



# AETNA BETTER HEALTH<sup>SM</sup> FIDA PLAN

2017 Summary of Benefits



Aetna Better Health FIDA plan is a managed care plan that contracts with both Medicare and the New York State Department of Health (Medicaid) to provide benefits of both programs to participants through the Fully Integrated Duals Advantage (FIDA) Demonstration.

[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)

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## Helpful information

### Participant Services

1-855-494-9945 (TTY: 711)

### Non-Emergency Transportation

1-866-334-8919

### Address

Aetna Better Health FIDA Plan

55 W. 125th St., Suite 1300

New York, NY 10027

## Personal information

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My ID number

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My PCP (primary care provider)

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My PCP's phone number

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My care manager's name and phone number

 **This is a summary of health services covered by Aetna Better Health FIDA Plan for 2017. This is only a summary. Please read the Participant Handbook for the full list of benefits.**

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- ❖ Aetna Better Health FIDA Plan is a managed care plan that contracts with both Medicare and the New York State Department of Health (Medicaid) to provide benefits of both programs to Participants through the Fully Integrated Duals Advantage (FIDA) Demonstration. It is for people with both Medicare and Medicaid and who meet other eligibility requirements for the FIDA Demonstration.
- ❖ Under Aetna Better Health FIDA Plan you can get your Medicare and Medicaid services in one managed care plan called a FIDA Plan. An Aetna Better Health FIDA Plan Care Manager will help manage your care needs.
- ❖ This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information contact the plan or read the Participant Handbook.
- ❖ Limitations and restrictions may apply. For more information, call Aetna Better Health FIDA Plan Participant Services or read the Aetna Better Health FIDA Plan Participant Handbook. This means that you need to follow certain rules to have Aetna Better Health FIDA Plan pay for your services.
- ❖ The List of Covered Drugs and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.
- ❖ Benefits may change on January 1 of each year.
- ❖ You can get this information for free in other languages. Call **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free.

Puede recibir esta información en otros idiomas en forma gratuita. Llame al **1-855-494-9945** o al **711** (línea TTY/TDD), las 24 horas del día, los 7 días de la semana. Esta llamada es gratuita.

È possibile ottenere queste informazioni gratuitamente in altre lingue. Chiamare il numero **1-855-494-9945** e il numero **711** per il servizio TTY/TDD per i non udenti, 24 ore al giorno 7 giorni alla settimana. La chiamata è gratuita.

Ou kapab jwenn enfòmasyon sa a pou gratis nan lòt lang. Rele **1-855-494-9945** ak **711** pou TTY/TDD, 24 èdtan chak jou, 7 jou pa semèn. Apèl la gratis.

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您可以免費取得本資訊的其他語言版本。請撥打 **1-855-494-9945**, 若使用 TTY/TDD 請撥打 **711**, 每週 7 天、每天 24 小時均提供服務。此為免費電話。

Вы можете бесплатно получить эту информацию в переводе на другой язык. Позвоните по телефону **1-855-494-9945**. Линия работает круглосуточно и без выходных. Звонки бесплатные. Если вы пользуетесь устройством TTY/TDD, звоните по телефону **711**.

다른언어로 이 정보를 무료로 받으실 수 있습니다. 연중 무휴 24 시간 **1-855-494-9945** 번 또는 TTY/TDD 의 경우 **711** 번으로 전화해주시요. 통화는 무료입니다.

- ❖ You can get this information for free in other formats, such as large print, braille, or audio. Call **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free.
- ❖ A care manager will call you after you become a participant of Aetna Better Health FIDA Plan. During this call they will ask if you have a preferred language and/or format to receive plan information. You can also contact Participant Services or your care manager to change your preference at any time.
- ❖ The State of New York has created a participant ombudsman program called the Independent Consumer Advocacy Network (ICAN) to provide Participants free, confidential assistance on any services offered by Aetna Better Health FIDA Plan. ICAN may be reached toll-free at 1-844-614-8800 or online at [icannys.org](http://icannys.org). (TTY users call 711, then follow the prompts to dial 844-614-8800.)



