

Dental, Life and Disability Options

FOR BUSINESSES WITH 2 TO 50 ELIGIBLE EMPLOYEES



Pennsylvania

*Dental benefits, dental insurance, life and disability insurance plans/policies are offered, underwritten and/or administered by Aetna Health Inc. and/or Aetna Life Insurance Company (Aetna).

We want you to know[®]



Aetna Dental Insurance

Aetna Dental® plans

Small business decision makers can choose from a variety of plan design options that help you offer a dental plan that's just right for your employees.

The Mouth MattersSM

More than 164 million work hours are lost each year due to dental diseases and visits.¹ Research also shows that more than 90 percent of all medical illnesses are detectable in the mouth and that 75 percent of people over the age of 35 have periodontal (gum) disease.² Untreated oral diseases can have a big impact on the quality of life. This means that a dentist may be the first health care provider to diagnose a health problem!

Aetna is proud to offer our Aetna Dental/Medical IntegrationSM (DMI) program at no additional charge to plan sponsors that have both medical and dental coverages with Aetna.

Our DMI program focuses on those who are pregnant or have diabetes, coronary artery disease (heart disease) or cerebrovascular disease (stroke) and have not had a recent dental visit. Using a variety of outreach methods, we proactively educate those at-risk members about the impact oral health care can have on their condition. Our member outreach has been proven to successfully motivate those at-risk members who do not normally seek dental care to visit the dentist. Once at the dentist, these at-risk members will receive enhanced dental benefits including an extra cleaning and full coverage for certain periodontal services. Call your Aetna[‡] account representative for more details.

The Dental Maintenance Organization (DMO®)

Members select a primary care dentist to coordinate their care from the available managed dental network. Each family member may choose a different primary care dentist and may switch dentists at any time via Aetna Navigator or with a call to Member Services. If specialty care is needed, a member's primary care dentist can refer the member to a participating specialist. However, members may visit orthodontists without a referral. There are virtually no claim forms to file, and benefits are not subject to deductibles or annual maximums.

Preferred Provider Organization (PPO) Plan

Members can choose a dentist who participates in the network or choose a licensed dentist who does not. Participating dentists have agreed to offer our members services at a negotiated rate and will not balance bill members.

¹U.S. Department of Health and Human Services, National Center for Chronic Disease Prevention and Health Promotion; Resource Library Fact Sheet "Oral Health for Adults," December 2006.

²The professional entity, Academy of General Dentistry, 2007.

DMI may not be available in all states.

PPO Max plan

While the PPO Max plan uses the PPO network, when members use out-of-network dentists the service will be covered based on the PPO fee schedule, rather than the reasonable and customary charge. This means that the member will share in more of the costs and may be balance billed. This plan offers members a quality dental insurance plan with a significantly lower premium that encourages in-network usage.

Freedom-of-Choice plan

Get maximum flexibility with our two-in-one dental plan design. The Freedom-of-Choice plan design provides the administrative ease of one plan, yet members get to choose between the DMO and PPO Max plans on a monthly basis. One blended rate is paid. Members may switch between the plans on a monthly basis by calling Member Services. Plan changes must be made by the 15th of the month to be effective the following month.

Aetna DentalFund® plan

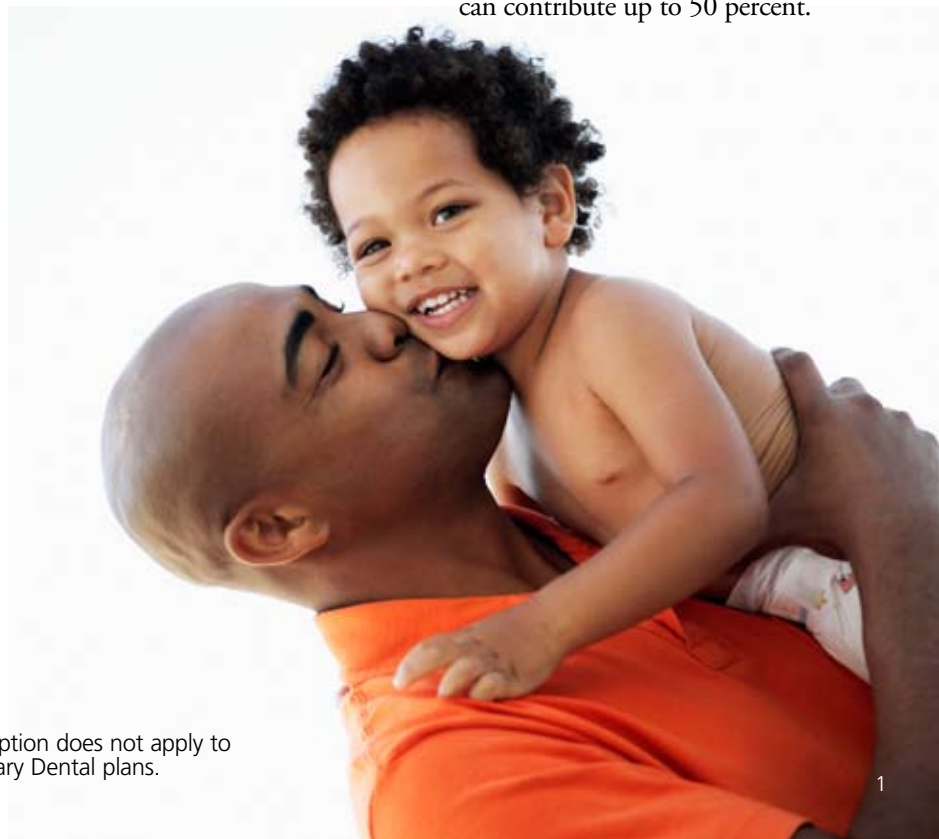
The Aetna DentalFund plan is one of the first dental plans to combine a dental fund benefit with a base dental insurance plan. The paid premium covers both the fund benefit and the traditional benefits of the dental plan. The plan combines the Fund with a PPO Max plan where preventive care is paid through the dental plan. Members can use their funds to pay for basic and major services received from any licensed dentist. If any dental fund dollars are not used during the year, they can be rolled over and added to the following year's dental fund balance.

