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Pasadena ISD Enrollment Information







Medical Plan I – Aexcel Aetna CPOSII

Network	In-Network	Out-Network*
HealthFund Amount contributed by Pasadena ISD	N/A	N/A
Plan Coinsurance	20%	50%
Calendar Year Deductible Individual Family	\$750 per person \$2,250 per family	\$2,250 per person \$6,750 per family
Out-of-Pocket Maximum Individual Family	\$4,000 per person \$12,500 family	\$12,500 per person \$36,000 family
Lifetime Maximum Benefit	Unlimited	Unlimited
Primary Care Physician (PCP) Office Visits	\$35 copay	50% after deductible
Specialty Care - Aexcel Office Visits	\$50 copay	50% after deductible
Specialty Care - Non-Aexcel Office Visits	\$65 copay	50% after deductible





Medical Plan I – Aexcel Aetna CPOSII Cont'd

Preventive Care Annual routine physical: Adult and Well Child, GYN, Mammograms, Colorectal Cancer Screenings, PSA Tests	100%	50% after deductible
Diagnostic Outpatient Lab/ X-rays/Testing (part of office visit)	PCP or Specialist copay	50% after deductible
Diagnostic Outpatient Lab/ X-rays/Testing (Facility)	100%	50% after deductible
Complex Imaging Services	20% after deductible	50% after deductible
Inpatient Hospital Services	\$500 per confinement copay, then 20% after deductible	\$500 per confinement copay, then 50% after deductible
Outpatient Surgery	\$100 copay, then 20% after deductible	\$100 copay, 50% after deductible
Emergency Room Copay/Coinsurance (Copay waived if admitted)	\$250 copay, then 20% after deductible	same as preferred care
Ambulance	20% after deductible	same as preferred care
Urgent Care Copay/Coinsurance (Copay waived if admitted)	\$50 copay	50% after deductible
Walk In Clinics	\$25 copay	50% after deductible

*Out of Network benefit paid at the Limited Fee Schedule



Medical Plan I – Aexcel Aetna CPOS II 2014 Monthly Premiums

	District Contributions	Monthly Employee Cost
Employee Only	\$245	\$310
Employee & Spouse	\$245	\$730
Employee & Child(ren)	\$245	\$585
Family	\$245	\$990

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Medical Plan II – Aetna CPOSII AHF-HRA

Network	In-Network	Out-of-Network
HealthFund Amount contributed by Pasadena ISD	\$500 Employee \$1,000 EE+S, Ch or F	
Plan Coinsurance	20%	50%
Calendar Year Deductible Individual Family	\$2,500 per person \$7,500 per family	\$7,500 per person \$22,500 per family
Out-of-Pocket Maximum Individual Family	\$5,000 per person \$12,500 family	\$15,000 per person \$45,000 per family
Lifetime Maximum Benefit	Unlimited	Unlimited
Primary Care Physician (PCP) Office Visits	20% after deductible	50% after deductible
Specialty Care - Aexcel Office Visits	20% after deductible	50% after deductible
Specialty Care - Non-Aexcel Office Visits	20% after deductible	50% after deductible





Medical Plan II – Aetna CPOSII AHF-HRA CONT'D

Preventive Care Annual routine physical: Adult and Well Child, GYN, Mammograms, Colorectal Cancer Screenings, PSA Tests	100%	50% after deductible
Diagnostic Outpatient Lab/ X-rays/Testing (part of office visit)	20% after deductible	50% after deductible
Diagnostic Outpatient Lab/ X-rays/Testing (Facility)	100%	50% after deductible
Complex Imaging Services	20% after deductible	50% after deductible
Inpatient Hospital Services	20% after deductible	50% after deductible
Outpatient Surgery	20% after deductible	50% after deductible
Emergency Room Copay/Coinsurance (Copay waived if admitted)	\$250 copay, then 20% after deductible	same as preferred care
Ambulance	20% after deductible	same as preferred care
Urgent Care Copay/Coinsurance (Copay waived if admitted)	20% after deductible	50% after deductible
Walk In Clinics	20% after deductible	50% after deductible

