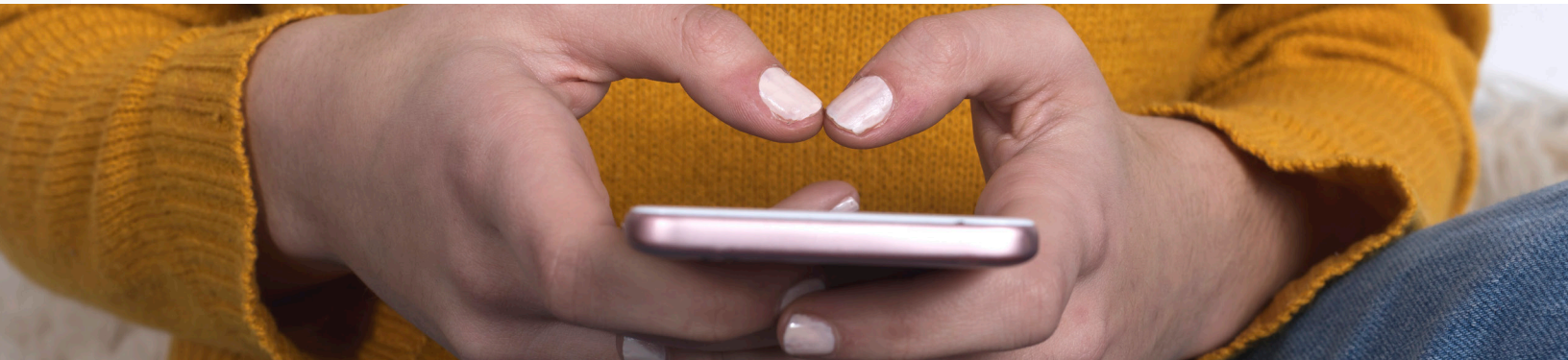
How to access your mobile web app

iPhone®

- Once you log in to your member website through www.meritain.com, click the  icon at the bottom of the page.
- Then, scroll through the menu options and select *Add to Home Screen*.
- Click *Add* in the upper right-hand corner.
- Your Meritain Health app logo will then be installed and added to your home screen.
- Then, you'll be able to log in through the app instead of going through the web page.

Android™

- Once you log in to your member website through www.meritain.com, you'll be prompted with the pop-up message *Add Meritain Health to Home Screen* at the bottom of the page. Click this message.
- Then, you can click *Add* to add the logo to the home page or *Cancel* to opt-out.
- Your Meritain Health app logo will then be installed and added to your home screen.
- Launch the app from your home screen and log in.



Not all services are covered. See plan documents for a complete description of benefits, exclusions and limitations of coverage. Providers are independent contractors and are not agents of Meritain Health. Provider participation may change without notice. Meritain Health and Aetna do not provide care or guarantee access to health services.

Benefits Summary

POS II Plan		
	IN-NETWORK	OUT-OF-NETWORK
MAJOR MEDICAL		
Deductible	\$3,000/Individual \$6,000/Family	\$4,000/Individual \$8,000/Family
Out-of-Pocket Maximum (Including Deductible, Copayments & Coinsurance)	\$5,000/Individual \$10,000/Family	\$10,000/Individual \$20,000/Individual
PREVENTIVE CARE	100% - No Deductible	60% per Visit after Deductible
PHYSICIANS OFFICE VISITS	\$25 then the plan pays 100% - No Deductible	60% per Visit after Deductible
SPECIALIST OFFICE VISITS	\$50 then the plan pays 100% - No Deductible	60% per Visit after Deductible
URGENT CARE	\$50 then the plan pays 100% - No Deductible	60% per Visit after Deductible
EMERGENCY ROOM	\$200	\$200
HOSPITAL INPATIENT CARE	80% per Admission after Deductible	60% per Admission after Deductible
HOSPITAL OUTPATIENT CARE	80% per Visit after Deductible	60% per Visit after Deductible
PRESCRIPTION DRUG CARD		
Retail		
Generic	\$10	20% + Copay
Preferred	\$45	20% + Copay
Non-Preferred	\$70	20% + Copay
Mail Order (up to 90 days supply)		
Generic	\$25	20% + Copay
Preferred	\$112.50	20% + Copay
Non-Preferred	\$175	20% + Copay
<p>This is a brief outline of your benefits. It is not a Summary Plan Description or intended to replace the Schedule of Benefits contained within the Plan Document.</p> <p>If any provision is inconsistent with the language of the Plan Document, the Plan Document will govern.</p>		

Your Guide to Enrollment



Completing your enrollment

Complete, sign and return your enrollment form to your employer within 31 days of your eligibility date whether you're enrolling or declining benefits.

- **Write clearly.** If your form is unreadable, your enrollment may be delayed, or incorrect.
- **Don't forget the back side.** Missing or incomplete information will delay your enrollment.
- **Sign and date your enrollment form.** Remember to sign and date the form, even if you're declining benefits.

