

## New provider for non-emergency medical transportation

Effective April 1, 2022,
Aetna Better Health of
Michigan will be changing
our non-emergency medical
transportation (NEMT)
provider to Access2Care for
our Medicaid line of business,
a service previously provided
by OneCall. Aetna Better
Health of Michigan and
Access2Care will ensure that
there will be no interruption
in the transportation
services provided to our
Medicaid members.

The Customer Service phone number for Access2Care is **1-866-316-3784, option 6**. Their hours of operation will be from Monday through Friday, 6 AM to 10 PM EST; Saturday, 8 AM to 4 PM EST; closed Sundays.

We are happy to have you as a member of Aetna Better Health. If there is anything we can do to assist you, please contact our Member Services department at **1-866-316-3784 (TTY: 711)** Monday through Friday, 8 AM to 5 PM.

## Special program for pregnant members

Are you pregnant? If you are, Aetna has a special program for you. The Maternity Matters Program offers support from our case managers team. They will work to connect you with services like:

- Breastfeeding support and motivation
- Postpartum support groups
- Doulas
- Peer support programs
- Transportation
- Help with making doctor's appointments
- Support through all stages of pregnancy
- Remote patient monitoring support if you have a high-risk pregnancy

Please call Member Services to learn more about our Maternity Matters Program.

## What is the Provider Directory for?

Check your Provider and Pharmacy Directory.

You can find out if the provider is taking new patients or if the office is handicap-accessible.

You can also find the basics, like:

- Provider name, address and phone number
- Provider specialty and board certification (look for showing certification)
- Provider spoken languages and other details

The doctors in our network have to meet certain education and experience standards. And we require them to give you high-quality health care services. You can get more information about your doctor by calling Member Services at **1-866-316-3784 (TTY: 711)**.

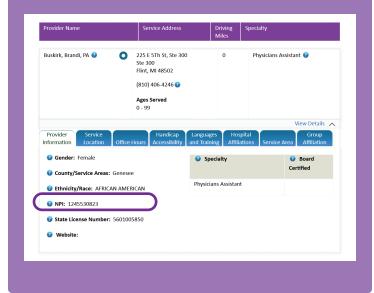
# Postpartum coverage extension from 60 days to 12 months

The Michigan Department of Health and Human Services will extend the coverage for qualified pregnant women from 60 days following delivery to 12 months following delivery beginning April 1, 2022. This includes dental benefits.

## Now you can search providers by race/ethnicity!

Ever wish you could know which race or ethnicity a provider is when you are using our online provider search? Now you can!

In addition to the languages spoken at a provider's office, you can see the provider's race or ethnicity. This is just another way Aetna Better Health is making sure you can find the provider that is just right for you and your family!





## If you see something, say something

Fraud is a crime. It means getting money by tricking or fooling someone else. It is stealing.

Waste means not using something wisely. If two medications do the same thing, using the more expensive medicine would be waste.

Abuse means not using something properly. This could be ordering a test even though it is not needed.

When someone commits fraud, they are stealing from Medicaid. This means there is less money to treat other people in Medicaid.

If you think something does not seem right, it is OK to report it.

If you suspect fraud, waste or abuse by an Aetna Better Health member or provider, please report it.

Aetna Better Health has devoted fraud, waste and abuse investigators. You have access to these investigators in three ways:

- Member Services phone line: The Member Services team is trained to address your concerns. Call 1-866-316-3784 (TTY: 711).
- Aetna Better Health hotline:
   Call 1-855-421-2082 (TTY:

   711). This toll-free line instructs the caller to leave as much information as possible regarding the fraud, waste or abuse concern.
- 3. Aetna Better Health website: Visit **AetnaBetterHealth** .com/Michigan, then click on "Fraud & Abuse" in the upper right-hand corner.

## Vaccines help keep kids and teens healthy

One of the most important things you can do as a parent is to make sure your kids get their shots, or "vaccines." The benefits of these shots last a lifetime. Your kids will never have to worry about the diseases that harm or kill many children in other countries. The shots your kids get are safe.

They work very well. They almost never cause any reaction or have any serious side effects.

