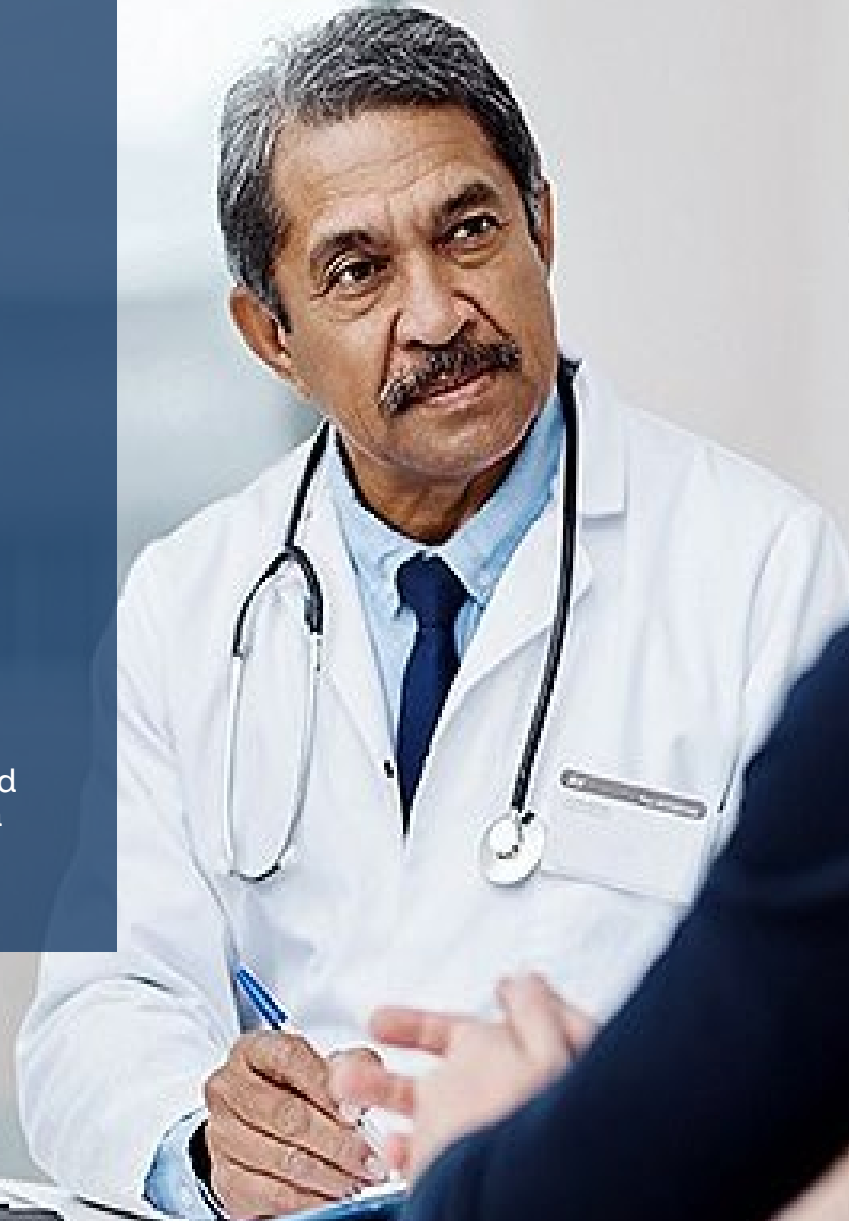


# Aetna Premier Care Network and Aetna Premier Care Network Plus

## Provider guide

Revised April 2022

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# Aetna policy statement

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# What is the Aetna Premier Care Network?

Aetna Premier Care Network is a national network. It has a concentric plan design that combines current performance networks, plus the standard broad networks in the remaining markets.

## **A concentric plan design means that there are only two levels of benefits:**

1. In network/maximum savings/best for your plan: This benefit applies when a member gets care from a participating Aetna Premier Care Network provider. We pay claims at the highest benefit level.
2. Out of network: This benefit applies to out-of-network facilities/physicians and non-designated physicians/hospitals. Non-designated providers can participate in the regular broad network, but be non-participating in an Aetna Premier Care Network. Depending on the provider's contract, we may pay the claim at the preferred provider organization (PPO) contracted rate. The rate will apply to the member's out-of-network benefit, if applicable.

## **The Aetna Premier Care Network is:**

- Built using performance networks with either 12 or 20 designated specialties that will result in the best medical cost savings in each market
- Designed to appear as one plan with one network, the Aetna Premier Care Network
- Seen by members as Aetna Premier Care Network on their card and in the provider search tool, regardless of the networks used in their market
- Based on where they live — members may have a broad or a narrow network, but by using the provider search tool on the member website, they'll only see the providers that will give them the maximum savings

# What is the Aetna Premier Care Network? (Cont)

**The base medical plans available with the Aetna Premier Care Network are:**

- Choice POS II (self-funded in all markets and fully insured in some markets)
- Open Access Aetna Select<sup>SM</sup> plans (self-funded only)

**There are two types of providers used for in-network benefits under the:**

- Aetna Health Plan network (AHP/Broad/Direct)
- Aetna Premier Care Network performance network

**Networks are based on one of the following designation configurations:**

- 12 specialties designated
- 20 specialties designated and hospitals tiered

Note: The Aetna Premier Care Network can have all types of providers (PCPs, specialists, hospitals, etc.) **or** only include 12 specialties or 20 specialties and hospitals. This is because in some geographies, the full network of providers is offered (the AHP broad network). And in other geographies, there is a smaller performance network offering. The performance networks have fewer providers in network than the full AHP network.

