



Aetna Better Health® of Michigan



Member Newsletter

Fall 2019

Care management

Need some guidance?

As a member of Aetna Better Health of Michigan, you can have your own case manager, which we call a care manager. This is part of our care management program. The program is voluntary, which means you can decide to participate or not.

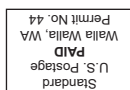
Your care manager is here to help you find the care and services you need. Your care manager works with you, your doctors and other providers to make sure you receive the right care and services. Our goal is to build a care plan that will help you live a healthier life. Your care manager can meet with you by phone or visit you in person.

A care manager can help guide you if:

- You're going to the emergency room a lot
- You're having trouble getting things your doctor has ordered
- Your doctor just told you that you have a disease such as heart failure or diabetes, and you'd like to know more about the illness or the treatment
- You need services to help you at home
- Your doctor wants you to see a specialist, but you don't know what to do

Do you have questions for a care manager or are you interested in participating? If so, please call Member Services at **1-866-316-3784** and ask for care management.

If you would no longer like to receive care management services, please call Member Services at **1-866-316-3784** and ask for the care management department.



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 give 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 completing this form or need another copy, just call Member Services at **1-866-316-3784 (TTY: 711)**.

Aetna Better Health will reduce your copays or give you a gift card if you schedule your Health Risk Assessment within 60 days after you are enrolled in our health plan, unless you are in continuous failure to pay status. A Health Risk Assessment should be completed annually.

Be sure to take your Health Risk Assessment. As part of your benefits, Aetna Better Health will cover an annual checkup with your doctor.

Be safe — get your flu shot every year

Adults: Lead the way, and get your shot today

Because flu viruses change all the time, you need to get a shot every year. If you have a serious health condition, it's even more important. Plan to get your shot every fall.

Protect your children: It's very important they get shots too

Every child 6 months of age and older should get a flu shot. Your child may need two doses the first time. Ask your doctor what's best for your child.

Over 65? You may need a pneumonia shot as well

This shot is important, especially if you have a chronic condition.

There are two types of pneumonia shots. You can talk to your doctor about what's best for you.

It's easy to get your flu shot

Just call your primary care provider (PCP). You may be able to get one with a nurse visit at the PCP's office. Or you can visit aetnabetterhealth.com/michigan for a list of pharmacies in our network. Make sure your local pharmacy is giving flu shots before you go. Questions? Call Member Services at **1-866-316-3784 (TTY: 711)** or visit aetnabetterhealth.com/michigan.

Source: Centers for Disease Control and Prevention





- 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 (TTY: 711)**, Monday through Friday, 8 a.m. to 5 p.m.

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 fall 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

Changes to our pharmacy network

In order to improve quality, Aetna Better Health of Michigan has made changes to our pharmacy network.

We are including pharmacies found in hospitals, clinics and, most importantly, our neighborhoods.

So, for 2019, these pharmacies are still in our network.

Remember to always fill at a network pharmacy. As a member of Aetna Better Health of Michigan, you do not have to pay for covered medications if filled at a network pharmacy.

Finding a network pharmacy is easy, and you'll have plenty of choices. You can visit aetnabetterhealth.com/michigan to find one, or you can call us at **1-866-316-3784 (TTY: 711)**, Monday to Friday, 8 a.m. to 5 p.m., and we'll help. If your current pharmacy isn't a network pharmacy, you'll need to move your prescriptions. Just call or visit your new pharmacy. All the information the pharmacist needs is on the label of your current prescription bottle, so be sure to have it with you.

Member grievance and appeal process

Members have the right to file a complaint (grievance) or dispute an adverse determination (appeal). The health plan asks that all providers cooperate and comply with all Aetna, Medicaid and/or CMS requirements regarding the processing of member complaints and appeals, including the need to provide information within the time requested for such purpose.

For further guidance on the member grievance and appeal process, please contact Member Services at **1-866-316-3784 (TTY: 711)**.

