



Better together

Caregiver support kit

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Aetna Better Health[®] of Florida

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Sometimes taking care of a loved one can be overwhelming. You need to keep track of so many things – from the pills your loved one takes to his/her insurance.

We hope this toolkit will help you keep organized. You can use it to write down your loved one’s important information. And you’ll learn how to take care of yourself too.

»» We’ve set it up in five sections:

1. Patient information page 1

This section is for your loved one’s personal information.

It includes:

- Contact information
- List of medications
- Health care providers
- Care managers
- Insurance information

2. Helping your loved one stay safe and well page 4

See this section for tips on how to help keep your loved one healthy and safe from falls.

3. Advance directives and making decisions. page 13

This section helps your loved one plan ahead for future decisions about his/her health care.

4. Taking care of yourself. page 21

This section tells you how to care for yourself and get the services you need.

5. Important resources page 27

Use this section to write down important contact information.

We’ve also included helpful community and professional resources.

 Patient information

Member’s personal information

Name: _____

Date of birth: _____

Medicaid Plan Name: _____

Member ID number: _____

Supplemental insurance: _____

Care manager name: _____

Care manager number: _____

Home health contact: _____



Helping your loved one stay safe and well

Encouraging healthy eating	page 5
What to do about incontinence (loss of bladder control).	page 7
Recognizing incontinence due to Alzheimer's.	page 7
Signs of bladder/kidney infections	page 8
Helping prevent falls.	page 8
Managing diabetes	page 10
Managing chronic obstructive pulmonary disease (COPD) ..	page 10
Helping a loved one with heart disease or heart failure	page 11

Encouraging healthy eating

Eating the right foods can make a big difference to the health of your loved one(s). It helps control diabetes and high blood pressure. It can also help stop bones from getting thinner and keep them strong. Eating well is good for the whole body.

Sometimes older people don't find it easy to eat healthy meals. Some of the reasons they give are:

"Food just doesn't taste the same anymore."

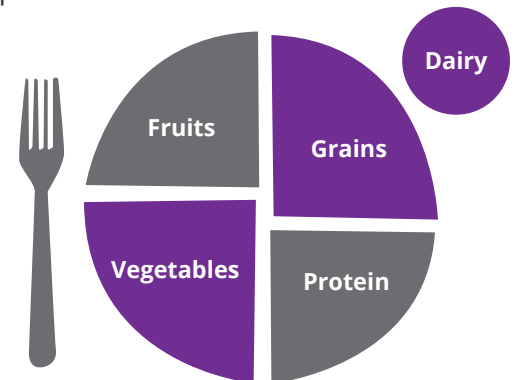
"I can't get out to go shopping."

"I'm just not that hungry."

Your loved one may have said something like that to you. Just the same, it's important to help your loved one eat a variety of good foods.

Try to make food look and smell tasty. Arrange foods of different colors and textures on the plate. Offer foods every day that include:

- Many different colors and types of vegetables and fruits
- Whole grains – try to make these **at least half** of the cereals, bread, rice, pasta, etc., that your loved one eats
- Only small amounts of solid fats and foods with added sugars – limit saturated fat (mostly animal fats) and trans fats (often found in store-bought baked goods and some margarines)
- Seafood – twice a week if possible



What to do when your loved one has trouble swallowing

There are many reasons why someone may have trouble swallowing. It can happen at any age. There may be nerve damage because of injury or illness. Or your loved one may have other problems. You can help by cutting your loved one's food into tiny pieces. You can also purée it like baby food. Don't worry; puréed food doesn't have to be boring and tasteless. Nutritionists are experts in problems like these. There are some good recipes online. Just ask your loved one's healthcare provider or care manager to help you with this.

Using less salt

Often, using less salt can help lower or avoid high blood pressure. This is important because high blood pressure can lead to heart disease or a stroke.

On packages and cans, salt is usually listed as "sodium"

Help your loved one stay away from canned and packaged foods. You can see that the salt level is often high in these types of packaged foods. Fast foods usually contain a lot of salt as well.

You can reduce salt by limiting:

- Salted snacks
- Fish that's frozen, pre-breaded, pre-fried or smoked
- Fish canned in oil like tuna, sardines or shellfish
- Ham, bacon, corned beef, luncheon meats, sausages and hot dogs
- Canned foods and juices containing salt
- Frozen dinners (these can have more than 700 mg of sodium per serving)
- Cheeses and buttermilk
- Seasoned salts, meat tenderizers and MSG
- Ketchup, mayonnaise, sauces and salad dressings

Make it a habit to read the labels of all over-the-counter drugs. They also can be high in salt and cause you to retain water.

