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# Member Quick Reference Guide



## CHOOSING YOUR PRIMARY CARE PROVIDER (PCP)

Your PCP is an important part of your health care team. When selecting your PCP, keep in mind you can choose one that shares your beliefs, language or other cultural preferences.

### How do I pick my PCP?

- ✓ **Choose a PCP** that is in the Aetna Better Health® of Oklahoma provider network. You can find the list of all doctors, clinics, hospitals, labs and others who partner in our provider directory. Just visit our website at **[AetnaBetterHealth.com/Oklahoma](https://www.AetnaBetterHealth.com/Oklahoma)** to look at the provider directory online.
- ✓ **Pregnant members** can choose to be assigned a PCP that provides obstetrical care.
- ✓ **Each eligible family member** doesn't have to choose the same PCP.
- ✓ **If you don't pick a PCP**, we'll pick one for you.
- ✓ **If you're an American Indian/Alaska Native individual**, you may choose an Indian Health Care Provider as your PCP, but you don't have to.

PCP changes are effective immediately. You will get a new Aetna Better Health of Oklahoma ID card with the name of your new PCP.

It's important for you to have a good relationship with your PCP. This will help you get the health care you need.

You can change your PCP at any time, for any reason. If you want to choose or change your PCP to another provider in our network, call Member Services at **1-844-365-4385** **(TTY: 711)**. You can also make PCP changes on our member portal and mobile app.







## LANGUAGES AND FORMATS

This information is available for free in other languages and formats, including Braille or large print. Just call Member Services at **1-844-365-4385 (TTY: 711)** to request other formats or languages. Member Services is available 24 hours a day, 7 days a week.

### Member portal

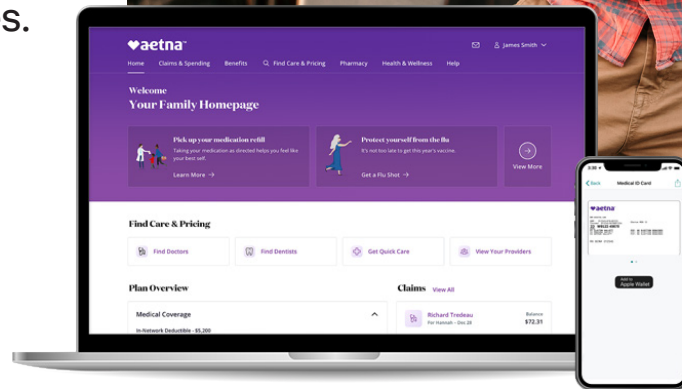
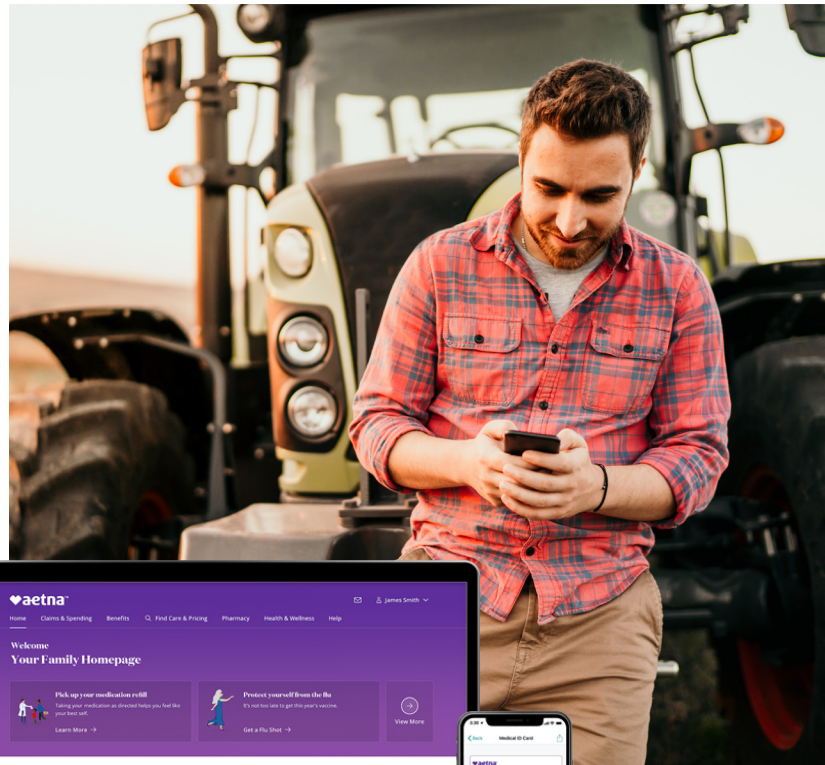
Get the most out of your health plan. Sign up for our personalized, secure member web portal. You can use the site to manage your plan benefits and meet your health goals.

