

Aetna Advantage Plans for Individuals, Families and the Self-Employed

Georgia

**A Guide to
Understanding
Your Choices and
Selecting a Quality
Health Plan**

We want you to knowSM



Aetna makes it easy for you to choose a health plan



They say that nothing is more important than your health.

They're right. And that's what makes health insurance such an essential part of your life — even if you're not on an employer's group insurance plan. In fact, especially if you're not on a group plan, you need to take charge of your health...and your health insurance needs.

At Aetna, we're here to help. Perhaps you've just left a group plan. Or you're looking for an option other than COBRA. You may want to switch from your current individual health insurance. Or you're not currently insured. Maybe you've just received another big rate increase and you're looking for something more affordable. Whatever your situation, you should know that Aetna offers a variety of quality health insurance plans for members and their families.

So, are you a new graduate or a newlywed? Self-employed or between jobs? An empty nester or early retiree? Wherever you are in life, we make it easy for you to understand your choices and select a quality health plan. We'll guide you through the process and help you choose the right health insurance for your personal needs.

Why Aetna?

When you choose Aetna as your health insurance provider, you're gaining a lot of advantages. Among them:

Easy to understand.

Yes, insurance can be simple. We provide you with straightforward language and easy-to-understand benefits.

Easy to choose.

We'll guide you and help you select from plans designed to fit your personal situation. Aetna's participating provider network offers you a wide selection of physicians and hospitals.

Easy to afford.

Because we offer a variety of premium payment options, you choose how much to spend: in premiums versus out-of-pocket expenses.

Easy to manage.

Thanks to easy-to-use Web-based tools, you can get valuable health and benefits-related information, quickly locate Aetna network physicians in your area, and manage your account — right online!



How to use this booklet

When we say we're going to help make choosing health insurance easy for you, we mean it. This booklet will walk you through the information you need to make a smart decision. Here are the steps you might want to take:

- 1) Read about Aetna's health insurance plans for individuals, starting on page 3.
- 2) What's going on in your life right now? The answer can help you choose a plan, starting on page 4. (If you just want to cut to the chase, the at-a-glance plan comparison chart on page 11 can help you quickly determine your health insurance priorities.)
- 3) Review each plan's specific features, and determine which ones are most important to you, starting on page 12.
- 4) Follow the enrollment instructions on page 16, then complete and mail the enclosed enrollment form, or apply online.

Aetna's Georgia Network Map

AREA 1

Atlanta, GA

| | | |
|-----------|----------|------------|
| Barrow | Douglas | Lamar |
| Bartow | Fayette | Madison |
| Butts | Floyd | Newton |
| Carroll | Forsyth | Oconee |
| Chattooga | Fulton | Oglethorpe |
| Cherokee | Gordon | Paulding |
| Clarke | Gwinnett | Pickens |
| Clayton | Hall | Pike |
| Cobb | Haralson | Polk |
| Coweta | Henry | Rockdale |
| Dawson | Jackson | Spalding |
| Dekalb | Jasper | Walton |

Chattanooga, TN

| | | |
|---------|------|--------|
| Catoosa | Dade | Walker |
|---------|------|--------|

LaGrange, GA

| | |
|-------|-------|
| Heard | Troup |
|-------|-------|

Columbus, GA

| | | |
|---------------|--------|----------|
| Chattahoochee | Harris | Muscogee |
|---------------|--------|----------|

AREA 2

South Georgia-NovaNet PPO

| | | |
|----------|------------|----------|
| Atkinson | Glynn | Screven |
| Bacon | Grady | Seminole |
| Baker | Greene | Stewart |
| Ben Hill | Hancock | Sumter |
| Berrien | Irwin | Taylor |
| Bleckley | Jeff Davis | Telfair |
| Brantley | Jenkins | Terrell |
| Brooks | Johnson | Thomas |
| Calhoun | Lanier | Tift |
| Camden | Lowndes | Toombs |
| Charlton | Macon | Treutlen |
| Clay | Marion | Turner |
| Clinch | Mcintosh | Ware |
| Colquitt | Meriwether | Wayne |
| Cook | Mitchell | Webster |
| Decatur | Montgomery | Wheeler |
| Dooly | Pierce | Wilcox |
| Early | Putnam | Worth |
| Echols | Quitman | |
| Emanuel | Schley | |

Augusta, GA / Aiken, SC

| | | |
|-----------|------------|--------|
| Burke | Lincoln | Warren |
| Columbia | Mcduffie | Wilkes |
| Glascock | Richmond | |
| Jefferson | Taliaferro | |

AREA 3

Macon, GA

| | | |
|----------|---------|------------|
| Baldwin | Jones | Pulaski |
| Bibb | Laurens | Twiggs |
| Crawford | Monroe | Washington |
| Houston | Peach | |

Savannah, GA

| | | |
|---------|-----------|----------|
| Appling | Chatham | Long |
| Bryan | Effingham | Tattnall |
| Bulloch | Evans | |
| Candler | Liberty | |

