

All smiles



AetnaBetterHealth.com/Virginia

Aetna Better Health® of Virginia

Without delay: Get your flu shot — it's free!

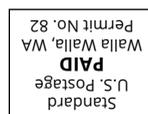
Here are 7 great reasons to get your flu shot.

- 1. Immunization is the No. 1** best way to prevent the flu. With rare exceptions, everyone 6 months and older needs a yearly flu vaccine.
- 2. Spare yourself.** The flu can bring miserable symptoms and lead to missing work or school.
- 3. Influenza makes some people seriously ill.** Every year, flu complications lead to hospital stays — and even deaths.
- 4. Viruses tend to change each flu season.** Scientists review U.S. flu vaccines yearly to make sure they best match circulating viruses.
- 5. Influenza spreads.** Be ready — get vaccinated as promptly as possible.
- 6. Flu vaccines have a solid safety record.** Vaccines can't give you the flu — and serious side effects are very rare.
- 7. Shot or spray?** You can have it your way. Flu vaccines are available as shots or nasal sprays.*

**The nasal spray is an option for healthy people ages 2 through 49 years who are not pregnant.*

Source: Centers for Disease Control and Prevention

Step up for your protection! Visit a flu shot clinic near you. For more information, go to AetnaBetterHealth.com/Virginia.





Join our Member Advisory Committee.

We need the support and input of people with your experience and insight as part of our Member Advisory Committee. This committee is made up of Aetna Better Health members, their family, and community advocates. We meet four times a year to discuss important topics related to your health and well-being.

Being a part of this committee has many benefits. It will allow you to:

- Voice your opinion on issues that are important to you and your family as an Aetna Better Health member
- Learn about your benefits and services and how we can improve them together
- Network with other members in the community to find better care

In response to COVID-19, our meetings are currently being held virtually. This means you don't even have to leave your home. We will call or email you the telephone number and agenda before each meeting.

For more information on the Member Advisory Committee or if you would like to join, please call **1-855-652-8249 (TTY: 711)**.

We're here for you.



COVID-19 is a contagious respiratory illness. The virus can spread from person to person. And Aetna Better Health of Virginia is committed to serving you and your family during this time.

That's why we created a special section on our website to talk about COVID-19 at **AetnaBetterHealth.com/Virginia**. Select "For Members." There, you will find important information and updates.

Important information for members, parents, and guardians.

Each year, we like to remind you to review some important information in your member handbook. This is the handbook we sent you when you joined Aetna Better Health of Virginia. It is updated every year. You may have also seen the information in your member newsletters or on our website.

This information helps you stay active and informed. It can help you when making health care choices for yourself or your child. This notice gives a quick overview of what you need to know. You can find more details in your member handbook or on our website. Just visit **AetnaBetterHealth.com/Virginia**.

Didn't receive a member handbook? Call Member Services to request one. Call **1-855-652-8249 (TTY: 711)**. They are available 24 hours a day, 7 days a week. You can also read it on our website. Go to **AetnaBetterHealth.com/Virginia**. Select "For Members." Then, select "Medallion/FAMIS." Now, select "Handbook."

How to request materials in another language or format

You can request a printed copy of your member handbook in large print or in other languages. We can translate it into a language other than English. We can provide it in an alternate format too. Just call

Member Services. We can also mail it to you. It's free.

You have rights and responsibilities

We strive to treat you with respect and dignity. We do not discriminate against members based on age, race, sex, religion, national origin, or any other reason that's against the law. Our providers must also follow the same standards.

You have certain rights and responsibilities as well. Knowing them helps you get the covered services you need. You'll find your rights and responsibilities listed in your member handbook

and on our website. Go to **AetnaBetterHealth.com/Virginia**. Select "For Members." Then, under "Medicaid and FAMIS," select "Rights and Responsibilities." If you have any questions or would like a copy of your rights and responsibilities, call Member Services. A copy can be mailed to you. It's free.

Quality improvement at Aetna Better Health of Virginia

Our Quality Management department wants to make sure you get good care and services.

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Important information for members, parents, and guardians.