The site lets you:

- Change your PCP
- Update your contact information
- Find forms
- Get a new member ID card
- View your personal health history
- Track your health goals
- See the status of your claim

Member portal navigation guides are available in English and Spanish

If you're ready to start using this secure online tool, you can register online. Or you can sign up over the phone by calling Member Services at **1-844-365-4385 (TTY: 711)**, 24 hours a day, 7 days a week. Keep in mind you'll need your member ID and a current email address to create an account.



### Mobile app

You can find a provider, check claims, change your PCP, view or order a new ID card and even see your current medications on your smartphone. It's easy to use this app. The Aetna Better Health App is available from both the Apple App Store for iPhone and Google Play Store for Android.



App Store



Google Play

### Your member ID card

Each eligible member of your family should have received an Aetna Better Health ID card. It was mailed separately from this packet. Carry your ID card with you. Use it whenever you go to your provider or hospital. Keep it safe. Never let anyone else use your ID card.

If anything on the ID card is wrong or you lose it, call Member Services at **1-844-365-4385 (TTY: 711)**. We'll send you another one.



## GET THE RIGHT CARE AT THE RIGHT TIME



### Primary care

When the doctor's office is open.

- Sore throat
- Cough
- Bronchitis
- Earache
- Skin rash
- Sinus infection
- Toothache
- Pink eye



### Urgent care

When the doctor's office is closed.

- New back pain
- Urinary tract infections
- Small cuts
- Migraines
- Sprains & strains
- Flu



### ER

All times of day.

- Trouble breathing
- Chest pain
- Head injury
- Slurred speech
- Seizure
- Broken bones

In the case of a life-threatening emergency, call **911**.

For mental health emergencies, call **988**.



### Our 24-hour nurse line

You and your family can get health advice when you need it. Simply call **1-844-365-4385 (TTY: 711)**. Nurses are always ready to help.





## INFORMATION

### Member handbook

Find information on how to get care and use your benefits. Your handbook also has important phone numbers and helpful resources. You can find it on our website in English and Spanish at [AetnaBetterHealth.com/Oklahoma](https://www.AetnaBetterHealth.com/Oklahoma). It's also available on the secure member portal and the Aetna Better Health mobile app.

Some of the information in your member handbook includes:

- Your rights and responsibilities as a member
- List of all covered benefits
- How to file a complaint against a provider or your health plan
- How to file a grievance or appeal

### Your information

It's important that we have your correct contact info. If we can't reach you, you may miss important updates.

If you change your address, phone number, or family size, or if you move out of the state or country, call Member Services at **1-844-365-4385 (TTY: 711)**.

## Two ways to get your Member handbook:

### 1. DIGITAL



[\*\*AetnaBetterHealth.com/Oklahoma\*\*](https://www.AetnaBetterHealth.com/Oklahoma)

### 2. PRINT



Just call Member Services at **1-844-365-4385 (TTY: 711)** and we'll mail you a copy at no cost.