Your kids should have most of the shots they need by

age 2. Older kids need booster shots now and then. Teenagers need certain shots too. Call the doctor's office to make sure your kids are up-to-date on their vaccines.

Here are some shots that kids of different ages may need:

## Infants and toddlers (birth to age 2 years)

- DTaP (diphtheria, tetanus and pertussis)
- MMR (measles, mumps and rubella)
- Chickenpox
- Pneumonia

- Hepatitis A and B
- Polio

## Preschoolers and school-age kids (ages 3 to 10)

- DTaP (diphtheria, tetanus and pertussis)
- MMR (measles, mumps and rubella)
- Chickenpox
- Polio

## Preteens and teens (ages 11 to 18)

- HPV
- Meningitis
- Tdap (tetanus, diphtheria and pertussis)

### Self-care in the spring (and all year round)

The days are getting longer, the sun is shining and the birds are singing. Spring is in the air. You may be preparing to do some spring cleaning around your home or preparing for a visit with your primary care provider. Just as we take the time to care for our homes and our bodies, it is just as important to care for our emotional and mental health.

Self-care means taking an active role in protecting your own well-being and happiness, especially during times of stress. It has been two years since our lives were forever changed by COVID-19. For some, the stress that has come with it is unlike any that they have experienced before. That is why it is so important to make sure you are taking the time to check in on your mental health.

Self-care can be anything you need it to be. Think of activities that you find relaxing or motivating and start to use them in your daily routine. Below are just a few ideas to try when developing a self-care routine:

- Listen to music that inspires and motivates you.
- Check in with yourself a few times each day and take a moment to process your thoughts and emotions. Don't let them build up.
- Finish this sentence: "I love myself because I

Do this once per day, with a new ending each time.

- Schedule time to talk with friends or family.
- Take a moment at the end of each day and list a few good things in your life. This can help refocus your emotions on all the positive things that happen each day, even when it doesn't seem like it.

If you are having a difficult time, mentally or emotionally, and would like to talk to a

behavioral health professional, we can help you find a provider. Call us at **1-866-316-3784 (TTY: 711)**. You will be able to speak with a case manager, who can help you find providers in your area. We are here to support you with your physical and emotional health. You are valued as a member, and we are honored to be a part of your journey of hope, health and wellness.



### **Get rewarded for getting care!**

Aetna Better Health of Michigan offers gift cards and other rewards for receiving certain care. For more information about our incentive programs, call Member Outreach at **1-855-737-0770 (TTY: 711)**.

### Need help? Go online

### Turn to AetnaBetterHealth.com/Michigan

From the Member Home Page (For Members), click on "Member Handbook Quick Reference" to learn about the following:

- How to reach us: by phone and after hours
- How to use language assistance and interpreter services
- Benefits and services covered in your plan
- Plan restrictions or exclusions from coverage
- Co-pays and/or other charges you may be responsible for
- Benefit restrictions for services obtained outside the network or service area
- Information on participating practitioners, including contact information, specialty, qualifications and educational background
- How to get primary care services, including points of access
- How to get specialty care, second opinions, behavioral health care and hospital

- services through either your primary care provider or self-referral
- How to get care after normal business hours
- How to get emergency care, including when to go to the emergency room or call 911 services
- How to get care and coverage outside the service area
- How to file a complaint by phone or in writing
- How to file an appeal
- How new technology is evaluated
- What utilization management (UM) is, how we make decisions, how to contact our UM department and our affirmative statement about incentives
- Population Health and Care Management programs, including eligibility; the referral process for member, caregiver or doctor; and opting in or out of a program



 Information about pharmacy procedures

Want to know how we are doing? From the Member Home Page, click on "Resources & Services," then "Quality Matters" and then on "Quality Report." This information can also be found in the Member Handbook. Your updated Member Handbook is on our website under "Member Materials" in the member tab.

For a printed copy of anything on our website, call Member Services at 1-866-316-3784 (TTY: 711).

## Don't let stigma get in your way!

Stigma about mental health leads to false beliefs. It stops people from getting the help they need. Mental health illnesses are like physical health illnesses. With treatment, people feel better and recover. For assistance, please call the Care Management department at 1-855-676-5772 (TTY: 711).

