

# OhioRISE FamilyCare Central User Guide

## User Roles with access may include

- Care Management Entities (CMEs)
- Managed Care Organizations (MCOs)
- Ohio Department of Medicaid (ODM)
- SPBM
- Public Children's Services Agencies (PCSAs)

## Overview

- FamilyCare Central is Aetna Medicaid's person-centered tool that includes the features needed to support specialized care coordination activities.
- FamilyCare Central is an innovative solution that supports seamless coordination of care by making key information available to all authorized individuals in a Member's Care Circle.
- Data integration is key to continuity of care for physical health, behavioral health, and socially necessary services.
- It is a 'wrap' platform that provides alignment in services and goals.
- FamilyCare Central includes:
  - Member's Health record (Claims, Medications, Prior Authorizations)
  - Resources & documents (SDOH tools, Additional Care Coordination Benefits)
  - Care Planning (Care plans, assessments, appointments)
  - Secure messaging
  - And more

### **PLEASE NOTE:**

- The features shown in this document may differ from the actual screens due to new developments
- The data exposed is all manufactured, not real member data. Only authorized users will see all data, others will see sensitive data masked by a series of asterisks (“\*\*\*\*\*”)

**Let's get started.**

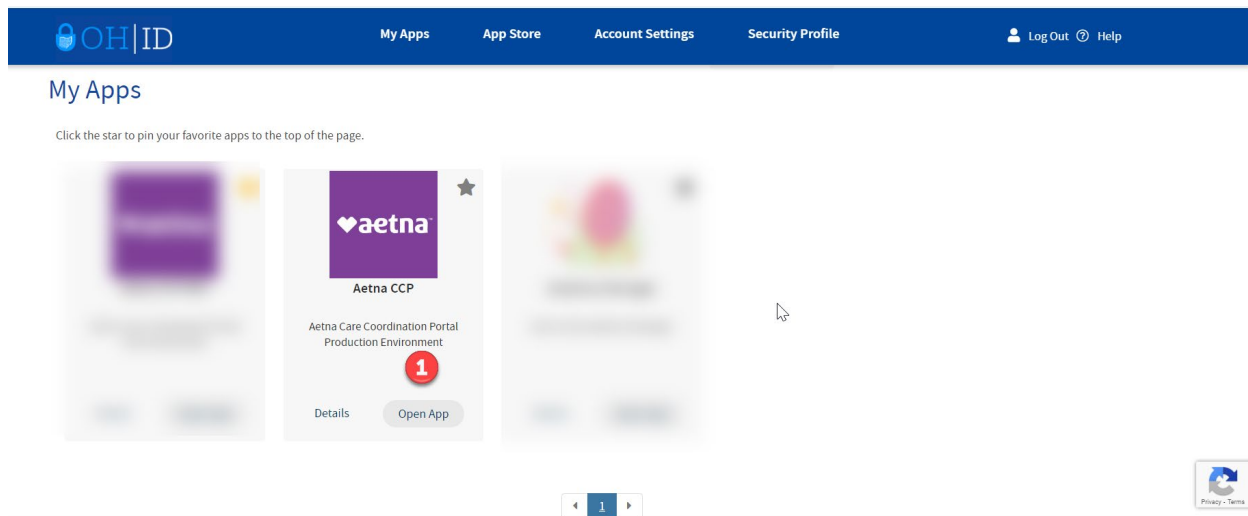
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# Signing in

Login from the Innovate Ohio Platform: [Ohio Portal URL](#)

1. Use your Innovate Ohio Platform (IOP) login credentials
2. Select the Aetna tile

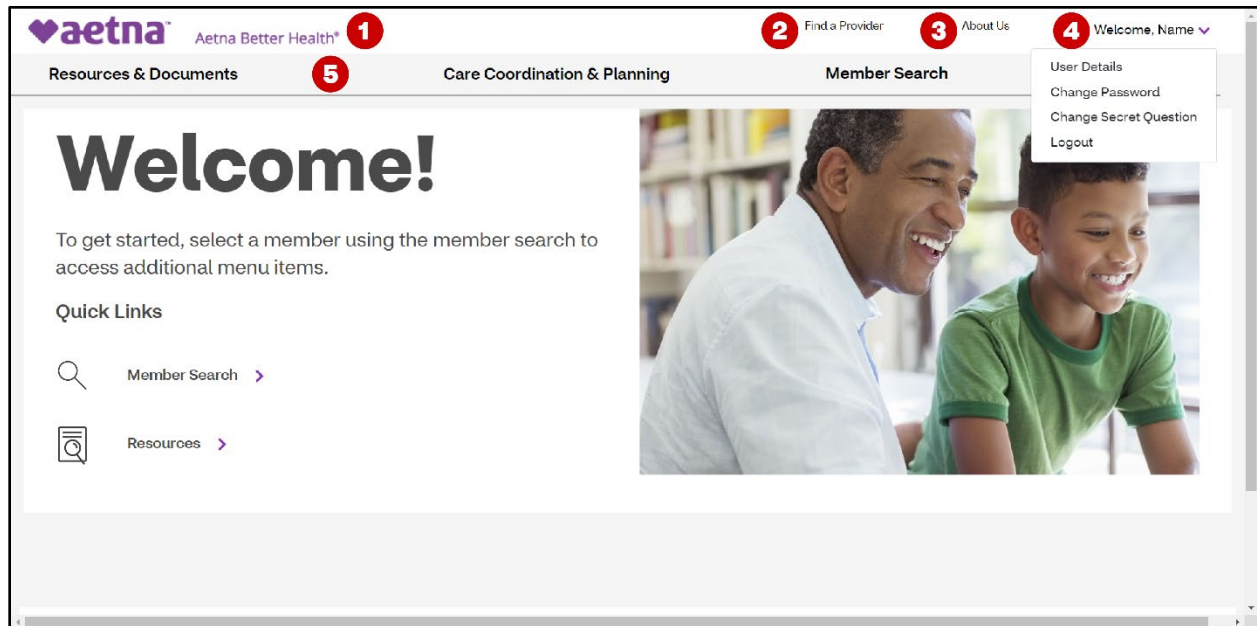


If you have trouble signing in:

1. Clear the cookies/cache on your system
2. Email [OhioRiseFamilyConnect@aetna.com](mailto:OhioRiseFamilyConnect@aetna.com) Full Name, your 8 digit Ohio ID and email address.

