### Aetna's DocFind Directory

- Aetna's online directory, DocFind, is updated 6 days a week
- Sample DocFind Communications are reflected below:





**DocFind Instructions** 

Step 1: Visit Aetna's website at www.aetna.com

Step 2: At top of page, click on "Find a Doctor"

Step 3: In middle of page under the section labeled click on "A plan offered by my employer or organization (includes small group plans purchased on exchange in Maryland, Delaware, and District of

Step 4: Click on "Doctors (Primary Care) and "Type". Example "Family Practice" or "Pediatrics" hit Search

Step 5: Type in your zip code, or city or state - hit Search

Step 6: "Select a Plan"

If you are enrolling in the	DocFind Plan is
HMO (formerly Aetna or Horizon HMO)	Category = Aetna Standard Plans
	Plan Name = HMO
After the plan is selected click "Continue"	

Step 7: View your results

Step 1: Visit Aetna's website at www.aetna.com

Step 2: At top of page, click on "Find a Doctor"

organization (includes small group plans purchased on exchange in Maryland, Delaware, and District of Step 3: In middle of page under the section labeled click on "A plan offered by my employer or

Step 4: Click on "Doctors (Primary Care) and "Type" - Example "Family Practice" or "Pediatrics" hit Search

Step 5: Type in your zip code, or city or state - hit Search

Step 6: "Select a Plan

If you are enrolling in the	DocFind Plan is
Open Access Managed Choice (Formerly NJ Direct or Freedom) Category = Aetna Open Access Plans (you may need to	Category = Aetna Open Access Plans (you may need to
	scroll down)
	Plan Name = Managed Choice Open Access
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After the plan is selected click "Continue"

Step 7: View your results

### 4th Year Chapter 78 Contribution Analysis Effective 7/1/16- 12/31/16

\$30,000 - \$64,999 Salary band

			_	\$30,000-\$34,999 Salary	9 Salary		\$45,000 to \$49,999 Salary	9 Salary		\$50,000 to \$54,999 Salary	99 Salary	**	0,000 - \$64	\$60,000 - \$64,999 Salary
		-		Aetna Medical Only	Aetna Medical SEHBP Medical Only Only		Aetna Medical Only	SEHBP Medical Only		Aetna Medical Only	SEHBP Medical Only		Aetna Medical	SEHBP Medical Only
	Aetna Medical Monthly Premium	SEHBP Medical Monthly Premium"	Year 4 %	Ye Mo Conti	Year 4 Monthly Contribution	Year 4 %	Year 4 Monthly Contribution	Year 4 Monthly Intribution	Year 4 %	Ye <b>M</b> oi Contr	Year 4 Monthly Contribution	Year 4 %		Year 4 Monthly Contribution
Aetna 10														
Single	\$727.25	\$749.11	10.00%	\$72.73	\$74.91	14.00%	\$101.82	\$104.88	20.00%	\$145.45	\$149.82	27 00%	\$198.36	\$0000 DB
2 Adults	\$1,454.35	\$1,498.24	6.00%	\$87.26	\$89.89	10.00%	\$145.44	\$149.82	15.00%	\$218.15	\$224.74	21 00%	\$305.41	8314 63
Parent/Child	\$1,352.49	\$1,383.34	6.00%	\$81.15	\$83.60	10.00%	\$135.25	\$139.33	15.00%	\$202.87	\$209.00	21.00%	\$284 02	\$292.60
Family	\$2,079.61	\$2,142.45	5.00%	\$103.98	\$107.12	9.00%	\$187.16	\$192.82	12.00%	\$249.55	\$257.09	17.00%	\$353.53	\$384 22
Aetna 15														
Single	\$692.51	\$713.13 10.00%	10.00%	\$69.25	\$71.31	14.00%	\$96.95	\$99.84	20.00%	\$138.50	\$142.63	27 00%	\$188.98	\$100 55
2 Adults	\$1,386.63	\$1,426.28	6.00%	\$83.20	\$85.58	10.00%	\$138.66	\$142.63	15.00%	\$207.99	\$213.94	21.00%	\$291.19	\$299.52
Parent/Child	\$1,287.96	\$1,326.42	6.00%	\$77.28	\$79.59	10.00%	\$128.80	\$132.64	15.00%	\$193.19	\$198.96	21.00%	\$270.47	\$278.55
Family	\$1,981.28	\$2,039.55	5.00%	\$99.06	\$101.98	9.00%	\$178.32	\$183.56	12.00%	\$237.75	\$244.75	17 00%	\$336.82	\$346.79
Aetna HMO														
Single	\$666.11	\$686.89	10.00%	\$66.61	\$68.69	14.00%	\$93.26	\$96.16	20.00%	\$133.22	\$137.38	27.00%	\$179.85	\$185.48
2 Adults	\$1,322.55	\$1,373.79	6.00%	\$79.35	\$82.43	10.00%	\$132.26	\$137.38	15.00%	\$198.38	\$206.07	21 00%	\$277 74	\$288.50
Parent/Child	\$1,239.18	\$1,277.62	6.00%	\$74.35	\$76.66	10.00%	\$123.92	\$127.76	15.00%	\$185.88	\$191.64	21 00%	\$260 23	\$268.30
Family	\$1,905.32	\$1,964.51	5.00%	\$95.27	\$98.23	9.00%	\$171.48	\$176.81	12.00%	\$228.64	\$235.74	17.00%	\$323.90	\$333.97