Albany, GA

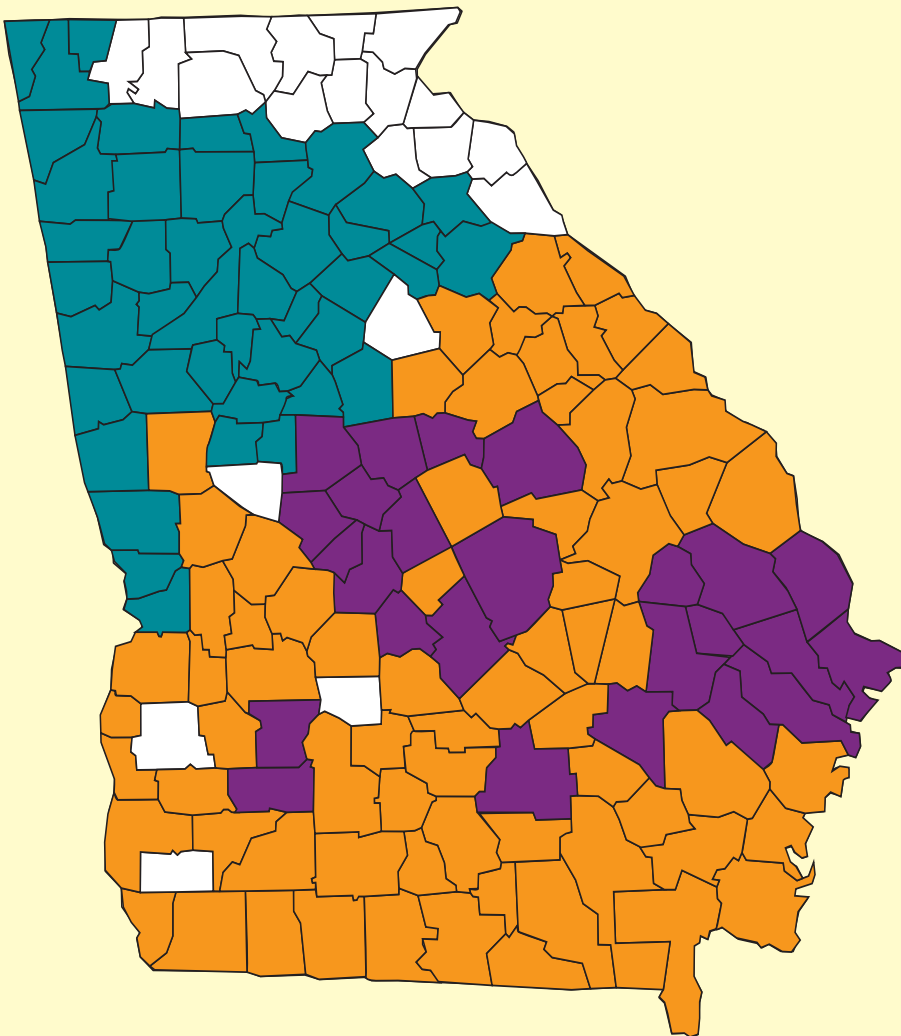
| |
|-----------|
| Dougherty |
| Lee |

Eastman, GA

| |
|-------|
| Dodge |
|-------|

Douglas, GA

| |
|--------|
| Coffee |
|--------|



- Area 1: Atlanta, GA; Chattanooga, TN; LaGrange GA; Columbus GA
- Area 2: South Georgia-NovaNet PPO; Augusta, GA / Aiken, SC
- Area 3: Macon, GA; Savannah, GA; Albany GA; Eastman GA; Douglas GA

Choose the Aetna Advantage plan that best fits your needs

We offer three types of Aetna Advantage health insurance plans in Georgia. All three are PPO plans, which give you the freedom to go directly to any physician, hospital or specialist for covered services.

Your Aetna Advantage plan choices are:

Georgia PPO

With the Georgia PPO plan, you can visit any doctor or hospital you choose. (Your out-of-pocket costs will be lower if you select a provider from Aetna's wide network of participating physicians and hospitals.) In addition, there are no claim forms to fill out when you visit a network provider, and no referrals are required to see a specialist.

Georgia PPO Value

In addition to all the plan features described above, the Georgia PPO Value plan offers you one more: lower premium payments. (That's the "Value" part.) In exchange for lower premiums, you will have a limited number of doctor's office visits.*

Georgia High-Deductible PPO (HSA Compatible)**

With the Georgia High-Deductible PPO plan, you'll pay lower premiums in exchange for higher annual deductibles — at least \$2,750 for individuals and \$5,500 for families. A key advantage of this plan is that it can be paired with a Health Savings Account (HSA), a special account that lets you pay for qualified medical expenses with tax-advantaged*** funds.

What does "tax-advantaged" mean? It means you or an eligible family member can make contributions to your HSA tax-free. Those dollars earn interest tax-free. And when you make withdrawals+ to pay for qualified health care expenses, they're tax-free, too.

An HSA has other advantages as well. Among them:

- You own your HSA, so even if you change jobs or health insurance plans, the money in your account is yours to keep.
- Any money remaining in your HSA at the end of the year rolls over to the next year. You don't lose it.
- You can withdraw money directly from your HSA to cover qualified expenses. Or, you can allow the account to grow over time and use it to help pay for future health-related expenses — like long-term care insurance premiums, COBRA premiums and certain retiree expenses.



* Please refer to the non specialist and specialist office visit limitations listed on page 13 of this brochure.

