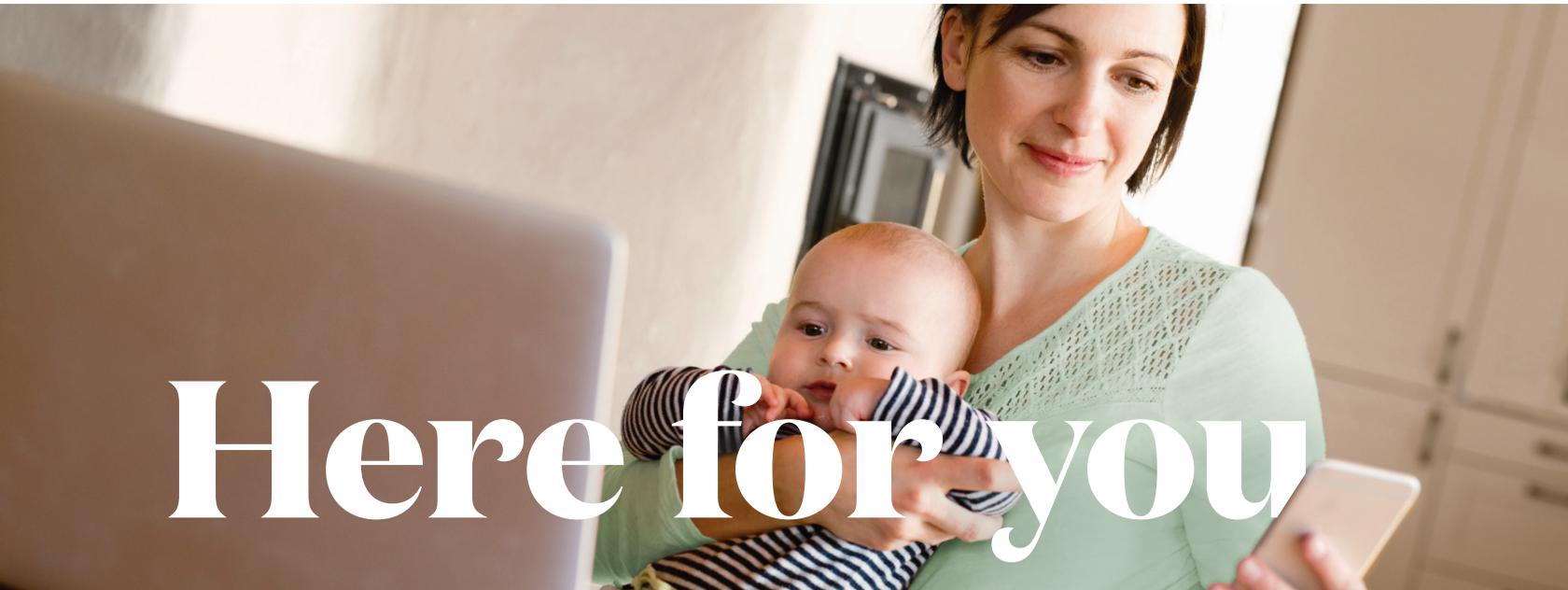




Aetna Better Health® of Michigan



Here for you

Member Newsletter

Spring 2019

Introducing a secure member website to help you manage your plan — and your health

This new member site is your go-to resource for managing your plan. It will help you use your Aetna Better Health benefits and services so you can get and stay healthy. You can:

- **Access health plan details** — change your doctor, find forms or get member ID cards
- **Get personalized health information** — answer questions about your health and get the tips and tools you'll need to meet your health goals like quitting smoking and weight management
- **Research prescription drugs** — find a pharmacy, see how much a drug costs or ask for a drug not covered by your plan
- **Get instant access to claims details** — see the status of your claim from start to finish
- **Find support** — get in touch with a nurse or learn more about the

disease management and wellness programs that will help you stay on track with goals

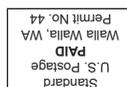
Sign up today. It's easy.

To set up your account or to learn more about these tools, you can visit aetnabetterhealth.com/michigan/members/portal.

Keep in mind that you'll need your health plan member ID and a current email address to create an account.

