



Hit pause



AetnaBetterHealth.com/Michigan

Aetna Better Health® Premier Plan

Staying connected to avoid isolation.

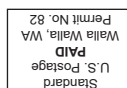
Isolation and loneliness recently have touched many. To avoid isolation, be sure to keep in contact with family and friends, but also think of other options. Try connecting with phone calls, video conferences, texts and emails. Play word games with friends. Watch television and sports while chatting. Be sure to include daily self-care. Look for ways to exercise. Connect with nature and get enough sleep and nutrition. Consider a pet as a companion.

Did you know that AARP also offers additional supports? AARP has the Friendly Voice program. Trained, caring volunteers are ready to chat, listen or just say hello. Request a call at **1-888-281-0145** for English and **1-888-497-4108** for Spanish. AARP also has a safe, supportive community for people facing health challenges

and the people caring for them. This program is called The Mighty. Chat with others about their experiences and engage in online activities together. AARP and Element3 Health virtually connect people around hobbies and activities to lead happier, healthier lives. Let your care manager know if you are struggling so you can get the right support.

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Making the most of your doctor visits.

Schedule your appointment

When you call to make your appointment, explain to the receptionist why you need to see the doctor. This will help them schedule the right type of appointment. Ask if a blood test or other tests are required prior to your appointment.

Prepare for your visit

Determine what you would like out of the appointment. If this is a new doctor, bring a copy of your medical history and list of current medications. Complete any lab or diagnostic tests required for the visit. Keep and bring a diary of your symptoms to record when they started, how often they occur, how long they last and what alleviates them. Write down specific questions you would like answered.

While at the visit

Set the agenda at the start of your visit. Prepare in advance the top two or three concerns you want to discuss with your doctor. Remember that medical care is a conversation, so speak up. Never be embarrassed to ask your doctor to repeat something you did not hear or ask for clarification if you did not understand.

Bring a family member or friend if you feel you need support or someone to take notes, which will help you later to remember what was discussed. Always be honest with your doctor. You may not like or want to admit some things, but withholding the truth can negatively affect the quality of your care or possibly delay diagnosis or treatment.

Don't forget your emotional health. It influences your physical health.

Before leaving the appointment, reach an agreement about your treatment plan. Find out what your next steps are, when to return, what warning signs or what concerns you will need to call the doctor for, how to best reach your doctor, and when to expect to receive a response.



Stay connected with GetSetUp.

The Aging and Adult Services Agency (AASA) at Michigan Department of Health and Human Services (MDHHS) is excited to launch a new partnership, supported in part by the Michigan Health Endowment Fund, to bring *free* virtual educational and social engagement opportunities to older Michiganders.

GetSetUp is a digital education platform for older adults, offering 150+ technology and enrichment classes, all taught by retired educators.

GetSetUp is the fastest growing live interactive platform and community where older adults teach their peers new skills. This is a safe place for older adults to hang out, learn, teach and engage with their peers over videos to live healthier, happier and more connected lives from the comfort of home. For the next six months, GetSetUp courses are available for free to all Michiganders age 60 and over.

We realize that now more than ever, our older adults are at home and may need assistance learning how to use things like video services to communicate with loved ones; how to use a smartphone, tablet or computer; how to do things like ordering groceries or household items; or how to access services like telehealth. Or they may just want to take a

fun class to socialize and make new friends. These classes are free, fun and interactive, and, best of all, they are taught by other older adults.

As part of the program, GetSetUp will run classes 10 hours a day to make it very easy for Michiganders to take a class anytime they like from the comfort and safety of their homes.

Visit GetSetUp.io/Partner/Michigan to learn more and

sign up for your free classes, including an optional new member orientation to give you an overview of all that's available! Use the code MICHIGANHEALTH at sign-up.

If you have questions, call Member Services at **1-855-676-5772 (TTY: 711)**.

Learn how to blog and share your life story online.



Become a virtual tutor to your grandkids. Learn the tools needed to teach remotely over Zoom.

Additional benefits for you.

As a member of Aetna Better Health Premier Plan, you get extra benefits in addition to what Medicare and Medicaid cover. These extra benefits are available at no cost to you.

Dental deep cleaning*

One medically needed dental deep cleaning (scaling and planing) per year.

Cell phone benefit*

For members who qualify for the federal cell phone program, with free calls to our Member Services number, free health-related texts and free health plan texts.

Home-delivered meals

10 home-delivered, nutritious meals after inpatient hospitalization or nursing home stay (two per day for five days).

Podiatry services

Three preventive, routine foot care visits per year.

SilverSneakers®

Access to fitness centers, specialized fitness classes for members at no added cost.

Over-the-counter (OTC) supplies

\$90 of certain OTC supplies every three months from certain retail locations or delivered to your home.