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That includes:

- Health management programs that work for you
- Easy access to quality medical and behavioral health care
- Help with any complex or chronic conditions or illnesses
- Support when you need it most
- High satisfaction with your doctors and with us

Our quality improvement activities each year include:

- Contacting you to remind you to get care (like well-child checkups)

- Sending you postcards or newsletters about health topics
- Reviewing the number, quality, and kinds of services you receive
- Reminding you and your doctors about preventive health care
- Making sure you're continuing to get the care you need
- Checking that your calls are answered quickly and that you get the right information
- Ensuring your doctor has all the information needed to care for you or your child

We have many more quality programs. You can call Member Services at **1-855-652-8249 (TTY: 711)** to learn more about what we do to improve your care. We're also happy to give you a printed copy of our program goals and how we're doing. Or you can read updates in our secure member portal at **Medicaid.Aetna.com**.

Privacy and security of your health care data

Protecting your personal health information (PHI) is one of our most important jobs. We train our staff to keep your health care data safe. We set rules to follow when collecting and using PHI. Our rules describe:

- How to protect access to PHI, including electronic and paper copies
- The right way to treat your health care data
- Your right to allow or refuse the release of PHI except for treatment, payment, or health care operations reasons
- Locking up your records and keeping your health care data in safe areas
- Making sure the only staff who have access to your health care data are those who need it to perform their jobs and care for you

We're happy to answer any questions you have about how we protect your health care data.

Your health information is kept private and confidential. We will give it out only if the law allows or if you tell us to give it out.

Notice of Privacy Practices:

We include a Notice of Privacy Practices in your welcome packet. It tells you how we use your information for health plan benefits. It also tells you how you can see, get a copy of, or change your medical records. Your health information will be kept private and confidential. We will give it out only if the law allows or if you tell us to give it out.

For more information or if you have questions, call us. Our number is **1-855-652-8249 (TTY: 711)**. You can also visit our website. Our website is **AetnaBetterHealth.com/Virginia**. You'll find a link to **log in** at the top right corner of the webpage, then a tab for information on our **privacy practices**.

Utilization management

We want to ensure that our members are getting the services or benefits they need to get or stay healthy. This is called **utilization management (UM)**. Our UM staff use clinical criteria, guidelines, and written policies to make UM decisions. They check that requested services are:

- Needed to keep or get you healthy
- Covered by Aetna Better Health of Virginia

You or your provider can get a copy of the guidelines we use to approve or deny services. You can call Member Services with questions about our UM program. Member Services may transfer your call to the UM department for a staff member to help you. After business hours, you may be transferred to our after-hours call center. Someone will take your message. We'll call you the

next business day. When calling back, the representative will tell you that he or she is calling from Aetna Better Health of Virginia and will give you their name and title.

We're here to help you with any UM issues

- For help if you have vision and/or hearing problems, call the Telecommunications Relay Service at **TTY: 711**.
- For help with language or translation services, call the number on your ID card or **1-855-652-8249 (TTY: 711)**.

Our affirmative statement about incentives

We want you to feel sure that you're getting the health care and services you need. We have policies our providers must follow to ensure that you get the right health care.

Our policy is to not reward providers or others to deny or

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Important information for members, parents, and guardians.

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give less medically necessary care to a member of our plan. This is called an affirmative statement. We do not reward or pay extra money to health care providers, staff, or other people to:

- Deny you care
- Give you less care
- Deny tests or treatments that are medically necessary

All of our members should receive the right health care. You can get more information on this by calling Member Services. Their number is **1-855-652-8249 (TTY: 711)**.

Benefits and copayments questions

You can find a list of covered and noncovered benefits and services in your member handbook and on our website. Your member handbook also discusses some costs that may be your responsibility.

Costs you may need to pay

As an Aetna Better Health of Virginia member, you are generally not responsible for paying for covered health care services. There are some exceptions though. For example, if you receive a service and your provider tells you beforehand that it's not a covered benefit, you may be responsible for paying for it.

If you get a bill from your doctor for a covered health care service, call us at 1-855-652-8249 (TTY: 711).

How to get the care you need

Your primary care provider (PCP) is a central part of your health care. Your PCP should be the one you contact first for most health care issues.