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The following chart lists frequently asked questions.

Frequently Asked Questions (FAQ)	Answers
<p><b>What is a Fully Integrated Duals Advantage (FIDA) Plan?</b></p>	<p>A Fully Integrated Duals Advantage (FIDA) Plan is an organization made up of doctors, hospitals, pharmacies, providers of long-term services, and other providers. It also has Care Managers and Interdisciplinary Teams to help you plan and manage all your providers and services. They all work together to provide the care you need. Aetna Better Health FIDA Plan is a FIDA Plan that provides benefits of Medicaid and Medicare to Participants in the FIDA Demonstration.</p>
<p><b>What is an Aetna Better Health FIDA Plan Care Manager and Interdisciplinary Team (IDT)?</b></p>	<p>An Aetna Better Health FIDA Plan Care Manager is one main person that you may contact. This person helps manage all your providers and services and makes sure you get what you need. This person is part of your Interdisciplinary Team (IDT), which also includes you and your designee(s). You may also choose to have any of the following people participate in any or all of your IDT meetings:</p> <ul style="list-style-type: none"> <li>▪ Your Primary Care Provider (PCP) or a designee from your PCP’s office (or practice) who has clinical experience and knowledge of your needs;</li> <li>▪ Your Behavioral Health (BH) Professional, if you have one, or a designee from your BH Professional’s office (or practice) who has clinical experience and knowledge of your needs;</li> <li>▪ Your home care aide(s), or a designee with clinical experience from the home care agency who has knowledge of your needs, if you are getting home care;</li> <li>▪ A clinical representative from your nursing facility, if getting nursing facility care; and</li> <li>▪ Additional individuals including:                             <ul style="list-style-type: none"> <li>» Other providers either as asked for by you or your designee, or as recommended by the IDT members as necessary for adequate care planning and approved by you or your designee; or</li> <li>» The registered nurse (RN) who completed your assessment.</li> </ul> </li> </ul>

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## Aetna Better Health FIDA Plan: **Summary of Benefits**

Frequently Asked Questions (FAQ)	Answers
<p><b>What are long-term services and supports?</b></p>	<p>Long-term services and supports are help for people who need assistance to do everyday tasks like taking a bath, getting dressed, making food, and taking medicine. Most of these services are provided at your home or in your community but could be provided in a nursing facility or hospital.</p>
<p><b>Can I direct my own care or hire my own aides?</b></p>	<p>You have the right to choose to direct your own care by selecting Consumer Directed Personal Assistance Services (CDPAS). Through CDPAS, you can hire your own aides and make other decisions about how to get services.</p>
<p><b>Will you get the same Medicare and Medicaid benefits in Aetna Better Health FIDA Plan that you get now?</b></p>	<p>You will get your covered Medicare and Medicaid benefits directly from Aetna Better Health FIDA Plan. You will work with a team of providers who will help determine what services will best meet your needs. This means that some of the services you get now may change. You will get almost all of your covered Medicare and Medicaid benefits directly from Aetna Better Health FIDA Plan, but you will get four benefits the same way you do now, outside of the plan. These benefits include: Hospice Services, Out-of-Network Family Planning Services, Methadone Maintenance Treatment Program, and Directly Observed Therapy for Tuberculosis Disease.</p> <p>When you enroll in Aetna Better Health FIDA Plan, you and your Interdisciplinary Team (IDT) will work together to develop a Person-Centered Service Plan (PCSP) to address your health and support needs. When you first enroll in Aetna Better Health FIDA Plan, you can keep seeing your doctors and getting your current services for 90 days, or until your PCSP is complete, whichever is later. When you join our plan, if you are taking any Medicare Part D prescription drugs that Aetna Better Health FIDA Plan does not normally cover, you can get a temporary supply. We will help you get another drug or get an exception for Aetna Better Health FIDA Plan to cover your drug, if medically necessary.</p>



