

Aetna International Ascentsm

For businesses on the rise Choose benefits that take you to the top

For groups of 2-10 employees



For additional information and a quote, contact: International Citizens Group, Inc. Joe Cronin, Group Sales info@internationalinsurance.com www.InternationalInsurance.com/groups

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Healthier employees. Healthier bottom line.

Let's reach the top together.

Like you, we're scaling new heights and pushing business boundaries every day.

We're an international health insurance leader with exceptional experience and expertise. Most importantly, we place your employees' health and wellness at the heart of everything we do.

Not only do we help to drive healthy outcomes for your employees, but we also build a compliant, health care plan that helps control your costs. This gives you the freedom to conquer your world.

We'll help you find the right plan for your organization. Then, we'll keep it running smoothly. Your dedicated account team will walk you through the details of the plan and provide you with member communications. They'll be available to resolve escalated claim issues and respond to questions you may have about billing, eligibility, enrollment and changes.

Here are a few of the advantages

- Simple plan administration and implementation, with annual renewal dates
- Compliance with fronting arrangements and local requirements
- Member access to our network of more than 1.1 million global providers
- Comprehensive member services available 24/7
- Convenient web and mobile tools for people on the go
- Access to the CARE team, a team of clinicians available to support members pre-trip, post-trip and anytime in between by helping get prescriptions filled, coordinate urgent medical care and more

There are six Aetna Ascent medical plan designs for you to choose from

Each plan includes

- Preferred Provider Organization (PPO) medical coverage
- Pharmacy
- Vision
- · Dental (optional) with orthodontia (optional)
- Basic term life & Accidental Death and personal loss insurance options (optional)
- Emergency assistance and evacuation
- Access to Red 24
- Health care counseling through our Informed Health Line®
- Mental health counseling and resources through our international Employee Assistance
- Program (EAP)

Global coverage that moves with your employees

Wherever your employees are based, we're there with them. You can count on us to keep our services and support within reach at all times

Web and mobile tools

ΤοοΙ	Description
Health Hub - secure member website	Your employees will have single sign-on access to important tools to help them manage their health — and health benefits.
	Find doctors and medical facilities anywhere in the world
	Submit and track their claims online
	Get answers to frequently asked questions
	View plan documents
Aetna Navigator	Employees traveling in the United States can take a shortcut to Aetna Navigator to:
	Review and manage their claims
	View covered benefits
	Access their digital Member ID Cards
	Maintain their electronic health history
	Locate participating pharmacies
	• Compare the cost and quality of area hospitals
	ullet Research the average price for hospital stays, medical procedures and prescriptions
Mobile Apps	No matter where your employees are, they will have access to health information and tools to help them make the best health decisions possible. Our mobile apps make this possible.
	International Mobile Assistant app
	• When outside the United States, members can use this app to:
	- Submit claims from their phone
	- View policy documents and forms
	- Search for a doctor, specialist or medical facility in our network
Aetna Mobile App	When inside the United States, members can use this app to:
	Search for a doctor, specialist or medical facility in our network
	View Member ID Card information
	• Present their digital Member ID Card to their doctor, specialist or medical facility
	View plan documents
Online Claims Submission	It's simple to submit a claim for services received through medical specialists and facilities outside our network, thanks to our online and mobile claim submission tools.
	 Paperless claim form: It is not necessary to print, scan or upload completed claim forms; members can complete them online
	 Auto-fill form fields: Information we may have on file (contact details, member ID number and policy numbers, banking information, anything previously entered by the member) is kept and filled in automatically to save time
	 Payment information storage: Reimbursement history and banking details can be stored for easy use in future claims submission
	Real-time data checks: Incorrect information is flagged as soon as it's entered

24/7 member services

Our Member Service Center is always available via toll-free phone or email

- Answer questions about benefit levels, coverage and claims in multiple languages
- · Locate health care services around the world
- Connect members with our Care Team for specific clinical concerns or medical emergency/evacuation services







24/7 member services

Our highly trained professional member service representatives can:

- Answer questions about benefit levels, coverage and claims in multiple languages
- · Locate health care services around the world
- Connect members with our Care and Response Excellence (CARE) team for specific clinical concerns or medical emergency/evacuation services

