

Aetna Medical Plan Changes for the 2025 Benefits Plan Year

- Effective October 1, 2024, new medical ID cards will be provided to all enrollees regardless of if there is a plan change for the new plan year or not. Digital ID cards will also be available on the Aetna member portal as of October 1, 2024.
- Effective October 1, 2024, Optum Bank will replace Inspira Financial (formerly Payflex) and become the new health savings account (HSA) custodial bank for worksite employees enrolled in an Aetna High-Deductible Health Plan (HDHP). Any HSA contributions will be sent to Optum beginning with the first paycheck in October. Worksite employees will receive a welcome kit and new HSA debit card directly from Optum.
- For all plans, Artificial Insemination (AI), also known as Intrauterine Insemination (IUI), will no longer require a diagnosis of infertility as of October 1, 2024.
- The following plan design change will be effective October 1, 2024 for all plans per the chart below. Please reference the client renewal site for further plan details.

Benefit	Plan Design Change
Rx – Insulin	\$25 copay maximum per fill, per 30-day supply, for formulary insulin

- Effective October 1, 2024, Aetna will be transitioning from Teladoc to CVS Health Virtual Care. Please see the chart below to understand how consultation fees will change. For more information, click [here](#).

Consultation Type	Current Teladoc Fee	New CVS Health Fee
General Medical: Non-HDHP Plan	\$5	No change
General Medical: HDHP Plan*	\$56	\$55
Dermatology	\$85 (advanced dermatology)	\$5 (basic dermatology)
Dermatology: HDHP Plan*	\$85 (advanced dermatology)	\$55 (basic dermatology)
Behavioral Health: Therapist	\$90	\$85
Behavioral Health: 1 st Psychiatrist Visit	\$215	No change
Behavioral Health: Ongoing Psychiatrist Visit	\$100	\$99

*Until deductible is met, then \$5 copay per visit

- Effective October 1, 2024 all Aetna plans will now include Gene Based Cellular & other Innovative Therapies (GCIT) coverage. **The below cost to enrollees would apply if the Aetna developed national network of providers for GCIT is used.** Please reference the client renewal site for further plan details.

Plans with Deductible (Including HDHP)	Plans with No Deductible
\$50 copay after deductible	\$50 copay

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- Effective October 1, 2024 Aetna is adding the below ACO plans for select Utah ZIP codes, which will have exclusive access to the Intermountain Health system via the Aetna Whole Health - Connected Utah Open Access Managed Choice network. Please reference the client renewal site for further plan details.

New Aetna Plan
ACO 300 UT
ACO 1000 UT
ACO 2000 UT
ACO/HDHP 3500 UT

- The **Aetna Flex 5** plan will no longer be offered for the new plan year. Worksite employees who do not actively make an election during open enrollment will be automatically enrolled in the **Aetna PPO 7150** plan. Please reference the client renewal site for further plan details.

Current Plan Name	New Plan Name
Aetna Flex 5	Aetna PPO 7150

- The **Aetna PPO 6350** plan will no longer be offered for the new plan year. Worksite employees who do not actively make an election during open enrollment will be automatically enrolled in the **Aetna PPO 7150** plan. Please reference the client renewal site for further plan details.

Current Plan Name	New Plan Name
Aetna PPO 6350	Aetna PPO 7150

- The **Aetna PPO Choice 3000/70 MO** plan will no longer be offered for the new plan year. Worksite employees who do not actively make an election during open enrollment will be automatically enrolled in the **Aetna PPO Choice 1000 MO** plan. Please reference the client renewal site for further plan details.

Current Plan Name	New Plan Name
Aetna PPO Choice 3000/70	Aetna PPO Choice 1000

- The **Aetna PPO Choice 5000/70 MO** plan will no longer be offered for the new plan year. Worksite employees who do not actively make an election during open enrollment will be automatically enrolled in the **Aetna PPO Choice 7150 MO** plan. Please reference the client renewal site for further plan details.

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Current Plan Name	New Plan Name
Aetna PPO Choice 5000/70	Aetna PPO Choice 7150

- The **Aetna EPO 30 Tri-State** plan will no longer be offered for the new plan year. Worksite employees who do not actively make an election during open enrollment will be automatically enrolled in the **Aetna EPO 45 Tri-State** plan. Please reference the client renewal site for further plan details.

Current Plan Name	New Plan Name
Aetna EPO 30 Tri-State	Aetna EPO 45 Tri-State

- The ambulance copay will be updated to match the emergency room copay for these plans, as outlined in the chart below:

Aetna Plan Name	Current Amount	New Amount
EPO 1000 EPO 2000	30% after deductible	\$350
PPO 300 PPO 750	10% after deductible	\$350
PPO 1000 PPO 1000 Out-of-Area (OOA) PPO 2000	20% after deductible	\$350
PPO 3000	No charge after deductible	\$350
PPO 5000	30% after deductible	\$350
PPO Choice 500 MO PPO Choice 1000 MO	20% after deductible	\$350
POS 15 Tri-State POS 30 Tri-State	No charge after deductible	\$400
PPO 750 Tri-State	10% after deductible	\$350
PPO 1000 Tri-State PPO 2000 Tri-State	20% after deductible	\$350
EPO 20 Tri-State EPO 4000 Tri-State	20% after deductible	\$400
EPO 2000 Tri-State	40% after deductible	\$400
ACO 1000 AZ ACO 2500 AZ	20% after deductible	\$400

- The following visit limit change will be effective October 1, 2024 for the plans listed in the chart below. Please reference the client renewal site for further plan details.

Plan Name	Benefit	Current Limit	New Limit
Indemnity PPO 1000 Out-of-Area (OOA) PPO Choice 1000 MO	Short Term Rehab: Physical, Speech and Occupational therapy	No visit limit	60 visits combined per calendar year

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In the event that any of your worksite employees' plans are eliminated and they are automatically enrolled in a different plan, if there is a conflict between the plan mapping on this document and the plan they are enrolled in (displayed on their confirmation statement), the plan on their confirmation statement shall control.

Disclaimer:

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