

## Copay Reimbursement Info & Guide

All medical and prescription co-pays incurred during the year by you and/or covered dependents are eligible for reimbursement through your Aetna Patriot V and Aetna Patriot X medical coverage.

**Patriot V Plan:** Submit your doctor's office and prescription copay receipts to Aetna for your copayment to be applied to your deductible. Once your deductible is met you will be reimbursed 70% of your copay amount.

**Patriot X Plan:** Submit your doctor's office and prescription copay receipts for your copayments to be applied to your deductible. Once your deductible is met you will be reimbursed 80% of your copay amount.

(Please note that copay reimbursement only applies to the two plans listed above. It does not apply to any of the new plan alternatives including PPO Core PPO Buy Up and the HDHP.)

We ask that members use the following guidelines to insure prompt processing of the claims:

- Complete a **Copay** Reimbursement Form cover sheet (located in the Document Library of your group's BenePortal site).
- Select on the cover sheet if you would like to receive your confirmation of receipt through e-mail or phone call by Aetna. Please allow five business days to receive a response. Please also note that although Aetna estimates a completion time of 2-3 weeks following submission, this is a manual process that sometimes takes longer than expected.
- Photocopy as many of the copay receipts as possible onto an 8.5×11 sheet of paper. Claims that include multiple receipts on one page can be processed in a shorter time and result in a quicker turnaround time for the member. Please be sure that all necessary information is showing clearly for each receipt (i.e. provider name, provider address, complete drug information or medical procedure code, and the date of service, along with amount paid by member clearly indicated or circled). Aetna does not need the original receipts – photocopies are fine.
- Members should clearly mark their respective Aetna Member ID # on each copay receipt.

The cover sheet, along with the receipts, can be sent to the mailing address below (or members can fax the required documentation if less than 5 pages). Please Note- Faxes or e-mails that are more than 5 pages need to be sent in multiple faxes, or separate attachments via e-mail so that the submission is not rejected. Subjects or attachment titles that contain numbers and -s may be rejected because Aetna's system thinks they may be social security numbers. Please only name your attachments your first and last name and "Copay Reimbursement"

**Copay reimbursements have to be submitted no later than 18 months after the date of service.**

**Aetna – NJ School Board Claims Unit**

**PO Box 981106**

**El Paso, TX 79998-1106**

**Fax: (860) 975-9065 (please be sure to address to NJ School Board Claims Unit)**

**Or E-mail to [NJHIFCopaymentReimbursement@aetna.com](mailto:NJHIFCopaymentReimbursement@aetna.com)**

\*Copays being submitted for reimbursement should be sent to Aetna no later than 18 months after the Date of Service.

This process only applies to the submission of copay receipts (office visit copays or Rx copays). All provider claims must continue to be submitted to the El Paso, TX P.O. Box address.