** Based upon Treasury guidance as of print dates. Health Savings Accounts cannot be opened on a child only policy. The high deductible health plan may be purchased for a child but the parent/guardian may not open an HSA on their behalf.

*** Consult with your tax advisor to determine eligibility requirements, contribution limits and tax advantages for participation in the HSA plan.

+ Aetna HealthFund HSA withdrawals are to be used for qualified medical expenses. Withdrawals will be made at the Account Holder's discretion. Withdrawals that are not for qualified medical expenses are taxable and will be subject to penalty taxes in certain circumstances.

So, what's going on in *your* life?

Life changes. Very quickly. And as it does, so do your priorities. What was all fine and good yesterday may not be appropriate today.

The circumstances of your life can determine the type of health coverage you need. That's why Aetna Advantage Plans for Individuals have been designed to fit people in specific places in life.

So, do any of these descriptions sound like you?



New Graduate?

First, congratulations! Ready to conquer the world? Thinking big thoughts? Well, one of those thoughts should be about health coverage. Since you're probably on a budget, you might want to look for an affordable policy with low monthly payments and modest out-of-pocket costs. Let us be your guide.



Here are some options that may be right for you.

If you use only basic health care services and want to keep your monthly payments low, consider:

PPO 5000

PPO Value

If you visit the doctor often and don't want to pay a lot for these visits, consider:

PPO 500

PPO 1500

If you want a balanced mix of low cost and high coverage levels, consider:

PPO 1500

PPO 2500

PPO Value



Raising A Family?

Children tend to visit the doctor more than adults do. So you may be looking for health coverage with low fees for office visits, low monthly payments, and caps on your out-of-pocket expenses. And of course, you can benefit from quality preventive care for your entire family.

Getting Married?

If you're reconsidering your health coverage needs, you're not alone. Most newlyweds are doing the same thing. Since you're probably on a pretty tight budget, you may want an affordable plan with low monthly payments — but also one that provides for quality preventive care, prescription drug coverage, and financial protection to help safeguard your assets.

Here are some options that may be right for you.

If you use only basic health care services and want to keep your monthly payments low...

PPO 5000

PPO Value

If you're looking to balance low cost and quality coverage, consider:

PPO 1500

PPO 2500

PPO Value

If robust coverage is more important to you than the lowest possible cost, consider:

PPO 500



Here are some plans that may suit you.

If you use only basic health care services and want to keep your monthly payments low...

PPO 5000

PPO Value

If you don't want to pay a lot for frequent doctor visits for you and the kids, consider:

PPO 500

PPO 1500

If robust coverage is more important to you than the lowest possible cost, consider:

PPO 500



Between Jobs?

While you're lining up your next career move, you may want more affordable health coverage with low monthly costs — but also that covers you for hospital stays and emergencies. There may be better alternatives than COBRA, and we're here to help guide you through them.

Here are options that may be right for you.

If you use only basic health care services and want to keep your monthly payments low...

PPO 5000

PPO Value

If you're seeking a balance of low cost and quality coverage, consider:

PPO 1500

PPO 2500

PPO Value

If you want a plan that works with an HSA, consider**:

High-Deductible PPO 1 (HSA Compatible)

High-Deductible PPO 2 (HSA Compatible)

* Consult with your tax advisor to determine eligibility requirements, contribution limits and tax advantages for participation in the HSA plan.

+ For information on HSAs, please refer to page 3.

Self-Employed?

If you're on your own, you've probably discovered by now that health coverage isn't cheap.

But you know it's necessary to protect yourself and your business. Since you're footing the bill, affordability is likely a priority. We offer plans that provide quality hospitalization and prescription drug coverage, with monthly payments that won't consume your profits.

Here are some options you may want to consider.

If you use only basic health care services and want to keep your monthly payments low, consider:

PPO 5000

PPO Value

If you want to cap the amount you'll spend on total medical expenses each year, consider:

PPO 500

PPO 1500

PPO Value

If robust coverage is more important to you than the lowest possible cost, consider:

PPO 500

If you want a plan that works with an HSA, consider**:

High-Deductible PPO 1 (HSA Compatible)

High-Deductible PPO 2 (HSA Compatible)

* Consult with your tax advisor to determine eligibility requirements, contribution limits and tax advantages for participation in the HSA plan.

+ For information on HSAs, please refer to page 3.



Early Retiree?

Congratulations! It may be time for travel, leisure, maybe even starting a business. You may need guidance and affordable health coverage for you and your spouse, focusing on both your health needs and your financial security. Looking for coverage for prescriptions, hospital inpatient/outpatient services and emergency care?





Empty Nester?

When the kids leave home, you have endless adventures before you. What are your plans? Travel? Leisure? Reassessing your health coverage needs? We can help with the latter. You may be looking for a policy that combines financial security with quality coverage, such as prescription coverage, hospital inpatient/outpatient service and emergency care, from a plan that will follow you in your travels.

Here are options you may want to consider.

If you use only basic health care services and want to keep your monthly payments low...

