



# Together



[AetnaBetterHealth.com/Michigan](https://AetnaBetterHealth.com/Michigan) Aetna Better Health<sup>SM</sup> Premier Plan (Medicare-Medicaid Plan)

## Aetna Better Health Premier Plan partners with NationsBenefits<sup>®</sup> for 2023

At Aetna Better Health Premier Plan, our goal is to provide you with the best service and care possible, because your health is our top priority. That's why we partnered with NationsBenefits<sup>®</sup> to issue your Benefits Mastercard<sup>®</sup> prepaid card for the 2023 plan year.

With your prepaid card, you get a spending amount for over-the-counter (OTC) products. This will make it easier for you to manage your benefit and purchase the items you need to personalize your care!

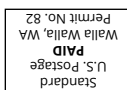
In addition to the OTC benefit, members with specific chronic conditions also have access to an additional flex purse using the Benefits Mastercard<sup>®</sup> prepaid card to cover utilities and food expenses. Funds will be automatically loaded to the existing card upon confirmation of eligibility for the flex benefit.\*

Once you receive and activate your card, you can start using it to shop online through the MyBenefits portal at **AetnaMMP.NationsBenefits.com** and in-store at participating retail locations near you. The transaction process is simple and hassle-free. When at a retail location, simply swipe your card for payment and the charges will

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### Aetna Better Health Premier Plan Newsletter Spring 2023

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Aetna Better Health Premier Plan  
28588 Northwestern Highway  
Suite 380B  
Southfield, MI 48034



## Face-to-face visits

Did you know that care management can involve in-person visits? During the COVID-19 pandemic, our care coordinators have not been doing face-to-face visits, but we will be resuming these visits. Over the next several months, your care coordinator will be reaching out to you and offering a face-to-face visit. These types of visits allow you to talk with your care coordinator in person — either from your home or in the community.

 To find out more about these services, call your care coordinator toll free at **1-855-676-5772 (TTY: 711)**, Monday through Friday, from 8 AM to 5 PM.

## NationsBenefits®

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go against the appropriate allowance.

If you have any questions, please visit **AetnaMMP.NationsBenefits.com** or call **1-833-838-1307 (TTY: 711)**. If you do not currently have a card, you can call **1-833-838-1307 (TTY: 711)** to request one.

Member Experience Advisors are available 24 hours per day, 7 days per week, 365 days per year. Language support services are available free of charge.

\*The benefits mentioned are a part of special supplemental program for the chronically ill.

Not all members qualify.

*The Benefits Mastercard® Prepaid Card is issued by The Bancorp Bank, N.A., Member FDIC, pursuant to license by Mastercard International Incorporated. Mastercard is a registered trademark, and the circles design is a trademark of Mastercard International Incorporated. This is a benefits card that can only be used at certain Mastercard merchants participating in this program and will be authorized for qualified purchases as set forth in your Cardholder Agreement. Valid only in the U.S. No cash access. Certain of these materials may be available in additional languages upon request. This is not a*

*gift card or gift certificate. You have received this card as a gratuity without the payment of any monetary value or consideration.*

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## Dental services


Taking care of your mouth and teeth requires more than just brushing. Dental visits and services are an important part of your health care. Bad oral health has been linked to other health issues like heart disease and strokes. As a member of Aetna Better Health Premier Plan, certain dental services are covered for you. These services include:

- Cleanings and examinations every 6 months
- Bitewing x-rays once every 12 months
- Fillings
- Tooth extractions
- Complete or partial dentures every five years
- Deep cleanings

Other dental services are covered. Some services may require a prior authorization.

 To find out more about these services or for help finding a dentist, call your care coordinator toll free at **1-855-676-5772 (TTY: 711)**, Monday through Friday, from 8 AM to 5 PM.

## Has your personal information changed?

 Any changes in phone number, email or address should be reported to the Michigan Department of Health and Human Services. You can do this by going to the MIBridges website at **Michigan.gov/MIBridges**. If you do not have an account, you will need to create an account by selecting "Register." Once in your account, when reporting changes, please make sure you do so in both the profile section and the Report Changes area. The Report Changes area is what the local office will use to update the address for your case.





## Dial 988 for the Suicide & Crisis Lifeline

The phone number **988** is a new national hotline for mental health support. It is like using **911** for emergency services. The new number comes from the National Suicide Hotline Designation Act, passed by Congress in 2020.

Dialing **988** takes the place of the National Suicide Prevention Lifeline (**1-800-273-8255**). The new **988** number will help meet the national need for urgent mental health care. **988** will help increase suicide help. The three-digit phone number will provide greater access to lifesaving services.

### How it works

The 988 network sends calls to a local crisis center based on the caller's location. Trained counselors can provide support in these critical moments. They can connect people to local resources. Trained counselors can also help plan longer-term care to sustain recovery and quality of life. The lifeline can help thousands of people overcome crisis situations every day, providing 24/7, free and private support. Special routing is available for veterans, Spanish-speaking individuals and multiple languages as needed.

**988** supports CVS Health's commitment to make mental well-being services more accessible and less complicated.

## Behavioral health service changes

The way that Aetna Better Health Premier Plan is delivering behavioral health services is changing. Most of these changes are happening behind the scenes and should not impact the types of services that you receive. However, where you receive these services may change. If you have questions related to these services, call your care coordinator toll-free at **1-855-676-5772 (TTY: 711)**, Monday through Friday, from 8 AM to 5 PM.



# LIVE ONLINE LEARNING

SilverSneakers keeps getting better!

Experience new ways to ignite your interests and hobbies or discover new ones. Enjoy participating in fun, easy-to-follow, live interactive online classes with your peers.

SilverSneakers® has teamed up with GetSetUp<sup>1</sup> to bring you more ways to learn and grow. As an Aetna Medicare Advantage member, you can join GetSetUp classes at **no extra cost**.<sup>2</sup>



### Learn new skills

With a variety of specially curated classes in categories like **cooking, food & nutrition, mental fitness and more.**



### Interact with peers

Enjoy learning, creating and sharing in a positive environment with older adults.



### Learn in your language

Classes are held in a variety of languages such as English, Spanish, Mandarin and Hindi.

Find out more and start using your exciting new perk today!

[ExploreSilverSneakers.com](https://www.exploresilver sneakers.com)

1-888-423-4632 (TTY: 711)  
Monday through Friday, 8 AM - 8 PM ET

1. GetSetUp is a third-party provider and is not owned or operated by Tivity Health, Inc. ("Tivity") or its affiliates. Users must have internet service to access GetSetUp service. Internet service charges are responsibility of user.
2. Charges may apply for access to certain GetSetUp classes or functionality.
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## Population Health programs offered to keep you healthy

We have valued programs to help members be as healthy as possible. Every member is on their own personal health care journey. We can guide you in managing and improving your health.

For most programs, we will automatically put you into the program if you are eligible. You can choose to join or leave the program at any time. Call us if you do not want to be part of a program.

To learn more about how we can help you with your health care, call Member Services at **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week. The call is free.

### How does it work?

As a member of Aetna Better Health Premier Plan, you will have your own care coordinator who can help you find the right care and services. Your care coordinator will contact you soon after you are enrolled with Aetna Better Health Premier Plan.

A care coordinator will work with you, your doctors and other providers to make sure you receive the right care and services with your needs in mind. The goal is to build a care plan just for you to help you live a healthier life. Your care coordinator will meet with you by phone or where you live as often as needed.



Below are some of the programs we offer to keep you healthy. You can learn more about these programs on our website at [AetnaBetterHealth.com/Michigan](https://www.aetna.com/betterhealth/michigan).

### **Keeping members healthy**

Along with your doctor, we will partner with you to get the best care and stay healthy. We want you to visit your doctor each year and get tests or vaccines like:

- Breast cancer screening
- Colorectal cancer screening
- Flu shot
- Eye exam

### **Managing members with emerging risk**

If you have diabetes or high blood pressure, we will teach you how to take care of yourself. You will learn:

- How to take care of your diabetes or high blood pressure conditions
- How to watch your blood sugar or blood pressure
- Healthy habits that will make you feel better

### **Patient safety and outcomes across settings**

We want you to be informed about the different medicines you may need to take. We can help you with questions you should ask your doctor, like:

- Why am I taking this medicine?
- How should the medicine be taken?
- Are there any side effects or possible allergic reactions to this medicine?


### **Managing multiple chronic conditions**

A care coordinator will work with you, your doctors and other providers to make sure you receive the right care and services with your needs in mind. Your care coordinator will help you if:

- You are going to the emergency room a lot.
- You are having trouble getting things your doctor has ordered.
- You need information about a disease or treatment.
- You need help with activities of daily living.
- You have been recently hospitalized and need help getting all your discharge needs met.

At times, you may not need much assistance from a care coordinator, but conditions can change and can be overwhelming. To offer you support, your doctor, hospital discharge planner or other provider may refer you to case management. Or a nurse on our health information line may refer you. If you need help, do not wait for a referral. You can self-refer by calling us at **1-855-676-5772 (TTY: 711)** and asking for case management.



 We want to help you stay healthy and make sure that you are getting the care and services you deserve. To learn more about how we can help you, call Member Services at **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week. The call is free.

# Affordable Connectivity Program lowers cost of broadband services for eligible households

The Centers for Medicare & Medicaid Services is working to help build awareness about the Affordable Connectivity Program, a Federal Communications Commission program. The new long-term benefit will help to lower the cost of broadband service for eligible households struggling to afford internet service.

## The Affordable Connectivity Program provides:

- Up to \$30/month discount for broadband service
- Up to \$75/month discount for households on qualifying tribal lands
- A one-time discount of up to \$100 for a laptop, desktop

computer or tablet purchased through a participating provider if the household contributes more than \$10 but less than \$50 toward the purchase price

The Affordable Connectivity Program is limited to one monthly service discount and one device discount per household.

## Eligibility

The guidelines outline specific criteria for eligibility, including having a household income at or below 200% of the federal poverty guidelines or having a member of the household who meets at least one of the criteria outlined at [FCC.gov/ACP](https://www.fcc.gov/ACP).

