

## Aetna Better Health®of Maryland



Spring 2018

## **Well-child visits**

Health care for infants, children and youth up to age 21

Even if children aren't sick, they need to see the doctor regularly. Well-child visits can help children stay healthy. Children should have well-child visits at the ages listed below:

- Newborn (usually occurs in the hospital after delivery)
- 1 month and 2 months
- 4 months and 6 months
- 9 months and 12 months
- 15 months and 18 months
- 24 months and 30 months
- Every year from ages 3 to 20

Well-child visits may include tests. Tests can find problems early when they're easier to treat. Your child's doctor wants to give these tests at the right time.

If your child has missed some well-child visits, talk to your child's doctor. Remember, these services are available at no cost to you!

They include:

- A complete physical exam
- A review of physical and mental health development
- Lead screening and testing
- Developmental delay and autism testing
- Vision exams
- Oral exams
- Hearing exams
- Immunizations (shots), if needed
- Laboratory tests, if needed
- Fluoride application to your child's teeth, if needed



## Schedule your child's well-child checkup today.

If you haven't already, call your child's doctor or health care professional to make an appointment for a well-child checkup. If you don't have a primary care doctor for your child, call us at **866-827-2710** to find a network provider. We can also help you find transportation or give you more information about your child's medical benefits.

Standard 9862899 S.U **PAID** AW alla Walla, WW

## Affirmative statement about incentives

Aetna Better Health of Maryland makes Utilization Management (UM) decisions based only on appropriateness of care and service and existence of coverage. We do not reward practitioners, employees, or other individuals for issuing denials of coverage. Any financial incentives Aetna Better Health of Maryland may provide to UM decision makers do not encourage them to make decisions that result in underutilization of services. We also do not use employee incentives or disincentives to encourage barriers to care and service.

If you have any questions about this statement, please call our toll-free telephone number: **1-866-827-2710**, **TTY 711** 

As a member, you have both rights and responsibilities. Read them online at aetnabetterhealth.com/maryland.



# How to file a complaint, grievance or appeal

If you disagree with a provider or Aetna Better Health of Maryland about an adverse benefit determination, this is called a complaint. If your complaint is about a service you or your provider feels you need, but we will not cover, you can ask us to review your request again. This is called an appeal. You must file an appeal within 60 days from the date that you receive the letter saying we will not cover the service you wanted. Your doctor can also file an appeal for you if you sign a form giving him/her permission.

A complaint about something not related to a service is called a grievance. Examples of grievances include quality of care issues, not being treated fairly by someone who works here or at your doctor's office or trouble getting an appointment. A grievance can be filed at any time.

To file a grievance or appeal you can call us at **1-866-827-2710**. Our customer service representatives will assist you with filing a complaint, grievance, or appeal. You will need to confirm the appeal request in writing, unless it is an expedited request. We will send you a simple form that you can sign and mail back. We will assist you in completing the form as needed. For more information about appeals and grievances see pages 42-45 of your Member Handbook.

## **Reporting Fraud, Waste and Abuse**

Members and providers are required to report Medicaid fraud, waste and abuse.

- Fraud: when a person intentionally deceives the system to receive an unauthorized benefit
- Waste: overusing Medicaid resources
- Abuse: causing unnecessary cost to the Medicaid program

If you suspect or know that fraud, waste or abuse is occurring, report it immediately using one of the following options:

- Call Aetna Better Health Member Services: 1-866-877-2710 or 1-855-877-9735
- Notify the Maryland Department of Health, Office of the Inspector General: 1-866-770-7175 or http://dhmh.maryland.gov/ oig/Pages/Report\_Fraud.aspx
- Contact the U.S. Department of Health and Human Services, Office of the Inspector General:
- 1-800-447-8477 or https://oig .hhs.gov/fraud/report-fraud/ index.asp

Reporting fraud, waste or abuse will not affect how you will be treated by Aetna Better Health of Maryland, and you have the choice to remain anonymous when you make the report. However, it is good to provide as much information as possible—this will assist those investigating the report.

# Standing referrals for long-term needs

Members with special health care needs may need to see specialists on a long-term basis. Sometimes this is called a "standing referral." The specialists must contact us for approval to make this happen. If it is in your best interest, you may have a specialist as your PCP. If you want a specialist to be your PCP, talk to the specialist about it. If you have special needs and you have not talked with one of our case managers yet, call Member Services at **1-866-827-2710**, TTY 711, and ask to be transferred to a case manager.

If you have special needs or have questions about care management call Member Services at 1-866-827-2710, TTY 711. Ask to be transferred to a care manager.



## **Check out our Website**

### aetnabetterhealth.com/maryland

What you can find:

- Information about your rights and responsibilities
- Member Handbook
- Provider directory
- Pharmacy/prescription and other health benefit information
- Information about our Case Management Program, Utilization Management Program, and our Quality Improvement Program
- Clinical Practice Guidelines

If you do not have internet access, give us a call at 1-866-827-2710 and we can send you the written information as needed.