Remote patient monitoring

A new way to help manage your health

Better health starts with you. Patient engagement starts with daily choices and wellness activities. Our Remote Patient Monitoring (RPM) program provides important information so you know you are on the road to better health. Reduce unnecessary emergency room and inpatient visits through our RPM program.

How RPM works:

- Aetna Better Health's RPM program helps our clinical team to watch your daily vitals and let you and your doctor know when there is an alert that needs attention.
- By seeing health information in real time, your doctor can get key insight on your health, receiving timely, accurate and actionable data.
- Participants get a monitor kit with iPad tablet and symptom-appropriate devices. The monitoring period is typically 90 to 180 days.
- Participants complete daily health sessions where health information is

taken, educational material is provided, and members participate in surveys.

- Participants are limited to those living with diabetes, congestive heart failure and high-risk pregnancy.

RPM is turn-key for patients:

- It's delivered directly to the participant's home and is designed for easy use.
- It's easy to use with both 4G wireless and Bluetooth, and comes with built-in cellular connectivity so no participant-provided internet is required. Participants just turn on and swipe.
- It allows participants to answer condition-specific health questions and take their vitals daily so that their clinical team can monitor their health at home. It also allows patients to answer social determinate of health (SDoH) questions about nutrition and housing security. The device does not take the place of visits with your doctor or home visiting program.





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 below 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.

Clinical practice guidelines

Every year, Aetna Better Health distributes information on how to access our clinical practice guidelines to providers,

as well as behavioral health-related practice guidelines. Notification occurs through the provider manual, the

provider newsletter and our plan's website at **aetnabetterhealth.com/michigan**. Additional resources are available

on the Michigan Quality Improvement Consortium website at **mqic.org**.

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 promotes care that:

- Is community-based
- Is family-centered
- 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

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



Fraud, waste and abuse

Know the signs — and how to report

Health care fraud means getting benefits or services that are not approved. Fraud can be committed by a provider, member or employee. Abuse is doing something that results in needless costs. Waste goes beyond fraud and abuse. Most waste does not involve a violation of law. It relates primarily to mismanagement, inappropriate actions and inadequate oversight. Some examples are:

- Inefficient claims processing and health care administration
- Preventable hospital readmissions
- Medical errors
- Unnecessary emergency room (ER) visits
- Hospital-acquired infections/conditions

Everyone has a right and duty to report suspected fraud, waste and abuse. An example of provider fraud is billing for services, procedures and/or supplies that were not provided. Abuse is treatment or services that do not agree with the diagnosis. Hostile or abusive behavior in a doctor's office or hospital is also abuse. Suspected use of altered or stolen prescription pads is an example of member fraud. An example of abuse would be a member asking the transportation driver to take him or her to an unapproved location. If you suspect a colleague, member or other individual of fraud, waste or abuse, report it. You can report anonymously on the Aetna Better Health of Michigan Fraud, Waste and Abuse Hotline at **1-855-421-2082**. You may also write to:

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

You may also anonymously 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**, going online to **michigan.gov/fraud** or writing to:

Office of the Inspector General
P.O. Box 30062
Lansing, MI 48909

You do not have to leave your name when you report fraud, waste or abuse.



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).

Why am I getting a text message from Aetna?

Aetna Better Health of Michigan enrolls members into health, wellness and condition-specific health messaging programs. These evidence-based programs help to remind members to go to the doctor, help manage conditions, give education on basic health topics and more.

Aetna has partnered with Wellpass to support text messaging to members. Wellpass is a secure text messaging program designed to help health plans better reach and support our members while meeting clinical and quality goals.

Why is my health plan messaging me?

By giving a mobile number to the health plan or to the State Medicaid Agency, members have given permission to get text messages about their health and health care benefits from the health plan.

What kind of text messages will I be receiving?

Members will get messages about their health, wellness and conditions. Members may also get messages that remind them to go to the doctor, support their condition management, provide education on basic health topics and more.

How many messages will I receive per week?

Typically, members will receive one to three messages a week.

What are health programs?

Health programs are evidence-based messaging that are available in English or Spanish.