## Two steps to enroll

1. Go to [ACPBenefit.org](https://www.acpbenefit.org) to submit an application or print out a mail-in application.
2. Contact your preferred participating provider to select a plan and have the discount applied to your bill.

Some providers may have an alternative application that they will ask you to complete. Eligible households must **both apply for the program and contact a participating provider to select a service plan.**







# Help plan the future of member care



Join the Aetna Member Advisory Committee (MAC)

## Our mission

We believe that **Healthier happens together™**. That's why we need your feedback about member care and services and your thoughts on what could make health care better for you and other Aetna plan members.



### The Committee goals are to:

- Share ideas
- Meet other members with similar experiences
- Learn about resources that can improve member health and overall well-being
- Provide feedback around health plan policies, initiatives, communication and benefit offerings



### Who can join the Committee?

- Current members of the plan
- Family and providers of plan members
- Community advocacy groups



### Our Committee members can receive:

- Free transportation to each meeting
- Free lunch and refreshments
- Additional incentives like gift cards



### Join us at the following meetings below

Q2: June 20 and 21, 2023

Q3: September 19 and 20, 2023

Q4: December 12 and 13, 2023

All meetings will be held from 1 PM to 2 PM

For more information about the Committee, please call Member Services at:

**1-855-676-5772 (TTY: 711)**  
24 hours a day, 7 days a week

## Quality Management program

It is important to us that you receive quality health care and customer service. At Aetna Better Health Premier Plan, our Quality Management program ensures our that services meet high standards of quality and safety.

### Our Quality Management program includes:

- Health management programs that work for you
- Easy access to quality medical and behavioral health care

- Help with any chronic conditions or illnesses
- High satisfaction with your doctors and with us

### Each year, our quality improvement activities include:

- Contacting you to remind you to get care.
- 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.
- Making sure you are continuing to get the care you need.
- Meeting the cultural, ethnic and language needs of our members.
- Checking that your calls are answered quickly and that you get the right information.
- Taking actions when we identify issues with the quality of care being provided.
- Evaluating our programs and data trends of how our members receive health care and preventive care services. We compare our findings to national practice guidelines.



Throughout the year, we evaluate our quality programs and data trends related to how our members receive health care and preventive care services. We will share this information with you. To learn more about our Quality Management program, visit our website at **[AetnaBetterHealth.com/Michigan](https://www.aetna.com/betterhealth/michigan)**. You can call Member Services at **1-855-676-5772 (TTY: 711)** to request a copy of our Quality Management program and to learn more about what we are doing to improve your care.



## The power of friendship

Good friends can brighten your life. But did you know that they're also good for your health? According to the National Institutes of Health, HelpGuide and other experts, having strong social ties may reduce stress and lower your risk for heart disease. It may even help you live longer.

### Friend power

Hanging out with buddies can boost your mood and improve your outlook on life. Tough times feel easier when you can share what's going on. And reaching goals like healthier eating and exercising, quitting smoking, or generally improving your life is easier with a friend's help.

### Making new friends

It can be hard to make new friends. If you're shy or out

of practice because of the pandemic, try these tips.

**Find people with common interests.** You might:

- Join a club
- Volunteer
- Take a class
- Reconnect with former classmates or work friends

**Get out and about.** It's easiest to meet new people in public. Get out there, and remind yourself to engage with others. You might meet people when you walk your dog. Or you might try going to neighborhood events or talks at your local library.

**Ask questions.** Being friendly doesn't mean you have to be the life of the party. If you feel awkward when talking to other people, ask them questions. Then share what

you feel most comfortable with. And pay attention to them, not to your smartphone or other distractions.

**Deepen your relationships.**

We all know interesting people who we talk with casually in our neighborhood or at work. If you think you have something in common, invite them out to coffee or lunch to get to know them better.

Finding friends to trust is worth it. You will feel happier, have someone you can turn to when things go bad, have less stress, and even live a longer and happier life.

*Sources: American Academy of Pediatrics; HelpGuide.org; National Institute on Aging; National Institutes of Health*




## Working with you to get the right care

Our utilization management (UM) program ensures that you get the right care in the right setting when you need it. UM staff can help you and your doctors make decisions about your health care. Our UM program helps make sure you get the right services at the right place.

You should know:

- We make UM decisions by looking at your benefits and clinical guidelines for the most appropriate care and service. We consider your needs, evidence-based practice and availability of care. You also must have active coverage.
- We don't reward doctors or other people for denying coverage or care.
- Our employees do not get any incentives to reduce the services you get.

 If you have questions about UM, you can speak to someone by calling Member Services toll-free at **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week. If you need language translation or assistance, you can contact Member Services toll-free at **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week.



This newsletter is published as a community service for the friends and members of Aetna Better Health Premier Plan. 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. For information on Aetna Better Health Premier Plan and other options for your health care, call Michigan ENROLLS at **1-800-975-7630 (TTY: 1-888-263-5897)**. Office hours are Monday through Friday, 8 AM to 7 PM. Aetna Better Health Premier Plan is a health plan that contracts with both Medicare and Michigan Medicaid to provide benefits of both programs to enrollees. 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 Aetna Better Health Premier Plan Member Handbook.

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