

Quick Guide HRA (Aetna)

The HRA plan allows you to decide who you see, what you spend, what services you receive and how you pay for those services. There are four main components to the Aetna HealthFund (HRA). The first is the health reimbursement account (HRA), which helps you defray the cost of eligible medical expenses each year. The HRA is funded in two ways: First, through Emory's annual contribution to the HRA for plan participants. Contribution amounts are: \$500 when you enroll in employee only coverage, \$1,000 when you enroll in employee + spouse/SSDP or family coverage. Secondly, you can earn up to an additional \$800* in incentives toward your HRA based on participation and completion of various health activities.

If you do not use all of your HRA funds in 2009, your balance can be rolled over to cover your deductible and other out-of-pocket expenses in 2010. The maximum allowed in your HRA is \$1,800 (employee only) or \$3,600 (employee + spouse/SSDP). **Deductible** Once you have exhausted the funds in your HRA, you must meet the deductible, which is your financial responsibility. **Co-Insurance** After you have met the deductible, the Aetna HealthFund (HRA) works like a traditional health plan by paying the majority of expenses with co-insurance. In-Network care is covered at 80% (you pay 20%), and Out-of-Network care is covered at 60% (you pay 40%). If you seek services from an Emory physician or facility, your care would be covered at 90% (you pay 10%). **Out-of-Pocket Maximum** If your expenses in the year reach the annual limit, the plan then pays 100% of additional eligible expenses for you and your family.

The tables below provide a brief outline of the AetnaHealthFund (HRA) plan reflecting a participant's responsibility. For more specific information about coverage or cost of a particular service, please contact Aetna directly or review the SPD for the plan.

PLAN	Aetna (HRA)	
	In Network	Out-Network
Deductibles		
Individual	\$1,800	\$2,500
Family	\$3,600	\$5,000
Emory HRA Contribution	\$500 per Adult \$1,000 per Employee and Spouse/SSDP	\$500 per Adult \$1,000 per Employee and Spouse/SSDP
Out-of-Pocket Maximum ¹		
Individual	\$3,000	\$6,000
Family Maximum	\$6,000	\$12,000
Aggregate	N/A	N/A
Physicians Office Visits ²	20% After Deductible	40% After Deductible
Specialists Visits	20% After Deductible	40% After Deductible
Lab and X-Rays		
Doctor's Office	20% After Deductible	40% After Deductible
Independent Lab	20% After Deductible	40% After Deductible
PET, CT, MRI	20% After Deductible	40% After Deductible
Emergency Room Visits ³	\$150 co-payment	\$150 co-payment
Hospitalizations		
Inpatient	20% After Deductible	40% After Deductible
Outpatient Facility and Physician Services	20% After Deductible	40% After Deductible
Outpatient Pre-Admission Testing Office Visit	20% After Deductible	40% After Deductible
Lifetime Maximums ⁴	\$2,000,000	\$2,000,000

PLAN	Aetna (HRA)	
	Monthly	Bi-Weekly
Your Contributions		
Employee Only	\$37.00	\$18.50
Employee/Child(ren)	\$107.00	\$53.50
Employee/Spouse/SSDP	\$137.00	\$68.50
Family	\$222.00	\$111.50

¹ Includes deductible and co-insurance

² Includes dermatologists, allergists, and OB/GYN

³ Co-payment waived if admitted to hospital

⁴ In-Network and Out-of-Network Maximums are combined

Disclaimer: Every attempt has been made to have the chart and information above accurately reflect the details of the plan. Should there be any errors, the terms and conditions of the Summary Plan Description prevails.