



Aetna® Frequently Asked Questions (FAQ)

Thank you for choosing Aetna. We want to ensure that your experience with us is as seamless as possible. If you have questions related to your coverage, please review the FAQ document to find helpful information for you and your family.

How do I get help from the Aetna Concierge team?

Absolutely, we are here to help! You have two options to contact the Aetna Concierge team.

[Log into your secure member website here](#)

For 24/7 self-service, you can log into your secure member website and choose “Help” to get phone, email and chat options. You can also find doctors, check coverage, file claims and more.

For personal service, you can call the Aetna Concierge line at 1-833-821-0849. Our business hours are Monday through Friday, 8am to 6pm for your area code. This number is also located on the back of your member ID card.

Can I use the same ID card that I had under the State of Delaware plan for services on or after July 1, 2025?

No. When obtaining services, you will want to use the new Aetna ID cards that you have received in the mail in June 2025 that reflects the University of Delaware’s logo on the ID card. This card has a new member ID number and group number specific to you. Please share with all your providers your new ID card so they have this information on file when they bill for services rendered. If you are an Aetna HMO member, please present this card to your PCP so they can also request referrals under your new ID number.

What should I do if I need additional or replacement ID Cards?

You can access or print your ID cards through the Aetna HealthSM app on your phone or via the Aetna secure member website at any time.

[Log into your secure member website here](#)

Through your Aetna secure member website, you can pull up your digital ID card. You can print it or email it. Your digital ID card is the same as your plastic ID card.

You can also request one additional ID card at a time through the Aetna secure member website or you can contact the Aetna Concierge team at 1-833-821-0849. Our business hours are Monday through Friday, 8am to 6pm for your area code.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna).

How do I find a participating provider?

It is simple! You have three ways that you can access providers in the Aetna network. Our online directory can help you find doctors (general, specialists), hospitals and urgent care centers, mental health care and other specialty care.

[Log into your secure member website here](#)

If you do not currently have an account with Aetna, please follow the prompts and create your Aetna member account. Have your University of Delaware Member ID number you just received handy. This is where you can search for providers, view claims and much more!

[Access the University of Delaware's Aetna Provider Search Tool here](#)

This website will provide you with easy access to look up a provider based on your location and plan type.

[Aetna HealthSM App](#)

If you currently do not have the Aetna Health app it is easy to download. Get the Aetna HealthSM app by texting "AETNA" to 90156 to receive a download link. Message and data rates may apply.*

How do I select or change a primary care provider (PCP)?

You can change your PCP through your secure member portal which you can access through the link below or you can call the Aetna Concierge line at 1-833-821-0849. Our business hours are Monday through Friday, 8am to 6pm for your area code.

[Log into your secure member website here](#)

Can I change my PCP any time I want?

Yes. You are required to have a PCP elected and on your ID card with the Aetna HMO plan, however the Aetna CDH Gold plan does not require you to elect a PCP.

What if my PCP leaves Aetna's network?

If your physician leaves our network, you will be asked to select another PCP.

I am on the Aetna HMO plan. Do I need to obtain a new referral for services on or after July 1, 2025?

Yes. Since you are under a new plan with Aetna through the University of Delaware you will need to contact your primary care physician and ensure they issue a new referral to your specialists. Please provide your PCP and all providers your new member ID number so they can ensure they are requesting the information accurately.

*Terms and Conditions: Aetna.com/Terms. Privacy Policy: Aetna.com/legal-notice/privacy.html. By texting 90156, you consent to receive a one-time marketing automated text message from Aetna® with a link to download the Aetna Health SM app. Consent is not required to download the app. You can also download by going to the Apple® App Store® or Google Play.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna).

©2025 Aetna Inc.

I am in the Aetna HMO plan and my claim was denied because I did not have a referral on file under my new plan, what do I do?

To help eliminate any challenges, please make sure that you contact your PCP to have all referrals resubmitted under your new University of Delaware ID number prior to obtaining specialist services. If your claim was denied and you previously had a referral on file through your State of Delaware plan, please contact the Aetna Concierge line and notify them that you previously had a referral on file through the State of Delaware plan. The Aetna Concierge team will work to best support you based on your specific situation.

How do I report a name or address change to the health plan?

It is important to keep your name and address up to date with your health plan. Please let the University of Delaware (UD) know your name or address has changed. UD will send this update to us directly.

How can I cover my newborn from birth?

Your child is generally covered for the first 31 days from their date of birth. To continue coverage, you'll need to enroll your child within those 31 days with the University of Delaware. Please review your plan documents for details surrounding newborn coverage guidelines.

What should I do if I need emergency care?

If an emergency happens close to home:

- Call your local emergency hotline (911) or go to the nearest emergency facility. If possible, you should also call your primary care doctor. In all cases, you should contact your primary care doctor as soon as possible after receiving treatment.
- Once an emergency facility has stabilized your condition, their staff members should try to contact your primary care doctor. Your primary care doctor knows your medical history and is also responsible for coordinating your health care.
- Please note that all follow-up care should be coordinated through your primary care doctor.

If an emergency happens when you're traveling away from home:

- Remember that urgently needed care is covered while you are traveling outside of your local Aetna service area.
- You should seek immediate treatment for any illness or injury that would be considered an emergency, or for the care of any urgent problem.
- If you are admitted to an inpatient facility, you should immediately notify your primary care doctor and Aetna.
- In other cases, you should notify your primary care doctor and Aetna within 48 hours of an emergency.

When seeking emergency care, please note that:

- Any services you receive must be covered under the terms of your Aetna plan.
- You are responsible for any emergency room member cost share under your plan.
- An emergency room copay does not apply when you are admitted for an overnight hospital stay.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna).

What is precertification?

Precertification is an important process. It's approval you get for care before receiving the care. This helps you know if the care is covered by your health plan. Be sure to check with your plan to learn what kind of service needs this approval.

Precertification is also called:

- Authorization
- Certification
- Prior authorization

If you are receiving in network care

Your network physician or PCP will get precertification, if needed, before you get care. Network providers can't bill you if they don't ask us for precertification.

If your physician or PCP requests precertification and we deny it — and you still choose to get the care — you'll have to pay for it yourself.

If you are receiving out-of-network care

When you go to an out-of-network provider, you need to get precertification, if needed, from us.

If you don't get precertification:

- Your benefits may be reduced, or the plan may not pay. For details, check your schedule of benefits.
- You'll be responsible for the unpaid bills.
- Your out-of-pocket expenses won't count toward your deductible or maximum out-of-pocket limit, if you have any.

Want to learn more?

- You can find a list of [in-network services that require precertification](#).
- You can find a list of out-of-network services in your certificate of coverage or summary plan description.

If you have any questions or need support with a precertification, please contact the Aetna Concierge line at 1-833-821-0849. Our business hours are Monday through Friday, 8am to 6pm for your area code.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna).