2027 Medical and Pharmacy Benefits



BENEFITS for EveryWorld

PRESENTED BY
Dave Fox | Sr. Account Executive
Pamela White | Sr. Account Manager

November 4, 2026

aetna®

What we'll cover

01 Welcome to Aetna

02 Medical Plans

03 Transition of Care

04 Tools to Manage Your Care

05 Aetna Pharmacy

06 Aetna One Advocate

Aetna 2027 medical plan options

Continued

CDHP

PPO 500

Common features across CHDP and PPO 500 plans:

- Network is Aetna Choice POS II (Open Access)
- Option to see in-network and out-of-network providers, but you'll pay more out of pocket for out-of-network care.
- No PCP election or specialist referrals required.
- Pharmacy, mental health and substance abuse are integrated.
- CDHP Deductible applies to all services unless otherwise noted. Deductible waived for preventive medications.
- PPO 500 Copays apply to services along with deductible on some services
- National preferred lab vendors are Quest Diagnostics and LabCorp.
- Aetna 1 Advocates are available to help Monday – Friday, 8am – 6pm (local time)



CHDP

	In network	Out of network
Provider choice	See any doctor but pay less with in-network doctors	
Network	Open Access Choice POS II	
Deductible	$1,750 employee only $3,500 family	$4,000 employee only $8,000 family
Preventive care	100% covered	50% after deductible
PCP / OB/GYN / Pediatrician	80% after deductible	50% after deductible
Specialist	80% after deductible	50% after deductible
Other copays*	Urgent Care & Emergency Room 80% after deductible Ambulance 100% after deductible Labs 80% after deductible	Urgent Care & Emergency Room 80% after deductible Ambulance 100% after deductible Labs 50% after deductible
Inpatient Hospital Stay	80% after deductible	50% after deductible
Outpatient Hospital	80% after deductible	50% after deductible
Prescriptions	$4 generic, 20% with $20 min and $45 max brand 35% with $40 min and $100 max other brand	50% after deductible
Out-of-pocket maximum	$4,500 employee only / $9,000 family	$6,350 employee only / $12,700 family

PPO 500

	In network	Out of network
Provider choice	See any doctor but pay less with in-network doctors	
Network	Open Access Choice POS II	
Deductible	$500 employee only $1,000 family	$1,000 employee only $2,000 family
Preventive care	100% covered	70% after deductible
PCP / OB/GYN / Pediatrician	$20 copay	70% after deductible
Specialist	$45 copay	70% after deductible
Other copays*	Urgent Care $50 Emergency Room $200, Ambulance 100%, Labs 90% after deductible	Urgent Care $50, Emergency Room $200, Ambulance 100% Labs 70% after deductible
Inpatient Hospital Stay	90% after deductible	70% after deductible
Outpatient Hospital	90% after deductible	70% after deductible
Prescriptions	$10 generic, $30 brand $60 other brand (deductible does not apply)	40% after deductible
Out-of-pocket maximum	$3,000 employee only / $6,000 family	$4,000 employee only / $8,000 family

*These are only a sampling of the copays on the plan, please review plan details for all applicable copays.

Aetna 2027 medical plan options

In Network Plan
is closed to new enrollees. It will remain available to current participants.

Aetna In-network Plan features:

- Most outpatient services are covered with a copay.
- Deductible and coinsurance applies to services without a defined copay, but are lower
- Network is **Aetna Select (Open Access)** covers in-network services only.
    - **No coverage for out-of-network care** under the plan unless a true emergency.
- No PCP election or specialist referrals required.
- National preferred lab vendors are Quest Diagnostics and LabCorp.
- Pharmacy, mental health and substance abuse are integrated.
- Aetna 1 Advocates are available to help Monday – Friday, 8am – 6pm (local time)