Dual Option plan

In the Dual Option plan design* the DMO must be packaged with any one of the PPO plans. Employees may choose between the DMO and PPO offerings at annual enrollment.

Voluntary Dental option

The Voluntary Dental option provides a solution to meet the individual needs of members in the face of rising health care costs. Administration is easy, and members benefit from low group rates and the convenience of payroll deductions. Employers choose how the plan is funded. It can be entirely member paid or employers can contribute up to 50 percent.



*Dual Option does not apply to Voluntary Dental plans.

Pennsylvania Aetna Small Group Dental Plans (Effective 12/01/08)

Available With an Aetna Medical Plan to Groups with 2 – 50 Eligible Employees
 Available Without Medical Plan (Dental Standalone) to Groups with 3 – 50 Eligible Employees

	Option 2	Option 3 Freedom of Choice — Monthly selection between the DMO and PPO Max		Option 4
Member Benefits	DMO Plan 100/80/50	DMO Plan 100/90/60	PPO Max Plan 100/70/40	PPO Max Plan 100/80/50
Office Visit Copay	\$5	\$5	None	None
Dental Fund	N/A	N/A	N/A	N/A
Annual Deductible per Member does not apply to Diagnostic & Preventive Services	None	None	\$50; 3X Family Maximum	\$50; 3X Family Maximum
Annual Maximum Benefit	None	None	\$1,000	\$1,500
Diagnostic Services				
<i>Oral Exams</i>				
Periodic oral exam	100%	100%	100%	100%
Comprehensive oral exam	100%	100%	100%	100%
Problem-focused oral exam	100%	100%	100%	100%
<i>X-rays</i>				
Bitewing – single film	100%	100%	100%	100%
Complete series	100%	100%	100%	100%
Preventive Services				
Adult Cleaning	100%	100%	100%	100%
Child Cleaning	100%	100%	100%	100%
Sealants – per tooth	100%	100%	100%	100%
Fluoride application – with cleaning	100%	100%	100%	100%
Space maintainers	100%	100%	100%	100%
Basic Services				
Amalgam filling – 2 surfaces	80%	90%	70%	80%
Resin filling – 2 surfaces, anterior	80%	90%	70%	80%
<i>Oral Surgery</i>				
Extraction - exposed root or erupted tooth	80%	90%	70%	80%
Extraction of impacted tooth – soft tissue	80%	90%	70%	80%
*Major Services				
Complete upper denture	50%	60%	40%	50%
Partial upper denture (resin base)	50%	60%	40%	50%
Crown – Porcelain with noble metal	50%	60%	40%	50%
Pontic – Porcelain with noble metal	50%	60%	40%	50%
Inlay – Metallic (3 or more surfaces)	50%	60%	40%	50%
<i>Oral Surgery</i>				
Removal of impacted tooth – partially bony	50%	60%	40%	50%
<i>Endodontic Services</i>				
Bicuspid root canal therapy	80%	90%	40%	50%
Molar root canal therapy	50%	60%	40%	50%
<i>Periodontic Services</i>				
Scaling & root planing – per quadrant	80%	90%	40%	50%
Osseous surgery – per quadrant	50%	60%	40%	50%
*Orthodontic Services				
Orthodontic Lifetime Maximum	\$2300 copay Does not apply	\$2300 copay Does not apply	Not covered Does not apply	Not covered Does not apply

The DentalFund in Plan Option 7 can be used to pay for any non-covered service, excluding Orthodontic Services. Any unused portion of the Fund will roll over to the next calendar year.