*Out of Network benefit paid at the Limited Fee Schedule



Medical Plan II – Aetna CPOS II AHF-HRA 2014 Monthly Premiums

	District Contributions	Monthly Employee Cost
Employee Only	\$245	\$165
Employee & Spouse	\$245	\$375
Employee & Child(ren)	\$245	\$300
Family	\$245	\$545

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Medical Plan III – Alternate Plan

I. Hospital Income

Inpatient Hospital Days \$150 per day/Benefit Maximum 180 Days per Calendar Year

II. Life and Accidental Death and Dismemberment Insurance

Employee covered under the Alternate Plan receive an additional \$10,000 in life insurance

III. Dental Coverage - Cigna Dental Choice

Deductible per year - \$50 Calendar Year Max. Benefits - \$1,000

- * Preventative & Diagnostic Dental Services 100% of Usual & Customary Charges Periodic Oral Exam, Bite0Wing X-Rays, Dental Prophylaxis Cleaning, Complete Series or Panorex
- * Basic Dental Services (Minor Restorative, Endodontic, and Oral Surgery) 80% of Usual & Customary Charges

Fillings, Root Canal Treatment, Root Planning, Periodontal Surgery, Simple Extraction, Surgical Extraction

 * Major Dental Services – 50% of Usual & Customary Charges
 Crowns, Fixed Bridges, Full Dentures, Inlay & On lays, Partial Dentures, Relining Dentures, Repairs to Full Dentures, Partial Dentures, Bridges





Medical Plan IV – Aetna Select AHF-HRA

Network	MEMORIAL HERMANN, HCA, and ST. LUKES FACILITIES ONLY	Out-of-Network
HealthFund Amount contributed by Pasadena ISD	\$500 Employee \$1,000 EE+S, Ch or F	N/A
Plan Coinsurance	20%	N/A
Calendar Year Deductible Individual Family	\$2,500 per person \$7,500 per family	N/A
Out-of-Pocket Maximum Individual Family	\$5,000 per person \$12,500 family	N/A
Lifetime Maximum Benefit	Unlimited	N/A
Primary Care Physician (PCP) Office Visits	20% after deductible	N/A
Specialty Care - Aexcel Office Visits	20% after deductible	N/A
Specialty Care - Non-Aexcel Office Visits	20% after deductible	N/A





Medical Plan IV – Aetna Select AHF-HRA Cont'd

Preventive Care Annual routine physical:Adult and Well Child, GYN, Mammograms, Colorectal Cancer Screenings,PSA Tests	100%	N/A
Diagnostic Outpatient Lab/ X-rays/Testing (part of office visit)	20% after deductible	N/A
Diagnostic Outpatient Lab/ X-rays/Testing (Facility)	20% after deductible	N/A
Complex Imaging Services	20% after deductible	N/A
Inpatient Hospital Services	20% after deductible	N/A
Outpatient Surgery	20% after deductible	N/A
Emergency Room Copay/Coinsurance (Copay waived if admitted)	\$250 copay, then 20% after deductible	same as preferred care
Ambulance	20% after deductible	same as preferred care
Urgent Care Copay/Coinsurance (Copay waived if admitted)	20% after deductible	N/A
Walk In Clinics	20% after deductible	N/A

Medical Plan IV – Aetna Select 2014 Monthly Premiums

	District Contributions	Monthly Employee Cost
Employee Only	\$245	\$125
Employee & Spouse	\$245	\$286
Employee & Child(ren)	\$245	\$245
Family	\$245	\$440

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Medical Plan V – Aetna Select AHF-HRA

Network	ACO MEMORIAL HERMANN	Out-of-Network
HealthFund Amount contributed by Pasadena ISD	\$500 Employee \$1,000 EE+S, Ch or F	N/A
Plan Coinsurance	20%	N/A
Calendar Year Deductible Individual Family	\$2,500 per person \$7,500 per family	N/A
Out-of-Pocket Maximum Individual Family	\$5,000 per person \$12,500 family	N/A
Lifetime Maximum Benefit	Unlimited	N/A
Primary Care Physician (PCP) Office Visits	20% after deductible	N/A
Specialty Care - Aexcel Office Visits	N/A	N/A
Specialty Care - Non-Aexcel Office Visits	20% after deductible	N/A