In-network PLAN

	In-network
Provider choice	See any doctor but pay less with in-network doctors
Network	Open Access Aetna Select
Deductible	No Deductible
Preventive care	100% covered
PCP / OB/GYN / Pediatrician	$20 copay
Specialist	$35 copay
Other copays*	Urgent Care $50, Emergency Room $200, Ambulance 100% Labs 100% covered
Inpatient Hospital Stay	100% after $300 copay
Outpatient Hospital	100% after $100 copay
Prescriptions	$10 generic, $30 brand $60 other brand (deductible does not apply)
Out-of-pocket maximum	$1,500 employee only / $3,000 family

*These are only a sampling of the copays on the plan, please review plan details for all applicable copays.

aetna®

Feeling your best

Many people live with a behavioral health condition

People of any age, gender, income, race or religion can be affected by:

- Anxiety
- Depression
- Eating disorders
- Substance use disorders

Sometimes, the health conditions are mild and short lived. Other times, they're more serious and long lasting. Either way, there are effective treatments that can help. Your medical plan includes behavioral health benefits with the help and resources you need to work toward feeling your best.



Behavioral Health Condition Management

Just call the number on your ID card

- **1-877-700-0144**



Spring Health (Employee Assistance Program)

Starting January 1, 2027, up to 12 free therapy sessions and 12 free coaching sessions per year are available through Spring Health

For questions or support:

- **https://benefits.springhealth.com/customer/abk**
- **1-855-629-0554**

  General support: M-F, 8 AM -11 PM ET

  Crisis support: 24/7 (press 2)



Virtual Care is available with many providers

Find behavioral health providers at **Aetna.com** or on the **Aetna Health App.**

Here are steps you can take now to help you on your path to a healthier you

Engage with a PCP to help guide your care

- While you are not required to have a referral to see a specialist, PCPs can help you better manage your care and build a personal care plan for you.
- Need a network doctor or specialist? Use our online directory at **Aetna.com** or the **Aetna Health app.**

Schedule your annual preventive care and well child visits

- Annual checkups, routine gynecological exams, vaccines, flu shots, and wellness exams for children are all included in your plan at no cost to you.
- Annual exams are now allowed 1 per calendar year.

Complete a Health Risk Assessment at **Aetna.com** (Stay Healthy) or go to the **Aetna Health app** (Improve)

Transition of care (TOC)

Available for those in active course of treatment

TOC is temporary, usually for 90 days, as we transfer services from a nonparticipating provider or primary care physician to a participating provider.

You can visit your Aetna® member website or call member services to:

- Get a TOC form
- Get help completing and submitting the form



aetna

Prior authorization transfers

Loading begins in mid-December

Only approved, non-expired prior authorizations will transfer to Aetna.

For example, a prior authorization that expires at the end of December will not transfer.

Check your status

Call Aetna for status updates

1-877-700-0144

You will now be able to view your prior authorization status in the Aetna app and on the website.

Tools to Manage Your Care

©2024 Aetna Inc.

Find an in-network provider

Select your medical plan below to search the correct provider network.

In-network PLAN

Aetna Select (Open Access)

Search for providers and facilities participating in the Aetna Select network.

Search Aetna Select providers

PPO 500 OR CDHP

Aetna Choice POS II (Open Access)

Search for providers and facilities participating in the Choice POS II network.

Search Choice POS II providers

Choose the directory that matches the plan shown on your benefits materials.

Provider participation may change. Confirm that the provider participates in your specific network before receiving care.

©2026 Aetna Inc. Confidential and proprietary.