*Coverage Waiting Period: Must be an enrolled member of the Plan for 12 months before becoming eligible for coverage of any Major Service including Orthodontic Services. Does not apply to the DMO in Plan Options 2 & 3, the DentalFund in Plan Option 7 and the Preventive Care Plan in Plan Option 8.

Access to negotiated discounts: On the PPO plans in Plan Options 3-8, members are eligible to receive non-covered services at the PPO negotiated rate when visiting a participating PPO dentist at any time, including during the Coverage Waiting Period.

The DMO in Plan Option 2 can be offered with any of the PPO plans in Plan Options 4-6 in a Dual Option package.

Most Oral Surgery, Endodontic and Periodontic services are covered as Basic Services on the DMO in Plan Options 2 & 3 and the PPO in Plan Option 5.

Plan Options 3, 4, 7 & 8; PPO Max Non-Preferred (Out-of-Network) Coverage is limited to a maximum of the Plan's payment, which is based on the contracted maximum fee for participating providers in the particular geographic area.

Orthodontic coverage is available only to groups with 10 or more eligibles and for dependent children only.

Above list of covered services is representative. Full list with limitations as determined by Aetna appears on the plan booklet/certificate. For a summary list of Limitations and Exclusions, refer to page 9.

Pennsylvania Aetna Small Group Dental Plans (Effective 12/01/08)

Available With an Aetna Medical Plan to Groups with 2 – 50 Eligible Employees
 Available Without Medical Plan (Dental Standalone) to Groups with 3 – 50 Eligible Employees

	Option 5 Active PPO High-Option Plan		Option 6	Option 7 Consumer Directed	Option 8 Aetna Dental Preventive Care SM
Member Benefits	Preferred Plan 100/80/50	Non-Preferred Plan 80/60/40	PPO 1500 Plan 100/80/50	DentalFund/ PPO Max 100/0/0	PPO Max Plan – Aetna Dental Preventive Care
Office Visit Copay	None	None	None	None	N/A
Dental Fund	N/A	N/A	N/A	\$50 Single; \$100 Family	N/A
Annual Deductible per Member does not apply to Diagnostic & Preventive Services	\$50; 3X Family Maximum	\$50; 3X Family Maximum	\$50; 3X Family Maximum	None	None
Annual Maximum Benefit	\$1,500	\$1,000	\$1,500	None	None
Diagnostic Services					
<i>Oral Exams</i>					
Periodic oral exam	100%	80%	100%	100%	100%
Comprehensive oral exam	100%	80%	100%	100%	100%
Problem-focused oral exam	100%	80%	100%	100%	100%
<i>X-rays</i>					
Bitewing – single film	100%	80%	100%	100%	100%
Complete series	100%	80%	100%	100%	100%
Preventive Services					
Adult Cleaning	100%	80%	100%	100%	100%
Child Cleaning	100%	80%	100%	100%	100%
Sealants – per tooth	100%	80%	100%	100%	100%
Fluoride application – with cleaning	100%	80%	100%	100%	100%
Space maintainers	100%	80%	100%	100%	100%
Basic Services					
Amalgam filling – 2 surfaces	80%	60%	80%	Discounted Fee	Discounted Fee
Resin filling – 2 surfaces, anterior	80%	60%	80%	Discounted Fee	Discounted Fee
<i>Oral Surgery</i>					
Extraction - exposed root or erupted tooth	80%	60%	80%	Discounted Fee	Discounted Fee
Extraction of impacted tooth – soft tissue	80%	60%	80%	Discounted Fee	Discounted Fee
*Major Services					
Complete upper denture	50%	40%	50%	Discounted Fee	Discounted Fee
Partial upper denture (resin base)	50%	40%	50%	Discounted Fee	Discounted Fee
Crown – Porcelain with noble metal	50%	40%	50%	Discounted Fee	Discounted Fee
Pontic – Porcelain with noble metal	50%	40%	50%	Discounted Fee	Discounted Fee
Inlay – Metallic (3 or more surfaces)	50%	40%	50%	Discounted Fee	Discounted Fee
<i>Oral Surgery</i>					
Removal of impacted tooth – partially bony	50%	40%	50%	Discounted Fee	Discounted Fee
<i>Endodontic Services</i>					
Bicuspid root canal therapy	80%	60%	50%	Discounted Fee	Discounted Fee
Molar root canal therapy	50%	40%	50%	Discounted Fee	Discounted Fee
<i>Periodontic Services</i>					
Scaling & root planing – per quadrant	80%	60%	50%	Discounted Fee	Discounted Fee
Osseous surgery – per quadrant	50%	40%	50%	Discounted Fee	Discounted Fee
*Orthodontic Services					
Orthodontic Lifetime Maximum	\$1,000	\$1,000	\$1,000	Does not apply	Does not apply

The DentalFund in Plan Option 7 can be used to pay for any non-covered service, excluding Orthodontic Services. Any unused portion of the Fund will roll over to the next calendar year.

