

# Top Frequently Asked Medicare Advantage Questions from Retirees

## 1. What are my SHBP/SEHBP Medicare Advantage options for 2017?

In 2017, SHBP/SEHBP retirees will continue to have access to four different Medicare Advantage plans offered through Aetna. The four benefit plans are:

- Aetna Medicare Advantage PPO ESA 10
- Aetna Medicare Advantage PPO ESA 15
- Aetna Medicare Advantage HMO 10
- Aetna Medicare Advantage HMO 1525

All four plans will continue to offer flat dollar copays for most benefits, so you know exactly how much you will pay when you visit a provider.

## 2. How do I find out if my provider accepts the Aetna plan I have selected?

If you choose one of the Aetna Medicare Advantage PPO Extended Service Area (ESA) plans, you can visit any Medicare-accepting provider that is willing to treat you. You will pay the in-network cost sharing to all providers whether they are in Aetna's network or not.

If you choose one of the Aetna Medicare Advantage HMO plans, you can see any provider in our Aetna Medicare Advantage network.

To see if your doctor currently accepts the plan, you can call Aetna Member Services at **1-866-234-3129** (TTY: 711), 8 a.m. to 6 p.m. local time, Monday through Friday. We're here to help you.

You can also find out online if your provider is in Aetna's Medicare Advantage network. You can go to **AetnaStateNJ.com**.

## 3. How long has Aetna offered Medicare Advantage plans?

Aetna was one of the first carriers to offer Medicare Advantage plans. We have offered them since 1986. Not only do we have over 30 years of Medicare Advantage experience, but Aetna also processed the first Original Medicare claim back in 1966!

## 4. Does Aetna have a lot of Medicare Advantage membership nationwide? How about in the State of New Jersey specifically?

Nationwide, Aetna covers more than 1.3 million Medicare Advantage members. Currently in the State of New Jersey, there are 250,000 Medicare eligible members enrolled in Medicare Advantage plans, and Aetna has 65,000 of those members enrolled.\*

As a retiree of the SHBP/SEHBP, you are offered Medicare Advantage plans which are sponsored by the state. Plans like these, which are sponsored by a previous employer, are often called Group plans. Aetna has more Medicare Advantage Group plan enrollment than any other carrier in New Jersey. We cover more than half of the Group based Medicare Advantage members in the State of New Jersey today.\*\*

\*Enrollment numbers are as of September 1, 2016 and include enrollments accepted through August 12, 2016.

\*\* Source: Aetna membership database report 2nd Quarter 2016 for the New Jersey SHBP and SEHBP Aetna Medicare Advantage plans

**5. If I enroll in one of the Aetna Medicare Advantage plans, how can I be sure I will continue to receive the same or better service than I receive today?**

We have surveyed State of New Jersey members enrolled in our Medicare Advantage plans today, and the overall satisfaction rate of those surveyed is 97%.\*\*\*

**6. Do I still have to pay for my Medicare part B? Is the Medicare Advantage plan secondary to Medicare?**

In order to be enrolled in a Medicare Advantage plan, you must be enrolled in Original Medicare Parts A & B and continue to pay your part B premiums. The Aetna Medicare Advantage plan will take the place of Original Medicare and become your primary coverage for all of your Part A & B benefits.

**7. Do I need a supplement plan also?**

No, the Centers for Medicare and Medicaid Services (CMS) do not permit Medicare eligible people to be enrolled in a Medicare Advantage plan and a supplemental plan. If you have a Medicare Advantage plan, it's illegal for anyone to sell you a Medigap policy unless you're switching back to Original Medicare.

**8. Can I travel outside of the U.S. and still have coverage?**

Yes, emergency and urgently needed services are covered under the Aetna Medicare Advantage PPO ESA and Aetna Medicare Advantage HMO plans when you travel outside the U.S. You may be required to pay the bill

at the time of service and file the claim with Aetna for reimbursement. Aetna will reimburse you based on Medicare's allowable amounts at the time of service.

**9. Are there any services excluded under the Aetna Medicare Advantage PPO ESA or Aetna Medicare Advantage HMO plans?**

Medicare Advantage plans are required to cover everything that Medicare covers. They also include additional services that Medicare does not cover.

**10. When I receive medical services, do I need to show my Medicare card and my Aetna Medicare Advantage plan card?**

No, you only need to show your Aetna Medicare Advantage plan card when you receive medical services under that plan.

**11. Will I receive an Explanation of Benefits (EOB) from Aetna? Will I still receive an EOB from Medicare?**

Because Aetna Medicare Advantage will be your Medicare plan, you will only receive an EOB for Aetna Medicare Advantage; you will not receive a separate EOB from Medicare.

**12. What if an out-of-network doctor agrees to accept the Aetna Medicare Advantage PPO ESA plan, but won't bill Aetna for services?**

All you have to do is submit the bill to Aetna yourself using an Aetna claim form.

\*\*\* Source: 2015 New Jersey SHBP and SEHBP Aetna Medicare Advantage group plan member satisfaction survey

Aetna Medicare is a PDP, HMO, PPO plan with a Medicare contract. Our SNPs also have contracts with State Medicaid programs. Enrollment in our plans depends on contract renewal. See Evidence of Coverage for a complete description of plan benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by service area. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, provider network, premium and/or co-payments/co-insurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium. Out-of-network/non-contracted providers are under no obligation to treat Aetna members, except in emergency situations. For a decision about whether we will cover an out-of-network service, we encourage you or your provider to ask us for a pre-service organization determination before you receive the service. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. Participating physicians, hospitals and other health care providers are independent contractors and are neither agents nor employees of Aetna. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change.

Aetna complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATTENTION: If you speak a language other than English, free language assistance services are available. Visit our website at [www.aetnamedicare.com](http://www.aetnamedicare.com) or call the phone number listed in this material

ESPAÑOL (SPANISH): ATENCIÓN: Si usted habla español, se encuentran disponibles servicios gratuitos de asistencia de idiomas. Visite nuestro sitio web en [aetnamedicare.com](http://aetnamedicare.com) o llame al número de teléfono que se indica en este material.

繁體中文 (CHINESE): 請注意: 如果您說中文, 您可以獲得免費的語言協助服務。請造訪我們的網站 [aetnamedicare.com](http://aetnamedicare.com) 或致電本材料中所列的電話號碼。

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