# What is Aetna Premier Care Network Plus?

The Aetna Premier Care Network Plus differs from the Aetna Premier Care Network. It can be based on an accountable care organization (ACO) or joint venture (JV) network. When based on an ACO or JV, the Aetna Premier Care Network Plus is an exact copy of that network.

In markets where there are no ACO or JVs, the Aetna Premier Care Network Plus is built using performance networks with either 12 or 20 designated specialties. This results in the best medical cost savings in each market.

Aetna Premier Care Network Plus is a program that can be added to the Choice POS II and/or Open Access Aetna Select products. For members to get the highest benefits, they must use providers contracted as an Aetna Premier Care Network Plus provider. This is designated on their plan's network ID.

Aetna Premier Care Network Plus has three ways for a member to access their in-network benefits:

- ACO or JV providers
- Aetna Premier Care Network Plus performance network
- Aetna Health Plan network (AHP/Broad/Direct)

Based on the member's home ZIP code, one of the following market configurations will apply:

- ACO or JV (e.g., Seton Health ACO, Innovation Health JV) access
- Concentric plan with in-network and out-of-network benefits (Choice POS II only)
- Concentric plan with in-network benefits only (Open Access Aetna Select only)

# New for 2022-2023: Aetna Premier Care Network Plus Multi-Tier

Some of your patients might be in our new Aetna Premier Care Network Plus Multi-Tier program. This program is a new national performance network offering. Multi-tiered programs sort doctors and facilities into tiers based on their performance and ability to save money. The highest performing and most efficient doctors and facilities are in Tier 1.

This new program introduces a multi-tier option that can be selected by a Plan Sponsor. The APCN Plus Multi-Tier network consists of a 3 tier structure as follows:

- **Tier 1** – Aetna® Premier Care Network Plus Multi-Tier providers. Utilizing a provider from this tier results in **maximum savings** for Aetna members.
- **Tier 2** – Aetna Health broad network providers. Utilizing a provider from this tier results in **standard savings** for Aetna® members.
- **Tier 3** – Out of Network providers. Utilizing a provider from this tier results in the lowest amount of savings to an Aetna® member or no coverage at all if offered with an in-network only plan.

*Please see next slide for instructions on how to identify patients who are in the APCN Plus Multi-Tier program.*

# How to identify patients who are in the APCN Plus multi-tier program

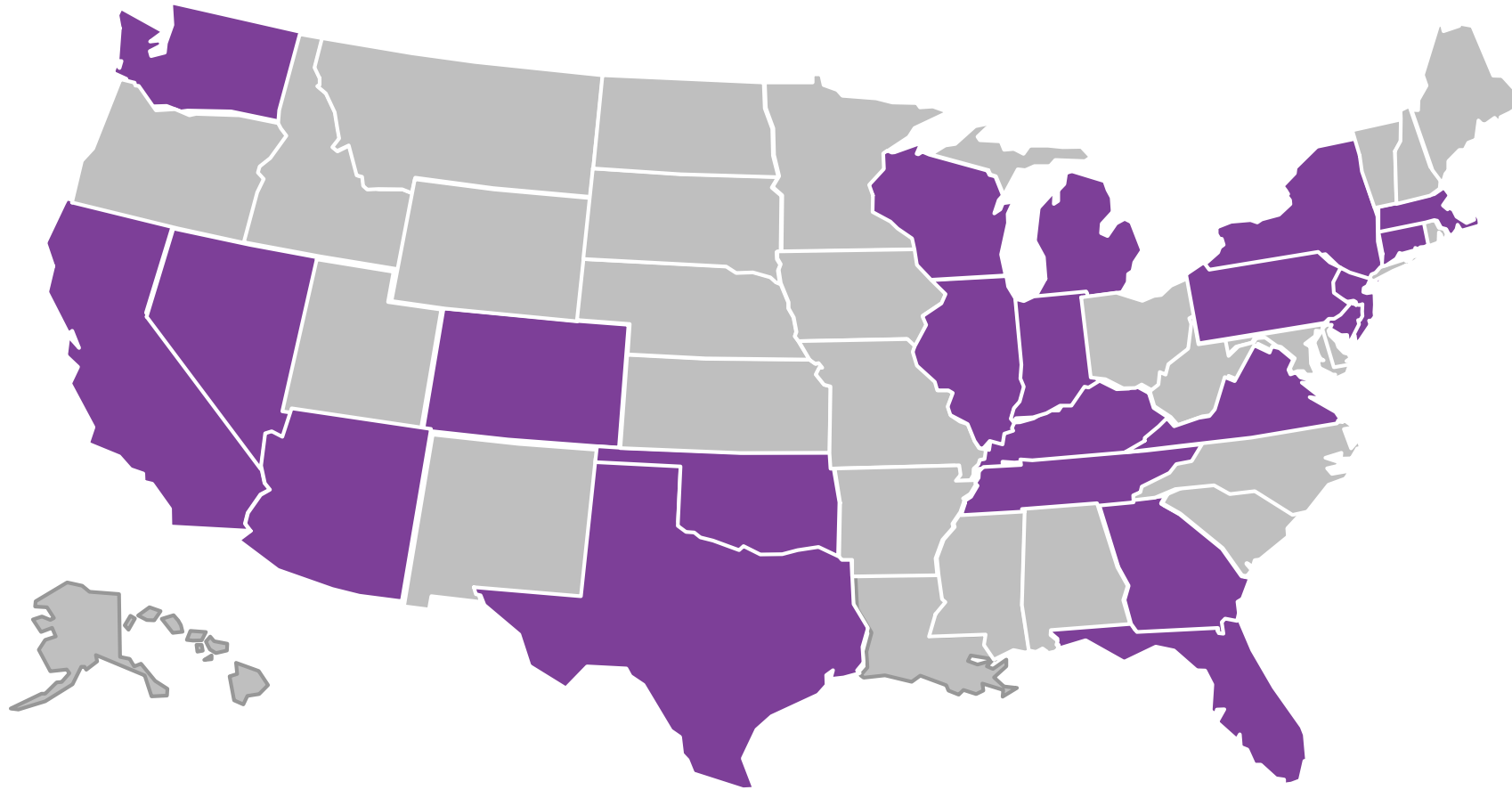
The member ID card will say “Aetna Premier Care Network Plus Multi-Tier.” (see example on slide 21)

