



Guiding your way forward

Your Aetna[®] Assure Premier Plus (HMO D-SNP) Quick Start Guide

AetnaBetterHealth.com/DSNP

Welcome

We're glad you chose Aetna Assure Premier Plus (HMO D-SNP). We created this Quick Start Guide with you in mind. Inside, you'll find useful information and tips to help you get the care and health services you need.

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Here to guide you

At Aetna, we are here to guide you through getting the most out of your plan. This is why your Aetna Assure Premier Plus (HMO D-SNP) plan includes three key features:



Care

Extra benefits and services you need to take care of your total health and well-being.



A large and trusted network

A large network of doctors, hospitals and pharmacies you can trust, without the need for a referral for in-network care.



Connection

A Care Team of professionals to help you use your plan and connect you with helpful resources and programs in your community.



Get to know your plan



Questions about your benefits? Call your Member Services team.

1-844-362-0934 (TTY: 711)

8 AM – 8 PM EST, seven days a week.

Getting started

We've made it easy to begin. Get off to a great start by completing three easy steps:



Review the information in this Quick Start Guide

This Quick Start Guide provides you the information you need to get started using your plan benefits and services.



Get to know your benefits

Visit **AetnaBetterHealth.com/DSNP** to get the information you need, such as:

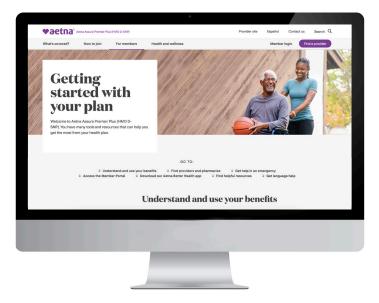
- Finding a Provider
- Seeing what drugs are covered
- Viewing the over-the-counter (OTC) catalog



Register for an account

Create an account on our website to send secure messages to Member Services, change your Provider, order a replacement Member ID Card and more.





Easy access to your benefits

AetnaBetterHealth.com/DSNP

Register for your personal account so you can easily:

- View your Evidence of Coverage (EOC)
- Find Providers and hospitals in the Aetna network
- See claims
- See past provider visits
- Track medications
- Search for Providers and pharmacies near you

Download our Aetna Better Health® app

Enjoy all the benefits of the Member Portal on the go. You can check out health resources, send us questions and more. Just download the app from the App Store[®] or the Google Play[™] store.

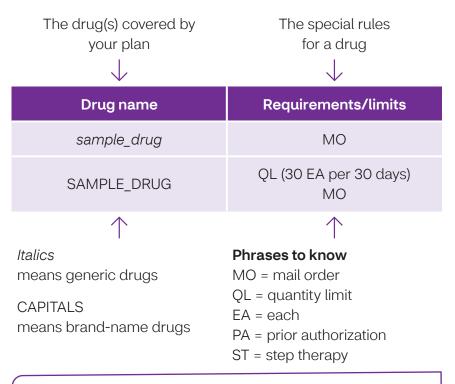
Your prescriptions

List of Covered Drugs (Formulary)

Your Aetna Assure Premier Plus (HMO D-SNP) includes a broad list of covered drugs with \$0 cost sharing.

You can learn about your medications by viewing your List of Covered Drugs.

How to read your List of Covered Drugs



Find your List of Covered Drugs at AetnaBetterHealth.com/DSNP



Prescription coverage

Here is some information to help you understand your prescription drug coverage



See if a drug is covered

You have prescription drug coverage with a wide selection of medications.

To see if a drug is covered, visit **AetnaBetterHealth.com/DSNP**



Find a pharmacy

With access to thousands of pharmacies in our nationwide network, you can get the medications you need for your physical and emotional well-being.

To find a pharmacy in your network, visit **AetnaBetterHealth.com/DSNP**



Get a 100-day supply

Are there medications you take regularly to maintain your health? With a 100-day supply, you can save time by refilling your prescriptions just once every three months.

For more information about a 100-day supply, visit **AetnaBetterHealth.com/DSNP** or contact your Member Services team.



Mail order

Certain medications can be mailed to you. Give us a call to find out which of your medications can be filled through the mail service pharmacy. You can order approved medications online or by phone.



Medication therapy

Our Medication Therapy Management (MTM) program helps you and your provider manage your medications. We automatically enroll qualifying members in our MTM programs. Participation is voluntary. You can opt out of the program at any time.

