Welcome

Global members, local care
A guide for U.S. health care providers treating Aetna International members

aetnainternational.com
Open arms

In today’s global economy, people are on the move more than ever before. They may come from different places, but they all share the need for quality health care wherever they go. That’s why at Aetna International, we meet their needs with a variety of customized health insurance plans — including coverage for care provided within the United States.

Members with Aetna International plans are treated similarly to those who have Aetna plans in the U.S., with contracts following regular Aetna guidelines for provider reimbursement. The only differences with some plans are how benefits are verified, who oversees the plan and who provides medical management. Here is a more complete overview.

Who is covered

**U.S. inpatriates** — People from other countries (including U.S. citizens and non-U.S. citizens) who are residing in the U.S., usually as students or employees on work assignments. Benefits align with standard domestic plans.

**U.S. expatriates** — People who normally live in the U.S. (including U.S. citizens and non-U.S. citizens) who are working outside of the U.S. and may have trailing dependents who remain within the U.S. In some cases, members may return to the U.S. for medical care. Benefits align with standard domestic plans.

**Members with global plans that include U.S. coverage** — Non-U.S. citizens who purchase U.S. coverage and/or receive health care in the U.S. as part of an Aetna International plan that was sold in other countries. Claims are paid by Aetna in accordance with domestic contracts and policies.

**Passport to Healthcare® members** — People living in or temporarily located in the U.S. (including U.S. citizens or non-U.S. citizens) who receive medical care access through third-party administrators (TPAs). Claims are paid by Aetna in accordance with domestic contracts and policies.

**Travel for Treatment members** — Non-U.S. citizens who are pre-approved, usually by government employers or other entities, to travel to the U.S. for medical care using our Travel for Treatment plans managed by TPAs. Claims are paid by Aetna in accordance with domestic contracts and policies.

The big picture

<table>
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<tr>
<th>Type of plan</th>
<th>Network access</th>
<th>Verification type</th>
<th>Plan/claims management</th>
<th>Medical management</th>
<th>NaviNet access</th>
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<tbody>
<tr>
<td><strong>U.S. inpat plan</strong></td>
<td>PPO/OA-MC/POS</td>
<td>Member ID card</td>
<td>Aetna/Aetna</td>
<td>Aetna</td>
<td>Yes</td>
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<tr>
<td><strong>U.S. expat plan</strong></td>
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<td>Member ID card</td>
<td>Aetna/Aetna</td>
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<tr>
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<td>Member ID card</td>
<td>Aetna/Aetna</td>
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<tr>
<td><strong>Passport to Healthcare®</strong></td>
<td>PPO</td>
<td>Member ID card/VOB*</td>
<td>TPA/Aetna</td>
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<td>Verification of benefits</td>
<td>TPA/Aetna</td>
<td>Aetna</td>
<td>No</td>
</tr>
</tbody>
</table>

**Some Passport to Healthcare plans have co-branded Member ID cards, while others use Aetna Verification of Benefits (VOB).**

**Passport to Healthcare transplant cases managed by Aetna Care Management Institutes of Excellence team.**
A deeper understanding

Q. Are global plans paid at the Aetna rates negotiated in Aetna Contracts?
A. Yes. Global plans follow the standard Aetna contract agreements.

Q. Do members get to choose their provider network?
A. No. The employer or plan sponsor buys a plan that gives them access to the Aetna U.S. products and network. For members residing in the U.S. on a temporary assignment or as a student, network selection is based upon the area in which they are living.

Q. What is Aetna Verification of Benefits (VOB)?
A. An Aetna VOB is a document that verifies the member’s covered benefit in lieu of a Member ID card.

Q. What are third party administrators (TPAs)?
A. TPAs are business partners that administer our plans on behalf of covered individuals. Our Passport to Healthcare plans are administered by TPAs. Plan designs vary based on the business partner and benefits offered.

Q. How are dependents covered?
A. Dependents are covered just like any other eligible dependent and can be on the same plan with the same benefits.

Q. Are the plans that cover U.S. inpat students limited student plans?
A. No. Aetna International inpat members attending college in the U.S. have full medical plan benefits. They are not considered student health members, nor do they have a limited student health plan.

Q. What if a member has a global plan but has opted out of U.S. coverage?
A. That member is not considered to have applicable coverage for medical care provided within the U.S.

Q. How do I verify a member’s benefits?
A. For all plans except Passport to Healthcare, you can call the number shown on the back of the person's Member ID card. Passport to Healthcare plans use Aetna Verification of Benefits.

Q. Can I access member verification using NaviNet?
A. Yes, for all plans except Travel for Treatment plans, which are not on the NaviNet system and use Aetna Verification of Benefits instead.

Q. How do I file claims?
A. The process for filing claims is the same as Aetna’s domestic business. Simply submit claims electronically or send them to the address shown on the back of the Member ID card or Aetna Verification of Benefits document.
What verification looks like

Sample Aetna Verification of Benefits

Sample Global Plan Member ID with U.S. Coverage

The right treatment

With a more complete understanding of how these plans work, it’s easy for all providers within the Aetna network to welcome and treat members who have international plans with U.S. coverage — no matter where they’re from, where they live or where they go.

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