We're always here to help

For help getting started or to sign up over the phone, you can call Member Services at **1-866-316-3784 (TTY: 711)**, Monday through Friday, 8 a.m. to 5 p.m.



Aetna Better Health® of Michigan
1333 Gratiot Ave.
Suite 400
Detroit, MI 48207

Health Risk Assessments for Healthy MI members

Are you enrolled in Healthy MI? If so, Aetna Better Health wants to reward you for getting healthy. Be sure to take your Health Risk Assessment.

As part of your benefits, Aetna Better Health will cover an annual checkup with your doctor. After enrolling with Aetna Better Health, complete the Health Risk Assessment form. The form asks questions about your current health. Bring this form with you when you visit your doctor for your checkup. Your doctor and Aetna Better Health will use this information to help meet your health needs.

The information you provide in the form is personal health information, and it is kept confidential. It cannot be used to deny health care coverage.

 **If you need help** with completing this form or need another copy, just call Member Services at **1-866-316-3784 (TTY: 711)**. Complete a Health Risk Assessment yearly.



Children's Special Health Care Services (CSHCS)

Children's Special Health Care Services (CSHCS) was created to find, diagnose and treat children in Michigan who have chronic illness or disabling conditions.

CSHCS helps children and some adults who need specialty medical care. Specialty medical care is care that cannot be managed only by internists, pediatricians or family doctors.

CSHCS is a specialty medical care program. Conditions eligible for CSHCS coverage require care by medical specialists at least once a year.

CSHCS covers persons under age 21. This age limit does not apply for people with:

- Cystic fibrosis
- Certain hereditary blood coagulation disorders commonly known as hemophilia

Examples of conditions are cancer, cerebral palsy, cleft lip/palate, liver

disease, spina bifida, hearing loss, insulin-dependent diabetes, epilepsy and sickle cell anemia. Severity is always taken into account when considering CSHCS eligibility. Based on severity, some people will be eligible for CSHCS coverage for a certain condition while others will not. The Michigan Department of Health and Human Services doctor makes the decision after review of medical information from a specialist.

If interested, you can contact the CSHCS office at your local health department or by calling the Family Phone Line at **1-800-359-3722** or Aetna Better Health of Michigan at **1-866-316-3784**.

CSHCS works to provide information to families to make sure their children get the very best care.

CSHCS promotes care that is community-based, family-centered and includes parent-to-parent support. The basic idea of family-centered care is the belief that health care providers, schools, service providers and the family are partners, working together to best meet the needs of the child. Additionally, the program provides:

- Coverage and referral for specialty services, based on the medical condition
- Services that are sensitive to cultural differences or needs
- Coordinated services that pull together services of many providers who work for different agencies

Choose the ER for life-threatening emergencies only

A true emergency is the right time to use the ER. Chest pain, nonstop bleeding, broken bones, seizures and overdose are good examples. Just remember, a visit to the ER can take a lot of time and can be stressful, too.

Use urgent care for non-emergencies when you can't see your PCP

What if you have an urgent health concern? It's not a true emergency, but you can't see your primary care provider (PCP) right away. This is the right time to use an urgent care or after-hours center. Colds, flu and earaches are some examples.

Urgent care can save time and money. In fact, 9 of 10 people are in and out in less than an hour.

Think of your PCP for most needs

Your PCP can treat many health issues at an office visit. If it's after hours, try calling anyway. Your PCP may have an answering service that can direct you to a provider on call. Be sure to follow up with your PCP after an ER or urgent care visit.

Call your PCP for preventive care

Try to keep up with your preventive care. Checkups and screenings are the best way to keep you and your family healthy.

Get a ride to planned health visits — it's covered

Rides to all your planned health care visits are covered. Just call **1-800-947-2133** at least three days before you need a ride.

MyActiveHealth

Great news! As part of your health benefits, you're automatically a member of **MyActiveHealth.com**. MyActiveHealthSM is a secure, online site that has all the health information that's important to you in one convenient place. There's even a Personal Health Record (PHR) where you can store all your health data and medical history for easy access.

At MyActiveHealth, your health information works hard to help you take better care of yourself. That's just the beginning, because the site is also your personal gateway to lots of other great health programs and services.