To check your participation and tier status, visit our [provider referral directory](#). If a hospital or provider doesn't participate with us, it will not appear in the search results.

- **Tier 1** hospitals and providers will see “maximum savings” displayed.
- **Tier 2** hospitals and providers will see “standard savings”. They could see both “maximum savings” and “standard savings’ if both a hospital and doctors are included under the same tax ID. This is referred to as having a “mixed participation” status. This tier is our broad network of providers. It's covered at a reduced benefits level. Most doctors and hospitals not designated as Tier 1 but contracted with our broad network will be covered at the Tier 2 benefits level.
- **Tier 3** If a hospital or provider is out of the network, the system will display this: “We are unable to determine your participation status . . . Services rendered by providers that are not part of the patient's network are not covered.” A member might still be covered for out-of-network benefits.



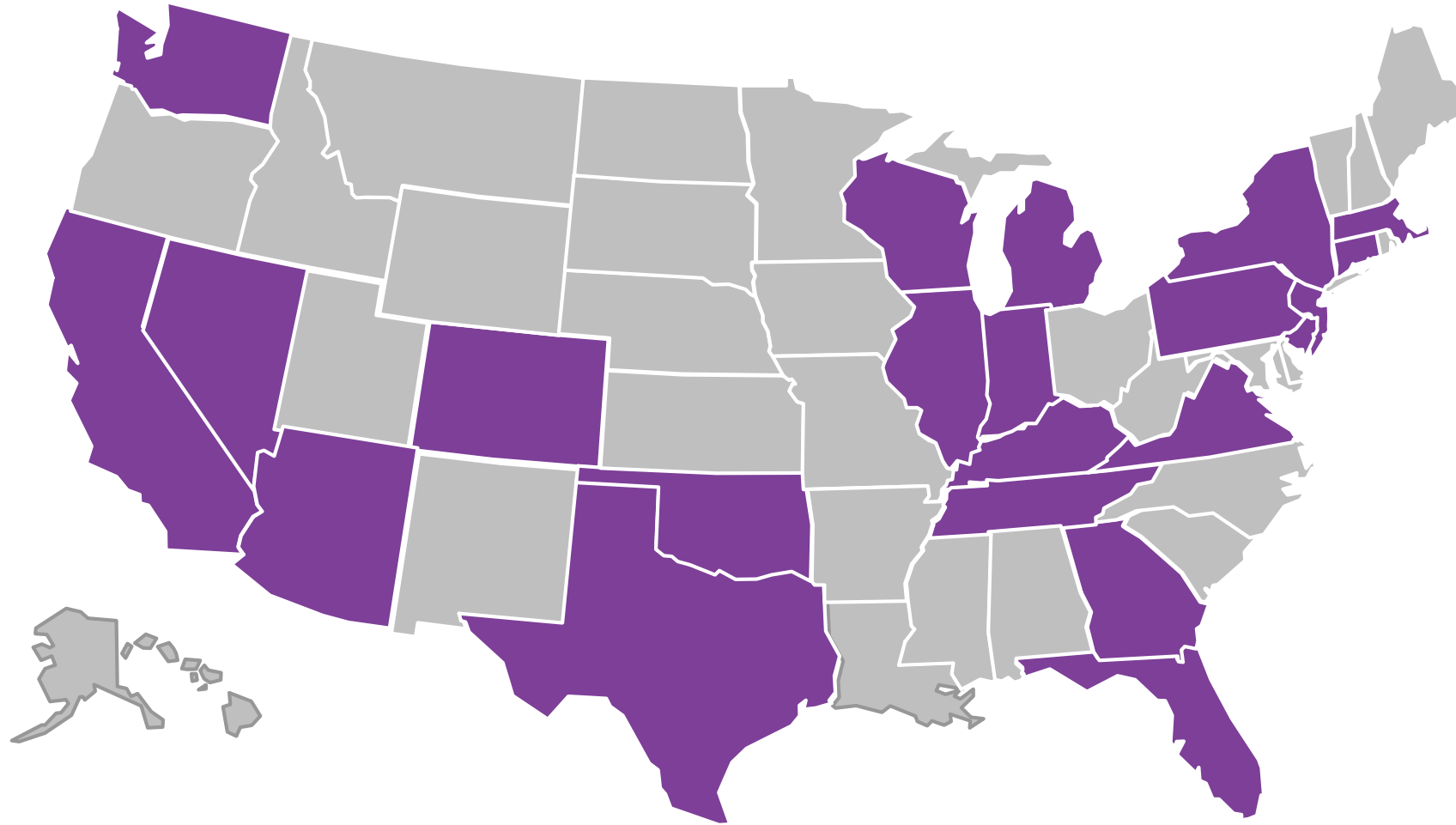
# 2022 Aetna Premier Care Network markets



