



## **Aetna Better Health® of Illinois**

This notice informs Medicaid members of a change in transportation services. As of January 1st, 2022, non-emergency ambulance services are no longer managed by Aetna Better Health of IL (ABHIL).

To request a non-emergent ambulance, members must contact First Transit. First Transit is ABHIL's liaison for non-emergency transportation. Please contact them at least 7 days prior to an appointment to schedule an ambulance. The contact center details are:

- First Transit Number: 877-725-0569
- Contact Center Hours: Monday through Friday, 8:00 am to 5:00 pm CST

Mentioned below are the steps to schedule a trip:

1. To assess eligibility, First Transit will ask a series of questions.
2. Upon completing the screening, First Transit will provide a list of providers.
3. Members are responsible for contacting providers and checking their availability. Members can choose to contact a provider they have used in the past.
4. The provider will review the member's medical need for an ambulance. If approved, the provider will confirm the trip details. A Request Tracking Number (RTN) is given to the member.
5. Please contact First Transit if no provider is available.

MMAI members can continue to schedule rides through their regular approved process.

Note - First Transit will not assign or book a provider on behalf of a member. The member will need to find a provider in the area and confirm the request. Here is the quick link for further assistance.

How to book an ambulance: <https://www.netspap.com/>

## **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:
  - Qualified sign language interpreters
  - 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:
  - Qualified interpreters
  - 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 Better Health® of Illinois**  
3200 Highland Avenue, MC F648  
Downers Grove, IL 60515



**English:** ATTENTION: If you speak English, language assistance services, free of charge, are available to you. **Call 1-800-385-4104 (TTY: 711).**

**Spanish:** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-385-4104 (TTY: 711).**

**Polish:** UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń 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 **1-800-385-4104 (TTY: 711)**。

**Korean:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-800-385-4104 (TTY: 711)** 번으로 전화해 주십시오.

**Tagalog:** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-800-385-4104 (TTY: 711).**

**(711).** إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم  
رقم هاتف الصم والبكم: ملحوظة:

**Arabic:** 1-800-385-4104

**Russian:** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-800-385-4104 (телетайп: 711).**

**Gujarati:** સુચના: જો તમે ગુજરાતી બોલતા હો, તો િન:શબ્દો ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો **1-800-385-4104 (TTY: 711).**

کریں اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال

**Urdu:**

خبردار: 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. Gọi số **1-800-385-4104 (TTY: 711).**

**Italian:** ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero **1-800-385-4104 (TTY: 711).**

**Hindi:** धय न द: यद आप ह द ब लत ह त आपक लए मफत म भ ष सह यत सव ए उपलबध ह। **1-800-385-4104 (TTY: 711)** पर क ल कर।

**French:** ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-800-385-4104 (ATS: 711).**

**Greek:** ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε **1-800-385-4104 (TTY: 711).**

**German:** ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-800-385-4104 (TTY: 711).**