Why are you texting me?

Text messaging is a better way to reach health plan members. It has

been proven to improve health outcomes. It is a good way to give useful health information for the community.

What kind of information will you be texting me about?

Care teams will send text messaging like:

- Health educational trainings
- Appointment/medication reminders
- Enrollment in health programs
- Alerts or resource links to give support to members

Care teams can send messaging tailored to the member's needs to educate members across the network.

How do I opt out of text messaging?

To stop getting text messages, you can text STOP. If you would like to get more information about the health program, please type the word HELP. Texting the key word STOP will allow the member to unsubscribe from getting texts. It

will ask the member if they would like to stop all messages. In order to stop all messages, please text STOPALL.

What if I accidentally opted out of a program? How can I restart a program or campaign?

If you accidentally opt out of messaging, please text the word START to restart messages.

What if the phone number that is being messaged is not my main phone number?

Please update your phone number with Member Services.

Will I be charged for this service?

There is no additional charge to receive text messages by the member's health plan. However, standard message and data rates may apply. Wellpass is free without regard to health coverage. A member's Wellpass account stays with the individual for life.





Your rights and responsibilities

Your rights

As a member or a parent/guardian of a member of Aetna Better Health of Michigan MIChild, you have the right to:

- Choose a primary care provider (PCP) as your personal medical provider
- Be treated with respect and dignity
- Be assured your personal information is kept private and confidential (see Notice of Privacy Practices)
- Seek advice and help
- Make recommendations about our members' rights and responsibilities policy
- Work with doctors in making decisions about your health and/or your child's health

- Get information about your health, PCP, our providers, and Aetna Better Health services and members' rights and responsibilities
- Discuss all treatment options for your or your child's condition, regardless of cost or benefit coverage
- Receive information about your rights and responsibilities as an Aetna Better Health of Michigan member
- Know about your or your child's 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
- Voice grievances, complaints and appeals and offer suggestions about Aetna Better Health of Michigan and/or the services we provide
- 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 or your child's health or safety is threatened
- Request information on how Aetna Better Health operates and its structure

Aetna Better Health's staff and participating providers will comply with all requirements concerning enrollee rights.

Your responsibilities

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

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

Low birth weight

It is well-known that Michigan has a high rate of low-birth-weight infants at 10.4%. African American women are more likely to have a baby with low birth weight.

Other risk factors include:

- Maternal chronic disease
- Diabetes that develops during pregnancy
- Maternal stress and depression
- Substance misuse
- Maternal smoking

Doing something about these risk factors will help increase the rate of normal-birth-weight infants. These all have covered services by Aetna.

Have regular OB/GYN visits during your pregnancy. Your doctor may have you come in for six or more visits during your pregnancy. Try to ensure that you make all of your visits. Our outreach staff can help you make prenatal and postpartum appointments. If you are high-risk, you may want to talk to our High Risk OB Care Manager nurse. If you would like to learn more, call our Outreach Department at **1-855-737-0770**.

Stop smoking or reduce the amount your smoke. Use the Aetna Smoking Cessation program. Call Member Outreach at **1-855-737-0770**.

Stop substance misuse. Talk to your doctor. Call Member Services at **1-866-316-3784** to find out how to get substance abuse services.



Attempt to reduce life stresses.

Complete depression screening tools offered by your doctor.

You can call Behavioral Health Services at **1-866-827-8704**. You do not need to call your primary care doctor to get behavioral health services.


Follow the guidance of your OB/GYN.

Participate with the Maternal Infant Health Program (MIHP) services — home visits to educate the mom.

Call our Outreach Department at **1-855-737-0770**. They can help you find an MIHP provider close to your home.

A healthy, normal-weight infant starts with **you!**

Visit an OB/GYN early in the pregnancy. Check the provider directory for a participating provider or call Member Services at **1-866-316-3784**.

 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>.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company, and its affiliates.

MI-16-09-03

Multi-language Interpreter Services

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**).

