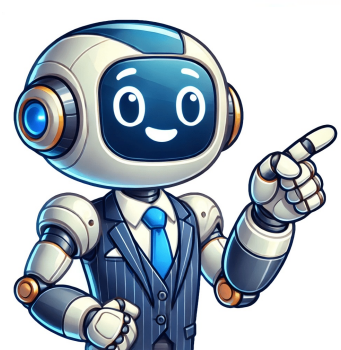


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Here at Aetna, a CVS Health® company, we're building a healthier world by making health care easy, affordable and all about you. Because Healthier Happens Together™! Follow our page for company news, industry commentary, jobs and more. Founded in 1853 in Hartford, CT, Aetna® is one of the nation's leading diversified health care benefits companies, serving an estimated 39 million people with information and resources to help them make better decisions about their health. As a health care leader, we believe that our corporate responsibility starts with helping people live healthier lives. And that means using our resources to make the communities and the world we live in better places. Diversity & Inclusion: Our focus on diversity and inclusion reflects the world around us. Having a diverse group of employees gives us a broader and deeper view of how to serve the people and businesses in our communities. As part of CVS Health, over 70% of our workforce is comprised of women. Join us as we transform the health care system. Our employees are the cornerstone of our mission to help people live healthier lives. Get to know us, why we're passionate about what we do and what makes Aetna a great place to work. Exciting news: Our Aetna International LinkedIn page has merged with this page! By bringing these two pages together, we're able to share a wider range of thought leadership, company news and industry insights in one place. Stay tuned for more in the coming weeks. At Aetna®, we believe in a whole-person approach to mental health. This MentalHealthAwarenessMonth, empower your plan members to explore CVS Virtual Care® and its interconnected mental health resources including: • Therapy sessions at times that work best for them • Psychiatry services for medication management • 24/7 psychiatry referrals • Depression screenings by prioritizing mental health, you're investing in your members' overall well-being and productivity. Less sneezing? Now, that's pleasing. Don't let your #allergysymptoms keep you indoors. Here are a few tips to help you enjoy spring. • Start early: Take allergy meds before peak season hits. And, if you're an Aetna® member, be sure to check if your plan covers over-the-counter (OTC) options that can help with costs or stop by your local CVS Pharmacy to speak with a pharmacist about the best options for you. • Purify your space: Use an air filter, and keep your windows closed on windy days. [Keep it clean: Shower and change clothes after spending time outside. • Check the forecast: Limit outdoor activities when pollen counts are high. • HealthierHappensTogether 553,437 followers 6mo Edited • #OpenEnrollment is here! Our comprehensive plans prioritize member flexibility, affordability and quality care. Enroll today. • #HealthCareSolutions Growth Catalyst - Strategic Repositioning | Enterprise Growth | Organizational Redesign | Financial Performance | Operational Excellence | Board Service 6mo I'm happy to share that Aetna, a CVS Health Company is expanding the reach of our co-branded individual and family plans in 2025 and will continue to be available in 17 states. This #OpenEnrollment, until January 15*, people can enroll in these comprehensive plans that will offer robust adult dental and vision coverage in select states – a new benefit for next year. From \$0 preventive care and 20% discounts at all CVS Health locations to 24/7 virtual access and walk-in clinic visits, we deliver quality, affordable and convenient care to our members that meet their evolving health care needs. Enroll today at www.aetnahealth.com. *Date may vary by state. Aetna, a CVS Health Company reposted this 1,006,553 followers 6mo Edited Today, CVS Health appointed Prem Shah as Group President, and Steve Nelson as President of Aetna, a CVS Health Company. President and CEO David Joyner said: "Prem is a strong operator with deep experience across our businesses, and in his role, he will help me and the rest of our leadership team drive improvements in our financial and operational performance across our company. Steve is an industry veteran who has successfully led multiple segments of a diverse managed care company and driven innovation and growth throughout his career. I will work closely with him and the team, building upon and accelerating the plan to advance Aetna forward." Aetna Medicare is a health insurance company that offers health coverage for seniors and individuals with disabilities. If you're considering enrolling in Aetna Medicare, then you already know that coverage entails many factors, including what's covered, the monthly premium cost, and deductibles. These are all important factors that need to be considered when deciding which plan is right for your needs. Aetna Medicare is a health insurance company that offers Medicare plans to seniors and other