Dear Retiree:
Simply hand this to the billing specialist at your doctor's office to help them with your new medical plan.

Instructions for your doctor

Provider instructions for customized group Medicare Advantage plans

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What is an extended service area (ESA)?

A plan with extended service area (ESA) allows you to use doctors and hospitals in or out of the Aetna Medicare network. If your doctor is in network, it means they're guaranteed to accept the Aetna plan. If your doctor is out of network, they can still bill us for treating you. This won't cost you more.

Generally, you can use an out-of-network doctor or hospital. However, they must be eligible to receive Medicare payment and accept your plan.

To find out if your doctor is in network, or to see if they will accept your Aetna plan as an out-of-network provider, call us at **1-800-307-4830 (TTY: 711),** Monday-Friday, 7 a.m. to 8 p.m. CT.

Dear Provider,

Your patient is a member of an employer-sponsored Aetna Medicare Advantage plan. This plan gives the retiree access to a health plan sponsored by their former employer.

Aetna is a retiree benefits health plan partner. Starting January, this retiree will be a member of the Aetna Medicare Advantage PPO plan with Extended Service Area (ESA). This unique, customized group plan is only available to members whose former employers sponsor these plans.

You can see Aetna Medicare Advantage members even if you're not part of our network.

Just read this information sheet to see how Aetna Medicare makes it easy for your patients to continue to see you under our plan, regardless of whether you are in our network.

Here's what you need to know:

- If you already participate with Aetna, the terms of your agreement apply.

- If you **don't currently participate with Aetna, no contract** is required to see patients enrolled in the group Medicare Advantage plan.

- We encourage you to join our network; you'll find it's **easy to work with us.**

- This plan covers all **Original Medicare benefits and more**, including many preventive services.

- Referrals are **not** required.

- Precertification is recommended, but not required.

- You may collect the copayment, coinsurance and/or deductible for covered services as shown on your patient's Aetna Medicare Advantage ID card.

- Simplified billing — submit one bill to Aetna and receive one remittance.

- Reimbursement is simple and easy.

- The Medicare fee schedule and Medicare limiting charges will apply.

What we pay you:

- **Medicare-allowable rates** for clean claims on covered services under your patient's plan

- **Less the patient cost share** (copayment, coinsurance and/or deductible) under your patient's plan

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How to submit claims

Include the patient-paid amount on claims submitted to us. Claims will be processed based on:

- Original Medicare billing rules
- Medicare fee schedule and Medicare limiting charges
- All prospective payment system requirements
- Local coverage determinations
- The patient's plan documents, including their Evidence of Coverage

With respect to bundling/unbundling logic, we use the National Correct Coding Initiative (NCCI). The link to NCCI on the Centers for Medicare & Medicaid Services (CMS) website is **www.cms.gov/nationalcorrectcodinited/**.

Electronic claims submission

Use our electronic payer ID #60054.

Paper claims submission

Submit all paper claims for covered services using an Aetna claim form or by using the standard CMS-1500 or UB-04 form and send to:

Aetna
PO Box 981106
El Paso, TX 79998-1106

Each employer sets up different payment arrangements for their retirees and they should check with Aetna for more information on those benefits.

Here's the Aetna medical ID card your patient should have

aetna®   Medicare PPO

Plan Name

GRP# : **123456**

                                    MEMBER SINCE 2018

ID **ME12345**
NAME   **JOHN Q. SAMPLE**
BIN   610502 PCN   PARTBAET

ISSUER (80840)

                                    PCP **XX**   ER **XX**
                                    SP **XX**   HO **XX**
                                    AS **XX**

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www.aetnaretireeplans.com
Customer Service:
Medical and Behavioral Health   **1-888-267-2637**
24 Hour Nurse Line   **1-800-556-1555**
Provider Line   **1-800-624-0756**
TDD/TTY   **711**

Send claims to:
Aetna Medicare
PO BOX 981106
EL PASO, TX 79998-1106

This card does not guarantee coverage.

Payer ID# 60054
Medicare limiting charges apply.

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