PPO 5000

PPO Value

If you want to cap the amount you'll spend on total medical expenses each year, consider:

PPO 500

PPO 1500

PPO Value

If robust coverage is more important to you than the lowest possible cost, consider:

PPO 500

If you want a plan that works with an HSA, consider**:

High-Deductible PPO 1 (HSA Compatible)

High-Deductible PPO 2 (HSA Compatible)

* Consult with your tax advisor to determine eligibility requirements, contribution limits and tax advantages for participation in the HSA plan.

+ For information on HSAs, please refer to page 3.

Here are options that may suit you.

If you use only basic health care services and want to keep your monthly payments low, consider:

PPO 5000

PPO Value

If you want to cap the amount you'll spend on total medical expenses each year, consider:

PPO 500

PPO 1500

PPO Value

If robust coverage is more important to you than the lowest possible cost, consider:

PPO 500

If you want a plan that works with an HSA, consider**:

High-Deductible PPO 1 (HSA Compatible)

High-Deductible PPO 2 (HSA Compatible)

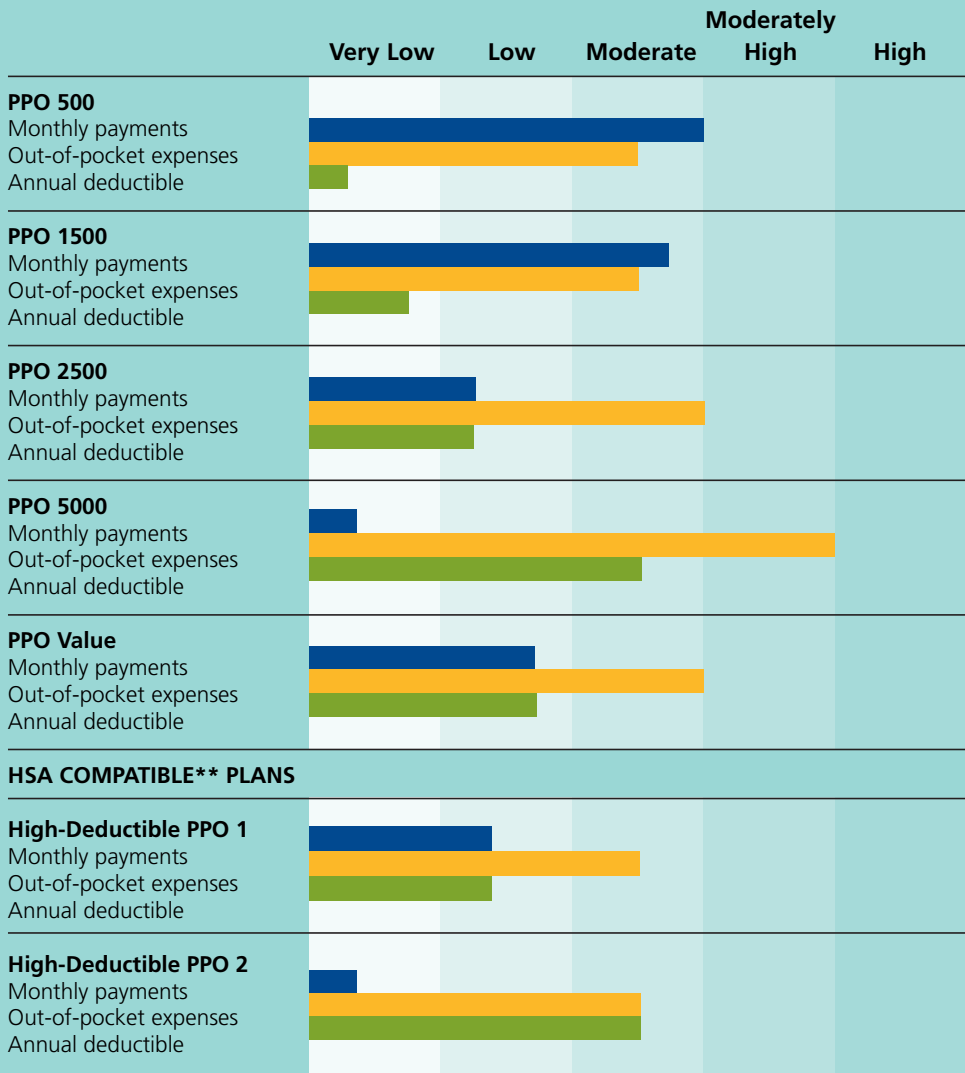


An at-a-glance comparison of Aetna's plans

Which one of our plans is right for you? A lot depends on your priorities. Do you want to keep your payments, or "premiums," as low as possible? Or are you willing to pay a little more each month to help minimize your out-of-pocket costs for services?



FEATURES/BENEFITS COMPARISON*



*Feature/Benefits Comparison is based on analysis of Aetna Advantage Plans with 7/1/05 effective dates. For more information on benefit levels, please refer to the benefit pages and/or the plan design documents.
 **Consult with your tax advisor to determine eligibility requirements, contribution limits and tax advantages for participation in the HSA plan.

This chart gives you a quick, at-a-glance look at all of Aetna's Advantage Plans for individuals in Georgia. It will help you determine your priorities and compare three key features across all the plans:

- Your payments, or premiums
- What you can expect to pay out of your pocket for services and treatment such as office visits and lab procedures (as opposed to what the plan pays for)
- Your annual deductible — that is, how much you'll pay out of pocket before the plan begins covering your expenses.