The provider directory has a list of providers to pick from in your area. You can find your own provider by visiting our website. Go to **AetnaBetterHealth.com/Virginia**. Select the "Provider Directory" tab under "For Members" to search for a provider. The online provider directory also gives a provider's professional credentials, like board certification.



For more information about our providers, you can visit our website or call Member Services. You can also visit **Healthgrades.com**. This site gives more information about providers, such as which medical school they attended and where they did their residency training.

Specialty care

Sometimes you or your child may need care from a specialist. Specialists treat special types of conditions, including behavioral health or substance use concerns. Your PCP can recommend a specialist or behavioral health care provider to you. You don't need a formal referral from your PCP as long as the specialist is in our provider network.

Let your PCP know if you visit a specialist, so he or she can support your care.

Self-referral

You can get some specialty services yourself that don't require your PCP's approval. We call this self-referral. Some examples are family planning services and behavioral health services. You must go to an Aetna Better Health of Virginia provider for your service to be covered, except for emergency services. Our members must receive family planning services from an Aetna Better Health of Virginia provider.



How to get after-hours care

Call your PCP for after-hours care, except in an emergency. If you or your child gets sick after the PCP's office is closed — even on weekends — call your PCP. An answering service will make sure the PCP gets your message. Your PCP will call you back to tell you what to do.

You can also get advice from a nurse after hours. It's available 24 hours a day, 7 days a week. Just call **1-855-652-8249 (TTY: 711)**. Ask to speak to a nurse.

How to get emergency care

If you or your child's life is in danger, you should always **call 911 or go to the nearest emergency room (ER)**. If you need transportation to the hospital, call **911**. The hospital does not have to be in our network for you to get care. If you're not sure it's an emergency, call your PCP.

You should only use an ER for real, life-threatening emergencies. An emergency is the sudden onset of a medical condition with severe symptoms, including severe

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pain. These symptoms are so serious that not getting immediate medical attention could result in:

- Loss of life or serious harm to you or another person
- A pregnant woman becoming very ill and possibly losing her unborn child
- Some bodily functions ceasing to work
- Serious harm to any body organ or part

Examples of emergencies are:

- Sharp chest pain
- Choking
- Bleeding that won't stop
- Passing out
- Poisoning
- Drug overdose
- Severe burns
- Extreme shortness of breath
- Broken bones
- Severe spasms or convulsions
- Sudden loss of feeling or not being able to move

Out-of-service-area care when you're away from home

Aetna Better Health of Virginia's service area is the Commonwealth of Virginia. If you're traveling or out of the service area, you're only covered for emergency services. Routine care out



of the service area or out of the country isn't covered by Medicaid. If you're out of the service area and need health care services, call your PCP. She or he will tell you what to do. (You can also call us to check if you're out of the service area.)

If you're not in Virginia and you think you or your child's life is in danger, go to the closest ER. Show your Aetna Better Health of Virginia ID card, your Medicaid ID card, and any other insurance ID cards you have to the ER staff. If you or your child gets services in the ER and is

admitted to the hospital, have staff call us at the number on the back of your ID card.

Out-of-network services

We have a large network of providers and services. If a provider you want to see is not in our network, your PCP must first get approval from us before you can see that provider. Except for an emergency, only your PCP can make this request. It's not something you can do yourself. If approved, we will properly and timely cover these services.

This is only for as long as you can't get the service in our network. If you have questions, please call us.

New technology for medical procedures

We're always looking at new medical procedures and methods to make sure our members get safe, up-to-date, high-quality medical care. We have a team of doctors who review new health care technologies. They decide if they should become covered services. (We don't cover investigational technologies, methods, and treatments still under research.)

To decide if a new technology will become a covered service, we will:

- Study the purpose of each technology
- Review medical literature
- Look at the effects and benefits a new technology could have
- Develop guidelines on how and when to use the technology

Grievances and appeals

We take member grievances and appeals very seriously.

We want you to be happy with services you or your child gets from us and our providers. If you're not happy, we want you to let us know. Filing a grievance or appeal will not affect your health care services or Medicaid eligibility. We want

to know what is wrong so we can make our services better.