■ Broad network: markets – 133

■ Performance networks:  
Hospital/specialist markets – 26  
Specialist only markets – 20

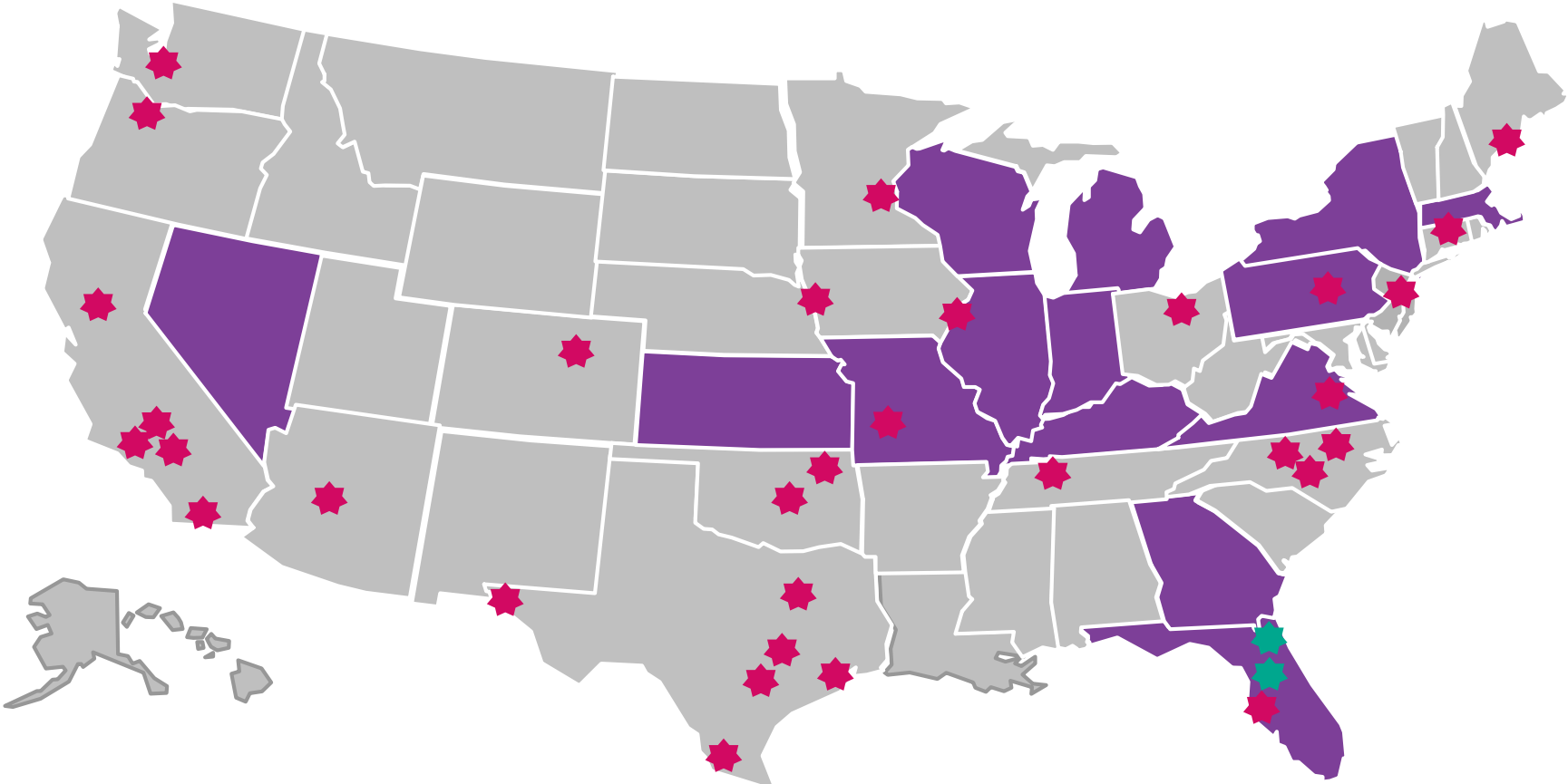
# 2023 Aetna Premier Care Network markets



