



Aetna Better HealthSM Premier Plan



Fall 2018

Emergency Department Diversion Program — learn more!

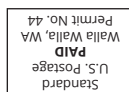
Aetna Better Health Premier Plan's Emergency Department (emergency room, or ER) Diversion Program is focused on helping our members get the right care where they need it. We have a number of actions that we're excited to focus on this year:

- Your case manager will receive notification of all of your ER visits, and he or she will contact you to offer assistance and help connect you with your providers.
- If you've visited the ER, you and your doctor may receive a letter in the mail in order to help get you connected with your primary care provider (PCP) and/or your assigned case manager for any needed follow-up.
- If you have visited the hospital for a problem that could have been treated at a clinic or a PCP's office, you may receive a postcard from Aetna that lists the contact

information for an in-network immediate care clinic that is closest to your home.

- If you visit the ER because of specific medical diagnoses (asthma, heart failure, diabetes, COPD, hypertension and end-stage renal disease), we may reach out to you to suggest engaging in our in-home telemonitoring program.

Our goal is to get you connected with providers/PCPs that can best support your needs and keep you as healthy as possible! For additional assistance or information, please call **1-866-600-2139** and ask to be connected to our case management department.



Aetna Better HealthSM Premier Plan
333 W. Wacker Drive, Suite 2100, MC F646
Chicago, IL 60606

Get the shot, not the flu

Just about everyone who's 6 months of age or older needs a flu shot. That's especially true if you have a chronic illness.

The best time to get a shot is before the flu starts spreading in your community. That's hard to predict, though. So it's probably best to get the shot as soon as it's available in your area.

Remember: You can't get the flu from a shot. It's among the best ways to avoid getting the flu.

Source: Centers for Disease Control and Prevention

How National Coverage Decisions affect your plan

The Centers for Medicare & Medicaid Services (CMS) sometimes changes coverage rules for a benefit or service. When this happens, CMS issues a National Coverage Determination (NCD).

NCDs tell us:

- What's covered
- What's changing
- What Medicare pays

We post NCDs on our website at least 30 days prior to the effective date. To view them, visit aetnabetterhealth.com/illinois. Then go to "For Members," select "Aetna Better Health Premier Plan" and then select "Member Benefits."


You can also visit cms.gov for more information. Once on the website, click on "Medicare," then type "National Coverage Determination" in the search box.



Nobody quits like Chicagoland!

The Great American Smokeout takes place every year on the third Thursday of November. The American Cancer Society marks this day by encouraging people who smoke to use the date to make a plan to quit. If you smoke, you can use this day or any day to take the next step in creating a healthier life and to help lessen your chance of cancer.

If you are ready to quit smoking and need assistance, you may contact the Illinois Tobacco Quitline — a free resource for tobacco users who want to quit for good. Their registered nurses, respiratory therapists and certified tobacco treatment counselors are on call seven days a week from 7 a.m. to 11 p.m. to answer all your tobacco-related questions and provide the support you need to break the habit.

 **¿Habla español?** The Illinois Tobacco Quitline serves a diverse client base, with Spanish-speaking counselors and live translation services for more than 200 languages. The Illinois Tobacco Quitline is sponsored by the Illinois Department of Public Health and the American Lung Association of Illinois. For more information, you may call them at **1-866-QUIT-YES (1-866-784-8937)** or go to their website: quityes.org.

Understanding the Home Care Ombudsman Program

The Home Care Ombudsman Program helps older adults and individuals with disabilities who are receiving in-home services through a managed care organization (health plan) or the Home and Community-Based Services (HCBS) Waiver Program. A Home Care Ombudsman can answer questions



about the services you receive, help you appeal a decision about your services, file a complaint on your behalf against the health plan or waiver services program, and make referrals on your behalf when needed.

This program is available free of charge to you if you are enrolled in:

- The Medicaid Medicare Alignment Initiative (MMAI)

OR if you are receiving services through one of the following waivers:

- Persons who are elderly (aging)
- Persons with brain injury (BI)
- Persons with HIV or AIDS
- Persons with disabilities

You can contact a Home Care Ombudsman if you feel that you are not being treated fairly by your health plan or the HCBS Program. This also means that your voice is important to them! If you have any questions about the Home Care Ombudsman Program, please email Aging.HCOprogram@illinois.gov or call the Illinois Department on Aging's Senior Helpline toll-free at **1-800-252-8966**. Please **press 4** for "other services" and ask for a Home Care Ombudsman.


Contact us



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24 hours a day
Member Services: **1-866-600-2139**
aetnabetterhealth.com/illinois

 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 healthcare needs. Articles in our newsletter are for many different people. We write articles about different kinds of medical problems that people are interested in learning about. These articles may not be about medical problems that you have. Aetna Better HealthSM Premier Plan (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Illinois Medicaid to provide benefits of both programs to enrollees. You can get this document in Spanish or speak with someone about this information in other languages for free. Call Member Services at **1-866-600-2139 (TTY/TDD: 711)**, 24 hours a day, 7 days a week. The call is free. The benefit information provided is a brief summary, not a complete description of benefits. Limitations and restrictions may apply. For more information, call Aetna Better HealthSM Premier Plan Member Services at **1-866-600-2139** or read the Aetna Better HealthSM Premier Plan Member Handbook. Benefits, List of Covered Drugs, pharmacy and provider networks may change from time to time throughout the year and on Jan. 1 of each year.

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**).

POLISH: UWAGA: Jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer podany na odwrocie Twojego identyfikatora lub pod numer **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**)。

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.

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**).

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**).

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**).

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**).

URDU: توجہ دیں: اگر آپ اردو زبان بولتے ہیں، تو زبان سے متعلق مدد کی خدمات آپ کے لئے مفت دستیاب ہیں - اپنے شناختی کارڈ کے پیچھے موجود نمبر پر یا **1-800-385-4104** (TTY: **711**) پر رابطہ کریں۔

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**).

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**).

HINDI: ध्यान दें: यदि आप हिंदी भाषा बोलते हैं तो आपके लिए भाषा सहायता सेवाएं नि: शुल्क उपलब्ध हैं। अपने आईडी कार्ड के पृष्ठ भाग में दिए गए नम्बर अथवा **1-800-385-4104** (TTY: **711**) पर कॉल करें।

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**).

GREEK: ΠΡΟΣΟΧΗ: Εάν μιλάτε Ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε τον αριθμό που θα βρείτε στο πίσω μέρος της ταυτότητάς σας ή στο **1-800-385-4104** (Λειτουργία 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.