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

Frequently Asked Questions (FAQ)	Answers
<p><b>Can you go to the same doctors you see now?</b></p>	<p>Often that is the case. If your providers (including doctors, therapists, and pharmacies) work with Aetna Better Health FIDA Plan and have a contract with us, you can keep going to them. Providers with an agreement with us are “in-network.” You must use the providers in Aetna Better Health FIDA Plan’s network, unless Aetna Better Health FIDA Plan or your IDT has authorized you to see an out-of-network provider. If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of Aetna Better Health FIDA Plan’s plan.</p> <p>To find out if your doctors are in the plan’s network, call Participant Services or read Aetna Better Health FIDA Plan’s Provider and Pharmacy Directory.</p> <p>If Aetna Better Health FIDA Plan is new for you, you can continue seeing the doctors you go to now for 90 days or until your Person-Centered Service Plan is complete, whichever is later. If you currently get behavioral health services, your Interdisciplinary Team (IDT) will review your current episode of care to decide if you can continue the services with the same provider you see now. If they decide you can see the same provider you see now, you will be able to see that provider for 24 months following your enrollment in Aetna Better Health FIDA Plan.</p>
<p><b>Can you remain in the same nursing facility you live in now?</b></p>	<p>Yes. If you live in a nursing facility when you enroll in Aetna Better Health FIDA Plan, you can remain in that nursing facility for the entire time that you are in a FIDA Plan like Aetna Better Health FIDA Plan, even if that nursing facility is out-of-network and does not participate with Aetna Better Health FIDA Plan.</p>
<p><b>What happens if you need a service but no one in Aetna Better Health FIDA Plan’s network can provide it?</b></p>	<p>Most services will be provided by our network providers. If you need a service that cannot be provided within our network, Aetna Better Health FIDA Plan will pay for the cost of an out-of-network provider.</p>
<p><b>Where is Aetna Better Health FIDA Plan available?</b></p>	<p>The service area for this plan includes: Kings, Nassau, New York, Queens, and Suffolk Counties, New York. You must live in one of these areas to join the plan.</p>



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Frequently Asked Questions (FAQ)	Answers
<b>Do you pay a monthly amount (also called a premium) under Aetna Better Health FIDA Plan?</b>	You will not pay any monthly premiums to Aetna Better Health FIDA Plan for your coverage. You also will not have any copays or other costs when you get care from network providers.
<b>What is prior authorization?</b>	<p>Prior authorization means that you must get approval from Aetna Better Health FIDA Plan or your Interdisciplinary Team (IDT) before you can get a specific service, item, or drug or before you can see an out-of-network provider. Aetna Better Health FIDA Plan may not cover the service, item, or drug if you don't get approval from Aetna Better Health FIDA Plan or your IDT. A small number of services require prior authorization by a specialist and not by Aetna Better Health FIDA Plan or your IDT. Please refer to Chapter 4 of your Participant Handbook for more information. Aetna Better Health FIDA Plan can also provide you with a list of services or procedures that require you to get prior authorization from a provider other than your IDT.</p> <p>Some services do not require any prior authorization, such as emergency or urgently needed care, out-of-area dialysis services, primary care provider visits, and women's health specialist services. For the full list of services that do not require prior authorization, please see Chapter 4 of your Participant Handbook or call Aetna Better Health FIDA Plan.</p>
<b>What is a referral?</b>	A referral means that your Primary Care Provider gives you approval to see someone that is not your Primary Care Provider. Referrals are not necessary in Aetna Better Health FIDA Plan and will not be required. However, prior authorization rules must be followed.