24/7 Clinical Support

Our people are the power behind everything we do and the reason for our success. They are some of the world's most caring and dedicated professionals. There's no better example than our Care and Response Excellence (CARE) team of specialized clinicians. They are available 24/7 to help members with:

- Navigating different health systems
- Pre-trip planning especially important for members who have chronic health conditions or are pregnant
- · Locating hospitals, doctors and specialists
- Coordinating routine and urgent medical care, evaluations and emergency evacuations
- Obtaining prescription medications and medical devices
- Requesting second opinions in complex cases







Emergency assistance services

No one likes to think about medical emergencies, but they do happen. With Aetna Ascent, your employees don't have to worry. If they have a medical emergency, we will help transport them to the closest facility best equipped to handle their specific needs. Our services include:

- Medical evacuation
- Air ambulance
- Emergency travel assistance
- Security assistance
- Repatriation of mortal remains

Direct settlement provider network

Outside the United States: Our global directsettlement network gives members access to more than 165,000 doctors and hospitals in more than 200 countries and territories. This network helps members save on out-of-pocket expenses. This means we pay the facility directly for any remaining covered expenses according to their plan benefits.

If a member wants to use a provider who is not in our network, we'll attempt to initiate a one-time direct settlement arrangement. We have a 97 percent success rate in setting up these one-time arrangements.

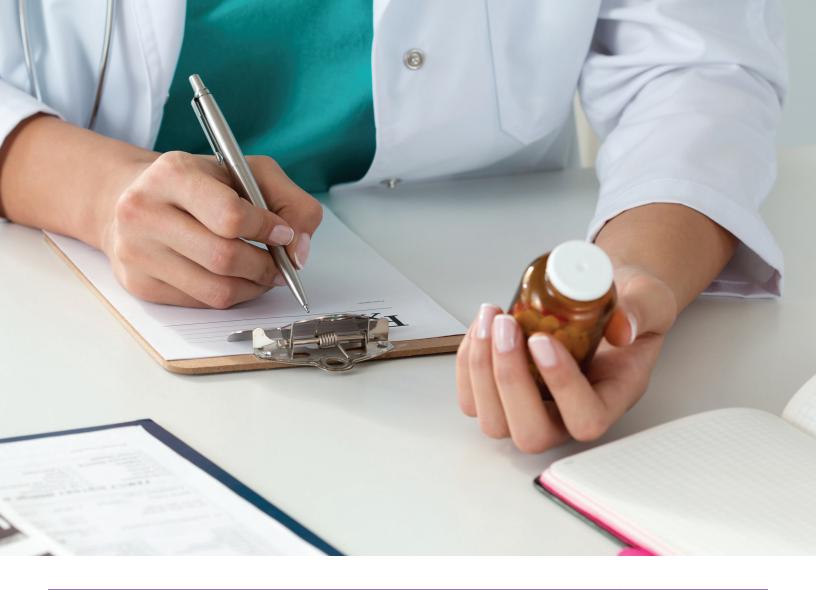
Inside the United States: Aetna's Open Choice PPO provider network gives members and their dependents access to an extensive network of 1 million providers. This network allows members the freedom to go directly to any recognized health care provider, including specialists, for covered expenses.

Ascent Medical Plan Design Overview

Richer, lower deductible plans

100% Plan	Outside U.S.	Network	Out-of-Network
Individual deductible	\$0	\$0	\$0
Family deductible	\$0	\$0	\$0
Individual coinsurance limit	\$500	\$500	\$1,000
Family coinsurance limit	\$1,000	\$1,000	\$2,000
Inpatient hospital deductible	\$0	\$0	30% after \$250 per confinement deductible
Routine physical exams	100%	100%	30%
Physician office visits	100%	100%	30%
Specialist office visits	100%	100%	30%
Emergency Room	100%	100%	100%
Non-Emergency Use of the Emergency Room	100%	100%	30%
Urgent Care	100%	100%	100%
Non-Urgent Use of Urgent Care Provider	100%	100%	30%
Prescription Drugs; Within U.S. – APM applies, generic/ brand; Outside the U.S. or within the U.S. but not using network pharmacy — subject to deductible but does not apply to coinsurance limits	100%	\$20/\$30/\$50	30%
Not apply to coinsurance limits	100%	100%	30%
Lifetime maximum	Unlimited	Unlimited	Unlimited
Other Health Services: IEAP, Emergency Assistance, Customized Care, Red24	Included	Included	Included

