



My happy place

Members Health Plan NJ 2021

**Members
HealthPlan^{NJ}**

Designed for You.

Healthy happens here

Members Health Plan NJ is administered by Aetna® and uses Aetna networks.



At Members Health Plan NJ, we take care of the whole you — mind, body and spirit. No matter where you are on your path to better health, we provide programs and opportunities to help you feel and be your best.

Discover a total approach to your health, including:

- **Award-winning member services** to answer your questions and help you make health care decisions
- **Aetna Health™ app** to find care, check costs and access your information on the go
- **24/7 tools and programs** to connect you to what you need when you need it
- **Large nationwide network** with about 1.2 million health care professionals, including 700,000+ primary care doctors and specialists and 5,700+ hospitals¹
- **Behavioral health support** for your emotional well-being, wherever you are on your journey

¹Aetna Inc. Aetna Facts. 2020. Available at: [Aetna.com/about-us/aetna-facts-and-subsiidiaries/aetna-facts.html](https://www.aetna.com/about-us/aetna-facts-and-subsiidiaries/aetna-facts.html). Accessed December 2020.

Your Aetna advocate

All Members Health Plan NJ plans come with **Aetna One® Advocate**, a concierge team providing a higher level of support.

With Aetna One Advocate, you'll get a team of advocates, nurses, pharmacists, dietitians and more — all built around you. Not only can they answer your questions, they can also help you achieve your best health by:

- Coordinating care and approvals for upcoming surgeries or procedures
- Bringing in experts to consult on a recent diagnosis
- Connecting you with available resources in your community
- Helping you get quality care and cost savings
- Confirming if your medications are covered and how much they'll cost



Questions?

Visit [MembersHealthPlanNJ.com](https://www.MembersHealthPlanNJ.com) or call your **Aetna One Advocate** at 1-833-982-7368 (TTY: 711), Monday through Friday, 8 AM to 8 PM, and Saturday, 8:00 AM to 4:30 PM.

For self-funded plans, coverage is offered by your employer, and administrative services are provided by Aetna Life Insurance Company (Aetna).

Members Health Plan NJ perks

Your health plan isn't just about paying claims. It's also about helping you achieve your health goals.



Find care

Network providers

Easily find doctors, labs, urgent care centers, hospitals and more at **MembersHealthPlanNJ.com** > Employees > Medical Benefits > Provider Search.

Save money when it's not an emergency

Need care right away but it's not a life-threatening emergency? Look up nearby urgent care centers and walk-in clinics for a faster, less-expensive alternative.

High-performing facilities

You'll have access to a special network of health care facilities:

- **Institutes of Excellence™** for transplants, infertility and more
- **Institutes of Quality®** for bariatric, heart and spine surgeries, and knee and hip replacements



Manage costs

Balances and benefits

See where you are with your deductible and coinsurance, and review coverage for yourself and your family members.

Stretching your health care dollars

Did you know that medical costs can differ greatly between health care providers for the exact same service? Check the cost **before** you receive care. Log in to your member website at **Aetna.com** and click **Find Care & Pricing**.

Your claims history

See all your claims in one place. You can even pay your claims through your member website or Aetna HealthSM app.

Saving money

Get on-the-spot discounts on health products and services like eyewear and exams, massage therapy, weight-loss plans, and nutrition services. Log in to your member website at **Aetna.com** and click **Stay Healthy**.



Anytime, anywhere

Stay on top of your benefits with the **Aetna Health app**:

- Pull up your member ID card
- Search for providers
- Find nearby walk-in clinics and urgent care centers
- Get cost estimates for health services and prescriptions
- Pay claims
- View benefits
- Track spending and check balances
- Get recommended health actions based on your profile

You can download the Aetna Health app on your mobile device, or text **AETNA** to **90156** for a link.

Health tools and resources

24/7 nurse support

Do you have a health question? With the **24-Hour Nurse Line**,* you can speak to a registered nurse about things like a certain health condition or an upcoming test or procedure.

Understanding your health options

Diagnosed with a medical condition? Unsure about treatment options? Facing possible surgery? Find clear and reliable health information with **health decision support**, a library of online learning programs.

Some of the most popular programs are:

- Chronic low back pain
- Total knee or hip replacement
- Type 2 diabetes
- Bariatric informed decision making
- Hypertension

To access this free tool, log in to your member website at **Aetna.com** and click **Stay Healthy > Health decision support from Emmi**.

*While only your doctor can diagnose, prescribe or give medical advice, the 24-Hour Nurse Line nurses can provide information on a variety of health topics.

Your personal health site

Log in to your member website at **Aetna.com** and click **Stay Healthy > Discover a Healthier You** to access personalized, interactive tools like:

- **Health assessment.** Build a picture of your overall health.
- **Records.** Access your health data, claims, tests and more.
- **Digital coaching support.** Improve your health in fun ways like group coaching.
- **Appointment scheduler.** Keep all appointments in one place.
- **Social communities.** Contact others facing similar challenges.
- **Sync to apps and devices.** Sync your devices and stay connected.



24/7/365 care with Teladoc®

Connect with a licensed doctor by web, phone or mobile app for things like:

- **General medicine:** cold and flu symptoms, allergies, sprains, respiratory infection
- **Dermatology:** psoriasis, eczema, acne and suspicious moles
- **Mental health:** addiction, depression and family difficulties
- **Caregiver support:** for general medical consults (recipient does not have to be an Aetna® member)

Visit **Teladoc.com/Aetna**, call **1-855-TELADOC (1-855-835-2362)** or download the Teladoc app.



