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News

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RESOURCE GUIDE FOR INFORMATION ON YOUR BENEFITS

In past years, Aetna has provided a Resource Guide For Your Employee Benefits. This guide was part of the annual enrollment kit and contained contacts from whom you could get information about your benefits. ARA also posted this Resource Guide on our website.

Aetna has not included this Resource Guide in the past few years. So, we felt it would be helpful to publish such a tool. With Aetna's guidance, the guide (*on page 2*) should prove very useful for you when seeking information about your various benefits.

AETNA PENSION BENEFITS

We have received a number of questions concerning the status of our pension plans and what, if any, changes may be made. To date, we have not received any information from CVSHealth on this issue. We assure you we are continuing to keep a sharp eye on all aspects of our benefits programs (Life Insurance, Health Insurance, Long Term Care, etc.) including the pension plan. In the event we do receive any information concerning changes to any of our retiree benefits, we will provide you with any details we may have and are authorized to disclose.



2020 Resource Guide

Telephone numbers and contact information

When you have questions or need more information, here are some of the resources available to you.

Resource	Description	Where to Contact
Retiree Service Center	If you have questions on benefits eligibility, plan designs, costs and billing	Call 1-888-972-3862 weekdays 8 am to 8 pm ET, Monday through Friday
Aetna retiree website	Log on when you need: <ul style="list-style-type: none"> •Benefits information •To view your current benefits statement •To view online billing statements 	Retireehealthaccess.net/CVS
Aetna Member Website	<ul style="list-style-type: none"> •Eligibility or claim status information •replacement print your ID card •Copies of claim forms •Access to tools that help you manage your health care 	www.aetna.com
Prescription Drugs	If you have questions on payments of RX Claims or denial of RX claims	Call the number on the back of your ID card
Dental	If you have questions on payments of dental claims or finding a preferred provider	Call the number on the back of your ID card
Pension	<ul style="list-style-type: none"> •For general pension information •Validate/change beneficiary •Payment information •Update personal information 	Call 1-800-238-6247 and select the menu option for pension to speak with an associate, 8 am to 8 pm ET, Monday through Friday
Pension	Online tool to access general benefit information	ybr.com/aetna
401(k)	<ul style="list-style-type: none"> •General Questions •Check account balance and investments •Process transactions •Change beneficiary 	Call 1-800-238-6247 and select the 401(k) menu option to speak with an associate, Monday through Friday from 8:30 a.m. to 9 p.m., ET (excluding stock market holidays)
401(k)	<ul style="list-style-type: none"> •24/7 access to manage your account. •Financial planning tools and services 	https://retirementplans.vanguard.com/ Note: if you are not registered, you will need the Plan # 092038 to register.

PRESCRIPTION DRUG PRIOR AUTHORIZATION PROCESS

We recently received a question from one of our members concerning prior authorization for prescription drugs. The question is paraphrased here:

“I would like ARA to take up an issue with Aetna/CVS. The issue is why seniors who have taken the same drug for ten or twenty years should have to go through the Prior Authorization process each year? My concern is that as we age our mental ability declines. It seems likely that some elderly people will not properly follow the drug prior authorization process and will lose access to a drug they have used successfully for many years. This could result in significant health problems.”

We posed this question to our contacts at Aetna and their response is shown here:

Prior Authorization is a patient safety program that ensures the right drug, dosage and medical necessity. We will not waive it nor alter it to allow for a longer review period.

We limit prior authorizations to no longer than the end of the current plan year to ensure that our authorizations meet current prescribing guidelines, which promotes patient safety. Additionally, limiting authorizations to the end of the current plan year ensures that, in the event of a formulary change, the guidelines for the current formulary are not followed. We review our criteria annually and update as needed. Therefore, authorizations that extend beyond the current plan year (or span multiple years) are not allowed. Not all drugs have the same length of time for their preauthorization. Some drugs require more frequent preauthorization than others (i.e. pre auth required each month, etc).

The emphasis in Aetna’s response is clearly about safety and making certain the proper drugs are administered based on current guidelines and drug formularies. While the annual process might appear tedious and perhaps unnecessary, we believe ensuring the safety of the drugs our members are taking outweighs the potential inconvenience caused by the annual process. The bottom line is that you should always consult with your provider before taking any prescription drugs.

As you communicate with a retiree, retiree group or a colleague, we encourage you to provide them with information and the benefits of joining ARA. Please refer any prospective members to our website at www.aetnaretirees.com for additional information and an application form. Further, you may encourage prospective members to contact any Board Member for additional information. If, however, a retiree or colleague does not wish to become an active member and would still like to hear what we are doing, please have them state “communications only” on the application. We will send them our communications.

CONTACT ARA!

We welcome your comments, questions, ideas and letters to the editor. See mail and website addresses on page 1.

Sharon Reed, Editor

Marilyn Wilson, Editor Emeritus