



Aetna Senior Supplemental

Why Our Products Stand Out



æetna

User Friendly Website

aetnaseniorproducts.com

Electronic Application

- Monthly live walk through webinars offered with a sandbox available for practice
- The shopping cart feature makes cross selling quick and easy
- Save quotes to submit apps at a later time
- Sign up an individual or couples on the same app
- Email and security question options available for signature (client is not required to have an email address when using security question)
- Automated underwriting starts immediately upon submission

Track Your Business

- Online submission allows you to immediately track your business
- Receive an underwriting decision within 30 minutes for most submissions
- Enrollment tracker allows you to follow the application progress, view PDF copy of the application, and upload missing documents
- Reports available to track production for you and your downlines
- Turning on the alert functionality will notify you via email if the policy has been issued, declined, or if additional information is required

Mobile Quoting

- Access rates any time without logging into our portal
- Quotes all Senior Supplemental products
- Available in your Google Play or Apple app store
- Add to any Smartphone, Tablet, or Ipad device



Medicare Supplements

Aetna

- Existing entities: ACI, AHIC, AHLIC, CLI
- Household discount requires a secondary Aetna policy

Accendo, CVS Branded

- Household discount requires you to live with at least 1 adult (NOTE: IL, OH, OK, will require an additional policy)

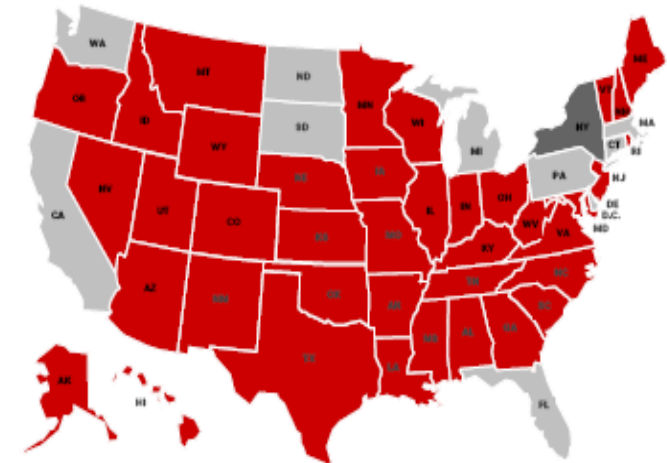
Product availability effective 07-17-20
Aetna Senior Supplemental Insurance

State	Medicare Supplement	Accendo Medicare Supplement	Final Expense	Accendo Final Expense	Dental, Vision and Hearing	Cancer and Heart Attack or Stroke Plan	Hospital Indemnity Plan	Recovery Care	Home Care Plan
AK	CLI 7% HHD		ACI	ACC	CU	CU	CU	CU	CU
AL	AHLIC 7% HHD	ACC 14% HHD	ACI ¹	ACC	CU	CU	CU	CU	CU
AR	AHLIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
AZ	CLI 7% HHD				CU	CU	CU	CU	CU
CA	AHIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
CO	AHIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
CT					CU	CU	CU	CU	CU
DC					CU	CU	CU	CU	CU
DE	AHIC 7% HHD	ACC 14% HHD	ACI ¹	ACC	CU	CU	CU	CU	CU
FL	CLI 7% HHD	ACC	ACI	ACC	CU ¹	CU	CU	CU	CU
GA	AHIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
HI					CU	CU	CU	CU	CU
IA	AHIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
ID	AHLIC		CU	ACC	CU	CU	CU	CU	CU
IL	AHIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
IN	AHLIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
KS	AHIC 7% HHD		ACI	ACC	CU	CU	CU	CU	CU
KY	AHLIC 7% HHD		ACI	ACC	CU	CU	CU	CU	CU
LA	AHIC 7% HHD		ACI	ACC	CU	CU	CU	CU	CU
MD	AHIC 7% HHD		ACC	ACC	CU	CU	CU	CU	CU
ME			ACI	ACC	CU	CU	CU	CU	CU
MI	CLI 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
MN	CU		ACC ²	ACC	CU	CU	CU	CU	CU
MO	AHLIC 7% HHD		ACC ²	ACC	CU ³	CU	CU	CU	CU
MS	CLI 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
MT	CLI 7% HHD		ACI	ACC	CU	CU	CU	CU	CU
NC	AHIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
ND	ACI		ACI	ACC	CU	CU	CU	CU	CU
NH	CLI 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
NJ	AHLIC 7% HHD	ACC 14% HHD	CU	ACC	CU ¹	CU			
NM	AHIC 7% HHD	ACC 14% HHD	CU	ACC	CU	CU	CU	CU	CU
NY	ACI	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
NV	CLI 7% HHD		ACI	ACC	CU	CU	CU	CU	CU
OH	CLI 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
OK	AHIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
OR	CLI 5% HHD		CU	ACC	CU	CU	CU	CU	CU
PA	AHIC 7% HHD	ACC 14% HHD	ACC ²	ACC	CU	CU	CU	CU	CU
RI	CU	ACC 14% HHD	CU	ACC	CU	CU	CU	CU	CU
SC	AHIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
SD	ACI		ACI	ACC	CU	CU	CU	CU	CU
TN	CLI 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
TX	AHIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
UT	AHLIC 7% HHD		ACI	ACC	CU	CU	CU	CU	CU
VA	CLI 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
VT	CU			ACC	CU	CU	CU	CU	CU
WA					CU	CU	CU	CU	CU
WI	AHLIC 7% HHD	ACC 14% HHD	ACI	ACC	CU	CU	CU	CU	CU
WV	ACI 7% HHD		ACI	ACC	CU	CU	CU	CU	CU
WY	ACI 5% HHD		ACI	ACC	CU	CU	CU	CU	CU

