





FUNDING ADVANTAGE

CONTACT INFORMATION				
Member Services	800-872-3862			
Spanish Member Support	800-872-3862			
Internet Support	800-343-6101 - Aetna Answer Team			
Provider Eligibility Verification	800-872-3862			
Claims	800-872-3862			
Release Authorization (for HIPAA Release Forms)	800-872-3862			
Customer Service	800-872-3862			
Commissions	800-622-3435			
Adds/Terms	800-343-6101 - Aetna Answer Team			
Administrator	800-343-6101 - Aetna Answer Team			
Billing/Payments	800-343-3862			
Eligibility	800-872-3862			
Broker of Record Changes	Contact assigned account manager			
Cal-COBRA Department/ Federal COBRA Enrollments	Contact assigned account manager			
Small Group Cancellations/ Reinstatements	Contact assigned account manager			
Producer Service & Broker Service	800-343-6101 - Aetna Answer Team			
Underwriting Department	800-343-6101 - Aetna Answer Team			
Broker Licensing Department/ Broker Licensing Paperwork	Licensing and Account Department - 866-511-2863			



PENDING CARRIER APPROVAL





FUNDING ADVANTAGE

PROVIDER NETWORKS

HMO Networks

N/A

PPO Networks

Choice POS II

EPO Networks

Open Access Aetna Select

UNDERWRITING & ENROLLMENT REQUIREMENTS

Carrier's Effective Date

1st of the month

Premium Amount Required for 15th?

No

Applications must be dated within

90 days of requested effective date

Spouse/Domestic Partner Employees

- 1 application or 2?

FEES

Enrollment Fee Amount

N/A **Type of Enrollment Fee**

Monthly Administration Fee N/A

24 HOUR COVERAGE

Is Workers' Comp required on corporate officers, partners and sole proprietors?

N/A

N/A

Is on-the-job covered for corporate officers, partners and sole proprietors?

N/A

Is there a premium adjustment for 24 hour coverage?

N/A

SPECIAL CONSIDERATIONS









I OIIDIII ADIANIA

PLAN ELIGIBILITY REQUIREMENTS

Enrollment	Group	Size
-------------------	-------	------

	Initial	After Issue
Min. # of employees	10	10
Max. # of employees	50	50

Minimum Employer Contribution

	Group Size	
	10-50	
Employees	50% of lowest cost plan	
For Dependents	0	
% of Total Cost	I Cost 50% of employee cost - not total cost	

PARTICIPATION			
Contributory			
	Group Size		
	10-50		
Employees	50% of all eligible employees		
Dependents	0		
Non-Contributory			
Employees	100%		
Dependents	0		









COVERAGE RESTRICTIONS	
Are commission-only employees allowed?	No
Are 1099 employees allowed?	No
Are employees covered if traveling out of USA?	Emergency only
Is coverage available for out-of-state employees?	Contact your Word & Brown representative
Max. percentage of employees residing out-of-state allowed	If headquartered in Nevada, 1 W-2 to enroll in plan - not owner or owner's spouse

DIABETIC & SELF-INJECTABLE DRUG BENEFITS

Diabetes Benefits

Are the following items covered under the Prescription Drug Benefit or the Durable Medical Equipment Benefit of the member's selected plan design?						
	Insulin	Needles & Syringes	Chem-Strips and/or Testing Agents	Insulin Pump Supplies	Insulin Pump†	Glucose Monitor [†]
Rx Drug Benefit	Refer to specific benefit summary or contact member services: 800-872-3862					
Medical/Durable Medical Equipment Benefit*	Refer to specific benefit summary or contact member services: 800-872-3862					

[†]Vendors for Diabetes Equipment: Contract is with Medical Group. See PCP.

Self-Injectable Drug Benefits

	Are self-injectable drugs (other than insulin) covered under the Prescription Drug Benefit or Medical Benefit?	Is pre-authorization required?	Must self-injectables (other than insulin) be purchased via the carrier-contracted mail order Rx vendor?	
HMO plans	N/A - HMO plans are not offered in	N/A - HMO plans are not offered	N/A - HMO plans are not offered in	
	Aetna Funding Advantage	in Aetna Funding Advantage	Aetna Funding Advantage	

These services may change at any time without notice.

Please contact your Word & Brown rep for specific inquiries on listed services

For Prescription information, refer to comparison chart in the front of this guide.

Benefit information shown on this page is a brief summary. Limitations and exclusions apply. Please refer to certificate book, evidence of coverage or call representative for details.