# Landing Page

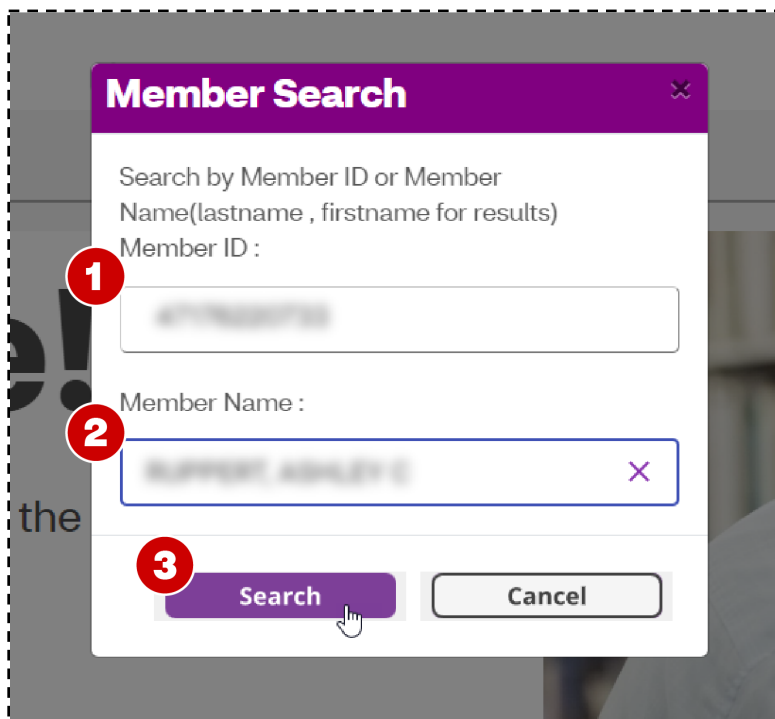
Once you are logged in, you will see the landing page.



1. Logo – Return to the landing page from anywhere in the application
2. Find a Provider – search for an OhioRISE network provider
3. About Us- information on the OhioRISE program
4. Your Name – Click here to:
  - View User details
  - Change Password
  - Change Secret Question
  - Logout
5. Menus- *note: limited information is available until a member is selected*
  - Resources & Documents- Find general information
  - Contacts & Messaging – Find the phone number for managed care plans.
  - Member Search – Find a member

## Member Search

You can search by Member ID (1) or Member Name (2). Once a member is selected, click the Search button (3) and additional features will be available.



The image shows a 'Member Search' dialog box with a purple header and a white body. The header contains the title 'Member Search' and a close button (X). The body contains the following text: 'Search by Member ID or Member Name (lastname , firstname for results)'. Below this, there are two input fields: 'Member ID :' and 'Member Name :'. The 'Member ID' field is empty and has a red circle with the number '1' next to it. The 'Member Name' field contains the text 'SUPPORT ADMIN' and has a red circle with the number '2' next to it. At the bottom of the dialog, there are two buttons: 'Search' and 'Cancel'. The 'Search' button is highlighted with a red circle and the number '3', and a mouse cursor is pointing at it.

**1**

Search by Member ID or Member Name (lastname , firstname for results)

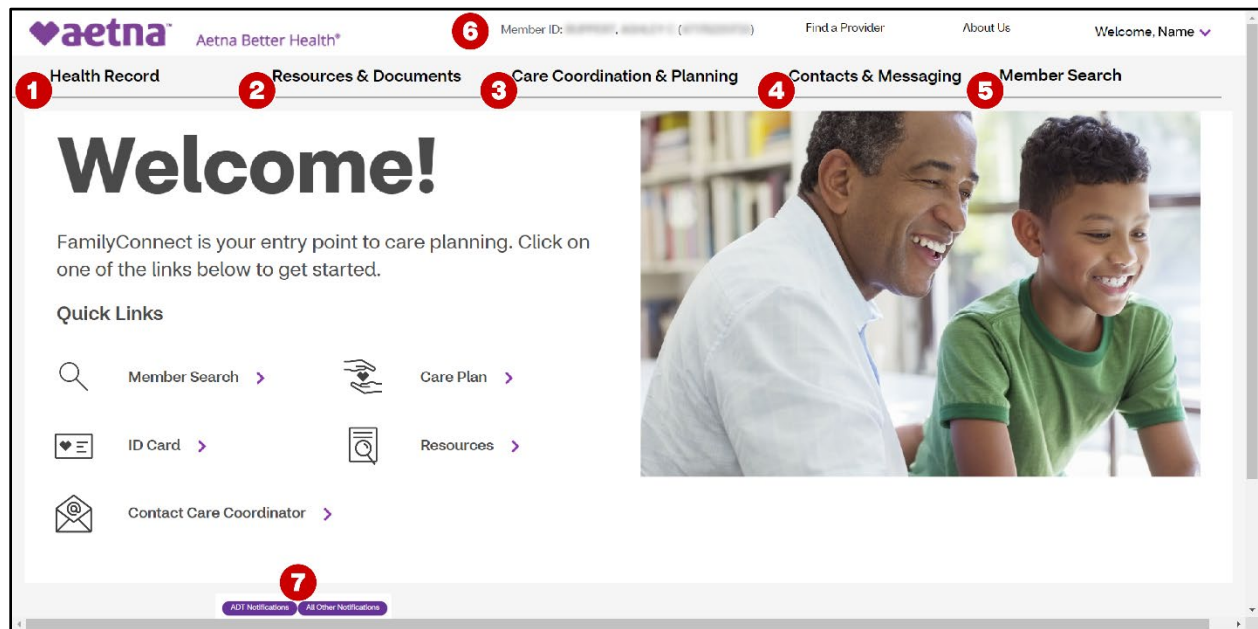
Member ID :

Member Name :