■ Broad network markets

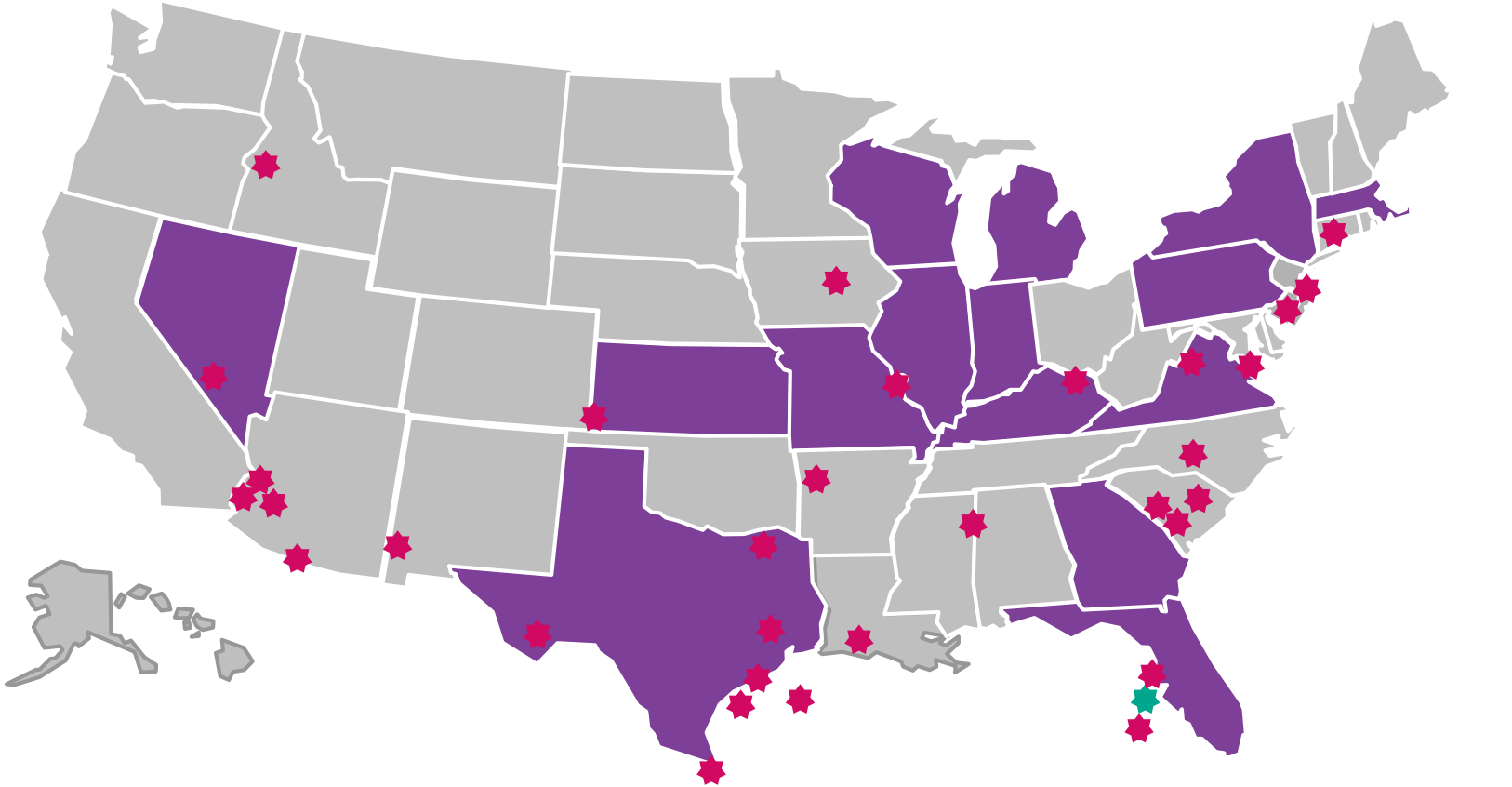
■ Performance networks:  
Hospital/specialist markets – 27  
Specialist only markets – 24

# 2022 Aetna Premier Care Network Plus concentric markets



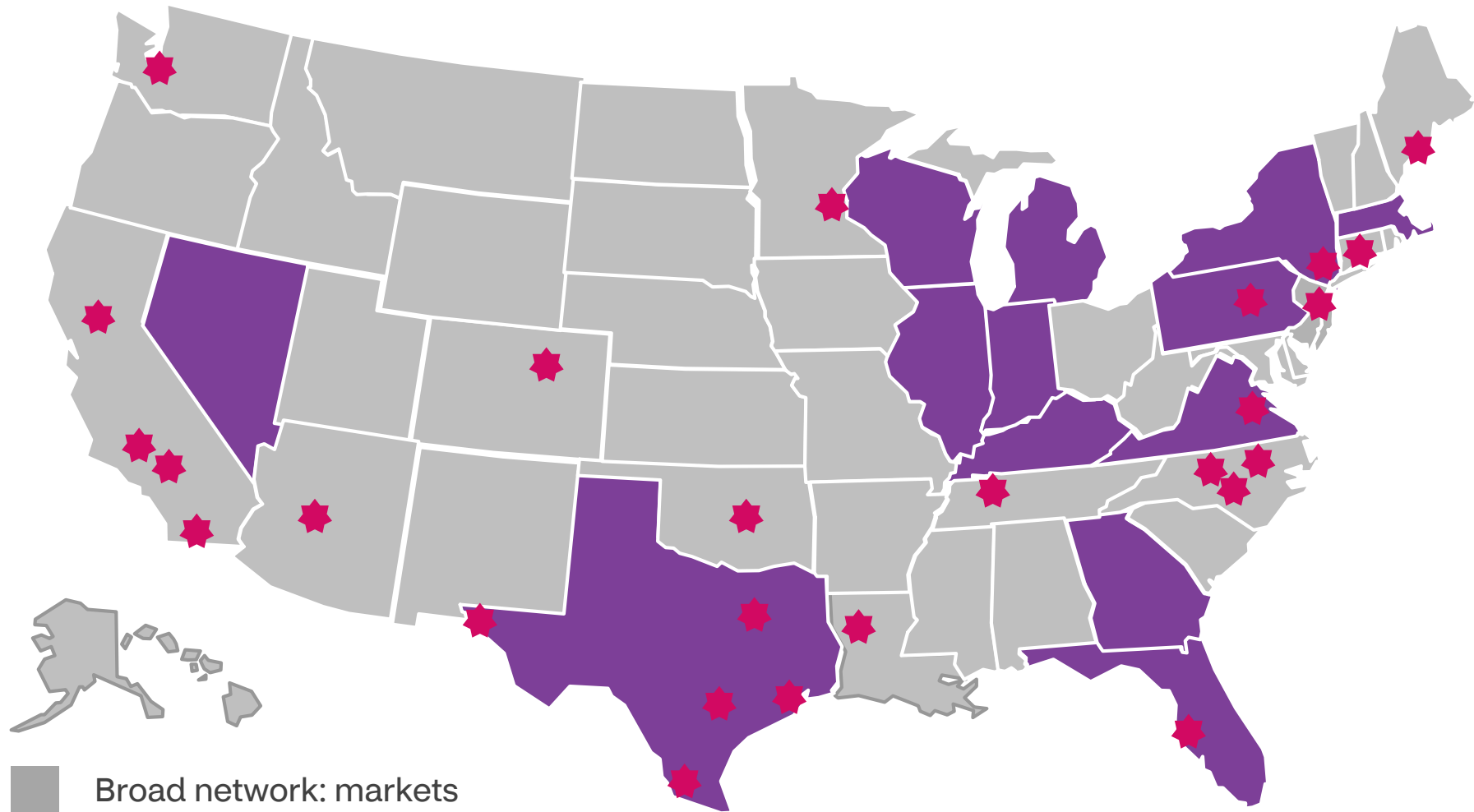
- Broad network: markets – 128
- Performance networks:  
Hospital/specialist markets – 20  
Specialist-only markets – 11
- ★ ACO/Joint venture plan – 33 markets
- ★ In-network only ACO – 2 markets

