Taking action to reform health care

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A Medicare Advantage organization with a Medicare contract.
The Affordable Care Act (ACA) was enacted in March 2010 to help address the frustration many Americans have with the current health care system, with the ultimate goal of improved access, quality and affordability. The Supreme Court’s ruling in June to uphold the constitutionality of the ACA provides a framework for reform, but the most sustainable solutions will continue to take place at the local level.

At Independent Health, we believe efforts to increase access to coverage, improve quality of care and reduce the medical costs trend should focus on five key actions:

1. **Prevention and wellness.** Address the illness burden we bring upon ourselves as a result of unhealthy behaviors. Provide individuals with the programs, services and resources to make better, more informed health choices. Engage employers to make access to health services more convenient for their employees. Creating a culture of health will further improve the health and vitality of the community, lower rates of preventable illness and lower the overall cost trend.

2. **Payment reform.** Reward physicians and health care providers for quality outcomes and encourage a patient-centered model of care to improve quality and efficiency. Serious gaps in quality need to be closed by working collaboratively to develop systems to promote accessible, continuous and coordinated patient-centric care. Participating practices in our Patient-Centered Medical Home program reduced their health care costs by almost $3 million (2009–10) while improving quality measures for acute and chronic conditions.

3. **Revitalize and grow primary care.** Primary care physicians can significantly change the way care is delivered by improving the coordination of care with specialists and other health care providers. This will lead to improved quality and lower costs. As an industry, we must recognize this and invest in the redesign of primary care.

4. **Greater alignment of the health system.** Eliminate care that is redundant or adds no value. Implement proven clinical strategies and reduce variations in care. Prevent and manage chronic disease more effectively, which helps keep people out of the hospital in the first place.

5. **Enhance health information.** Accelerate the adoption and use of health information technology and electronic medical records through organizations such as HEALTHeLINK, an unprecedented collaboration among area hospitals, health plans and health care providers to safely share valuable and timely clinical information.

To learn how Independent Health is working with its many partners to establish Western New York as a model health care community for other regions to follow, we encourage you to read our 2012 Community Report, which can be accessed at [www.independenthealth.com\2012report](http://www.independenthealth.com\2012report).
Help is always just a phone call away

When health concerns arise and your doctor is not available, it can be difficult to know where to turn. At Independent Health, we are here for you 24 hours a day, seven days a week.

If you would like to speak with a registered nurse at any time, simply call Independent Health’s 24-Hour Medical Help Line. The nurse is available to:

- Address urgent medical needs
- Answer questions relating to conditions such as heart disease, asthma or diabetes
- Offer advice for situations like a child’s fever or non-emergency injury
- Talk about drug interactions and side effects
- Discuss general health and wellness issues

Treatment Decision Support
In addition, when you’re faced with the decision of where to seek care for yourself or a loved one and your doctor is not available, you can access Treatment Decision Support through our 24-Hour Medical Help Line. A nurse will help you learn more about the treatment and procedure options related to a certain diagnosis and provide helpful information for you to discuss with your doctor.

As always, we encourage you to keep in close contact with your health care providers so that they are informed of your health care needs. That is why the nurse may suggest you contact your doctor so that you can be seen the following day.

Call 1 (800) 501-3439, anywhere and anytime, to get the knowledge and support you need when you need it most. TTY users call: 1 (800) 432-1110.

Enhancing patient care and safety through HEALTHeLINK

Independent Health has teamed up with local doctors, hospitals and insurance organizations to establish HEALTHeLINK, an online clinical information exchange used by health care providers as well as payers to securely view and share patients’ medical records and other medical information.

Imagine you are lying unconscious in the emergency room and the attending doctor has no knowledge of your health history. By accessing your emergency medical record (EMR) through HEALTHeLINK, the doctor will be able to avoid potentially harmful drug interactions or other complications based on your medical history—potentially saving your life.

If you want health care providers to have access to your EMR, you must first sign a consent form. At your next doctor’s appointment, ask for a HEALTHeLINK consent form or download one at www.getlinkedwny.com. To learn more about the patient consent process, please visit www.wnyhealthelink.com.

www.independenthealth.com
Plan Information

How you can learn more about your plan coverage

At Independent Health, we want to help make it easier for you to understand how your coverage works. Every month we hold informational orientation sessions at our Customer Service Center, located at 250 Essjay Drive in Williamsville.

