

OhioRISE, specialized behavioral health care from Aetna Better Health[®] of Ohio Welcome

Dear member, parent or guardian of member:

Welcome to OhioRISE, specialized behavioral health care from Aetna Better Health of Ohio. OhioRISE is a managed care program for youth with behavioral health needs. This program provides behavioral health care services to eligible youth who are under the age of 21 and meet a functional needs threshold, as identified through the Child and Adolescent Needs and Strengths (CANS) assessment or a recent inpatient hospital admission for psychiatric or substance use care. We look forward to serving you.

Call us right away if you have a behavioral health condition that needs ongoing medical care. As an OhioRISE Plan member, you will continue to receive medically necessary Medicaid-covered behavioral health services at no cost to you.

What Should You Do First?

1. Check out our website. You get 24/7 access to our member portal. Just go to **AetnaBetterHealth.com/OhioRISE** and look for the Member Portal at the top of the page. Sign up to:
 - View our searchable online provider directory
 - View your benefits information
2. Visit **AetnaBetterHealth.com/OhioRISE** to view your Member Handbook. It includes a lot of important information about your health plan, like:
 - Mental health and substance use covered services and how to get them.
 - Information on your member ID cards.
 - How to find providers in our network (you must receive services from network providers).
 - How to tell us you're unhappy with a decision we made.
 - Your membership rights and responsibilities.
 - Advance Directives.

3. Visit **AetnaBetterHealth.com/OhioRISE** to view our searchable online provider directory. It lists all the providers in our network.
4. If you have not done so already, you can also ask to get either or both the Member Handbook and Provider Directory in paper form at no cost to you. Please follow the directions on the request flyer to tell us if you would like the Member Handbook, Provider Directory, or both mailed to you. Make sure you mail the request flyer for the item or items you would like to receive. There is no postage necessary. The materials you asked for will be mailed to you. You can also call Member Services at **1-833-711-0773 (TTY: 711)** from 7 AM to 8 PM Monday through Friday to request this information.
5. Call us today if you have behavioral health care services that were scheduled before you joined our plan or were approved by fee-for-service Medicaid or a managed care organization (MCO). For a period of time, you may be able to keep getting these services or seeing providers not in our network. Tell us right away so we can help you get the care you need.

Care Coordination

Care coordination is a core function of OhioRISE. Following enrollment, a care coordinator will be assigned to help coordinate your services. Your care coordinator will also work with you to develop a Child and Family-Centered Care Plan, based on the needs and strengths you identified during the CANS assessment. A care coordinator from OhioRISE or their contracted Care Management Entity (CME) will contact you to begin this process. If you need to speak with a care coordinator before this time, please contact Member Services at **1-833-711-0773 (TTY: 711)**.

Need a Ride?

If you are enrolled in a managed care organization (MCO), contact your MCO to schedule transportation. You can also call OhioRISE Member Services to help coordinate transportation with your MCO. Just call **1-833-711-0773 (TTY: 711)** from 7 AM to 8 PM Monday through Friday.

If you are not enrolled in an MCO, contact your local County Department of Job and Family Services office to schedule transportation through the Non-Emergency Transportation (NET) program.

If you need help with transportation, OhioRISE can help. Please contact OhioRISE at **1-833-711-0773 (TTY: 711)**.

Need Crisis Behavioral Health Advice?

Call **1-800-720-9616** to contact the Ohio CareLine. Behavioral health professionals staff are available 24 hours a day, 7 days a week. They offer confidential support in times of crisis and connect you with support and resources.

Have Physical Health Care Questions?

If you are a member of a managed care organization, your physical health services will be covered under that plan. Contact your MCO for questions about this coverage. You can also call OhioRISE Member Services phone number **1-833-711-0773 (TTY: 711)** from 7 AM to 8 PM Monday through Friday and we can connect you with your MCO.

If you are a member of fee-for-service Medicaid, your physical health services will be covered under that plan. Contact the Medicaid Consumer Hotline at **1-800-324-8680 (TTY: 711)** for questions about this coverage.

What is the OhioRISE Waiver?

The OhioRISE program includes a 1915(c) home and community-based services waiver. The waiver aims to reduce risks and prevent negative health and life outcomes for children with serious emotional disturbances and functional impairments.

If you are being enrolled onto the OhioRISE 1915(c) Waiver, you are eligible to receive waiver services, in addition to your existing OhioRISE Plan services. You can review the waiver services in the OhioRISE Waiver Member Handbook. Your care coordinator will help you plan for and access waiver services.

Have Other Questions?

If you need help or have questions, call Member Services at **1-833-711-0773 (TTY: 711)** from 7 AM to 8 PM Monday through Friday or find resources at **AetnaBetterHealth.com/OhioRISE**. We are also ready to help you:

- Get a printed copy of your Member Handbook, Provider Directory or any other information on our website.
- Make appointments with your providers.
- Get assistance with scheduling transportation.
- Answer any other questions about your health plan.
- Contact your care coordinator or care management entity.
- Connect you to your physical health services.