Use our website to
make the most of your benefits and get healthier



Find care

Find and
compare doctors

•

Download digital ID cards



Cost of care

Get estimates for your
out-of-pocket costs

•

Track account balances and
progress toward your
deductible

•

View and manage claims



Quality and **cost**

Get coverage and
benefits information

•

Use information to help make
treatment decisions

•

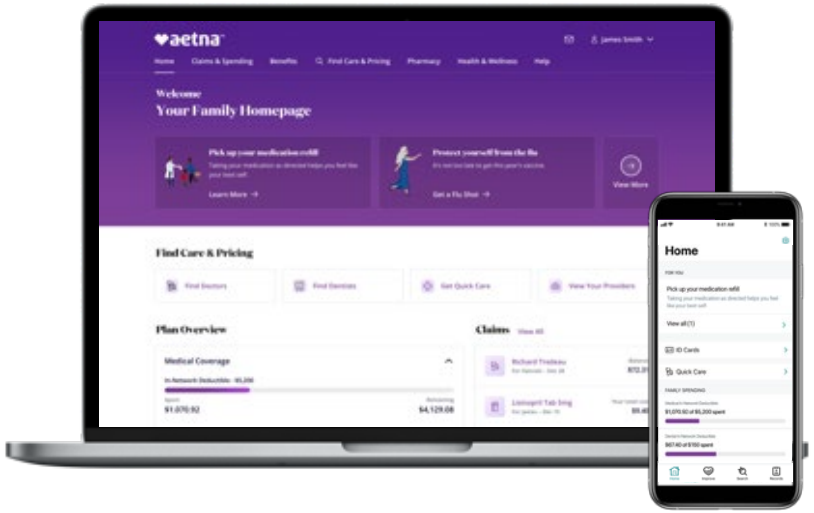
Look up
symptoms, conditions
and medications

Everything you need on one website: **Aetna.com**.

Take charge of your health care

with the Aetna® member website and the Aetna Health℠ app

Find everything you need, all in one place
Set up your account to manage your benefits and more at home or on the go.



Download the Aetna Health app

Just visit **Aetna.com** to create an account and log in to your member website.

App screens are a composite of real situations.
All names and other identifying information are fictional.

A smarter, simpler, more convenient way to take charge of your health care and benefits

Manage your plan

- Check your plan summary for detailed information on what's covered by your plan.
- Track your spending and understand your progress toward meeting your individual and family deductibles.
- Easily access your digital ID card anytime.

Connect to care

- Use tools to help you choose quality, in-network and local providers, pharmacies and facilities, including convenient retail clinics and urgent care.
- Get cost estimates for visits and procedures before getting care.
- Talk to a doctor anytime by phone or video chat from home.

