

Safety First!



We care about your safety, health and welfare. It is important to recognize signs of abuse, neglect and exploitation and report it. This will allow you to be safe and get the care you need. If you are or suspect that you are being abused, neglected or exploited please call the appropriate number below to report, prevent or stop the abuse, neglect or exploitation.

To report regarding members who are disabled adults 18 through 59 years of age who live in the community call the Illinois Adult Protective Services Unit of the Department on Aging (DoA).	1-866-800-1409 (voice) 1-888-206-1327 (TTY)
To report regarding members who are 60 years of age and older who live in the community call the Illinois Adult Protective Services Unit of the Department on Aging (DoA).	1-866-800-1409 (voice) 1-888-206-1327 (TTY)
To report regarding members in Nursing Facilities call the Department of Public Health Nursing Home Complaint Hotline.	1-800-252-4343
To report regarding members in Supportive Living Facilities call the Supportive Living Facility Complaint Hotline.	1-800-226-0768
Call member services or your care coordinator at any time to report abuse, neglect and exploitation. You can contact us 24 hours a day 7 days a week.	1-866-600-2139 (toll-free) TTY 7-1-1

For more information, please visit our website at https://www.aetnabetterhealth.com/illinois

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Cell service at no cost to you!

See if you're eligible for Assurance Wireless Lifeline cell service plus an Android™ Smartphone.

We know how important it is to stay connected to healthcare, jobs, emergency services and family. That's why Aetna Better Health Premier Plan is partnering with Assurance Wireless Lifeline service.

Each month eligible Assurance Wireless customers receive, at no cost:

- Data
- Unlimited Texts
- Voice Minutes
- Plus, an Android Smartphone

You may qualify for Assurance Wireless Lifeline service if you are on certain public assistance programs, like Medicaid or Supplemental Nutrition Assistance Program (SNAP).

To apply now or learn more visit aetnabetterhealth.com/illinois.



How National coverage decisions affect your plan

The Centers for Medicare & Medicaid Services (CMS) sometimes change coverage rules for a benefit or service. When this happens, CMS issues a National Coverage Determination (NCD).

NCDs tell us:

- · What's covered
- · What's changing
- What Medicare pays

We post NCDs on our website at least 30 days prior to the effective date. To view them, visit **www.aetnabetterhealth.com/illinois**.

Then go to: For Members > Aetna Better Health Premier Plan > Member Benefits.

You can also visit <u>www.cms.gov</u> for more information. Once on the website, click on "Medicare" then type "National Coverage Determination" in the search box.

You can also contact your Care Manager or Member Services at 1-866-600-2139 (TTY/TDD 711).

Get Ready for the CAHPS Survey

At Aetna Better Health Premier Plan MMAI, member satisfaction is our top priority. Soon you may be receiving a CAHPS survey. CAHPS stands for Consumer Assessment of Healthcare Providers and Systems Survey. The goal of the survey is for you to help us identify our strengths and weaknesses, so we know where we need to improve. It tells us how we are doing as well as how your doctors are doing. The results of the survey help us make improvements to our health plan to better serve you.

The survey looks at the many ways you have had dealings with the health care system. Some of those are:

- Did your doctors and nurses organize your care activities and share that information with others involved in your care?
- Did you have had good communication with healthcare providers?
- Were you able to schedule appointments in a timely fashion?
- Did your health care provider have easy access to your health information?

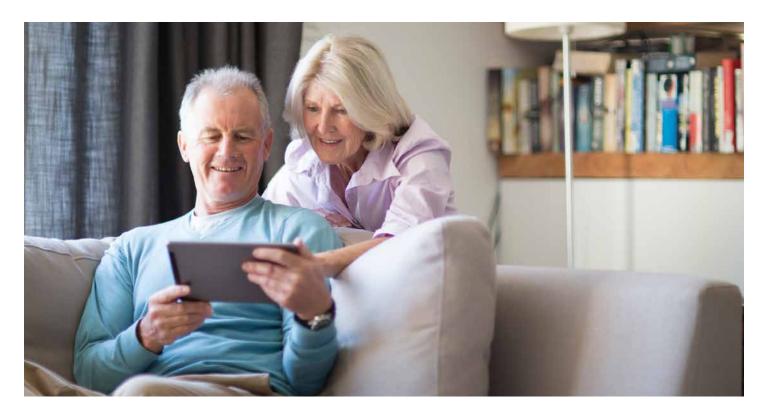


Your answers to the survey help Aetna Better Health Premier Plan MMAI make sure that:

