



Possibilities

2017 Annual Enrollment for Guardian Life

aetna[®]

 **GUARDIAN**[®]

Enrollment that rolls with you

Welcome to an annual enrollment that is all about you — your health, your needs and your choices. Wherever you are on your health journey, we are ready to join you — starting with plans that put you at the center.

Open Enrollment:

Field Associates:

October 30 – November 10, 2017

Home Office:

November 15 – 28, 2017

We invite you to take a look at Aetna. **To learn more** about your Aetna medical plan options and tools, visit **aetnanonmember.com** or call **1-866-244-1573**.



Jump start your workout with our free Spotify® playlist. Search “Aetna” on Spotify.

Your life is full

That's why you need a health plan that helps you stay in balance. With Aetna, you can count on technology that saves time. On health programs designed for your family, too. And on personal support to help you stay healthy.



Tech at your fingertips

We believe technology should save you time. Period. From pulling up your **personal health record** to **estimating costs** before you see the doctor, it can all be done from your smartphone.



Support that makes sense

Whether it's seeing a doctor anytime, anywhere with **Teladoc**[®] or working with an **In Touch Care**SM nurse to manage a chronic condition, your Aetna plan comes with support programs that streamline your health care.



Prioritize your health

With everything you do, it's easy to let your own health slip down the list. Your plan offers special **discounts** on everything from gym memberships to weight management.



Download Aetna Mobile*

Use this free app to take care of benefits business, find doctors and show your ID card. **NEW!** Fingerprint log-in.

Find out what Apple[®] apps we recommend to help you get fit. On your iPhone[®] go to apple.co/2vfdS1g.

*Standard text messaging and other rates from your wireless carrier may apply.

Convenience, balance & support



Find Care

Find network doctors and facilities

Search our large network at aetna.com. Use the Aetna Mobile app to find health care providers on the go. **New to Aetna?** With over a million providers in our network, there's a very good chance you'll find your doctors!

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.

Get help for special medical care

For special medical situations like organ transplants, rare diseases and heart surgery for children, the **National Medical Excellence Program**® can help you get the care and resources you need.

Access high-performing facilities

When you become an Aetna member, you'll have access to a special network of hospitals and other facilities known as **Institutes of Quality**®. These facilities specialize in bariatric, heart and spine surgeries, and knee and hip replacements.

24/7/365 medical care

Speak to a licensed doctor by web, phone or mobile app in under 10 minutes. Teladoc® doctors can treat many conditions, like cold and flu symptoms, sinus infections, bronchitis, depression and more! For more information, visit teladoc.com/aetna.



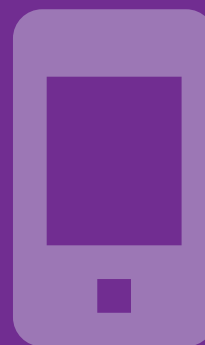
Manage Claims

Understand your health care costs

Review all your claims history in one place. You can see the amount the doctor billed, the amount your plan paid and the amount you owe.

Review your Explanation of Benefits (EOB)

Every time you have a claim, we'll prepare a report that summarizes your claims details. You can view your EOBs online or request paper copies.



Register at aetna.com

Once you enroll, be sure to register for your member website right away. It's where you find providers, learn about and access your tools and programs, look up costs, claims and benefits information, and more!

To log in as a guest, use **ahfhsaguest1** as your user name and password.



See Coverage & Costs

Quickly look up balances and benefits

Check your balances and transactions, see where you are with your deductible and coinsurance, and review coverage for yourself and your family members.

Stretch your health care dollars

Did you know that medical costs can differ greatly between health care providers for the exact same service? Compare estimated costs before you receive care with the **Member Payment Estimator**.¹ People who used this tool saved an average of \$170 on their out-of-pocket costs.²



Stay Healthy

Find all your health info in one place

Keep track of your family's health records with your online **personal health record**. No more searching for the kids' immunization history when it's time to fill out those school or sports forms.

Get free, 24/7 nurse support

Do you have a health question? With the **Informed Health® Line**,³ you can speak to a registered nurse about things like how to prepare for a doctor visit or if you should take your child to the emergency room.

Give your baby a healthy start

From managing pregnancy symptoms to quitting smoking for good, the free **Beginning Right®** maternity program gives you extra support to enjoy a healthy pregnancy right from the start.

Get personal attention for your chronic condition

With the **Aetna In Touch CareSM** program, you can work with an Aetna nurse or use helpful online resources. This program can help you stay healthy, manage your conditions and achieve your goals with an individualized action plan.