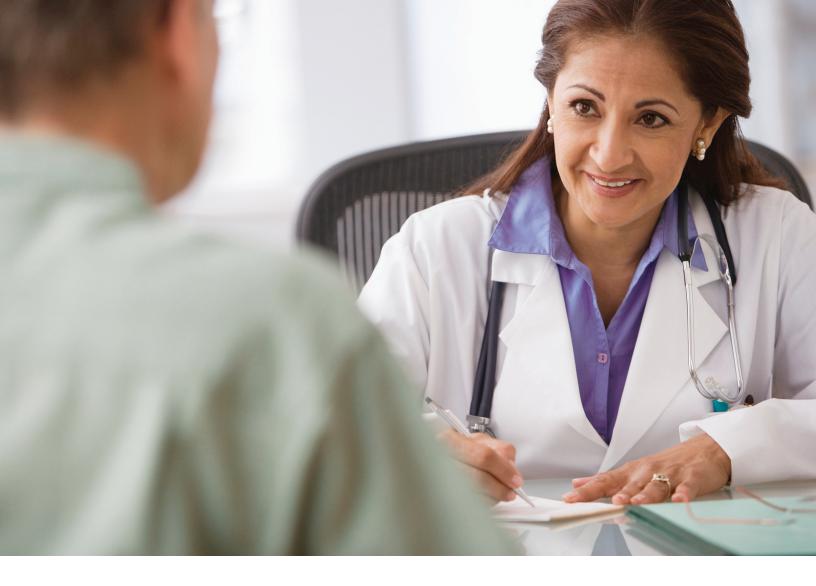
\$250 Plan	Outside U.S.	Network	Out-of-Network
Individual deductible	\$250	\$250	\$500
Family deductible	\$500	\$500	\$1,000
Individual coinsurance limit	\$500	\$500	\$2,000
Family coinsurance limit	\$1,000	\$1,000	\$4,000
Inpatient hospital deductible	10% after deductible	10% After deductible and \$250 per confinment deductible	30% After deductible and \$500 per confinment deductible
Routine physical exams	10% after deductible	100%	30% After deductible
Physician office visits	10% after deductible	100% after \$20 Copay	30% After deductible
Specialist office visits	10% after deductible	100% after \$20 Copay	30% After deductible
Emergency Room	10% after deductible	10% after \$25 copay	10% after \$25 copay
Non-Emergency Use of the Emergency Room	10% after deductible	10% after deductible	30% After deductible
Urgent Care	10% after deductible	10% after \$25 copay	10% after \$25 copay
Non-Urgent Use of Urgent Care Provider	10% after deductible	10% after deductible	30% After deductible
Prescription Drugs; Within U.S. – APM applies, generic/ brand; Outside the U.S. or within the U.S. but not using network pharmacy — subject to deductible but does not apply to coinsurance limits	10% after deductible	\$20/\$30/\$50	30% After deductible
Not apply to coinsurance limits	10% after deductible	100%	30% After deductible
Lifetime maximum	Unlimited	Unlimited	Unlimited
Other Health Services: IEAP, Emergency Assistance, Customized Care, Red24	Included	Included	Included