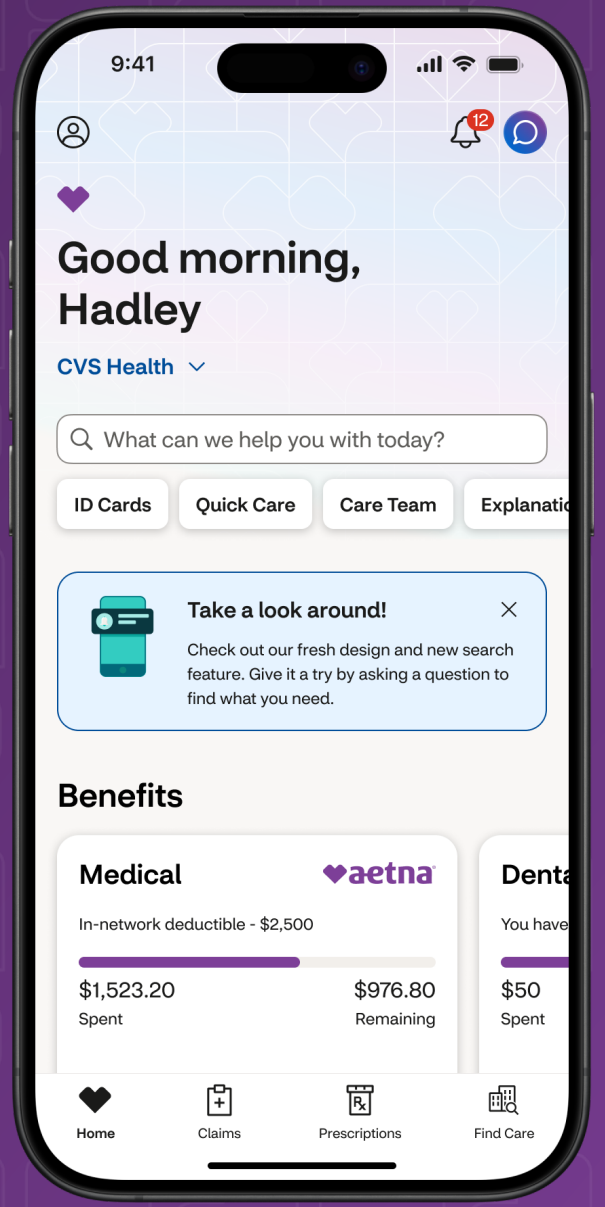
Improve your health

- Receive personalized reminders to improve your health.

Aetna Health app

- Get cost estimates for visits, procedures and medications
- Get 24/7 access to a licensed doctor by phone or video
- View your health plan summary and get information about what's covered
- View up to two years of claims for your whole family
- Pay claims directly from the app
- Track family and individual spending and progress toward meeting deductibles
- Access your digital ID card
- Get personalized health actions based on your profile

Learn more and download the app



Pharmacy

©2024 Aetna Inc.

Aetna Pharmacy

Your prescription benefits for 2027

An overview of your coverage, prescription options and pharmacy support

Coverage and Costs

Understand your plan's prescription copays, deductible and preventive medication coverage.

Filling Prescriptions

Explore retail pharmacies, 90-day maintenance prescriptions and mail-order options.

Specialty Support

Learn about CVS Specialty® Pharmacy and the transition of existing specialty drug approvals.

2027 Rx Plan Design

CDHP

2027 Rx copays after deductible

Retail generic: **$4**		Mail order: **$10**	
Brand (preferred list):	**20%** with **$20 min** and **$45 max**		
Mail order:	**20%** with **$50 min** and **$125 max**		
Brand (non-preferred):	**35%** with **$40 min** and **$100 max**		
Mail order:	**35%** with **$70 min** and **$175 max**		

CDHP:

Rx is subject to the deductible, then you pay copays up to the out-of-pocket maximum.

Prescriptions for chronic conditions
Some medications for chronic conditions bypass your deductible, including prescriptions to help you treat asthma, diabetes, hypertension and more. To see the full list go to the Preventive Medicine drug list.

The Health Care Reform Drug List includes certain preventive medications that, under the Affordable Care Act, are covered at no cost to you when prescribed by a doctor. To see the full list go to the Health Care Reform Drug List.

In-network and PPO 500

2027 Rx copays

Retail generic:	**$10**	Mail order: **$20**
Brand (preferred list):	**$30**	Mail order: **$60**
Brand (non-preferred):	**$60**	Mail order: **$120**

In-network and PPO 500:

RX is NOT subject to the deductible; you pay copays up to the out-of-pocket maximum.

All plans:

You may fill 90-day scripts for maintenance medications at a CVS Pharmacy® location*.

- Medications include injectable, infused and select oral therapies.
- Patient support programs are staffed by a clinical team of patient care coordinators, pharmacists and registered nurses, 24/7. For more information, visit **CVSspecialty.com**.
- All Specialty Medications are required to be filled through CVS Specialty Pharmacy

*Where available

2027 Pharmacy Updates

Maintenance medications and specialty approvals

Maintenance medications

Get a 90-day supply after your first two retail fills

1. Fill up to two 30-day supplies at an in-network retail pharmacy.

2. Then fill a 90-day supply at CVS Pharmacy®, Costco, participating Kroger affiliates or CVS Caremark® Mail Service Pharmacy. * If you continue to fill 30-day supply at retail pharmacy there is a $10 penalty copay.

MAIL ORDER: Your prescription can be delivered every 90 days.

Specialty drug approvals

Your existing approval carries over

If you have an active prior authorization for a specialty medication, that approval will carry over to your Aetna pharmacy benefit.

Specialty medications are filled through CVS Specialty® Pharmacy.

This helps support a smoother transition into your 2027 benefit.