What to do about incontinence (loss of bladder control)

Bladder incontinence means leaking urine (peeing without meaning to). Often the person can't make it to the bathroom on time. Some common reasons are:

- Bladder infections
- Vaginal infections or irritation
- Constipation
- New medicines (some can cause short-term bladder problems)

When the problem lasts longer, it may be due to:

- Weak bladder muscles
- Overactive bladder muscles
- Damage to nerves that control the bladder caused by diseases like multiple sclerosis (MS) or Parkinson's disease
- Blockage from an enlarged prostate (in men)

The first step in treating this problem is to see a doctor. Take your loved one for a physical exam. Make sure the doctor has his or her medical history.

Recognizing incontinence due to Alzheimer's

People in the later stages of Alzheimer's disease can have problems with bladder control. This can be because they don't know they need to go to the bathroom. They may forget to go to the bathroom, or they can't find the toilet.

Here are some tips to help your loved one be more in control:

- Limit drinks like caffeinated coffee, tea and some sodas. These can cause urination. (However, **don't limit water**. This can lead to dehydration.)
- Keep the path to the bathroom clear.
- The bathroom should be clutter-free, with a light on at all times.
- Help your loved one take regular bathroom breaks.
- Supply underwear and pants that are easy to get on and off.
- Use absorbent underclothes for trips away from home.

Signs of bladder/kidney infections

Some symptoms of a bladder infection are:

- Needing to go to the bathroom a lot
- Painful, burning feeling in the bladder area
- Feeling bad all over – being tired, shaky, and looking washed out

Their urine may look **milky, cloudy, or reddish**.

Sometimes, the infection may reach the kidneys

If that happens, you'll notice other symptoms such as:

- Fever
- Pain in the back or side below the ribs
- Feeling sick or vomiting

Your loved one will need an antibiotic to treat these infections.

It's important that your loved one finishes all his/her medicine.

He/she needs to do this, even if they feel better.

Helping prevent falls

Many things can put people in danger of falling. Older people are often at risk. Illness, plus the medicines they're on, can affect their balance. They may be trying to do too much. They also may not be eating well. Here are some things you can do to help avoid falls:

- Keep pathways clear and well lit
- Make sure your loved one is wearing skid-free slippers and shoes
- Put things low so he/she doesn't have to climb to reach

What to do if your loved one falls

- Don't panic. Try to figure out if he/she is badly hurt.
- Don't help him/her get up if he/she hit their head or is in pain.
- Don't move him/her if they can't get up.
- Call 911 or your loved one's relatives.
- If your loved one lives alone, it is a good idea to have a personal emergency response system such as a Lifeline or other device on call. Then, if you aren't there, he/she can push a button and get help right away.



Managing diabetes

Diabetes is a disease that impairs your body's ability to produce or respond to insulin. This can be because:

- a) You don't make enough insulin (Type 1 diabetes)
- b) Your body doesn't use the insulin you make correctly (Type 2 diabetes)

If your loved one has diabetes, it can be controlled with diet, pills and shots. If he or she is taking medicine, it's very important they take it every day. If your loved one is having trouble doing that, it's important that he or she talks to the doctor right away.

It's important that your loved one follows their plan of treatment for diabetes. If not, this condition can lead to serious problems. Diabetes is a major cause of heart disease and stroke. It can also affect many other parts of the body. It can damage eyes, kidneys, legs and feet. In severe cases, it can lead to blindness, or losing a leg or foot. Keeping blood sugar down does not completely prevent complications. However, it may delay them and help them be less severe.

Your loved one can still live well with diabetes

Diabetes can't be cured, but many people manage this illness well. You can ask your loved one's care manager to tell you more about it. They are there for you and will work with you, your loved one and the doctor to help manage this disease.

Managing chronic obstructive pulmonary disease (COPD)

Having COPD means it's often hard for your loved one to breathe. COPD can cause shortness of breath during normal activity. It may be hard just to get dressed in the morning. He/she may have a cough, wheezing and tightness in the chest. This serious disease is usually caused by smoking. If your loved one smokes, talk to them about quitting. You can also talk to their doctor or care manager about ways to help.

