Healthier happens together™

Explore your robust benefits right here

County of San Mateo 2024 Health Care Benefits



Aetna.com 2212256-01-01. (5/23) COSM Active

What's inside

Plans



Our network

Programs & resources

Support & access

Enroll at:



or visit: https://www.aetnaresource.com/p/cosm

Aetna[®] is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna). Aetna is part of the CVS Health[®] family of companies.

Health care made simple

At Aetna[®] and CVS Health[®], we take care of the whole you. This means you'll get connected, convenient and affordable health care wherever — and whenever — you need it.

We offer customized health benefits plans, large provider networks, support programs, special discounts and much more. So you can relax knowing you'll have the tools and resources you need to live healthy. And no matter where you are on your path to better health, count on us for ongoing support. That's how healthier happens together[™].

If you have questions, call us at **833-576-2494 (TTY: 711)** for medical plans.

To-dos before you choose

Use our provider search tool

Our network represents about two-thirds of doctors and three-fourths of acute care hospitals nationwide. So you're sure to find the providers you need.

Estimate your health care costs

Use our cost comparison tool to get an idea of total out-of-pocket costs, including your premium, copays and annual deductible.

Get to know each plan

Review your benefits enrollment site to see which plan is right for you.

Review the extras

See how the plan perks can add up to better care, more choices and lower costs, too.

Paying for care

An overview of terms

PROCESSING

Claims

Claims are requests for your plan to pay for services you receive. We use these to check what your plan will cover and the amount we'll pay. You can find updated status and amounts billed for your claim on your member website or the Aetna Healthsm app.



Explanation of Benefits (EOB) statements

An Explanation of Benefits statement shows a breakdown of how we process claims. It's not a bill and may not show the current balance you owe. Anytime something changes with your claim, you'll get a new statement.



Provider bills

Bills show the amount you actually owe for services. You'll get this from your provider. You can make payments for what you owe directly to them or through the "Pay Your Provider" link on each of your claims.



Coordination of benefits

Some members have health coverage under more than one plan. When this happens, we work with the other carriers to decide which plan pays first and which pays second, based on the rules in your plan documents. We call this process "coordination of benefits," or COB.

YOU PAY



Deductible

The deductible is the amount you pay for out-of-pocket costs for your covered health care before your plan begins to pay.

Each year, you pay 100% of your covered expenses until you meet your deductible amount. For most plans, eligible preventive care is covered at 100% with no deductible when you use network providers.

YOU + THE PLAN PAY



Cost sharing

Once you meet the deductible, you share the cost with the plan. This may be in the form of coinsurance and/or copayments (also called copays).

Coinsurance

A fixed percentage. For example, if your care is \$100 and your coinsurance is 20%, you pay \$20.

Copay

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

THE PLAN PAYS



Out-of-pocket maximum

The maximum you pay each year for covered expenses. Once you hit your maximum, the plan pays 100% of covered expenses for the rest of the year.

In network vs. out of network

In network

This network option may cost you less.

Highlights

Choosing in-network providers may help save you money.

These providers contract with us to offer rates that are often lower than their regular fees. They also work directly with us and send us claims for services you receive. Don't worry - this is all behind-the-scenes work when you stay in network.

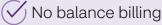
Visit **Aetna.com** to find a network provider.

How it works

The provider files your claim and the plan pays them the amount it owes based on the negotiated rate. You pay the remaining costs.

Benefits

Lower out-of-pocket costs



Less paperwork

Out of network

This network option may cost you more.

Highlights

Your plan may allow you to visit an out-of-network provider. To find out details, check your Summary of Benefits and Coverage document.

How it works

Out-of-network doctors and hospitals don't contract with us. So that means:

- They normally charge more for their services
- You might have to pay the difference between what your plan pays for services and the amount they charge

Plus, they generally don't send us claims or get approval for coverage when needed. So you may need to handle these details on your own.

Keep in mind



Covered

"Covered" doesn't mean free. A covered health care service is one that your plan recognizes. Your plan only pays for this service after you've met the deductible, coinsurance or copay.

Referral

A referral is like a permission slip from your primary care physician (PCP) to see a specialist or another provider. Many providers can easily send referrals electronically.

In-network providers

Network providers participate in our network and offer special, lower rates for our members. So staying in network can help you save money.



Plans

Choosing a plan that's right for you and your family is so important. That's why we offer affordable options to meet your unique needs. And we'll be right there to help you find the perfect fit.

Stay in network to help lower costs

When you go for care, keep in mind that staying in network has special perks. You may have lower out-of-pocket costs, because these providers have agreed to accept our contracted rate for services. Plus, they'll file claims for you, so you don't have to worry about any extra work.