**2**

**3** Search Cancel

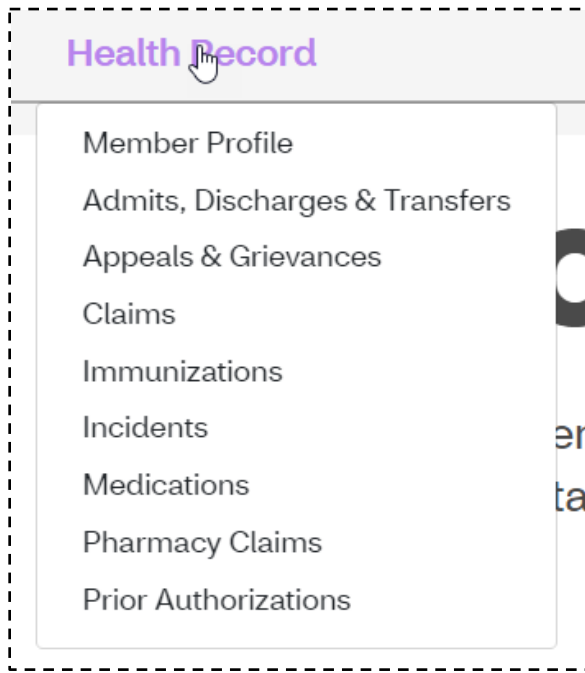
## Member's Information



When you are in a member's record, you will see these options relating to the member.

1. Health Record
2. Resources and Documents
3. Care Coordination & Planning
4. Contacts & Messaging
5. Search for a new member
6. See which member's records you are currently viewing
7. Notifications

## Health Record



1. Member Profile – Demographic and care management information
2. Claims – List of paid services
3. Pharmacy Claims – List of paid pharmacy claims
4. Medications – List of members medications
5. Authorizations – List of items submitted for authorization
6. Admits, Discharges and Transfers – List of inpatient activity
7. Appeals & Grievances – List of Member appeals and grievances
8. Incidents – Reported incidents

# Member Profile

View information about the member to include demographics, eligibility, risk scores and care coordination tier as well as contacts for care coordination.

The screenshot shows the Aetna Member Profile page. At the top, there is a navigation bar with the Aetna logo, 'Aetna Better Health', and a Member ID. Below this is a secondary navigation bar with tabs for 'Health Record', 'Resources & Documents', 'Care Coordination & Planning', 'Contacts & Messaging', and 'Member Search'. The main content area is titled 'Member Profile' and contains several sections:

- 1 Member Information:** A table with columns for Member Name, Member ID, Birth Date, Address, Phone, and Email Address.
- 3 Eligibility Information:** A section showing Benefit (Aetna Better Health of Ohio - OhioRISE), Member ID, Status (Active), Start Date (07/01/2022), Term Date, and Renewal Date (NOT AVAILABLE).
- 5 Social Determinants:** A table showing Community Risk Score for various factors: Financial Strain (3.6), Food Insecurity (3.4), Health Literacy (2.4), Housing Instability (4.0), and Transportation Barriers (4.2). A note below states 'Scoring: 1=Low, 5=High'.
- 2 Care Teams:** A table with columns for Team Member, Name, Contact Information, and Email Address. It lists the Primary Care Coordinator and Organization (Aetna Better Health of Ohio).
- 4 Care Coordination Information:** A section showing Care Coordination Tier (Tier 1) and Care Coordination Status (Assigned).
- 6 Care Coordination Dates & Events:** A section showing HRA Complete (N), CANS Due Date, Interval Risk Screener Due Date, OhioRISE Supplemental Due Date, and Care Plan Review Due Date.

1. Member information – Member Demographics
2. Care Team – Who supports the member’s health
3. Eligibility Information – The member’s coverage
4. Care Coordinator Information – Member’s tier and status
5. Social Determinants – SDOH Risk scores ranked 1 lowest risk, to 5 highest risk
6. Care Coordination Dates & Events



# Admits, Discharges & Transfers

Member ID: [REDACTED] (0000000000) Find a Provider About Us Welcome, Name ▾

Health Record Resources & Documents Care Coordination & Planning Contacts & Messaging Member Search

Aetna FamilyCare Central > Health Record > Admits, Discharges & Transfers

## Admits, Discharges & Transfers

The admission, discharge and transfer list reflects when the member is admitted to a hospital, transferred to another facility, or discharged from the hospital.

Filter by: **1** Date Range  
Select One **2** Reset Form

<b>3</b> Facility	Attending Physician	Admit Date	Discharge Date	Chief Complaint	Diagnosis
[REDACTED]	[REDACTED]	04/13/2020	04/14/2020		[BP]
[REDACTED]		01/28/2020	01/01/1900		
[REDACTED]		02/24/2021	02/25/2021		

< Previous | Next >

1. Filter by Date Range
2. Click Reset Form to undo the search
3. Details of the admission, discharge, and/or transfer

# Appeals & Grievances

Appeals & Grievances includes information associated with an appeal or grievance that may have been filed with the health plan. You will find date, type, status and outcome.

Aetna FamilyCare Central > Health Record > Appeals & Grievances

## Appeals & Grievances

Filter by: **1** Date Range Select One **2** Reset Form

**3** Submission Date **4** Type **5** Status **6** Outcome

Submission Date	Type	Status	Outcome	
9/26/2018	Member Appeal	Closed	Overturned	<b>7</b> >
9/26/2018	Member Appeal	Processing	Overturned	>
10/1/2018	Member Appeal	Closed	Overturned	>
10/1/2018	Member Appeal	Closed	Overturned	>
10/1/2018	Member Appeal	Closed	Upheld	>
10/16/2018	Member Appeal	Closed	N/A	>

< Previous **1** 2 ...5 Next >

Print Download

1. Filter by Date Range
2. Click Reset Form to undo the search
3. Submission Date – The date of the grievance was submitted
4. Type – Type of grievance
5. Status – current status of the grievance
6. Outcome – final decision made on the grievance
7. Click on the arrow to see details on the grievance