## We can help!

Do you need help finding transportation, food for your family, housing, utility assistance, or other services that will help you and your family? Our case managers are available to help you locate what you need in your community.



Please call our Care Management department 🖶 at **1-855-676-5772 (TTY: 711)**.

### Need nonemergency medical care after hours?

You can call your primary care provider (PCP) for non-emergency medical problems for you or your child 24 hours a day, 7 days a week. On-call health care professionals will help you with any care and treatment you need for you or your child.

Aetna Better Health of Michigan has a toll-free nurse hotline at **1-866-711-6664** (**TTY: 711**) that you can also call 24 hours a day, 7 days a week. A nurse will talk with you about your urgent health matters.

If you or your child has an emergency, call **911** or go to the nearest hospital.

## Catch up on preventive care

Early on in the COVID-19 pandemic, many people put off in-person doctor visits in order to help slow the spread of the coronavirus. For you and your family, that may have meant avoiding some routine care. But now it's time to catch up on any preventive health services you missed.

#### A good way to stay healthy

Preventive care includes screening tests, vaccines and wellness checkups that help you stay healthy.

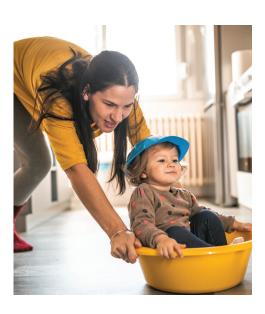
It includes things like:

- Mammograms and Pap tests for women
- Screenings for heart disease and cancer
- Childhood vaccines and wellchild visits
- Flu and pneumonia shots

 Routine checkups where you can get advice about diet, exercise and safety

Aetna Better Health of Michigan covers preventive care services like these. So don't put them off. It's safe to visit your doctor again — and doing so helps keep you and your family healthy.

Sources: American Academy of Family Physicians; HealthCare.gov



## Has your personal information changed?

Any changes in phone number, email or address should be reported to the Michigan Department of Health and Human Services. You can do this by going to the MI Bridges website at **Michigan.gov/MIBridges**. If you do not have an account, you will need to create an account by selecting "Register." Once in your account, when reporting changes, please make sure you do so in both the profile section and the Report Changes area. The Report Changes area is what the local office will use to update the address for your case.

### 24-hour Nurse Line

Do you have a medical question and don't know what to do? Call our 24-hour Nurse Line. Our Nurse Line can help answer specific health questions. You can also get advice on what to do when you need health care. The toll-free number for the Nurse Line is 1-855-676-5772 (TTY: 711). You can also find the Nurse Line number on the back of your Aetna Better Health ID card.

### Be prepared with an advance directive

Staying healthy is a goal we all want. However, sometimes things happen all of a sudden.

It's always good to prepare for things we don't expect.

Advance directives help you be prepared. Advance directives are instructions about your medical care if you are not able to make those decisions.

An advance directive becomes your voice when you can't say what you want or speak for yourself. Advance directives can also say who makes medical decisions for you when you can't.

#### There are two kinds of advance directives:

- A living will is a document that says what medical care you want or don't want. It is used in the event that you are not able to speak for yourself.
- A health care power of attorney is a legal document that says who can make medical decisions for you. It is also used when you are not able to speak for yourself.

For more information about advance directives, visit our website: **AetnaBetterHealth.com/Michigan**.

## **Get help with Aunt Bertha**

Need help, or know someone who does? Aetna Better Health of Michigan makes it easy for its members with social need to find and connect to over 10,000 free and reduced-cost programs for services such as food, shelter, health care, work, financial assistance and more. Try it out today by visiting Aetna-MI.AuntBertha.com. It's as easy as entering your ZIP code, searching through the services and connecting directly online by email or phone.

Need help searching?
Contact Member Services at
1-866-316-3784 (TTY: 711).

## When you have a complaint or grievance

We take complaints and appeals very seriously. We want to know what's wrong so we can improve our services. Enrollees can file a grievance or make an appeal if they are not satisfied. A network provider may act on behalf of an enrollee with the enrollee's written consent. With that authorization, the provider may file a grievance or request an appeal and a State Fair Hearing.

