Aetna Medical Plan Changes for the 2024 Benefits Plan Year

- Aetna is <u>adding</u> the **HDHP 6350** plan for all regions except in Massachusetts (MA), Missouri (MO) and Out-Of-Area (OOA)
- The **Aetna PPO Choice 6350 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.

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

• The **Aetna HDHP Choice 3000 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 HDHP Choice 3500 MO** plan. Please reference the client renewal site for further plan details.

Current Aetna Plan	
Name	New Aetna Plan Name
HDHP Choice 3000 MO	HDHP Choice 3500 MO

• The **Aetna HDHP 3000** 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 HDHP 3500** plan. Please reference the client renewal site for further plan details.

Current Aetna Plan	
Name	New Aetna Plan Name
HDHP 3000	HDHP 3500

The Aetna HDHP 3000 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 HDHP 3500 Tri-State plan. Please reference the
client renewal site for further plan details.

Current Aetna Plan Name	New Aetna Plan Name	
HDHP 3000 Tri-State	HDHP 3500 Tri-State	



Aetna Medical Plan Changes for the 2024 Benefits Plan Year

• The individual and family in-network out-of-pocket maximums are <u>decreasing</u> for the **Aetna EPO 30 Tri-State** plan as outlined in the chart below:

Current Individual/Family In-network OOP Max	New Individual/Family In-network OOP Max	
\$5,500/\$11,000	\$5,000/\$10,000	

• For all Aetna plans <u>except</u> Tri-State plans, the following will apply for "no cost" or "low cost" Minute Clinics. Please note, rates will vary by regions and level of service. Please reference the client renewal site for further plan details.

Non-HDHP Plans	HDHP Plans		
	100% covered after deductible		
\$0 for covered Minute Clinic	for covered Minute Clinic		
services (deductible waived)	services		

 For all Tri-State Aetna plans, the following will apply for any "no cost" or "low cost" participating walk-in clinics, including Minute Clinics. Please reference the client renewal site for further plan details.

Non-HDHP Plans	HDHP Plans	
\$0 (deductible waived)	100% covered after deductible	

Effective April 1, 2024 there will be changes to certain Teladoc Health consultation fees
as outlined in the chart below. Please click here for additional information.

Consultation Type	Current Fee	New Fee
General Medical: Non-HDHP Plan	\$5	No change
General Medical: HDHP Plan*	\$49	\$56
Dermatology	\$75	\$85
Behavioral Health Therapist	\$85	\$90
Behavioral Health 1st Psychiatrist Visit	\$190	\$215
Behavioral Health Ongoing Psychiatrist	\$95	
Visit	Þ 45	\$100

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

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.

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