*Coverage Waiting Period: Must be an enrolled member of the Plan for 12 months before becoming eligible for coverage of any Major Service including Orthodontic Services. Does not apply to the DMO in Plan Options 2 & 3, the DentalFund in Plan Option 7 and the Dental Preventive Care Plan in Plan Option 8.

Access to negotiated discounts: On the PPO plans in Plan Options 3-8, members are eligible to receive non-covered services at the PPO negotiated rate when visiting a participating PPO dentist at any time, including during the Coverage Waiting Period.

The DMO in Plan Option 2 can be offered with any of the PPO plans in Plan Options 4-6 in a Dual Option package.

Most Oral Surgery, Endodontic and Periodontic services are covered as Basic Services on the DMO in Plan Options 2 & 3 and the PPO in Plan Option 5.

Plan Options 3, 4, 7 & 8; PPO Max Non-Preferred (Out-of-Network) Coverage is limited to a maximum of the Plan's payment, which is based on the contracted maximum fee for participating providers in the particular geographic area.

Orthodontic coverage is available only to groups with 10 or more eligibles and for dependent children only.

Above list of covered services is representative. Full list with limitations as determined by Aetna appears on the plan booklet/certificate. For a summary list of Limitations and Exclusions, refer to page 9.

Pennsylvania Aetna Small Group Voluntary Dental Plans

Available With an Aetna Medical Plan to Groups with 2 – 50 Eligible Employees
 Available Without Medical Plan (Dental Standalone) to Groups with 3 – 50 Eligible Employees

	Voluntary Option 2	Voluntary Option 3 Freedom of Choice — Monthly selection between the DMO and PPO Max		Voluntary Option 4	Voluntary Option 7 Consumer Directed	Voluntary Option 8 Aetna Dental Preventive Care
Member Benefits	DMO Plan 100/80/50	DMO Plan 100/90/60	PPO Max Plan 100/70/40	PPO Max Plan 100/80/50	DentalFund/ PPO Max 100/0/0	PPO Max Plan – Aetna Dental Preventive Care
Office Visit Copay	\$10	\$10	N/A	N/A	N/A	N/A
Dental Fund	N/A	N/A	N/A	N/A	\$50 Single; \$100 Family	N/A
Annual Deductible per Member does not apply to Diagnostic & Preventive Services	None	None	\$75; 3X Family Maximum	\$75; 3X Family Maximum	N/A	None
Annual Maximum Benefit	None	None	\$1,000	\$1,500	Unlimited	None
Diagnostic Services						
<i>Oral Exams</i>						
Periodic oral exam	100%	100%	100%	100%	100%	100%
Comprehensive oral exam	100%	100%	100%	100%	100%	100%
Problem-focused oral exam	100%	100%	100%	100%	100%	100%
<i>X-rays</i>						
Bitewing – single film	100%	100%	100%	100%	100%	100%
Complete series	100%	100%	100%	100%	100%	100%
Preventive Services						
Adult Cleaning	100%	100%	100%	100%	100%	100%
Child Cleaning	100%	100%	100%	100%	100%	100%
Sealants – per tooth	100%	100%	100%	100%	100%	100%
Fluoride application – with cleaning	100%	100%	100%	100%	100%	100%
Space maintainers	100%	100%	100%	100%	100%	100%
Basic Services						
Amalgam filling – 2 surfaces	80%	90%	70%	80%	Discounted Fee	Discounted Fee
Resin filling – 2 surfaces, anterior	80%	90%	70%	80%	Discounted Fee	Discounted Fee
<i>Oral Surgery</i>						
Extraction - exposed root or erupted tooth	80%	90%	70%	80%	Discounted Fee	Discounted Fee
Extraction of impacted tooth – soft tissue	80%	90%	70%	80%	Discounted Fee	Discounted Fee
*Major Services						
Complete upper denture	50%	60%	40%	50%	Discounted Fee	Discounted Fee
Partial upper denture (resin base)	50%	60%	40%	50%	Discounted Fee	Discounted Fee
Crown – Porcelain with noble metal	50%	60%	40%	50%	Discounted Fee	Discounted Fee
Pontic – Porcelain with noble metal	50%	60%	40%	50%	Discounted Fee	Discounted Fee
Inlay – Metallic (3 or more surfaces)	50%	60%	40%	50%	Discounted Fee	Discounted Fee
<i>Oral Surgery</i>						
Removal of impacted tooth – partially bony	50%	60%	40%	50%	Discounted Fee	Discounted Fee
Endodontic Services						
Bicuspid root canal therapy	80%	90%	40%	50%	Discounted Fee	Discounted Fee
Molar root canal therapy	50%	60%	40%	50%	Discounted Fee	Discounted Fee
Periodontic Services						
Scaling & root planing – per quadrant	80%	90%	40%	50%	Discounted Fee	Discounted Fee
Osseous surgery – per quadrant	50%	60%	40%	50%	Discounted Fee	Discounted Fee
*Orthodontic Services						
Orthodontic Lifetime Maximum	\$2400 copay	\$2400 copay	Not covered	Not covered	Discounted Fee	Discounted Fee
	Does not apply	Does not apply	Does not apply	Does not apply	Does not apply	Does not apply