If you have a problem reading or understanding this information, please contact Member Services at **1-833-711-0773 (TTY: 711)** from 7 AM to 8 PM Monday through Friday for help at no cost to you. We can explain this information in English or in your primary language. We may have this information printed in some other languages. If you are visually or hearing-impaired, special help can be provided.

Aetna Better Health® of Ohio follows state and federal civil rights laws that protect you from discrimination or unfair treatment. We do not treat people unfairly because of a person's age, race, color, national origin, religion, sex, gender identity, sexual orientation, religion, marital status, mental or physical disability, medical history, health status, genetic information, evidence of insurability, or geographic location. If you would like to file a complaint, please contact Aetna Better Health by mail, phone, or email at:

Aetna Better Health
7400 W Campus Rd, Suite 200
New Albany, OH 43054
Phone: **1-833-711-0773 (TTY: 711)**
Email: OhioRISEMemberServices@Aetna.com

If you would like to file a complaint with Health and Human Services Office for Civil Rights, please go to

<https://ocrportal.hhs.gov/ocrsmartscreen/main.jsf> or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201
1-800-368-1019, TDD: 1-800-537-7697

ENGLISH: To help you understand this notice, language assistance, interpretation services, and auxiliary aids and services are available upon request at no cost to you. Services available include, but are not limited to, oral translation, written translation, and auxiliary aids. You can request these services and/or auxiliary aids by calling Aetna Better Health Member Services at **1-833-711-0773 (TTY: 711)**.

SPANISH: Para ayudarle a entender este aviso, disponemos de asistencia lingüística, servicios de interpretación y ayudas y servicios auxiliares si los solicita, sin costo alguno para usted. Los servicios disponibles incluyen, entre otros, traducción oral, traducción escrita y ayudas auxiliares. Puede solicitar

estos servicios o ayudas auxiliares llamando al Departamento de Servicios para Miembros de Aetna Better Health al **1-833-711-0773 (TTY: 711)**.

NEPALI: यो सूचना तपाईंलाई बुझ्न सहायता गर्न तपाईंको निम्ति निःशुल्क रूपमा आग्रह गर्नुभएअनुसार भाषाको सहायता, अनुवादका सेवाहरू र थप सहायता र सेवाहरू उपलब्ध छन्। समावेश भएका सेवाहरू उपलब्ध छन् तर मौखिक अनुवाद, लिखित अनुवाद र थप सहायतामा सीमित छैनन्। तपाईंले **1-833-711-0773 (TTY: 711)** मा Aetna Better Health सदस्य सेवाहरूमा फोन गरेर यी सेवाहरू र/वा थप सहायता आग्रह गर्न सक्नुहुन्छ।

ARABIC: مساعدتک فی فهم هذا الإخطار، تتوفر المساعدة اللغوية وخدمات الترجمة الفورية والمساعدات والخدمات المعينة عند الطلب مجاناً. تشمل الخدمات المتاحة، على سبيل المثال لا الحصر، الترجمة الشفوية والترجمة الكتابية والمساعدات المعينة. يمكنك طلب هذه الخدمات و/أو المساعدات الإضافية عن طريق الاتصال بخدمات أعضاء Aetna Better Health على الرقم **0773- (TTY: 711) 1-833-711**

SOMALI: Si lagaaga caawiyo fahanka ogaysiiskan, kaalmada luqadda, adeegyada turjumaada hadalka ah, iyo qalabka kaalmada naafada iyo adeegyada waxaa la heli karaa marka la codsado iyagoon kharash kugu taagnayn adiga. Adeegyada la heli karo waxaa ku jira, laakiin kuma xadidna, turjumaada hadalka, turjumaada qoran, iyo qalabka kaalmada naafada. Waxaad codsan kartaa adeegyada iyo/ama qalabka kaalmada naafada addoo soo wacaya Adeegyada Xubinta Aetna Better Health lambarka **1-833-711-0773 (TTY: 711)**

RUSSIAN: Если вам нужна помощь в понимании данного уведомления, вы можете обратиться за языковой поддержкой, услугами устного перевода, а также вспомогательными средствами и услугами, которые по запросу оказываются бесплатно. Доступные услуги включают, помимо прочего, устный перевод, письменный перевод и вспомогательные средства. Вы можете обратиться за данными услугами и/или вспомогательными средствами в отдел обслуживания участников Aetna Better Health по телефону **1-833-711-0773 (TTY: 711)**

FRENCH: Pour vous aider à bien comprendre cet avis, vous pouvez faire appel à des services gratuits d'interprétation et d'aide auxiliaire. Par exemple, vous pouvez vous faire traduire un texte par oral ou par écrit, ou encore bénéficier d'autres services auxiliaires. Pour solliciter ces services et/ou une aide auxiliaire, appelez le service réservé aux membres Aetna Better Health au **1-833-711-0773 (TTY : 711)**

VIETNAMESE: Để giúp quý vị hiểu thông báo này, hỗ trợ ngôn ngữ, dịch vụ thông dịch, và các dịch vụ và hỗ trợ phụ trợ được cung cấp miễn phí theo yêu cầu cho quý vị. Các dịch vụ có sẵn bao gồm, nhưng không giới hạn, dịch nói, dịch văn bản và các hỗ trợ phụ trợ. Quý vị có thể yêu cầu các dịch vụ này và/hoặc hỗ trợ phụ trợ bằng cách gọi cho Dịch vụ Hội viên của Aetna Better Health theo số