## CARE MANAGEMENT PROGRAM

After you enroll, we'll ask you about your current and past health care needs. Together, we'll complete a health risk screening for you. These will let us know if you have special health care needs. If you have complex conditions, you may benefit from our Care Management Program. A care management staff member may call you to see if you'd like to join the program.

Our care managers can help you access care and coordinate services. Your provider can also talk to you about our care management programs.

### What you can expect from care management

We empower you to take charge of your health by supporting you through your health journey. You'll get easy-to-use tools and access to resources so you can better take care of yourself. You can change your PCP at any time for any reason. If you want to choose or change your PCP to another provider in our network, call Member Services at **1-844-365-4385 (TTY: 711)**. You can also make PCP changes on our member portal and mobile app.

### Registering for our Care Management Program

Just call Member Services at **1-844-365-4385 (TTY: 711)** and ask for care management. The program is voluntary and you can stop taking part at any time.

You also have access to special programs to help you get the care you need. These programs can help you manage conditions, prevent health problems and stay as healthy as you can. For more information visit our website at **[AetnaBetterHealth.com/Oklahoma](https://www.aetna.com/oklahoma)**.












### Care managers can help you manage conditions such as:

- ✓ Pregnancy
- ✓ Asthma
- ✓ Coronary artery disease (CAD)
- ✓ High blood pressure
- ✓ Diabetes
- ✓ Heart failure
- ✓ Chronic obstructive pulmonary disease (COPD)
- ✓ Depression
- ✓ HIV
- ✓ Hepatitis C
- ✓ Kidney disease
- ✓ Readmissions Avoidance Program





## WELLNESS ACTIVITIES

Wellness activity		Who needs it/When
<b>Well-child checkup</b>		<b>All children</b> prior to turning 2 and ages 4-6. ■ Birth to age 2 and ages 4-6.
<b>Childhood immunizations</b>		<b>All children</b> <b>Birth – 15 months</b> should have 6 visits. <b>Ages 15-30 months</b> should have 2+ visits. <b>Ages 3+</b> should have a yearly well-child checkup. ■ 1x / year
<b>Annual flu shot</b>		<b>Ages 6 months+</b> ■ 1x / year
<b>Adolescent Immunizations</b>		<b>Ages 0-13</b> ■ 1x / year
<b>Chlamydia screening</b>		<b>Women ages 16-24</b> ■ 1x / year
<b>Skin cancer screening</b>		<b>Adults age 20+</b> ■ 1x / 3 years
<b>Yearly physical exam</b>		<b>All adults</b> ■ 1x / year
<b>Cervical cancer screening</b>		<b>Women ages 21+</b> ■ 1x / 3 years
<b>Mammogram</b>		<b>Women age 40+;</b> women under age 40 with family history of breast cancer ■ 1x / year
<b>Prostate cancer screening</b>		<b>Ages 50+;</b> age 45+ if family history ■ 1x / 1-2 years
<b>Colorectal cancer screening</b>		<b>Ages 45+</b> ■ 1x / 10 years



### Get help quitting tobacco



It's not easy to quit tobacco, so here's a few ways to get help:

- Call us at **1-844-365-4385 (TTY: 711)** and ask to speak to a care manager about our tobacco cessation services.
- As part of your covered benefit you can receive up to eight tobacco cessation counseling sessions per year.
- Ask your PCP for their advice.
- Call the Oklahoma Tobacco Helpline at **1-800-QUIT NOW**.

### Suicide Prevention Lifeline – 988

You have many resources and support services available to support with any mental health crisis and unexpected life events. Aetna Better Health of Oklahoma has information available for The National Suicide Prevention Lifeline. The National Suicide Prevention Lifeline is ready to help with those unexpected life events and can be reached in three easy ways:

- 1 Text to **988**
- 2 Call to **988**
- 3 Chat online at **988lifeline.org**

Anyone who calls the **988** phone number will immediately be connected to the Lifeline call centers for safe, supportive and confidential mental health services.



