

## Mountain Health Promise FAQs



**Q:** When did the new Mountain Health Promise program start?

**A:** The Mountain Health Promise program started on 03/01/2020.

**Q:** Will I get an Aetna Better Health of West Virginia Case Manager?

**A:** Yes - each Member will be assigned a Case Manager.

**Q:** How will I know when I get a Case Manager?

**A:** When you enroll with Aetna, you will receive a phone call to introduce your case manager and begin coordinating services so there will be no lapse in current medical care.

**Q:** Is my provider part of the network?

**A:** You may contact Member Services at **888-348-2922 (TTY: 711)** or check the Provider Directory on our website

**Q:** What if my provider is not part of the network?

**A:** Aetna is required to contract with any current providers enrolled with the State, so as not to disrupt the current care being provided to our youth.

**Q:** Will my medication be covered?

**A:** There should be no change in your coverage for prescription drugs dispensed by a pharmacy, family-planning supplies, diabetic supplies, vitamins for children and prenatal vitamins.

**Q:** Who do I call if I need help?

**A:** Aetna Better Health Member Service is available 24/7 by calling **888-348-2922 (TTY: 711)**.

**Q:** Do I have to choose Aetna Better Health?

**A:** No, the authorized representative of the member has the option to choose to remain in the state's fee-for-service program.

**Q:** What changes for me and my child?

**A:** The most noticeable change for you and your child is the introduction of clinical care management to assist you and support your case worker. Aetna has case managers and social workers throughout the state and will help with coordination services to assist enrollees in arranging, coordinating and monitoring all medical, behavioral, socially necessary and support services.

**Q:** I saw value-added benefits are included – what are they?

**A:** In addition to your child's benefits, Aetna Better Health offers value added services. We offer these services to encourage health education and to promote health. Click here for a [list of value-added benefits](#).

**Q:** How do I get the extra benefits you mentioned in the flyer?

**A:** Contact our Member Services Department at **888-348-2922 (TTY: 711)** and we will coordinate these services with your case manager.

**Q:** Is dental care covered?

**A:** Yes. MHP members are covered for non-emergency and emergency dental services. Members under 21 years of age should visit their dentist for a checkup once every six months. Checkups begin at six months after an infant's first tooth erupts or by twelve months of age. Children and adolescents can get orthodontic services for the entire length of treatment and other services to fix dental problems. If you need to speak with SKYGEN USA regarding your child's dental benefit, please call.

**Q:** What if my child sees a provider out-of-state?

**A:** Your case manager will work with you and your child's provider to see that your child continues to receive the right care from among thousands of in-network providers.

**Q:** Are you taking over for BCF?

**A:** No- Aetna Better Health will have a supporting role with your case worker to insure the best possible care for Members.

**Q:** Will I lose my state case worker?

**A:** No – you will continue to work with your state case worker with support from your Aetna case manager.

**Q:** I am afraid you will deny important medical services for my child - will you?

**A:** Aetna Better Health follows the state's guidelines regarding covered and non-covered services. Some services do require prior authorization for medical necessity, just as they do from the state.

**Q:** My biological child lives with a foster parent; can you see if he/she can return home?

**A:** You would need to contact the Bureau for Children and Families for any information related to your child's placement;

**Q:** I get a state medical card every month; will this change? What if I don't get the new card by March 1st?

**A:** You will receive one (1) member ID card for each child in your care. Cards are issued within 5 days of enrollment and do not need to be replaced unless they are lost or stolen, or the member has been disenrolled for more than 12 months.

**Q:** If I have a problem with this, is there someone at the state I can call? Who? Do you have their number?

**A:** You have the right to submit a complaint/appeal to Aetna Better Health by contacting **888-348-2922 (TTY: 711)**. If your complaint/appeal is not resolved by Aetna, you also have the right to contact the Bureau of Medical Services at **304-558-1700** to request additional review.

**Q:** My child is having significant challenges, what do I do?

**A:** Call us at **888-348-2922 (TTY: 711)** so we can connect you with your case manager.