



Aetna Better Health® of Florida



# Happy times

Fall 2018

## Manage your health on your phone

Members with smart phones (both iPhones and Androids) can download our Aetna Better Health mobile app. By using this app, you can:

- Find or change your primary care provider
- View or request a new ID card
- Find a specialty provider
- View your medical and pharmacy claims (if covered benefit)
- Send a message to Member Services
- View your benefits

## Quality matters

Our Quality Management department wants to make sure you get good care and services. That includes:

- Health management programs that work for you
- Easy access to quality medical and behavioral health care
- Help with any complex or chronic conditions or illnesses
- Support when you need it most
- High satisfaction with your doctors and with us

Our quality improvement activities each year include:

- Contacting you to remind you to get care (like well-child checkups)
- Sending you postcards or newsletters about health topics
- Reviewing the number, quality and kinds of services you receive
- Reminding your doctors and you about preventive health care

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1340 Concord Terrace  
Sunrise, FL 33323



## Back to school time

Are you ready? Get started by picking up the phone. By making appointments for health and dental checkups for your child, you'll help start the school year right.

Here's a checklist. Schedule:

- A well-child checkup.** A yearly exam is important—even when your child isn't sick. It may help spot problems early.
  - Make sure immunizations are up-to-date.
  - Schedule the physical that may be needed for your child to take part in school sports.
- An eye exam.** Seeing well can be a key to doing well in school. The sooner you find vision problems, the better.
- A hearing screening.** Good hearing makes it easier to perform well in school.
- A dental checkup.** Trouble with your child's teeth can make it hard to speak, eat and concentrate. A checkup may prevent serious problems and protect your child's smile.

## Quality matters

—Continued from previous page

- Making sure you're continuing to get the care you need
- Checking that your calls are answered quickly and that you get the right information

- Ensuring your doctor has all the information needed to care for you or your child

We have many more quality programs. You can call Member Services at **1-800-441-5501** to learn more about what we do to

## Learn about your pharmacy benefits

You can access the following pharmacy information on our website at **aetnabetterhealth.com/florida** by selecting "For Members," "Pharmacy Benefits" and then "Formulary Drug List."

- A list of preferred medications, including any restrictions and preferences
- A list of medications that require prior authorization, and applicable coverage criteria
- A list of drugs that require step therapy, including drugs which must be tried and failed
- A list and explanation of drugs that have limits
- Copayment and coinsurance requirements and the medications or classes to which they apply
- Procedures for step therapy, prior authorization, generic substitution, preferred-brand interchange and therapeutic interchange
- Information on the use of pharmaceutical management procedures
- Criteria used during the evaluation of new medications for coverage on the formulary
- A process for requesting a drug coverage exception

improve your care. We're also happy to give you a printed copy of our program goals and how we're doing. Or you can read updates on our website at **aetnabetterhealth.com/florida**.

## Need help? Go online

Turn to [aetnabetterhealth.com/florida](https://aetnabetterhealth.com/florida). From the member home page, click on each section to learn about the following:

- Benefits included and excluded from your coverage
- The prescription drug formulary and pharmacy procedures
- Charges you may be responsible for
- Benefit limits and getting care outside the system or service area
- Language assistance, including interpreter services
- Submitting a claim for covered services
- Finding network providers and information about them
- Getting primary care, including points of access

- Getting specialty, behavioral health or hospital care
- Getting care after office hours
- Getting emergency care and knowing when to call **911**
- Filing a complaint, plan appeal or fair hearing
- Evaluation of new medical technology
- What utilization management (UM) is, how we make decisions and how to contact our UM department
- Our disease management and case management programs
- Member rights and responsibilities
- Our privacy practices
- Our quality and compliance efforts and outcomes, including a description of our quality management program



## Information about incentives

We want you to feel sure that you're getting the health care and services you need. To that end, we have policies our providers must follow to ensure that you get the right health care.