We need to know what happened

Please give us as much information as you can. For example, include:

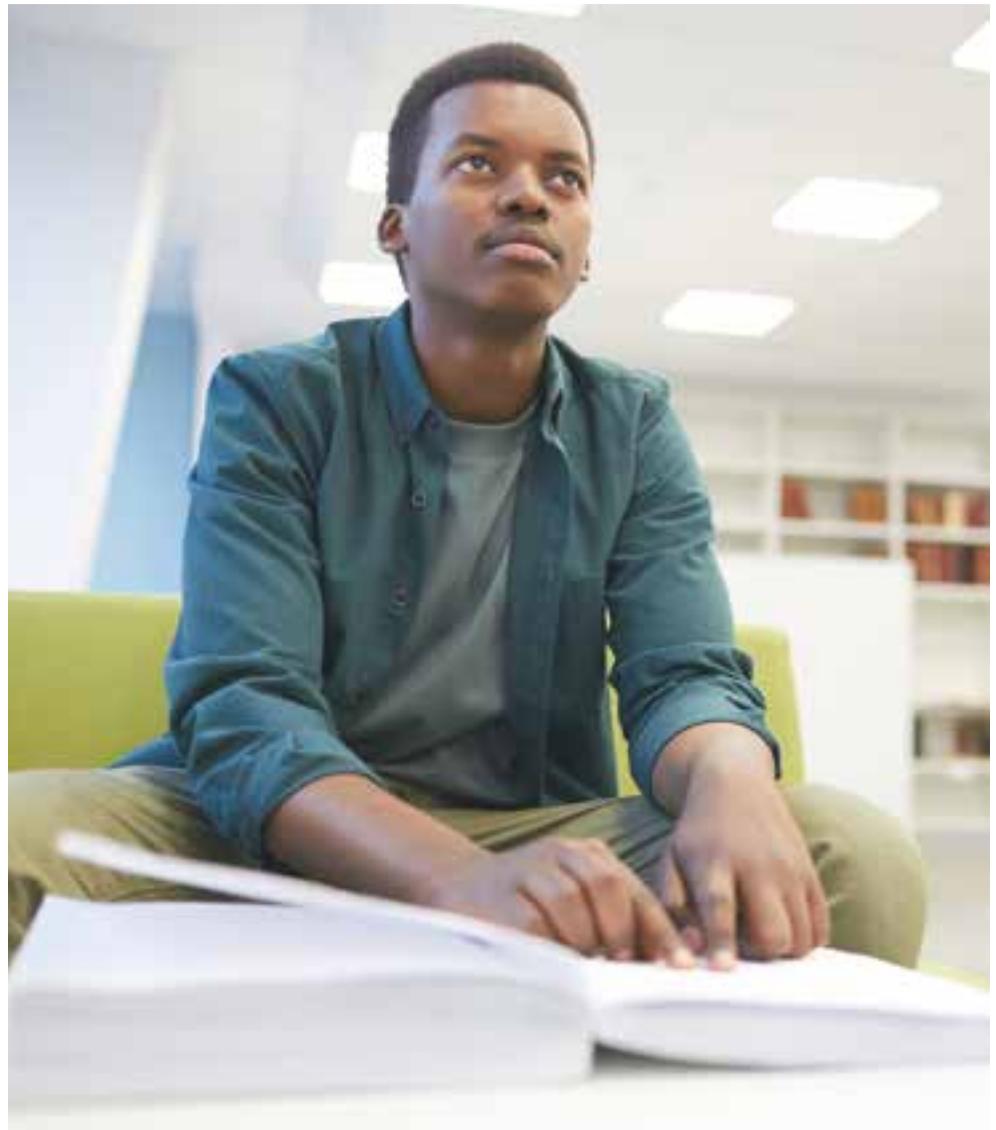
- The date the incident happened
- The names of the people involved
- Details about what happened
- Your or your child's name and member ID number

How to file a grievance

If you have a grievance, please contact us. If you want a Member Advocate, we'll help. You can file a grievance by:

- Calling Member Services
- Asking and giving permission for your provider to file a grievance for you
- Writing to us at:
Aetna Better Health of Virginia
P.O. Box 81139
5801 Postal Road
Cleveland, OH 44181

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Important information for members, parents, and guardians.

