



Family time



AetnaBetterHealth.com/Michigan Aetna Better Health® Premier Plan (Medicare-Medicaid Plan)

Time for a flu shot

Be prepared for the start of cold and flu season! Influenza is often called the flu. The flu virus is spread from one person to another through the respiratory droplets of an infected person. This happens through sneezing, coughing, or touching the mouth and nose with contaminated hands. The flu viruses are more commonly spread during the fall and winter months. It is possible to get the flu any time of year.

Flu symptoms can include:

- Fever
- Body aches
- Runny nose
- Cough
- Sore throat

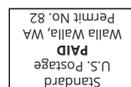
The flu virus is more than just a common cold. The Centers for Disease Control and Prevention says people over 65 are at an increased risk of serious complications from the flu. Our immune systems weaken as we age. The flu can worsen symptoms of chronic conditions, including diabetes, heart disease, breathing problems or kidney disease. Getting the flu can even result in hospitalization.

Stay protected by getting your flu shot as soon as possible this fall. Aetna Better Health® Premier Plan covers the flu shot. You can get your flu vaccination at your local pharmacy or primary care doctor. If you need help locating a place to get your flu shot, please call Member Services or talk to your care coordinator.

Source: [CDC.gov/Flu/Index.htm](https://www.cdc.gov/Flu/Index.htm)

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COVID-19

Should you be double-boosted?

Some people may now get a second COVID-19 booster shot. But who should get the shot? And why is it needed?

Here are some answers to these and more questions.



Go to [Michigan.gov/Coronavirus](https://www.michigan.gov/Coronavirus) for general information. To find vaccination locations near you, call the COVID-19 hotline at **1-888-535-6136** (press 1), Monday through Friday from 8 AM to 5 PM, or Saturday and Sunday from 10 AM to 2 PM.

Q. Who can get a second booster shot?

A. If it has been at least four months since your first booster, it's time for a second booster (meaning a third shot if Johnson & Johnson [Janssen] was your initial shot or a fourth shot if Moderna or Pfizer-BioNTech was your initial shot) if any of the following apply to you:

- Are age 50 or older.
- Are 12 or older and have a weakened immune system. That can be caused by health conditions or treatments. Not sure if that's you? Ask your doctor.

Q. Why are two boosters needed?

A. COVID-19 vaccines still work. But their protection can lessen with time and as new variants emerge. Booster shots help increase protection. Some people need to add to that protection with a second booster. That is especially important for older adults and those over 50 with multiple underlying medical conditions.

Q. Do second boosters work?

A. Yes. They may lower your risk of getting very sick — or even dying — from COVID-19.

Sources: Centers for Disease Control and Prevention; U.S. Food and Drug Administration

Waiver and personal care services

Sometimes members need more help than what health insurance coverage usually provides. Aetna Better Health® Premier Plan has services available to members who qualify and show a need for extra help. If you are

struggling with your daily life, you may qualify for these extra services. Possible services to help include:

- Paid caregiver services
- Special medical equipment
- Chore services
- Home modifications

- Home-delivered meals
- Non-medical transportation

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.



6 ways to prevent high blood pressure

Living a healthy lifestyle can help keep your blood pressure in a healthy range. Preventing high blood pressure can lower your risk for heart disease, stroke and other complications. Practice the following healthy living habits:

1. **Eat a healthy diet.** Choose healthy meal and snack options. Eat plenty of fresh fruits and vegetables that are rich in potassium, fiber and protein. Choose foods lower in salt and saturated fat.
2. **Keep yourself at a healthy weight.** Being overweight or obese increases your risk for high blood pressure. Talk with your doctor about ways to reach a healthy weight. This includes choosing healthy foods and getting regular physical activity.
3. **Be physically active.** Physical activity can help keep you at a healthy weight and lower your blood pressure. The *Physical Activity Guidelines for Americans* recommends adults get at least two hours and 30 minutes of exercise every week. That's 30 minutes a day, five days a week. Try a brisk walk or bicycling.
4. **Do not smoke.** Smoking raises your blood pressure. Smoking puts you at a higher risk for heart attack and stroke. If you do not smoke, do not start. Quitting smoking will lower your risk for heart disease. Your doctor can suggest ways to help you quit.
5. **Limit how much alcohol you drink.** Too much alcohol can raise your blood pressure. Men should have no more than two alcoholic drinks per day. Women should have no more than one alcoholic drink per day.
6. **Get enough sleep.** Getting enough sleep is important to your overall health. Sleeping is part of keeping your heart and blood vessels healthy. Not getting enough sleep on a regular basis is linked to an increased risk of heart disease, high blood pressure and stroke.

