



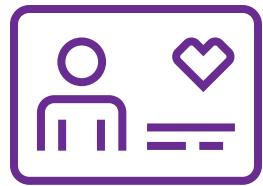
Welcome

**How to get the most from your Aetna
International benefits for members
based in the United States**

Let's get you up and running

Step 1

Look for your Member ID card



This isn't just an ID card — it's the next step on your path to better health

We'll send your Member ID Card in the mail, so keep an eye out for it. We recommend keeping your Member ID Card with you at all times, so you have it when you need it.

Your card has:

- **Your Member ID number** — used when seeking care and registering online
- **Member Service Center phone number** — if you have questions
- **Emergency Assistance Services phone number** — for easy access in case of a medical emergency



Step 2

Sign up for simple and secure online access

Health Hub is your personalized, secure member website that's fast and easy to use on any device.

With Health Hub you can find care, access your plan documents, and take advantage of industry-leading tools to help you manage your benefits. It's optimized to work equally well on any device, including your mobile phone or tablet. Using Health Hub, you can:

- Find nearby doctors and hospitals
- Access your health care plan documents
- Submit claims faster and easier
- Browse a library of health and wellness topics
- Take your well-being assessment to determine your current state of health



It's easy to register

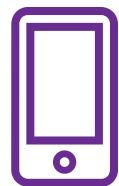
1. Go to **AetnaInternational.com** and select “**Log in/Register**”
2. Click on “**Register**” under the “**Log in**” section
3. Select “**Aetna International Plan Member**”
4. Fill in your name, date of birth and Member ID number found on your Member ID card

If you're already logged into Health Hub, you can easily access **Aetna.com** without a separate sign-in. It lets you:

- Find U.S. doctors, hospitals and walk-in clinics
- Track your claims status
- Access your digital Member ID Card
- Estimate your out-of-pocket costs
- Compare costs and quality of area hospitals, medical procedures and prescriptions
- Take advantage of a whole host of health and wellness programs

Step 3

Get ready to get mobile



Life takes you places. And no matter where you are in the world, it's important to have easy access to the information and tools you need to make good health care decisions.

Our free mobile apps put the most important and useful features of your secure member website right on your smartphone.

When you're inside the United States, use the Aetna Health App — our U.S.-based app to:

- Find doctors, hospitals, urgent care centers and walk-in clinics in the United States
- Estimate your costs
- Track your claims
- Access your digital Member ID Card

The Aetna Health App is also free to download. Just search "Aetna Health App" in the App Store or Google Play store. Again, if you haven't already registered for Health Hub, you'll need to do that before you can use the Aetna Health App.

When you're outside the United States, use our International Mobile Assistant app to:

- Submit your claims
- Search for doctors and hospitals outside the United States
- Find forms, health care resources and more

It's free to download. Just search "**Aetna International**" in the App Store or Google Play store. If you haven't already registered for Health Hub, you'll need to do that before you can use the International Mobile Assistant app.



Step 4

You'll want to know these



Insurance terms can sometimes be daunting. Here's a few we think you'll want to know when looking at your plan documents, seeking care or reviewing bills.

Coinsurance

The percentage of covered medical expenses you're responsible for paying. For example, in an 80 percent coinsurance plan, we pay 80 percent of your covered expenses and you pay 20 percent. Your plan documents show the coinsurance for various medical costs.

Copayment (or "copay")

The fixed dollar amount you pay when you receive care. See your plan documents to find out if you have a copay for certain procedures or medical visits.

Deductible

The amount you pay for covered medical services before your plan will begin to pay. For example, let's say your plan has a \$200 deductible. If a covered medical expense is \$500, you pay \$200 and we pay the remaining \$300. Once your deductible has been met within a calendar year, we'll pay all other covered expenses (excluding coinsurance and/or copays) incurred in that year. Your deductible may not apply to certain services, so you'll want to check your plan documents to see whether you have a deductible and how much it is.

Letter of Authorization (LOA)/Guarantee of Payment (GOP)

These preauthorization documents are like a referral. They authorize treatment and let doctors know your plan will pay for their services. These are sometimes needed before you see a doctor (except in cases of emergency).

Direct settlement

An agreement we make with hospitals and clinics to have them bill us directly for covered medical services. It helps:

- Lower your out-of-pocket costs at the time of service
- Make it easier for you to prepay, submit claims and get reimbursed
- By sending your Letter of Authorization/Guarantee of Payment directly to the treatment facility

We may even be able to negotiate a one-time direct settlement arrangement when you need to see a doctor outside of our network.

Explanation of benefits (EOB)

This document details:

- Recent charges for medical services
- Which services were covered by your plan
- Who is responsible to pay

Step 5



The right care in the right place at the right time

We're here for you 24/7

If you have questions about your benefits

When you have questions about how to find a care, or submit a claim and track it, our Member Services team can help, with highly trained representatives available around the clock.

