

THE TRADITIONAL INDEMNITY OPTION

In addition to the **POS** and **HMO** options, the Medical Plan offers a **Traditional Indemnity** option. This option is only available to employees who live in a non-**POS** area.

How the Traditional Indemnity Option Works

Under the **Traditional Indemnity** option:

- You and your **covered dependents** may go to any **physician** you choose. Or you may choose to take advantage of a special feature -- the **National Advantage Program (NAP)** -- if it is available in your area.
- Each year, you will be required to pay a portion of your eligible expenses before the Medical Plan begins to pay expenses. This amount is called the annual **deductible**.
- After you satisfy the **deductible**, the Medical Plan will reimburse you for a portion of your eligible expenses and you will pay the rest. The percentage you pay is called your **coinsurance** percentage.
- The Medical Plan will not cover any benefit reductions due to failure to precertify certain treatments.
- The Medical Plan will not cover any charges above the **allowable amount**.
- You file claim forms to be reimbursed unless you use **NAP network providers**.

When you receive your medical care from **providers** in the **National Advantage Program**, benefits continue to be paid according to the **Traditional Indemnity** option schedule; however, **provider** charges generally are lower and guaranteed to be within the **allowable amount**. Another advantage is that **providers** in the **National Advantage Program** must meet strict quality guidelines to join and remain in the program. To get a directory of **NAP network providers** in your area, contact **Aetna** Member Services at the number printed on your ID card or log onto **Aetna** Navigator at www.AetnaNavigator.com.

Precertification Is Required for Certain Services

The decision of whether or not to undergo any given treatment is for you and your doctor to make. However, since there are many types of services for which alternatives may be appropriate, the Medical Plan requires that you precertify certain treatments.

Under the **Traditional Indemnity** option, you and your **covered dependents** must get **precertification** for certain covered expenses. If you do not get the required **precertification**, the amount of benefits available will be reduced, and in some cases, no benefits are payable. This means your cost will be higher. See "Precertification."

Free Physical Examinations

You and your **covered dependent** age 18 and over may take advantage of free physical examinations and health screenings in accordance with age guidelines as determined by the **Claims Administrator**. Screenings may include prostate screenings, mammograms and colorectal screenings.

Your ID Cards

After you enroll in the **Traditional Indemnity** option, you will receive an ID card which contains important information such as:

- Your name and your **covered dependents** names
- Your member ID number
- The telephone number for **Aetna Member Services**
- The telephone number to call for **precertification**
- What to do in an **emergency**

Filing a Claim

You do not need to submit a claim form when you use **NAP network providers**. You must file a claim to request benefits when you do not use **NAP network providers**. Please file your claims as soon as possible – generally, within 60 days of receiving services. Claims must be filed within 15 months from the date of service to be eligible for payment.

Aetna Member Services

Aetna Member Services is available to help you with issues related to the **Traditional Indemnity** option. You can reach **Aetna** Member Services at the telephone number printed on your ID card or log on to **Aetna** Navigator at www.AetnaNavigator.com:

- To request information about the **NAP network** (online in DocFind, under Select a Plan, select National Advantage™ Program (NAP)),
- To replace a lost ID card,
- To find out if a claim was paid,
- If you have a service issue with a **NAP network provider**,
- To get claim forms, or
- To obtain further details on benefit coverage.