Know what to expect if you go out of network

Some plans may have out-of-network benefits, too. Just know you may have higher out-of-pocket costs. Plus, you may have to file your own claims and/or get preapproval for some services.

Understand that we cover emergency care

In case of an emergency, we'll cover care both in and out of network. So whatever plan you choose, know you can count on us when the unexpected happens.

Medical

Aetna Open Access[®] Managed Choice[®] health insurance plan Known as Managed Choice POS in CA

Visit any doctor, no referrals needed

You don't have to choose a primary care physician (PCP)* with this plan. But selecting a PCP is still important because they do more than give you a checkup. They:

- Get to know you and your medical history
- Guide you on important health decisions and direct your care
- File claims for you

Plus, you may pay less out of pocket for their care.

This plan also gives you access to our tools, tips, programs and services. They can help you find network doctors, estimate costs and more.

Health Maintenance Organization (HMO) health benefits plan Known as HMO plan in CA

You choose your primary care physician (PCP)*

Having one doctor as your first contact can make a difference. PCPs do more than give you a checkup. They:

- Get to know you and your medical history
- Guide you on important health decisions and direct your care
- Direct you to other doctors in our network if you need special attention

This plan has in-network benefits only. Visit our online directory at Aetna.com to find a PCP or network doctor.

Aetna Value Network[™] HMO Plan

You choose your primary care physician (PCP)

Having one doctor as your first contact can make a difference.

Choose any PCP from the Aetna Value Network HMO. Choosing a doctor is a personal decision. That's why each family member chooses their own PCP. And you can change your PCP at any time.

PCPs do more than give you a checkup. They:

- Get to know you and your medical history
- Guide you on important health decisions and direct your care
- Direct you to other doctors in our network if you need special attention

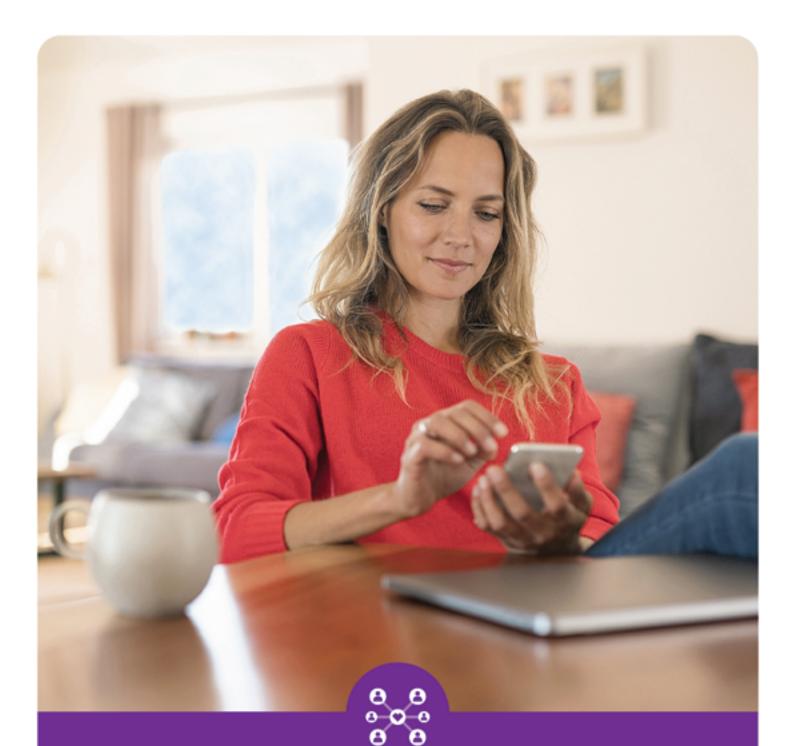
Plus, you may pay less out of pocket for their care.

Go to your PCP for checkups, or whenever you're sick or hurt.*

- They'll help you decide if you need care from another doctor. If so, your PCP will give you a referral.
- Sometimes, you will need care that requires approval from us first. Your doctors will get this approval for you.

You need to choose a PCP and see health care professionals in the Aetna Value Network HMO to receive benefits through this plan*.

*In case of emergency, call 911 or your local emergency hotline, or go directly to an emergency care facility.



Our network

When you need to find the right care, it's always reassuring to know you have choices. Our vast network includes primary care doctors and specialists, hospitals and other health care providers.

And it's never been easier to connect with care. Just use our provider search tool on your member website or use the Aetna HealthSM app when you're on the go.

