

The ACO Network Option

The ACO Network Option offers quality health care that may lower costs for you and your family.

The ACO Network Option returns for 2025

The Aetna Whole HealthSM is an ACO (Accountable Care Organization) Network. This is a group of health care providers that provide coordinated care to patient populations, including incentives to improve the quality of patient care and health outcomes while controlling costs. Aetna and providers leverage strengths to create a product offering with a shared patient focus. That focus is on delivering quality and efficiency that drives improved patient and provider engagement levels and, ultimately, better health outcomes. **The ACO is only available in NJ, NY, and CT and an associate's eligibility is based on their home address.**

How do I know if my doctor(s) participate in the ACO Network?

To help associates determine which doctors are associated with an Accountable Care Organization (ACO), participating providers are flagged in the online provider search. Participating ACO providers associated with an Aetna Whole Health ACO are identified with an Aetna Whole Health logo.

Note: Download the Aetna Whole Health Provider Search document to learn how to search for a provider in your network. You can also learn more by watching the video tutorial on your benefits website.

How is the ACO network different from the current network?

Aetna teams up with systems of doctors, hospitals, and other health care providers to help these organizations manage risk, improve clinical care management, and implement data and technology to connect providers, health plans, and patients.

ACO providers accept responsibility for caring for a population of patients and work together to coordinate care. The goal of an ACO is to:

- Improve the health of the population using evidence-based medicine and greater integration and collaboration
- Enhance the member experience of care (including quality, access, and reliability) while encouraging member engagement
- Manage health care costs while focusing on health outcomes

How are providers selected to participate within the ACO network?

Aetna Whole Health plans are designed to:

- Reward doctors for improving patient care quality
- Lower medical cost growth over time by reducing waste, improving care coordination and closing care gaps
- Encourage associates to stay in network which is intended to help them experience improved quality of care at a lower total cost of care
- Support effective patient and primary care doctor relationships

ACO providers have to meet certain quality measures which are monitored ongoing. Some examples include:

- Impactable bed days per 1000 members
- 30 day re-admission rate
- Potentially avoidable ER visits per 1000 members
- Outpatient surgery steerage to a lower-cost place of service
- Outpatient lab steerage to a lower-cost place of service
- Outpatient radiology steerage to a lower-cost place of service
- Generic prescribing rate
- Total cost of care

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Which providers are part of the ACO network?

By using an ACO, you and your family will have access to all of your care, coordinated by your primary care physician and a care team. Within the ACO network, you will have access to hospitals, ancillary providers (lab, x-ray) and physicians (primary care and specialists) employed by the system. Your provider will assist with referrals if there is care you need outside of the ACO.

What if my provider is not part of the ACO network?

If your provider is not part of the ACO network you have several options:

- You can look for a provider who is in the ACO network and switch providers
- If you elect to visit a Non participating ACO provider, your out-of-network benefits will apply. For example, a lab test performed by a Non ACO provider will be applied to your out-of-network benefits which is subject to your deductible, co-insurance, and any amount that exceeds Aetna's Usual & Customary rate.

How will my out-of-network benefits be applied to services with Non ACO providers?

If associates utilize an out-of-network provider, they would receive the out-of-network benefits. So an out-of-network lab test for example, would follow the out-of-network lab benefit.

I am in the middle of treatment with a provider who is not part of the ACO network. Can I still visit my provider?

In certain circumstances, where it is not feasible for someone to switch providers due to being in the midst of treatment, a transition of care request can be granted. In the event you receive a balance bill from the provider, please contact Aetna Concierge at 1-877-461-0933 for assistance.

What if I am traveling out of my home zip code and have an emergency? Am I covered?

If you are traveling outside of your ACO service area, and have an emergency, you would receive the highest level of coverage which would be in-network coverage. In the event you receive a balance bill from the provider, please contact Aetna Concierge at 1-877-461-0933 for assistance.

