



Spring 2016

MyActiveHealth

An easy-to-use wellness tool for a healthier you

You deserve to lead a healthy life. And we can help. MyActiveHealth is an easy way to take charge of your health. So you can feel better—for good. And as a member of your health plan, you'll get MyActiveHealth at no cost to you.

Getting started is easy. And it just takes a few simple steps. First, sign into the "Member Portal" section of your health plan's website. Once you're signed in, go to "Tasks" and choose "Manage My Health." From this page, you'll be able to access the MyActiveHealth tools and sign up for a new account.

All the resources and support you need

Once you have an account, you'll get secure access to all MyActiveHealth services.

You'll find:

- Health surveys and records. Keep track of your medical history. You'll get healthy living suggestions based upon your answers. And this information can be used to improve your overall health.
- Videos and podcasts. Learn more about your health and other wellness topics. And get

information about the resources offered by your health plan.

- Healthy lifestyle programs. Get the help you need to meet your goals. Programs include quitting smoking, healthy eating, managing stress and more.

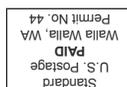
Go mobile

You can also access MyActiveHealth with your smartphone. Just visit www.myactivehealth.com. If you don't have access to a computer, you can call MyActiveHealth at **1-855-231-3716** to request a printed copy of the health survey. They can also provide printed information on health conditions and wellness topics.

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Questions?

We're here to help. MyActiveHealth is a simple way to lead a healthy life. To learn more, just call us at **1-866-316-3784**.



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

Member Advisory Board: Just call!

Aetna Better Health of Michigan would like to invite you to join our Member Advisory Board. We need your feedback and suggestions. To make it easier for you to participate, we have a call-in option. There is no need to find a babysitter or arrange for transportation! You can call in or attend in person.

If you would like your voice to be heard, join our Member Advisory Board. Please contact Community Development at **313-465-1590** or go to our website for an application.



MyActiveHealth

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Instant access to claims details

Tracking a claim is easy. You can call Member Services. Or just sign into your secure member portal. You'll find:

- Stage in process
- Amount approved
- Amount paid
- Member cost
- Date paid

Your pharmacy benefits

Get details about your pharmacy benefits and services. This information will help you make the best decisions about your care. You can call Member Services. Or just sign into your secure member portal. You'll be able to:

- Find in-network pharmacies
- Get help asking for a drug not covered by your plan
- Order a refill for an unexpired, mail-order prescription
- Look up drug interactions, side effects and risks
- Determine financial responsibility for a drug
- Find out if generic substitutes are available

Health plan details— anytime, anywhere

Our goal is to make it easier for you to use your benefits. And we've built the member portal to be your go-to resource for managing your plan. You can change your doctor or get a new member ID card. You can also find out how and when to get referrals or authorizations for services. And we'll also tell you about

their costs. Or to talk to us about your health plan, just call Member Services.

Keep informed!

The Informed Health Line® gives you access to medical information and advice at no cost to you. And it's available 24 hours a day, 7 days a week. Just call **1-866-711-6664** to speak to a nurse. Or you can connect with a nurse through the member portal. Through the Informed Health Line, you can:

- Make toll-free calls to a registered nurse at any time with translation services, if needed
- Ask questions online and receive a response within 24 hours

- Get help and advice for acute and chronic conditions so you can decide if you need to be seen right away
- Find out more about a medical test or procedure
- Get help preparing for a doctor's visit

Support tailored to your needs

At Aetna Better Health of Michigan, we offer benefits and programs that help our members get and stay healthy. You can learn more at **www.aetnabetterhealth.com/michigan**. You'll find educational materials and other self-help tools. And for extra support, we can help find a wellness program that's right for you. To get started, just sign into your member portal or call Member Services.

We keep your data safe

Did you know that your health plan has protected health data about you? Information about you and your health is known as protected health information (PHI).

PHI includes your name, phone number, Social Security number, date of birth and marital status. It also includes your health and medical data. It can include

medical records and findings, treatment profiles, and payment status reports.

PHI may come from you, your provider, the plan or our partners. We know that this data about you is private. We protect your health information with specific procedures, such as:

Administrative. We have rules that tell us how to use and protect 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 may use and share your data for treatment, payment or other health care reasons. These uses are covered under state and federal laws. At other times, we may need to get your OK to use or share your health data. If you have questions or concerns about the use or safety of your health data, call Member Services at **1-866-316-3784**.



Get the lead out

Your children are at risk for lead poisoning if they live in an older home. Lead in the paint and dust can harm your children. They can also get lead poison from soil, unglazed dishes, contaminated water and imported items.

Based on the Medicaid program screening needs, all children in the Medicaid program must be tested for lead poison at ages 1 year and 2 years. Those who are at high risk may need to be checked more often. Children

older than age 3 who have not been tested before should be tested for lead poison at least once between 3 and 6 years of age. To get the lead out of your children, take them to the doctor, and have them tested.

Quality Improvement Program The results are in

It is important to us that our doctors and staff provide you with high-quality services and health care. We have a quality improvement program to make sure that happens. We check provider office hours and appointment wait times to make sure you are getting the care you need quickly. We also use doctor and member surveys to let us know how we are doing. The results of these and other quality reports are on our website at **www.aetnabetterhealth.com/michigan**.

If you want copies of any of our reports, call the Member Services Department toll-free at **1-866-316-3784**. We will be glad to send them to you.

Need to talk with a nurse?

If you need access to one of our nurses:

- During business hours (8 a.m.–5 p.m.), call Member Services at **1-866-316-3784** and ask to be connected to a nurse.
- After business hours, call **1-866-711-6664** (TTY 711) 24 hours a day, 7 days a week. You will be connected to the 24-hour nurse line.