GEORGIA AETNA ADVANTAGE PLAN OPTIONS

| | GEORGIA PPO 500 | | GEORGIA PPO 1500 | | GEORGIA PPO 2500 | |
|--|----------------------------------|---|----------------------------------|---|----------------------------------|---|
| MEMBER BENEFITS | In-Network | Out-of-Network | In-Network | Out-of-Network | In-Network | Out-of-Network |
| Deductible Individual/Family | \$500/\$1,000 | \$1,000/\$2,000 | \$1,500/\$3,000 | \$3,000/\$6,000 | \$2,500/\$5,000 | \$5,000/\$10,000 |
| Coinsurance | 20% | 40% | 20% | 40% | 20% | 40% |
| Out-of-Pocket Maximum Individual/Family (includes deductible) | \$2,000/\$4,000 | \$2,500/\$5,000 | \$3,000/\$6,000 | \$4,500/\$9,000 | \$5,000/\$10,000 | \$7,500/\$15,000 |
| Lifetime Maximum* | \$5,000,000 | | \$5,000,000 | | \$5,000,000 | |
| Non-Specialist Office Visit (General Physician, Family Practitioner Pediatrician or Internist) | \$20 Copay (Ded. Waived) | 30% | \$25 Copay (Ded. Waived) | 30% | \$30 Copay (Ded. Waived) | 30% |
| Specialist Visit | \$30 Copay (Ded. Waived) | 30% | \$35 Copay (Ded. Waived) | 30% | \$40 Copay (Ded. Waived) | 30% |
| Hospital Admission | 20% | 40% | 20% | 40% | 20% | 40% |
| Outpatient Surgery | 20% | 40% | 20% | 40% | 20% | 40% |
| Emergency Room | \$150 copay (waived if admitted) | | \$150 copay (waived if admitted) | | \$150 copay (waived if admitted) | |
| Annual Routine Ob/Gyn Exam (Annual Pap/Mammogram) | Covered (Ded. Waived) | 30% | Covered (Ded. Waived) | 30% | Covered (Ded. Waived) | 30% |
| Maternity Obstetrician Visits | Not covered | | Not covered | | Not covered | |
| Preventative Health (Annual Physical) (\$200 per calendar year*) | \$20 Copay (Ded. Waived) | 30% | \$25 Copay (Ded. Waived) | 30% | \$30 Copay (Ded. Waived) | 30% |
| Lab/X-Ray | 20% | 40% | 20% | 40% | 20% | 40% |
| Skilled Nursing (in lieu of hospital) (30 days per calendar year*) | 20% | 40% | 20% | 40% | 20% | 40% |
| Physical/Occupational Therapy (24 visits per calendar year*) | 20% | 40% (Aetna will pay a max. of \$25 per visit) | 20% | 40% (Aetna will pay a max. of \$25 per visit) | 20% | 40% (Aetna will pay a max. of \$25 per visit) |
| Home Health Care (30 visits per calendar year*) | 20% | 40% | 20% | 40% | 20% | 40% |
| Durable Medical Equipment (\$2,000 per calendar year*) | 20% | 40% | 20% | 40% | 20% | 40% |
| PHARMACY | | | | | | |
| Pharmacy Deductible | \$250—does not apply to generic | | \$250—does not apply to generic | | \$500—does not apply to generic | |
| Generic (Oral Contraceptives Included) | \$15 copay | \$15 copay plus 30% | \$15 copay | \$15 copay plus 30% | \$15 copay | \$15 copay plus 30% |
| Preferred Brand/Non-Preferred Brand (Oral Contraceptives Included) | \$25/\$40 copay after deductible | \$25/\$40 copay plus 30% after deductible | \$25/\$40 copay after deductible | \$25/\$40 copay plus 30% after deductible | \$25/\$40 copay after deductible | \$25/\$40 copay plus 30% after deductible |
| Calendar Year Maximum per Individual* | \$5,000 | | \$5,000 | | \$5,000 | |

*Maximum applies to combined in and out of network benefits

A summary of exclusions are listed on page 12. For a full list of benefit coverage and exclusions refer to the plan documents.

