

wellness & you

Your Aetna Better Health® Medicaid member newsletter

HEALTHY LIVING



NEED TO RENEW?

You must renew your Medicaid coverage every year. Look for your renewal notice in the mail. If you lost your coverage and are still eligible, you may be able to get your benefits back. Visit aetna.com/sp24ky-1 or scan the QR code below to learn more.



4 barriers to good health — and how your Aetna plan can help

The road to good health can have many twists and turns. Roadblocks like not having access to healthy foods or a ride to the doctor's office can make it harder to take care of your health. These are called social determinants of health (SDOH). And many of them may be out of your control. That's why Aetna Better Health® of Kentucky provides benefits designed to help you overcome these barriers.

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Barriers story continued



BARRIER 1

Transportation

Nearly 6 million people say that a lack of transportation keeps them from seeking medical care.

How Aetna can help:

Kentucky Medicaid will provide nonemergency medical transportation for covered medical services and appointments to some members.

If you need a ride, you must talk to the transportation broker in your county. Call the Kentucky Transportation Cabinet at **1-888-941-7433**. If you are not able to get transportation through Kentucky Medicaid Transportation Cabinet, call member services at **1-855-300-5528 (TTY: 711)**.



BARRIER 2

Language

We know that not all members speak English as their first language.

That can make it hard to talk to your doctor or ask questions about your benefits.

How Aetna can help:

We provide interpreter services in any language. Call Member Services at **1-855-300-5528 (TTY: 711)** for help.



BARRIER 3

Accessing care

Maybe you don't live near a doctor's office. Or you don't have time to go to an appointment. This can make it tough to get the care you need.

How Aetna can help:

We offer telehealth services. You can talk to a provider via a phone or video chat from the comfort of your own home, on your schedule. Ask your provider what services they provide through telehealth.

Have a medical problem after hours? You can call our 24-hour nurse line at **1-855-620-3924 (TTY: 711)** to talk with a nurse anytime. They can help you decide where to go for care or how to treat your health problem at home.

Our Care Managers are here for you

Whatever barriers you're facing, your dedicated Care Manager can help. Your doctor, hospital discharge planner or another provider can refer you to Care Management. Or a nurse on our health information line may refer you. You can also self-refer. Just call Member Services at **1-855-300-5528 (TTY: 711)** and ask to speak with Care Management.



BARRIER 4

Budgets

Costs are rising for housing, food and other essentials. So it may be harder than ever to stick to your budget.

How Aetna can help:

Your health plan provides other Value-Added Benefits to help you pay for life's health essentials, including:

- Financial incentives for completing certain doctor visits and screening tests
- Children's over-the-counter (OTC) benefits
- GED certification and job skills training
- Diabetes management
- Virtual companion app
- Extra benefits for pregnant members

Check out your Member Handbook or visit [AetnaBetterHealth.com/kentucky](https://www.aetna.com/betterhealth/kentucky) to learn more about the benefits and services included in your health plan, as well as those not covered.

Good health care starts with the right doctor

Your primary care provider (PCP) is your first stop for all your health care needs. But at some point, you may need to see a specialist to help treat certain injuries or illnesses. When this happens, your PCP will help you find a specialist and refer you for care.

You don't always need a referral to see a specialist. For example, women do not need a referral to see an ob-gyn for routine care.

Here are three ways your Aetna Better Health® plan can help connect you with the right provider.

Provider network

You must get most of your care from providers in our

network. Go to **AetnaBetterHealth.com/kentucky/find-provider** to find in-network providers. You can search or download our provider directory.

Need help or want a hard copy of the provider directory? Call Member Services at **1-855-300-5528 (TTY: 711)**.

Out-of-network care

Let's say there are no network providers near you. Or there aren't any appointments available. If that happens, we can help you get a referral to see a provider outside of the network. You won't be charged more for out-of-network care in this case.