Our network

Online directory

Find network doctors, right at your fingertips

Need a doctor? Simply search by specialty and location in our online directory. You'll also find maps, directions and more. You can also look for doctors who speak different languages. Just visit **Aetna.com** and select "Find a doctor" to get started.

MinuteClinic[®] and CVS[®] HealthHUB™

Access MinuteClinic and CVS HealthHUB services at a low cost to you

Get access to convenient, local care at a MinuteClinic location at no or a low cost to you, including care for:

- Allergies
- Ear infections
- Flu-like symptoms
- Bug bites, stings and more

MinuteClinic providers can also administer vaccines and write prescriptions, when medically appropriate.

In addition to standard MinuteClinic locations found inside select CVS Pharmacy® and Target stores, we are excited to let you know about a new, innovative health care resource available to you: CVS® HealthHUB™. CVS HealthHUB locations offer expanded MinuteClinic services, one-on-one guidance, and resources for people to manage their health — with a focus on chronic conditions.

What's more? You can access the expanded MinuteClinic services — including care for certain chronic conditions* — at CVS HealthHUB locations at no or low cost to you.**

For your best health, we encourage you to have a relationship with a primary care physician or other doctor. Tell them about your visit to MinuteClinic, or MinuteClinic can send a summary of your visit directly to them.

* MinuteClinic currently provides treatment services for the following chronic conditions: diabetes, hypertension, hyperlipidemia, hypothyroidism, and sleep apnea. ** Applies only to covered services at MinuteClinic. This information does not apply to members enrolled in qualified high-deductible health plans: such members must meet their deductible. However, such services would be subject to negotiated contract rates. Once the deductible has been met, such members will be able to access MinuteClinic® services at no cost-share. Members in indemnity plans are not eligible for this benefit. Such members should refer to their benefit plan documents in order to determine coverage and applicable cost share for walk-in clinic benefits and services, as applicable. Visit **MinuteClinic.com** for age and service restrictions. Aetna® and MinuteClinic, LLC (which either operates or provides certain management support services to MinuteClinic-branded walk-in clinics) are part of the CVS Health® family of companies. Aetna is not responsible for services received at MinuteClinic locations.

Teladoc Health[®] general medicine services — by phone or video 24/7 access to quality care

After hours? Can't get to the doctor's office? Teladoc Health connects you with board-certified doctors anytime. They can treat many non-emergency medical issues by phone or video. This may help you avoid urgent care and emergency room visits, which can be costly and time-consuming.

And it's easy to use — you can speak to a doctor "on demand" in minutes.* Or just schedule a time that's more convenient for you. You can request visits by either:

- · Going to Teladoc.com/Aetna
- Downloading the TeladocHealth app

Visit **Teladoc.com/Aetna** to find out more and set up your account.

*Ten minutes is the average wait time for an on-demand visit but wait times may be longer during peak hours or seasons.

TeladocHealth® mental health

Get the care you need from wherever you are most comfortable

Meet with a therapist 7 days a week and get support for anxiety, depression, stress and more.

You can:

 Choose from board-certified psychiatrists, licensed psychologists, therapists or counselors

Our network

- Talk to the same therapist each time for anxiety, eating disorders, depression, grief, family difficulties and more
- Connect with your therapist 7 days a week, from 7 AM–9 PM local time, by video
- TeladocHealth Mental Health is available to eligible individuals ages 13+.*

Visit Teladoc.com/Aetna for more information.

*Limited to therapy only for eligible members ages 13-17. Teladoc does not provide psychiatric services or mental health medication management to adolescents.

TeladocHealth® dermatology

Keep your skin healthy with virtual care visits

Have a concern about your skin? With Teladoc dermatology services, you'll get access to board-certified dermatologists

via **Teladoc.com/Aetna**or the Teladoc app. Simply provide details about your condition, upload images (if needed) and get a response in just 2 business days.

Keep your skin healthy with virtual care visitsHave a concern about your skin?

- Provide treatment for skin conditions like psoriasis, skin infections, rosacea and more
- Prescribe approved medicine
- Ask follow-up questions for up to 7 days after your first consult
- Answer any questions you have

Visit Teladoc.com/Aetna for more information.

Institutes of Excellence®

Specialized care when you need it

As an Aetna® member, you'll have access to the Institutes of Excellence. These selected facilities can help people who are facing a transplant or going through treatment for infertility. And the facilities must meet our strict standards for clinical quality and efficiency. We measure factors like the number of procedures performed and success rates. To see our list of Institutes of Excellence facilities, go to **Aetna.com** and choose "Find a doctor." Then use the filter tool to select "Institutes of Excellence facilities."®

National Medical Excellence Program[®] transplant care

Our program puts your needs first

You may never need an organ transplant, bone marrow treatment or CAR-T therapy.

