Find out what other rewards and added benefits you may be eligible for by scanning the QR code below or by visiting **AetnaBetterHealth.com/Virginia**.



Aetna Better Health® of Virginia PO Box 818044 Cleveland, OH 44181-8044



Aetna Better Health® of Virginia Maternity Incentive Program

AetnaBetterHealth.com/Virginia



Earn gift cards to Walmart

How do I qualify?

It's easy! Just take the attached form to your OB/GYN office when you go for your doctor's visit. A member of the office staff will sign your form to show that you came in for your visit.

How many gift cards can I earn?

During your pregnancy as an Aetna Better Health member, if you go to all of your prenatal appointments, you can receive up to two \$20 gift cards and one \$10 gift card.

- You will receive one \$20 gift card for every six prenatal visits.
- You will receive one \$10 gift card for your postpartum checkup, which you should have 1-12 weeks (7-84 days) following the birth of your baby.
- The gift cards will be given to you after your baby is born.

Note: There may be an annual limit on the total incentive amount you can receive per calendar year.

When do I turn in the form?

After your postpartum visit 1-12 weeks (7-84 days) after your baby is born, mail your form to:

Aetna Better Health® of Virginia

PO Box 818044

Cleveland, OH 44181-8044

Or email it to: QualityManagementPrograms@Aetna.com

Do I have to be an Aetna Better Health member to get a gift card? Yes.

Can I qualify for a gift card if I'm pregnant now and a new Aetna Better Health member?

Yes. You can receive one \$20 gift card for every six prenatal visits, and an additional \$10 gift card for your postpartum visit 1-12 weeks (7-84 days) after your baby is born. Just remain an Aetna Better Health member and you will receive the gift cards.

Who keeps the form?

Some doctors' offices feel that the Maternity Incentive Program is such a nice benefit for Aetna Better Health members that they have agreed to keep the form in your medical chart. If your doctor's office does not wish to keep the form, you can keep it. Don't forget to bring it to every prenatal office visit.

Member nam Member date Aetna Better I Street addres City, State & 2 Phone number	ie: of birth: Health member ID 7 ss: ZIP: er:	#: <u> </u>	
To be filled out by OB office Date of first visit: EDC:			FFICE STAFF: Make e the office signature s added to the form
Date of visit	Weeks gestation	Office address	Office signature
Postpartum Visit			
After your baby is born, mail your form to: Aetna Better Health® of Virginia PO Box 818044 Cleveland OH 44181-8044			
Or email it to: QualityManagementPrograms@Aetna.com			

For more information, visit us online at **AetnaBetterHealth.com/Virginia**