## Appeals and Grievances Details

The screenshot shows the Aetna website interface for 'Appeals & Grievances Details'. At the top, there is a navigation bar with the Aetna logo, 'Aetna Better Health', and user information including 'Member ID: [redacted]', 'Find a Provider', 'About Us', and 'Welcome, Name'. Below this is a secondary navigation bar with links for 'Health Record', 'Resources & Documents', 'Care Coordination & Planning', 'Contacts & Messaging', and 'Member Search'. The main content area has a breadcrumb trail: 'Aetna FamilyCare Central > Health Record > Appeals & Grievances > Appeals & Grievances Details'. The title 'Appeals & Grievances Details' is prominently displayed. The main content is divided into two columns. The left column contains a 'Member Appeal for' section with a 'Date Submitted: 09/26/2018' and a 'Decision Date: 10/22/2018'. Below this is a 'Summary' section with placeholder text. The right column contains a 'Status' section with the value 'Closed' and an 'Outcome' section with the value 'Overturned'. At the bottom of the right column, there is a link that says 'For more information about Appeals and Grievances, Click Here'. Five red circular callouts with white numbers 1 through 5 are overlaid on the page to highlight specific elements: 1 points to the 'Member Appeal for' header, 2 points to the 'Summary' text, 3 points to the 'Status' value, 4 points to the 'Outcome' value, and 5 points to the 'Click Here' link.

1. Member Information
2. Summary – Summary of the Grievance
3. Status – status of the grievance
4. Outcome – Final decision/outcome on the grievance
5. When you “Click Here” you are able to more information about appeals and grievances.

# Claims

View and search the member's medical and behavioral health claims; on the initial load, the user can view the most recent 90 days of claims history

**OhioRISE Claims**

Filter by:

- 1 Claim Type: OhioRISE Claims
- 2 Date Range: Select One
- 3 Claim Status: SELECT ONE
- 4 Reset Form

Provider Name	Claim Id	Total Billed Amount	Your Plan Paid	Claim Status
ACERONE, ANNE A	XXXXXXXXXX	\$25.00	\$11.34	PAID
*****	XXXXXXXXXX	\$43.85	\$35.28	PAID
LOVELL, NANCY A	XXXXXXXXXX	\$309.00	\$100.01	PAID
WESTERN CENTER FOR MENTAL HEALTH S	XXXXXXXXXX	\$179.20	\$0.00	DENIED
*****	XXXXXXXXXX	\$89.60	\$22.00	PAID
SHALOWITZ, ROBERT J	XXXXXXXXXX	\$89.60	\$89.60	PAID

Search by choosing:

1. Claim type – type of health claim
2. Date Range – Narrow your search by dates
3. Claim status – Narrow your search using In Progress, Paid, Denied, or Unknown
4. Reset form- clears all previous selections
5. Click on the purple arrow next to a claim to see details

## Claim Details

View member claim details - claim header information to include billing information and status

**Claim Details**

Have questions? [Contact Member Services](#)

**1** **Payee Information**

Provider Name	Service Date From
	06/10/2022
Service Date to	Claim ID
11/30/2022	22172E0010854
Claim Type	
Institutional	
Member Name	Member ID

**2** **Payer Information**

Name	Address
Ohio Rise	7400 West Campus Road
City, State and Zip Code	Contact Name
New Albany, OH, 43054	Member/Provider Services
Contact Phone	
1 (833) 711-0773	

**3** **Total cost breakdown for 6 services**

Total Billed Amount	\$10054.00
Your Plan Paid	\$0.00
Claim Status	IN PROGRESS
Decision Date	Not Available

**4**

**5** **Benefit Details/Explanation of Benefits**

Service Date	Service Code	Units	Code Description	Billed Amount	Allowed Amount
05/06/2021		1		\$1568.00	\$0.00
05/06/2021		1		\$1568.00	\$0.00
05/06/2021		1		\$1568.00	\$0.00
05/06/2021		1		\$1568.00	\$0.00
05/06/2021		100		\$3374.00	\$0.00
05/06/2021		1		\$408.00	\$0.00

1. Payee information – Who received the payment
2. Payer information – Who sent the payment
3. Total cost breakdown – Amounts billed and paid
4. Claim Status – Shows if the claim was paid, in progress or denied
5. Benefit Details/Explanation of Benefits – Shows details with codes and items billed and paid

# Immunizations

Functionality coming soon.

# Incidents

"Incident" means an alleged, suspected, or actual event that is not consistent with the routine care of – or service delivery to – a member that may have a negative impact on the health and welfare of the individual (such as abuse or neglect).

Care coordinators need to report and document an incident. They also work to support members and families to prevent future incidents and to assure the health and safety of members.

## Incidents

**Incidents**

"Incident" means an alleged, suspected or actual event that is not consistent with the routine care of, or service delivery to a member that may have a negative impact on the health and welfare of the individual such as abuse or neglect. Care coordinators need to report and document an incident. They also work to support members and families to prevent future incidents and to assure the health and safety of members.

Filter by: **1** **Date Range** Select One **From** MM / DD / YYYY **To** MM / DD / YYYY **2** **Reset Form** **2**

<b>3</b> Incident Type	<b>4</b> Incident Date	<b>5</b> Referral Date	<b>6</b> Home Visit Completed	<b>7</b> Referral Description
Other	02/01/2023	02/01/2023	Yes	
Misappropriation over \$500	02/01/2023	02/01/2023	Yes	
Lost or missing	02/21/2023	02/20/2023	Yes	

**8** **Print** **Download**

1. Filter by Date Range – preset or custom range
2. Reset form filtering
3. Incident Type – Type of the incident to include reports of abuse, neglect, exploitation, or misappropriation of funds
4. Incident Date – Date the incident occurred
5. Referral Date – Date the referral occurred
6. Home Visit Completed
7. Referral Description – Details about referral.
8. Print or download

# Medications

View member's current medications.

Aetna FamilyCare Central > Health Record > Current Medications

## Current Medications

This page lists the member's active medications filled within the last 180 days. You can print or download the medication list using the icon links on the page.