eligible individuals. Aetna is one of the largest providers of Medicare plans in the United States. Aetna offers a variety of Medicare plans, including Part A and Part B coverage, as well as prescription drug coverage, dental and vision coverage, and more. Official Login or Get Help Aetna also offers a number of supplemental plans that can provide additional coverage for things like out-of-pocket costs, long-term care, and more. If you're considering enrolling in a Medicare plan, Aetna is a great option to consider. In this blog post, we'll cover some basic information about Aetna Medicare plans so you can make an informed decision about whether or not one of their plans is right for you. Types of coverage There are several types of coverage available through Aetna Medicare. These include: Part A: This covers inpatient care, including hospital stays and skilled nursing facility care. Part B: This covers outpatient care, including doctor visits, preventive services, and some home health services. Part C: This is also known as Medicare Advantage. It is a type of private insurance that provides all of the benefits of Parts A and B, and often more. Part D: This covers prescription drugs. Membership requirements and costs: If you're shopping for Medicare coverage, you might be considering Aetna Medicare. In this blog post, we'll cover the basics of Aetna Medicare, including membership requirements and costs. Aetna Medicare is a health insurance plan for seniors that is administered by the Aetna Insurance Company. It is available in all 50 states and the District of Columbia. To be eligible for Aetna Medicare, you must be age 65 or older and enrolled in Medicare Part A and Part B. You can enroll in Aetna Medicare through the Aetna website or by calling 1-800-MEDICARE (1-800-633-4227). There are three main types of Aetna Medicare plans: Original Medicare Plans, Medicare Advantage Plans, and Prescription Drug Plans. Original Medicare Plans include Part A (hospital insurance) and Part B (medical insurance). Medicare Advantage Plans are an alternative to Original Medicare Plans that offer additional benefits such as routine dental and vision care. Prescription Drug Plans are stand-alone plans that provide coverage for prescription drugs not covered by Original Medicare or Medicare Advantage Plans. The cost of your Aetna Medicare plan will depend on which type of Do I need a referral to see a provider at Aetna Medicare? Aetna Medicare does not require referrals for most services, but there are a few exceptions. If you need to see a specialist, you will need to get a referral from your primary care doctor. You also need a referral if you want to receive certain types of durable medical equipment or home health services. Pros and Cons of Aetna Medicare When it comes to choosing a Medicare plan, there are a lot of options out there. Aetna Medicare is one option that you may be considering. Here, we'll take a look at some of the pros and cons of Aetna Medicare, to help you make an informed decision about whether or not this is the right plan for you. Pros: Aetna Medicare plans offer comprehensive coverage, including prescription drug coverage, dental and vision coverage, and more. Aetna Medicare plans are affordable, with rates that are often lower than other Medicare plans. Aetna has a large network of doctors and hospitals, so you'll likely be able to find a provider that accepts your plan. Cons: Aetna Medicare plans have high deductibles, which means you'll have to pay more out of pocket before your coverage kicks in. Aetna's prescription drug coverage has been criticized for being confusing and difficult to use. Some people have had difficulty getting claims paid by Aetna Medicare, leading to frustration and inconvenience. Aetna Medicare is a reliable and affordable option for those who are eligible for it. With Aetna Medicare, you can get the coverage you need at a price you can afford. Be sure to explore all of your options before enrolling in a plan, and compare rates to find the best possible deal. Should the following terms and conditions be acceptable to you, please indicate your consent and acceptance by selecting the button below labeled "I Accept". Aetna Clinical Policy Bulletins (CPBs) are developed to assist in administering plan benefits and do not constitute a representation of medical advice and treatment. Treating providers are solely responsible for medical advice and treatment of members. Members should discuss any Clinical Policy Bulletin (CPB) related to their coverage or condition with their treating provider. While the Clinical Policy Bulletins (CPBs) are developed to assist in administering plan benefits, they do not constitute a description of plan benefits. The Clinical Policy Bulletins (CPBs) express Aetna's determination of whether certain services or supplies are medically necessary, experimental, investigational, unproven, or cosmetic. Aetna has reached these conclusions based upon a review of currently available clinical information (including clinical outcome studies in the peer-reviewed published medical
