

Helping provide
financial security

Medicare Supplement Insurance

Plans A, B, F,
High Deductible F, G, N

Florida

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Our commitment

With insurance companies offering the same standardized Medicare Supplement insurance plans, we know that your choice comes down to the price that fits your budget, the company's service, reputation, reliability, and experience.

Aetna Health and Life Insurance Company with its administrative office located in the Nashville, Tennessee area, has an unwavering commitment to providing the best personal service possible, quick claims payment, quality products with solid financial backing, and helpful, friendly associates with extensive knowledge and experience. Policyholders rely on our company to be there when they need us. We take those obligations very seriously and everything we do is focused on fulfilling our commitments in a timely, hassle-free manner – so you have the best experience possible.

The value of peace of mind

A Medicare Supplement insurance policy helps you manage and budget your health care expenses.

Filling in the gaps

Medicare provides beneficial coverage for health related expenses, but it does not cover all health care expenses. There are a number of gaps in Medicare coverage that you either pay for out-of-pocket or with private insurance. A Medicare Supplement insurance policy is a health insurance policy (also called Medigap) sold by a private insurance company to help fill in those gaps.

Know your options

Although private insurance companies provide Medicare Supplement coverage, Medicare Supplement insurance plans are strictly regulated by both federal and state government. Make an informed decision about what is right for you. Before you purchase a plan, make sure you understand what your Medicare coverage includes. Then choose a Medicare Supplement plan that best fits your needs.

Take care of yourself

A Medicare Supplement insurance policy helps you manage and budget your health care expenses with predictability and stability. Unexpected medical expenses can put your savings at risk. A Medicare Supplement insurance policy helps provide financial security and peace of mind – helps you pay the out-of-pocket costs for Medicare-approved services and works hand-in-hand with Medicare to provide more insurance coverage.

Feel good about your choices

A Medicare Supplement insurance policy has no restrictive networks (as long as the provider accepts Medicare insurance), you can visit the physicians of your choice, and you have freedom when choosing a health care provider, including specialists and specialty hospitals. With automatic claims filing by most providers, you have less things to worry about.

Financially strong, fundamentally sound

When you choose to own an Aetna Health and Life Insurance Company Medicare Supplement insurance policy, you get the first class customer service, financial stability, and security that come from being a member of the Aetna family of companies, while Aetna Health and Life Insurance Company maintains sole financial responsibility for its own product.



Choose from these plans

Aetna Health and Life Insurance Company offers Medicare Supplement Plans A, B, F, High Deductible F, G, and N with varying amounts of coverage – Plan A providing basic benefits and Plan F offering more comprehensive coverage.

Premiums also vary according to the amount of coverage provided by a specific plan. (Reference the application for details.) The amount of benefits correspond with the premium.

Here are the benefits that are included with each plan:

Benefits	Plan A	Plan B	Plan F*	Plan G	Plan N
Basic benefits (including hospice care)	•	•	•	•	•
Part B coinsurance	•	•	•	•	•**
Part A deductible		•	•	•	•
Skilled nursing facility coinsurance			•	•	•
Foreign travel emergency			•	•	•
Part B excess charges			•	•	
Part B deductible			•		

Plan A is available to those eligible applicants under age 65 by reasons of disability or End Stage Renal Disease.

* **High deductible Plan F** also available. Same benefits as Plan F after the calendar year deductible is paid.

** Plan N requires \$20 copayment for office visits; \$50 copayment for emergency room visits. Copayments do not count toward the annual Part B deductible.

Covering your needs

Use this checklist as a starting point to help determine what you want your Medicare Supplement insurance policy to cover.

- Basic benefits** (including hospice care)
- Medicare Part A deductible**
- Medicare Part B deductible**
- Medicare Part B coinsurance**
- Medicare Part B excess charges**
- Skilled nursing facility coinsurance**
- Foreign travel emergency**

What's great about the plans

The following are features of the Medicare Supplement plans offered by Aetna Health and Life Insurance Company.

- **30 days free look**

Return any policy for any reason within 30 days after receipt for a full refund of all premiums paid.

- **12-month rate guarantee**

On each annual anniversary of your effective date, premiums for this policy may be changed if there is any change in rates for this policy. Premiums are based on your issue age and any premium change will apply to all covered persons in your class. Class is defined as issue age, sex, tobacco status, state and zip code of residence. We will give you at least 45 days advance notice in writing of such premium change.

- **Guaranteed renewable**

No worries of reduced benefits or cancelled coverage for the life of the policy, as long as the premiums are paid on time. And as long as there is not any material misrepresentation on the application the policy will not be canceled.

- **Freedom to choose your doctors**

You control and choose the physicians who you trust for your care, as long as the provider accepts Medicare.

- **Go direct to your doctors**

You can go directly to the physicians and specialists you choose without pre-certifications and pre-approvals.

- **Benefits stay the same**

You always know what your benefits are with this standardized plan...no surprises or re-evaluations year-after-year.

- **Portable coverage**

You are not restricted to use a network of health care providers. If you move within the USA, your coverage goes with you.





Common terms and definitions

- **Benefit period**

Starts the day you go to a hospital or skilled nursing facility; and ends when you have not received hospital or skilled nursing facility care for 60 consecutive days.

- **Coinsurance**

A percentage of Medicare - approved expenses not paid by Medicare.

- **Copayment**

A fixed fee amount that subscribers to a medical plan must pay when using specific services covered by an insurance plan.

- **Deductible**

Amount that one must pay for Medicare-approved expenses before Medicare begins to pay.

- **Eligible expenses**

Costs that are deemed medically necessary by Medicare and covered expenses under your plan.

- **Emergency care**

Immediate medical care needed because of an injury or an illness of sudden and unexpected onset.

- **Excess charges**

The difference between what a health care provider is permitted to charge and the Medicare-approved amount.

- **Hospice care**

A program of care and support for someone who is terminally ill; helps them live out the time they have remaining to the fullest extent possible.

- **Medicare-approved amount**

In original Medicare, the amount that a physician who accepts assignment can be paid, including what Medicare pays and any other deductibles, coinsurance, or copayments.

- **Premium**

The periodic payment to Medicare, an insurance company, or a health care plan for coverage.

EXCLUSIONS

We will not pay for:

1. Loss incurred while your policy is not in force, except as provided in the Extension of Benefits section of your policy;
2. Hospital or Skilled Nursing Facility confinement incurred during a Medicare Part A Benefit Period that begins while this policy is not in force;
3. That portion of any Loss incurred which is paid for by Medicare;
4. Services for non-Medicare Eligible Expenses, including routine exams, take-home drugs and eye refractions;
5. Services for which a charge is not normally made in the absence of insurance

This is a brochure for individual Medicare Supplement insurance policy forms AHLMS17A FL, AHLMS17B FL, AHLMS17F FL, AHLMS17HF FL, AHLMS17G FL, AHLMS17N FL, and is not a contract of insurance. For complete details of all benefits, exclusions and limitations, please read your Outline of Coverage carefully and refer to the “Guide to Health Insurance for People with Medicare”. You may request a copy of the Outline of Coverage from the agent or the company. **Aetna Health and Life Insurance Company is not connected with or endorsed by the U.S. Government or the Federal Medicare Program.**

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