GEORGIA AETNA ADVANTAGE PLAN OPTIONS

| MEMBER BENEFITS | GEORGIA PPO 5000 | | GEORGIA PPO VALUE | |
|---|----------------------------------|---|--|---|
| | In-Network | Out-of-Network | In-Network | Out-of-Network |
| Deductible Individual/Family | \$5,000/\$10,000 | \$10,000/\$20,000 | \$2,000/\$4,000 | \$4,000/\$8,000 |
| Coinsurance | 20% | 40% | 30% | 40% |
| Out-of-Pocket Maximum Individual/Family (includes deductible) | \$7,500/\$15,000 | \$12,500/\$25,000 | \$4,000/\$8,000 | \$6,000/\$12,000 |
| Lifetime Maximum* | \$5,000,000 | | \$5,000,000 | |
| Non-Specialist Office Visit (General Physician, Family Practitioner, Pediatrician or Internist) | \$40 Copay (Ded. Waived) | 30% | First 6 Visits; \$40 Copay (Ded. Waived); after 6 visits 30% combined with office visits to specialists. | 30% |
| Specialist Visit | \$50 Copay (Ded. Waived) | 30% | First 6 Visits; \$50 Copay (Ded. Waived); after 6 visits 30% combined with office visits to non-specialists. | 30% |
| Hospital Admission | 20% | 40% | 30% | 40% |
| Outpatient Surgery | 20% | 40% | 30% | 40% |
| Emergency Room | \$150 copay (waived if admitted) | | \$150 copay (waived if admitted) | |
| Annual Routine Ob/Gyn Exam (Annual Pap/Mammogram) | Covered (Ded. Waived) | 30% | Covered (Ded. Waived) | 30% |
| Maternity Obstetrician Visits | Not covered | | Not covered | |
| Preventative Health (Annual Physical) (\$200 per calendar year*) | \$40 Copay (Ded. Waived) | 30% | \$40 Copay (Ded. Waived) | 30% |
| Lab/X-Ray | 20% | 40% | 30% | 40% |
| Skilled Nursing (in lieu of hospital) (30 days per calendar year*) | 20% | 40% | 30% | 40% |
| Physical/Occupational Therapy (24 visits per calendar year*) | 20% | 40% (Aetna will pay a max. of \$25 per visit) | 30% | 40% (Aetna will pay a max. of \$25 per visit) |
| Home Health Care (30 visits per calendar year*) | 20% | 40% | 30% | 40% |
| Durable Medical Equipment (\$2,000 per calendar year*) | 20% | 40% | 30% | 40% |
| PHARMACY | | | | |
| Pharmacy Deductible | \$500—does not apply to generic | | \$200—does not apply to generic | |
| Generic (Oral Contraceptives Included) | \$15 copay | \$15 copay plus 30% | \$15 copay | \$15 copay plus 30% |
| Preferred Brand/Non-Preferred Brand (Oral Contraceptives Included) | \$25/\$40 copay after deductible | \$25/\$40 copay plus 30% after deductible | \$25/\$40 copay after deductible | \$25/\$40 copay plus 30% after deductible |
| Calendar Year Maximum per Individual* | \$5,000 | | Unlimited | |

*Maximum applies to combined in and out of network benefits

A summary of exclusions are listed on page 12. For a full list of benefit coverage and exclusions refer to the plan documents.

GEORGIA AETNA ADVANTAGE PLAN OPTIONS

| | GEORGIA HIGH-DEDUCTIBLE PPO 1 (HSA COMPATIBLE*) | | GEORGIA HIGH-DEDUCTIBLE PPO 2 (HSA COMPATIBLE*) | |
|--|---|---|---|--|
| | In-Network | Out-of-Network | In-Network | Out-of-Network |
| MEMBER BENEFITS | | | | |
| Deductible Individual/Family | \$2,750/\$5,500 | \$5,500/\$11,000 | \$5,000/\$10,000 | \$10,000/\$20,000 |
| Coinsurance | 20% | 40% | 0% | 0% |
| Out-of-Pocket Maximum Individual/Family (includes deductible) | \$5,000/\$10,000 | \$10,000/\$20,000 | \$5,000/\$10,000 | \$10,000/\$20,000 |
| Lifetime Maximum** | \$5,000,000 | | \$5,000,000 | |
| Non-Specialist Office Visit (General Physician, Family Practitioner Pediatrician or Internist) | 20% | 40% | 0% | 0% |
| Specialist Visit | 20% | 40% | 0% | 0% |
| Hospital Admission | 20% | 40% | 0% | 0% |
| Outpatient Surgery | 20% | 40% | 0% | 0% |
| Emergency Room | \$150 copay (waived if admitted) | | 0% | 0% |
| Annual Routine Ob/Gyn Exam (Annual Pap/Mammogram) | Covered (Ded. Waived) | 30% | 0% (Ded. Waived) | 0% |
| Maternity Obstetrician Visits | Not covered | | Not covered | |
| Preventative Health (Annual Physical) (\$200 per calendar year**) | \$20 Copay (Ded. Waived) | 30% | \$25 Copay (Ded. Waived) | 0% |
| Lab/X-Ray | 20% | 40% | 0% | 0% |
| Skilled Nursing(in lieu of hospital) (30 days per calendar year**) | 20% | 40% | 0% | 0% |
| Physical/Occupational Therapy (24 visits per calendar year**) | 20% | 40% (Aetna will pay a max. of \$25 per visit) | 0% | 0% (Aetna will pay a max. of \$25 per visit) |
| Home Health Care (30 visits per calendar year**) | 20% | 40% | 0% | 0% |
| Durable Medical Equipment (\$2,000 per calendar year**) | 20% | 40% | 0% | 0% |
| PHARMACY | | | | |
| Pharmacy Deductible | Integrated Medical/Rx Deductible | | Integrated Medical/Rx Deductible | |
| Generic (Oral Contraceptives Included) | \$15 copay | \$15 copay plus 30% | 0% | 0% |
| Preferred Brand/Non-Preferred Brand (Oral Contraceptives Included) | \$25/\$40 copay | \$25/\$40 copay plus 30% | 0% | 0% |
| Calendar Year Maximum per Individual** | \$5,000 | | \$5,000 | |

*Based upon treasury guidance available as of the print date.