Smoking cessation

Additional counseling sessions, nicotine patches, gum and lozenges, some RX medications without prior authorization.

Your doctor may need to get prior authorization for you to get some of these benefits.

You can work with a care coordinator and care team to manage all your providers and services. Additional information about Aetna Better Health Premier Plan benefits can be found at **AetnaBetterHealth.com/Michigan** or by calling **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week.

*Restrictions apply.





Prior authorization.

There may be a time when you have a health problem that your primary care physician (PCP) can't treat alone. Sometimes you may need to see a specialist — this is called a referral.

Prior authorization is a request to Aetna Better Health Plan for you to get special services. We must approve your provider's request before you can receive these services.

As a reminder, you don't need a referral or prior authorization to get emergency services.

How it works

Aetna Better Health Plan providers follow prior authorization guidelines. If you need help understanding any of these guidelines, just call Member Services. Or you can ask your care manager. It may take up to 14 days to review a routine request. We take less than or up to 72 hours to review urgent requests. All reviews are timed from when we first receive the request from your provider.

If we need more information from your provider, we may ask for a 14-day extension. If we don't get the information we need from your provider, we may deny the request. If this happens, you'll receive a Notice of Denial letter that explains your appeal rights. If your provider makes an urgent prior authorization request and it doesn't meet the urgent criteria, we'll send you a letter to let you know it will be processed as a routine request. You can make a complaint if you disagree.

Questions about your prior authorizations? Just call your PCP, your care manager or Member Services. You can reach Member Services by calling **1-855-676-5772 (TTY: 711)** and following the prompts.

You can also visit our website at **[AetnaBetterHealth.com/Michigan](https://www.AetnaBetterHealth.com/Michigan)** for more information.

High blood pressure? Make the most of your meds.

High blood pressure can be tricky. You can have it and feel fine. If so, you might think you no longer need your blood pressure medicines. But it's important to keep taking them until your doctor says it's OK to stop.

If you skip your medicines, your blood pressure could rise too high. That could lead to a heart attack, stroke or kidney failure.

You can do this!

If you have a concern or question about your medicines, speak up. Your doctor can help you understand how to get the most out of them.

Be sure to:

- Mention any side effects. There may be other blood pressure drugs that would work better for you.
- Tell your doctor if you sometimes forget your medicines or if you have trouble filling the prescription for any reason.
- Tell your doctor about all of the medicines you're taking. Over-the-counter ones count too. They could affect your blood pressure.
- Ask what else you can do to lower your blood pressure. Exercise, heart-healthy foods and not smoking can be a big help. Your doctor can help you take steps toward these healthier habits.

Source: American Heart Association



Sharing information is important.

Have you told your primary care physician (PCP) that you see a behavioral health doctor? It is important to let your PCP know about other doctors who help you with your health. Aetna Better Health of Michigan

wants you to stay healthy and avoid problems. For example, if your PCP doesn't know about a drug that your behavioral health doctor prescribes, this could lead to problems with other drugs you take.



If you need help talking with your PCP about your behavioral health care, please contact our care management department at **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week.

Keep your contact information up-to-date.

It is very important for members to have current contact information on your records with your health plan and with the state of Michigan. Keeping your current contact information on file will allow you to receive important information about your health and any changes to your health plan coverage. For example, each time you change your primary care provider (PCP), Aetna will request a new ID card with your new PCP listed on the card. In order to ensure you receive it, we need to have your current mailing address in our records.

Aetna will often send you important health reminders, new benefits being offered, information on plan-sponsored events, etc. We can document your updated home telephone number, address, cell phone numbers and email address. If we have your most up-to-date email address, we can send you information about your benefits and tips about your health.

If your contact information has changed, please call Member Services at **1-866-316-3784 (TTY: 711)** to update your contact information.





Your Member Handbook has answers.

Check out the following information in your Member Handbook. A copy of the Member Handbook is on our website at **AetnaBetterHealth.com/Michigan**, or you can call Member Services at **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week, for a free copy of your handbook.

- Benefits and services included in your health plan as well as those not covered
- How to choose your doctor
- The prescription drug formulary and pharmacy procedures
- Copayments or charges you may be responsible for
- Benefit limits and getting care outside Aetna's service area
- How to get language assistance
- How to submit a claim
- How to get information about doctors in Aetna's network
- How to get primary care services
- How to get specialty care and behavioral health care services
- How to get care after hours
- How to get emergency care and knowing when to call **911**
- How to get care and coverage outside of Aetna's service area
- How to submit a complaint or appeal a decision
- How to appeal a decision
- How Aetna evaluates new technology
- Member rights and responsibilities
- Privacy practices

National Coverage Determination.