Helpful tips

- Your health care plan includes a network of providers you can visit for health care services. When you visit providers in this network, you will receive the best service rate. Call the provider information number for participating providers.
- Your name, identification number, medical group number and your group name, are used to identify you and your covered dependents' benefits.
- Your medical copays are listed for you and your providers.
- Your pharmacy coverage information is listed on the front of your card, and includes the Meritain Health Pharmacy Solutions customer service number and prescription copays.
- Please ensure that you precertify with medical management, if required.
- All claims should be submitted to Meritain Health at the address listed on the back of your card.
- You or your provider can call Meritain Health to verify eligibility of benefits or check on your claims status.
- You can call for information on a doctor or specialist who is close to you and serves your specific needs.



All eligible employees must complete the enrollment form, whether you're choosing this plan or declining benefits. Your enrollment form is included in the back of this packet.

Your Guide to Enrollment


The final step toward better balance and better living

After you've completed enrollment, your employer has approved it and after any waiting period has passed, your benefits will be effective.

Your Meritain Health ID card will be on its way to you soon. The card shows Meritain Health as your health plan administrator. Keep it in your wallet and carry it with you. If you misplace your ID card, use the Meritain Health mobile app to access your member portal to get a copy of your ID on the go!

Sample ID card

Card front

 Customer Service and Eligibility Inquiries 800.925.2272 www.MERITAIN.com	
Member	Medical Plan
SAMPLE GROUP	Coverage: Aetna Network ♥ aetna Plan: Aetna Choice POS II
Group #: 11378	Deductible and Out of Pocket (Ind /Fam): INN Ded: \$XXXX \$XXXX INN OOP: \$XXXX \$XXXX OON Ded: \$XXXX \$XXXX OON OOP: \$XXXX \$XXXX OV \$XX Spec \$XX UC \$XX ER \$XXX Hosp \$XXX
Member: FIRST NAME LAST NAME Member ID: 1234567891	Pharmacy Plan
Division: AA1	RXBIN: 004336 ♥ CVS caremark RXPCN: ADV Member: 866.475.7589 RXGRP: RX2738 Pharmacy: 800.364.6331
Dependent(s): DEPENDENT NAME 1 DEPENDENT NAME 2 DEPENDENT NAME 3	Deductible and Out of Pocket (Ind /Fam): INN Ded: \$XXXX \$XXXX INN OOP: \$XXXX \$XXXX OON Ded: \$XXXX \$XXXX OON OOP: \$XXXX \$XXXX

Card back

Medical Claims Submission	Eligibility
Mail All Claims & Correspondence to: Meritain Health PO Box 853921 Richardson, TX 75085-3921 EDI: Change Healthcare 41124 or McKesson/Relay Health 1708 or 4561	Call 800.925.2272 or visit www.MERITAIN.com for inquiries regarding eligibility, claims and plan benefits.
NY Electing	Utilization
Aetna participating Doctors and Hospitals are independent providers and are neither agents nor employees of Aetna.	For Precertification call: 800.242.1199. Failure to comply with your plan's precertification requirements may result in a reduction of benefits.
Contact 800.343.3140 for assistance in locating an In-Network Provider.	24-Hour Automated Customer Service: 800.566.9311 or www.MERITAIN.com
Printed:	 PHCS SELF-FUNDED INDEX #: 009



Convenient Tools and Resources

Your personalized member website

Once enrolled as a Meritain Health member, you will have access to the **Meritain Health member website**. When you log in, you'll find everything you need to know about your benefits—from eligibility, to enrollment, to what's covered. It's another way we're working with you to help you get the most from your benefits—so you can live a life that's balanced and informed.

Registration for the member website is easy

If you're already registered to access your online account, simply enter www.meritain.com into your browser and login from the homepage.

If you're not yet registered, it's OK. Registration is an easy three-step process.

1

Scan the QR code and click on the link to register or visit www.meritain.com. Then, in the top right corner, click *Register*.



2

Next, select *Member* under *I am a* and enter your group ID. You can find your group ID on the front of your member ID card. (If you are new to the plan, you will soon receive your member ID card in the mail.) Then, click *Continue*.

Please note: You may set up a login for yourself, as well as any children under age 18 who are covered by your plan. For privacy purposes, your spouse and dependents over the age of 18, covered by the plan, must each establish logins to access their individual information.

3

You will need to fill in your:

- Group ID (located on your member ID card).
- Member ID (located on your member ID card).
- Date of birth.
- Name.
- ZIP code.
- Email address.

You can then create a username and password. After that, you will be asked to confirm your email address—then you're done! The next time you log in, just use the same username and password.



Members have the right to ask their health plan to place restrictions on (i) the way the health plan uses or discloses their PHI for treatment, payment or health care operations; and (ii) the health plan's disclosure of their PHI to persons who may be involved in their health care or payment thereof (e.g., family members, or close friends).

Convenient Tools and Resources

Important plan contacts

What do you need help with?

My medical/vision benefits

In-network doctors or hospitals

Meritain Health Customer Service **1.800.925.2272**

Access your Meritain Health member portal at
www.meritain.com

The Aetna Choice® POS II provider network

Aetna provider line **1.800.343.3140**

www.aetna.com/docfind/custom/mymeritain

My prescription drug benefits

Meritain Health Pharmacy Solutions Customer Service

1.866.475.7589

Precertification

Meritain Health Medical Management

1.800.242.1199