For members with special communication needs:

- Hearing-impaired members can call **1-866-316-3784** (TTY 711).
- Translation services can be provided free of charge by calling **1-866-316-3784**.



Free cellphones

Get a free cellphone, free minutes and unlimited texting with SafeLink

We want you to be safe and keep well. Now you can stay connected with those who care about you. Call your doctor, your family and your friends. Call them anytime! Visit www.safelink.com or call **1-877-631-2550** to sign up.

Here's what our members get with Safelink Wireless:

- A free cellphone
- 350 free minutes a month
- Free unlimited text messaging
- Free calls to Aetna Better HealthSM Premier Plan Member Services
- Free text messages, including health tips and appointment reminders

You can sign up for this new program anytime. Choose the

way that's easiest for you:

- Visit www.safelink.com to apply online.
- Download the application from our website at www.aetnabetterhealth.com/michigan, complete it and mail it back to SafeLink: SafeLink Wireless, P.O. Box 22009, Milwaukie, OR 97269-0009
- Call SafeLink at **1-877-631-2550** to apply over the phone.

Questions? Call Member Services toll-free at **1-866-316-3784** (TTY 711). We are available 24 hours a day, 7 days a week.

Your external review options

You have the right to seek an external review of decisions made by the Plan. The review options are:

Fair Hearing process

Michigan Office of Administrative Hearing System for the Department of Health and Human Services
P.O. Box 30763
Lansing, MI 48909
1-877-833-0870

Patient's Right to Independent Review Act (PRIRA)

Department of Insurance and Financial Services
611 Ottawa, Third Floor
P.O. Box 30220
Lansing, MI 48909
1-877-999-6442

These reviews are available at no cost to you. See your member handbook for more details.

Your rights and responsibilities

We work with you to make sure you receive the best care available. You have certain rights and responsibilities. These help you to receive the best service.

As a member of Aetna Better Health of Michigan, you have the right to:

- Get information about your health, your primary care provider (PCP), our providers, Aetna Better Health and its services, and members' rights and responsibilities
- Request information on the plan's structure, operations and services
- Be treated with respect and dignity
- Be assured your personal information is kept private and confidential
- Seek advice and help
- Discuss all treatment options for your condition, regardless of cost or benefit coverage
- Voice grievances, complaints and appeals and offer suggestions about Aetna

Better Health and the services we provide

- Make recommendations about our members' rights and responsibilities policy
- Choose a PCP as your personal medical provider
- Work with doctors in making decisions about your health
- Know about diagnosis, treatment and prognosis
- Get prompt and proper treatment for physical and emotional problems
- Receive discharge planning
- Receive guidance and suggestions for more medical care if health care coverage is ended
- Access your medical records in accordance with state and federal law
- Get information about how your PCP is paid—if you need more information, call Member Services at **1-866-316-3784**
- Request an emergency PCP transfer if your health or safety are threatened
- Receive culturally and language appropriate services
- Request and get a copy of your medical records and request for records to be amended or corrected
- Participate in decisions regarding your health care, including the right to refuse treatment and express your desires about treatment options
- Be free to exercise your rights without adversely affecting the way Aetna Better Health and its providers or the state treats you
- Be free from any form of restraint or seclusion used as a means of force, disciplines, convenience or retaliation
- Be provided health care services consistent with the contract and state and federal regulations
- Be free from other discrimination prohibited by state and federal regulations

What you're responsible for

As a member of Aetna Better Health of Michigan, you also have responsibilities. These responsibilities include:

- Giving information to the plan, its practitioners and providers needed for our staff to take care of you
- Following the instructions given to you by your doctors
- Understanding your health condition and sharing in the decisions for your health care
- Treating Aetna Better Health staff and doctors with respect and dignity
- Keeping all appointments and calling to cancel them when you cannot make them
- Understanding what medicine to take
- Giving us feedback about your health rights and responsibilities
- Letting us know of any changes in your name, address or telephone number

Benefits for CSHCS members

Are you a Children's Special Health Care Services (CSHCS) member? Here are some additional benefits you may be eligible for:

Help from your local health department

- with:
- Accessing community resources, such as schools, mental health, financial support and child care
 - Transitioning to adulthood
 - Dentistry (for specific diagnoses, such as cleft palate/cleft lip)

Help from the Family Center for Children and Youth with Special Health Care Needs,

which provides:

- A family phone line at **1-800-359-3722**. Call Monday through Friday, 8 a.m. to 5 p.m.
- A parent-to-parent support network
- Training programs
- Financial help to go to conferences about CSHCS medical conditions and conferences for the brother(s) or sister(s) of children with special needs

Help from the Children's Special Needs (CSN) Fund.

The CSN Fund helps CSHCS families get items not covered by Medicaid or CSHCS. To see if you qualify, call **517-241-7420**. Some examples:

- Wheelchair rBenefits foramps
- Van lifts
- Air conditioner





How we make coverage decisions

When making coverage decisions, Aetna Better Health of Michigan follows health care rules called Milliman Care Guidelines. Aetna Better Health's Health Services staff uses these rules to determine the type of treatments that will be covered for you.

Aetna Better Health staff and its providers make health care decisions based only on proper care and service rules. You also must have active coverage. There are no rewards to deny or promote care. Financial rewards for our doctors or staff cannot encourage decisions where you will not get the care you need.

Call Member Services at **1-866-316-3784** if you have questions about how your services are approved or to get a copy of the rules used.

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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.

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Help stop fraud, waste and abuse

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 and 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

You can also report fraud, waste and 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 **www.michigan.gov/fraud**. You don't have to leave your name.