**Maximum applies to combined in and out of network benefits

A summary of exclusions are listed on page 12. For a full list of benefit coverage and exclusions refer to the plan documents.

Aetna Advantage Plan programs to help you be well

Aetna Advantage Plans include special programs* with a wealth of features to complement our standard health coverage. These programs include substantial savings on products and educational materials geared toward your special health needs. Here are a few of the ways we can help you be well.

Fitness Program.

Enjoy reduced membership rates at participating health clubs, as well as discounts on home exercise equipment.

Eyecare Savings Program.

The Vision One** discount program offers special savings on eye exams, contact lenses, frames, lenses, LASIK eye surgery, and eye care accessories.

Alternative Health Care Program.

Receive reduced rates on visits to acupuncturists, chiropractors, massage therapists and nutrition counselors, as well as discounts on vitamins and supplements.

Informed Health® Line.

Get 24/7 answers to your health questions via this toll-free hotline staffed by a team of registered nurses: 1-800-556-1555.

Aetna Rx Home Delivery®.

With this optional program, order prescription medications through our convenient and easy-to-use mail order pharmacy. To learn more or obtain order forms, visit www.AetnaRxHomeDelivery.com.

Aetna Navigator™ — The Power to Help Members Manage Their Health

It's easy and convenient for Aetna members to manage their health benefits. Anytime — day or night — wherever they have Internet access, members can log in to Aetna Navigator, Aetna's secure member website. Members who register on the site can check the status of their claims, contact Aetna Member Services, estimate the costs of health care services, and much more!

Aetna Resource Connection.

Aetna's Resource Connection provides our individual and self-employed clients with access to resources and discounts that can help them build a healthier business. Whether it's purchasing office supplies, finding an effective payroll service or upgrading your IT systems, Aetna Resource Connection can help. Simply put, we're placing the power of Aetna, a Fortune 100 company, in the hands of each client we serve.

For more information on any of these programs, please visit us online at www.aetna.com.

* Availability varies by plan. Talk with your Aetna representative for details.

** Vision One is a registered trademark of Cole Managed Vision.



Things You Need to Know to Enroll

To qualify for an Aetna Advantage Plan, you must be:

- Under age 64-3/4 (both you and your spouse)
- Under age 19 for dependent children
- Between ages 19 and 25 for unmarried dependent children with proof of full-time student status
- Legal residents in a state with products offered by the Aetna Advantage Plans
- Legal U.S. residents for at least 6 continuous months.

Medical underwriting requirements

- The Aetna Advantage Plans are not guaranteed issue plans and require medical underwriting. Some individuals can be federally eligible under the Health Insurance Portability Accountability Act (HIPAA) for a special guaranteed issue plan under Georgia laws and regulations.
- All applicants, enrolling spouses and dependents are subject to medical underwriting to determine eligibility and appropriate level of coverage.
- We offer various levels of coverage based on the known and predicted medical risk factors of each applicant.

Levels of coverage and enrollment

- You may be enrolled in your selected plan at the standard premium charge.
- You may be enrolled in your selected plan at a higher rate, based on medical findings.
- You may be declined coverage based on significant medical risk factors.

Duplicate coverage

- If you are currently covered by another carrier, you must agree to discontinue the other coverage prior to or on the effective date of the Aetna Advantage Plan.

Pre-existing conditions

- During the first 12 months following your effective date of coverage, no coverage will be provided for the treatment of a pre-existing condition unless you have creditable prior coverage.
- A pre-existing condition is an illness or injury for which medical advice or treatment was recommended or received within 6 months preceding the effective date of coverage.

Terms of coverage

Coverage remains in effect as long as you pay the required premium charges on time, and as long as you maintain membership eligibility. Coverage will be terminated if you become ineligible due to:

- Non-payment of premiums,
- Residency requirements,
- Obtaining duplicate coverage, or
- For other reasons permissible by law.



It's easy to apply

We make it easy for you to apply for one of our Aetna Advantage Plans for Individuals. Just follow these three steps:

- 1) Complete and mail the enclosed enrollment form, along with a check for your first month's premium payment.
- 2) Email us at AetnaAdvantagePlans@Aetna.com if you have any questions or would like to discuss your own unique situation. We'll be happy to help and offer guidance. You can also ask us for a rate quote.
- 3) Get a quote and apply online, if you wish, by visiting <http://www.aetna.com/members/individual.html>. Select your state and click on "Get A Quote" on the following screen.

Georgia Limitations and Exclusions

These medical plans do not cover all health care expenses and include exclusions and limitations. Members should refer to their plan documents to determine which health care services are covered and to what extent.

The following is a partial list of services and supplies that are generally not covered. However, your plan documents may contain exceptions to this list based on state mandates or the plan design or rider(s) purchased.