To help monitor your blood pressure, your over-the-counter benefit covers the cost of a blood pressure monitor. Contact Member Services for more information!

Source: [CDC.gov/BloodPressure/Prevent.htm](https://www.cdc.gov/BloodPressure/Prevent.htm)



With SilverSneakers, you're free to move

Movement and physical activity are essential to your good health. SilverSneakers® and Aetna Better Health® Premier Plan continue to support you in any way you decide to move. That might mean returning to your participating fitness location¹ or enjoying a SilverSneakers virtual class.

When you're ready to return to a participating location, here are some tips to help you prepare.

Before your visit:

- Call or check your location's website for new guidelines.
- Ask if there are limited hours or special times for seniors.
- Prepare for a new experience. Equipment may have moved and class schedules² may have changed since you last visited.

During your visit:

- Follow all recommended guidelines.
- Use touchless check-in options when available.
- Wipe down equipment with disinfectant before and after use.
- Enjoy your workout!

Tips to prevent illness:³

- Wash your hands often with soap and water.
- Avoid close contact with those who are sick, and put distance between yourself and other people outside your home.
- Clean and disinfect frequently touched surfaces daily.

Virtual options

If you prefer virtual fitness options, SilverSneakers is here for you. Create your online account to enjoy everything available to you as a member.

- **SilverSneakers LIVE** offers online classes and workshops. Enjoy exercising with thousands of other members across the nation — all from the comfort of your living room. Classes are led by your favorite instructors. Come a little early or stay after class to chat with other members.
- **SilverSneakers On-Demand videos** are available 24/7. You can work out when it's convenient for you. Enjoy exercise programs like Healthy Back and Core, Stress Management

Education, and Balance and Strength Yoga. Choose from collections, including Beginner's Guide to Gym Equipment, Living Well, Nutrition and more.

- **SilverSneakers GO** is the first fitness app created specifically for seniors. Find locations and classes and schedule activities — all on your phone. Download from Google Play or the App Store.

With SilverSneakers, you're free to move in the ways that work best for you. Get started now! **Always talk with your doctor before starting an exercise program.**

¹Participating locations ("PL") not owned or operated by Tivity Health, Inc., or its affiliates. Use of PL facilities and amenities limited to terms and conditions of PL basic membership. Facilities and amenities vary by PL.

²Membership includes SilverSneakers instructor-led group fitness classes. Some locations offer members additional classes. Classes vary by location.

³Source: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/index.html>

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Know your rights and responsibilities

We work with you to make sure you receive the best care available. You have certain rights and responsibilities. These help you to receive the best service.

As an Aetna Better Health® Premier Plan member, you have a right to:

- Receive information about Aetna, our services, our practitioners and providers, and member rights and responsibilities
- Be treated with respect and recognition of your dignity and your right to privacy
- Participate with practitioners in making decisions about your health care
- Have a candid discussion of appropriate or medically necessary treatment options for your conditions, regardless of cost or benefit coverage
- Voice complaints or appeals about Aetna or the care we provide
- Make recommendations regarding Aetna's member rights and responsibilities policy

You also have a responsibility to:

- Supply information (to the extent possible) that Aetna and our practitioners and providers need in order to provide care
- Follow plans and instructions for care that you have agreed to with your practitioners
- Understand your health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible

You will find these rights and responsibilities in the Member Handbook and on our website at **[AetnaBetterHealth.com/Michigan](https://www.aetna.com/michigan)**. If you have any questions or would like a copy of your rights and responsibilities, call Member Services toll-free at **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week.



Understanding your pharmacy benefits

Aetna Better Health® Premier Plan's List of Covered Drugs ("the Drug List" or the formulary) tells you which prescription drugs and over-the-counter (OTC) drugs and items are covered by Aetna Better Health® Premier Plan at participating network pharmacies. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. The Drug List and list of participating pharmacies are posted on the plan's website at [AetnaBetterHealth.com/Michigan](https://www.aetna.com/betterhealth/michigan). The Drug List is

updated monthly throughout the year, and you can find when it was updated on the front cover. Changes to the plan's Drug List are also posted on the plan's website.