Drug Description	Drug Strength	Quantity	Days Supply
1 EUTHYROX 25 MCG TABLET	2 NaN	3 30	4 30
POTASSIUM CLER 10 MEQ TABLET	NaN	90	30
*****	NaN	30	30

< Previous **T** Next >

5

This page lists the member's active medications filled in the last 180 days

1. Drug description – This is the name of the drug
2. Drug strength – How strong each pill is
3. Quantity – How many were given
4. Days' supply – How many days the bottle will last
5. Print or download is available



# Pharmacy Claims

View member's pharmacy claims and add filters for a more refined search.

**Pharmacy Claims**

This page lists the member's pharmacy claims. You can Print or Download the medication list using the icon links on the page.

Filter by: **1** Claim Type Pharmacy Claims **2** Date Range Select One **3** Reset Form

Date of service	Prescription Number	Drug Description	Quantity	Days Supply	Pharmacy	Billed Amount
12/10/2022		*****	30	30	CIA PHARMACY #0071	\$11.31 <b>4</b>
12/10/2022		EUTHYROX 25 MCG TABLET	30	30	WAL MART PHARMACY #1	\$0.00
12/10/2022		POTASSIUM CLER 10 MEQ TABLET	90	30	WAL MART PHARMACY #1	\$2.29
08/09/2022		NIFEDIPINE TAB 60MG ER	30	30	WAL MART PHARMACY #1	\$26.27
08/09/2022		HYDROCO/APAP TAB 7.5-325	120	30	CIA PHARMACY #0071	\$31.46
08/09/2022		PAROXETINE HCL 10 MG TABLET	30	30	CIA PHARMACY #0071	\$0.00
08/08/2022		QUETIAPINE FUMARATE 100 MG TAB	30	30	WAL MART PHARMACY #1	-\$8.10
02/15/2022		ATORVASTATIN 40 MG TABLET	30	30	WAL MART #00	\$13.64
02/15/2022		ATORVASTATIN 40 MG TABLET	30	30	WAL MART #00	\$13.64

< Previous **2** Next >

Print Download

1. Search by Claim Type, OhioRISE Pharmacy or Historical
2. Select a date range
3. Click Reset Form to undo the search.
4. Click the purple area next to a pharmacy claim to see details.

## Pharmacy Claim Details

View member demographics and pharmacy claim details and information.

**Claim Information**

1 Prescription Number	Date of Service 12/10/2022 5
2 Prescriber Name	
3 Prescriber NPI	
4 Pharmacy Name	

**Member Information**

Member Name	
Date of Birth	Gender
Member ID	Member Policy Benefit
Eligibility Effective Date	01/01/2001

**Claim Details**

Prescription Number	Billed Amount	Drug Description
6	\$11.31	*****

< Previous T Next >

1. Prescription number
2. Prescriber name – Who prescribed the drug
3. Prescriber NPI
4. Pharmacy name – Where the prescription was filled
5. Date of Service – This is the date prescribed
6. Claim details – What the prescription was for, how much was billed, and what any copay is

# Prior Authorizations

Review the medical, surgical, and behavioral health services currently under clinician review.

**Prior Authorizations**

Filter by: **1** Authorization Type (OhioRISE Authorizations) **2** Date Range (Select One) **3** From (MM / DD / YYYY) **4** To (MM / DD / YYYY) **4** Authorization Status (Select One) **5** Reset Form

Authorization ID	Authorization Status	Authorization Type	Start Date	Submission Date	Requesting Provider
XXXXXXXXXX	APPROVED	INPATIENT	12/13/2022	12/13/2022	XXXXXXXXXX
XXXXXXXXXX	APPROVED	INPATIENT	01/24/2023	01/24/2023	XXXXXXXXXX
XXXXXXXXXX	APPROVED	INPATIENT	07/07/2022	07/10/2022	XXXXXXXXXX
XXXXXXXXXX	APPROVED	INPATIENT	06/20/2022	07/10/2022	XXXXXXXXXX
XXXXXXXXXX	APPROVED	INPATIENT	06/20/2022	07/10/2022	XXXXXXXXXX
XXXXXXXXXX	PENDING	INPATIENT	05/24/2022	07/10/2022	XXXXXXXXXX
XXXXXXXXXX	PENDING	INPATIENT	10/26/2022	10/25/2022	XXXXXXXXXX

< Previous T Next >

**7** Print Download

Search by choosing:

1. Authorization type (OhioRISE Authorizations, Physical Health Authorizations)
2. Date Range (preselected from dropdown)
3. Custom date range (when “Custom Date Range” is selected under #2)
4. Authorization status (Approved, Partially Approved, Denied, Pending)
5. Click Reset Form to undo the search
6. Click the arrow next to an authorization to see details
7. Print or download is available

## Prior Authorization Details

Authorization details include information such as ID, status, service date, member information, requesting provider, servicing provider, diagnosis, and service line information.

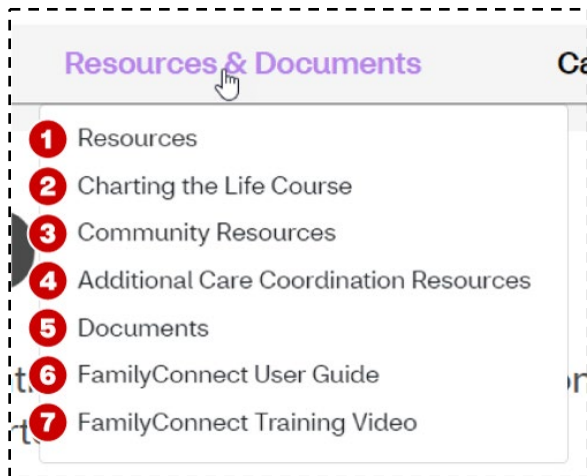
The screenshot shows the Aetna Member Portal interface for 'Authorization Details'. The page includes a navigation bar with options like 'Health Record', 'Resources & Documents', 'Care Coordination & Planning', 'Contacts & Messaging', and 'Member Search'. The main content area is divided into several sections:

- Authorization Information:** Contains fields for Authorization ID (1), Admit Date (2), Authorization Status (3), Authorization Type (INPATIENT), and Requesting Provider Name and NPI (5).
- Member Information:** Contains fields for Member Name (4), Date of Birth, Gender, Member ID, Member Policy Benefit, and Eligibility Effective Date.
- Service Line Information:** A table with columns for #, Description, Service Provider Name, Service Provider NPI, Start Date, End Date, Status, Units, and Procedure Code. It lists two service lines (6).
- Medical Indications:** A table with columns for Diagnosis Code and Diagnosis Description (7).