Our policy is to not reward providers or others to deny or give less medically necessary care to a member of our plan. This is called an "affirmative statement." We do not reward or pay extra money to health care providers, staff or other people to:

- Deny you care
- Give you less care
- Deny tests or treatments that are medically necessary

 **All our members** should receive the right health care. If you want more information on this, call us at **1-800-441-5501**.

## Access and availability standards

It's important to us that you can get the care you need when you need it.

PCP services and referrals to specialists for medical and behavioral health services are available on a timely basis, as follows:

Appointment type	Availability standard
Urgent care	Within one (1) day of the request
Sick care	Within one (1) week of the request
Well-care visit	Within one (1) month of the request

## Connect with others: It's good for your health

When life is hectic, it's easy to become isolated. We put our heads down and push through chores and deadlines. The to-do list never ends.

### Take time to connect

Taking the time to connect with others is important. Social networks can help lift our mood and improve our health. Maintaining strong ties with family,

friends and workmates can help:

- Ease stress.
- Reduce the risk of depression.
- Reduce loneliness.
- Lower blood pressure.
- Boost the immune system.
- Increase happiness.

According to one study, the key difference between happy people and those who

were less happy was good relationships.

- Provide a sense of purpose and meaning.
- Provide support if you're dealing with a chronic illness.

Having a circle of support may help us live longer too.

### Making bonds stronger

It's true that humans are wired to connect, but

sometimes the wiring needs a new place to plug in.

Take some time to think about your interests. Ask yourself these questions:

- What do I enjoy?
- What would I like to learn?
- What would I like to do?

Then, brainstorm ways to enjoy those interests in a social setting.

Building social connections takes time and effort, but it's a skill you can use all of your life.

After all, no matter what your age, a hug from a friend can help lighten a heavy load. Sharing a laugh with friends boosts positive feelings that can strengthen your mind, heart and health.

Sources: *Mental Health America; Office on Women's Health*





## Protect your teen's health

We know preteens' and teens' friendships and social lives are important. They don't want something to get in the way of being with their friends, especially a serious illness. There is good news. Staying up-to-date on your teen's vaccines (shots) protects them from getting sick.

### Here are some important shots your teen needs:

**Tdap. One** shot of Tdap vaccine protects against these serious diseases: tetanus, diphtheria and pertussis (also called whooping cough). Preteens should get Tdap at age 11 or 12.

**MCV. Two** shots of meningococcal conjugate vaccine (MCV) protect against some of the bacteria that can cause meningitis (swelling of the lining around the brain and spinal cord) and sepsis (an infection in the blood).

**HPV. Three** shots of human papillomavirus (HPV) vaccine protect girls from the types of HPV that cause


most cervical cancers. HPV shots also help to protect boys from the types of HPV that cause genital warts.

**Flu. Annual** flu shots protect against the flu and other health problems the flu can cause, like dehydration (loss of body fluids), making asthma or diabetes worse, or even pneumonia.

**Other shots.** Your teen may also need these shots:

- Measles, mumps, rubella (MMR)
- Hep B
- Polio
- Hep A
- Pneumococcal
- Varicella

Your teen may need catch-up shots that they didn't get as a baby. Call your teen's doctor today to schedule an appointment. Don't forget to ask if your teen needs any other shots.

 **If you need help** making an appointment, call Aetna Better Health Member Services at **1-800-441-5501 (TTY: 711)**. We're available 24 hours a day, 7 days a week.



## Continuity of care.

If you are a new member who is at this time in active care with a doctor and getting a covered service, we will help you with your coordination of care without requiring additional permission. We will continue to pay for the care you are receiving for 60 days from your enrollment date with no cost to you. Please call us at **1-800-441-5501 (TTY/TDD: 711)**, from 8 a.m. to 7 p.m., for more information.