*Coverage Waiting Period: Must be an enrolled member of the Plan for 12 months before becoming eligible for coverage of any Major Service including Orthodontic Services. Does not apply to the DMO in Voluntary Plan Options 2 & 3, the DentalFund in Voluntary Plan Option 7 or the Preventive Care Plan in Voluntary Plan Option 8.

Access to negotiated discounts: On the PPO plans in Voluntary Plan Options 3, 4, 7 & 8, members are eligible to receive non-covered services at the PPO negotiated rate when visiting a participating PPO dentist at any time, including during the Coverage Waiting Period.

Most Oral Surgery, Endodontic and Periodontic services are covered as Basic Services on the DMO in Voluntary Plan Options 2 & 3.

Voluntary Plan Options V3, V4, V7 & V8; PPO Max Non-Preferred (Out-of-Network) Coverage is limited to a maximum of the Plan's payment, which is based on the contracted maximum fee for participating providers in the particular geographic area.

The DentalFund in Plan Option 7 can be used to pay for any non-covered service, excluding Orthodontic Services. Any unused portion of the Fund will roll over to the next calendar year.

All voluntary plans require a minimum of 3 to enroll. Orthodontic coverage is available only to groups with 10 or more eligibles and for dependent children only.

If there is a lapse in coverage, members may not re-enroll in the plan for a period of two years from the date of termination. If they are eligible for coverage at that time, they may re-enroll, subject to all provisions of the plan, including, but not limited to, the Coverage Waiting Period.

Above list of covered services is representative. Full list with limitations as determined by Aetna appears on the plan booklet/certificate. For a summary list of Limitations and Exclusions, refer to page 9.

Pennsylvania Aetna Small Group Dental Plans — OUT-OF-STATE/SITUS DENTAL PLAN OPTIONS

Contributory Plans: Available with an Aetna Medical Plan to Groups with 2 – 50 Eligible Employees; Available without an Aetna Medical Plan (Dental Standalone) to Groups with 3 - 50 Eligible Employees
 Voluntary Plan: Available with or without an Aetna Medical Plan to Groups with 3 – 50 Eligible Employees

	Low Option for Contributory Dental Plan Options 2 – 8*	Medium Option for Contributory Dental Plan Options 2 – 8*	Low Option for Voluntary Dental Plan Options V2 – V4, V7 and V8*
Member Benefits	PPO Max Plan 100/80/50	PPO Max Plan 100/80/50	PPO Max Plan 100/80/50
Office Visit Copay	N/A	N/A	N/A
Annual Deductible per Member does not apply to Diagnostic & Preventive Services	\$50; 3X Family Maximum	\$50; 3X Family Maximum	\$75; 3X Family Maximum
Annual Maximum Benefit	\$1,000	\$1,500	\$1,000
Diagnostic Services			
<i>Oral Exams</i>			
Periodic oral exam	100%	100%	100%
Comprehensive oral exam	100%	100%	100%
Problem-focused oral exam	100%	100%	100%
<i>X-rays</i>			
Bitewing – single film	100%	100%	100%
Complete series	100%	100%	100%
Preventive Services			
Adult Cleaning	100%	100%	100%
Child Cleaning	100%	100%	100%
Sealants – per tooth	100%	100%	100%
Fluoride application – with cleaning	100%	100%	100%
Space maintainers	100%	100%	100%
Basic Services			
Amalgam filling – 2 surfaces	80%	80%	80%
Resin filling – 2 surfaces, anterior	80%	80%	80%
<i>Oral Surgery</i>			
Extraction - exposed root or erupted tooth	80%	80%	80%
Extraction of impacted tooth – soft tissue	80%	80%	80%
*Major Services			
Complete upper denture	50%	50%	50%
Partial upper denture (resin base)	50%	50%	50%
Crown – Porcelain with noble metal	50%	50%	50%
Pontic – Porcelain with noble metal	50%	50%	50%
Inlay – Metallic (3 or more surfaces)	50%	50%	50%
<i>Oral Surgery</i>			
Removal of impacted tooth – partially bony	50%	50%	50%
<i>Endodontic Services</i>			
Bicuspid root canal therapy	50%	50%	50%
Molar root canal therapy	50%	50%	50%
<i>Periodontic Services</i>			
Scaling & root planing – per quadrant	50%	50%	50%
Osseous surgery – per quadrant	50%	50%	50%
*Orthodontic Services			
Orthodontic Lifetime Maximum	\$1,000	\$1,000	\$1,000