Visit [AetnaBetterHealth.com/Michigan](https://www.aetna.com/betterhealth/michigan) for the updated Drug List and latest Member Handbook. For a printed copy of anything on our website, call Member Services toll-free at **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week.

The Drug List will tell you if there are any special rules or restrictions on any drugs

covered by Aetna Better Health® Premier Plan. The rules or restrictions are listed under "Necessary actions, restrictions, or limits on use." In these cases, you or your doctor or other prescriber must ask the plan to cover a drug by submitting required medical information before the plan will pay for the requested drug.

Types of rules or limits:

- **Prior approval (or prior authorization).** You or your doctor or other prescriber must ask for approval from Aetna Better Health® Premier

Plan by submitting required medical information before you fill your prescription. Aetna Better Health® Premier Plan may not cover the drug if you do not get approval.

- **Quantity limits.** Sometimes Aetna Better Health® Premier Plan limits the amount of a drug you can get. You or your doctor or other prescriber must get approval from Aetna Better Health® Premier Plan by submitting required medical information for you to get a higher quantity. Aetna Better Health® Premier Plan may not cover the drug if you do not get approval.
- **Step therapy.** This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug, or if your doctor thinks the first drug doesn't work for you, then you or your doctor or other prescriber must ask for approval from Aetna Better Health® Premier Plan by submitting required medical information before you fill your prescription.
- **If a medication is not on the Drug List (called formulary exception).** You or your

doctor or other prescriber must get approval from Aetna Better Health® Premier Plan by submitting required medical information before you fill your prescription. Aetna Better Health® Premier Plan may not cover the drug if you do not get approval.

As an Aetna Better Health® Premier Plan member, you have no copays for prescription and OTC drugs if you follow Aetna Better Health® Premier

Plan's rules and fill the drug at a participating pharmacy.

Tiers are groups of drugs on our Drug List.

- Tier 1 drugs are Medicare Part D prescription brand-name and generic drugs.
- Tier 2 drugs are Medicare Part D prescription brand-name and generic drugs.
- Tier 3 drugs are non-Medicare Part D prescription and OTC drugs.



 To ask for approval of drugs with special rules or restrictions, call Member Services toll-free at **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week. A Member Services representative will work with you and your provider to help you ask for a drug with special rules or restrictions or for drugs that are not listed on the Drug List.

Community transition services

Community transition services are services to help members living in a nursing facility who would like to move to a community-based home. These services can help you with housing and help with moving into this new home. If you qualify, these services may cover one-time costs related to:

- Security deposits
- Utility hookups and deposits
- Moving expenses
- Furniture
- Coordination and support services

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.



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. Poor 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 six months
- Bitewing X-rays once every 12 months
- Fillings
- Tooth extractions
- Complete or partial dentures every five years

Other dental services might be covered but might 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?