literature, regulatory status of the technology, evidence-based guidelines of public health and health research agencies, evidence-based guidelines and positions of leading national health professional organizations, views of physicians practicing in relevant clinical areas, and other relevant factors). Aetna makes no representations and accepts no liability with respect to the content of any external information cited or relied upon in the Clinical Policy Bulletins (CPBs). The discussion, analysis, conclusions and positions reflected in the Clinical Policy Bulletins (CPBs), including any reference to a specific provider, product, process or service by name, trademark, manufacturer, constitute Aetna's opinion and are made without any intent to defame. Aetna expressly reserves the right to revise these conclusions as clinical information changes, and welcomes further relevant information including correction of any factual error. CPBs include references to standard HIPAA compliant code sets to assist with search functions and to facilitate billing and payment for covered services. New and revised codes are added to the CPBs as they are updated. When billing, you must use the most appropriate code as of the effective date of the update. Unlisted, unspecified and nonspecific codes should be avoided, which are subject to dollar caps or other limitations. Members and their providers will need to consult the member's benefit plan document for the AMA as a listing of descriptive terms and five character identifying codes and modifiers for reporting medical services and procedures performed by physicians. The responsibility for the content of Aetna Clinical Policy Bulletins (CPBs) is with Aetna and no endorsement by the AMA is intended or should be implied. The AMA disclaims responsibility for any consequences or liability attributable or related to any use, nonuse or interpretation of information contained in Aetna Clinical Policy Bulletins (CPBs). No fee schedules, basic unit values, relative value guides, conversion factors or scales are included in any part of CPT. Any use of CPT outside of Aetna Clinical Policy Bulletins (CPBs) should refer to the most current Current Procedural Terminology which contains the complete and most current listing of CPT codes and descriptive terms. Applicable FARs/DFARS apply. LICENSE FOR USE OF CURRENT PROCEDURAL TERMINOLOGY, FOURTH EDITION ("CPT®") CPT only copyright 2015 American Medical Association. All Rights Reserved. CPT is a registered trademark of the American Medical Association. 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Therefore, Arizona residents, members, employers and brokers must contact Aetna directly or their employers for information regarding Aetna products and services. This information is neither an offer of coverage nor medical advice. It is only a partial, general description of plan or program benefits and does not constitute a contract. In case of a conflict between your plan documents and this information, the plan documents will govern. Aetna sells Medicare Advantage (Part C) plans. Most Aetna Medicare Advantage plans include Aetna Medicare dental coverage. Dentists recommend routine checkups and cleanings every 6 months so you can monitor and maintain your dental health. Aetna Medicare dental coverage, including regular checkups, is part of most Aetna Medicare Advantage plans. Medicare Advantage plans may offer dental coverage along with vision and hearing services. These policies also provide basic medical and prescription drug coverage. How Aetna dental coverage works If you visit an in-network dentist, they will bill Aetna directly. When you access out-of-network care, you will pay upfront and submit a claim with reimbursement up to your plan's yearly allowance for dental services. What dental services do Aetna Medicare Advantage plans cover? Aetna Medicare dental coverage may include: Along with these benefits, Aetna Medicare dental coverage is the same as Original Medicare (parts A and B), which includes dental services provided in a hospital, such as after a facial injury or due to oral cancer. Aetna Medicare dental coverage varies depending on your plan, so read your plan's evidence of coverage to find out exactly what dental services they offer and check the copays for these services. If your policy doesn't include dental coverage, you can add an optional supplemental benefit to get it. How much does Aetna dental coverage cost? Your costs for a Medicare Advantage plan vary based on your ZIP code and the individual plan you choose. Here are examples of the costs for Aetna Medicare Advantage plans, including dental, in several cities. Who is eligible for Aetna Medicare dental services? To enroll in an Aetna Medicare