

## Do you live outside of the region and cannot access a Prisma Health inVio Provider?

### Things to know:

The Aetna Choice HDHP and the Aetna Select EPO medical plans both offer access to the Aetna National Network if you do not live near a Prisma Health inVio network provider or facility (Tier 1).

### Terms to know:

Navigating benefits terminology can be confusing. Use the glossary below to help.

**Premium:** The amount you pay out of each paycheck.

**Deductible:** The amount you pay for covered medical expenses and some prescription medications before the medical plan starts to pay. The deductible applies differently for the 2 medical plans:

- Aetna Select EPO – the deductible applies to most inpatient and outpatient providers and facilities. Office visits, Urgent Care/Emergency Care, and most medications are covered with a copay and no deductible.
- Aetna Choice HDHP – the full deductible applies to all office visits, inpatient and outpatient services, and most prescriptions

*\*Preventive services do not apply toward the medical deductible on either plan*

**Copay:** A flat fee you may pay for certain services and prescription drugs on some plans.

**Coinsurance:** A percent of the cost you incur after you have met your deductible.

**Out-of-Pocket Maximum:** The most you could pay for covered services in the plan year. When you reach the out-of-pocket maximum, the plan pays 100% of your remaining eligible expenses.

**High Deductible Health Plan (HDHP):** Under this plan, you will be responsible for all medical and pharmacy costs until you reach your deductible, then the plan begins sharing costs (coinsurance). You are 100% covered for preventive care services. You will also have access to a Health Savings Account (HSA).

**Health Savings Account (HSA):** An account set up by Prisma Health which allows you to use pre-tax dollars to pay for eligible health expenses and could save you money down the road for retirement. You are only eligible for an HSA with an HDHP.

**Tier 2 (Aetna Standard Savings Network):** Access the **Aetna National Provider Network** for the best savings.

**Tier 3 (Out-of-network):** A choice to use an **Out-of-Network provider** with a higher deductible and out-of-pocket than Tier 2 with no limit on out-of-pocket expenses. Out-of-network services are only

available in the Aetna Choice HDHP and for behavioral health, urgent care and emergency care services in the Aetna Select EPO plan.

## **Plan Options:**

### **Aetna Choice HDHP**

If you are enrolled in the Aetna Choice HDHP medical plan, you have access to the Aetna National Network of providers (Tier 2) and/or Out-of-network providers (Tier 3).

To find a provider, visit [Aetna Choice HDHP Network Providers](#). With these Aetna Network Providers (Tier 2), you have access to:

- discounts that are also available through the inVio Network of providers
- a higher deductible (\$3,500/individual or \$7,000/family) and out of pocket maximum (6,250/individual or \$12,500/family) than using a Tier 1 inVio Network provider.
- A lower percentage of coverage than using a Tier 1 inVio Network provider
- 100% coverage for preventive services like annual physicals, mammograms, colonoscopies, etc.
- Emergency Care and Behavioral Health Services covered the same as if using a Tier 1 inVio network providers

With Out-of-network Providers (Tier 3), you have access to:

- Access to an expanded network of providers, but you may also receive “balance due” bills if the provider charge’s more than the plan’s allowable amount
- A higher deductible (\$4,000/individual or \$8,000/family) and out of pocket maximum (unlimited for individual or family) than using a Tier 1 inVio Network provider or Tier 2 Aetna Network provider
- A lower percentage of coverage than using a Tier 1 inVio Network provider or Tier 2 Aetna Network provider.
- Emergency Care covered the same as Tier 1 inVio Network providers

### **Aetna Select EPO**

If you are enrolled in the Aetna Select EPO medical plan, you have access to the Aetna National Network of providers (Tier 2) and/or a select set of Out of network providers (Tier 3).

To find a provider, visit [Aetna Select EPO Network Providers](#). With these Aetna Network Providers (Tier 2), you have access to:

- discounts that are also available through the inVio Network of providers
- a higher deductible (\$1,500/individual or \$4,500/family) and out of pocket maximum (\$6,250/individual or \$12,500/family) than using a Tier 1 inVio Network provider.
- A higher copay for primary care physicians (\$40) and/or specialists (\$80) than if using a Tier 1 inVio Network provider
- A lower percentage of coverage than using a Tier 1 inVio Network provider.

- 100% coverage for preventive services like annual physicals, mammograms, colonoscopies, etc.
- Emergency Care, Urgent Care, and Behavioral Health Services covered the same as Tier 1 inVio network providers

With Out-of-network Providers (Tier 3), you have access to:

- Access to an expanded out of network group of providers for Emergency Care and Behavioral Health services, but you may also receive “balance due” bills if the provider charge’s more than the plan’s allowable amount
- No limit to the out-of-pocket maximum compared to using a Tier 1 inVio Network provider or Tier 2 Aetna Network provider
- A lower percentage of coverage than using a Tier 1 inVio Network provider or Tier 2 Aetna Network provider for Behavioral Health Services.
- Emergency Care and Urgent Care services covered the same as Tier 1 inVio Network providers