ACI = American Continental Insurance Company
AHIC = Aetna Health Insurance Company
AHLIC = Aetna Health and Life Insurance Company
CLI = Continental Life Insurance Company of Bismarck, Tennessee
ACC = Accendo Insurance Company
Part of the CVS Health family of companies and Aetna affiliate
Policy administered by Aetna Life Insurance Company and its affiliates
HHD = Household Discount
Policy fee = \$20 in all ACWHP/4-HU/CLU states; \$25 in all ACC states; except \$6 in MD and \$0 in AL, KY, VT, WY
¹ Level benefit only
² Level and graded benefits only
³ Dental benefit only
Cancer and Heart Attack or Stroke (CH) - CA, KS, NM, NY, UT
Continental Care (CU) - ID
Home Care (CU) - CO, KY
Hospital Indemnity (CU) - VT
Nursing Facility Care (CU) - NY, NM, PA

Plan availability as of July 17, 2020

- Available
- Pending state approval
- Not filed



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CVS Health.

Accendo Final Expense

- Simplified underwriting based off health questions and our declinable drug list
- No telephone interview required
- Super preferred rates offer an additional 10% off for clients with an approved underwritten Med Supp policy within the past 180 days

Additional Benefits Include:

- Accelerated Death Benefit Rider
- Child Term Insurance Rider

Plan benefits

Plan	Death benefits	Issue ages*	Min. benefit	Max. benefit**
Level	Full face value for policy issue date regardless if death is due to an accident or natural cause.	40 – 55	\$2,000	\$50,000
		56 – 65	\$2,000	\$40,000
	Accidental death Full benefit immediately	66 – 75	\$2,000	\$30,000
	Non-accidental death All policy years = Full benefit	76 – 89	\$2,000	\$25,000
Modified	Full face value immediately from policy issue date if death is due to an accident.	40 – 75	\$2,000	\$25,000
	Accidental death Full benefit immediately			
	Non-accidental death Policy years 1 and 2 = 110% of earned premium Policy year 3 = Full benefit			

*Age as of last birthday.

**Maximum benefit amount varies according to the age of the applicant at the time of policy issue.

Note: \$2,000 minimum benefit amount for all ages; annual policy fee \$40.

INCENTIVES

- * Monthly bonus offered for Med Supp & Ancillary products
- * Higher bonuses paid for electronic applications
- * GI applications do not bonus, but will count towards the 5 applications required for a payout
- * Bonus pays out with your commissions

Better together

Aetna Senior Supplemental Insurance
Bonus Programs – Med Supp and Ancillary

The more qualifying applications submitted and policies issued, the more bonus you earn!

Qualification period			
Application dates:	Effective dates:	Issued by:	Payout by:
July 1 – 31, 2020	July 1 – December 31, 2020	August 15, 2020	August 31, 2020
August 1 – 31, 2020	August 1 – December 31, 2020	September 15, 2020	September 30, 2020
September 1 – 30, 2020	September 1 – December 31, 2020	October 15, 2020	October 31, 2020

Qualifying product — Medicare Supplement

Submit qualifying applications and receive the following bonuses:

	Electronic apps	Paper apps
Underwritten	\$75 each	\$25 each
Open Enrollment	\$25 each	\$10 each

To receive a payout, you must submit a minimum of 5 signed applications (underwritten, guaranteed issue or open enrollment) and policies must be issued by dates indicated above.