Medical Plan V – Aetna Select AHF-HRA Cont'd

Preventive Care Annual routine physical: Adult and Well Child, GYN, Mammograms, Colorectal Cancer Screenings, PSA Tests	100%	N/A
Diagnostic Outpatient Lab/ X-rays/Testing (part of office visit)	20% after deductible	N/A
Diagnostic Outpatient Lab/ X-rays/Testing (Facility)	100%	N/A
Complex Imaging Services	20% after deductible	N/A
Inpatient Hospital Services	20% after deductible	N/A
Outpatient Surgery	20% after deductible	N/A
Emergency Room Copay/Coinsurance (Copay waived if admitted)	\$250 copay, then 20% after deductible	same as preferred care
Ambulance	20% after deductible	same as preferred care
Urgent Care Copay/Coinsurance (Copay waived if admitted)	20% after deductible	N/A
Walk In Clinics	20% after deductible	N/A



Medical Plan V – Aetna Select AHF-HRA 2014 Monthly Premiums

	District Contributions	Monthly Employee Cost
Employee Only	\$245	\$100
Employee & Spouse	\$245	\$251
Employee & Child(ren)	\$245	\$210
Family	\$245	\$395

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Aetna Member Resources

- Group Plan Number: 838899
- Member Services Toll Free Number
 - 1-866-841-3541
- Claims Address: P.O. Box 981106, El Paso TX 79998-1106
- Remember to Register for **Aetna Navigator**
 - How to Register Registration is an easy process:
 - Go to www.aetna.com and click on "Register" under "Aetna Navigator[®] Member Log In"
 - Complete the requested information





What is Aexcel*?

Aexcel is a designation for specialty doctors who are some of the high performers in their specialty areas.

It's easy to find Aexcel-designated doctors - just look for the star \star next to their names in DocFind®

How do specialist qualify for the Aexcel designation?

- Are part of the existing Aetna network of health care providers
- See enough Aetna patients to allow us sufficient data to review their performance
- Have met industry-accepted practices for clinical performance
- Have met Aetna's efficiency standards
- As the final step, we make sure there are enough specialists for members to choose from

*Aexcel is not available with HMO plans.



Aexcel-designated doctors are in 12 specialty areas

- Cardiology
- Cardiothoracic Surgery
- Gastroenterology
- General Surgery
- Neurology
- Neurosurgery

- Obstetrics / Gynecology*
- Orthopedics
- Otolaryngology/ENT
- Plastic Surgery
- Urology
- Vascular Surgery

*Ob/Gyns are classified as specialists in the Aetna plan.





How to Find a PCP

www.aetna.com/docfind/custom/pasadenaisd

- DocFind
 - Go to and click on doc find.
 - Select your provider category. You can search by city, state, zip, specialty, hospital affiliation, provider name, gender, language and education.
 - Select the <u>"Aexcel Choice POSII Open Access"</u> network for <u>Medical I</u>
 - Select the "<u>Aetna Choice POSII (Aetna Health Fund)"</u> network
 <u>Medical II</u>
 - Select the <u>"Open Access Aetna Select (Aetna Health Fund)"</u> network <u>Medical IV</u>
 - Select <u>Plan V Memorial Hermann Accountable Care Network</u> (Aetna Health Fund)
 - Click on search to find a provider





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Custom DocFind makes it easier for you to find an Aexcel-designated specialist

