



If you are a nonparticipating provider **Aetna MedicareSM Plan (PPO)**

We are expecting an increase in membership for our Medicare Advantage (MA) preferred provider organizations (PPOs).

As a result, you are likely to see more patients with these health plans.

Here's what you need to know:

- Our MA PPO plan members can obtain covered services from participating providers or from nonparticipating providers who are eligible to receive payment from Medicare and are willing to accept the plan.
- These MA PPO plans provide all the benefits of Original Medicare and more, such as unlimited hospitalization and coverage for certain preventive services.
- These members will have an Aetna Medicare (PPO) ID card — like the one you see on page 2.

If you are a nonparticipating provider in our Medicare PPO plan

- No contract is required to see members enrolled in these plans.
- We will pay Medicare-allowable rates to you for clean claims for covered services, less the member copayment, coinsurance and/or deductible, as described and required under MA regulations and the member's MA PPO plan. Limiting charges apply.
- Simplified billing — submit one bill to Aetna and receive one remittance.
- No referrals are required to see members enrolled in these plans.
- Precertification is recommended, but not required.
- ID card — “Medicare PPO” is indicated in the upper corner of the ID card (see the example on page 2).

Electronic claims submission

Use our electronic payer ID #60054.

Paper claims submission

Mail to:

Aetna
PO Box 981106
El Paso, TX 79998-1106

Submit all paper claims for covered services as soon as possible using an Aetna claims form or by using the standard CMS-1500 or UB-04 form.

Reimbursement and claims processing information

You should collect the member's copayment, coinsurance and/or deductible for covered services and submit all clean claims for covered services to us for payment. Remember to include the patient-paid amount on claims and encounters submitted to us. Claims will be processed in accordance with:

- Original Medicare billing rules
- Medicare fee schedule
- All prospective payment system requirements
- Local coverage determinations
- The member's plan documents, including his or her Evidence of Coverage

Medicare limiting charges apply. With respect to bundling/unbundling logic, we use the Correct Coding Initiative (NCCI). The link to NCCI on the Centers for Medicare & Medicaid Services (CMS) website is

www.cms.gov/nationalcorrectcodinitied/.

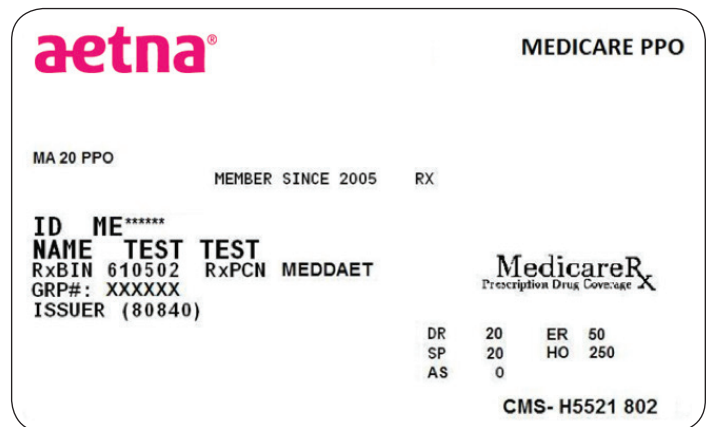
More online tools and resources available at www.aetna.com

For more information about Aetna Medicare plans, log in to our secure provider website, available through www.aetna.com. Once logged in, under "Plan Central," select "Aetna Health Plan," then "Support Center" from the menu bar on the left. Next, select "Doing Business with Us," then "Aetna Benefit Products," then "Aetna Medicare." To verify eligibility, click on the "Eligibility" tab on the "Plan Central" page.

You can visit www.aetnaeducation.com for easy access to training and resources related to MA plans.

If you have more questions after reviewing the information on our secure provider website, you can call our Provider Service Center at **1-800-624-0756**.

Aetna Medicare (PPO) member ID card



Want to join the Aetna network?
You can apply at www.aetna.com.
Select "Health Care Professionals"
and then click "Join our network."

Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies (Aetna).

www.aetna.com

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