At the bottom right, there are navigation arrows labeled '< Previous' and 'Next >'. A link 'Have questions? Contact Member Services' is also visible.

1. Authorization ID
2. Admit date – The date of the service
3. Status – Whether the authorization was approved, in progress or denied
4. Member information
5. Requesting provider – Which doctor sent the authorization
6. Service line information – Information about each procedure in the authorization
7. Medical Indications – Code and description related to the authorization

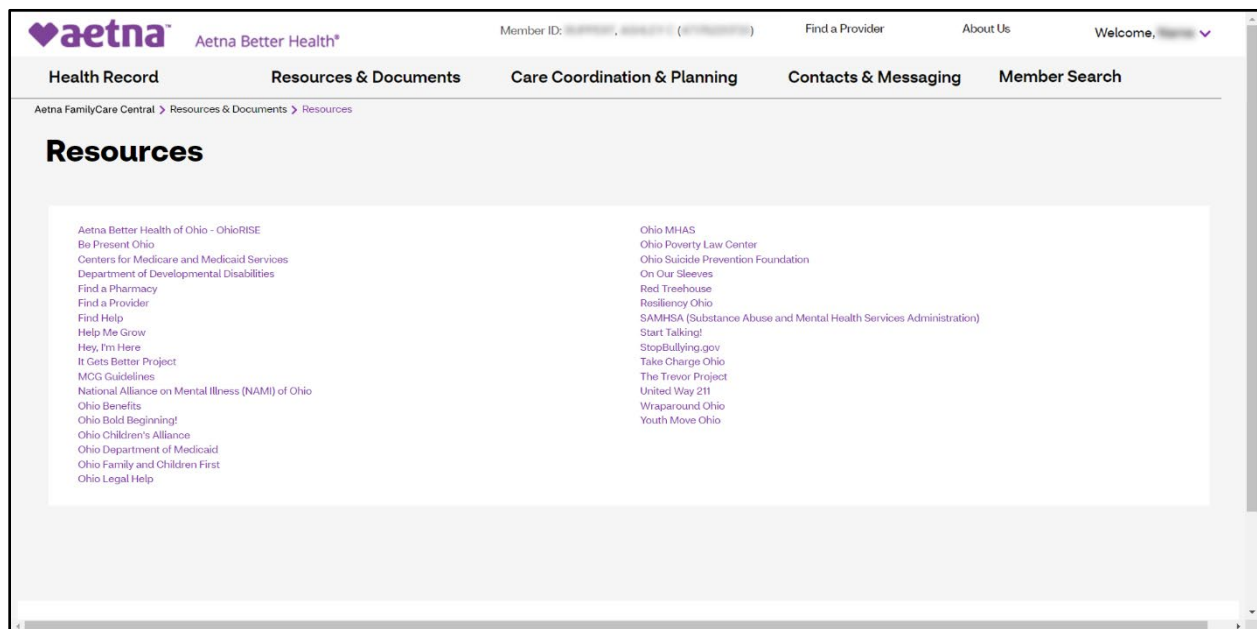
# Resources & Documents



1. Resources – Links to important resources from the state and community
2. Charting the Life Course -Tools for members Care team
3. Community Resources
4. Additional Care Coordination Resources
5. Documents – Document repository
6. FamilyCare Central User Guide
7. FamilyCare Central Training Video

## Resources

The Resources page provides various helpful websites and training materials.



Click any of the links on this page to access information on that resource.

# Charting the Life Course


Charting the Life Course was made to help people of all abilities and ages create a vision of a good life. It is a way to find support and find what it takes to live the lives a member wants to live. There are several outreach tools for completion and uploading into the document repository.

**aetna** Aetna Better Health\* Member ID: [REDACTED] Find a Provider About Us Welcome, Name ▾

Health Record Resources & Documents Care Coordination & Planning Contacts & Messaging Member Search

Aetna FamilyCare Central > Resources and Documents > Charting the Life Course






## Charting The Life Course



The Charting the LifeCourse Framework (CTLC) was made to help people of all abilities and ages create a vision of a good life. Also, it is a way to find supports and determine what it takes to live the lives people want to live. The core belief of CTLC is that everyone has the right to live, love, work, play, and pursue their life goals just as others do. This may include the making of a care plan.

CTLC was made through a joint process with families, led by the Institute for Human Development of Missouri-Kansas City. To learn more, please go to <http://www.lifecoursestools.com/>

Here are 5 CTLC tools that can be used to help people create their vision of a good life:

-  Support (Integrated Support Star) [Click on arrow to read more ▾](#)
-  Planning (Life Trajectory) [Click on arrow to read more ▾](#)
-  Areas of Life (Life Domain Vision Tool) [Click on arrow to read more ▾](#)
-  Relationships (Mapping Reciprocal Roles) [Click on arrow to read more ▾](#)
-  One Page Summary (Portfolio) [Click on arrow to read more ▾](#)

# Community Resources

Community resources help the member stay as healthy as possible. These resources are selected for the member and can include groups that provide education, training and help for the member and their family.

Additionally, they cover topics like depression and substance use, as well as what to do in a crisis and how to help youth in their transition to adulthood.

**Community Resources**

For more information on Community Resources, [click here](#).

Filter by:

Referral ID  Date Referral Initiated  Status  Vendor Consent  Program Connect Method  Program Name  Provider Name  Categories

No records found

**Your services and resources**

Here are some resources to help you stay as healthy as possible. We cover topics like depression and substance use, as well as what to do in a crisis and how to help youth in their transition to adulthood.

**Services**

Rides  
Call 911 for emergencies. Ambulance rides.