ARABIC: ملحوظة: إذا كنت تتحدث باللغة العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل على الرقم الموجود خلف بطاقتك الشخصية أو على **1-800-385-4104** (للصم والبكم: **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。請致電您的 ID 卡背面的電話號碼或 **1-800-385-4104** (TTY: **711**)。

SYRIAC: ܡܠܚܘܙܬܐ: ܐܝܢܐ ܚܘܬܬܐ ܒܐܠܓܘܬܐ ܥܘܪܝܝܬܐ، ܐܝܢܐ ܚܘܬܬܐ ܕܡܘܨܥܐ ܕܠܘܓܘܝܬܐ ܕܘܥܘܕܐ ܕܠܘܕܐ ܕܡܠܘܢܐ ܕܡܘܨܥܐ ܕܡܠܘܢܐ ܕܡܠܘܢܐ. ܐܬܘܩܘܢ ܥܠ ܥܘܕܘܢ ܕܡܠܘܢܐ ܕܡܠܘܢܐ ܕܡܠܘܢܐ ܕܡܠܘܢܐ. ܐܬܘܩܘܢ ܥܠ ܥܘܕܘܢ ܕܡܠܘܢܐ ܕܡܠܘܢܐ ܕܡܠܘܢܐ ܕܡܠܘܢܐ (ܡܠܘܢܐ ܕܡܠܘܢܐ) **1-800-385-4104** ܕܡܠܘܢܐ ܕܡܠܘܢܐ ܕܡܠܘܢܐ ܕܡܠܘܢܐ.

VIETNAMESE: CHÚ Ý: nếu bạn nói tiếng việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Hãy gọi số có ở mặt sau thẻ id của bạn hoặc **1-800-385-4104** (TTY: **711**)

ALBANIAN: VINI RE: Nëse flisni shqip, janë në dispozicion për ju shërbime përkthimi, falas. Telefononi numrin në pjesën e pasme të kartës suaj ID ose **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.

BENGALI: লক্ষ্য করুন: যদি আপনি বাংলায় কথা বলেন, তাহলে নি: খরচায় ভাষা সহায়তা পরিষেবা উপলব্ধ আছে। আপনার পরিচয়পত্রের উল্টোদিকে থাকা নম্বরে অথবা **1-800-385-4104** (TTY: **7**

POLISH: UWAGA: Jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer podany na odwrocie Twojego identyfikatora lub pod number **1-800-385-4104** (TTY: **711**).

GERMAN: ACHTUNG: Wenn Sie deutschen sprechen, können Sie unseren kostenlosen Sprachservice nutzen. Rufen Sie die Nummer auf der Rückseite Ihrer ID-Karte oder **1-800-385-4104** (TTY: **711**) an.

ITALIAN: ATTENZIONE: Nel caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuita. Chiamare il numero sul retro della tessera oppure il numero **1-800-385-4104** (utenti TTY: **711**).

JAPANESE: 注意事項:日本語をお話になる方は、無料で言語サポートのサービスをご利用いただけます。IDカード裏面の電話番号、または**1-800-385-4104** (TTY: **711**)までご連絡ください。

RUSSIAN: ВНИМАНИЕ: если вы говорите на русском языке, вам могут предоставить бесплатные услуги перевода. Позвоните по номеру, указанному на обратной стороне вашей идентификационной карточки, или по номеру **1-800-385-4104** (TTY: **711**).

SERBO-CROATIAN: OBAVEŠTENJE: Ako govorite srpski, usluge jezičke pomoći dostupne su vam besplatno. Pozovite broj na poleđini vaše identifikacione kartice ili broj **1-800-385-4104** (TTY – telefon za osobe sa oštećenim govorom ili sluhom: **711**).

TAGALOG: PAUNAWA: Kung nagsasalita ka ng wikang Tagalog, mayroon kang magagamit na mga libreng serbisyo para sa tulong sa wika. Tumawag sa numero na nasa likod ng iyong ID card o sa **1-800-385-4104** (TTY: **711**).

MI-16-09-03