## **Health & Wellness (Population Health Management)**

Everyone's health needs and goals are different. You tell us what you need, and Aetna Better Health of Maryland will work with you to reach your health goals. Our goal is to provide the help you need to manage your own health. Please check out our website (aetnabetterhealth. com/maryland) to find additional general information and programs to help you stay healthy, including:

- Care management: Care management can make your life easier, and our care management unit has nurses that can help you:
  - Get services and care, including information on how to get a referral to special care facilities for highly specialized care.
  - Work with health care providers, agencies and organizations.
  - Learn more about your condition.
  - Make a care plan that is right for you.
  - Access services after hours for crisis situations.
  - Arrange services for children with special health care needs such as well-child care, health promotion, disease prevention and specialty care services. You may have special needs and have an existing relationship with an out-of-network provider. Sometimes you can continue to see that provider if it's in your best interest. The provider must first get approval from us.

Members with special health care needs may need to see specialists on a long-term basis. Sometimes this is called a "standing referral." The specialists must contact us for approval to make this happen. If it is in your best interest, you may have a specialist as your PCP. If you want a specialist to be your PCP, talk to the specialist about it. If you have special needs and you have not talked with one of our case managers yet, call Member Services at 1-866-827-2710, TTY 711 and ask to be transferred to a case manager.

To learn more about health education, call 1-866-827-2710 and ask to speak to a case manager.



- Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Mailings: The EPSDT mailing is intended to encourage comprehensive and preventive health care services for members under the age of 21. EPSDT is key to ensuring that children and adolescents receive appropriate preventive dental, mental health, developmental and specialty services.
- **Promise program:** Our maternity care program that helps you learn how to take care of yourself and your baby. You will get support and help throughout your pregnancy. Our Promise program is a benefit for you before and after your baby is born.
- **Smartphones:** Aetna Better Health of Maryland offers members this special program. You can sign up for this new program anytime, and you could be eligible for:
- Unlimited text
- -500 MB of data per month
- -100-500 talk minutes
- Calls to and from Aetna Better Health of Maryland Member Services (doesn't count toward minutes)

You can also get text messages sent directly to your phone with health tips, reminders about doctor appointments, flu shots and more.

**Contact us** 



Aetna Better Health® of Maryland 509 Progress Drive, Suite 117 Linthicum, MD 21090-2256



Call toll-free: **1-866-827-2710 (TTY 711)**Fax: **1-866-361-8495 aetnabetterhealth.com/maryland** 

This newsletter is published as a community service for the friends and members of Aetna Better Health® of Maryland. This is general health information and should not replace the advice or care you get from your provider. Always ask your provider about your own health care needs. Models may be used in photos and illustrations.

2018 © Coffey Communications, Inc. All rights reserved.

## **Nondiscrimination Statement**

It is the policy of Aetna Better Health of Maryland not to discriminate on the basis of race, color, national origin, sex, age or disability. Aetna Better Health of Maryland has adopted an internal grievance procedure providing for prompt and equitable resolution of complaints alleging any action prohibited by Section 1557 of the Affordable Care Act (42 U.S.C. 18116) and its implementing regulations at 45 CFR part 92, issued by the U.S. Department of Health and Human Services. Section 1557 prohibits discrimination on the basis of race, color, national origin, sex, age or disability in certain health programs and activities. Section 1557 and its implementing regulations may be examined in the office of Civil Rights Coordinator, 4500 East Cotton Center Boulevard, Phoenix, AZ 85040; Phone 1-888-234-7358 (TTY 711); Email MedicaidCRCoordinator@aetna.com; who has been designated to coordinate the efforts of Aetna Better Health to comply with Section 1557.

Any person who believes someone has been subjected to discrimination on the basis of race, color, national origin, sex, age or disability may file a grievance under this procedure. It is against the law for Aetna Better Health of Maryland to retaliate against anyone who opposes discrimination, files a grievance, or participates in the investigation of a grievance.

#### Procedure:

- Grievances must be submitted to the Section 1557 Coordinator within (60 days) of the date the person filing the grievance becomes aware of the alleged discriminatory action.
- A complaint must be in writing, containing the name and address of the person filing it. The
  complaint must state the problem or action alleged to be discriminatory and the remedy or relief
  sought.
- The Section 1557 Coordinator (or her/his designee) shall conduct an investigation of the complaint. This investigation may be informal, but it will be thorough, affording all interested persons an opportunity to submit evidence relevant to the complaint. The Section 1557 Coordinator will maintain the files and records of Aetna Better Health of Maryland relating to such grievances. To the extent possible, and in accordance with applicable law, the Section 1557 Coordinator will take appropriate steps to preserve the confidentiality of files and records relating to grievances and will share them only with those who have a need to know.
- The Section 1557 Coordinator will issue a written decision on the grievance, based on a preponderance of the evidence, no later than 30 days after its filing, including a notice to the complainant of their right to pursue further administrative or legal remedies.