Second opinions

You may not always agree with your doctor's plan of care. If this happens, you have the right to go to another provider for a second opinion. You don't have to pay to get a second opinion, and you don't need prior authorization. Call Member Services to learn more.



Understand your pharmacy benefits

Wondering if your medications are covered? Check out your plan's List of Covered Drugs (also called the "Drug List," or formulary). It tells you which medicines are covered at network pharmacies. It also tells you if there are any special rules or restrictions on any covered drugs.

The Drug List is updated regularly. Find the latest list at **AetnaBetterHealth.com/kentucky/drug-formulary.html** or call Member Services at **1-855-300-5528 (TTY: 711)** to ask for a printed copy. You can find more information on all your pharmacy benefits in the Member Handbook.

Your Member Handbook has info about all the types of care covered by your plan, including:

- Primary care
- Specialty care
- Behavioral health care
- Emergency care

View your Member Handbook at **aet.na/sp24ky-2** or call Member Services at for a hard copy.

Benefits at your fingertips. Access your plan benefits from anywhere through your online Member Portal. You can also use the Aetna Better Health app to see your benefits on the go. Visit **AetnaBetterHealth.com/kentucky/member-portal.html** to get started!

How to report fraud, waste and abuse

Aetna Better Health® of Kentucky is committed to stopping fraud, waste and abuse. If you see fraud, waste or abuse, report it right away.

What are fraud, waste and abuse?

Fraud happens when someone lies to get money or services.

Waste happens when someone uses benefits or services they don't need.

Abuse happens when someone takes money for services when they aren't legally entitled to payment.

Reporting fraud, waste or abuse

If you suspect or know that fraud, waste or abuse is occurring, report it immediately. There are three ways to do so:

- Call Aetna Better Health Member Services: **1-855-300-5528 (TTY:711)**
- Call the Medicaid Fraud and Abuse Hotline: **1-800-372-2970**
- Contact the U.S. Department of Health and Human Services, Office of the Inspector



General: **1-800-447-8477** or go to **OIG.HHS.gov/Fraud/Report-Fraud/Index.asp**

Reporting fraud, waste or abuse will not affect how you will be treated by Aetna Better Health of Kentucky, and you can remain anonymous. Combating fraud, waste and abuse is everyone's responsibility. Failure to comply with these laws could result in civil and criminal penalties.

We're here for you

Member Services:

1-855-300-5528 (TTY: 711)

Monday through Friday, 7 AM to 7 PM ET

24-hour Nurse Line:

1-855-620-3924 (TTY: 711)

Behavioral Health Crisis Hotline:

1-888-604-6106 (TTY: 711)

Vision care: Vision Service Plan (VSP)

1-800-877-7195

Transportation:

Kentucky Transportation Cabinet

1-888-941-7433

Interpreter services:

You have the right to have someone help you with any communication issue you might have. There is no cost to you. Call Member Services at **1-855-300-5528 (TTY: 711)** for help.

What is the Lock-In Program?

At Aetna Better Health of Kentucky, we want to make sure that you are getting the right care, at the right time, in the right place. The Lock-In Program is designed to provide support to members who need help managing and coordinating their health care needs.

Members in a Lock-In Program must get care from an assigned primary care physician (PCP), pharmacy and/or hospital. The goal is to provide quality care while avoiding misuse or abuse of services.

How it works

You may be enrolled in the Lock-In Program based on your medical claims history. You will get a letter in the mail before you are enrolled in the program.

There are different types of Lock-In Programs. Read your letter carefully, so you know which program you are being enrolled in.

Primary Care Physician (PCP) and Pharmacy Lock-In Program

In this program, you will be assigned to a PCP and pharmacy, named in your letter. You can ask to change your assigned PCP and/or pharmacy before being enrolled in the program. Just call Member Services at **1-855-300-5528 (TTY: 711; TDD: 1-800-627-4702)**. Lock-In Department hours are Monday through Friday, 8 AM to 5 PM ET.

