



Repurchase deadline for non-grandfathered members extended to November 27

As we continue to work through President Obama's "Keep what you have" announcement and our ability to implement the necessary changes, we wanted to remind you of our repurchase strategy that we have in place for your customers.

The **deadline** for non-grandfathered members with January to July effective dates to repurchase their current plans **has been extended** from November 25 to **November 27 11:59 p.m. ET**.

This new deadline is the last date that a non-grandfathered member with January to July effective date can take action to repurchase their current plan. To repurchase, these members should follow the instructions on the letter they received. As a reminder, grandfathered members do not need to make any changes. They can stay in their current plan. Members with August to December effective dates can stay in their current plan until their anniversary date in 2014.

You can review your grandfathered and non-grandfathered members in your Book of Business report.

The extension gives you extra time to help your clients take advantage of premium savings which gives your clients the option to keep their health insurance coverage and the stable rates they have.

If you have any questions please call the National Broker Support Unit at 1-888-54-Aetna (1-888-542-3862).

Aetna Health Plans for Individuals, Families and the Self-Employed are underwritten by Aetna Life Insurance Company. In some states coverage is provided through policy issued to a blanket trust in Delaware; in other states coverage is provided through polices issued to residents of those states. Aetna Health Plans (HMO) are underwritten by Aetna Health Inc. ("Aetna" refers to Aetna Life and/or Aetna Health Inc.). In some states, individuals may qualify as a business group of one and may be eligible for guaranteed issue, small group health plans. Prior to 2014, these plans will be medically underwritten and you may be declined coverage based upon your health condition. Starting in 2014, these plans will not be medically underwritten and no one will be declined coverage based upon health status. 11/13

Help/Contact us:

If you have any questions please Contact Us.

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