Medical Limitations and Exclusions

Aetna PPO Plans

Services and supplies that are generally not covered include, but are not limited to:

- Surgery or related services for cosmetic purposes to improve appearance, but not to restore bodily function or correct deformity resulting from disease, trauma, or congenital or developmental anomalies.
- Private duty nursing.
- Personal care services and domiciliary care services not stated herein.
- Nonreplacement fees for blood and blood products.
- Unless otherwise specified in covered services, dental work or treatment which includes hospital or professional care in connection with:
 - > The operation or treatment for the fitting or wearing of dentures.
 - > Orthodontic care or malocclusion.
 - > Operations on or for treatment of or to the teeth or supporting tissues of the teeth, except for removal of tumors and cysts or treatment of injury to natural teeth due to an accident if the treatment is received within 6 months of the accident.
 - > Dental implants.
- Experimental services.
- Immunizations related to foreign travel.
- Insulin pumps.
- The purchase, examination, or fitting of hearing aids and supplies, and tinnitus maskers, unless included as a covered benefit.
- Arch support, orthotic devices, in-shoe supports, orthopedic shoes, elastic supports, or exams for their prescription or fitting, unless these services are determined to be medically necessary.
- Inpatient admissions primarily for physical therapy, unless authorized by the plan.
- Treatment of sexual dysfunction not related to organic disease.
- Services to reverse a voluntary sterilization procedure.
- In vitro fertilization, ovum transplants and gamete intrafallopian tube transfer, zygote intrafallopian transfer, or cryogenic or other preservation techniques used in these or similar procedures.
- Practitioner, hospital, or clinical services related to radial keratotomy, myopic keratomileusis, and surgery which involves corneal tissue for the purpose of altering, modifying, or correcting myopia, hyperopia, or stigmatic error.
- Nonmedical ancillary services such as vocational rehabilitation, employment counseling, or educational therapy.
- Services that are not medically necessary.
- Medical expenses for a pre-existing condition are not covered (full postponement rule) for the first 12 months after the member's effective date. Lookback period for determining a pre-existing condition (conditions for which diagnosis, care or treatment was recommended or received) is 6 months prior to the effective date. The pre-existing condition limitation period will be reduced by the number of days of prior creditable coverage the member has as of the effective date, unless the individual has a creditable coverage HIPAA certificate indicating 18 months of creditable coverage, in which case no pre-existing condition limitation will apply.
- Weight control services including surgical procedures, medical treatments, weight control/loss programs, dietary regimens and supplements, appetite suppressants and other medications: food or food supplements, exercise programs, exercise or other equipment; and other services and supplies that are primarily intended to control weight or treat obesity, including Morbid Obesity, or for the purpose of weight reduction, regardless of the existence of comorbid conditions.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies. The PPO product is underwritten by Aetna Life Insurance Company.

This material is for informational purposes only and is neither an offer of coverage nor medical advice. It contains only a partial, general description of plan benefits or programs and does not constitute a contract. Aetna arranges for the provision of health care services. However, Aetna itself is not a provider of health care services and therefore cannot guarantee results or outcomes. Consult the plan documents (Summary of Coverage and Booklet-Certificate) to determine governing contractual provisions, including procedures, exclusions and limitations relating to the plan. The availability of a plan or program may vary by service area and by plan design. With the exception of Aetna Rx Home Delivery® service, participating providers and vendors are independent contractors in private practice and are neither employees nor agents of Aetna or its affiliates. Aetna Rx Home Delivery, LLC is a subsidiary of Aetna Inc. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change. Certain primary care providers are affiliated with integrated delivery systems or other provider groups (such as independent practice associations and physician-hospital organizations), and members who select these providers will generally be referred to specialists and hospitals within those systems or groups. However, if a system or group does not include a provider qualified to meet member's medical needs, member may request to have services provided by non-system or non-group providers. Member's request will be reviewed and will require prior authorization from the system or group and/or Aetna to be a covered benefit.

Information supplied by Aetna IntelliHealth is for informational purposes only, is not medical advice and is not intended to be a substitute for proper medical care provided by a physician. Informed Health Line nurses cannot diagnose, prescribe or give medical advice. Specific questions should be addressed by your doctor. Alternative health care programs, Vision One® and the fitness program are rate-access programs and may be in addition to any plan benefits. Program providers are solely responsible for the products and services provided hereunder. Aetna does not endorse any vendor, product or service associated with these programs. Discounts offered hereunder are not insurance.

Some benefits are subject to limitations or visit maximums. Members or providers may be required to precertify or obtain prior approval of coverage for certain services, such as non-emergency inpatient hospital care. If your plan covers outpatient prescription drugs, your plan may include a drug formulary (preferred drug list). A formulary is a list of prescription drugs generally covered under your prescription drug benefits plan on a preferred basis subject to applicable limitations and conditions. Your pharmacy benefit is generally not limited to the drugs listed on the formulary. The medications listed on the formulary are subject to change in accordance with applicable state law. For information regarding how medications are reviewed and selected for the formulary, formulary information, and information about other pharmacy programs such as precertification and step therapy, please refer to Aetna's website at www.aetna.com, or the Aetna Medication Formulary Guide. Many drugs, including many of those listed on the formulary, are subject to rebate arrangements between Aetna and the manufacturer of the drugs.

Rebates received by Aetna from drug manufacturers are not reflected in the cost paid by a member for a prescription drug. In addition, in circumstances where your prescription plan utilizes copayments or coinsurance calculated on a percentage basis or a deductible, use of formulary drugs may not necessarily result in lower costs for the member. Members should consult with their treating physicians regarding questions about specific medications. Refer to your plan documents or contact Member Services for information regarding the terms and limitations of coverage.

While this information is believed to be accurate as of the print date, it is subject to change.