

# Medical and dental insurance policy modifications for state disaster area

New Aetna® policy modifications are effective from November 23, 2018, through January 23, 2019.

They affect Christian County, Illinois, members who were impacted by the storms on November 23, 2018.

Governor Bruce Rauner has declared Christian County, Illinois, a state disaster area after significant storms moved through the county on November 23, 2018. As directed by IL DOI Company Bulletin 2018-12, we are modifying our policies for all fully insured medical and dental members who were impacted by this disaster and reside in or around Christian County. Modifications are as follows:

Policy modifications	Description
<b>Moratorium on policy cancellations and nonrenewals</b>	We are withdrawing any cancellation or nonrenewal notice that we issued on or after November 23, 2018, for an affected member's in-force policy.
<b>Effective until January 23, 2019, or later depending on specific circumstances</b>	We will not issue any new cancellations or nonrenewal notices to affected members until January 23, 2019, or later, dependent on the individual's specific circumstance.  A cancellation or nonrenewal may occur at the written request of the policyholder.
<b>Premium payments grace period</b>	Affected members will have a minimum of an additional 60-day grace period extension for their premium payment.
<b>Prescription refills</b>	We will authorize extra prescriptions during this state-of-emergency for requests made between November 23, 2018, and January 23, 2019. For example, if a 30-day supply is the limit under contract, we'll cover a 90-day supply for impacted members. This time frame may be extended by an order issued by the governor.  We won't deny refills for "refill too soon" requests for medications lost in the disaster. We'll also ensure their prescription drugs are covered at retail pharmacies if their mail-order delivery is disrupted.
<b>Claims submissions and timely filing</b>	We'll allow an additional 60 days beyond the normal time period for them to submit a claim or proof of loss.
<b>Appeals</b>	We'll allow an additional 60 days beyond the normal time period for a provider or member appeal to be submitted.



Policy modifications	Description
<b>External appeals</b>	We'll allow an additional 60 days beyond the normal time period for an external independent review request to be submitted.
<b>Utilization management</b>	We'll waive the late notification penalty for all procedures done in the affected area for members living in or near the affected area. This applies to both members and providers in or near the affected area.
<b>Notification of hospital admissions</b>	Penalties and restrictions will be waived when members get necessary emergency and non-emergency health and dental services out of network. This applies to both members and providers in or near the affected area.
<b>Referrals</b>	Referral requirements will be waived until January 23, 2019.
<b>In-network benefits Effective until January 23, 2019</b>	Payments will be issued to any provider (in or out of network) at the in-network benefits level, for services provided to impacted members.
<b>Inpatient hospital and skilled nursing facility (SNF) transportation</b>	Transportation of members to different hospitals or SNFs will be covered if transport is needed due to unsafe or other disaster-related conditions.
<b>Medical equipment and services</b>	Payment for medically necessary medical equipment, supplies and services will be authorized, regardless of the date on which the service, equipment or supplies were most recently provided.
<b>Precertification</b>	We will waive the late notification penalty and procedural review for all services that are on the National Precertification List.
<b>Utilization management</b>	Denials of coverage won't be issued for lack of information.
<b>Emergency room (ER) and urgent care</b>	We will allow ER and urgent care reviews to pay at the in-network benefits level for all diagnoses, including special services.
<b>Customer service</b>	<p>If you have any questions about these policy modifications, please contact Aetna Member Services at the number on the member ID card. You may also contact the Illinois Department of Insurance by phone or online to file a complaint regarding any disaster-related dispute or issue:</p> <ul style="list-style-type: none"> <li>• Call their hotline at <b>1-866-445-5364</b>.</li> <li>• File a complaint online at: <b><a href="http://mc.insurance.illinois.gov/messagecenter.nsf">mc.insurance.illinois.gov/messagecenter.nsf</a></b></li> </ul>

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Aetna complies with applicable Federal civil rights laws and does not unlawfully discriminate, exclude or treat people differently based on their race, color, national origin, sex, age, or disability.

We provide free aids/services to people with disabilities and to people who need language assistance.

If you need a qualified interpreter, written information in other formats, translation or other services, call the number on your ID card.

If you believe we have failed to provide these services or otherwise discriminated based on a protected class noted above, you can also file a grievance with the Civil Rights Coordinator by contacting:

Civil Rights Coordinator,

P.O. Box 14462, Lexington, KY 40512 (CA HMO customers: PO Box 24030 Fresno, CA 93779),

**1-800-648-7817, TTY: 711,**

Fax: **859-425-3379** (CA HMO customers: **860-262-7705**), **CRCoordinator@aetna.com**

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights Complaint Portal, available at **<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**, or at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, or at **1-800-368-1019, 800-537-7697 (TDD)**.



English	To access language services at no cost to you, call the number on your ID card.
Spanish	Para acceder a los servicios lingüísticos sin costo alguno, llame al número que figura en su tarjeta de identificación.
Polish	Aby uzyskać dostęp do bezpłatnych usług językowych, należy zadzwonić pod numer podany na karcie identyfikacyjnej.
Chinese Traditional	如欲使用免費語言服務，請撥打您健康保險卡上所列的電話號碼
Korean	무료 다국어 서비스를 이용하려면 보험 ID 카드에 수록된 번호로 전화해 주십시오.
Tagalog	Upang ma-access ang mga serbisyo sa wika nang walang bayad, tawagan ang numero sa iyong ID card.
Arabic	للحصول على الخدمات اللغوية دون أي تكلفة، الرجاء الاتصال على الرقم الموجود على بطاقة اشتراكك.
Russian	Для того чтобы бесплатно получить помощь переводчика, позвоните по телефону, приведенному на вашей идентификационной карте.
Gujarati	તમારે કોઈ પણ જાતના ખર્ચ વિના ભાષા સેવાઓ મેળવવા માટે, તમારા આઈડી કાર્ડ પર રહેલ નંબર પર કોલ કરવો.
Urdu	لسانی خدمات تک مُفت رسائی کے لیے، اپنے بیمہ کے ID کارڈ پر درج نمبر پر کال کریں۔
Vietnamese	Để sử dụng các dịch vụ ngôn ngữ miễn phí, vui lòng gọi số điện thoại ghi trên thẻ ID của quý vị.
Italian	Per accedere ai servizi linguistici senza alcun costo per lei, chiami il numero sulla tessera identificativa.
Hindi	बिना किसी कीमत के भाषा सेवाओं का उपयोग करने के लिए, अपने आईडी कार्ड पर दिए नंबर पर कॉल करें।
French	Pour accéder gratuitement aux services linguistiques, veuillez composer le numéro indiqué sur votre carte d'assurance santé.
Greek	Για πρόσβαση στις υπηρεσίες γλώσσας χωρίς χρέωση, καλέστε τον αριθμό στην κάρτα ασφάλισής σας.
German	Um auf den für Sie kostenlosen Sprachservice auf Deutsch zuzugreifen, rufen Sie die Nummer auf Ihrer ID-Karte an.