## Filing an appeal

A plan appeal is a formal request from an enrollee to seek a review of an action taken by the managed care plan. A plan appeal must be filed within sixty (60) calendar days from the date on the Notice of Adverse Benefit Determination Letter. If the plan appeal is filed orally (except for an expedited appeal), it must be followed up with a written notice within ten (10) calendar days of calling in the plan appeal. A Medicaid member may file a plan appeal, or a provider acting on the Medicaid member's behalf with written authorization may file a plan appeal. To file a plan appeal, call Member Services at **1-800-441-5501**, Monday through Friday, 8 a.m. to 7 p.m. Eastern Time (**TTY: 711**).

Or you can write to:

*Aetna Better Health of Florida  
Grievance & Appeals Department*  
1340 Concord Terrace  
Sunrise, FL 33323  
Fax: **860-607-7894**

## What if I don't agree with the plan appeal outcome?

A fair hearing can be requested any time up to 120 days from receipt of the Notice of Plan Appeal Resolution Letter. A fair hearing can be requested by calling **1-877-254-1055** or by writing to:

*Agency for Health Care Administration  
Medicaid Hearing Unit*  
P.O. Box 60127  
Ft. Myers, FL 33906  
**1-877-254-1055** (toll-free)  
**239-338-2642** (fax)  
**medicaidhearingunit@  
ahca.myflorida.com**

## Benefits and copayments

You can find a list of covered and non-covered benefits and services in your Member Handbook and on our website. Your Member Handbook also discusses some costs that may be your responsibility.

### Costs you may need to pay

As an Aetna Better Health member, you are generally not responsible for paying for covered health care services. There are some exceptions though. For example, if you receive a service and your provider tells you beforehand that it's not a covered benefit, you may be responsible for paying for it.

If you get a bill from your doctor for a covered health care service, call us at **1-800-441-5501**.

## Flu season is coming: What you need to know

**Keep it clean.** You can get flu if you touch something that a sick person has touched or coughed or sneezed on and then touch your own eyes, nose or mouth. But you have the power to keep flu away.

- Wash your hands with soap and water regularly: before and after you eat, after you go to the bathroom, and after you've been in a public place.
- Use antibacterial hand cleaners if soap and water aren't available.
- Avoid touching your eyes, nose and mouth.
- Finally, keep a distance from people who are sick. And if you start to feel sick, be considerate of others—cough or sneeze into your sleeve or a tissue, and stay home.

**Get the flu shot.** It's still your first line of defense. Influenza (flu) is a contagious disease

that spreads around the United States every year, usually between October and May. Flu is caused by influenza viruses and is spread mainly by coughing, sneezing and close contact. Anyone can get flu. Flu strikes suddenly and can last several days. Symptoms vary by age but can include:

- Fever and chills
- Sore throat
- Muscle aches
- Fatigue
- Cough
- Headache
- Runny or stuffy nose

Flu can also lead to pneumonia and blood infections. Flu can cause diarrhea and seizures in children. If you have a medical condition, such as heart or lung disease, flu can make it worse. Flu is more dangerous for some people. Infants and young children, people

65 years of age and older, pregnant women, and people with certain health conditions or a weakened immune system are at greatest risk. Each year thousands of people in the United States die from flu, and many more

are hospitalized. A flu shot can:

- Keep you from getting flu
- Make flu less severe if you do get it
- Keep you from spreading flu to your family and other people



## Healthy Behaviors programs

We offer programs to our members who want to stop smoking, lose weight or address any substance use problems. We also offer prenatal and after-delivery programs.

We reward members who join and meet certain goals. If you participate and meet certain goals, you can earn gift cards.

You do not have to join the Healthy Behaviors program. The choice is yours to be a part of the program. To learn more about the Healthy Behaviors program, call us toll-free at **1-800-441-5501**.



## Do I need a referral?

For some care, you may need to get a referral from your primary care provider. If you don't get a referral and you see a

doctor that is not in our network, you will have to pay for the visit. However, emergency services, poststabilization and family planning services

do not require a referral if you go to an in-network provider. If you have any questions, please call Member Services at **1-800-441-5501**.

## Be prepared with an advance directive

Staying healthy is a goal we all want. However, sometimes things happen all of a sudden. It's always good to prepare for things we don't expect. Advance directives help you be prepared.