We inform enrollees and providers of the complaints, appeals and State Fair Hearing procedures. This information is

also contained in the enrollee handbook and provider handbook. When requested, we give enrollees reasonable assistance in completing forms and taking other procedural steps. Our assistance includes, but is not limited to, interpreter services, alternate formats, and toll-free numbers that have adequate TTY/TTD and interpreter capability.

#### How to file a complaint

We want to keep our members happy. We know there are times when members have questions or concerns about the service that they receive. When this happens, feel free to call Member Services at 1-866-316-3784 (TTY: 711). We will try to clear up any concerns as quickly as possible. If you're still not happy, we have procedures for addressing vour concerns. For a more complete explanation of the grievance and appeal process, please see Section 10 of the Certificate of Coverage. You may also call Member Services at 1-866-316-3784 (TTY: 711) or visit our website.

#### What do we use to make decisions?

Medical necessity criteria are guidelines that our doctors use to decide if a service or procedure is needed to treat your child's condition or illness. If you have received a letter saying that a service or procedure has been denied, you have the right to request a copy of the guidelines used by our doctor. You also have the right to appeal our doctor's decision. For additional information, call our Member Services number at **1-866-316-3784 (TTY: 711)**.





If your child sees a behavioral health doctor or any other specialist, be sure to tell their primary care provider. The PCP can help support your child's care.

### Fraud and abuse: What to know

Fraud, abuse and waste are widespread in the health care industry and generally result in the increase of health care costs. The health plan is dedicated to fighting fraud, abuse and waste through its Fraud Prevention Program. This program is designed to detect and eliminate health care fraud, abuse and waste.

## Some common examples of fraud and abuse are:

- Billing for services never provided
- Billing for more expensive services than were actually provided
- Incorrectly stating a diagnosis to get higher payments
- Performing unnecessary services to get higher payments
- Misrepresenting noncovered procedures as medically necessary

 Selling or sharing a member's identification number for the purpose of filing false claims

If you think you have seen or heard of fraud, waste or abuse happening, you have a right — and the duty — to report it. You can do so without leaving your name.

#### Here's how:

- Call the Aetna Better Health compliance hotline at 1-855-421-2082 (TTY: 711).
- Use the fraud and abuse form on the website:
   AetnaBetterHealth.com/ Michigan/fraud-abuse

You can also contact the Michigan Department of Health and Human Services, Office of Inspector General (OIG) to make a fraud, waste or abuse referral. Their contact phone number is **1-855-MI-FRAUD** 

(1-855-643-7283), 8 AM to 5 PM. You may leave a voicemail message after hours.

You can also use the following to report fraud and abuse to the MDHHS OIG:

- 1. MDHHS OIG main website:
  Go to Michigan.gov/MDHHS.
  Under "Inside MDHHS," click
  "Office of Inspector General,"
  then "Contact Us" and then
  "Report Medicaid Fraud."
- 2. **Submit an online complaint form:** Follow the above
  steps, then click the link for
  "ONLINE COMPLAINT."
- 3. **Mail:** Office of Inspector General PO Box 30062 Lansing, MI 48909
- 4. Email: **MDHHS-OIG@ Michigan.gov**

### Try MyActiveHealth today

Great news! As part of your health benefits, you're automatically a member of **MyActiveHealth.com**.

MyActiveHealth is a secure, online site that has all the health information that's important to you in one convenient place.

MyActiveHealth includes a Personal Health Record. There, you can store all your health data and medical history for easy access.

With MyActiveHealth, your health information works hard to help you take better care of yourself. MyActiveHealth is also your personal gateway to lots of other great health programs and services.

Here are some of the things you can do at **MyActiveHealth.com**:

- Create email reminders of doctor appointments and record them on a calendar.
- Use a computer to access your secure Personal Health Record and share health information, even at the doctor's office.
- See the most important steps you can take to improve your health.
- Listen to a podcast, watch a video or print out materials on health topics.
- Get the latest news on issues important to your health.
- Find out about resources and programs available to you.
- Check potential drug interactions.
- Find and print out recipes for great-tasting, healthy eating.