### Telemedicine



Many network providers offer telehealth services. Check with your provider's office and ask if they offer this service.





## Explore MinuteClinic Virtual Care™



This virtual video-based care makes it easy to see a qualified provider anytime. They treat patients 18-plus months for illnesses and injuries.

### Get care quickly from the comfort of home

Visit with a licensed provider over video in minutes. Whether you are 200 miles from home or at home, you can get virtual care and your prescriptions refilled within minutes.



## HOW VIRTUAL CARE WORKS

- 1 Get matched with a provider**  
Tell us about yourself, your reason for visiting. We'll make sure you can use our telemedicine service. Then we'll match you with a provider, who can see you within minutes.
- 2 Start the visit**  
When the provider is ready, we'll email and text a link to join the video visit. You can use your smartphone, tablet or computer.
- 3 Tell the provider your concerns**  
Talk about the reason for your video visit with a provider. You can share pictures if you'd like.
- 4 Get a treatment plan**  
Your provider will diagnose your concerns and give you care options, including writing prescriptions *(if medically necessary)*.  
  
Don't use virtual care for emergencies *(like chest pain or difficulty breathing)*. Call **911** immediately.

## Grievances and appeals

We try our best to deal with your concerns or issues quickly and to your satisfaction. You may use our grievance process or our appeal process. It depends on what problem you have. There will be no change to your service if you file a grievance or an appeal. Our staff or a health care provider will not treat you differently. We will maintain your privacy.

We can help you file a grievance or appeal. This includes providing you with interpreter services or help if you have vision and/or hearing problems. You may also choose someone like a relative, friend or provider to represent you. Call Member Services at **1-844-365-4385 (TTY: 711)** available 24 hours a day, 7 days a week to file a grievance or an appeal.

## Fraud, waste and abuse

It's important to report dishonest acts. These dishonest acts are called fraud, waste and abuse. The following acts are the most common types of fraud, waste and abuse:

- Members selling or lending their ID card to someone else
- Members trying to get drugs or services they do not need
- Members forging or altering prescriptions they receive from their providers
- Providers billing for services they didn't give
- Providers giving services members do not need
- Verbal, physical, mental or sexual abuse by providers

Call our **fraud and abuse hotline** at **1-844-365-4385 (TTY: 711)**, 24 hours a day, 7 days a week, to report these types of acts. You can do this without us knowing your name. Or you can fill out the fraud, waste and abuse form at **[AetnaBetterHealth.com/Oklahoma](https://www.AetnaBetterHealth.com/Oklahoma)**.

## Join our Advisory Committee(s)

We value your ideas and suggestions. Aetna Better Health has two advisory committees that meet quarterly.

The Advisory Committee and the Behavioral Health Advisory Committee. Some of the topics we'll discuss during these meetings are:

- Member activities and materials
- Quality improvements
- Grievance and appeals

We'll assist you with travel arrangements to the meetings including travel costs. We hope you'll join us. For more information on our Advisory Committees just call Member Services at **1-844-365-4385 (TTY: 711)**.





## NOTICE OF PRIVACY PRACTICES

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

### **This notice takes effect on April 1, 2024.**

What do we mean when we use the words “health information”<sup>1</sup>

We use the words “health information” when we mean information that identifies you. Examples include your:

- Name
- Date of birth
- Health care you received
- Amounts paid for your care

### **How we use and share your health information**

Help take care of you: We may use your health information to help with your health care. We also use it to decide what services your benefits cover. We may tell you about services you can get. This could be checkups or medical tests. We may also remind you of appointments. We may share your health information with other people who give you care. This could be doctors or drug stores. If you are no longer with our plan, with your okay, we will give your health information to your new doctor.

**Family and friends:** We may share your health information with someone who is helping you. They may be helping with your care or helping pay for your care. For example, if you have an accident, we may need to talk with one of these people. If you do not want us to give out your health information, call us.