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

Frequently Asked Questions (FAQ)	Answers
<b>Who should you contact if you have questions or need help?</b>	<p><b>If you have general questions or questions about our plan, services, service area, billing, or Participant ID Cards, please call Aetna Better Health FIDA Plan Participant Services:</b></p> <p><b>CALL 1-855-494-9945</b></p> <p>Calls to this number are free. 24 hours a day, 7 days a week.</p> <p>Participant Services also has free language interpreter services available for people who do not speak English.</p> <p><b>TTY 711</b></p> <p>Calls to this number are free. 24 hours a day, 7 days a week.</p> <p><b>If you have questions about your health, please call the Nurse Advice Call line:</b></p> <p><b>CALL 1-855-494-9945</b></p> <p>Calls to this number are free. 24 hours a day, 7 days a week.</p> <p><b>TTY 711</b></p> <p>Calls to this number are free. 24 hours a day, 7 days a week.</p> <p><b>If you need immediate behavioral health services, please call the Behavioral Health Crisis Line:</b></p> <p><b>CALL 1-855-494-9945</b></p> <p>Calls to this number are free. 24 hours a day, 7 days a week.</p> <p><b>TTY 711</b></p> <p>Calls to this number are free. 24 hours a day, 7 days a week.</p>



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The following chart is a quick overview of what services you may need, your costs and rules about the benefits.

Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
<b>You want to see a doctor</b>	Visits to treat an injury or illness	\$0	Prior authorization is not required if seeing a network provider.
	Wellness visits, such as a physical	\$0	Prior authorization is not required if seeing a network provider.
	Transportation to a doctor's office	\$0	Prior authorization is not required if seeing a network provider.
	Specialist care	\$0	Prior authorization is required.
	Care to keep you from getting sick, such as flu shots	\$0	Prior authorization is not required if seeing a network provider.
	"Welcome to Medicare" preventive visit (one time only)	\$0	Prior authorization is not required if seeing a network provider.
<b>You need medical tests</b>	Lab tests, such as blood work	\$0	Prior authorization may be required.
	X-rays or other pictures, such as CAT scans	\$0	Prior authorization may be required.
	Screening tests, such as tests to check for cancer	\$0	Prior authorization is not required if seeing a network provider.



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
<p><b>You need drugs to treat your illness or condition</b></p>	<p>Generic drugs (no brand name)</p>	<p>\$0 for a 30-day supply \$0 for a 90-day supply</p>	<p>There may be limitations on the types of drugs covered. Please see Aetna Better Health FIDA Plan's List of Covered Drugs (Drug List) for more information.</p> <p>Extended day supplies of covered drugs are available at in network retail and mail order pharmacies. These drugs are usually considered maintenance drugs. Some drugs have coverage rules or have limits on the amount you can get. For example:</p> <ul style="list-style-type: none"> <li>• For some drugs, you or your doctor must get approval from the plan before you fill your prescription.</li> <li>• Sometimes the plan limits the amount of a drug you can get.</li> </ul> <p>Step therapy: Sometimes the plan requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your doctor thinks the first drug doesn't work for you, then we will cover the second.</p>



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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
<p><b>You need drugs to treat your illness or condition</b> (continued)</p>	<p>Brand name drugs</p>	<p>\$0 for a 30-day supply \$0 for a 90-day supply</p>	<p>There may be limitations on the types of drugs covered. Please see Aetna Better Health FIDA Plan's List of Covered Drugs (Drug List) for more information.</p> <p>Extended day supplies of covered drugs are available at in network retail and mail order pharmacies. These drugs are usually considered maintenance drugs. Some drugs have coverage rules or have limits on the amount you can get. For example:</p> <ul style="list-style-type: none"> <li>• For some drugs, you or your doctor must get approval from the plan before you fill your prescription.</li> <li>• Sometimes the plan limits the amount of a drug you can get.</li> </ul> <p>Step therapy: Sometimes the plan requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your doctor thinks the first drug doesn't work for you, then we will cover the second.</p>