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How to file an appeal

We must approve many services ahead of time in order to pay for them. If we decide not to pay for a service, we'll write to you and tell you why. We'll send you a Notice of Action letter if we:

- Decide not to approve a request for a service
- Approve only part of a request for a service

The Notice of Action letter will tell you the reasons. If you don't agree with it, you can file an appeal. You can file your appeal by phone with Member Services or in writing. You can send the appeal as a standard appeal or an expedited (fast) appeal request. However, **you must follow up with a written request if it is not an expedited appeal, and you must submit your appeal within 60 days.**



You can write to us at:
Aetna Better Health of Virginia
PO Box 81139
5801 Postal Road
Cleveland, OH 44181

Please also make sure you write "Aetna Better Health of Virginia" on the envelope at the time of submission. For more information, please call Member Services. Their phone number is **1-855-652-8249 (TTY: 711)**.

Contact us  Aetna Better Health® of Virginia
9881 Mayland Drive
Richmond, VA 23233-1458

1-855-652-8249 (TTY: 711)
[AetnaBetterHealth.com/Virginia](https://www.AetnaBetterHealth.com/Virginia)

This newsletter is published as a community service for the friends and members of Aetna Better Health® of Virginia. 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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Non-discrimination 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.

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
 - 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, you can file a grievance with our Civil Rights Coordinator at:

Address: Attn: Civil Rights Coordinator
4500 E. Cotton Center Blvd.
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).

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.

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).

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)。

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

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).

PERSIAN: اگر به زبان فارسی صحبت می کنید، به صورت رایگان می توانید به خدمات کمک زبانی دسترسی داشته باشید. با شماره درج شده در پشت کارت شناسایی یا با شماره **1-800-385-4104** (TTY: 711) تماس بگیرید.

AMHARIC: ማሳሰቢያ፡- አማርኛ የሚናገሩ ከሆነ ያለ ምንም ክፍያ የቋንቋ ድጋፍ አገልግሎቶችን ማግኘት ይችላሉ። በአርሲዎ አይ.ዲ ካርድ ጀርባ ወዳለው ስልክ ቁጥር ወይም በስልክ ቁጥር **1-800-385-4104** (TTY: 711) ይደውሉ።.

URDU: توجہ دیں: اگر آپ اردو زبان بولتے ہیں، تو زبان سے متعلق مدد کی خدمات آپ کے لئے مفت دستیاب ہیں۔ اپنے شناختی کارڈ کے پیچھے موجود نمبر پر یا **1-800-385-4104** (TTY: 711) پر رابطہ کریں۔

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).

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).

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

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.

BENGALI: লক্ষ্য করুন: যদি আপনি বাংলায় কথা বলেন, তাহলে নিঃ খরচায় ভাষা সহায়তা পরিষেবা উপলব্ধ আছে। আপনার পরিচয়পত্রের উল্টোদিকে থাকা নম্বরে অথবা **1-800-385-4104** (TTY: 711) নম্বরে ফোন করুন।

KRU: TÛ DE NÂ JIÈ BÒ: ε yemâ wlu bèè ñ a po Klào Win, nèè â-à win kwa cetiyo+ ne-là, i belè-ò bi mà-ò mù bò kó putu bò. Dá nòbâ né ê nea-ò ñ-à jì è jìpolê katèh je ná kpòh, mòò **1-800-385-4104** (TTY: 711).

IGBO (IBO): NRỤBAMA: Ọ bụrụ na ị na asụ Igbo, ọrụ enyemaka asụsụ, n'efu, dijiri gi. Kpọọ nomba di n'azụ nke kaadi ID gi ma ọ bụ **1-800-385-4104** (TTY: 711).

YORUBA: ÀKÍYÈSÍ: Tí o bá sọ èdè Yorùbá, àwọn olùrànlọwọ̀ ipèsè èdè tí wá ní lẹ̀ fún ọ̀ lófèè, pe nọ́nbà tí ó wà lẹ̀yìn káàdì ìdánimò rẹ̀ tàbí **1-800-385-4104** (TTY: 711).