Keep up with preventive care

Catch problems early when they are less expensive to treat. You pay nothing for eligible preventive care as long as you stay in the network.

You've got options

The chart below compares your medical plan options for 2018.

Plan options for 2018	HDHP Gold Plan	HDHP Silver Plan
	In network/Out of network	In network/Out of network
Annual deductible		
Single	\$1,500/\$3,000	\$3,000/\$6,000
Family*	\$3,000/\$6,000	\$6,000/\$12,000
Annual out-of-pocket maximum (includes the annual deductible)		
Single	\$4,000/\$8,000	\$6,000/\$12,000
Family**	\$8,000/\$16,000	\$12,000/\$24,000
What you pay for covered services***		
Preventive care	0%/30%	0%/45%
Doctor visit	10%/30%	25%/45%
Specialist visit	10%/30%	25%/45%
Emergency room	10%/10%	25%/25%
Non-emergency care in an emergency room	Not covered	Not covered
Hospital inpatient	10%/30%	25%/45%
Hospital outpatient	10%/30%	25%/45%

* The entire family deductible must be satisfied before the plan pays a portion of the cost.

** If an individual family member meets the individual out-of-pocket maximum, the plan will cover 100% of costs for that individual for the remainder of the calendar year. Other family members will be covered at the coinsurance levels until the remainder of the family out-of-pocket maximum is reached.

***After deductible, except for eligible in-network preventive care. Emergency care is after in-network deductible for both in and out of network.



New to Aetna?

You may be able to continue your treatment

If you or someone in your family is undergoing medical treatment with a doctor who is not in the Aetna network — for example, if you are in at least your second trimester of pregnancy, undergoing chemotherapy or had a recent surgery — you may be able to avoid disruption in care. Call your Aetna Concierge at **1-866-244-1573** to ask for a Transition Coverage Request form. If approved, you will be able to continue with your present doctor and receive network benefits for up to 90 days.

Questions?



Call your Aetna Concierge at **1-866-244-1573** for:

- Benefits and coverage questions
- Help finding a doctor
- Directing you to tools and programs

@AetnaHelp

Aetna Twitter reps are here to help, listen and learn from you.

Medical plans, plain and simple

If you don't really understand health insurance, you're not alone. Here's a handy guide with straightforward explanations about how it works.

How it works



You pay

Deductible

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



You and the plan pay

Cost sharing

Once you meet your deductible, you share the cost with the plan. Your share 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 10%, you pay \$10.



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.

How to pay for care



Visit your doctor, show your ID card



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.)



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



Plan pays the provider 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.)



Doctor bills you for any amount you owe

HRA vs. HSA vs. FSA

You may be offered one or more of these tax-free accounts to help pay for qualified health care expenses. Your specific plan may vary, but here are the main differences.

Health reimbursement arrangement (HRA)	Health savings account (HSA)	Health care flexible spending account (FSA)
An HRA is part of your medical plan and automatically pays first for qualified health care expenses until the funds run out.	An HSA is a separate account you own and use for qualified health care expenses as you like.	FSA funds can be used for qualified health care expenses up to the amount you select during enrollment.
Usually pairs with a high-deductible health plan.	Requires a high-deductible health plan.	Pairs with most types of health plans, but a health plan is not required.
Only eligible employers can contribute.	You, your employer or anyone else can contribute.	You and your employer can contribute.
Balance can carry over as long as you stay in the plan, but your employer may limit how much can carry over.	You can use funds now or save them for later, and you keep your account even if you leave the plan or the company.	You lose your funds if you do not use them before the end of the plan year (+ any grace period).

¹ Estimated costs not available in all markets. The tool gives you an estimate of what you would owe for a particular service based on your plan at that very point in time. Actual costs may differ from the estimate if, for example, claims for other services are processed after you get your estimate but before the claim for this service is submitted. Or, if the doctor or facility performs a different service at the time of your visit.

² Member Payment Estimator Study. Aetna Informatics and Product Strategy. August 2012.

³ While only your doctor can diagnose, prescribe or give medical advice, the Informed Health Line nurses can provide information on more than 5,000 health topics. Contact your doctor first with any questions or concerns regarding your health care needs.

TTY: 711

To access language services at no cost to you, call 1-866-244-1573.

Para acceder a los servicios de idiomas sin costo, llame al 1-866-244-1573. (Spanish)

如欲使用免費語言服務，請致電 1-866-244-1573。(Chinese)

Your Health Savings Account (HSA) will be administered by Optum. There may be fees associated with an HSA.

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Aetna complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.