

Gold Aetna Health Plan option in Ohio

Plan	OH Aetna Gold \$5 Copay PD	
	In network	Out of network
Member benefits		
Deductible (ded) individual/family¹ (applies to out-of-pocket maximum)	\$1,400/\$2,800	\$6,750/\$13,500
Member coinsurance	20%	50%
Out-of-pocket maximum individual/family¹ (maximum you will pay for all covered services)	\$5,000/\$10,000	Unlimited/unlimited
Primary care visit	\$5 copay; ded waived	50% after ded
Specialist visit	\$40 copay; ded waived	50% after ded
Hospital stay	20% after ded	50% after ded
Outpatient surgery (ambulatory surgical center/hospital)	20% after ded	50% after ded
Emergency room (copay waived if admitted)	\$250 copay after ded	Paid as in network
Urgent care	\$75 copay; ded waived	50% after ded
Preventive care (age and frequency limits apply)	Covered in full; ded waived	50% after ded
Diagnostic lab	20% after ded	50% after ded
Diagnostic X-ray	20% after ded	50% after ded
Imaging (CT/PET scans, MRIs)	20% after ded	50% after ded
Vision		
Pediatric eye exam (1 visit per year) ²	Covered in full; ded waived	50% after ded
Pediatric dental		
Dental checkup/preventive dental care (2 visits per year) ²	Covered in full; ded waived	30%; ded waived
Basic dental care	30% after ded	50% after ded
Pharmacy		
Pharmacy deductible	\$250	\$500
Preferred generic drugs**	T1A-\$3 copay; ded waived/ T1-\$10 copay; ded waived	50% after ded
Preferred brand drugs	\$35 copay after ded	50% after ded
Nonpreferred drugs***	\$70 copay after ded	50% after ded
Specialty drugs[†]	P: 30% after deductible; NP: 50% after deductible	Not covered

*For important information on your costs and how Aetna pays for out-of-network care, read "Costs for out-of-network doctors and hospitals."

**T1A=Value drugs; T1=Preferred generic drugs.

***Includes nonpreferred generic and brand drugs.

[†]P=Preferred specialty drugs; NP=Nonpreferred specialty drugs.

¹The family deductible and/or out-of-pocket limit can be met by a combination of family members. Each covered family member only needs to satisfy his or her individual deductible and/or out-of-pocket limit. Deductible and/or out-of-pocket limit are separate in and out of network.

²Any applicable benefit maximums are combined in and out of network.

Aetna Health Plans for Individuals, Families and the Self-Employed are underwritten by Aetna Life Insurance Company or Aetna Health Inc. (together, "Aetna"). In some states, individuals may qualify as a business group of one and may be eligible for guaranteed issue, small group health plans.