Attention Aetna Health Plan Members:
NEW 30% Courtesy Discount for Out-of-Network Services

We are concerned about our patients who rely on us for care. To soften the impact on our Aetna health plan patients, Kelsey-Seybold will provide a 30% courtesy discount to patients who wish to continue to access our services.

We’ve listed a number of examples (below) to demonstrate how the 30% courtesy discount may apply to an Aetna patient who wishes to continue care at Kelsey-Seybold Clinic. Patients are responsible for verifying their plan type, status on deductible, and availability of out-of-network benefits. The final amount owed is subject to whether any applicable annual deductibles have been met (for those patients in plans offering deductibles and out-of-network benefits). For most covered services, plans typically pay for covered benefits after the annual deductible has been met.

FOR OUR PATIENTS PARTICIPATING IN AETNA OPEN ACCESS MANAGED CHOICE; AETNA HMO; AND AETNA CHOICE POS.

Effective December 12, 2011 a 30% courtesy discount will automatically be applied to charges for patients who have Aetna out-of-network plan coverage. This situation applies to patients who have coverage via Aetna products in which Kelsey-Seybold is currently non-participating, including:

- Aetna Open Access Managed Choice
- Aetna HMO (NOTE: This plan does not feature out-of-network coverage)
- Aetna Choice POS

Patient Scenario 1 (example):
Our patient is in Aetna Open Access Managed Choice or Aetna Choice Point of Service and:
- Has met the deductible for the year
- Has applicable out-of-network benefits coverage
- Receives a 30% discount from Kelsey-Seybold on or after December 12, 2011.

Steps

Step 1: The Service
The patient schedules a medical appointment for service at Kelsey-Seybold Clinic. The Kelsey-Seybold cost before discount is applied is $100.00.

Step 2: Apply the 30% courtesy discount
The 30% discount reduces the $100.00 cost to $70.00.
Step 3: Subtract the amount paid by Aetna from the amount shown in Step 2

In this example, our patient has out-of-network benefits, which pay an amount for the service. Each patient’s situation will differ based on their specific benefit plan. Our patients can contact their health plan to confirm the availability and level of out-of-network benefits.

Cost after 30% courtesy discount: $70.00 to patient
Minus the plan’s paid amount for the service: $50.00
Cost after discount and out-of-network benefit: $20.00

Step 4: Determine patient responsibility

Our patient is responsible for paying $20.00.

### Patient Scenario 2 (example):

Our patient is in Aetna HMO health plan and:
- Has no out-of-network benefits or other benefits coverage
- Receives a 30% discount from Kelsey-Seybold on or after December 12, 2011.

Step 1: The Service

The patient schedules an appointment for service. The Kelsey-Seybold cost before discount is applied: $100.00.

Step 2: Apply the 30% courtesy discount

The 30% discount reduces the $100.00 cost to $70.00.

<table>
<thead>
<tr>
<th>Original cost</th>
<th>$100.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minus 30% discount</td>
<td>-$30.00</td>
</tr>
<tr>
<td>Fee after 30% discount</td>
<td>$70.00</td>
</tr>
</tbody>
</table>

Step 3: Confirm any applicable coverage from Aetna

In this example, our patient does not have any out-of-network benefits. No additional coverage is available to pay for the cost of care.

Step 4: Determine patient responsibility

Our patient is responsible for paying $70.00.
FOR OUR PATIENTS PARTICIPATING IN ALL OTHER AETNA HEALTH PLAN PRODUCTS

**Effective April 21, 2012,** a 30% courtesy discount will automatically be applied to charges for patients who have Aetna health plans. This discount impacts the estimated amount that will be collected at the time of service.

This includes the following Aetna health plans:

- Choice POS II
- Quality Point-of-Service QPOS
- Open Access HMO
- Managed Choice POS
- Open Access Elect Choice
- Elect Choice EPO
- Open Choice PPO
- National Advantage Program
- Select
- Open Access Select

**Patient Scenario 3 (example):**
Our patient is in an Aetna health plan and will not be able to access in-network benefits for care at Kelsey-Seybold effective April 21, 2012. Our patient:
- Has not met the deductible for the year
- Has out-of-network benefits coverage, which pays an allowed amount for services
- Receives a 30% discount from Kelsey-Seybold on or after April 21, 2012.

Because our patient has not yet met the annual deductible, she will pay 70% of the cost of the visit. Out-of-network benefits paying an allowed amount for services will become available after the deductible is met. All out-of-pocket visit costs will be “counted” toward the patient’s annual deductible.

**Step 1: The Service**
The patient schedules an appointment for service. The Kelsey-Seybold fee before the discount is applied: $100.00.

**Step 2: Apply the 30% discount**
The 30% discount reduces the $100.00 cost to $70.00

| Original cost | $100.00 |
| Minus 30% discount | -$30.00 |
| Cost after 30% discount | $70.00 |
**Step 3: Apply any available out-of-network benefits**

No additional benefits are available, since the annual deductible has not yet been met.

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discounted cost of</td>
<td>$70.00 to patient</td>
</tr>
<tr>
<td>No benefits available yet</td>
<td>$0.00</td>
</tr>
<tr>
<td>Discounted cost from Kelsey-Seybold</td>
<td>$70.00</td>
</tr>
</tbody>
</table>

**Step 4 Determine patient responsibility**

The patient is responsible for paying $70.00.

*Please note* that any over-collected amount will be promptly refunded by the business office to our patients after Aetna processes the claim.

If our patient’s health plan **does not have out-of-network coverage**, then he will be responsible for an estimated 70% of the service charge at the time of the visit. *(Please see Patient Scenario 2 for more details.)*

Deductibles must be met for Aetna to provide out-of-network benefits. If deductibles have not been met, Kelsey-Seybold will request that 70% be collected from the patient at the time services are rendered. This takes into account the 30% courtesy discount.
Q. When will Kelsey-Seybold begin applying the 30% courtesy discount?
A. The discount will apply to services beginning December 12, 2011 for already termed products.
   - Aetna Open Access Managed Choice
   - Aetna HMO
   - Aetna Choice POS

The discount will apply to services beginning April 21, 2012 for the following Aetna health plans.

   - Choice POS II
   - Quality Point-of-Service QPOS
   - Open Access HMO
   - Managed Choice POS
   - Open Access Elect Choice
   - Elect Choice EPO
   - Open Choice PPO
   - National Advantage Program
   - Select
   - Open Access Select

Q. What else does the discount apply to? Lab fees and other diagnostic charges?
A. The 30% courtesy discount will apply to all charges with the exception of cosmetic services and concierge services such as travel medicine.

Q. Will any preventive screenings be covered at 100%? What about at a discount?
A. The 30% courtesy discount will be applied to preventive services. Please check with your plan to determine out-of-network coverage for preventive services. Coverage for preventive services may differ from other covered services.

Q. Can I be billed and pay at a later time or make payments?
A. Payment is due at the time services are rendered. Kelsey-Seybold accepts cash, personal checks, and major credit cards including VISA, MasterCard, Discover, and American Express.

Q. Will Kelsey-Seybold discount services provided prior to 12/12/2011?
A. No, services provided prior to December 12, 2012 are not eligible for the 30% courtesy discount.
Q. How long will Kelsey-Seybold continue to offer this discount?
A. The 30% courtesy discount will be available to Kelsey-Seybold patients through 12/31/2012.

Q. Why is Kelsey-Seybold offering a 30% discount to patients covered by Aetna Health Plans?
A. Kelsey-Seybold is concerned about our patients, who rely on us for care. The discount softens the impact on our Aetna health plan patients.