ESP  
Languages and formats  
If you speak a language other than English,

Have a question?  
You can call Member Services at **1-833-711-0773** (TTY: )

# Documents

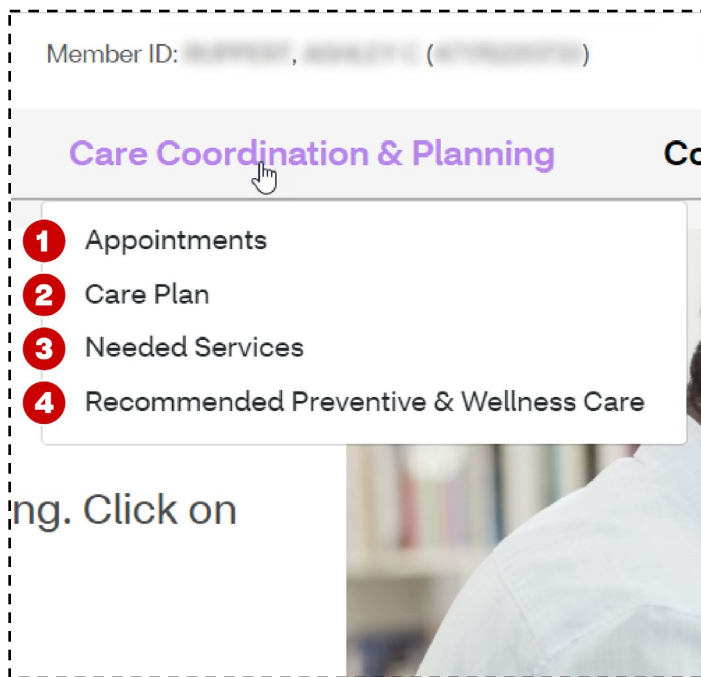
Document repository to share member's important care documents

The screenshot shows the Aetna FamilyCare Central 'Care documents' page. At the top, there is the Aetna logo and 'Aetna Better Health' branding. The page title is 'Care documents'. Below the title, there is a list of documents with blue links and dates. A purple refresh button is located to the right of the list. To the right of the list, there is a dashed box containing the text 'Click or drag and drop to attach a file'. Red circles with numbers 1, 2, and 3 highlight the blue link, the refresh button, and the upload area respectively.

1. Click the blue link on any document to view it
2. Click the purple button to refresh the Documents list
3. Drag a document from your Desktop to this section to upload it. You can also click on this box to open an upload dialog box.



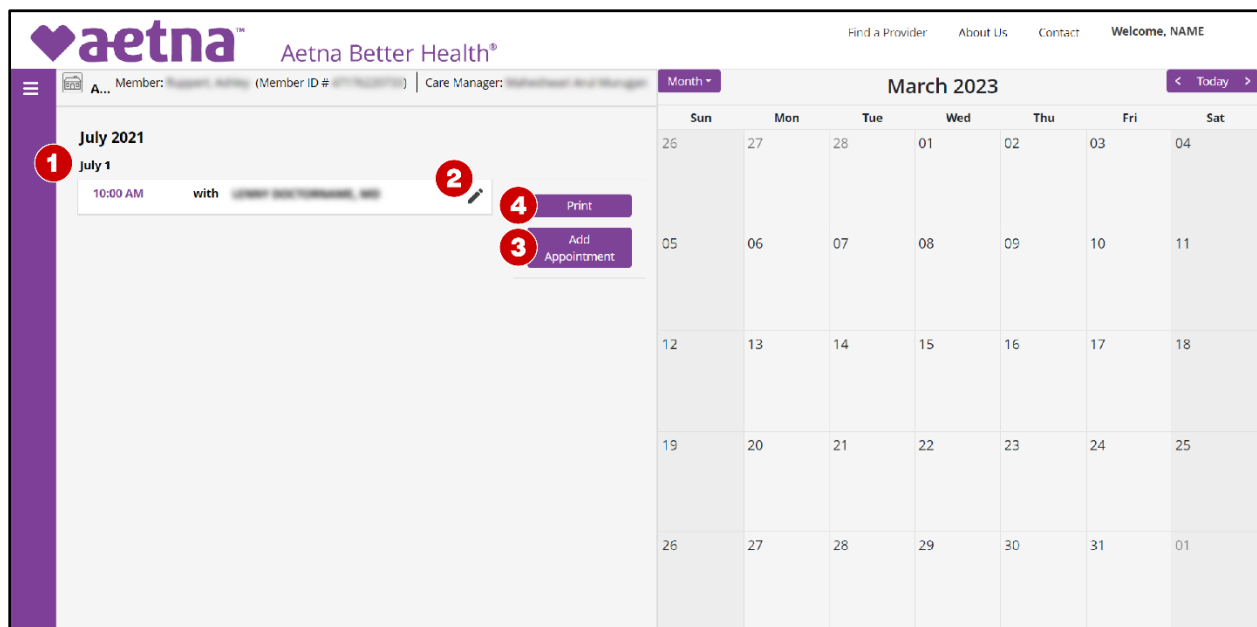
## Care Coordination & Planning



1. Appointments – Shows the member’s appointments by month
2. Care Plan – The member’s current care plan
3. Recommended Preventative & Wellness Care
4. Assessments – Forms completed by care coordinators

## Appointments

On this page, the user can view, add, or update an appointment and print the information.



1. Here you will see the Member’s upcoming appointments
2. Clicking the pencil icon will allow you to edit an appointment
3. Click the *Add Appointment* button to create a new appointment for the Member
4. Click the *Print* button to print the Member’s list of appointments

## Care Plan

Member’s most recent care plan is available for viewing and printing

The screenshot shows the 'View Care Plan' interface. On the left, there is a sidebar with a 'Care Plan Letter' link and a date of 6/28/2021. A red arrow points from this link to a preview of the letter document on the right. The document header includes the Aetna logo and the date June 28, 2021. The main title is 'Aetna Better Health® Care Plan'. Below the title, it says 'Dear [Name], Thank you for taking with us today. This Care Plan is a summary of our discussion. Please use this Care Plan to keep track of what we talked about.' At the bottom, it indicates 'Member ID: [Redacted] Care Plan 1 of 7'.

## Needed Services

These are services that a member has not received that are recommended based upon their age and conditions.

