



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.

Esta es información general de salud y no debe reemplazar el asesoramiento o la atención que usted recibe de su proveedor. Siempre consúltelo a este sobre sus necesidades de atención médica.



Wellness rewards

Aetna Better Health® of Virginia

Commonwealth Coordinated Care Plus (CCC Plus)

AetnaBetterHealth.com/Virginia

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Aetna Better Health® of Virginia

Aetna Better Health of Virginia is excited to tell you about our wellness rewards program for our Commonwealth Coordinated Care Plus (CCC Plus) members. It's easy.

If you are 21 years of age or older, all you have to do is go to your doctor for the check-ups listed below and you can earn a Walmart gift card*. No prior authorization required!

Please note that there may be an annual limit on your total incentive amount that you could receive per calendar year.

- \$15 Diabetic eye exams
- \$25 Wellness exam (to include HbA1c labs and LDL-C screening)
- \$15 Woman's mammography
- \$15 Cervical cancer screening
- \$25 Initial colonoscopy
- \$15 Flu shot
- \$25 Prostate cancer screening

After your exam, just have your doctor complete the wellness rewards form below and fax it to us at **1-844-203-0020**. Services must be completed by December 31, 2022.

Wellness rewards form (limit of one of each wellness reward per year)

Member name (print) _____

Member ID # _____

Address _____

City _____ State _____ Zip Code _____

Phone number _____

Date of Birth _____

Provider's name _____

Provider ID # _____

Provider Address _____

City _____ State _____ Zip Code _____

Provider phone number _____ Provider email address _____

<input type="checkbox"/> \$15 Diabetic eye exams	Date of Visit _____	<input type="checkbox"/> \$15 Cervical cancer screening	Date of Visit _____
<input type="checkbox"/> \$25 Wellness exam (to include HbA1c labs and LDL-C screening)	Date of Visit _____	<input type="checkbox"/> \$25 Initial colonoscopy	Date of Visit _____
<input type="checkbox"/> \$15 Woman's mammography	Date of Visit _____	<input type="checkbox"/> \$15 Flu shot	Date of Visit _____
		<input type="checkbox"/> \$25 Prostate cancer screening	Date of Visit _____

When we receive the above information, we'll send you your gift card. If you have questions, just call Member Services at 1-855-652-8249, or TTY/TDD 711 or 1-800-828-1120. Thank you for being the best part of Aetna Better Health of Virginia.

*You must be an Aetna Better Health of Virginia member at the time of visit.

Aetna complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. **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.