- You get the care you need in a timely fashion. This includes your annual visits and sick visits and that you are seen within 15 minutes of your appointment time.
- Your healthcare provider explains your health problems, tests, and procedures so you understand your medical care.
- Your healthcare providers have all your medical information. This information includes your current medications, test results, and visits with specialists.
- You get reminders about your prescriptions from your doctor or your pharmacy and get your prescriptions when you need them.
- You get information about the benefits of the flu vaccine and can receive the vaccine.

If you have questions or require additional assistance in completing the survey, please call Member Services at 1-866-600-2139 (TTY/TDD 711) or reach out to your care manager.





The Medicare Health Outcomes Survey

The Centers for Medicaid and Medicare Services (CMS) requires all Medicare Managed Care Organizations to participate and conduct the Medicare Health Outcomes Survey.

What is the Medicare Health Outcomes Survey (HOS)?

The Medicare Health Outcomes Survey (HOS) is a short survey that measures Aetna Better Health Premier Plan MMAI's success in improving and maintaining the health of our members over a 2-year period. The survey includes questions that address your physical health, mental health, physical activity, bladder control, and risk of falling.

How is the HOS survey administered?

The initial HOS survey is distributed to a randomly selected group of Health Plan members by mail and telephone for members who have not responded by mail between April and July. Two years later the same group of members who responded to the initial survey are surveyed again to as a follow up health measurement.

Why is the HOS survey important to complete?

The HOS survey results are used to help us make improvements to the health plans services and programs, and to ensure the health plan meets your health care needs.



If you have question about the survey, feel free to contact our Member Services Department or your Care Manager at tollfree at 1-866-600-2139 (TTY/TDD 711).

Thank you in advance for taking time to complete the HOS survey. As always, we look forward to providing you quality care here at Aetna Better Health Premier Plan MMAI.

The Flu shot may be more important than ever this year



This year many of us have been thinking a lot about protecting ourselves from COVID-19, but don't forget about the Flu. According to the Centers for Disease Control (CDC). both viruses could be spreading at the same time during the Flu season. Since both conditions are spread by respiratory droplets and can cause similar symptoms, it's even more important to get a Flu vaccine this year. Like COVID-19, the Flu is a contagious viral illness and is often spread by coughing, sneezing, or touching contaminated areas and then touching the eyes, nose, or mouth. You can protect yourself and your family by making your Flu shot a priority, especially this year.

Who needs the vaccine?

The CDC recommends the flu vaccine for most people over 6 months of age. It is especially important for adults over 65 and those with other health conditions like Diabetes or heart problems. The flu vaccine should be repeated each year.

When should we get it? It's best to get the flu vaccine by the end of October. If you can't get it by then, you can still benefit from getting the Flu vaccine throughout the Flu season.

Why get the Flu vaccine? The Flu vaccine can reduce your chance of getting the Flu and related complications, such as Pneumonia or requiring care at a hospital

Where can I get the flu shot? Aetna Better Health Premier Plan MMAI members can receive the flu shot at their doctor's office, or at participating pharmacies in our network. Talk with your doctor or call Member Services to find out more about where to go.

What else can I do to protect myself from getting the Flu?

- Avoid touching your face, especially your eyes, nose, and mouth
- Avoid contact with people who are sick
- Cover your mouth when coughing or sneezing
- Wash your hands often

References: https://www.cdc.gov/flu





SilverSneakers LIVE™ gives you live classes and workshops on the SilverSneakers website through Zoom².

- Led by SilverSneakers trainers
- No equipment needed
- Many classes each day

SilverSneakers On-Demand[™] has more than 200 online videos you can use at home.

- Exercises from beginner to advanced
- Nutrition information, fitness challenges and more
- Get videos at SilverSneakers On-Demand

Get exercise programs on your phone with the **SilverSneakers GO™** mobile app.

- Just one click to change exercise levels
- Activity schedule and reminders
- Download at SilverSneakers GO.