Also includes new Medicare Supplement from Accendo Insurance Company part of the CVS Health® family of companies and Aetna affiliate

Qualifying products (ancillary) —

- Dental, Vision and Hearing
- Cancer and Heart Attack or Stroke/Plus
- Hospital Indemnity/Flex
- Recovery Care/Nursing Facility Care
- Home Care/Plus

Submit qualifying applications of any of the qualifying ancillary products and receive a **\$25 bonus** per application (for both electronic and paper). Policies must be issued by dates indicated above, with \$180 minimum annual premium.

Important bonus program details are on the next page.

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ANCILLARY PRODUCTS

- Benefits paid directly to you and can be used to cover any expenses
- Rates do not increase with age

DVH

(Dental, Vision and Hearing)
Ages: 18+

- Individual or Family plans
- Children 18 and under can be added to the policy, and can remain through age 26
- Bigger savings and less out of pocket expense when our network is utilized
- \$100 deductible per person covers all 3 benefits.

Plan features

- Guaranteed acceptance – there are no health questions
- Guaranteed renewable – as long as your premiums are paid on time
- Issue ages 0 – 89
- For individuals and families
- Choose \$1,000 or \$1,500 maximum benefit per policy year that covers dental, vision and hearing per person
- Plan deductible = \$100 per policy year per person
- Freedom to choose any provider or get even better pricing if you go in-network
- Benefits paid directly to you, or a provider that you designate
- Benefits paid in addition to any other health care coverage
- 30-day free look – return your policy for any reason within 30 days for a full refund of all premiums paid



Dental coverage



Covered immediately:

- After deductible, the plan pays: year 1 = 60%; year 2 = 70%; year 3+ = 80%
- Examinations and cleanings (twice/per year)
- Examination x-rays
- Fillings
- Non-surgical extractions – up to 4 teeth annually; excludes impacted wisdom teeth
- Diagnostic x-rays
- Diagnostic examinations
- Emergency palliative treatment

Covered after 12 months:

- After deductible, the plan pays: year 2+ = 60%
- Endodontics – includes root canals
- Periodontal surgery
- Bridges, crowns, and full/partial dentures

Vision coverage



Covered after 6 months:

- After deductible, the plan pays: year 1 = 60%; year 2 = 70%; year 3+ = 80%
- Pays up to \$200 during any 2 policy years
- Eye examinations
- Eyeglasses
- Contact lens

Hearing coverage



Covered after 12 months:

- After deductible, the plan pays: year 2 = 70%; year 3+ = 80%
- Pays up to \$500 during any one policy year
- Hearing examinations
- Hearing aids

CHAS PLUS

(Cancer Heart Attack and Stroke)
Ages: 18-89

- Cancer only or with a recurrence benefit
- Optional heart attack and stroke coverage that offers a 2nd payout
- Heart attack and stroke can be purchased individually
- Mix and match to fit your needs

Cancer and Heart Attack or Stroke Plus Insurance Plans

Your choice

A lump sum benefit is paid directly to you or someone you designate, regardless of any other health insurance coverage. You can choose a cancer plan or a heart attack/stroke plan or one of each, with different benefit amounts.

Cancer Insurance

If diagnosed with cancer or carcinoma in situ, this policy will pay 100% of the selected benefit amount – from \$5,000 to \$75,000 (in \$5,000 increments). You choose the amount that is right for you.

You can use this money to help pay medical costs or any other expenses. Only one cancer benefit will be paid for each insured person under this policy.

Cancer Insurance with Recurrence Benefit

If diagnosed with cancer or carcinoma in situ, this policy will pay 100% of the selected benefit amount – from \$5,000 to \$75,000 (in \$5,000 increments). And if you want to be covered in case the cancer returns, the recurrence benefit is payable as long as

medical advice or treatment has not been received for at least two years from the date of the last cancer diagnosis. The recurrence benefit will pay a percentage of the selected benefit amount (not to exceed an additional 100%).

Period without medical advice or treatment and recurrence	Percentage of benefit amount payable
Less than 2 years	0%
2 years to less than 5 years	25%
5 years to less than 7 years	50%
7 years to less than 9 years	75%
9 years or more	100%

HIIP Flex

(Hospital Indemnity Flex)

Ages: 18-89

- Multiple riders offered
- Pairs nicely with Med Advantage plans
- Payout options: Lump Sum, Daily, or a combination of both
- 60-day restoration period for the Hospital and Nursing Facility riders

Our solutions for protection – your choice for flexibility

The benefits and premiums for this plan will vary based on the plan options selected. For complete details of all provisions or benefits, please read your Outline of Coverage and policy carefully.