COPD is often a combination of lung conditions. The doctor or care manager can explain more about the type of COPD your loved one has. The doctor may give your loved one an inhaler to help him/her breathe better. It is important to know exactly how and how often he/she should use it. If you want to learn more about living with COPD, call your loved one's care manager at **1-844-645-7371** (TTY: 711) 24 hours a day, 7 days a week. The care manager can work with you, your loved one and the doctor to help manage this disease.

Helping a loved one with heart disease or heart failure Coronary artery disease (CAD)

As you may know, many heart problems develop over time. Arteries to the heart can narrow and get blocked by fatty deposits. This leads to coronary artery disease (CAD). If your loved one has CAD, he/she can get a chest pain called angina. This chest pain or pressure can happen when your loved one is exercising or doing physical activity.

If your loved one has CAD, your doctor will check his/her cholesterol. Cholesterol is the name for the fatty deposits that build up in your blood. High cholesterol can lead to heart attacks. The doctor may give your loved one medicine to lower his/her cholesterol if it is too high.

What you can do to help prevent a heart attack

A heart attack injures the heart muscle, and causes the muscle to become weaker. The heart cannot pump blood normally. People with CAD often get short of breath and retain fluid (water) build-up in their lungs or in their legs and feet.

If your loved one is taking medicines for CAD or for heart failure, make sure they understand how to take it. If he/she has trouble taking all of it, talk to the doctor right away. Also, make sure he/she knows what foods to eat and what ones to stay away from. You can get a list from the doctor, the care manager or a dietician.



A big cause of heart problems is **cigarette smoking**. If your loved one smokes, ask the doctor or care manager for advice on how to help them quit. You can do many things to help your loved one stay out of the hospital. If you want to learn more about managing heart disease, contact your loved one's care manager at **1-844-645-7371** (TTY: 711). Your care manager will work with you, your loved one and his or her health care provider to give you the help you need.

What to do when your loved one has cancer

Cancer is a general name that covers more than 100 diseases. There are many different kinds of cancer. However, all cancers start because abnormal cells grow out of control. Left untreated, cancers can cause serious illness. Sometimes people die. If your loved one has cancer, you may need extra support and we're here for you. Just call your loved one's care manager, nurse or our Member Services Department. We can help coordinate the support services you need. We can also tell you how to find other resources.

Advance directives and making decisions

Advance healthcare directives

Living wills or "Advance Healthcare" are legal forms that tell your family and your providers how you want to be cared for if you can't speak for yourself. There are many ways to get an advance healthcare directive. We have two different examples below.

1. Advance healthcare directive

Instructions: This form lets you give specific instructions about any aspect of your health care. There are choices provided. You can express your wishes about getting or stopping treatment to keep you alive. You can say when, how much, or how long you want pain relief. You have space to add your choices and write down any other wishes you have. You can also say whether you'd like to donate your body organs and tissues after your death. Lastly, you can name the physician (doctor) that you want to have primary responsibility for your health care.

Sign and date the form after you complete it. You must also have the form signed by two qualified witnesses or acknowledged before a notary public. Then give a copy of the signed, completed form to your physician and to any other health care providers you may have. Also, give a copy to any health care institution where you are receiving care, and to any health-care agents you have named.

I, _____,
being of sound mind and at least 18 years of age, declare that:

(1) End-of-life decisions: I direct that my health care providers and others involved in my care provide, withhold, or withdraw treatment in accordance with the choice I have marked below:
(Initial only one box)

- (a) Choice NOT to Prolong Life.** I do not want my life to be prolonged if (1) I have an incurable and irreversible condition that will result in my death within a relatively short time, (2) I become unconscious and, to a reasonable degree of medical certainty, I will not regain consciousness, or (3) the likely risks and burdens of treatment would outweigh the expected benefits, OR
- (b) Choice to Prolong Life.** I want my life to be prolonged as long as possible within the limits of generally accepted health care standards.

(2) Relief from pain: Except as I state in the following space, I direct that treatment for relief of pain or discomfort should be provided at all times even if it hastens my death: _____

(3) Other wishes: (If you do not agree with any of the optional choices above and wish to write your own, or if you wish to add to the instructions you have given above, you may do so here.) I direct that: _____

(4) Healthcare representative: (optional)

I designate the following healthcare representative:

(Name of healthcare representative)

(Address, City, State, ZIP Code)

(Phone)

Optional: If the healthcare representative I have designated above is not willing, able, or reasonably available to act as my healthcare representative, I designate the following healthcare representative:

(Name of healthcare representative)

(Address, City, State, ZIP Code)

(Phone)

(5) Donation of organs at death: (optional)

Upon my death: (mark applicable box)

- (a) I give any needed organs, tissues, or parts, OR
- (b) I give the following organs, tissues, or parts only.