<sup>\*</sup>Rates are reflective of Aetha's 18-month proposal and SEHBP current 2016 rates.

<sup>\*</sup>SEHBP Rates reflect Horizon Direct 10 and Direct 15 rates

# 4th Year Chapter 78 Contribution Analysis

\$75,000 to \$119,999 Salary Band

			\$7	\$75,000 - \$74,999 Salary	999 Salary	<b>9</b>	\$90,000 - \$94,999 Salary	99 Salary	\$95,0	5,000 - \$99,	000 - \$99,999 Salary	\$11	\$110,000 - \$119,999 Salary	999 Salary
				Aetna Medical Only	SEHBP Medical Only		Aetna Medical Only	SEHBP Medical Only		Aetna Medical Only	SEHBP Medical Only		Aetna Medical &	SEHBP Medical Only
	Aetna Medical Monthly Premium*	SEHBP Medical Monthly Premium**	Year 4 %	Co.	Year 4 Monthly Contribution	Year 4 %		Year 4 Monthly Contribution	Year 4 %		Year 4 Monthly Contribution	Year 4 %		Year 4 Monthly Contribution
Aetna 10														
Single	\$727.25	\$749.11	33.00%	\$239.99	\$247.21	34.00%	\$247.27	\$254.70	35.00%	\$254.54	\$262.19	35.00%	\$254.54	\$262.19
2 Adults	\$1,454.35	\$1,498.24	27.00%	\$392.67	\$404.52	30.00%	\$436.31	\$449.47	30.00%	\$436.31	\$449.47	35.00%	\$509.02	\$524.38
Parent/Child	\$1,352.49	\$1,393.34	27.00%	\$365,17	\$376.20	30.00%	\$405.75	\$418.00	30.00%	\$405.75	\$418.00	35.00%	\$473.37	\$487.67
Astrony	19.670,24	34,144,45	23.00%	\$4/8.37	\$492.76	28.00%	\$582.29	\$599.89	29.00%	\$603.09	\$621.31	35.00%	\$727.86	\$749.86
Denne 10														
Single	\$692.51	\$713.13	33.00%	\$228.53	\$235.33	34.00%	\$235.45	\$242.46	35.00%	\$242.38	\$249.60	35.00%	\$242.38	\$249.60
2 Adults	\$1,386.63	\$1,426.28	27.00%	\$374.39	\$385.10	30.00%	\$415.99	\$427.88	30.00%	\$415.99	\$427.88	35.00%	\$485.32	\$499.20
Parent/Child	\$1,287.96	\$1,326.42	27.00%	\$347.75	\$358.13	30.00%	\$386.39	\$397.93	30.00%	\$386.39	\$397.93	35.00%	\$450.79	\$464.25
Family	\$1,981.28	\$2,039.55	23.00%	\$455.69	\$469.10	28.00%	\$554.76	\$571.07	29.00%	\$574.57	\$591.47	35.00%	\$693.45	\$713.84
Aetna HMO														
Single	\$666.11	\$686.89	33.00%	\$219.82	\$226.67	34.00%	\$226.48	\$233.54	35.00%	\$233,14	\$240.41	35.00%	\$233.14	\$240.41
2 Adults	\$1,322.55	\$1,373.79	27.00%	\$357.09	\$370.92	30.00%	\$396.77	\$412.14	30.00%	\$396.77	\$412.14	35.00%	\$462.89	\$480.83
Parent/Child	\$1,239.18	\$1,277.62	27.00%	\$334.58	\$344.96	30.00%	\$371.75	\$383.29	30.00%	\$371.75	\$383.29	35.00%	\$433.71	\$447.17
Family	\$1,905.32	\$1,964.51	23.00%	\$438.22	\$451.84	28.00%	\$533.49	\$550.06	29.00%	\$552.54	\$569.71	35.00%	\$666.86	\$687.58