Go to **MyActiveHealth.com** to get started. MyActiveHealth is free. You can log on 24 hours a day, 7 days a week.

# Family planning services available at no cost

We cover family planning services for women of all ages. The following services are provided at no cost to you.

- Family planning education and counseling
- Birth control

One type of birth control that you can ask your doctor about is long-acting reversible contraceptives (LARCs).

#### These include:

- Intrauterine devices (Mirena and Paragard)
- Subdermal contraceptive implants (Nexplanon)

#### How can LARCs benefit you?

- They help prevent unwanted pregnancies.
- They are safe for women of all ages.
- They can be inserted right after you have a baby.
- They will not affect your fertility.

Call your doctor today to see if a LARC is the right choice for you. If you need help making an appointment or to get a ride to your doctor's office, just call Member Services at the number on the back of your ID card or 1-866-316-3784 (TTY: 711).

We're available 24 hours a day, 7 days a week. LARCs are a covered benefit for Aetna Better Health of Michigan members!

### **Change to our Notice of Privacy Practices**

Recently we added an update to our Notice of Privacy Practices. Here is what we added:

## Race/ethnicity, language, sexual orientation and gender identity data

We may get information related to your race, ethnicity, language, sexual orientation and gender identity. We protect this information as described in this notice. We use this information to:

- Make sure you get the care you need
- Create programs to improve health outcomes
- Create health education information
- Let the doctors know about your language needs
- Address health care disparities
- Let member-facing staff and doctors know about your pronouns

We do not use this information to:

- Determine benefits
- Pay claims
- Determine your cost or eligibility for benefits
- Discriminate against members for any reason
- Determine health care or administrative service availability or access

#### Your privacy matters

We understand the importance of keeping your personal and health information (PHI) secure and private. We are required by law to provide you with the Notice of Privacy Practices.

This notice tells you of your rights about the privacy of



your PHI. It tells you how we may use and share your personal information.

You can request a copy at any time.

Both Aetna Better Health and your providers make sure that all member records are kept safe and private.

To view the entire Notice of Privacy Practices, visit **AetnaBetterHealth.com/Michigan/privacy-policy**.

If you have any questions, Member Services can help. Just call the phone number on the back of your ID card or **1-866-316-3784 (TTY: 711)**.

### If you get a bill or statement

You should not get a bill from or have to pay a network provider for covered benefits or preauthorized services. If you get a bill, you should call the health care provider listed on the bill and make sure they have all of your insurance information. You may get a letter from us that says your child's service was denied for payment. This doesn't mean that you owe money. Most of the time you will not owe anything. If you have questions, call Member Services 1-866-316-3784 (TTY: 711).

This newsletter is published as a community service for the friends and members of Aetna Better Health® of Michigan. 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.

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#### **Nondiscrimination Notice**

Aetna complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Aetna does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex, sexual orientation or gender identity.

#### Aetna:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - o Information written in other languages

If you need a qualified interpreter, written information in other formats, translation or other services, call the number on your ID card or **1-800-385-4104**.

If you believe that Aetna has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, sexual orientation or gender identity, you can file a grievance with our Civil Rights Coordinator at:

Address: Attn: Civil Rights Coordinator

4500 East Cotton Center Boulevard, Phoenix, AZ 85040

Telephone: 1-888-234-7358 (TTY: 711)

Email: MedicaidCRCoordinator@Aetna.com

You can file a grievance in person or by mail or email. If you need help filing a grievance, our Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW Room 509F, HHH Building, Washington, D.C. 20201, 1-800-368-1019, 1-800-537-7697 (TDD).

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

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

#### **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**).

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)。

**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**)

**ALBANIAN:** VINI RE: Nëse flisni shqip, janë në dispozicion për ju shërbime përkthimi, falas. Telefononi numrin në pjesën e pasme të kartës suaj ID ose **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.

**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**).

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

**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**).

JAPANESE:注意事項:日本語をお話になる方は、無料で言語サポートのサービスをご利用いただけます。 IDカード裏面の電話番号、または **1-800-385-4104** (TTY: **711**)までご連絡ください。