Go to participating locations near your home and where you travel.

Thousands to use any time you want

- Treadmills, weights, pools and more¹
- Group exercise classes³ at some locations

Stay connected.

- Fitness with friends at participating locations
- Fun social activities
- SilverSneakers Facebook page and newsletter

Visit <u>SilverSneakers.com</u> to learn more. There you can sign up and get your SilverSneakers ID number. Go to a participating location when you're ready. Find one near you with the location finder. Sign up for the newsletter to be sent to your email inbox.

Start using SilverSneakers today. Your good health is worth it.

Always talk with your doctor before starting an exercise program.

¹ Participating locations ("PL") are not owned or operated by Tivity Health, Inc. or its affiliates. Use of PL facilities and amenities is limited to terms and conditions of PL basic membership. Facilities and amenities vary by PL.

²Zoom is a third-party provider and is not owned or operated by Tivity Health or its affiliates. SilverSneakers members who access SilverSneakers Live classes are subject to Zoom's terms and conditions. SilverSneakers member must have Internet service to access SilverSneakers Live classes. Internet service charges are responsibility of SilverSneakers member.

³ Membership includes SilverSneakers instructor-led group fitness classes. Some locations offer members additional classes. Classes vary by location.

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Case Management

As a member of Aetna Better
Health Premier Plan MMAI, you
will have your own case manager
as part of our case management
program. Your case manager can
help you find the right care and
services. A case manager will work with you,
your doctors, and other providers to make sure
you receive the right care and services with your
needs in mind. The goal is to build a care plan
just for you to help you live a healthier life. Each
of our members is on their own personal health
care journey. We can guide you in managing and
improving your health.

To learn more about how we can help you with your health care, call your case manager or **Member Services at 1-866-600-2139 (TTY: 711)**, 24 hours a day, 7 days a week.

Have you already received a call from a Case Manager at Aetna?

If you are a new member to our plan, you will receive a welcome call from one of our care management staff. The purpose of the call is to welcome you to our plan and find out how we can support you. During the call, you can expect that a case manager will work with you to complete a health assessment to learn more about you and your healthcare needs. The assessment is important, so we know all of your goals and know how to support you as a valued member of our plan. At a minimum, you can also expect that our case managers will call you to check in and see how you have progressed throughout the year. During that discussion, the care manager will update the health assessment and together you will set new health goals. If you move or change your phone number, please call your local Department of Human Services office and your care manager to have your profile updated so we know the best way to contact you. This can also be done by calling Member Services at 1-866-600-2139 (TTY: 711).





Telemonitoring Program

We are excited to offer you, our members, our Aetna Better Health Premier Telemonitoring Program!

Canary Telehealth along with Aetna's Telemonitoring Nurses help by remotely monitoring your symptoms and your vital signs to make sure you reach optimal health. You are the ideal candidate for Telemonitoring program if you are having difficulty managing any of the following conditions: High Blood Pressure, Diabetes, COPD, Congestive Heart Failure, Asthma and more. Telemonitoring services and required equipment are all shipped to your home! Our experienced nurses monitor you and intervene when there is a problem. We can provide coaching and care coordination services to you or simply follow up with your provider with any concerning alerts.



Aetna Better Health® Premier Plan MMAI is a health plan that contracts with both Medicare and Illinois Medicaid to provide benefits of both programs to enrollees.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call **1-866-600-2139 (TTY: 711)**, 24 hours a day, 7 days a week. The call is free.

ATENCIÓN: Si habla español, tiene a su disposición servicios de idiomas gratuitos. Llame al **1-866-600-2139 (TTY: 711)**, las 24 horas del día, los 7 días de la semana. Esta llamada es gratuita.

11-21-10-03



We comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex and does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. If you speak a language other than English, free language assistance services are available. Visit our website at or call the phone number listed in this material.

In addition, your health plan provides auxiliary aids and services, free of charge, when necessary to ensure that people with disabilities have an equal opportunity to communicate effectively with us. Your health plan also provides language assistance services, free of charge, for people with limited English proficiency. If you need these services, call Customer Service at the phone number on your benefit ID card.