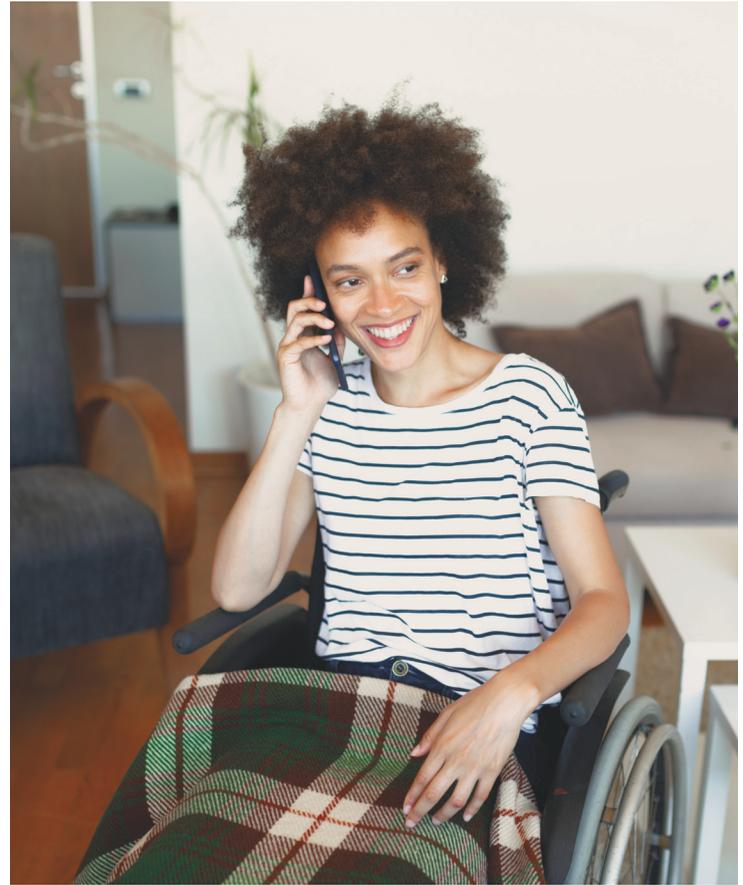


Any changes in phone number, email or address should be reported to the Michigan Department of Health and Human Services. You can do this by going to the MIBridges website at **Michigan.gov/MIBridges**. If you do not have an account, you will need to create an account by selecting "Register." Once in 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.

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. When we make decisions, it's important for you to remember the following:

- 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.

Finding helpful information

You can find the information below in your Member Handbook and on our website at **AetnaBetterHealth.com/Michigan**:

- Benefits and services included in your health plan as well as those not covered
- Pharmaceutical management procedures
- Copayments
- Benefit restrictions 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, behavioral health care and hospital services
- How to get care after normal business hours
- How to get emergency care, including when to go to the emergency room or use **911** services
- How to get care and coverage outside of Aetna's service area
- How to submit a complaint
- How to appeal a decision
- How Aetna evaluates new technology to include in coverage

For a printed copy of the above information on our website, call Member Services toll-free at **1-855-676-5772 (TTY: 711)**, 24 hours a day, 7 days a week.

Seasonal affective disorder

Less light can mean darker moods

Does your mood mirror the seasons? It might grow darker as the fall and winter days get shorter and lift as the brighter days of summer approach.

You could have a condition known as seasonal affective disorder (SAD). SAD is a type of depression that's related to seasonal changes in light. SAD can make you:

- Feel tired
- Crave carbohydrates
- Gain weight
- Avoid things you normally enjoy or withdraw socially during the fall and winter months

Sunlight helps control your body's clock. When there are changes in the amount of light you get, that clock gets out of balance. Levels of melatonin — a sleep-related hormone — can increase. This hormone may cause symptoms of depression.



Both children and adults can get SAD. However, it most often starts between the ages of 18 and 30. Four out of five people affected by SAD are women. The risk may be higher the farther you live from the equator.

SAD is often considered a fall and winter disorder. But some people have SAD symptoms during cloudy times, no matter the season. And for some, the longer, brighter days of summer may bring on symptoms.

Could you have SAD? Your provider will look at your symptoms. They will ask about your history. In most cases, people with SAD have had symptoms for more than one year — at the same time of year. The symptoms go away for the rest of the year.

Sources: American Psychiatric Association; Mental Health America; National Alliance on Mental Illness

Shining a light



If you have SAD, getting more sunlight may make you feel better. Take walks outdoors. Or spend time near a window during the day.

If your symptoms are severe, light therapy may help. This involves using special lights while indoors. These lights are much more intense than standard lighting. Light therapy lowers levels of melatonin in the brain.

Your provider can help you choose the right time of day to use light therapy. And they can let you know how much time to spend using it. Light therapy works well for many people with SAD. If it doesn't work for you, your doctor may have other suggestions. That might mean taking medicine for depression.

Treatment can help you control SAD.

We're on your team

You are not alone in managing your health care needs. An Interdisciplinary Care Team (also known as Integrated Care Team, or ICT) includes:

- You
- Your Aetna care coordinator
- Your primary care physician
- Any other people you choose (family, specialists, friends, therapists, etc.)

The ICT members meet and work for your care. Every member of the ICT is there to help you.

The first goal of the ICT is to identify a list of health goals based on your wants and needs. After listing your goals, the ICT comes up with a plan on how to reach these goals. Throughout the year, the ICT will keep working together to carry out the plan to reach your goals.



When talking with your Aetna care coordinator, make sure to tell them who you want to be part of your ICT. You can reach your care coordinator by calling **1-855-676-5772 (TTY: 711)** between 8 AM and 5 PM, Monday through Friday.

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.

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。