

Health screening benefit



Aetna Supplemental Health Plans

Get cash, fast

Your accident plan pays you **\$75** for a covered preventive health screening, once during the plan year.*

It's fast and easy

To file a claim, download the **My Aetna Supplemental** app or scan the QR code to visit **MyAetnaSupplemental.com**. Use your personal email address so you continue to receive valuable claim reminders, even if you leave your company.



Covered preventive screenings

- Biopsies for cancer
- Blood chemistry panel
- Bone marrow screening
- Bone mass density
- Breast sonogram
- Cancer antigen 125
- Cancer antigen 15-3
- Carotid doppler ultrasound
- Chest X-ray
- Carcinoembryonic antigen blood test for colon cancer
- Clinical testicular exam
- Colonoscopy
- Complete blood count
- COVID-19 testing
- Cytologic screening
- Dental exam
- Digital rectal exam
- Doppler screening for cancer
- Doppler screening for peripheral vascular disease
- Echocardiogram
- Electrocardiogram
- Electroencephalogram
- Endoscopy
- Eye exam
- Fasting blood glucose
- Fasting plasma glucose
- Flexible sigmoidoscopy
- Hearing test
- Hemoccult stool analysis
- Hemoglobin A1C
- Human papillomavirus vaccination (HPV)
- Immunizations
- Lipoprotein profile
- Mammography
- Oral cancer screening
- Pap smear
- Prostate-specific antigen (PSA)
- Routine health check-up
- Serum protein electrophoresis (blood test for myeloma)
- Skin cancer biopsy
- Skin cancer screening
- Skin exam
- Stress test on bicycle or treadmill
- Smoking cessation program completion
- Sexually transmitted infections
- Thermography
- ThinPrep pap test
- Two-hour post-load plasma glucose test
- Ultrasound for cancer and abdominal aortic aneurysms
- Virtual colonoscopy

*FOR HEALTH SCREENING BENEFIT: See your plan summary for details including plan exclusions and limitations.

Policies and plans are insured and/or administered by Aetna Life Insurance Company or its affiliates (Aetna). Refer to **Aetna.com** for more information about Aetna® plans.



**Alvarado Independent
School District**

Aetna Federal ACA 1557 Non- Discrimination Notice

Discrimination is Against the Law

Aetna Inc. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (consistent with 45 CFR § 92.101(a)(2)). Aetna Inc. does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex. Aetna Inc.:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language assistance services to people whose primary language is not English, which may include:
 - Qualified interpreters
 - Information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, call **1-800-872-3862 (TTY: 711)**.

If you believe that Aetna Inc. has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Civil Rights Coordinator

Attn: 1557 Coordinator , CVS Pharmacy, Inc., 1 CVS Drive, MC 2332, Woonsocket, RI 02895

Phone: **1-800-648-7817, TTY: 711** | Email: **CRCoordinator@aetna.com**

You can file a grievance in person, by mail, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at **<http://www.hhs.gov/ocr/office/file/index.html>**. This notice is available at Aetna Inc.'s website: **<https://www.aetna.com/>**

TTY: 711

To access language services at no cost to you, call 1-888-772-9682.

Para acceder a los servicios de idiomas sin costo, llame al 1-888-772-9682. (Spanish)

如欲使用免費語言服務，請致電 1-888-772-9682。 (Chinese)

Afin d'accéder aux services langagiers sans frais, composez le 1-888-772-9682. (French)

Para ma-access ang mga serbisyo sa wika nang wala kayong babayaran, tumawag sa 1-888-772-9682. (Tagalog)

Um auf für Sie kostenlose Sprachdienstleistungen zuzugreifen, rufen Sie 1-888-772-9682 an. (German)

للحصول على الخدمات اللغوية دون أي تكلفة، الرجاء الاتصال على الرقم 1-888-772-9682. (Arabic)

Pou jwenn sèvis lang gratis, rele 1-888-772-9682. (French Creole-Haitian)

Per accedere ai servizi linguistici, senza alcun costo per lei, chiami il numero 1-888-772-9682. (Italian)

言語サービスを無料でご利用いただくには、1-888-772-9682 までお電話ください。 (Japanese)

무료 언어 서비스를 이용하려면 1-888-772-9682 번으로 전화해 주십시오. (Korean)

برای دسترسی به خدمات زبان به طور رایگان، با شماره 1-888-772-9682 تماس بگیرید. (Persian-Farsi)

Aby uzyskać dostęp do bezpłatnych usług językowych proszę zadzwonić 1-888-772-9682. (Polish)

Para acessar os serviços de idiomas sem custo para você, ligue para 1-888-772-9682. (Portuguese)

Для того чтобы бесплатно получить помощь переводчика, позвоните по телефону 1-888-772-9682. (Russian)

Nếu quý vị muốn sử dụng miễn phí các dịch vụ ngôn ngữ, hãy gọi tới số 1-888-772-9682. (Vietnamese)