Advance directives are instructions about your medical care if you are not able to make those decisions. An advance directive becomes your voice when you can't say what you want or speak for yourself. Advance directives can also say who makes medical decisions for you when you can't.

There are two kinds of advance directives:

- A living will is a document that says what medical care you want or don't want. It is used in the event that you are not able to speak for yourself.
- A health care power of attorney is a legal document that says who can make medical decisions for you. It is also used when you are not able to speak for yourself.

If you have any questions, please call Member Services at **1-800-441-5501**.

## What if my doctor sends me for lab tests?

Your doctor will send your lab tests to Lab Corp. If you need to take a lab test outside of your physician's office, please go to Lab Corp. To find a location near you, please call **1-800-877-5227** or go to **labcorp.com**. You can also find this information by visiting our website, **aetnabetterhealth.com/florida**, and selecting "For Members," "Medicaid," "Benefits and Services" and clicking on the link "Lab Services."

No other labs are in-network. You will be responsible for the bill if you do not go to Lab Corp.



## Your postpartum check-up: Questions to ask

If you've recently had a baby, you've probably seen a lot of your doctor. Prenatal check-ups are important for you and your baby's health. So is your postpartum check-up.

That's when your doctor will check to see how you're recovering from your baby's birth. It's a great time to ask any questions you have about your health—physical and emotional. For example:

**Q.** *When will I have my period again?*

**Why it's worth asking:**

There's a range of what's normal. If you nurse your baby—which delays periods—your next one might be months away. Your doctor can tell you what to expect.

**Q.** *Why shouldn't I get pregnant right away?*

**Why it's worth asking:**

Becoming pregnant again within a year after giving birth raises the risk that your baby will be born too early. Keep in mind—not all kinds of birth control are safe to use if you're nursing.

**Q.** *What's the best way to lose baby weight?*

**Why it's worth asking:**

The safest way is to drop pounds gradually, especially if you're nursing. Your doctor can help you do that—with tips for sticking to a healthy diet and exercise plan.

**Q.** *When will I feel like myself again?*

**Why it's worth asking:**

Many new moms feel sad and weepy for a few days after giving birth. That's normal.


However, if your sadness doesn't go away, you might have what's called

postpartum depression. It's a serious condition that can make it hard to care for your baby—and yourself, but it's very treatable. So be sure to speak up if you're sad and depressed.

*Sources: March of Dimes; National Institutes of Health; Office on Women's Health*



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 This newsletter is published as a community service for the friends and members of Aetna Better Health® of Florida. 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 Florida is a Managed Care Plan with a Florida Medicaid Contract. Health or wellness or prevention information.

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## AETNA BETTER HEALTH® OF FLORIDA

### 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.

## 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**).

**FRENCH CREOLE:** ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd nan lang ou pale a ki disponib gratis pou ou. Rele nan nimewo ki sou do kat Idantifikasyon (ID) w la oswa rele nan **1-800-385-4104** (TTY: **711**).

**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**).

**PORTUGUESE:** ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para o número que se encontra na parte de trás do seu cartão de identificação ou **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。請致電您的 ID 卡背面的電話號碼或 **1-800-385-4104** (TTY: **711**)。

**FRENCH:** ATTENTION: si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le numéro indiqué au verso de votre carte d'identité ou le **1-800-385-4104** (ATS: **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**).

**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**).

**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**).

**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**).

**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.

**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.

**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**).

**GUJARATI:** ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાયતા સેવાઓ તમારા માટે ઉપલબ્ધ છે. તમારા આઈડી કાર્ડની પાછળ આપેલા નંબર પર અથવા **1-800-385-4104** પર કોલ કરો (TTY: **711**).

**THAI:** ข้อควรระวัง: ถ้าคุณพูดภาษาไทย คุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทรติดต่อหมายเลขที่อยู่ด้านหลังบัตร ID ของคุณ หรือหมายเลข **1-800-385-4104** (TTY: **711**)