# 2023 Aetna Premier Care Network Plus concentric markets



- Broad network: markets
- Performance networks:  
Hospital/specialist markets – 18  
Specialist-only markets – 9
- ★ ACO/Joint venture plan – 35 markets
- ★ In-network only ACO – 1 market

# 2023 Aetna Premier Care Network Plus multi-tier markets



■ Broad network: markets  
■ Performance networks: Hospital/specialist markets – 14  
Specialist-only markets – 7

★ ACO/Joint venture plan – 30 markets

# Designated specialty types

Markets with 12 designated specialties:

- Cardiology
- Cardiothoracic surgery
- Gastroenterology
- General surgery
- OB/GYN
- Orthopedics
- Otolaryngology
- Neurology
- Neurosurgery
- Plastic surgery
- Urology
- Vascular surgery

Markets with 20 designated specialties include original 12 and the following 8 more:

- Allergy
- Dermatology
- Endocrinology
- Infectious disease
- Nephrology
- Ophthalmology
- Pulmonary
- Rheumatology

Please note that all other provider specialty types will automatically “default” into Aetna Premier Care Network or Aetna Premier Care Network Plus (non AWH/JV) as a preferred provider since they do not require designation.

# Specialist designation cycle and criteria

## Market type 1

Markets with 12 specialties based on the following criteria:

- Case volume
- Clinical performance
- Efficiency
- Network adequacy
- Use of Tier 1 hospitals 50 percent or more of the time
- Specialists with little (less than \$1,000) or no hospital spend

## Market type 2

Markets with providers in 12 specialties already designated via Method 1 and 8 additional specialties based on:

- Groups that use Tier 1 hospitals 50 percent or more of the time
- Groups that have little (less than \$1,000) or no hospital spend

## Market type 3

Markets that are not part of Method 1 and designate 20 provider specialties based on:

- Physicians who use Tier 1 hospitals 50 percent or more of the time
- Groups that have little (less than \$1,000) or no hospital spend

Note: No clinical quality or cost-efficiency data is used to make selections using this method.

- Market types 2 and 3 also require hospital tiering.
- Providers will be notified by email or letter before any change in designation status goes into effect.

# Tier 1 hospital designation criteria

Aetna Premier Care Network and Aetna Premier Care Network Plus may include separate tiers of network hospitals within markets. Network hospitals are evaluated on cost-efficiency of inpatient and outpatient cases. Cost-efficiency is then compared to the other hospitals in that market. To evaluate hospital inpatient and outpatient cost, the Aetna “medical case” information for both acute inpatient, inpatient non-acute and outpatient procedures are used.

Medical case claims that are billed by the facility are used to evaluate hospital cost-efficiency. We don't use place of service categories of emergency room or outpatient procedure to determine cost-efficiency for hospitals.

## **What is medical case?**

A medical case summarizes clinical events. It links or associates all of the claims submitted for a member during the same treatment episode. Our Informatics case logic defines clinical events based on contiguous claims for five places of service:

1. Inpatient acute
2. Inpatient non-acute
3. Emergency room
4. Outpatient procedure facility
5. Outpatient procedure non-facility

All specialist and ancillary claims that are within the starting and ending dates of service for these cases are attached to the case. In our analysis of hospital cost-efficiency measures, we only use claims billed for services by the facility.



# Aetna Premier Care Network reciprocity

For a member to receive maximum savings when seeking provider services outside of their home network (reciprocity), the following guidelines on provider selection apply:

<b>Aetna Premier Care Network (Non-ACO)</b>		
<b>Member type</b>	<b>Travel to any Aetna Premier Care Network performance network</b>	<b>Travel to broad network</b>
Aetna Premier Care Network performance network member	Aetna Premier Care Network performance network where available	Access to broad network
Broad network home member	Access to broad network	Access to broad network

# Aetna Premier Care Network Plus reciprocity

For a member to receive maximum savings when seeking provider services outside of their home network (reciprocity), the following guidelines on provider selection apply:

Aetna Premier Care Network Plus				
Member type	Travel outside home network area but within market*	Travel to Aetna Premier Care Network-ACO network	Travel to Aetna Premier Care Network performance network	Travel to broad network
Aetna Premier Care Network Plus performance network home member	Access to broad network	Access to broad network	Aetna Premier Care Network performance network where available	Access to broad network
Broad network home member	N/A	Access to broad network	Access to broad network	Access to broad network
Aetna Premier Care Network Plus-ACO network home member	ER care: in-network benefits/Non-ER care: out-of-network benefits	Access to broad network	Access to broad network	

Note: The network reciprocity rule for Aetna Premier Care Network Plus-ACO/JV member is standard AHP networks. If a plan sponsor opts out of any Aetna Premier Care Network Plus-ACO/JV market for an approved reason, the opt-out network is replaced with broad network.