- (c) My gift is for the following purposes:
(strike any of the following you do not want)
- | | |
|----------------|---------------|
| (1) Transplant | (3) Research |
| (2) Therapy | (4) Education |

At the time when I'm unable to give directions regarding the use of such life-sustaining procedures, it is my intention that this declaration shall be honored by my family and physician(s) as the final expression of my legal right to refuse medical or surgical treatment, and I accept the consequences from such refusal.

I understand the full import of this declaration and I am emotionally and mentally competent to make this declaration.

I execute this declaration, as my free and voluntary act, on this ____ day of _____, 20__, in the city of _____, county of _____, state of _____.

(Signature)

(Instructions: This advance health care directive will not be valid for making health care decisions unless it is either: (1) signed by two (2) qualified adult witnesses who are personally known to you and who are present when you sign or acknowledge your signature; or (2) acknowledged before a notary public.)

I declare under penalty of perjury under the laws of the state of _____ (for the state) (1) that the individual who signed or acknowledged this advance health care directive is personally known to me, or that the individual's identity was proven to me by convincing evidence, (2) that the individual signed or acknowledged this advance directive in my presence, (3) that the individual appears to be of sound mind and under no duress, fraud, or undue influence, (4) that I am not a person appointed as agent by this advance directive, and (5) that I am not the individual's health care provider, nor an employee of the individual's health care provider, nor the operator or employee of a community health care facility, nor the operator or employee of a residential care facility for the elderly.

I further declare under the laws of penalty of perjury of the state of _____, that I am not related to the patient by blood, marriage, or adoption, and, to the best of my knowledge, I am not entitled to any portion of the patient's estate upon the patient's death, under any will existing when this advance directive is executed, or by operation of law.

Signed at _____ on this ____ day of _____, 20__.

(Name and address of first witness)

(Name and address of second witness)

State of _____ county of _____

On this the _____ day of _____, 20__, before me, the undersigned, a notary public in and for said county and state, personally appeared _____, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to this instrument, and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the Instrument, the person(s), or entity acted and executed the instrument upon behalf of the person(s).

Witness and official seal.

Signature of Notary

2. Five wishes

Five Wishes is a way to make your own living will. The program talks about your personal, emotional and spiritual needs. It also describes your medical wishes. You choose the person you want to make health care decisions for you if you're not able to make them yourself.

The Five Wishes are:

- Wish 1: The person I want to make health care decisions for me when I cannot
- Wish 2: The kind of medical treatment I want or don't want
- Wish 3: How comfortable I want to be
- Wish 4: How I want people to treat me
- Wish 5: What I want my loved ones to know

You can get a copy of the Five Wishes booklet at:
agingwithdignity.org

If you wish, you can fill out your Five Wishes document online.

3. Elder law

Elder law focuses on the legal needs of older adults. These are things like retirement planning, life insurance and medical costs. It also covers estate planning, wills and protection from abuse. An elder law attorney can help you have the legal protections you need when you are not able to make decisions on your own.

4. Palliative care vs. hospice care

Hospice care and palliative care are very similar but not exactly the same. Most people have heard that hospice is care for people nearing the end of their lives. Palliative care is for people whose illness is serious, but they may get better. Meanwhile, they need help managing pain or other symptoms. Both hospice and palliative care help with day-to-day medical needs. That includes home health equipment. Both models offer emotional and spiritual support for loved ones. A care manager can help refer you for either palliative care or hospice care.