*Coverage Waiting Period: Must be an enrolled member of the Plan for 12 months before becoming eligible for coverage of any Major Service including Orthodontic Services. Does not apply to the DMO in Voluntary Plan Options 2 & 3, the DentalFund in Voluntary Plan Option 7 or the Preventive Care Plan in Voluntary Plan Option 8.

Access to negotiated discounts: On the PPO plans in Voluntary Plan Options 3, 4, 7 & 8, members are eligible to receive non-covered services at the PPO negotiated rate when visiting a participating PPO dentist at any time, including during the Coverage Waiting Period.

Most Oral Surgery, Endodontic and Periodontic services are covered as Basic Services on the DMO in Voluntary Plan Options 2 & 3.

Voluntary Plan Options V3, V4, V7 & V8; PPO Max Non-Preferred (Out-of-Network) Coverage is limited to a maximum of the Plan’s payment, which is based on the contracted maximum fee for participating providers in the particular geographic area.

The DentalFund in Plan Option 7 can be used to pay for any non-covered service, excluding Orthodontic Services. Any unused portion of the Fund will roll over to the next calendar year.

All voluntary plans require a minimum of 3 to enroll. Orthodontic coverage is available only to groups with 10 or more eligibles and for dependent children only.

If there is a lapse in coverage, members may not re-enroll in the plan for a period of two years from the date of termination. If they are eligible for coverage at that time, they may re-enroll, subject to all provisions of the plan, including, but not limited to, the Coverage Waiting Period.

Above list of covered services is representative. Full list with limitations as determined by Aetna appears on the plan booklet/certificate. For a summary list of Limitations and Exclusions, refer to page 9.

Aetna Life and Disability

Aetna Life Insurance Company Small Group packaged life and disability insurance plans include a range of flat-dollar insurance options bundled together in one monthly per-employee rate. These products are easy to understand and offer affordable benefits to help your employees protect their families in the event of illness, injury or death. You'll benefit from streamlined plan installation, administration and claims processing, and all of the benefits of our standalone life and disability products for small groups. Or, simply choose from our portfolio of group basic term life and disability insurance plans.

Life insurance

We know that life insurance is an important part of the benefits package you offer your employees. That's why our products and programs are designed to meet your needs for:

- Flexibility
- Added value
- Cost-efficiency
- Experienced support

We help you give employees what they're looking for in lifestyle protection, through our selected group life insurance options. And we look beyond the benefit payout to include useful enhancements through the Aetna Life EssentialsSM program. So what's the bottom line? A portfolio of value-added products and programs to attract and retain workers — while making the most of the benefit dollars you spend.

Giving you (and your employees) what you want

Employees are looking for cost-efficient plan features and value-added programs that help them make better decisions for themselves and their dependents.

Our life insurance plans come with a variety of features including:

- **Accelerated death benefit** — Also called the “living benefit,” the accelerated death benefit provides payment to terminally ill employees or spouses. This payment can be up to 75 percent of the life insurance benefit (minimum of \$5,000).
- **Premium waiver provision** — If an employee becomes permanently or totally disabled because of an illness or injury before age 60, employee coverage may stay in effect up to age 65 without premium.
- **Optional dependent life** — Employers with 10 or more employees can offer this feature, which allows employees to add optional supplemental coverage for eligible spouses and children. This employee-paid benefit enables employees to cover their spouses and dependent children.

Our fresh approach to life

With Aetna Life Essentials, your employees have access to programs during their active lives to help promote healthy, fulfilling lifestyles. In addition, Aetna Life Essentials provides for important caring and support resources for often-overlooked needs during the end of one's life. And we also include value for beneficiaries and their loved ones well beyond the financial support from a death benefit.



AD&D Ultra®

Routinely included with our small group life and disability insurance package, AD&D Ultra insurance provides employees and their families with the same coverage as a typical accidental death and dismemberment plan — and then some. It includes features such as coverage for education or dependent child-care expenses upon the death of the employee.

Benefits include:

- Death
- Dismemberment
- Loss of Sight
- Loss of Speech
- Loss of Hearing
- Third Degree Burns
- Paralysis
- Exposure and Disappearance
- Passenger Restraint and Airbag
- Education Benefit for Dependent Child and/or Spouse
- Child Care Benefit
- Coma Benefit
- Repatriation of Remains Benefit
- Total Disability Benefit

Disability insurance

Finding disability insurance plans for you and your employees isn't difficult. Many companies offer them. The challenge is finding the right plan ... one that will meet the distinct needs of your business. Aetna understands this.