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

<b>Health need or problem</b>	<b>Services you may need</b>	<b>Your costs for in-network providers</b>	<b>Limitations, exceptions, &amp; benefit information (rules about benefits)</b>
<b>You need drugs to treat your illness or condition</b> (continued)	Over-the-counter drugs	\$0	Aetna Better Health FIDA Plan covers some OTC drugs when they are written as prescriptions by your provider. Please see Aetna Better Health FIDA Plan's List of Covered Drugs (Drug List) for more information.
	Medicare Part B prescription drugs	\$0	Part B drugs include drugs given by your doctor in his or her office, some oral cancer drugs, and some drugs used with certain medical equipment. Read the Participant Handbook for more information on these drugs.
<b>You need therapy after a stroke or accident</b>	Occupational, physical, or speech therapy	\$0	Prior authorization is required. These services are limited to 20 visits per calendar year per therapy.
<b>You need emergency care</b>	Emergency room services	\$0	Emergency room services may be provided in network or out of network. Prior authorization is not required.
	Ambulance services	\$0	Prior authorization may be required for non-emergency ambulance transportation.
	Urgent care	\$0	Urgent care services may be provided in network or out of network. Prior authorization is not required.



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

<b>Health need or problem</b>	<b>Services you may need</b>	<b>Your costs for in-network providers</b>	<b>Limitations, exceptions, &amp; benefit information (rules about benefits)</b>
<b>You need hospital care</b>	Hospital stay	\$0	Prior authorization is required for non-emergency hospital stays.
	Doctor or surgeon care	\$0	Prior authorization may be required.
<b>You need help getting better or have special health needs</b>	Rehabilitation services	\$0	Prior authorization may be required.
	Medical equipment for home care	\$0	Prior authorization may be required.
	Skilled nursing care	\$0	Prior authorization may be required.
<b>You need eye care</b>	Eye exams	\$0	Prior authorization may be required. 1 routine eye exam every 2 years.
	Glasses or contact lenses	\$0	Glasses or contact lenses when authorized by an ophthalmologist or optometrist. 1 pair of glasses or contact lenses every 2 years.  Vision Services through Article 28 clinics that provide optometry services and are affiliated with the College of Optometry of the State University of New York to obtain covered optometry services.



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

<b>Health need or problem</b>	<b>Services you may need</b>	<b>Your costs for in-network providers</b>	<b>Limitations, exceptions, &amp; benefit information (rules about benefits)</b>
<b>You need dental care</b>	Dental check-ups	\$0	Prior authorization may be required.  Preventive dental includes 1 oral exam, 1 cleaning and 1 dental X-ray every 6 months. Preventive dental x-rays require dentist authorization.  Dental services provided through Article 28 clinics operated by Academic Dental Centers do not require prior authorization.
<b>You need hearing/auditory services</b>	Hearing screenings	\$0	Prior authorization is not required.
	Hearing aids	\$0	Hearing aids must be authorized by an audiologist.  Prior authorization may be required.
<b>You have a chronic condition, such as diabetes or heart disease</b>	Services to help manage your disease	\$0	Prior authorization is not required if seeing a network provider.
	Diabetes supplies and services	\$0	Prior authorization may be required.
<b>You have a mental health condition</b>	Mental or behavioral health services	\$0	Prior authorization may be required.
<b>You have a substance abuse problem</b>	Substance abuse services	\$0	Prior authorization may be required.
<b>You need long-term mental health services</b>	Inpatient care for people who need mental health care	\$0	Prior authorization may be required.



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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
<b>You need durable medical equipment (DME)</b>	Wheelchairs	\$0	Prior authorization may be required.
	Canes	\$0	Prior authorization may be required.
	Crutches	\$0	Prior authorization may be required.
	Walkers	\$0	Prior authorization may be required.
	Oxygen	\$0	Prior authorization may be required.



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

<b>Health need or problem</b>	<b>Services you may need</b>	<b>Your costs for in-network providers</b>	<b>Limitations, exceptions, &amp; benefit information (rules about benefits)</b>
<b>You need help living at home</b>	Meals brought to your home	\$0	Prior authorization is required.
	Home services, such as cleaning or housekeeping	\$0	Prior authorization is required.
	Changes to your home, such as ramps and wheelchair access	\$0	Prior authorization is required.
	Personal care assistant (You may be able to employ your own assistant. Call Participant Services for more information.)	\$0	Prior authorization is required.
	Training to help you get paid or unpaid jobs	\$0	Prior authorization is required.
	Home health care services	\$0	Prior authorization is required.
	Services to help you live on your own	\$0	Prior authorization is not required.
	Adult day services or other support services	\$0	Prior authorization is required.
<b>You need a place to live with people available to help you</b>	Assisted living or other housing services	\$0	Prior authorization is required.
	Nursing facility care	\$0	Prior authorization is required.
<b>Your caregiver needs some time off</b>	Respite care	\$0	Prior authorization is required.