If you need to see other doctors or specialists or go to urgent care, your assigned

PCP will need to submit a lock-in referral form (which is included in your letter). You can only fill prescriptions from your assigned PCP or a provider with a lock-in referral.

Behavioral health, vision and dental providers do not require



a referral. But you will still need to call Member Services and speak to the Lock-In Department to add these providers to your pharmacy profile.

Hospital Lock-In Program

If you have been enrolled in the Hospital Lock-in Program, you can go to your assigned hospital for nonemergency care.

Remember, you should always try to contact your PCP first. They know your health care needs best. If you can't get ahold of your PCP, call the 24-Hour Nurse Line at **1-800-556-1555**. They can help you decide if you can wait to see your PCP or if you should go to an urgent care center.

We're here to help

Aetna Better Health of Kentucky is committed to the continuity of care for members in the Lock-in Program. We offer a free Case Management Service to help with health care needs. A Case Manager can help you get referrals and answer any questions. Just call Member Services and ask to speak to the Lock-in Department.

Please make certain your address and phone number on file with the Department for Community-Based Services (DCBS) are current. If you need to make a change, call **1-855-446-1245** or your local Department for Community-Based Services (DCBS) office.



We want to hear from you! Join our Member Advisory Committee (MAC) to give us your feedback and help us improve our services.

Call Member Services at **1-855-300-5528 (TTY: 711)** to find out how to join.



AETNA BETTER HEALTH® OF KENTUCKY

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
P.O. Box 818001
Cleveland, OH 44181-8001
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**).

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**)。

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.

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**).

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**

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

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**).

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.

PENN DUTCH: Geb Acht: Wann du Deutsch Pennsilfaanisch Deutsch schwetzsch, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf die Nummer uff, ass hinne uff dei ID card iss, odder ruf **1-800-385-4104** (TTY: **711**).

NEPALI:

ध्यान दिनुहोस्: ० दि तर्ई नेपाली भाषा बोलनुहुन्छ भने तपाईंका लागि गनःशुलकरूपमा भाषा सहायता सेवार्हो उपलब्ध छन तपाईंको आइडी कार्डको पछाडि रहको नमबर व **1-800-385-4104** (TTY: **711**)म फोनार्नुहोस।

OROMO (CUSHITE): Hubadhu: yoo Oromoo dubbatta ta'ee, gargaarsa tajaajiloota afaanii, kaffaaltii bilisaa ni jiraa siif. Lakkoofsa bilbiilaa ID kee duuba irraa jiruun yookiin **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**).

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**).

KIRUNDI (BANTU): ICITONDERWA: Namba uvuga Ikirundi, serivisi zigufasha kugusigurira ururimi, ku buntu, ziraboneka ushobora kuzironswa. Hamagara inomero iri inyuma ku gakarata k'akarangamuntu kawe canke iyi nomero **1-800-385-4104** (Ufise ubumuga bwo kutumva neza ifashishe (TTY): **711**).



Aetna Better Health® of Kentucky
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<Recipient's Name>

<Mailing Address>

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Take advantage of your Member Handbook

Your Aetna Better Health® of Kentucky Member Handbook has everything you need to know about your health plan, including:

- ✔ Benefit restrictions outside Aetna's service area
- ✔ Copayments and other charges you may be responsible for
- ✔ How to submit a claim
- ✔ How to file a complaint, grievance or appeal
- ✔ How we make decisions about your care (called Utilization Management)
- ✔ How we evaluate new technology as a covered benefit
- ✔ Notice of privacy practices
- ✔ Your member rights and responsibilities



The Member Handbook is updated every year. If there are major changes, we will send you a letter about it at least 30 days before the changes are effective.



Scan the QR code or visit aet.na/sp24ky-2 to view your Member Handbook online. Prefer a hard copy? Call Member Services at **1-855-300-5528 (TTY: 711)** to have one mailed to you. Let us know if you need it in another language, a larger font or other formats.