Our approach to disability helps give us a clear understanding of what you and your employees need ... and then helps meet those needs. You'll get the right resources, the right support and the right care for your employees at the right time:

- Our clinically based disability model ensures claims and duration guidelines are fact-based with objective benchmarks.
- We offer a holistic approach that takes the whole person into account.
- We give you 24-hour access to claim information.
- We provide return-to-work programs to help ensure employees are back to work as soon as it's medically safe to do so.
- We employ vocational rehabilitation and ergonomic specialists who can help restore employees back to health and productive employment.

Integrated Health and Disability

With our Integrated Health and Disability program, we can link medical and disability data to help anticipate concerns, take action and get your employees back to work sooner:

- Predictive modeling identifies medical members most likely to experience a disability, potentially preventing a disability from occurring or minimizing the impact for better outcomes.
- HIPAA-compliant so medical and disability staff can share clinical information and work jointly when applicable with the employee to help address medical and disability issues.
- Referrals between health case managers and their disability counterparts when applicable help ensure better consistency and integration.
- The Integrated Health and Disability program is available at no additional cost when a member has both medical and disability coverage from Aetna.

For a summary list of Limitations and Exclusions, refer to page 9.

LIFE AND DISABILITY BENEFITS

AETNA SMALL GROUP PACKAGED LIFE & DISABILITY PLAN OPTIONS

Packaged Life & Disability Benefits	Low Option	Medium Option	High Option
BASIC LIFE PLAN DESIGN			
Benefit	Flat \$10,000	Flat \$20,000	Flat \$50,000
Guaranteed Issue 2 – 9 Lives 10 – 50 Lives	\$10,000 \$10,000	\$20,000 \$20,000	\$20,000 \$50,000
Reduction Schedule	Employee's Original Life Amount Reduces to 65% at age 65; 40% at age 70; 25% at age 75	Employee's Original Life Amount Reduces to 65% at age 65; 40% at age 70; 25% at age 75	Employee's Original Life Amount Reduces to 65% at age 65; 40% at age 70; 25% at age 75
Premium Waiver Provision	Premium Waiver 60	Premium Waiver 60	Premium Waiver 60
Accelerated Death Benefit	Up to 75% of Life Amount	Up to 75% of Life Amount	Up to 75% of Life Amount
Dependent Life	Spouse \$5,000; Child \$2,000	Spouse \$5,000; Child \$2,000	Spouse \$5,000; Child \$2,000
AD&D Ultra®	Matches Basic Life Benefit	Matches Basic Life Benefit	Matches Basic Life Benefit
Additional Features	Passenger Restraint & Airbag, Education (for dependent child and/or spouse), Child Care, Repatriation, Coma, Total Disability, 365-Day Covered Loss (not applicable to loss of life)		
DISABILITY PLAN DESIGN			
Monthly Benefit	Flat \$500; No offsets	Flat \$1,000; Only offsets are Workers' Compensation, any state disability plan and primary & family Social Security benefits if applicable	Flat \$1,000; Only offsets are Workers' Compensation, any state disability plan and primary & family Social Security benefits if applicable
Elimination Period	30 days	30 days	30 days
Definition of Disability	Own occupation 20% Earnings Loss (80% Earnings Test)	Own occupation 20% Earnings Loss (80% Earnings Test)	First 24 months of benefits: Own Occupation Earnings Loss of 20% or more; Any reasonable occupation thereafter: 40% earnings loss
Benefit Duration	24 months of benefits	24 months of benefits	60 months of benefits
Pre-Existing Condition Limitation	3/12	3/12	3/12
Types of Disability	Occupational & Non-Occupational	Occupational & Non-Occupational	Occupational & Non-Occupational
Mental Health/Substance Abuse	Duration the same as all other conditions	Duration the same as all other conditions	24 months of benefits
Rates* (per employee per month)	\$8	\$15	\$27

*The above rates are guaranteed for an assumed 12-month first-year policy period.

TERM LIFE BENEFITS

AETNA SMALL GROUP BASIC EMPLOYEE TERM LIFE PLAN OPTIONS

Term Life Benefits are also available separately from the packaged product.