How to contact Member Services:

Call the number on the back of your Member ID Card.

For questions about your health

When you have detailed health questions, you can call on our Care and Response Excellence (CARE) team. These clinicians are available 24/7 to support you before your travels, after you return home and anytime in between.

They can help with:

- Pre-trip planning
- Coordinating routine and urgent medical care worldwide
- Locating doctors and hospitals
- Coordinating and supervising medical evacuations

If you or a family member is managing a chronic health condition, or if you're pregnant, it's a good idea to talk with a CARE team clinician. They'll be able to help make sure you get the care and medication you need no matter where you are in the world.

How to contact our CARE team:

Call the number on the back of your Member ID Card to be connected with a CARE team clinician.



Choosing the right kind of care

Care in the United States

Every team needs a leader. And the primary care doctor you choose will help lead you down the path toward better health. Your doctor gets to know you and your medical history and sees you for your annual wellness exam and preventive screenings. So if you get sick, your primary care doctor can treat you and help guide you on important health decisions. They can also direct your care across other specialties and facilities in your network. How to choose a primary care doctor.

How to choose a primary care doctor

1. Go to **AetnaInternational.com** and log in to Health Hub with your username and password
2. Using the drop-down boxes under "**Find Health Care**," select a country and city, then click "**Search**" to find a doctor near you
3. You will be redirected to **Aetna.com** where you select "**Find Care & Pricing**" to search for a primary care doctor near you who is covered on your health care plan

If you have a health event that needs immediate attention and your primary care doctor isn't available, a walk-in clinic, urgent care facility, or even an emergency room (ER) may be your best bet.



Walk-in Clinics and Urgent Care Centers

If you have a minor and non-life threatening health concern, walk-in clinics and urgent-care centers can be a smart choice.*

Walk-in clinics are generally found in stores, pharmacies and private establishments and treat minor medical problems such as ear infections, colds, allergies, strep throat and bronchitis for a low cost. You can even get flu shots and routine screenings at most locations.

Many clinics are open seven days a week, with extended business hours, making them a great choice for care outside of your doctor's regular office hours.

Urgent-care centers treat conditions such as bad headaches, fractures, sprains and minor cuts or burns. You'll pay a fraction of what an ER visit would cost. Keep in mind that urgent-care centers are not a substitute for the ER.



Finding a clinic is easy

Get familiar with the urgent care and walk-in clinics in your neighborhood before you need them.

Here's how:

- Log in to Health Hub at **AetnaInternational.com**
- Select "**Find Health Care**"
- Choose your country and city, then select search
- You will be redirected to **Aetna.com** where you select "**Find Care & Pricing**"
- Select either "**Walk-In Clinics**" or "**Urgent Care Centers**," to search for care in your area

* Not every health need is a medical emergency. If you have chest pain, trouble breathing, excessive bleeding or other symptoms that may put your life at risk, go immediately to the ER.



Reasons to consider a walk-in clinic or urgent care center next time you need non-life-threatening care:

- **No appointment needed.** Just walk right in.
- **Convenient hours.** Some are open seven days a week, with extended evening, weekend and holiday hours.
- **Lower prices.** You'll almost always pay lower copays and out-of-pocket costs than you will at an ER.
- **Less waiting.** The average ER visit is significantly longer than a visit to a walk-in or urgent care facility.
- **Many locations.** It's easy to find a walk-in or urgent care facility near you.
- **Fully staffed.** Urgent care centers and walk-in clinics are overseen and serviced by licensed providers including doctors, nurse practitioners and physician assistants depending on site location.
- **Connections with local ERs.** If you need more extensive care, you'll be referred to the closest ER.



When you need lab work

When your doctors request lab work, it's best to choose Quest Diagnostics, or LabCorp, our preferred in-network lab testing providers. Aetna has preferred negotiated rates with Quest Diagnostics and LabCorp. This means that members who seek lab work from out-of-network labs, will pay more money out of pocket as they generally cost more.

Care outside of the United States

Through us, you have access to 1.3 million medical providers in the United States and 165,000 outside of the United States. We make it easy for you to find care when and where you need it using these simple steps.

To find care:

1. Go to **AetnaInternational.com** and log in to Health Hub with your username and password
2. Using the drop-down boxes under "**Find Health Care**," select a country and city, then click "**Search**" to find a doctor near you

To initiate a direct settlement request for a listed hospital outside of the United States:

1. Click the "**Apply for direct settlement**" button to be directed to the appropriate form
2. Complete the form, then click "**Submit**" at the bottom of the page



Scheduling your non-emergency appointment

To make a non-emergency medical appointment, you can just call the doctor or medical facility directly.



Requesting a preauthorization

If you need non-urgent medical attention and want to ensure a smooth direct settlement process, it's a good idea to contact us at least five business days before your scheduled visit to request a Letter of Authorization (LOA). This helps ensure procedures will be covered and your provider will settle the charges with us. Please remember to bring a copy of the LOA and your Member ID Card with you to your appointment.