If you qualify for the program, a pharmacist will review your medications and talk with you about:

- How to get the most benefit from the drugs you take
- Any side effects or reactions
- Any questions or concerns you have

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Questions about your health? Call your Care Team when your plan starts. 1-844-362-0934 (TTY: 711)

8 AM – 5 PM EST, Monday through Friday.



Review your benefits

Your plan includes benefits to help you stay healthy



Annual visits

You get an annual checkup with your PCP — plus visits for vision and hearing exams.

Certain over-the-counter products (OTC)

You get \$315 each quarter to help pay for certain Medicare-approved over-the-counter products.

View your OTC catalog to see health and wellness products available for home delivery. You can order these products by phone, online and at select CVS locations. Find a CVS location at https://www.cvs.com/otchs/myorder/storelocator



Healthy foods card

Those with certain chronic medical conditions may qualify for \$150 each quarter to spend on healthy foods at approved stores.



Meals at home

It's important to eat healthy when recovering from a hospital stay. That is why your plan offers the convenience of home-delivered meals after a qualifying stay in the hospital or skilled nursing facility.

Call Member Services, or check your Evidence of Coverage for more information.

SilverSneakers® fitness program



With this benefit, you can enjoy access to over 16,000 participating SilverSneakers® locations nationwide.

SilverSneakers[®] gives you access to a large network of fitness centers, community classes, on-demand videos and at-home fitness kits.



Telehealth

Telehealth visits with your Primary Care Provider, Urgent Care Provider and Physician Specialist, as well as group or individual mental health visits, are covered. You should contact your Provider for more information on what telehealth services they offer and how to schedule a telehealth visit.

Members also have the option to schedule a telehealth visit 24 hours a day, 7 days a week via Teladoc, MinuteClinic Video Visit, or other provider that offers telehealth services covered under your plan. Members can access Teladoc at Teladoc.com/Aetna or by calling 1-855-TELADOC (1-855-835-2362) (TTY: 711). Members can find out if MinuteClinic Video Visits are available in their area at **CVS.com/MinuteClinic/** virtual-care/videovisit.

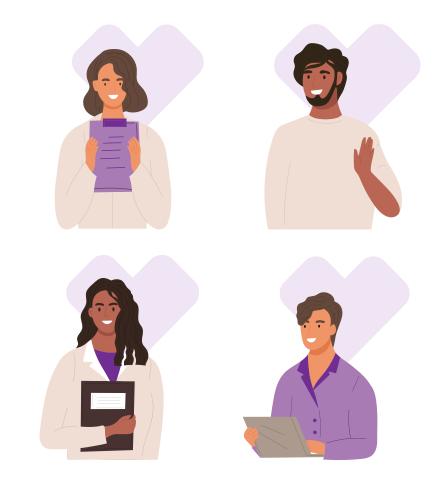


Questions about your benefits?

Find out more about your benefits anytime and anywhere at **AetnaBetterHealth.com/DSNP**

♥aetna[®] medicare solutions

Get the care you need



Your Care Team includes:

- Care Coordinator
- Nurse Care Manager

- Social Worker
- Member Advocate



Your Care Team is here to help

A personal Care Team makes it easier to get what you need

Get to know your Aetna Care Team. This team will learn your needs and help you manage your health.

Your Care Team can:

- ✓ Learn your individual needs
- S Develop a care plan with your Provider
- ♂ Coordinate visits to Providers
- Set up transportation to and from appointments
- S Help you understand your medications
- Onnect you with local and state programs
- ♂ Assist with your benefits



Call your Care Team.

Once your plan starts, you can call your Care Team. Otherwise, our Care Team will reach out within 90 days to complete your health survey.

1-844-362-0934 (TTY: 711)

8 AM – 5 PM EST, Monday through Friday.

Urgent vs. emergency care

If you're suddenly sick or injured, your first thought may be to head to the emergency room (ER). However, depending on your medical issue, the ER may not be the most convenient choice. Urgent care centers can offer a more convenient way to get quick care.

If you are unsure of where to go, you can call the Aetna Medicare 24/7 Nurse Line at 1-844-362-0934 (TTY: 711).