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Se	elected Plan:		Code 77502 - 10 miles		
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Do	cFind [®] Home				
S	TART A NEW SEARCH ♦ earch Results earch Tips & FAQs ools & Resources		Notice About Participating ults that are in your network a		
1.69 mi <u>Map it</u>	Jeang, Ming K., ME 3337 Plainview Stro Suite 8 Pasadena, TX 7750 (713) 941-6083 <u>View Details</u>	eet	Cardiovascular Disease		<u>Share you</u> history no ePrescribi
1.69 mi <u>Map it</u>	Mullins, Jack A., M 3337 Plainview Stro Suite 8 Pasadena, TX 7750 (713) 941-6083 <u>View Details</u>	eet	Cardiovascular Disease		<u>Share you</u> history no ePrescribi
1.69 mi <u>Map it</u>	Hariharan, Ramesi 3351 Plainview Stro Suite A7 Pasadena, TX 7750 (281) 681-2228 <u>View Details</u>	eet	Cardiology		Share you history no ePrescribi
1.75 mi <u>Map it</u>	Jeroudi, Mohamed 4102 Woodlawn Av Suite 220 Pasadena, TX 7750 (713) 475-5940 <u>View Details</u>	enue	Cardiovascular Disease		<u>Share you</u> history no ePrescribi

Docfind Provider View Details

Boone, Hal Browning, MD

Healthcare Professional Information

Location and Contact Information

Provider Information

Education & Certification

Special Programs & Recognition

Hospitial Affiliations

- St. Luke's Patients Medical Center
- Memorial Hermann Southeast Hospital
- Bayshore Medical Center HCA Affiliate





Express Script
Pharmacy Benefits

<u>Participating Pharmacy – up to 30 days supply</u>

Tier 1: Generic Drug	\$15 Co-Pay
Tier 2: Preferred Brand Drug	\$40 Co-Pay
Tier 3: Non-Preferred Drug	\$70 Co-Pay

<u>Home Delivery – up to 90 days supply</u>

Tier 1: Generic Drug	\$30 Co-pay
Tier 2: Preferred brand drug	\$80 Co-pay
Tier 3: Non-preferred brand drug	\$140 Co-Pay

**Plan 1 includes the following deductible (combined Tier 2 & Tier 3 drugs only)

\$100 deductible per person \$150 deductible for family





Pasadena ISD Wellness Clinic

1850 Sam Houston Pkwy S. - Pasadena TX 77503 http://pasadenaisdclinic.com/home/



Pasadena ISD Wellness Center

HOME

ABOUT H2U

APPOINTMENTS

OF DUIDEO

HEALTH CENTER

PROVIDERS

MAPS & DIRECTIONS

PATIENT FORMS

FAQS



Hours of Operation

Monday 8 a.m. – 4 p.m. Tuesday 1 p.m. – 8 p.m. Wednesday 8 a.m. – 4 p.m Thursday 1 p.m. – 8 p.m.

Welcome to the Pasadena ISD Wellness Center

At the Pasadena ISD Wellness Center, we believe that high quality medical care requires getting to know our employees. H2U Wellness Centers Medical Providers will spend extensive one-on-one time listening to understand your unique and individual healthcare needs. Come experience high-quality medical services that are free to eligible PISD employees.

The Clinic places a high priority on preventive health education, medical screenings, and lifestyle modifications to ensure a lifetime of optimal health. H2U Wellness Centers' Physician, Nurse Practitioner and other medical staff will take the time to provide you with information concerning your medical care, and encourage your participation in healthcare decisions. H2U Wellness Centers is fully committed to complying with Federal HIPAA guidelines protecting the confidentiality of patient information. Therefore, your personal health information will be treated confidentially and will not be released to anyone without your prior written consent.

H2U Wellness Centers believes in the "whole person" approach to medical care, and strives to build a strong partnership with you. H2U Wellness Centers staff is committed to treating you – not just your medical problems.

Scheduled appointments will take first preference although walk-ins are welcome.

Contact Us Local

For more information or to schedule an appointment, contact us at 713-740-5300.

For more information on the Pasadena ISD, please visit the PISD website.



P.I.S.D. Benefits Office Contact Numbers

Cecilia Beltran 713-740-0110

Nancy Silvestre

713-740-0120

Vonnie Conde

713-740-0121