\*Rates are reflective of Aetna's 18-montl
\*SEHBP Rates reflect Horizon Direct 10

# 4th Year Chapter 78 Contribution Analysis

Effective 1/1/17-12/31/17 \$30,000 - \$64,999 Salary band

				\$30,000-\$34,999 Salary	Salary		\$45,000 to \$49,999 Salary	Salary		\$50,000 to \$54,999 Salary	9 Salary	9 <b>3</b>	0,000 - \$64	\$60,000 - \$64,999 Salary
				Aetna Medical SEHBP Medical Only Only	SEHBP Medical Only		Aetna Medical Only	SEHBP Medical Only		Aetna Medical Only	SEHBP Medical Only		Aetna Medical	SEHBP Medical Only
	Aetha Medical Monthly Premium*	SEHBP Medical Monthly Premium**	Year 4 %	Year 4 Monthly Contribution	r 4 thly oution	Year 4 %	Year 4 Monthly Contribution	4 Ny ution	Year 4 %	Year 4 Monthly Contribution	or 4 thly bution	Year 4 %	_	Year 4 Monthly Contribution
Aetna 10														
Single	\$727.25	\$809.04	10.00%	\$72.73	\$80.90	14.00%	\$101.82	\$113.27	20.00%	\$145.45	\$161.81	27.00%	\$196.36	\$218.44
2 Adults	\$1,454.35	\$1,618.10	6.00%	\$87.26	\$97.09	10.00%	\$145.44	\$161.81	15.00%	\$218.15	\$242.71	21.00%	\$305.41	\$339.80
Parent/Child	\$1,352.49	-	6.00%	\$81.15	\$90.29	10.00%	\$135.25	\$150.48	15.00%	\$202.87	\$225.72	21.00%	\$284.02	\$316.01
Family	\$2,079.61	\$2,313.85	5.00%	\$103.98	\$115.69	9.00%	\$187.16	\$208.25	12.00%	\$249.55	\$277.66	17.00%	\$353.53	\$393.35
Aetna 15														
Single	\$692.51	\$770.18	10.00%	\$69.25	\$77.02	14.00%	\$96.95	\$107.83	20.00%	\$138.50	\$154.04	27.00%	\$186.98	\$207.95
2 Adults	\$1,386.63	in	6.00%	\$83.20	\$92.42	10.00%	\$138.66	\$154.04	15.00%	\$207.99	\$231.06	21.00%	\$291.19	\$323.48
Parent/Child	\$1,287.96		6.00%	\$77.28	\$85.95	10.00%	\$128.80	\$143.25	15.00%	\$193.19	\$214.88	21.00%	\$270.47	\$300.83
Family	\$1,981.28		5.00%	\$99.06	\$110.14	9.00%	\$178.32	\$198.24	12.00%	\$237.75	\$264.33	17.00%	\$336.82	\$374.46
Aetna HMO														
Single	\$666.11	\$741.84	10.00%	\$66.61	\$74.18	14.00%	\$93.26	\$103.86	20.00%	\$133.22	\$148.37	27.00%	\$179.85	\$200.30
2 Adults	\$1,322.55	\$1,483.69	6.00%	\$79.35	\$89.02	10.00%	\$132.26	\$148.37	15.00%	\$198.38	\$222.55	21.00%	\$277.74	\$311.58
Parent/Child	\$1,239.18	\$1,379.83	6.00%	\$74.35	\$82.79	10.00%	\$123.92	\$137.98	15.00%	\$185.88	\$206.97	21.00%	\$260.23	\$289.76
Family	\$1,905.32	\$2,121.67	5.00%	\$95.27	\$106.08	9.00%	\$171.48	\$190.95	12.00%	\$228.64	\$254.60	17.00%	\$323.90	\$360.68

<sup>&</sup>quot;Rates are reflective of Aetna's 18-month proposal and SEHBP rates with an 8% increase for 7/1/16-12/31/16.