But you can rest a little easier if you do, because you have access to this special program. It helps you get the care and resources you need — when you need them most.

You and your family get one-on-one support from:

- Dedicated medical directors
- Nurse care managers* with special experience
- Dedicated claims and Member Services staff

*While only your doctor can diagnose, prescribe or give medical advice, the nurse care managers can provide information on a variety of related topics.

In-network care

Who pays for what

Highlights

Choosing in-network providers may help save you money.

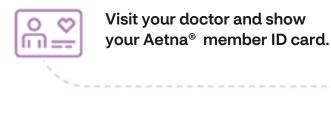
These providers contract with us to offer rates that are often lower than their regular fees. They also work directly with us and send us claims for services you receive. Don't worry — this is all behind-the-scenes work when you stay in network.

Visit **Aetna.com** to find a network provider.

Benefits

- C Lower out-of-pocket costs
- 🔗 No balance billing
- Less paperwork

How it works





There's no need to pay at your visit unless you have a copay.

(Out of network, you may need to pay the full amount at your visit.)

Your doctor files your claim.

(Out of network, you file your own claims.)

THE PLAN PAYS

The plan pays your doctor any amount it owes based on the negotiated rate.

(Out of network, the plan pays you back what it owes, up to the "reasonable and customary" limit.)



Your doctor bills you for any amount you owe.



Programs & resources

No health and benefits plan would be complete without extra support to help you feel your best. That's why you'll have a variety of ways to enhance your health and wellness.

So whether you're looking to improve your physical or mental health, or just need a little extra support, we've got the program that's right for you.

Programs & resources

Aetna Enhanced Maternity Program

Going through a maternity journey is different for everyone. That's why this program supports all women throughout their entire experience, whether they have risk factors or not.

Special program features include:

- A fertility advocate* to be your care manager and provide support if you're facing infertility
- **Predictive data** to help us identify pregnancies early on so we can provide timely, more responsive outreach to you
- **Preeclampsia prevention** by providing education and resources, if needed
- Guided genetic counseling and screening services, backed by medical expertise
- Education and resources to help close racial gaps in health care and support women of color

You can count on us for support — wherever you are in the maternity journey.

*While only your doctor can diagnose, prescribe or give medical advice, our fertility advocates/care managers can provide information on a variety of maternity-related topics.

Aetna Health Connections[™] Disease

Management program

This program can help you take care of health conditions*

Maybe you've been working with your doctor to take care of a condition. Or perhaps you just received a diagnosis and are learning more about it. Either way, we're here to support you with this program. Our nurses, who act as health coaches, can help you follow your doctor's treatment plan — in the way that works best for you.

You can find support for more than 35 common conditions, including diabetes, heart disease, asthma, low back pain and many others. Just visit **Aetna.com** for the complete list. *Our program and nurses do not diagnose or treat members. We assist you in getting the care you need and our program is not a substitute for the medical treatment and/or instructions provided by your health care providers.

Aetna® behavioral health

Feeling your best

From time to time, we all feel a bit down or stressed but sometimes these feelings can persist and get in the way of daily life. They could be brought on by something related to physical health. It's important to know that these feelings are common and, most of all, treatable. But the condition must be diagnosed first.

Your medical plan includes mental health benefits. So you'll get the help and resources you may need to work toward feeling your best. These resources include:

- 24/7 support to help you find the right care
- Face-to-face counseling in the provider's office, virtually or through telehealth
- Online resources and tools, and more

Aetna AbleTo Virtual Therapy

Focusing on health conditions and life changes

Sometimes life can be overwhelming, leading to worry, stress and sadness. But you don't have to go through it alone. With AbleTo, you'll get virtual, personalized support that can help you feel better. Plus, you'll learn how to better manage your emotions and improve your overall health in about eight weeks.

Once you connect with an Aetna® or AbleTo representative, they'll explain more about the program and how it can help. They'll also answer any questions you have.

Aetna[®] does not recommend the self-management of health problems. Health information programs provide general health information and are not a substitute for diagnosis or treatment by a health care professional.

Programs & resources

Aetna mental well-being Telehealth/Virtual Services

Meet with a counselor anywhere, at your convenience

With telehealth or virtual services, you have another way to get help from trained mental health providers. And whatever you're facing, you have the same support you'd get in person from psychiatrists, social workers, marriage counselors and more. You can easily connect with your provider by using your smart device or webcam-equipped computer that's connected to the internet.

