

Travel Benefits



The Retiree Defined Benefit Medical Plan pays travel and ambulance costs within the contiguous limits of the United States, Alaska, and Hawaii. This includes:

- Transportation to the nearest hospital by professional ambulance
- Round-trip transportation, not exceeding the cost of coach class commercial air transportation, from the site of the illness or injury to the nearest professional treatment.
- ✘ Travel does not include reimbursement of airline miles to purchase tickets, the cost of lodging, food, or local ground transportation such as airport shuttles, cabs, or car rental.
- ✘ Travel benefits do not apply to the dental, vision, or audio plans.

Contact the Aetna Concierge at (855) 784-8646 for pre-certification before you or your dependent travel.

Travel Coverage*

<p>✓ Travel is covered for emergencies</p>	<p>Travel is covered if you have an emergency condition requiring immediate transfer to a hospital with special facilities for treating your condition. Precertification is waived if you are immediately transferred in a ground or air ambulance; you do not need to call Aetna before this occurs.</p> <p>An emergency condition is a recent, severe medical condition, including but not limited to severe pain, which would lead a prudent layperson possessing an average knowledge of medicine and health to believe their condition, sickness or injury is of such a nature that failure to get immediate medical care could result in:</p> <ul style="list-style-type: none"> • Placing the person's health in serious jeopardy. • Serious impairment to bodily function. • Serious dysfunction of a body part or organ. • In the case of a pregnant woman, serious injury to the health of the fetus.
<p>✓ Travel is covered for treatment not available locally</p>	<p>Travel is covered for you to receive treatment which is not available in the area you are currently located in. Treatment is defined as a service or procedure, including a new prescription, which is medically necessary to correct or alleviate a condition or specific symptoms of an illness or injury. It does not include any diagnostic procedures or follow-up visits to monitor a condition. Treatment must be received for travel to be covered. Benefits for travel to receive treatment which is not available locally are limited during each benefit year to:</p> <ul style="list-style-type: none"> • One visit and one follow-up visit for a condition requiring therapeutic treatment; • One visit for prenatal or postnatal maternity care and one visit for the actual maternity delivery; • One pre-surgical or post-surgical visit and one visit for the surgical procedure; • One visit for each allergic condition. <p>If you need transportation for a nonemergency condition which cannot be treated locally, you must contact the claims administrator prior to traveling. Failure to pre-certify travel will result in a denial of travel benefits.</p>

Travel Coverage*	
✓ Travel is covered for second surgical opinions	Travel is covered if you require a second surgical opinion which cannot be obtained where you are currently located. If you require transportation for a second surgical opinion which cannot be obtained locally, you must contact the claims administrator prior to traveling. Failure to pre-certify travel will result in a denial of travel benefits.
✓ Travel is covered for surgery in other locations if less expensive	Travel is covered if you have surgery which is provided less expensively in another location. If the actual cost of surgery, hospital room and board, and travel to another location for the surgery is less expensive than the recognized charge for the same expenses at the nearest location you could obtain the surgery, your travel costs may be paid. The amount of travel costs paid cannot exceed the difference between the cost of surgery and hospital room and board in the nearest location and those same expenses in the location you choose. Travel costs include round trip coach airfare or ground transportation if the most direct route exceeds 100 miles. Precertification from the claims administrator is not required for this situation, but is recommended.
✗ Travel is not covered for diagnostic purposes.	Travel is not covered for diagnostic purposes.
✗ Travel is not covered for co-travelers.	Travel is not covered for co-travelers. Travel charges for a physician or a registered nurse are covered when authorized by Aetna. If the patient is a child under 18 years of age, a parent or legal guardian's travel charges are allowed. Travel must be pre-certified to receive reimbursement under the Medical Plan.

Limitations*	
Limit on travel for transplant services	\$10,000 per transplant occurrence
Visit Limits Travel Benefits: Therapeutic treatments	One visit and one follow-up per benefit year
Visit Limits Travel Benefits: <ul style="list-style-type: none"> • Prenatal/postnatal maternity care • Maternity delivery • Presurgical or postsurgical • Surgical procedures 	One visit per benefit year

What you will need for claim submission after you travel:

- ✓ Medical Benefit Request Form (claim form)
- ✓ Precertification Acknowledgment Letter
- ✓ Boarding Passes and Passenger Receipts
- ✓ Proof of expense such as receipts or bank statements.
- ✓ Any other supporting documentation you would like to provide

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Travel claims can be submitted to: Aetna
P.O. Box 14079
Lexington, KY 40512-4079

*For complete benefit information, see the Retiree Health Plan Information Booklet Section 3.3.18 Travel.

Alaska Division of Retirement and Benefits

6th Floor, State Office Building | 333 Willoughby Ave. | P.O. Box 110203 | Juneau, AK 99811-0203

Member Services Contact Center

Hours: Monday-Thursday 8:30 a.m. - 4 p.m. | Friday 8:30 a.m. - 3 p.m.
Toll-Free: (800) 821-2251 | In Juneau: (907) 465-4460 | Fax: (907) 465-3086 | TDD: (907) 465-2805
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