In emergency situations, please get the care you need first, and then submit your direct settlement request as soon as you're able.

Step 6

Get the scoop on submitting claims



When claims are required

If you choose a doctor in our direct settlement in the U.S., you can usually access care without having to submit a claim.

If you choose to go outside the network for care or you are seeking care outside of the U.S., you'll need to pay at the time of service and then submit a claim for reimbursement.

A Before you submit your claim

- You'll need to submit your claim within 180 days of your treatment
- Have all supporting documents on hand, including original receipts, certificates and X-rays
- Put your Member ID number on each document you submit
- Be ready to provide complete details of your visit, including the reason for it and a description of services provided
- Know what currency and method — check, wire or electronic funds transfer (EFT) — you'd like to be reimbursed in. (We don't charge processing fees for EFT, wire transfers or direct deposits, but your bank might, so make sure you check.)

B Submitting your claim

1. Log in to Health Hub at AetnaInternational.com
2. Click "**My Claims**," then select "**New claim**" to be taken to your online claim form, which is prefilled with as many details as we have
3. **Complete** the online form
4. **Scan and upload** your receipts
5. Select your preferred currency and method of reimbursement in the "**Summary of Reimbursement**" and "**Banking**" sections on your claim form
6. **Submit** your claim, noting your reference tracking number to check your claim status

You can also submit a claim by traditional mail or secure fax. But, you'll usually get your money faster by submitting your claim electronically.

C After submitting your claim

Your claim will show up in the claim center section of Health Hub under "**Online submission history**." Keep your original receipts in case they're needed for verification purposes.

D How to track your claim

1. Log in to Health Hub and select "**My Claims**"
2. Select "**status**." You'll be taken to a screen where you can view the status of your claims and your Explanation of Benefits.

E For future claims

You can submit another claim for the same provider in the future by using the "modify" feature from your previous claim to submit a new claim.



Set up automatic payments

You can also set up a recurring repayment option with multiple reimbursement methods. Select any previously saved payment method when completing and submitting your claims online to ensure your payment is sent to the most convenient place for you. Here's how:

- 1. Log in to Health Hub and click “[My Claims](#)”**
- 2. Under “[Get reimbursed](#),” select “[More about the claims process](#)”**
- 3. Look at the “[Repeat repayment details](#)” page to make sure the information is accurate**
- 4. Select country under “[Add a new payment method](#),” then click “Continue”**
- 5. Complete the form, then click “Submit” to save this repeat repayment payment method for future use**

Step 7

Discover ways to reach your best health

Customizing your health and wellness experience

Our approach to supporting you in your health journey is highly personalized through:

Our **International Care Management Program**, which helps you navigate the global health care landscape so you can focus on your well-being. Led by our clinical Care and Response Excellence (CARE) team, our program supports everything from clinical precertification and pre-trip planning, to acute and chronic care management, and much more. With one-on-one assistance from a clinician, we offer personalized, culturally relevant support no matter where you are in the world.

Our **Well-being Assessment**, to help determine your current state of health, evaluate your personal health risks and recommend an action plan to get you on the road to your best health.



Find out about the valuable health and wellness programs you have access to

Once you've registered for Health Hub (Step 2) — your personalized, secure member website — you'll be able to log in and see all the great health and wellness benefits and resources available to you.

We want to help you get started:

1. **Log in to Aetna.com** and find health and wellness programs
2. **Or call our CARE team** using the number on your Member ID Card to talk about what support is available for your specific needs





Teladoc



Your comprehensive suite of virtual care

Teladoc is our telemedicine offering of virtual care support for your health and wellness needs. Connect with licensed doctors by mobile app, web or phone. Available to members in the United States only.

General medical service

Gives you 24/7 on-demand access to board-certified doctors by phone, video, or mobile app. That means no more costly trips to the emergency room for nonemergency conditions or wasted time waiting at the doctor's office.

Behavioral health care

Secure, discreet, and confidential ongoing support for members seeking help with anxiety, stress, depression, and more. You can schedule a video visit with a board-certified psychiatrist, psychologist, or

licensed therapist seven days a week, 7 a.m. to 9 p.m., from the comfort of your own home.

Dermatology

You can upload images and provide details about their skin issue to receive a response in just two business days from a licensed dermatologist. Includes seven-day follow up for any questions members may have.

Caregiving

Enables you to extend the Teladoc General Medical service to someone they care for with two or three-way video or phone visits with a licensed doctor.

How to register:

Go to Teladoc.com/Aetna or if you prefer, you can call **1-855-Teladoc (835-2362)**

Step 8

Let us know if you have any questions



Our Member Service Center representatives are here for you 24/7 to answer any questions you may have. To reach them, simply **call the number on your Member ID Card** for help.



Do you use a screen reader or other assistive device?

You can ask for digitally accessible versions of any of your plan documents using **this online form**.

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