Plan benefits (select one)

☐ Option 1

Hospital Admission Indemnity

This benefit will pay a lump sum amount if you are confined in a hospital, including observation stays. The benefit is for one time per period of care and is available in \$250 units, up to a maximum of \$2,500.

☐ Option 2

Daily Hospital Indemnity

This benefit will pay a daily amount if you are confined in a hospital, including observation stays. The benefit will be paid for each day of confinement and is available in \$10 units, up to a daily maximum of \$700. The benefit period is for one time per period of care. Available benefit periods are 3-10 or 20 days with a lifetime maximum of 365 days. Observation stays for less than 24 consecutive hours will pay 50% of the daily hospital confinement indemnity benefit, one time per period of care. This benefit is not payable if you receive the daily hospital confinement indemnity benefit.

least three consecutive days, with the skilled care being received on a covered day. The benefit is available in \$10 units, up to a daily maximum of \$200. Choice of covered days includes: days 1-20, days 21-100, or days 1-100.

Doctor's Office Visit Indemnity

The benefit is available in \$10 units, up to a maximum of \$60 per visit and up to 20 visits per calendar year.

Outpatient Surgical Procedure Indemnity

The benefit is available in \$250 units, up to a maximum of \$1,500 per surgical procedure, one time per calendar year.

Hospital Emergency Room Visit or Ambulance Service

Services must be medically necessary and on an emergency basis. The benefit amount for this service is \$200 per visit/service, two times per calendar year.

Lump Sum Cancer Fixed Indemnity

This benefit will pay a lump sum amount for the first occurrence of medically diagnosed cancer. Choice of \$2,500; \$5,000; and \$10,000 benefit, once per lifetime. The rider terminates when the policy terminates or the one-time cancer benefit is paid.

Outpatient Rehabilitation

This benefit will pay for each day you receive one of the following therapies on an outpatient basis for treatment of a covered illness or covered injury: occupational, physical, or speech. The benefit is available for 15 or 30 visits per calendar year, \$50 per visit.

Benefit riders

Daily Skilled Nursing Facility Indemnity

Skilled care services are services that can only be provided in a nursing facility, on a daily basis, and ordered by a doctor. Admission to the nursing facility must immediately follow a hospital confinement (including observation stays) of at

HOME CARE PLUS

Ages: 50-89

- Optional riders: Daily Hospital, Ambulance/ER, Lump sum Cancer
- Can be used immediately before or after our Recovery Care plan
- Paid in addition to any other health care coverage, including Medicare

Base plan benefits

Home Care Indemnity*

The benefit is available:

- up to \$1,200 weekly maximum
- with choice of covered weeks: 13, 26, 39, or 52 weeks
- with a lifetime maximum equal to twice the number of covered weeks
- with waiting period: 0 or 20 days
- issue ages 50-89 (age at last birthday)

This coverage will pay a weekly benefit for in-home care by a home care practitioner or a qualified staff member of a licensed home health care agency. Home care services must be medically necessary. Three practitioner visits per week are required.

Daily Hospital Indemnity*

The benefit is available:

- up to \$300 daily maximum (for each day of confinement)
- with 20 days per period of care
- with a lifetime maximum of 365 days
- issue ages 50-89 (age at last birthday)

This coverage will pay a daily hospital benefit if you are confined in a hospital, **including observation stays in a hospital.**

*At least one unit (\$10 per day) of Daily Hospital Indemnity must be purchased with the Home Care Indemnity benefit.

RECOVERY CARE

Ages: 50-89

- Optional riders: Daily Hospital, Home Care
- Coverage will pay a daily benefit up to \$300 for confinement in a nursing or assisted living facility
- Your choice of covered days: 90, 180, 270, or 360

An unexpected accident or illness	Medicare coverage*	Recovery Care coverage
You are confined to a nursing facility and cannot perform two or more ADLs or you have a cognitive impairment.	Medicare pays the first 20 days of skilled care only if you are admitted as an inpatient for at least three days. It will not pay for intermediate or custodial nursing care.	The Daily Nursing Facility coverage will pay benefits for all levels of nursing facility care – skilled, intermediate, and custodial care.
You are confined to an assisted living facility and cannot perform two or more ADLs or you have a cognitive impairment.	Medicare does not pay for any costs or services.	The Daily Nursing Facility coverage will pay benefits for services in an assisted living facility.
You need home care services and cannot perform two or more ADLs or you have a cognitive impairment.	Medicare pays for eligible home care services like intermittent skilled nursing with doctor's orders. It will not pay for 24 hours/day care at home.	The optional Home Care rider will pay a weekly benefit for home care.