Advantage plan, you need your Original Medicare number. You can sign up for Original Medicare during your initial enrollment period, which starts 3 months before your 65th birthday. You may also be eligible for Medicare if you're a younger adult with a chronic illness or a permanent disability. Original Medicare enrollment goes through Social Security. You can enroll in Original Medicare parts A and B by filling out a form online or visiting the nearest Social Security office. How do I enroll in an Aetna Medicare Advantage Plan? Once you have your Original Medicare number, you can enroll in an Aetna Medicare Advantage plan. Plan availability changes by state. To see which plans are available in your area, visit the Medicare plan finder tool and enter your ZIP code. Read more about each plan to find out what dental services they offer and to check yearly allowances, copays, and monthly premiums. When you're ready to enroll, fill out an application form online to join an Aetna Medicare Advantage plan. You can also register by phone at 855-335-1407, weekdays between 8:00 a.m. and 8:00 p.m. local time. Frequently asked questions Does Original Medicare provide dental coverage? Original Medicare (parts A and B) does not cover routine dental care like oral exams and dental cleanings. Medicare Part A will offer benefits to cover specific dental procedures. If you need dental care due to an injury or illness, Original Medicare may pay for it. They may also cover treatment for oral cancer or surgery to reconstruct a fractured jaw after an accident. Does Aetna cover dental care? Aetna Medicare dental coverage is part of most Aetna Medicare Advantage plans. They include routine dental exams and cleanings every 6 months. Coverage options may vary between policies, so read the plan's evidence of coverage before enrolling in a new plan. Can I add dental to my Aetna health insurance? Most Aetna Medicare Advantage plans include dental coverage. You can add an optional supplemental benefit if you need additional dental
services. These additional policies offer primary preventive dental care or comprehensive services, such as orthodontics or dentures. You can tack on these other benefits to your Advantage plan premium and pay for everything in one convenient bill. Aetna offers dental plans as part of its Medicare Advantage plans. These plans usually cover both preventive and restorative dental care. If you qualify for Medicare Advantage, you qualify for dental coverage if they offer it. The information on this website may assist you in making personal decisions about insurance, but it is not intended to provide advice regarding the purchase or use of any insurance or insurance products. Healthline Media does not transact the business of insurance in any manner and is not licensed as an insurance company or producer in any U.S. jurisdiction. Healthline Media does not recommend or endorse any third parties that may transact the business of insurance. Aetna offers Medicare Advantage PPO plans that cover preventive dental care, including cleanings and oral exams, as well as more comprehensive dental services like fillings and extractions. For 2024, you can get care from any licensed dentist in the U. S. or U. S. territories. Aetna Medicare Advantage plans match the coverage of original Medicare and offer additional benefits. Some plans cover preventive care, while others extend coverage to fillings and extractions. Aetna Medicare Advantage plans offer a variety of dental services, including routine dental exams and cleanings every 6 months, as well as more comprehensive dental services like fillings and extractions. Aetna Medicare Advantage plans provide dental benefits through either the Aetna network or direct member reimbursement (DMR). This online tool can help a person find providers that accept their Advantage plan. Directly through an Aetna network. 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Costs of Aetna Advantage plans All Medicare Advantage plans, including Aetna's offerings, have associated costs. Monthly plan premium: Aetna plan premiums begin at \$0 but may cost more depending on coverage, location, and a person's details. A person must also pay the premiums for Medicare Part A (if applicable) and Part B. The monthly Part B premium for 2025 is \$185. Copays and coinsurance: Each time someone receives a healthcare service, they pay a certain amount. A copay is a fixed amount, such as \$20, whereas a coinsurance is a percentage of the total cost of the service. Deductible: This is the amount that a plan member must pay out of pocket before their plan begins to pay its share. Monthly premiums: \$0 Oral exams: \$0 Copay (two visits every year) Teeth cleanings: \$0 Copay (two visits every year) Dental X-rays: \$0 Copay (The plan has a separate deductible for certain types of services, including dental care. 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