BENEFITS SPOTLIGHT

Welcome to your 2025 health plan



We're here to help you make this your healthiest year yet. Your Aetna Better Health® plan provides tools and support to help you get the care you need. Be sure to take advantage of these resources in the new year.

1 Transportation services

Need a ride to an appointment? We can help you get there. You're covered for rides to the doctor, pharmacy, dentist and other covered medical services. To book a ride, call Access2Care at 1-866-411-8920 (TTY: 711). Be sure to book your ride at least two business days in advance. Go to AetnaBetter Health.com/texas/transportation-services.html for more info.

2 Language help

Do you speak a language other than English? Just call Member Services and ask for an interpreter. You can use this service at no extra cost to you. If you're deaf or blind, we can provide info in other formats like sign language, braille, large print or audio.

3 24-hour nurse line

Not all medical problems happen during business hours. That's why we offer a 24/7 nurse line. You can call **1-800-556-1555 (TTY: 711)** anytime to talk with a nurse.

4 Member portal

You can do so much more with your health plan through the member portal. Just log in to manage your plan benefits and health goals from anywhere. Or use your Aetna Better Health app. Go to AetnaBetterHealth.com/texas/member-portal.html to get started.

Go to AetneBetterHealth.
com/texas any time for
more info about your plan
and benefits. Or call Member
Services at 1-844-787-5437
(TTY: 711), Monday through
Friday, 8 AM to 5 PM.



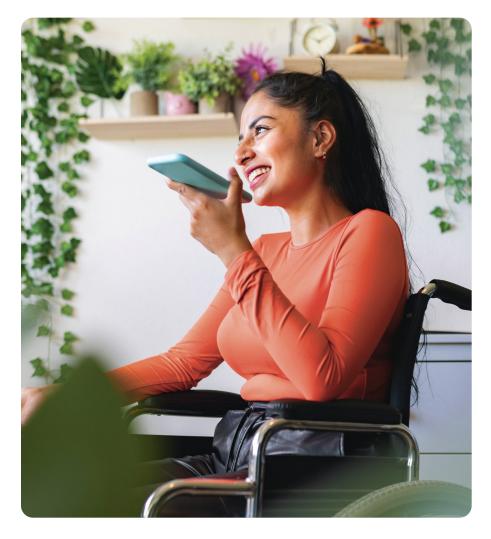
Health screenings made simple

Regular health screenings are essential for catching health problems early, before you start feeling sick. Take advantage of these covered screenings to keep you and your family healthy.



SCREENING	WHO NEEDS IT	WHEN TO GET IT
Blood pressure	All adults	Every 3 to 5 years for adults under 40 Every year for adults over 40
⊘ Cholesterol	All adults	Every 4 to 6 years, or more often if needed
O Diabetes	Adults 35 to 70 with overweight or obesity	Ask your doctor
⊗ STI/HIV	All sexually active adults and pregnant women	Ask your doctor
Breast cancer	Women 45 to 74 years old (or sooner if you are at high risk)	Every 2 years
© Cervical cancer	Women 21 to 65 years old	Every 3 to 5 years
Colorectal cancer	Adults 45 to 75 years old (or sooner if you are at high risk)	Every 1 to 3 years for at-home stool tests Every 10 years for a colonoscopy
Well-child visits	All children	1 month, 2 months, 4 months, 6 months, 9 months, 12 months, 15 months, 18 months, 24 months, 30 months, then once a year
Example 2 Lead screening	Children under 3 years old	All children should be tested at 12 months and 24 months old
O Dental exam	Everyone	Every 6 months
⊘ Vision exam	Everyone	At least once between 3 and 5 years old, then as recommended after that for children Every 2 years (or more often) for adults over 18

Need a doctor? Go to <u>AetnaBetterHealth.com/texas/find-provider</u> to search our provider directory. Enter your ZIP code to find in-network providers and specialists near you. You can also call Member Services to have a directory mailed to you.



Your go-to guide to using your health plan

Your Aetna Better Health® member handbook includes everything you need to know about your health plan. Keep reading for a list of information that's available inside this handy resource.

- Benefits and services that are covered and those that are not, including specific excluded services
- Benefit restrictions outside of the Aetna service area
- How to get language help

- How to get your medicine and other rules about pharmacy benefits
- How to get information about providers in the Aetna network
- How to submit a claim

- How to get primary care services
- How to get specialty care.
 This includes:
 - o Behavioral health care
 - Hospital services
 - Care for specific conditions
 - How to get a referral
- How to get care after normal office hours, plus how and when to use emergency room care
- How to get care outside of your service area
- How to file a complaint or grievance
- How to appeal a decision that affects your coverage, benefits or relationship with your plan
- How we make decisions about new technology we may include as a covered benefit
- How we make decisions about your care (called utilization management)
- Your member rights and responsibilities and a notice of privacy practices

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

Scan the QR code or visit **aet.na/sp25txk-2** to view your member handbook. Or call Member Services to have one mailed to you. Let us know if you need it in another language, a larger font or other formats.



Know your rights

As an Aetna Better Health® member, you have certain rights and responsibilities. Get to know them here.