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

### **Other services that Aetna Better Health FIDA Plan covers**

This is not a complete list. Call Participant Services or read the Participant Handbook to find out about other covered services.

<b>Other services covered by Aetna Better Health FIDA Plan</b>	<b>Your costs for <u>in-network</u> providers</b>
Acupuncture – limited to 9 treatments per year.	\$0
Additional over-the-counter supplies benefit \$50 per month to use on supplies listed in our OTC catalog. Talk to your care manager or call Participant Services for more information.	\$0
Cell phone benefit Free calls to the Plan’s Participant Services pre-programmed number, free health-related texts and free texts from the health plan are covered for participants who qualify for the federal free cell phone program.	\$0

### **Benefits covered outside of Aetna Better Health FIDA Plan**

This is not a complete list. Call Participant Services to find out about other services not covered by Aetna Better Health FIDA Plan but available through Medicare or Medicaid.

<b>Other services covered by Medicare or Medicaid</b>	<b>Your costs</b>
Day treatment	\$0
Freestanding birth center services	\$0
Out of network family planning services	\$0
Methadone Maintenance Treatment Program (MMTP)	\$0
Directly observed therapy for tuberculosis (TB)	\$0
Hospice services	\$0



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

### **Services that Aetna Better Health FIDA Plan, Medicare, and Medicaid do not cover**

This is not a complete list. Call Participant Services to find out about other excluded services.

<b>Services <u>not</u> covered by Aetna Better Health FIDA Plan, Medicare, or Medicaid</b>	
Cosmetic surgery if not medically necessary	Experimental treatments
Infertility treatments	Fees charged by your immediate relatives or members of your household
Services by a provider that is not a part of the Aetna Better Health FIDA Plan network unless Aetna Better Health FIDA Plan has sent you to that provider	Naturopath services
Services considered not medically necessary	



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### **Your rights as a Participant of the plan**

As a Participant of Aetna Better Health FIDA Plan, you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your services from Aetna Better Health FIDA Plan. We will tell you about your rights at least once a year. For more information on your rights, please read the Participant Handbook. This is not a complete list of all your rights. Your rights include, but are not limited to, the following:

- **You have a right to respect, fairness and dignity.** This includes the right to:
  - Get covered services without concern about race, ethnicity, national origin, religion, gender, age, mental or physical disability, sexual orientation, genetic information, ability to pay, or ability to speak English
  - Ask for information in other formats (e.g., large print, braille, or audio)
  - Be free from any form of restraint or seclusion
  - Not be billed by network providers
  - Have your questions and concerns answered completely and courteously
  - Freely apply your rights without any negative effect on the way Aetna Better Health FIDA Plan or your provider treats you
- **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a format you can understand. These rights include getting information on:
  - Description of the services we cover
  - How to get services
  - How much services will cost you
  - Names of providers and care managers
- **You have the right to make decisions about your care, including refusing treatment.** This includes the right to:
  - Choose a Primary Care Provider (PCP) and you can change your PCP at any time
  - Participate in Interdisciplinary Team meetings about your care
  - Get your covered services and drugs quickly
  - Know about all treatment options, no matter what they cost or whether they are covered
  - Refuse treatment, even if your doctor advises against it
  - Stop taking medicine
  - Ask for a second opinion. Aetna Better Health FIDA Plan will pay for the cost of your second opinion visit
  - Create and apply an advance directive, such as a living will or health care proxy