\*This applies to markets where the ACO/JV network has a more narrow service area than the AHP network in the geography. For example, the New Jersey statewide ACO covers 19 counties but the AHP network covers 21 counties. When an Aetna Premier Care Network Plus member leaves the 19 counties and travels into the other 2 for non-ER care, out-of-network benefits are applied.

# Frequently asked questions and answers

## **Can a provider be “recommended” for designation in Aetna Premier Care Network and/or Aetna Premier Care Network Plus from an outside source?**

No. A provider can only participate in the Aetna Premier Care Network if all qualifications are met during the designation process.

## **How will I know if I have been designated as an Aetna Premier Care Network/Aetna Premier Care Network Plus participating provider?**

A designation cycle is completed once every two years. All providers selected for designation will get an email/letter. It will inform them of their new participating status. We will notify any provider who doesn't pass the designation requirements during a subsequent cycle.

## **Will all providers in a group be either designated or non-designated?**

Due to multi-specialty groups, it is possible for a group to have some designated and some non-designated providers. However, an attempt is made to keep groups whole when possible.

## **If providers are referring a member to another provider specialty, should the Aetna Premier Care Network/Aetna Premier Care Network Plus status of that provider be checked?**

Yes, the status of the provider the member is being referred to should be checked. This ensures they are also in network for Aetna Premier Care Network/Aetna Premier Care Network Plus.

## **If an Aetna® member calls and asks if the provider is participating with Aetna, should additional information be obtained before the provider answers?**

The provider should ask for more details on the type of Aetna plan. While a provider may be participating with our broad network, they may or may not participate in the Aetna Premier Care Network or Aetna Premier Care Network Plus performance network.

# ID Card Example: Aetna Premier Care Network members

The front side of the ID card features the Aetna logo in red at the top left and the text "Aetna Premier Care Network" to its right. Below the logo, there are two lines of header text: "PLAN SPONSOR NAME LINE ONE" and "PLAN SPONSOR NAME LINE TWO". Underneath, the group number "GRP: 111111-011-00101" is listed on the left, and "Choice POS II" is on the right. The word "ID" is printed in a large, bold font. A list of five names follows, each with a corresponding PCP (Primary Care Provider) listed as "ABC FAMILY PRACTICE". At the bottom left, "RX BIN# 610502" is printed, and at the bottom right, "PCP \$\$\$\$\$" and "SPC \$\$\$\$\$" are listed.

**aetna** Aetna Premier Care Network

PLAN SPONSOR NAME LINE ONE  
PLAN SPONSOR NAME LINE TWO

GRP: 111111-011-00101 Choice POS II

**ID**

NAME

01 JONATHAN Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
02 JOCELYN Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
03 JACKSON Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
04 GRAYSON Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
05 DANIELLE Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE

RX BIN# 610502 PCP \$\$\$\$\$  
SPC \$\$\$\$\$

The back side of the ID card contains the Aetna website "www.aetna.com" and the "PAYER NUMBER 60054 NNNN" at the top. A detailed disclaimer follows, advising members to use "www.AetnaNavigator.com" to choose providers and that referrals are not required, though some services may require pre-certification. It also provides a 24-hour helpline number (1-800-424-4047) for pre-approval or coverage questions. The disclaimer concludes by stating that the card does not guarantee coverage. In the center, the "Legal Entity Prints Here" information is provided, including "EL PASO" and "TX 79998-1106". At the bottom, a table lists contact numbers for "MEMBER SERVICES", "PROVIDERS CALL", and "RX MEMBER SERVICES".

www.aetna.com PAYER NUMBER 60054 NNNN

Use www.AetnaNavigator.com to choose providers in your plan. You do not have to choose a primary care doctor. Referrals are not required. However, some services may also require pre-certification. Without pre-approval, you may pay more or even full price. For mental health or substance abuse pre-approval or coverage questions, call 1-800-424-4047. See your plan documents for information on your plan requirements. In an emergency call 911 or go to the nearest emergency room. Note: This card does not guarantee coverage.

Legal Entity Prints Here  
P.O. BOX 981106  
EL PASO TX 79998-1106


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MEMBER SERVICES	1-855-856-9742
PROVIDERS CALL	1-888-632-3862
RX MEMBER SERVICES	1-888-792-3862

AT0110

View member eligibility and benefits through the Availity online tool by visiting [Availity.com/AetnaProviders](https://www.availity.com/AetnaProviders)

# ID Card Example: Aetna Premier Care Plus Network members



Aetna Premier Care  
Network Plus  
Sutter Health|Aetna

**NAP**

PLAN SPONSOR NAME LINE ONE  
PLAN SPONSOR NAME LINE TWO  
GRP: 111111-011-00101  
Issuer (80840) 9140860054

**Choice POS II**

**ID**

NAME

01 JONATHAN Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
02 JOCELYN Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
03 JACKSON Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
04 GRAYSON Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
05 DANIELLE Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE

RX BIN# 610502

PCP \$\$\$\$\$  
SPC \$\$\$\$\$

[www.aetna.com](http://www.aetna.com) PAYER NUMBER 60054 000

Use [www.AetnaNavigator.com](http://www.AetnaNavigator.com) to choose providers in your plan. You do not have to choose a primary care doctor. Referrals are not required. However, some services may also require precertification. Without pre-approval, you may pay more or even full price. For mental health or substance abuse pre-approval or coverage questions, call 1-800-424-4047. See your plan documents for information on your plan requirements. In an emergency call 911 or go to the nearest emergency room. Note: This card does not guarantee coverage.