If you believe that we have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our Grievance Department (write to the address listed in your Evidence of Coverage). You can also file a grievance by phone by calling the Customer Service phone number listed on your benefit ID card (TTY: 711). If you need help filing a grievance, call Customer Service Department at the phone number on your benefit ID card.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at https://ocrportal.hhs.gov/ocr/cp/complaint_frontpage.jsf.

ESPAÑOL (SPANISH): Si habla un idioma que no sea inglés, se encuentran disponibles servicios gratuitos de asistencia de idiomas. Visite nuestro sitio web o llame al número de teléfono que figura en este documento.

繁體中文 (CHINESE): 如果您使用英文以外的語言,我們將提供免費的語言協助服務。請瀏 覽我們的網站或撥打本文件中所列的電話號碼。

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Multi-language Interpreter Services

ENGLISH: ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call the number on the back of your ID card or **1-800-385-4104** (TTY: **711**).

SPANISH: ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al número que aparece en el reverso de su tarjeta de identificación o al **1-800-385-4104** (TTY: **711**).

POLISH: UWAGA: Jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer podany na odwrocie Twojego identyfikatora lub pod number **1-800-385-4104** (TTY: **711**).

CHINESE: 注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電您的 ID 卡背面的電話號碼或 1-800-385-4104 (TTY: 711)。

KOREAN: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 ID 카드 뒷면에 있는 번호로나 **1-800-385-4104** (TTY: **711**) 번으로 연락해 주십시오.

TAGALOG: PAUNAWA: Kung nagsasalita ka ng wikang Tagalog, mayroon kang magagamit na mga libreng serbisyo para sa tulong sa wika. Tumawag sa numero na nasa likod ng iyong ID card o sa **1-800-385-4104** (TTY: **711**).

ملحوظة: إذا كنت تتحدث باللغة العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل على الرقم الموجود خلف بطاقتك الشخصية أو عل 4104-385-800-1 (للصم والبكم: 711).

RUSSIAN: ВНИМАНИЕ: если вы говорите на русском языке, вам могут предоставить бесплатные услуги перевода. Позвоните по номеру, указанному на обратной стороне вашей идентификационной карточки, или по номеру **1-800-385-4104** (TTY: **711**).

GUJARATI: ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાયતા સેવાઓ તમારા માટે ઉપલબ્ધ છે. તમારા આઈડી કાર્ડની પાછળ આપેલા નંબર પર અથવા 1-800-385-4104 પર કૉલ કરો (TTY: 711).

توجہ دیں: اگر آپ اردو زبان بولتے ہیں، تو زبان سے متعلق مدد کی خدمات آپ کے لئے مفت دستیاب بیں ۔ اپنے شناختی کارڈ کے پیچھے موجود نمبر پر یا 4104-385-800 (TTY: 711) پر رابط کریں۔

VIETNAMESE: CHÚ Ý: nếu bạn nói tiếng việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Hãy gọi số có ở mặt sau thẻ id của bạn hoặc **1-800-385-4104** (TTY: **711**).

ITALIAN: ATTENZIONE: Nel caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuita. Chiamare il numero sul retro della tessera oppure il numero **1-800-385-4104** (utenti TTY: **711**).

HINDI: ध्यान दें: यदि आप हिंदी भाषा बोलते हैं तो आपके लिए भाषा सहायता सेवाएं नि: शुल्क उपलब्ध हैं। अपने आईडी कार्ड के पृष्ठ भाग में दिए गए नम्बर अथवा 1-800- 385-4104 (TTY: 711) पर कॉल करें।

FRENCH: ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le numéro indiqué au verso de votre carte d'identité ou le **1-800-385-4104** (ATS : **711**).

GREEK: ΠΠΡΟΣΟΧΗ: Εάν μιλάτε Ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε τον αριθμό που θα βρείτε στο πίσω μέρος της ταυτότητάς σα ή στο **1-800-385-4104** (Λειτουργία ΤΤΥ: **711**).

GERMAN: ACHTUNG: Wenn Sie deutschen sprechen, können Sie unseren kostenlosen Sprachservice nutzen. Rufen Sie die Nummer auf der Rückseite Ihrer ID-Karte oder **1-800-385-4104** (TTY: **711**) an.



Aetna Better Health™ Premier Plan MMAI

7400 W. Campus Rd. New Albany, OH 40354