The screenshot shows the 'Needed Services' page. The header includes the Aetna logo and navigation links like 'Health Record', 'Resources & Documents', 'Care Coordination & Planning', 'Contacts & Messaging', and 'Member Search'. The main heading is 'Needed Services'. Below the heading, there is a brief explanation: 'Needed services are important because they mean that the member has not received a service that is recommended based upon their age and conditions. FamilyConnect provides a user-friendly view of gaps in care that helps the member to understand what the gap is and what action needs to be taken.' Below this is a table with three columns: 'Needed Services', 'Steps To Take', and 'Reason Why'.

Needed Services	Steps To Take	Reason Why
Care within 30 Days of an ER Visit for Substance Use	It's important to keep all your follow-up appointments. If you miss one, call your doctor and reschedule.	It's important to keep all your follow-up appointments. If you miss one, call your doctor and reschedule.
Ongoing Care for Children on Medicine for ADHD	Follow-up visits to the doctor are important when your child is taking medicine. Make sure to go to all your child's follow-up appointments.	The doctor needs to evaluate how the medicine is working and how your child feels on the medicine.
Ongoing Substance Use Care	It's important to keep all your follow-up appointments. If you miss one, call your doctor and reschedule.	It's important to keep all your follow-up appointments. If you miss one, call your doctor and reschedule.
Teen Weight Assessment	Has your child had a well checkup this year? If not, call your child's doctor today for an appointment.	Children should meet certain milestones as they grow. Yearly exams check for any problems and let the doctor check that your child is meeting milestones.

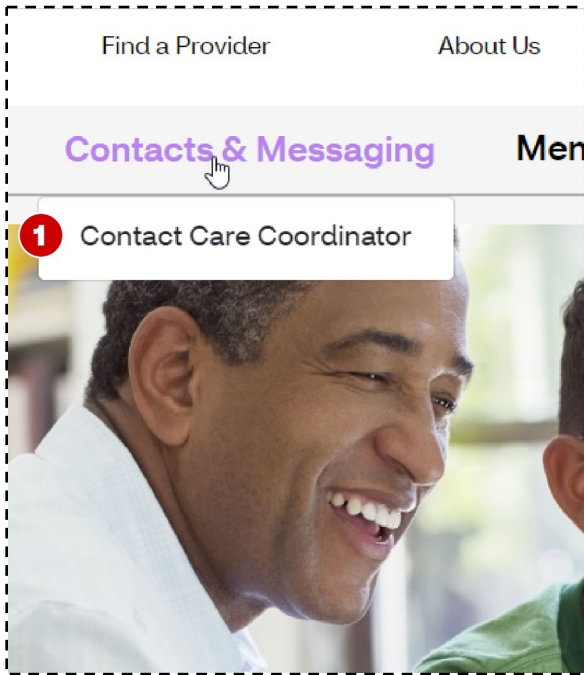
# Recommended Preventive & Wellness Care

The screenshot shows the Aetna FamilyCare Central website. The header includes the Aetna logo, "Aetna Better Health\*", Member ID, "Find a Provider", "About Us", and "Welcome, Name". The navigation bar contains "Health Record", "Resources & Documents", "Care Coordination & Planning", "Contacts & Messaging", and "Member Search". The main content area is titled "Recommended Preventive & Wellness Care" and features two numbered sections:

- 1 Well-child checkup schedule**
  - Newborn/Early discharge visit (2-3 days after bringing baby home)
  - 1 month
  - 2 months
  - 4 months
  - 6 months
  - 9 months
  - 12 months
  - 15 months
  - 18 months
  - 20 months
  - 24 months
  - 3-20 years (one every year)
- 2 Immunization schedule**
  - Birth**: HepB
  - 1-2 months**: HepB
  - 2 months**: DTaP, Hib, IPV, PCV, RV
  - 4 months**: DTaP, Hib, IPV, PCV, RV
  - 6 months**: DTaP, Hib, PCV, RV
  - 8 months and annually**: Influenza (flu)
  - 6-18 months**: HepB, IPV
  - 12-15 months**: Hib, MMR, PCV, chickenpox (varicella)
  - 12-23 months**: HepA
  - 15-18 months**: DTaP
  - 4-6 years**: DTaP, MMR, IPV, varicella
  - 11-12 years**: HPV, Tdap (tetanus, diphtheria, pertussis booster - also recommended during each pregnancy a woman has), meningococcal conjugate vaccine (a booster dose is also recommended at age 16)
  - 16-18 years**: Meningococcal B Vaccine (MenB)

1. Well child checkup schedule – When checkups should happen
2. Immunization schedule – What immunizations are recommended and at what ages

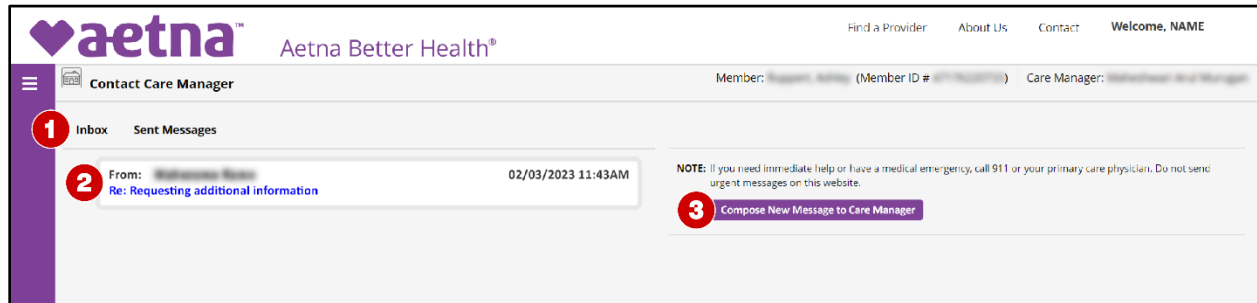
## Contacts & Messaging



1. Contact Care Coordinator

## Contact Care Coordinator

Secure messaging outreach to Member's Care Manager.



1. Switch between Inbox and Sent Messages
2. See all messages in current view (Inbox or Sent)
3. Click *Compose New Message* to start a new message to the Member's Care Manager

## Document information

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