Members Health Plan NJ gives you options

Medical product	Plan options	Descriptions
<ul style="list-style-type: none">• An employer can choose one or a combination of the 22 current plan designs.• Three products are available, each with a range of deductible and payment limit options.• Multiple prescription products are available that can be used to customize your benefits needs.		
Aetna Whole Health SM NJ	5 plan options: M, N, X, Y, Z	<ul style="list-style-type: none">• Value-based plan options that bring people, processes and technology together to deliver quality care• Lower cost-share using Tier 1 hospitals and providers; referrals not required• Deductibles ranging from \$0 to \$6,000 per individual (Tier 1 and Tier 2)• Annual out-of-pocket maximums ranging from \$3,000 to \$8,550 per individual (Tier 1 and Tier 2)• Coinsurance options ranging from 100% to 50% (Tier 1 and Tier 2)
Open Access Aetna Select SM	10 plan options: F, H, J, K, O, S, T, U, V, W	<ul style="list-style-type: none">• Network-only plan options that give members more freedom• Ability to visit any in-network provider (PCP or specialist) for covered services without a referral• Access to a national network of providers• Deductibles ranging from \$0 to \$6,550 per individual• Annual out-of-pocket maximums ranging from \$4,000 to \$8,550 per individual• Coinsurance options ranging from 100% to 70%
Aetna Choice [®] POS II	7 plan options: A, B, D, G, L, P, R	<ul style="list-style-type: none">• Point-of-service plan options that give members flexibility with in- and out-of-network benefits• Ability to visit any in-network provider (PCP or specialist) for covered services without a referral• Access to a national network of providers• Deductibles ranging from \$0 to \$5,000 per individual• Annual out-of-pocket maximums ranging from \$4,000 to \$17,100 per individual• Coinsurance options ranging from 100% to 50%
Prescription product	Plan options	Descriptions
<ul style="list-style-type: none">• Short-term prescriptions: For occasional medicines, like antibiotics, visit any retail pharmacy. For the best price, choose a CVS Pharmacy[®].• Long-term prescriptions: Fill a 90-day supply at a discounted rate with CVS Caremark[®] Mail Service Pharmacy or at a CVS Pharmacy.• Covered medicines: Visit Aetna.com/formulary and choose Aetna Standard Formulary to find covered medicines.• \$0 specialty medications: With certain plan options, the PrudentRx Copay Program allows you to get medications on the Exclusive Specialty Drug List for \$0 if you use CVS Specialty[®].		
Copay plans	RX 1	• 30-day supply: \$15 generic/\$50 preferred/\$75 non-preferred/30% specialty
	RX 2	• 30-day supply: \$25 generic/\$75 preferred/\$100 non-preferred/30% specialty
Copay/coinsurance plans	RX 3	• 30-day supply: \$15 generic/50% brand (min. \$25; max. \$500)/50% specialty (retail and mail order)
HSA-compatible plans	RX 4	• 30-day supply, after deductible: \$15 generic/\$50 preferred/\$75 non-preferred/30% specialty (retail and mail order)
	RX 5	• 30-day supply, after deductible: \$15 generic/50% brand (min. \$25; max. \$500)/50% specialty (retail and mail order)

Know the basics

Between the unfamiliar terms and mysterious abbreviations, choosing a health plan can be confusing. To help you make the right choice, here's a quick overview of some key terms:

How your plan works



Deductible

You pay 100% until you meet your deductible.
Eligible preventive care is covered at 100% with no deductible when you use network providers.



Cost-sharing

Your share of costs may be in the form of coinsurance or copayments (also called copays).

Coinsurance

A fixed percentage the plan pays once you meet your deductible. For example, if your care is \$100 and your coinsurance is 70%, the plan pays \$70 and you pay \$30.

Copay

A fixed dollar amount. For example, you may pay \$25 per doctor office visit.



Out-of-pocket maximum

The plan pays 100% of covered expenses for the rest of the year once you hit your maximum.

Aggregate vs. embedded

For services subject to the deductible under family coverage:

Plans N, R, S, W are aggregate

The family deductible must be met before the plan starts paying benefits for any family member.

All other plans are embedded










The plan starts paying benefits for any family member once they meet their own individual deductible.

Out-of-pocket maximums are embedded, even on Health Savings Account (HSA)-compatible plans. That means the plan pays 100% for any family member once they meet their own individual out-of-pocket maximum. The family out-of-pocket maximum cannot be satisfied by one individual. The individual amount for any one covered family member must be met, and then any combination of family members may satisfy the remaining amount.

Medical plan options

Members Health Plan NJ offers many flexible network options. We offer 22 plan options that use the Aetna Whole HealthSM, Open Access Aetna SelectSM and Aetna Choice[®] POS II networks.

In New Jersey, our networks include:

Aetna Whole Health NJ	Open Access Aetna Select	Aetna Choice POS II
 3,400+ primary care doctors	 7,300+ primary care doctors	 7,300+ primary care doctors
 21,000+ specialists	 36,800+ specialists	 36,800+ specialists
 27 hospitals	 82 hospitals	 82 hospitals

Visit MembersHealthPlanNJ.com for detailed information about our health plan options.

Visit Aetna.com for a full list of hospitals and providers.



Transition-of-care benefits

Are you receiving ongoing treatment from a provider who is not currently in the network?

To learn more and apply for these benefits, call Aetna® at **1-833-982-7368 (TTY: 711)** and ask for a Transition Coverage Request form.

Aetna, CVS Pharmacy® and CVS Caremark® are part of the CVS Health® family of companies.

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