Your rights include:

- A right to get info about the organization and its services, practitioners and providers, and about your member rights and responsibilities
- A right to be treated with respect and dignity
- A right to privacy
- A right to work with your practitioners to make decisions about your health care
- A right to talk openly about treatment options for your conditions, regardless of cost or benefit coverage
- A right to voice complaints or appeals about the organization or the care it provides
- A right to give feedback on the organization's member rights and responsibilities policy

Your responsibilities include:

- A responsibility to give information (to the extent possible) that the organization and its practitioners and providers need to provide you with care
- A responsibility to follow plans and instructions for care that you have agreed to with your practitioners
- A responsibility to understand your health problems and join in the development of treatment goals, to the degree possible

Go to AetnaBetterHealth.com/texas/medicaid-rights-responsibilities.html for more info.



How we make decisions about your care

Our utilization management (UM) program ensures you get the right care in the right setting when you need it. UM staff can help you and your providers make decisions about your health care.

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 receive.

If you have questions about UM, call Member Services. They can also help if you need language translation or assistance.



Keep your benefits at your fingertips. You can access your plan benefits from anywhere through your online Member Portal or Aetna Better Health app. Visit **AetnaBetterHealth.com/texas/member-portal.html** to get started!



Get extra support for your health care needs

Every Aetna Better Health® member is on their own personal health care journey. We can help guide you in managing and improving your or your child's health. Whether you have a medical problem or are just trying to live a healthy life, we have a program that can help.

Maternity Matters

Get extra help for you and your baby during pregnancy. You'll get care management support and earn rewards.

Neonatal Abstinence Syndrome (NAS)

Using alcohol, street drugs or even prescription medicine while pregnant can cause withdrawal symptoms in newborn babies. Get extra help and support for you and your baby.

Acute Care Education

It can be hard to figure out the type of care you or your family members may need. We can help you decide whether to go to the ER or urgent care.

Chronic Condition Management

Get extra help managing conditions like asthma, diabetes, heart disease, depression and more.

The goal of these programs is to help members and their caregivers:

- Understand your condition and answer your questions
- Find providers, schedule appointments and coordinate care between providers
- Connect you with community resources

For most programs, we will automatically enroll you if you are eligible. You can also get a referral to a complex case management program. Referrals can come from your doctor, a hospital discharge planner, a caregiver or even yourself. You can choose to join or leave a program at any time. Just call us if you do not want to be part of a program.

Go to AetnaBetterHealth.com/ texas/population-healthprograms.html for more info.



Need to renew your coverage?

You must renew your plan coverage every year. Look for your renewal notice in the mail. Visit **aet.na/sp25txk-1** or scan the QR code to learn more.



Help for recovering after a hospital stay

Taking the right steps once you (or your child) come home from the hospital can help speed healing. Here's how to support your recovery and get back to doing what you love.

Plan ahead

The earlier you can start planning for recovery, the better. Use the time before discharge to figure out how you'll get meals, your medicines and a ride home if needed. Check your plan benefts to see if they offer extra help like transportation or meal delivery.

2 Book a follow-up appointment

Seeing your primary care provider (PCP) after a hospital stay is key to recovery. They can help

make sure everything is going well with the healing process. Try to book this visit before you leave the hospital, so you know it's all set.

3 Include your caregiver

Have someone helping you? You can make them an official part of your care team. This means they can stay updated on your care plan and progress and talk to your providers about your recovery. Are you a parent or caregiver? Make sure you're included in patient communications and appointments.

4 Stick to the medication plan

One of the most important steps in the recovery process is taking medicines as prescribed. If you miss doses or take too much, it could slow down recovery or cause problems. To make it easier to remember, try using a pill organizer or setting a reminder on your phone. Some pharmacies may even offer reminder texts or phone calls.

Don't miss a dose

Medicines work best when you take them as directed by your provider. Sticking to your treatment plan will help you get and stay better. But sometimes, it can be hard to remember to take your pills or get your prescriptions refilled. Here are some common barriers, and ideas for getting around them.

Your worried about side effects

It's true, medicines can cause side effects. But not everyone experiences them. And many side effects are mild and easy to manage. Talk to your provider about what to expect and what to do if you feel unwell. Sometimes, the fix may be as easy as prescribing a different medicine.

You don't know why you need the medicine

Knowledge is power! Ask your provider or pharmacist to explain how your medicine works and why it helps you. And remember: Even if you're not feeling sick, skipping your meds could cause problems. Think of it like brushing your teeth. You do it every day to prevent cavities, even if your teeth don't hurt.

You have too many medicines

Start by reviewing all of your medicines with your provider at least once a year. They may be able to cut down on the number of meds you need.

Next, find a tool to help you organize your meds. Pill organizers are low cost and easy to use.

For a more high-tech solution, look into phone apps. You can log all your medicines and set up alarms or other reminders when it's time for a dose.







Wondering if your medicines are covered?

At Aetna Better Health® of Texas, we cover a variety of prescription and over-the-counter (OTC) medicines to keep you healthy. We'll even mail your medicine so you can save time and effort.

Learn more about your pharmacy benefits at **AetnaBetterHealth. com/texas/pharmacy-prescription-drug-benefits.html**. You can find info such as:

- Preferred drug list (PDL)
- Medicines that require prior authorization and applicable coverage criteria
- A list and explanation of medicines that have limits or quotas
- Copayment and coinsurance requirements and the

medications or classes to which they apply

- Steps for getting prior authorization, generic substitution or preferred brand interchange
- Info on pharmaceutical management procedures
- Criteria used to add new medicines to the preferred drug list
- Steps for requesting a medication coverage exception

Aetna complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ENGLISH: ATTENTION: If you speak a language other than 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).