You can log on 24/7 and start using the wide range of helpful tools and resources at your disposal. You'll even have a home page that you can design around your preferences. The best part is, none of it will cost you a thing. No kidding! MyActiveHealth is part of the benefits you already get.

Just a few of the things you can do at **MyActiveHealth.com**:

- Create email reminders of doctors' appointments and record them on a calendar.
- Use any computer to access your secure Personal Health Record and share health information, even at the doctor's office.
- See the most important things you can do for your health — and take action on them.
- Listen to a podcast, watch a video or print out materials on health topics of interest to you.

- Get the latest news on issues important to your health.
- Find out about resources and programs your health plan makes available to you.
- Check potential drug interactions.
- Find and print out recipes for great-tasting, healthy eating.

"It's not just health information. It's health information that matters to me."

Go to **MyActiveHealth.com** right now to get started!



The asthma-allergy connection

What's the link?

If you have asthma, your airways are swollen and sensitive. Asthma triggers cause the airways to tighten further and make breathing more difficult. There is no cure for asthma, but medicines — and avoiding asthma triggers — can help you manage the disease.

Not everyone who has allergies has asthma, but many people with asthma also have allergies.

Allergies can trigger your airways to narrow. It's important to know your allergy triggers, or allergens, so you can avoid them.

Common allergens that make asthma worse:

- Cockroaches
- Animal dander
- Dust mites
- Indoor mold
- Pollen
- Outdoor mold

Other asthma triggers may include:

- Cold air
- Exercise
- Some illnesses and medicines
- Tobacco smoke, air pollution and strong odors

Testing for asthma

Spirometry: This test measures air flow in your lungs — how much air you can breathe in and how fast you can blow it out.

Physical exam: Your doctor will probably ask questions about your symptoms and check your breathing.

Your doctor may also recommend:

- Allergy testing to see what allergens might affect you
- A test to check how sensitive your airways are
- Tests to see if other medical problems, such as sleep apnea, are causing your asthma symptoms

Testing for allergies

Most common and reliable method:

Skin testing: Small amounts of specific allergens are placed in the skin to determine if there are any reactions.

Sources: American Academy of Allergy, Asthma & Immunology; National Heart, Lung, and Blood Institute



Fraud, waste and abuse

Know the signs — and how to report

Health care fraud means getting benefits or services based on untrue information. Waste is when health care dollars are not carefully spent. Abuse is doing something that results in needless costs. A health care provider, member or employee can do fraud, waste or abuse.

If you think you have seen or heard of fraud, waste or abuse happening, you have a right — and the duty — to report it:

- An example of provider fraud is billing for services or supplies that you did not get.
- A provider may order tests over and over that are not needed. That is abuse.
- Member waste could be going to the emergency room when you don't need to go.
- Changing a prescription or using a stolen prescription pad is fraud.

- If you ask a driver to take you to a place that has not been approved, that is abuse.
- Acting hostile or abusive in a doctor's office or hospital is also abuse.

If you see or find out about fraud, waste or abuse, make a report. You can do so without leaving your name on our Fraud and Abuse hotline. Just call **1-855-421-2082**. You can also write to us at:

Aetna Better Health of Michigan
1333 Gratiot, Suite 400
Detroit, MI 48207

Happy teeth are healthy teeth

Dental care is important to your overall health. Aetna Better Health of Michigan wants to help you get the dental care you need.

Keep your teeth healthy

It's never too soon to start good dental health habits. Follow these simple dental care tips:

- Brush two times each day.
- Use fluoride toothpaste.
- Floss once each day.
- Eat a healthy diet.
- See a dentist two times each year.

Schedule an appointment today.

Do you want to know how you receive dental coverage? See the chart at right for details.

