



The Orthodox HealthPlan

Dear Orthodox HealthPlan Member:

New Plan design effective May 1, 2015!

Health coverage — plus a fund to help pay your costs

At the May 1 renewal your plan will be the Aetna HealthFund[®] Health Reimbursement Arrangement (HRA). It's a big name for an easy-to-use plan. The plan will remain the PPO using the same network of providers that we have used in the past.

It combines an Aetna deductible-based health benefits and insurance plan with a fund to help pay your costs. It offers security, convenience, tax benefits, support – and much more.

It's a new way of looking at health care.

The basics

The HRA plan has three parts:

- 1) **The HealthFund[®]**– At the start of each calendar year (May 1 for 2015), you receive a deposit into your HealthFund[®] to help you pay for eligible out-of-pocket health care costs automatically.
- 2) **The deductible** – Your deductible is an amount you must pay before your health plan begins to pay for most of your eligible expenses. HealthFund[®] payments go towards the deductible and help you meet your deductible.
- 3) **The health plan** – When you meet your deductible, the health plan pays for most of your eligible expenses. You then pay a smaller share of these costs from your own pocket until you reach the maximum out of pocket limit.

You're protected

You get two features that help keep your family – and your bank account – healthy.

- **Preventive care**, such as routine physicals, screenings and immunizations, is covered at 100 percent. So you do not need to use your HealthFund[®]!
- **Out-of-pocket maximum**. This is a cap on how much you pay for covered services in a given year.

It's convenient and easy to use

- We **set up** the HealthFund[®] for you. No claims forms are needed if you visit doctors and other health care providers in our national network. Eligible health care expenses are **automatically paid** from the HealthFund[®].

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A chance to save for the future

- If you don't use the entire HealthFund® during the year – no problem! The balance **rolls over to next year**, as long as you stay in the plan. So you may have a larger fund to help pay for future costs.

Tax-free benefits

- The HealthFund® doesn't count as taxable income. That means you cover some health care costs with **tax-free dollars**.

Information to help you make important decisions

To use the plan well, you need information to help you make good decisions about your care – and your budget. We have tools to help.

Our **secure Aetna Navigator® member website**, lets you:

- **View personal health and benefits information** – Check your fund balance, confirm eligibility or see the status of claims. You can also download your claim history.
- **Compare costs** – See what you'll pay for common, non-emergency services, based on your actual plan information.**
- **Research prescription drug costs** – Estimate the cost of medicines *before* you go to the drug store.
- **Compare area hospitals** – Do you need surgery? Are you having a baby? You can compare costs at area hospitals based on the issues important to you.
- **Get trusted health and wellness information** – Read about thousands of health topics and drugs.
- **Find doctors** – Search for in-network doctors and other health care professionals with the DocFind® online directory . You can see where they went to school, whether they're board certified and what languages they speak.
- **Find ways to stay healthier** – Use personalized health searches, online wellness programs and personal health records. These can help you take care of yourself and your family

More information is coming

Soon, we will share more details about the Aetna HealthFund® HRA plan. In the meantime, be sure to view the [HRA video](#) to see how an HRA plan can benefit you.

To connect with us, download our free mobile app. You can use your cell phone, smartphone or other mobile web device. Or visit aetna.com on any web-enabled phone.

Always feel free to reach out and ask us questions as you read the HRA plan.

**Estimated costs not available in all markets. Actual costs may differ for a number of reasons, including if other or different services are performed by the doctor or facility at the time of your visit, and/or additional claims/member payments are processed before the actual claim for the estimated service is processed.





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Policy forms issued in Oklahoma include: HMO/OK COC-5 09/07, HMO/OK GA-3 11/01, HMO OK POS RIDER 08/07, GR-23 and/or GR-29/GR-29N.

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