The availability and use of this grievance procedure does not prevent a person from pursuing other legal or administrative remedies, including filing a complaint of discrimination on the basis of race, color, national origin, sex, age or disability in court or with the U.S. Department of Health and Human Services, Office for Civil Rights. A person can file a complaint of discrimination electronically through the Office for Civil Rights Complaint Portal, which is available at: <a href="https://ocrportal.hhs.gov/ocr/portal/lobby.jsf">https://ocrportal.hhs.gov/ocr/portal/lobby.jsf</a> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201. 1-800-368-1019, 1-800-537-7697 (TDD).

Complaint forms are available at: <a href="http://www.hhs.gov/ocr/office/file/index.html">http://www.hhs.gov/ocr/office/file/index.html</a>. Such complaints must be filed within 180 days of the date of the alleged discrimination.

Aetna Better Health of Maryland will make appropriate arrangements to ensure that individuals with disabilities and individuals with limited English proficiency are provided auxiliary aids and services or language assistance services, respectively, if needed to participate in this grievance process. Such arrangements may include, but are not limited to, providing qualified interpreters, providing taped cassettes of material for individuals with low vision, or assuring a barrier-free location for the proceedings. The Section 1557 Coordinator will be responsible for such arrangements.

## Language accessibility statement

Interpreter services are available for free.

#### **Español/Spanish**

Atención: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-385-4104** (TTY: **711**).

#### አማርኛ/Amharic

ልብ ይበሉ: ኣማርኛ ቋንቋ የሚናንሩ ከሆነ፥ የትርጉም ድጋፍ ሰጪ ድርጅቶች፣ ያለምንም ክፍያ እርስዎን ለማንልንል ተዘጋጅተዋል። የሚከተለው ቁጥር ላይ ይደውሉ **1-800-385-4104** (መስማት ለተሳናቸው: **711**).

#### Arabic/العربية

ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 4104-385-800-1 (رقم الهاتف النصى: 711).

#### Bàsɔʻɔ̀ Wùdù/Bassa

Dè dε nìà kε dyėdė gbo: Ͻ jǔ kė m̀ dyi Ɓàsɔʻɔ-wùdù-po-nyɔ̀ jǔ ni, nìi à wudu kà kò dò po-poɔ̀ bɛ́ m̀ gbo kpaa. Đạ̀ **1-800-385-4104** (TTY: **711**).

#### 中文/Chinese

注意:如果您说中文,我们可为您提供免费的语言协助服务。请致电 1-800-385-4104 (TTY: 711)。

#### Farsi/فارسی

توجه: اگر به زبان فارسی صحبت می کنید، خدمات زبانی رایگان به شما ارایه میگر دد، با شماره 385-4104-380-1 (TTY: 711) تماس بگیرید.

#### Français/French

Attention : Si vous parlez français, vous pouvez disposer d'une assistance gratuite dans votre langue en composant le **1-800-385-4104** (TTY: **711**).

### ગુજરાતી/Gujarati

ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો તો ભાષાકીય સહાયતા સેવા તમને નિ:શુલ્ક ઉપલબ્ધ છે. કૉલ કરો **1-800-385-4104** (TTY: **711**).

#### Kreyòl Ayisyen/Haitian Creole

Atansyon: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele **1-800-385-4104** (TTY: **711**).

#### Igbo

Nrubama: O buru na i na asu Igbo, oru enyemaka asusu, n'efu, diiri gi. Kpoo 1-800-385-4104 (TTY: 711).

#### 한국어/Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스가 무료로 제공됩니다. **1-800-385-4104**(TTY: **711**)번으로 전화해 주십시오.

#### Português/Portuguese

Atenção: a ajuda está disponível em português por meio do número **1-800-385-4104** (TTY: **711**). Estes serviços são oferecidos gratuitamente.

#### Русский/Russian

Внимание: если вы говорите на русском языке, вам могут предоставить бесплатные услуги перевода. Звоните по телефону **1-800-385-4104** (ТТҮ: **711**).

### **Tagalog**

Paunawa: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-800-385-4104** (TTY: **711**).

#### Urdu/اردو

توجہ دیں: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت دستیاب ہیں ۔ (TTY: 711) 400-385-400-1 پر کال کریں.

#### Tiếng Việt/Vietnamese

Lưu ý: Nếu quý vị nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho quý vị. Gọi số **1-800-385-4104** (TTY: **711**).

#### Yorùbá/Yoruba

Àkíyèsí: Bí o bá nsọ èdè Yorùbá, ìrànlówó lórí èdè, lófèé, wà fún o. Pe 1-800-385-4104 (TTY: 711).