\$500 Plan	Outside U.S.	Network	Out-of-Network
Individual deductible	\$500	\$500	\$1,000
Family deductible	\$1,000	\$1,000	\$2,000
Individual coinsurance limit	\$3,500	\$3,500	\$8,500
Family coinsurance limit	\$7,000	\$7,000	\$17,000
Inpatient hospital deductible	10% after deductible	10% After deductible and \$250 per confinment deductible	30% After deductible and \$500 per confinment deductible
Routine physical exams	10% after deductible	100%	30% After deductible
Physician office visits	10% after deductible	100% after \$20 Copay	30% After deductible
Specialist office visits	10% after deductible	100% after \$20 Copay	30% After deductible
Emergency Room	10% after deductible	10% after \$25 copay	10% after \$25 copay
Non-Emergency Use of the Emergency Room	10% after deductible	10% after deductible	30% After deductible
Urgent Care	10% after deductible	10% after \$25 copay	10% after \$25 copay
Non-Urgent Use of Urgent Care Provider	10% after deductible	10% after deductible	30% After deductible
Prescription Drugs; Within U.S. – APM applies, generic/ brand; Outside the U.S. or within the U.S. but not using network pharmacy — subject to deductible but does not apply to coinsurance limits	10% after deductible	\$25/\$35/\$50	30% After deductible
Not apply to coinsurance limits	10% after deductible	100%	30% After deductible
Lifetime maximum	Unlimited	Unlimited	Unlimited
Other Health Services: IEAP, Emergency Assistance, Customized Care, Red24	Included	Included	Included