Here are the big differences between hospice and palliative care:

Hospice	Palliative care
Medicare pays for medicines and nursing care. Often family and hospice volunteers also help with care.	Medicaid pays for a few services. The patient or family may need to pay for others. Volunteers or community organizations can help.
Patient usually expected to have less than 6 months to live	No end-of-life expectation
Patient must be referred and accepted into hospice	Many hospitals have palliative care teams who meet with the patient and help figure out what the patient's needs are. He/she does not need to be "accepted" into palliative care.
Treat symptoms (pain, for example)	Treat symptoms
No longer treating to cure the problem (for example, active cancer treatment is no longer covered)	May be actively treating the illness
Can be done in the home, a nursing home, assisted living or hospice center	Can be done at home, a nursing home or assisted-living facility



Taking care of yourself

Tips for coping with stress	page 21
Caring for someone with Alzheimer's	page 22
Resources/services for caregivers	page 24
Testimonials	page 25

Ten tips for family caregivers

1. Seek support from other caregivers. You're not alone.
2. Take care of your own health – so you're strong enough to take care of your loved one.
3. Accept offers of help – and be specific about what people can do to help you.
4. Learn how to work well with doctors so you understand each other clearly.
5. Caregiving is hard work, so take breaks often.
6. Watch out for signs of depression. Don't delay getting professional help when you need it.
7. Be open to new technologies that can help you care for your loved one.
8. Organize medical information so it's up to date and easy to find.
9. Make sure legal documents are in order.
10. Give yourself credit for doing the best you can in one of the toughest jobs there is.

Living with caregiver stress

Some of the early warning signs of caregiver stress are:

- Feeling overwhelmed, lonely, guilty, sad or worried all the time
- Feeling very tired
- Becoming easily annoyed or angered
- Losing interest in activities you liked before
- Gaining or losing a lot of weight
- Sleeping a lot more or a lot less
- Getting headaches, neck or low back pain
- Using alcohol or drugs to feel better

You can do some things to lower your stress. Here are a few tips that can help:

- Know what you can and can't change.
- Make a list of what's important and start a daily routine.
- Set goals you can keep by breaking large tasks into smaller ones. Do them one by one when you have time.
- Don't hesitate to ask for help and accept it. Make a list of things that others could help with.
- If you need financial help taking care of a relative, don't be afraid to ask family members to pay their fair share.
- Stay in touch with family and friends, but say "no" to requests that you no longer can easily handle, such as hosting holiday meals.
- Social support is a powerful stress buster, and in addition to family and friends, there may be a support group for caregivers in your situation.
- Make sure you get enough sleep and eat right. Find time to exercise. Ask a friend or neighbor to watch your loved one while you take a walk.
- If your loved one isn't bedridden and doesn't have dementia, there are personal emergency response systems he/she can use to get help. Often it's a button on a necklace, bracelet or belt that the patient wears. He/she can alert medical personnel and you when there's a serious problem.

The Alzheimer's care journey

Caring for someone with Alzheimer's disease or dementia isn't easy. You watch your loved one slowly decline in mental and physical health. This can be a long, stressful, and deeply emotional journey. But you're not alone. In the United States, there are about 15 million people caring for someone with dementia. There are also millions of others around the world. And it's true that right now there's no cure for Alzheimer's disease. We just have medicines to treat the symptoms. But it's your caregiving that makes the biggest difference to your loved one's quality of life. That is a remarkable gift.

However, caregiving can take up all your time and energy. As your loved one becomes less and less able to take care of himself or herself, it can become overwhelming. You may neglect your own health and well-being. This puts your own health at risk. About 30 to 40 percent of dementia caregivers get depressed, stressed, or just burn out. And nearly all caregivers will sometimes feel sad, anxious, lonely and very tired. Getting help and support along the way is not a luxury for caregivers, it is a necessity.

Source: Helpguide.org

Caring for someone with Alzheimer's	
Challenges	Rewards
Overwhelming emotions as your loved one is able to do less and less	You get closer to your loved one and others as you care for him/her
Extreme weariness as you must do more and more to help your loved one	Problem-solving and relationship skills grow as you learn more
Isolation and loneliness as you are tied to your loved one and go out much less	You form new relationships through education and support
Money and work problems as costs go up and it's hard to find the resources you need	Unexpected rewards develop through compassion and acceptance

This chart is based on one provided by HelpGuide.org.

Common resources/services for caregivers

Important note: Your loved one's health plan may cover some of the services below. These services can be very helpful to you. Check with your care manager to see if they qualify.

Adult day services

Adult day services are community-based programs that meet the health and social needs of elderly and disabled adults.

Adult day services let your loved one meet and chat with other older adults. Some adult day cares even provide personal care services such as bathing and on-site health care. Adult day care is especially helpful if you're working. You can relax knowing your loved one is in good hands while you're at work. Most importantly, you get a break.

Home-delivered meals

Programs such as Meals on Wheels provide hot meals delivered directly to your door. And they don't cost too much.