Dental coverage summary

Children	Adults		
	Pregnant women	Healthy Michigan Plan	All other adults
Healthy Kids dental coverage under age 21	Aetna Better Health of Michigan dental coverage while pregnant and continuing through 90 days postpartum	Aetna Better Health of Michigan dental coverage throughout HMP eligibility	Michigan Medicaid FFS dental coverage
Call 1-800-482-8915 to find a Healthy Kids dental provider in your area.	Call Dentaquest at 1-844-870-3976 to find an Aetna Better Health dental provider in your area.	Call Dentaquest at 1-844-870-3976 to find an Aetna Better Health dental provider in your area.	Go to insurekidsnow.gov to find a dentist that accepts Michigan Medicaid in your area.

Sometimes problems come up between dental visits. If that happens, call your dentist immediately. Your dentist can help with most urgent dental needs.

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.



 **We can help!** Aetna Better Health of Michigan's Member Services representatives can also help you schedule a dentist appointment. Call us at **1-866-316-3784 (TTY: 711)**. Call Member Services if you need a ride to the dentist. They can help.

You can also report fraud, waste or abuse to the Michigan Department of Health and Human Services, Office of the Inspector General, by calling **1-855-643-7283 (1-855-MI-FRAUD)**. Or write to:

Michigan Department of Health and Human Services
Office of the Inspector General
P.O. Box 30062
Lansing, MI 48909

Or report online at **michigan.gov/fraud**. You don't have to leave your name.

People who knowingly make false claims may be subject to:

- Criminal fines up to \$250,000
- Prison for up to 20 years
- Being suspended from Michigan Medicaid

If the violations resulted in death, the person may go to prison for years or for life. For more information, refer to 18 U.S.C. Section 1347.

Anti-Kickback Statute

The Anti-Kickback Statute bans knowingly and willingly asking for, getting, offering or making payments (including any kickback, bribe or rebate) for referrals for services that are paid, in whole or in part, under a federal health care program (including the Medicare Program). For more information, refer to 42 U.S.C. Section 1320a-7b(b).

Prior authorization

There may be a time when you have a health problem that your primary care physician (PCP) can't treat alone. Sometimes you may need to see a specialist — this is called a referral.

Prior authorization is a request to Aetna Better Health Plan for you to get special services. We must approve your provider's request before you can receive these services.

As a reminder, you don't need a referral or prior

authorization to get emergency services.

How it works

Aetna Better Health Plan providers follow prior authorization guidelines. If you need help understanding any of these guidelines, just call Member Services. Or, you can ask your case manager.

It may take up to 14 days to review a routine request. We take less than or up to 72 hours to review urgent requests.

All reviews are timed from when we first receive the request from your provider.

If we need more information from your provider, we may ask for a 14-day extension. If we don't get the information we need from your provider, we may deny the request. If this happens, you'll receive a Notice of Denial letter that explains your appeal rights.

If your provider makes an urgent prior authorization request and it doesn't meet the urgent criteria,

we'll send you a letter to let you know it will be processed as a routine request. You can make a complaint if you disagree.

Questions about your prior authorizations? Just call your PCP, your case manager or Member Services. You can reach Member Services by calling **1-866-316-3784** and following the prompts.

You can also visit our website at **aetnabetterhealth.com/michigan** for more information.

Join us for the Living Well in Michigan Program

Living Well overview

When you participate in health and wellness promotion programs, you can improve your quality of life and overall health. Starting in summer 2019, Aetna Better Health will begin offering Living Well in Michigan workshops to its members.

The Living Well in Michigan workshops will use the Living Well with a Disability curriculum designed by the University of Montana's Rural Institute. The workshops are designed for people with a disability, physical limitation, or chronic pain or disease. Members who take the workshop will learn to:

- Create and visualize their goals
- Plan steps to meet their health and fitness goals
- Solve problems
- Get positive support
- Find useful information
- Communicate with family, friends and doctors

The Living Well Program is made up of 10 sessions that cover topics related to:

- Goal setting
- Problem solving
- Healthy reactions
- Beating the blues
- Healthy communication
- Seeking information
- Physical activity
- Eating well
- Advocacy

 These workshops are available to Aetna Better Health members at no cost. If you have questions about the Living Well in Michigan workshops or are interested in signing up, call Member Services at **1-866-316-3784**, Monday through Friday, 8 a.m. to 5 p.m.

 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.



AETNA BETTER HEALTH® OF MICHIGAN

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.

Aetna:

- 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 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 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>.

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