With these counseling and medication management services, you:

- Get online, expert care and support
- Talk with a coach 24/7 using apps, video chats and text messages
- Connect with the same provider throughout your care, so there's no need to readjust to someone new
- Choose when and how you meet anywhere you're most comfortable
- Decide what works for you at your own pace and convenience
- Can speak freely and privately

A mental health telehealth or virtual session costs the same as a face-to face office visit. To find a provider in your area, just call us at the number on your member ID card. Or use our provider search tool

on Aetna.com and search for "mental health."





We make it easy to find what you need. Whether you want to look for the right care, manage your benefits, check on a claim, plan for an upcoming treatment or something else, it's easy to get simple, convenient information. All right at your fingertips.

Just connect with us however it's convenient for you. Call our team — we know the "ins and outs" of your benefits, and we're just a phone call away. Or use your member website as your one-stop online resource. And don't forget to download the Aetna Health[™] app, where you can see your ID card, find care, make appointments and more — when you're on the go.

Support & access

Aetna® Concierge

Your personal assistant for health care

Have questions about your benefits? Need solutions that fit your needs? Just ask your Aetna® Concierge* to help you:

- Get answers about a diagnosis
- Find a doctor in your network based on your medical needs
- Learn about your coverage or plan for upcoming treatment
- Use our online tools
- Schedule appointments, and more

To get started, just call the number on your Aetna member ID card. Or you can visit **Aetna.com** and log in to your member website.

*While only your doctor can diagnose, prescribe or give medical advice, your Aetna concierge can provide information on a variety of health -related topics.

Digital member ID card

Access your member ID card whenever you need it

Have your digital ID card on hand, whenever you want, wherever you are with our Aetna HealthSM app. Or find it by going to **Aetna.com** and logging in to your member website. Want to print your ID card? No problem. Just look for that option at the top of the page.

Aetna® member website and Aetna Health™ app

Manage your benefits, connect to care, handle claims — from anywhere..

As a member, you can:

- View your health plan summary and get information about coverage
- Track spending and progress toward your deductible or maximums for you and your family
 - View and pay claims, and see the cost breakdown, including what your plan covers and your responsibility





Use tools to help you choose quality in-network providers

Get personalized reminders to help improve your health

Once you're a member, here's how you can connect:



Your Aetna member website

Go to **Aetna.com** to create an account and log in to your member website.



The Aetna Health app Get the Aetna Health app by texting "GETAPP" to **90156** for a link to download and create an account. Message and data rates may apply.*





Provider search tool You can find providers by name, specialty and location. You'll also find maps, directions and more. You can also look for

providers who speak different languages. Visit **Aetna.com** to get started.

*Terms and conditions: **Bit.ly/2nlJFYG.** Privacy policy: **Aetna.com/legal-notices/privacy.html**. By texting **90156**, you consent to receive a one-time marketing automated text message from Aetna with a link to download the Aetna Health app. Consent is not required to download the app. You can also download it from the App Store[®] or the Google Play[™] store.

What to expect after enrollment



You'll get a **welcome message** that explains coverage and benefits.

You can access your member website and helpful **tools and resources.**

Use your **member website** to let us know the best way to communicate with you.

You'll get your **physical ID card**.

You can access your **digital ID card**.



It's important to take care of the whole you.

This includes your physical and mental wellness. That's why your benefits include checkups, screenings, vaccines, prenatal care services, counseling and more. And there are no out-of-pocket costs when you stay in network. So it's good for your health — and your wallet.



Keep your health in check with preventive care

You can get:

- Annual routine physical exam for adults and children
- Immunizations
- Well-woman exam, including cervical cancer screening
- Preventive mammogram
- Diabetes screening for pregnant women
- · Colorectal cancer screening, based on age
- Prostate cancer screening, based on age
- Counseling (alcohol, smoking, nutrition and more)

These are just a few examples of the services available. Be sure to check your plan for details. And talk with your doctor about the care that's right for you.

Not all services are covered. See plan documents for a complete description of benefits, exclusions and limitations of coverage. Plan features and availability may vary by location and are subject to change.

Providers are independent contractors and are not agents of Aetna[®]. Provider participation may change without notice.

Refer to **Aetna.com** for more information about Aetna® plans. You can view or print your plan disclosure from our **Aetna.com/individuals-families/member-rights-resources/rights/disclosure-information.html** CVS® HealthHUB™ services are available only in select stores and the services offered may vary by location. See your CVS HealthHUB store for details. Pharmacy services provided by CVS Pharmacy®, Inc. Clinical services within a CVS HealthHUB location provided by a MinuteClinic® nurse practitioner or physician assistant except if otherwise indicated.

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