Ascent Medical Plan Design Overview Higher deductible plans

\$1,000 Plan	Outside U.S.	Network	Out-of-Network
Individual deductible	\$1,000	\$1,000	\$2,000
Family deductible	\$2,000	\$2,000	\$4,000
Individual coinsurance limit	\$2,000	\$2,000	\$6,000
Family coinsurance limit	\$4,000	\$4,000	\$12,000
Inpatient hospital deductible	10% after deductible	10% After deductible and \$250 per confinment deductible	30% After deductible and \$500 per confinment deductible
Routine physical exams	10% after deductible	100%	30% After deductible
Physician office visits	10% after deductible	100% after \$20 Copay	30% After deductible
Specialist office visits	10% after deductible	100% after \$40 Copay	30% After deductible
Emergency Room	10% after deductible	10% after \$75 copay	10% after \$75 copay
Non-Emergency Use of the Emergency Room	10% after deductible	10% after deductible	30% After deductible
Urgent Care	10% after deductible	10% after \$50 copay	10% after \$50 copay
Non-Urgent Use of Urgent Care Provider	10% after deductible	10% after deductible	30% After deductible
Prescription Drugs; Within U.S. – APM applies, generic/ brand; Outside the U.S. or within the U.S. but not using network pharmacy — subject to deductible but does not apply to coinsurance limits	10% after deductible	\$25/\$35/\$50	30% After deductible
Not apply to coinsurance limits	10% after deductible	100%	30% After deductible
Lifetime maximum	Unlimited	Unlimited	Unlimited
Other Health Services: IEAP, Emergency Assistance, Customized Care, Red24	Included	Included	Included
\$1,500 Plan	Outside U.S.	Network	Out-of-Network
Individual deductible	\$1,500	\$1,500	\$3,000
	\$1,500 \$3,000	\$1,500 \$3,000	\$3,000 \$6,000
Family deductible		. ,	,
Individual deductible Family deductible Individual coinsurance limit Family coinsurance limit	\$3,000	\$3,000	\$6,000
Family deductible Individual coinsurance limit Family coinsurance limit	\$3,000 \$3,500	\$3,000 \$3,500	\$6,000 \$6,000
Family deductible Individual coinsurance limit Family coinsurance limit Inpatient hospital deductible	\$3,000 \$3,500 \$7,000	\$3,000 \$3,500 \$7,000 20% After deductible and \$200 per confinment	\$6,000 \$6,000 \$12,000 40% After deductible and \$500 per confinment
Family deductible Individual coinsurance limit Family coinsurance limit Inpatient hospital deductible	\$3,000 \$3,500 \$7,000 20% after deductible	\$3,000 \$3,500 \$7,000 20% After deductible and \$200 per confinment deductible	\$6,000 \$6,000 \$12,000 40% After deductible and \$500 per confinment deductible
Family deductible Individual coinsurance limit Family coinsurance limit Inpatient hospital deductible Routine physical exams Physician office visits	\$3,000 \$3,500 \$7,000 20% after deductible 20% after deductible	\$3,000 \$3,500 \$7,000 20% After deductible and \$200 per confinment deductible 100%	 \$6,000 \$6,000 \$12,000 40% After deductible and \$500 per confinment deductible 40% After deductible
Family deductible Individual coinsurance limit Family coinsurance limit Inpatient hospital deductible Routine physical exams Physician office visits Specialist office visits	\$3,000 \$3,500 \$7,000 20% after deductible 20% after deductible 20% after deductible	\$3,000 \$3,500 \$7,000 20% After deductible and \$200 per confinment deductible 100% 100% after \$20 Copay	 \$6,000 \$6,000 \$12,000 40% After deductible and \$500 per confinment deductible 40% After deductible 40% After deductible
Family deductible Individual coinsurance limit Family coinsurance limit Inpatient hospital deductible Routine physical exams Physician office visits Specialist office visits Emergency Room	\$3,000 \$3,500 \$7,000 20% after deductible 20% after deductible 20% after deductible 20% after deductible	\$3,000 \$3,500 \$7,000 20% After deductible and \$200 per confinment deductible 100% 100% after \$20 Copay 100% after \$40 Copay	 \$6,000 \$6,000 \$12,000 40% After deductible and \$500 per confinment deductible 40% After deductible 40% After deductible 40% After deductible
Family deductible Individual coinsurance limit Family coinsurance limit Inpatient hospital deductible Routine physical exams Physician office visits Specialist office visits Emergency Room Non-Emergency Use of the Emergency Room	\$3,000 \$3,500 \$7,000 20% after deductible 20% after deductible 20% after deductible 20% after deductible 20% after deductible	\$3,000 \$3,500 \$7,000 20% After deductible and \$200 per confinment deductible 100% 100% after \$20 Copay 100% after \$40 Copay 20% after \$75 copay	 \$6,000 \$6,000 \$12,000 40% After deductible and \$500 per confinment deductible 40% After deductible 40% After deductible 40% After deductible 20% after \$75 copay
Family deductible Individual coinsurance limit Family coinsurance limit Inpatient hospital deductible Routine physical exams Physician office visits Specialist office visits Emergency Room Non-Emergency Use of the Emergency Room Urgent Care	\$3,000 \$3,500 \$7,000 20% after deductible 20% after deductible 20% after deductible 20% after deductible 20% after deductible 20% after deductible	\$3,000 \$3,500 \$7,000 20% After deductible and \$200 per confinment deductible 100% 100% after \$20 Copay 100% after \$20 Copay 20% after \$75 copay 20% after deductible	 \$6,000 \$6,000 \$12,000 40% After deductible and \$500 per confinment deductible 40% After deductible 40% After deductible 40% After deductible 20% after \$75 copay 40% After deductible
Family deductible Individual coinsurance limit Family coinsurance limit Inpatient hospital deductible Routine physical exams Physician office visits Specialist office visits Emergency Room Non-Emergency Use of the Emergency Room Urgent Care Non-Urgent Use of Urgent Care Provider Prescription Drugs; Within U.S. – APM applies, generic/ brand; Outside the U.S. or within the U.S. but not using network pharmacy — subject to deductible but does	\$3,000 \$3,500 \$7,000 20% after deductible 20% after deductible 20% after deductible 20% after deductible 20% after deductible 20% after deductible 20% after deductible	\$3,000 \$3,500 \$7,000 20% After deductible and \$200 per confinment deductible 100% 100% after \$20 Copay 100% after \$20 Copay 20% after \$75 copay 20% after \$75 copay 20% after \$50 copay	 \$6,000 \$6,000 \$12,000 40% After deductible and \$500 per confinment deductible 40% After deductible 40% After deductible 40% After deductible 20% after \$75 copay 40% After deductible 20% after \$50 copay
Family deductible Family deductible Individual coinsurance limit Family coinsurance limit Inpatient hospital deductible Routine physical exams Physician office visits Specialist office visits Emergency Room Non-Emergency Use of the Emergency Room Urgent Care Non-Urgent Use of Urgent Care Provider Prescription Drugs; Within U.S. – APM applies, generic/ brand; Outside the U.S. or within the U.S. but not using network pharmacy — subject to deductible but does not apply to coinsurance limits	\$3,000 \$3,500 \$7,000 20% after deductible 20% after deductible 20% after deductible 20% after deductible 20% after deductible 20% after deductible 20% after deductible	\$3,000 \$3,500 \$7,000 20% After deductible and \$200 per confinment deductible 100% 100% after \$20 Copay 100% after \$40 Copay 20% after \$75 copay 20% after deductible 20% after deductible	 \$6,000 \$6,000 \$12,000 40% After deductible and \$500 per confinment deductible 40% After deductible 40% After deductible 20% after deductible 20% after \$75 copay 40% After deductible 20% after \$50 copay 40% After deductible
Family deductible Individual coinsurance limit Family coinsurance limit Inpatient hospital deductible Routine physical exams Physician office visits	\$3,000 \$3,500 \$7,000 20% after deductible 20% after deductible	\$3,000 \$3,500 \$7,000 20% After deductible and \$200 per confinment deductible 100% 100% after \$20 Copay 100% after \$40 Copay 20% after \$40 Copay 20% after deductible 20% after deductible \$20% after deductible \$25/\$35/\$50	 \$6,000 \$6,000 \$12,000 40% After deductible and \$500 per confinment deductible 40% After deductible 40% After deductible 40% After deductible 20% after \$75 copay 40% After deductible 20% after \$50 copay 40% After deductible 40% After deductible 20% after deductible 40% After deductible