When grocery shopping and cooking meals get harder for your loved one, programs like Meals on Wheels can really help. You'll ensure your loved one has at least one good, healthy meal each day.

Home health care

Home health care is a personal health service that helps older adults remain living in their homes. A registered nurse oversees care given by home health aides or personal care attendants.

You can ask for home health care when you need extra help taking care of your loved one's needs. That could include:

- Bathing, dressing, using the bathroom and other personal care
- Medication monitoring, wound care and health education
- Therapeutic care, including physical, speech and occupational therapy

Personal Emergency Response System

Personal Emergency Response System (PERS) is an electronic device connected to the phone that your loved one can activate if he or she is alone and there is an emergency.

Support groups

Caregiver support groups provide opportunities for caregivers to share their experiences and support one another. Groups meet regularly. They are led by someone trained to help them help each other. Groups can be organized differently. For example, one group could be to help families who are taking care of a loved one. Others could be about the condition itself (e.g. Alzheimer's disease).

Support groups can help you feel that you're not alone. Knowing there are others in the same situation can give you renewed hope. Also, sharing experiences can help you find answers to some of the problems that you face.

"My wife has been a patient of Aetna Better Health of Florida since she had a stroke. Without our aide, my wife would not be alive today as she would certainly be in a nursing home facility and would not be taken care of the way she is in our home. I am an 84-year-old man who has been married to my wife for 59 years this year and always promised to take care of my wife the best I could. If it weren't for my case manager and this program, I would not have been able to keep my promise and be able to see my beautiful wife every day."

— LTSS member



Important resources

Medicare	page 27
National resources	page 28
Your other important resources	page 31

What are the different parts of Medicare?

Medicare Part A (hospital insurance) helps cover:

- Inpatient care in hospitals
- Skilled nursing-facility care
- Hospice care
- Home health care

Medicare Part B (medical insurance) helps cover:

- Services from doctors and other health care providers
- Outpatient care
- Home health care
- Durable medical equipment
- Some preventive services

Medicare Part C (Medicare Advantage):

- Includes all benefits and services covered under Part A and Part B
- Usually includes Medicare prescription drug coverage (Part D) as part of the plan
- Run by Medicare-approved private insurance companies
- May include extra benefits and services for an extra cost

Medicare Part D (Medicare prescription drug coverage):

- Helps cover the cost of prescription drugs
- Run by Medicare-approved private insurance companies
- May help lower your prescription drug costs

National resources

American Association of Retired Persons (AARP) – Free information for caregivers; includes care guides in multiple languages and resources. www.aarp.org/home-family/caregiving

The Americans with Disabilities Act (ADA) – The ADA prohibits discrimination against people with disabilities. That includes in employment, transportation, public accommodation, communications, and governmental activities. The ADA also establishes requirements for telecommunications relay services. www.dol.gov | 1-866-4-USA-DOL (1-866-487-2365)

ARCH Respite Network – This is a national network of programs and services that allow caregivers to take a break from caring for a loved one. archrespite.org

Alzheimer's support

- **Alzheimer's Association** – Information and support for people with Alzheimer's disease and their caregivers. www.alz.org | 1-800-272-3900
- **Alzheimers.gov** – Website managed by the U.S. Department of Health & Human Services. It is a free information resource about Alzheimer's disease and related dementias. www.alzheimers.gov
- **Alzheimer's Disease Research** www.brightfocus.org/alzheimers | 1-855-345-6237
- **Alzheimer's Disease Education and Referral (ADEAR) Center** www.nia.nih.gov/alzheimers or email adear@nia.nih.gov 1-800-438-4380 (toll-free)

Eldercare Locator – local services and resources for older adults and adults with disabilities. www.eldercare.gov | 1-800-677-1116

Family Caregiver Alliance – Family caregiver information, education and services. www.caregiver.org | 1-800-445-8106

Medicare – Information about how to find Medicare plans, facilities or providers. www.medicare.gov | 1-800-633-4227

National Alliance for Caregiving – A coalition of national organizations focused on family caregiving issues. www.caregiving.org

National Association for Continence www.nafc.org | 1-800-252-3337 (toll-free)

Simon Foundation for Continence www.simonfoundation.org | 1-800-237-4666 (toll-free)

National Institute on Aging Information Center www.nia.nih.gov; www.nia.nih.gov/espanol 1-800-222-2225 (toll-free); TTY: 1-800-222-4225 (toll-free)