Term Life Benefits	2 – 9 Employees	10 – 50 Employees
Basic Life Schedule	Flat \$10,000, \$15,000, \$20,000, \$50,000	Flat \$10,000, \$15,000, \$20,000, \$50,000, \$75,000, \$100,000, \$125,000
Class Schedules	Not Available	Up to 3 classes (with a minimum requirement of 3 employees in each class) — the benefit amount of the highest class cannot be more than 5 times the benefit amount of the lowest class
Premium Waiver Provision	Premium Waiver 60	Premium Waiver 60
Age Reduction Schedule	Original Life Amount Reduces to 65% at age 65; 40% at age 70; 25% at age 75	Original Life Amount Reduces to 65% at age 65; 40% at age 70; 25% at age 75
Accelerated Death Benefit	Up to 75% of Life Amount	Up to 75% of Life Amount
Guaranteed Issue	\$20,000	10-25 - \$75,000; 26-50 - \$100,000
Participation Requirements	100%	100% on noncontributory plans; 75% on contributory plans
Contribution Requirements	100% Employer Contribution	Minimum 50% Employer Contribution
AD&D ULTRA®		
AD&D Schedule	Automatically Included; Same as Life plan	Automatically Included; Same as Life plan
Additional Features	Passenger Restraint & Airbag, Education (for dependent child and/or spouse), Child Care, Repatriation, Coma, Total Disability, 365-Day Covered Loss (not applicable to loss of life)	
OPTIONAL DEPENDENT TERM LIFE		
Spouse Amount	Not Available	\$5,000
Child Amount	Not Available	\$2,000

Limitations and Exclusions

Dental

Listed below are some of the charges and services for which these dental plans do not provide coverage. For a complete list of exclusions and limitations, refer to the plan documents.

- Dental services or supplies that are primarily used to alter, improve or enhance appearance.
- Experimental services, supplies or procedures.
- Treatment of any jaw joint disorder, such as temporomandibular joint disorder.
- Replacement of lost, missing or stolen appliances and certain damaged appliances.
- Those services that Aetna defines as not necessary for the diagnosis, care or treatment of a condition involved.

Specific service limitations:

- DMO plans: Oral exams (4 per year).
- PPO plans: Oral exams (2 routine and 2 problem-focused per year).
- All plans:
 - > Bitewing X-rays (1 set per year).
 - > Complete series X-rays (1 set every 3 years).
 - > Cleanings (2 per year).
 - > Fluoride (1 per year; children under 16).
 - > Sealants (1 treatment per tooth, every 3 years on permanent molars; children under 16).
 - > Scaling and root planing (4 quadrants every 2 years).
 - > Osseous surgery (1 per quadrant every 3 years).
- All other limitations and exclusions in the plan documents.

AD&D Ultra*

This coverage is only for losses caused by accidents. No benefits are payable for a loss caused or contributed to by:

- A bodily or mental infirmity.
- A disease, ptomaine or bacterial infection.**
- Medical or surgical treatment.**
- Suicide or attempted suicide (while sane or insane).
- An intentionally self-inflicted injury.
- A war or any act of war (declared or not declared).
- Voluntary inhalation of poisonous gases.
- Commission of or attempt to commit a criminal act.
- Use of alcohol, intoxicants or drugs, except as prescribed by a physician and an accident in which your blood level as operator of a motor vehicle meets or exceeds the level at which intoxication would be presumed under the law of the state where the accident occurred shall be deemed to be caused by the use of alcohol.
- Intended or accidental contact with nuclear or atomic energy by explosion and/or release.
- Air or space travel. This does not apply if a person is a passenger, with no duties at all, on an aircraft being used only to carry passengers (with or without cargo).

*In order to determine the cause of death prior to payment of any claim for loss of life, Aetna has the right to examine the body. Aetna also has the right to make an autopsy where not forbidden by law.

**These do not apply if the loss is caused by an infection that results directly from the injury or surgery needed because of the injury. The injury must not be one that is excluded by the terms of the contract.

Disability

No benefits are payable if the disability:

- Is due to intentionally self-inflicted injury (while sane or insane).
- Results from your committing or attempting to commit, a criminal act.
- Is due to participation in an insurrection or rebellion.
- Is due to war or any act of war (declared or not declared).
- Results from an automobile accident caused by you while you are intoxicated. ("Intoxicated" means: the blood alcohol level of the driver of the automobile meets or exceeds the level at which intoxication would be presumed under the law of the state where the accident occurred.)

On any day during a period of disability that a person is confined in a penal or correctional institution for conviction of a criminal or other public offense, the person will not be deemed to be disabled and no benefits will be payable.

No benefit is payable for any disability that occurs during the first 12 months of coverage and is due to a pre-existing condition for which the member was diagnosed, treated or received services, treatment, drugs or medicines three (3) months prior to coverage effective date.

This material is for information only and is not an offer or invitation to contract. An application must be completed to obtain coverage. Rates and benefits vary by location. Dental plan features and availability may vary by location and group size. Not all dental/disability services are covered. Dental benefits, dental insurance plans, life and disability insurance plans/policies contain exclusions and limitations. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to www.aetna.com.