1-833-711-0773 (TTY: 711)

SWAHILI: Ili kukusaidia kuelewa ilani hii, usaidizi wa lugha, huduma za ukalimani na vifaa vya kusikia na huduma zinapatikana ukiomba bila malipo yoyote. Huduma hizi ni pamoja na, bila kuishia kwa hizi tu, tafsiri ya mdomo, tafsiri ya maandishi na vifaa vya kusikia. Unaweza kuomba huduma hizi na/au vifaa vya kusikia kwa kupigia simu Aetna Better Health Member Services kwa nambari **1-833-711-0773 (TTY: 711)**

UKRANIAN: Щоб допомогти вам зрозуміти це повідомлення, за запитом вам безкоштовно може надаватися мовна допомога, послуги перекладу, а також допоміжні засоби й послуги. Такі послуги включають, крім іншого, усний переклад, письмовий переклад та допоміжні засоби. Ви можете замовити ці послуги та/або допоміжні засоби, зателефонувавши в службу підтримки учасників Aetna Better Health за номером **1-833-711-0773 (TTY: 711)**

CHINESE (TRADITIONAL): 為幫助您理解本通知，我們可應您的要求免費提供語言協助、口譯服務以及輔助設備和服務。提供的服務包括但不限於口譯、筆譯以及輔助設備。您可致電 Aetna Better Health 會員服務部，要求獲得這些服務和/或輔助設備，電話號碼為：**1-833-711-0773 (TTY : 711)**

KINYARWANDA: Kugira ngo ufashwe gusobanukirwa neza iri tangazo, ubufasha mu by'ururimi, serivisi z'ubusemuzi n'ibikoresho bifasha abafite ubumuga bwo kutumva na serivisi bijyanye biboneka bisabwe kandi nta mafaranga wishyuzwa. Serivisi ziboneka harimo, ariko ntabwo zigarukira gusa ku, busemuzi, ubusemuzi bw'inyandiko n'ibikoresho bifasha abafite ubumuga bwo kutumva. Ushobora gusaba izo serivisi cyangwa ibikoresho bifasha abafite ubumuga bwo kutumva uhamagaye Aetna Better Health Member Services kuri **1-833-711-0773 (TTY: 711)**

CHINESE (SIMPLIFIED): 为帮助您理解本通知，我们可应您的请求免费提供语言援助、口译服务以及辅助设备和服务。提供的服务包括但不限于口译、笔译以及辅

助设备。您可致电 Aetna Better Health 会员服务部，请求获得这些服务和/或辅助设备，电话号码为：**1-833-711-0773 (TTY: 711)**

PASHTO: په دې خبرتیا د پوهیدو په برخه کې ستاسو سره د مرستې لپاره، د غوښتنې په صورت کې د ژبې اړوند مرسته، د ژباړې خدمتونه، او مرستندویه کومکونه او خدمتونه پرته له کوم لګښت څخه شتون لري. په شته خدمتونو کې شفاهي ژباړه، لیکلي ژباړه، او مرستندویه کومکونه شامل دي، خو تر دې پورې محدود ندي. تاسو کولی شئ د Aetna Better Health د غړو خدمات ته په تلیفون کولو سره د دې خدماتو او/یا فرعي مرستو غوښتنه وکړئ **(TTY: 711) 0773-711-833-1**

AMHARIC: ይህን ማሳሰቢያ እንዲረዱት ሊያገዝዎ የሚያስችሉ የቋንቋ እርዳታ፣ የትርጉም አገልግሎቶች፣ እና ተያያዥ ድጋፎች እና አገልግሎቶች ሲጠይቁ እርስዎ ምንም ወጪ ሳያወጡ ማግኘት ይችላሉ። ያሉት አገልግሎቶች የቃል ትርጉም፣ የጽሁፍ ትርጉም፣ እና ተያያዥ ድጋፎች እና ሌሎችን ይጨምራል። እነዚህን አገልግሎቶች እና/ወይም ተያያዥ ድጋፎችን ወደ Aetna Better Health የአባል አገልግሎቶች በ **1-833-711-0773 (TTY: 711)** በመደወል መጠየቅ ይችላሉ።

GUJARATI: આ સૂચનાને સમજવામાં તમારી મદદ કરવા માટે, ભાષા સહાય, દુભાષિયા સેવાઓ અને વધારાની સહાય અને સેવાઓ વિનંતી કરવા પર તમારા માટે કોઈપણ ખર્ચ વિના ઉપલબ્ધ છે. ઉપલબ્ધ સેવાઓમાં મૌખિક અનુવાદ, લેખિત અનુવાદ અને વધારાની સહાયનો સમાવેશ થાય છે, પરંતુ સેવાઓ એટલા સુધી મર્યાદિત નથી. તમે Aetna Better Health Member Servicesને **1-833-711-0773 (TTY: 711)** પર કોલ કરીને આ સેવાઓ અને/અથવા વધારાની સહાયની વિનંતી કરી શકો છો.