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

- **You have the right to timely access to care that does not have any communication or physical access barriers.** This includes the right to:
  - Get medical care timely
  - Get in and out of a health care provider's office. This means barrier free access for people with disabilities, in accordance with the Americans with Disabilities Act
  - Have interpreters to help with communication with your doctors and your health plan
- **You have the right to seek emergency and urgent care when you need it.** This means you have the right to:
  - Get emergency services without prior approval in an emergency
  - See an out of network urgent or emergency care provider, when necessary
- **You have a right to confidentiality and privacy.** This includes the right to:
  - Ask for and get a copy of your medical records in a way that you can understand and ask for your records to be changed or corrected
  - Have your personal health information kept private
  - Direct your own care or hire your own aides through Consumer-Directed Personal Assistance Services
- **You have the right to make complaints about your covered services or care.** This includes the right to:
  - File a complaint or grievance against us or our providers
  - Get a detailed reason for why services were denied

For more information about your rights, you can read the Aetna Better Health FIDA Plan Participant Handbook. If you have questions, you can also call Aetna Better Health FIDA Plan Participant Services.



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### **If you have a complaint or think we should cover something we denied**

If you have a complaint or think Aetna Better Health FIDA Plan should cover something we denied, call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. You may be able to appeal our decision.

For questions about grievances (complaints) and appeals, you can read Chapter 9 of the Aetna Better Health FIDA Plan Participant Handbook. You can also call Aetna Better Health FIDA Plan Participant Services.

Additionally, you can get help from the Independent Consumer Advocacy Network (ICAN). ICAN can give you free, confidential assistance on any services offered by Aetna Better Health FIDA Plan, including any problems getting quality care. ICAN may be reached at 1-844-614-8800 or online at [icannys.org](http://icannys.org). (TTY users call 711, then follow the prompts to dial 844-614-8800.)

For more information about complaints, grievances or appeals talk to your care manager or call Participant Services at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week.

### **If you suspect fraud**

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest.

If you think a doctor, hospital or other pharmacy is doing something wrong, please contact us.

- Call us at Aetna Better Health FIDA Plan Participant Services. Phone numbers are on the cover of this summary.
- Or, call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You can call these numbers for free, 24 hours a day, 7 days a week.



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

Aetna, Inc. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Aetna, Inc. does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Aetna, Inc.:

- 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 these services, contact Aetna Medicaid Civil Rights Coordinator

If you believe that Aetna, Inc. 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: Aetna Medicaid Civil Rights Coordinator, 4500 Cotton Center Blvd., Phoenix, AZ 85040, 1-888-234-7358, TTY 711, 860-900-7667, MedicaidCRCoordinator@aetna.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Aetna Medicaid 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, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.



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## Aetna Better Health FIDA Plan: **Summary of Benefits**

**English:** ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call **1-800-385-4104** (TTY: **711**).

**Spanish:** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **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 **1-800-385-4104** (TTY: **711**)。

**Russian:** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-800-385-4104** (телетайп: **711**).

**French Creole:** ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele **1-800-385-4104** (TTY: **711**).

**Korean:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-800-385-4104** (TTY: **711**) 번으로 전화해 주십시오.

**Italian:** ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero **1-800-385-4104** (TTY: **711**).

**Yiddish:** אויפמערקזאם: אויב איר רעדט אידיש, זענען פארהאן פאר אייך שפראך הילף סערוויסעס פריי פון אפצאל רופט **1-800-385-4104** (TTY: **711**)

**Bengali:** লক্ষ্য করুনঃ যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নিঃখরচায় ভাষা সহায়তা পরষিবো উপলব্ধ আছে। ফোন করুন **1-800-385-4104** (TTY: **711**)।

**Polish:** UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer **1-800-385-4104** (TTY: **711**).

**Arabic:** ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم **1-800-385-4104** (رقم هاتف الصم والبكم: **711**).

**French:** ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-800-385-4104** (ATS: **711**).

**Urdu:** خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں **1-800-385-4104** (TTY: **711**)

**Tagalog:** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-800-385-4104** (TTY: **711**).

**Greek:** ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε **1-800-385-4104** (TTY: **711**).

**Albanian:** KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në **1-800-385-4104** (TTY: **711**).



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