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/Michigan**. Then go to "For Members," and choose "Aetna Better Health Premier Plan (Medicare Medicaid)," then "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. Or call us at the number on your member ID card.



Join our Member Advisory Council.




Be a voice in your community.

Join our Member Advisory Council.

We're always looking for members to help us improve. Let your voice be heard by joining our Member Advisory Council. To join, you must be willing to attend meetings four to six times a year. If you want to attend meetings in person and you need transportation, we can arrange it for you.

To find out more information about joining the Member Advisory Council, call **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week.

What to know when you are released from the hospital.

 Timely follow-up after being in the hospital is important. Care received after being in the hospital will keep you healthy and feeling good. Leaving the hospital can be busy. A lot of information is given at discharge. It is important to ask questions and speak up if you need any special assistance.

Place your discharge paperwork in an easy-to-find location. Set a reminder for your follow-up appointment. Make sure your spouse, child or friend is also aware of the appointment. If you need a ride to your office visit, Aetna Better Health can help. A ride to your doctor and pharmacy can be scheduled by calling Member Services at **1-855-676-5772 (TTY: 711)** 24 hours a day, 7 days a week. Call at least three working days before your scheduled appointment.

If you need help with getting care or services, call **1-855-676-5772 (TTY: 711)** and speak to a care coordinator. A care coordinator can help with mental and physical health needs.



COVID-19 vaccine: What you should know.

Information about the COVID-19 vaccine is quickly changing. For the most up-to-date information, visit the Michigan Department of Health and Human Services (MDHHS) website at [Michigan.gov/COVIDVaccine](https://www.michigan.gov/COVIDVaccine). You can also go to the Centers for Disease Control and Prevention website at [CDC.gov](https://www.cdc.gov). Click on "Learn More About COVID-19." Then click on "Vaccine."

Do's and don'ts of the coronavirus disease (COVID-19).

✓ Do:



Wash your hands often with soap and water or use a hand sanitizer that contains at least 60% alcohol.



Cover your mouth and nose with a tissue when you cough or sneeze, or use the inside of your elbow. Throw tissues in the trash.



Clean and disinfect frequently touched surfaces daily, including tables, doorknobs, countertops, desks, phones and keyboards.



Call your health care provider if you have symptoms. Let them know you may have the virus.



Wear a cloth face mask in public.

✗ Don't:



Touch your eyes, nose and mouth with unwashed hands.



Spend time with people who are sick.



Go out in public if you're sick unless it's to get medical care.



Share household items, like dishes, drinking glasses, eating utensils, towels or bedding, with other people if you're sick.

Source: Centers for Disease Control and Prevention

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. 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. The Michigan Department of Health and Human Services, MI Health Link program has not reviewed or endorsed this information.

ATTENTION: If you speak Spanish or Arabic, language assistance services, free of charge, are available to you. Call **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week. The call is free.

ATENCIÓN: Si habla español o árabe, tiene a su disposición servicios de idiomas gratuitos. Llame al **1-855-676-5772 (TTY: 711)**, las 24 horas del día, los 7 días de la semana. Esta llamada es gratuita.

تنبيه هام: إذا كنت تتحدث باللغة الإسبانية أو العربية، فإن خدمات المساعدة اللغوية متاحة لك، مجاناً. اتصل برقم الهاتف **1-855-676-5772 (هاتف الصم TTY: 711)** الخدمة الهاتفية متوفرة على مدار 24 ساعة في اليوم، و 7 أيام في الأسبوع. المكالمات الهاتفية مجانية.

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We comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex and does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. If you speak a language other than English, free language assistance services are available. Visit our website at or call the phone number listed in this material.

In addition, your health plan provides auxiliary aids and services, free of charge, when necessary to ensure that people with disabilities have an equal opportunity to communicate effectively with us. Your health plan also provides language assistance services, free of charge, for people with limited English proficiency. If you need these services, call Customer Service at the phone number on your benefit ID card.

If you believe that we have 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 Grievance Department (write to the address listed in your Evidence of Coverage). You can also file a grievance by phone by calling the Customer Service phone number listed on your benefit ID card (TTY: 711). If you need help filing a grievance, call Customer Service Department at the phone number on your benefit ID card.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at https://ocrportal.hhs.gov/ocr/cp/complaint_frontpage.jsf.

ESPAÑOL (SPANISH): Si habla un idioma que no sea inglés, se encuentran disponibles servicios gratuitos de asistencia de idiomas. Visite nuestro sitio web o llame al número de teléfono que figura en este documento.

繁體中文 (CHINESE): 如果您使用英文以外的語言，我們將提供免費的語言協助服務。請瀏覽我們的網站或撥打本文件中所列的電話號碼。