If you are under 18 and don’t want us to give your health information to your parents. Call us. We can help in some cases if allowed by state law.

**For payment:** We may give your health information to others who pay for your care. Your doctor must give us a claim form that includes your health information. We may also use your health information to look at the care your doctor gives you. We can also check your use of health services.

**Health care operations:** We may use your health information to help us do our job.

For example, we may use your health information for:

- Health promotion
- Case management
- Quality improvement
- Fraud prevention
- Disease prevention
- Legal matters

A case manager may work with your doctor. They may tell you about programs or places that can help you with your health problem. When you call us with questions, we need to look at your health information to give you answers.

<sup>1</sup>For purposes of this notice, “Aetna” and the pronouns “we,” “us” and “our” refer to all the HMO and licensed insurer subsidiaries of Aetna Inc. These entities have been designated as a single affiliated covered entity for federal privacy purposes.



## **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 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

## **Sharing with other businesses**

We may share your health information with other businesses. We do this for the reasons we explained above. For example, you may have transportation covered in your plan. We may share your health information with them to help you get to the doctor's office. We will tell them if you are in a motorized wheelchair, so they send a van instead of a car to pick you up.

## **Other reasons we might share your health information**

We also may share your health information for these reasons:

- **Public safety** – To help with things like child abuse and threats to public health.
- **Research** – To researchers, after care is taken to protect your information.

- **Business partners** – To people who provide services to us. They promise to keep your information safe.
- **Industry regulation** – To state and federal agencies. They check on us to make sure we are doing a good job.
- **Law enforcement** – To federal, state and local enforcement people.
- **Legal actions** – To courts for a lawsuit or legal matter.

## **Reasons that we will need your written okay**

Except for what is explained here, we will ask for your okay before using or sharing your health information. For example, we will get your okay:

- For marketing reasons that have nothing to do with your health plan.
- Before sharing any psychotherapy notes.
- For the sale of your health information.
- For other reasons as required by law.

You can cancel your okay at any time. To cancel your okay, write to us. We cannot use or share your genetic information when we make the decision to provide you health care insurance.

## **Your rights**

You have the right to look at your health information.

- You can ask us for a copy of it.
- You can ask for your medical records. Call your doctor's office or the place where you were treated.

You have the right to ask us to change your health information.

- You can ask us to change your health information if you think it is not right.
- If we don't agree with the change, you asked for. Ask us to file a written statement of disagreement.

You have the right to get a list of people or groups that we have shared your health information with.

You have the right to ask for a private way to be in touch with you.

- If you think the way we keep in touch with you is not private enough, call us.
- We will do our best to be in touch with you in a way that is more private.

You have the right to ask for special care in how we use or share your health information.

- We may use or share your health information in the ways we describe in this notice.
- You can ask us not to use or share your information in these ways. This includes sharing with people involved in your health care.
- We don't have to agree. But we will think about it carefully.

You have the right to know if your health information was shared without your okay.

- We will tell you if we do this in a letter.

Call us toll free at  
**1-844-365-4385 (TTY: 711)** to:

- Ask us to do any of the things above.
- Ask us for a paper copy of this notice.
- Ask us any questions about the notice.

You also have the right to send us a complaint. If you think your rights were violated, write to us at:

Aetna HIPAA Member Rights Team  
P.O. Box 14079  
Lexington, KY 40512-4079  
Fax: **1-859-280-1272**

You also can file a complaint with the Department of Health and Human Services, Office of Civil Rights. Call us to get the address at **1-844-365-4385 (TTY: 711)**.

If you are unhappy and tell the Office of Civil Rights, you will not lose plan membership or health care services. We will not use your complaint against you.

## **Protecting your information**

We protect your health information with specific procedures, such as:

- Administrative. We have rules that tell us how to use your health information no matter what form it is in – written, oral or electronic.
- Physical. Your health information is locked up and is kept in safe areas. We protect entry to our computers and buildings. This helps us to block unauthorized entry.
- Technical. Access to your health information is “role-based.” This allows only those who need to do their job and give care to you to have access.