<sup>\*</sup>SEHBP Rates reflect Horizon Direct 10 and Direct 15 rates

### 4th Year Chapter 78 Contribution Analysis Effective 1/1/17-12/31/17

\$75,000 to \$119,999 Salary Band

			\$7	\$75,000 - \$74,999 Salary	99 Salary	<b>e\$</b>	\$90,000 - \$94,999 Salary	999 Salary	<b>\$</b>	\$95,000 - \$99,999 Salary	99 Salary	\$11	\$110,000 - \$119,999 Salary	999 Salary
				Aetna Medical Only	SEHBP Medical Only		Aetna Medical Only	SEHBP Medical Only		Aetna Medical Only	SEHBP Medical Only		Aetna Medical &	SEHBP Medic: Only
	Aetna Medical Monthly Premium*	SEHBP Medical Monthly Premium**	Year 4 %	_	Year 4 Monthly Contribution	Year 4 %	_	Year 4 Monthly Contribution	Year 4 %		Year 4 Monthly Contribution	Year 4 %		Year 4 Monthly Contribution
Aetna 10														
Single	\$727.25	\$809.04	33.00%	\$239.99	\$266.98	34.00%	\$247.27	\$275.07	35.00%	\$254.54	\$283.16	35.00%	\$254.54	\$283.16
2 Adults	\$1,454.35	\$1,618.10	27.00%	\$392.67	\$436.89	30.00%	\$436.31	\$485.43	30.00%	\$436.31	\$485.43	35.00%	\$509.02	\$566.33
Parent/Child	\$1,352.49	\$1,504.81	27.00%	\$365,17	\$406.30	30.00%	\$405.75	\$451.44	30.00%	\$405.75	\$451.44	35.00%	\$473.37	\$526.68
Family	\$2,079.61	\$2,313.85	23.00%	\$478.31	\$532.18	28.00%	\$582.29	\$647.88	29.00%	\$603.09	\$671.02	35.00%	\$727.86	\$809.85
Aetna 15														
Single	\$692.51	\$770.18	33.00%	\$228.53	\$254.16	34.00%	\$235.45	\$261.86	35.00%	\$242.38	\$269.56	35.00%	\$242.38	\$269.56
2 Adults	\$1,386.63	\$1,540.38	27.00%	\$374.39	\$415.90	30.00%	\$415.99	\$462.11	30.00%	\$415.99	\$462.11	35.00%	\$485.32	\$539.13
Parent/Child	\$1,287.96	\$1,432.53	27.00%	\$347.75	\$386.78	30.00%	\$386.39	\$429.76	30.00%	\$386.39	\$429.76	35.00%	\$450.79	\$501.39
Family	\$1,981.28	\$2,202.71	23.00%	\$455.69	\$506.62	28.00%	\$554.76	\$616.76	29.00%	\$574.57	\$638.79	35.00%	\$693.45	\$770.95
Aetna HMO														
Single	\$666,11	\$741.84	33.00%	\$219.82	\$244.81	34.00%	\$226.48	\$252.23	35.00%	\$233.14	\$259.64	35.00%	\$233.14	\$259.64
2 Adults	\$1,322.55	\$1,483.69	27.00%	\$357.09	\$400.60	30.00%	\$396.77	\$445.11	30.00%	\$396.77	\$445.11	35.00%	\$462.89	\$519.29
Parent/Child	\$1,239.18	\$1,379.83	27.00%	\$334.58	\$372.55	30.00%	\$371.75	\$413.95	30.00%	\$371.75	\$413.95	35.00%	\$433.71	\$482.94
Family	\$1,905.32	\$2,121.67	23.00%	\$438.22	\$487.98	28.00%	\$533,49	\$594.07	29.00%	\$552.54	\$615.28	35.00%	\$666 86	\$747 ER

<sup>\*</sup>Rates are reflective of Aetna's 18-month

<sup>\*</sup>SEHBP Rates reflect Horizon Direct 10 a