Aetna One Advocate

October | 2026



Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna). Aetna, CVS Pharmacy® and MinuteClinic®, LLC (which either operates or provides certain management support services to MinuteClinic-branded walk-in clinics) are part of the CVS Health family of companies

©2023 Aetna Inc.

858454-01-03 (10/23)

Your Advocacy team



Member support

- Service advocates
- Clinical advocates
- Precertification specialist
- Medical director

Specialized resources

- Social worker
- Registered dietician
- Pharmacist
- Behavioral health specialist
- Transgender advocate
- Oncology advocate
- Network liaison
- Transplant case managers

Customer support

- Account executive
- Account manager
- Dedicated Plan sponsor liaison

One call does it all

Making the health journey easier for your employees

Member-obsessed support

- One phone number, one team and one advocate for all benefit questions
- Medical and pharmacy issues resolved by a single advocate
- Employees are connected to programs and partners within the benefits ecosystem
- Advocate takes ownership of tasks such as appointment setting and precertification tracking

Customized to you

- High-touch member identification and support
- Cultural training of your unique needs
- Proactive referrals to onsite clinics
- Detailed monitoring of call trends and performance
- Ongoing partnership and innovation



1-877-700-0144 (TTY: 711)

It’s simple

to get started with Aetna®



Enroll during your open enrollment period.

+



After your effective date:

Visit Aetna.com to create an account and log in to your member website.

Download the **Aetna Health℠ app**

Download on the App Store

GET IT ON Google Play

+



Review the drug list and work with your doctor if you’re taking any medicine that needs approval.

Apple, the Apple logo, iPhone and Apple Watch are trademarks of Apple, Inc., registered in the U.S. and other countries. App Store is a service mark of Apple Inc.

Google Play and the Google Play logo are trademarks of Google, LLC. The app is available on Google Play.

Thank you

©2024 Aetna Inc.



This material is for information only. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services. Not all health services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change.

Discounts for non-covered dental services may not be available in all states. Providers participating in the Aetna Vision network are contracted through EyeMed Vision Care, LLC. EyeMed and Aetna are independent contractors and not employees or agents of each other. Participating vision providers are credentialed by and subject to the credentialing requirements of EyeMed. Aetna does not provide medical/vision care or treatment and is not responsible for outcomes. Aetna does not guarantee access to vision care services or access to specific vision care providers and provider network composition is subject to change without notice. Vision insurance plans contain exclusions and limitations. Not all vision services are covered.

Health information programs provide general health information and are not a substitute for diagnosis or treatment by a physician or other health care professional. Health benefits and health insurance plans contain exclusions and limitations.

© 2018 Teladoc, Inc. All rights reserved. Teladoc and the Teladoc logo are registered trademarks of Teladoc, Inc. and may not be used without written permission. Teladoc is not available to all members and operates subject to state regulation. Teladoc and Teladoc physicians are independent contractors and are neither agents nor employees of Aetna or plans administered by Aetna. For complete description of the limitations of Teladoc services, visit Teladoc.com/Aetna.

Information is believed to be accurate as of the production date; however, it is subject to change.

For more information about Aetna plans, refer to **Aetna.com**.

Policy forms issued in Idaho by Aetna Health of Utah Inc. include: HI ID GrpAg 05, HI SG HGrpAg 03.

Policy forms issued in Idaho by Aetna Life Insurance Company include: GR-29/GR-29N, AL HGrpPol 05, AL HGrpPol-Vision 01.

Policy forms issued in Oklahoma include: AL COC00010, HC COC00010, AL-HCOC-Dental PPO 04, AL HCOC-Dental CD04,AL HCOC Vision AVP01.

Policy forms issued in Missouri include: AL HGrpPol 01R5, HI HGrpAg 05, HO HgrpPol 04, AL HGrpPol-Vision 01, AL HGrpPol-Dental 01, DM HGrpAG-Dental 02.

©2026 Aetna Inc.

90.25.944.1 (7/20)