What is an Emergency?

An emergency medical condition is a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in (i) placing the health of the individual (or, with respect to a pregnant woman, the health of the woman and her unborn child) in serious jeopardy, (ii) serious impairment to bodily functions, or (iii) serious dysfunction of any bodily organ or part.

Examples of emergency illness or injury are:

- Serious breathing difficulties
- Unconsciousness
- Uncontrollable bleeding
- Sudden onset of chest pain
- Major burns
- Seizures

When you are in need of emergency care, go to the nearest emergency facility or call 911 or any available area emergency response service. If a delay would not be detrimental to your health, call your primary care physician (PCP). Your PCP is required to provide emergency coverage 24 hours a day, including weekends and holidays.

When using emergency room facilities, you will have a copayment at the time of receiving services. The ER copay does not apply if you are admitted as an inpatient to the hospital.

If you are admitted to an inpatient facility, you or a family member or a friend on your behalf should notify your PCP and the health plan as soon as possible.

All follow-up care must be coordinated by your PCP. Follow-up care with a non-participating provider is only covered with a referral from your PCP and pre-approval by your health plan medical group or IPA.

Under the health plan, if you or a covered family member receives a bill for services directly from a provider, you should immediately send the bill to the claim address on the back of your I.D. Card. For identification purposes, please include your Aetna I.D. Number on the bill. Always keep a copy for your records.

Additional information about Medical Emergencies and Urgent Care can be found in the “Covered Benefits” section of the Evidence of Coverage. In case of a conflict between your plan documents and this information, the plan documents will govern.