The National Clearinghouse for Long-term Care Information – Information and tools to plan for future long-term care needs. www.longtermcare.gov

National Family Caregivers Association – Information and education for family caregivers – includes the Caregiver Community Action Network, a volunteer support network in over 40 states. www.nfca cares.org

National Institute of Diabetes and Digestive and Kidney Diseases kidney.niddk.nih.gov | 1-800-860-8747 (toll-free); TTY: 1-866-569-1162 (toll-free)

National Library of Medicine | www.medlineplus.gov

Social Security Administration – Retirement and disability benefits information. www.socialsecurity.gov | 1-800-772-1213

Veterans Administration – Support and resources for families caring for veterans. www.caregiver.va.gov | 1-855-260-3274

List your other important resources here

Name	Phone number / Email
_____	_____
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Nondiscrimination notice

Aetna complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Aetna does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Aetna:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need a qualified interpreter, written information in other formats, translation or other services, call the number on your ID card or **1-800-385-4104**.

If you believe that Aetna has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with our Civil Rights Coordinator at:

Address: Attn: Civil Rights Coordinator
4500 East Cotton Center Boulevard
Phoenix, AZ 85040
Telephone: **1-888-234-7358 (TTY: 711)**
Email: MedicaidCRCoordinator@aetna.com

You can file a grievance in person or by mail or email. If you need help filing a grievance, our Civil Rights Coordinator is available to help you.

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

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company, and its affiliates.

Multi-language interpreter services

Aetna complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Aetna cumple con las leyes federales de derechos civiles vigentes y no discrimina por cuestiones de raza, color, nacionalidad, edad, discapacidad o sexo.

English: Attention: If you speak 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)**.

French Creole: Atansyon: Si w pale Kreyòl Ayisyen, gen sèvis èd nan lang ou pale a ki disponib gratis pou ou. Rele nan nimewo ki sou do kat Idantifikasyon (ID) w la oswa rele nan **1-800-385-4104 (TTY: 711)**.

Vietnamese: Chú ý: nếu bạn nói tiếng việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Hãy gọi số có ở mặt sau thẻ id của bạn hoặc **1-800-385-4104 (TTY: 711)**.

Portuguese: Atenção: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para o número que se encontra na parte de trás do seu cartão de identificação ou **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)**。

French: Attention: si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le numéro indiqué au verso de votre carte d'identité ou le **1-800-385-4104 (ATS: 711)**.

Tagalog: Paunawa: Kung nagsasalita ka ng wikang Tagalog, mayroon kang magagamit na mga libreng serbisyo para sa tulong sa wika. Tumawag sa numero na nasa likod ng iyong ID card o sa **1-800-385-4104 (TTY: 711)**.

Russian: Внимание: если вы говорите на русском языке, вам могут предоставить бесплатные услуги перевода. Позвоните по номеру, указанному на обратной стороне вашей идентификационной карточки, или по номеру **1-800-385-4104 (TTY: 711)**.

Arabic: ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة (رقم هاتف الصم والبكم: 711). اللغوية تتوافر لك بالمجان. اتصل برقم

Italian: Atención: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para o número que se encontra na parte de trás do seu cartão de identificação ou **1-800-385-4104 (TTY: 711)**.

German: Achtung: Wenn Sie deutschen sprechen, können Sie unseren kostenlosen Sprachservice nutzen. Rufen Sie die Nummer auf der Rückseite Ihrer ID-Karte oder **1-800-385-4104 (TTY: 711)** an.

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 ID 카드 뒷면에 있는 번호로나 **1-800-385-4104 (TTY: 711)** 번으로 연락해 주십시오.

Polish: Atención: Uwaga: Jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer podany na odwrocie Twojego identyfikatora lub pod number **1-800-385-4104 (TTY: 711)**.

Gujarati: ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય તા સેવાઓ તમારા માટે ઉપલબ્ધ છે. તમારા આઈડી કા ર્ડ ની પાછળ આપેલા નંબર પર અથવા **1-800-385-4104** પર કોલ કરો (TTY: 711).

Thai: ข้อควรระวัง: ถ้าคุณพูดภาษาไทย คุณสามารถใช้บริการช่วยเหลือทาง ภาษาได้ฟรี โทรติดต่อหมายเลขที่อยู่ด้านหลังบัตร ID ของคุณ หรือหมายเลข **1-800-385-4104 (TTY: 711)**.

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