\$2,500 Plan	Outside U.S.	Network	Out-of-Network
Individual deductible	\$2,500	\$2,500	\$5,000
Family deductible	\$5,000	\$5,000	\$10,000
Individual coinsurance limit	\$5,000	\$5,000	\$10,000
Family coinsurance limit	\$10,000	\$10,000	\$20,000
Inpatient hospital deductible	20% after deductible	20% After deductible and \$250 per confinment deductible	50% After deductible and \$500 per confinment deductible
Routine physical exams	20% after deductible	100%	50% After deductible
Physician office visits	20% after deductible	100% after \$25 Copay	50% After deductible
Specialist office visits	20% after deductible	100% after \$50 Copay	50% After deductible
Emergency Room	20% after deductible	20% after \$100 copay	20% after \$100 copay
Non-Emergency Use of the Emergency Room	20% after deductible	20% after deductible	50% After deductible
Urgent Care	20% after deductible	20% after \$50 copay	20% after \$50 copay
Non-Urgent Use of Urgent Care Provider	20% after deductible	20% after deductible	50% After deductible
Prescription Drugs; Within U.S. – APM applies, generic/ brand; Outside the U.S. or within the U.S. but not using network pharmacy — subject to deductible but does not apply to coinsurance limits	20% after deductible	\$25/\$35/\$50	50% After deductible
Not apply to coinsurance limits	20% after deductible	100%	50% After deductible
Lifetime maximum	Unlimited	Unlimited	Unlimited
Other Health Services: IEAP, Emergency Assistance, Customized Care, Red24	Included	Included	Included

A world-renowned leader

A commitment to excellence

As part of Aetna, one of the largest health care benefits companies in the United States, Aetna International benefits from the heritage of more than 160 years of expertise. For more than 55 years, we have extended that strength and stability across the globe as one of the world's largest and most prominent providers of international health benefits and wellness.

Today, we support nearly 700,000 members worldwide. To do this, we employ over 1,100 dedicated professionals in 15 offices across Africa, Europe, the Middle East, Greater China, Southeast Asia and the United States.

As our customer, you'll benefit from our market knowledge and in-country expertise to help you manage and minimize costs and challenges — so you can achieve the results you want for your business and your employees.

Aetna[®] is a trademark of Aetna Inc. and is protected throughout the world by trademark registrations and treaties. Plans and programs are underwritten or administered by Aetna Insurance Company Limited or Aetna Life & Casualty (Bermuda) Ltd.

Aetna does not provide care or guarantee access to health services. Not all health services are covered. Health information programs provide general health information and are not a substitute for diagnosis or treatment by a health care professional. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Information is believed to be accurate as of the production date; however, it is subject to change. For more information, refer to www.InternationalInsurance.com/groups

Whenever coverage provided by any insurance policy is in violation of any U.S., UN or EU economic or trade sanctions, such coverage shall be null and void. For example, Aetna companies cannot pay for health care services provided in a country under sanction by the United States unless permitted under a written Office of Foreign Assets Control (OFAC) license. Learn more on the U.S. Treasury's website at: **www.treasury.gov/resource-center/sanctions**.