Legal Entity Prints Here  
P.O. Box 981106  
El Paso, TX 79998-1106

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<b>MEMBER SERVICES</b>	<b>888-888-8888</b>
<b>RX MEMBER SERVICES</b>	<b>1-888-792-3862</b>

AT0110



Aetna Premier Care  
Network Plus  
Aetna Whole Health™  
Maine

**NAP**

PLAN SPONSOR NAME LINE ONE  
PLAN SPONSOR NAME LINE TWO  
GRP: 111111-011-00101  
Issuer (80840) 9140860054

**Choice POS II**

**ID**

NAME

01 JONATHAN Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
02 JOCELYN Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
03 JACKSON Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
04 GRAYSON Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
05 DANIELLE Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE

RX BIN# 610502

PCP /\$\$\$\$  
SPC /\$\$\$\$

[www.aetna.com](http://www.aetna.com) PAYER NUMBER 60054 NNNN

Use [www.AetnaNavigator.com](http://www.AetnaNavigator.com) to choose providers in your plan. You do not have to choose a primary care doctor. Referrals are not required. However, some services may also require precertification. Without pre-approval, you may pay more or even full price. For mental health or substance abuse pre-approval or coverage questions, call 1-800-424-4047. See your plan documents for information on your plan requirements. In an emergency call 911 or go to the nearest emergency room. Note: This card does not guarantee coverage.

Legal Entity Prints Here  
P.O. BOX 981106  
EL PASO TX 79998-1106


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<b>MEMBER SERVICES</b>	<b>1-888-888-8888</b>
<b>PROVIDERS CALL</b>	<b>1-888-632-3862</b>
<b>RX MEMBER SERVICES</b>	<b>1-888-792-3862</b>

AT000



## ID Card Example: Aetna Premier Care Network Plus Multi-Tier members



Aetna Premier Care  
Network Plus Multi-Tier

PLAN SPONSOR NAME LINE ONE  
PLAN SPONSOR NAME LINE TWO  
GRP: 111111-011-00101  
ISSUER (80840) 9140860054

Product Name Line One  
Product Name Line Two

**ID W1234 56789**

NAME  
MARIJANE Q SAMPLE-TESTCARD  
02 JONATHAN Q SAMPLE-TESTCARD  
03 CAITLIN Q SAMPLE-TESTCARD  
04 EMILY Q SAMPLE-TESTCARD  
05 KARA Q SAMPLE-TESTCARD

PCP: ABC PRACTICE ASSOCIATES  
PCP: ABC PRACTICE ASSOCIATES  
PCP: ABC PRACTICE ASSOCIATES  
PCP: ABC PRACTICE ASSOCIATES  
PCP: ABC PRACTICE ASSOCIATES


RX BIN# 610502

PCP: \$25  
SPC: \$40

[www.aetna.com](http://www.aetna.com) PAYER # 60054 NNNN  
Use [www.aetna.com](http://www.aetna.com) to choose providers in your plan  
Plan Specific Wording Here

Medical Legal Entity Prints Here  
EL PASO P.O. BOX 981106 TX 79998-1106

MEMBER SERVICES	1-888-888-8888
PROVIDERS CALL	1-888-888-8888
RX MEMBER SERVICES	1-888-888-8888



Aetna Premier Care  
Network Plus Multi-Tier  
Aetna Whole Health<sup>SM</sup>  
CHI Health  
Accountable Care Network

PLAN SPONSOR NAME LINE ONE  
PLAN SPONSOR NAME LINE TWO  
GRP: 111111-011-00101  
ISSUER (80840) 9140860054

Product Name Line One  
Product Name Line Two


**ID W1234 56789**

NAME  
01 JENNIFER Q SAMPLE-TESTCARD  
02 JONATHAN Q SAMPLE-TESTCARD  
03 CAITLIN Q SAMPLE-TESTCARD  
04 EMILY Q SAMPLE-TESTCARD  
05 KARA Q SAMPLE-TESTCARD

PCP: ABC PRACTICE ASSOCIATES  
PCP: ABC PRACTICE ASSOCIATES  
PCP: ABC PRACTICE ASSOCIATES  
PCP: ABC PRACTICE ASSOCIATES  
PCP: ABC PRACTICE ASSOCIATES

RX BIN# 610502

PCP: \$25  
SPC: \$40



[www.aetna.com](http://www.aetna.com) PAYER # 60054 NNNN  
Use [www.aetna.com](http://www.aetna.com) to choose providers in your plan  
Plan Specific Wording Here

Medical Legal Entity Prints Here  
EL PASO P.O. BOX 981106 TX 79998-1106

MEMBER SERVICES	1-888-888-8888
PROVIDERS CALL	1-888-888-8888
RX MEMBER SERVICES	1-888-888-8888

# Important resources

- The Aetna website can be used to check a provider's participating status for Aetna Premier Care Network and/or Aetna Premier Care Network Plus: **[Aetna.com/health-care-professionals.html](https://www.aetna.com/health-care-professionals.html)**
- The Aetna OfficeLink Updates™ newsletter includes valuable information on Aetna Premier Care Network and Aetna Premier Care Network Plus: **[Aetna.com/health-care-professionals/newsletters-news/office-link-updates.html](https://www.aetna.com/health-care-professionals/newsletters-news/office-link-updates.html)**
- Contact the Provider Service Center with any questions: **1-888-MD-AETNA (1-888-632-3862)**