Purpose	These centers offer treatment for non-life-threatening injuries or illnesses
Advantages	Conveniently accepts both walk-ins and appointments. May provide faster treatment, flexible hours
Some conditions each facility treats	Allergies Coughing Upset stomach Sinus infection Pulled Muscles Sore throat Flu symptoms

Urgent care center



Need help? Call the Aetna Medicare 24/7 Nurse Line

1-844-362-0934 (TTY: 711)

A registered nurse is available to help you 24/7.



Please note that this is <u>not</u> a complete list of reasons to visit an urgent care center or ER. In the event of a medical emergency, call 911 or go to the closest ER.



Emergency room (ER)

The ER offers treatment for serious injuries or illnesses

Offers emergency care, treats more serious health issues. Open 24/7

Difficulty breathing Loss of consciousness Severe burns Chest pain or suspected heart attack Severe bleeding Acute stomach pain Poisoning Broken Bones



In many situations, telehealth may be your best option. Ask your Provider if they offer telehealth visits.





Your Member ID card

- You will receive an ID card in the mail
- It will include the Primary Care Provider (PCP) you selected
- If you need to change your PCP, just call your Member Services team

You should take your ID card with you whenever you visit a Provider or pharmacy.

Medicare key terms

Evidence of Coverage (EOC) — This document gives you detailed information on your plan's coverage and your rights and responsibilities as a plan member.

In network — This means we have a contract with that health care provider. You must use in-network providers with your plan.

List of Covered Drugs (Formulary) — This is a list of prescription drugs the health plan covers. It can include drugs that are brand name and generic.

Maintenance medications — These are prescription drugs that people take on a regular basis. These drugs help treat chronic conditions, such as asthma, diabetes, high blood pressure and other health conditions.

Mail-order pharmacy — A convenient service where you can have your medications mailed to your home. The preferred mail-order service available with your plan is CVS Caremark Mail Service Pharmacy.

Get information about these topics and more at AetnaBetterHealth.com/DSNP



Primary care checklist

Schedule an appointment with your PCP. Here's a checklist of important topics you may want to discuss with them. Take this sheet and your Aetna Assure Premier Plus (HMO D-SNP) ID card to your next appointment, and check the boxes and take notes as you talk about each item.

□ Medical history	 Screenings (blood pressure, cholesterol, colorectal)
Recent health changes	☐ Women's health (mammogram, Pap smear, bone density)
🗆 Your major life events	
Medicines Prescriptions:	Long-term health conditions (diabetes monitoring, kidney function)
Over the counter:	Mental health
Medicine side effects	Fall prevention
□ Vaccines Flu shot (date): Shingles (date): COVID-19 (date):	Write down any questions you'd like to discuss with your doctor.



Your Member Services team is here to help. Be sure to call us if you:

- Have any questions about your plan benefits
- Need to make changes to your contact information
- Add a caregiver to your member profile
- Have other questions you need answered

1-844-362-0934 (TTY: 711)

8 AM – 8 PM, seven days a week.

Thank you

Thanks again for being a valued member of the Aetna family.

Aetna Assure Premier Plus (HMO D-SNP) is a Fully Integrated Dual Eligible Special Needs Plan with a Medicare contract and a contract with the State of New Jersey Medicaid program. Enrollment in Aetna Assure Premier Plus (HMO D-SNP) depends on contract renewal. The List of Covered Drugs (Formulary) and/or pharmacy network may change at any time. You will receive notice when necessary. Participating providers are independent contractors and are neither agents nor employees of Aetna. The availability of any particular provider cannot be guaranteed and provider network composition is subject to change. Youwill receive notice when necessary. Tivity Health® and Silver Sneakers® are registered trademarks or trademarks of Tivity Health, Inc. and/or its subsidiaries and/or affiliates in the USA and/or other countries. © 2021 Tivity Health, Inc. All rights reserved.

When enrolling in a FIDE SNP: Enrollees must use in-network providers. Enrollees must use in-network DME suppliers. Enrollees must use an in-network pharmacy. Enrollees will be enrolled into Part D coverage under the plan and will be automatically disenrolled from any other Medicare Part D or creditable coverage plan in which they are currently enrolled. The enrollee will also be enrolled into Medicaid coverage under the plan, and will be disenrolled from any other Medicaid plan in which they are currently enrolled. Provider referrals are not required under this plan for in-network providers.

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