We follow all state and federal laws for the protection of your health information.

## **Will we change this notice?**

By law, we must keep your health information private. We must follow what we say in this notice. We also have the right to change this notice. If we change this notice, the changes apply to all of your information we have or will get in the future. You can get a copy of the most recent notice on our website at **[AetnaBetterHealth.com/Oklahoma](https://www.aetna.com/BetterHealth.com/Oklahoma)**.



## Aetna Better Health® of Oklahoma

### Nondiscrimination Notice

Aetna Better Health 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, sex, health status or need for health care services.

Aetna Better Health:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - o Qualified sign language interpreters
  - o 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:
  - o 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 Better Health has 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 Civil Rights Coordinator at:

Address: Attn: Civil Rights Coordinator  
P.O. Box 818001  
Cleveland, OH 44181-8001  
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>**.

This notice is available at the Aetna Better Health website: **[AetnaBetterHealth.com/Oklahoma](https://www.aetna.com/oklahoma)**.

Aetna Better Health 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 **1 844-365-4385** (TTY: **711**).

**SPANISH: ESPAÑOL: ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1 844-365-4385 (TTY: 711)**.

**VIETNAMESE:** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **1 844-365-4385** (TTY: **711**).

**TRADITIONAL 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 **1 844-365-4385 (TTY: 711)**。

**KOREAN:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.  
1 844-365-4385 (TTY: 711).

**GERMAN: ACHTUNG:** Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1 844-365-4385** (TTY: **711**).

**Arabic:** ملاحظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم (711: TTY) 844-365-4385.

**HMONG:** LUS CEEV: Yog tias koj hais Lus Hmoob, ces yuav muaj kev pab txhais lus pub dawb rau koj. Hu rau **1 844-365-4385** (TTY: **711**).

**TAGALOG:** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1 844-365-4385** (TTY: **711**).

**FRENCH:** ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1 844-365-4385** (TTY: **711**).

**LAO:** ໂປດຊາບ: ຖ້າວ່າທ່ານເວົ້າພາສາລາວ, ຈະມີການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໂດຍບໍ່ເສຍຄ່າໃຫ້ແກ່ທ່ານ.  
ໂທຫາເບີ 1 844-365-4385 (TTY: 711).

**THAI:** เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร **1 844-365-4385 (TTY: 711).**

[illegible]

**Farsi:** توجه : اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با شماره (711 : TTY) 1 844-365-4385 تماس بگیرید.

**Urdu:** خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں  
1 844-365-4385 (TTY: 711)

**BURMESE:** မြန်မာ - သတိ - သင်မြန်မာစကားပြောဆိုပါက သင့်ထံ ဘာသာစကား ကူညီပံ့ပိုးရေး ဝန်ဆောင်မှုများကို အခမဲ့ ပေးဆောင်သွားပါမည်။ သင့်အိုင်ဒီကတ်၏ကျောဘက်ရှိ နံပါတ် သို့မဟုတ် **1 844-365-4385 (TTY: 711)** သို့ ခေါ်ဆိုပါ။



# Here's to your best health



## Important phone numbers

**Member services** (24/7)  
**1-844-365-4385 (TTY: 711)**

**Nurse Line** (24/7)  
**1-844-365-4385 (TTY: 711)**

**Transportation Services**  
**1-844-365-4385 (TTY: 711)**

**Vision**  
**1-844-365-4385 (TTY: 711)**

**Pharmacy**  
**1-844-365-4385 (TTY: 711)**

**To Report Fraud or Abuse**  
**1-844-365-4385 (TTY: 711)**

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**[AetnaBetterHealth.com/Oklahoma](https://www.aetna.com/BetterHealth.com/Oklahoma)**