Our friendly and knowledgeable RedShirts will be on hand and will gladly answer any questions you may have about your plan. All orientations are from 9:30 to 10:30 a.m. You’re invited to attend an orientation on Wednesday, November 7, or Thursday, December 6.

To make a reservation, please call Member Services at (716) 250-4401 or 1 (800) 665-1502 (TTY: 1 (800) 432-1110), Monday through Sunday, from 8 a.m. to 8 p.m. (October 1 through February 14), and Monday through Friday, from 8 a.m. to 8 p.m. (February 15 through September 30).

Enhancing the quality of care and life for aging members

Independent Health’s Family Choice HMO-SNP plan* provides specially designed benefits to address the needs of nursing facility residents in Erie, Niagara, Orleans and Wyoming counties. Unlike other Medicare plans, members are able to enroll in Family Choice year-round.

The plan is designed around a unique care model. The model aims to provide as many medical services as possible in the member’s nursing facility with the help of a diverse care team. This team connects the primary care physician (PCP) and facility staff with our nurse practitioners (N.P.’s), physician assistants (P.A.’s) and social workers.

Family Choice’s care model
Each member receives an individualized care plan, documenting their recommended treatment based on their unique medical needs. An N.P. or P.A. is always on call 24 hours a day, seven days a week, to respond promptly to any changes in a member’s condition. In addition, a Family Choice N.P. or P.A. will provide the following:

- Frequent, on-site medical assessments, allowing the team to proactively determine the ongoing needs of the member, thus reducing unnecessary trips to the hospital or ER
- Regular review of the plan of care with the PCP and facility staff to ensure effective care
- Ongoing communication with the member’s family, the facility staff and the PCP to keep everyone informed of the member’s condition and needs

Family Choice members also receive round-trip transportation for non-emergent, medically related services (up to 24 trips a year), Part D prescription drug coverage and assistance from a Family Choice social worker.

To learn more about Family Choice, call us at (716) 635-4900 or 1 (800) 958-4405 (TTY: 1 (888) 357-9167), Monday through Sunday, from 8 a.m. to 8 p.m. For more information and to view a full list of participating facilities, visit www.independenthealth.com/familychoice.

*This plan is available to all Medicare-eligible members who are entitled to Medicare Part A and enrolled in Part B, except those with ESRD, unless already enrolled with Independent Health. This plan requires the use of participating providers, except in the case of emergency care, urgent care or out-of-area renal dialysis. Members must continue to pay Part B premiums if not otherwise paid for under Medicaid or by another third party.
Make sure you’re getting the most out of your cholesterol medication

Thousands of Americans are prescribed a type of medication referred to as statins to prevent events such as heart attacks or strokes. Despite how many people are prescribed these medications, many may be taking them incorrectly.

Q: What are healthy cholesterol ranges?
A: There are several important cholesterol levels that need to be monitored: LDL (low-density lipoprotein), HDL (high-density lipoprotein), triglycerides and total cholesterol. We know that if your LDL, or “bad,” cholesterol is lower than 130 mg/dl, your risk of having a heart attack or stroke is greatly reduced. HDL, or “good,” cholesterol should be higher than 40 mg/dl for men and higher than 50 mg/dl for women. A healthy level of triglycerides in the blood is lower than 150 mg/dl, and total cholesterol should be lower than 200 mg/dl.

Q: Why is it necessary to take a statin?
A: Sometimes you can control your cholesterol levels by eating healthy foods such as fruits and vegetables; high-fiber foods like oatmeal; and lean meats, poultry and fish. Regular exercise can also help control cholesterol. But for many people these healthy habits are not enough. Statins work to reduce the production of cholesterol in your body and, when taken daily, can be the additional boost to get cholesterol into the healthy range that can prevent heart attacks and strokes.

Q: Having trouble remembering to take your medication?
A: There are many helpful ways to remember to take medication. One easy way is to use a pillbox. It may also help to store your medicine near something you use every day, like the coffee machine or your toothpaste. Another useful tool may be an alarm or a calendar to keep track of when you need to take a dose.

Q: Is your medication too expensive?
A: If this is the case, it’s best to talk with your doctor to see if a generic medication may be right for you. Generic medications are just as safe and effective as the brand name you may be taking but may be far less expensive.

Once you know the facts, cholesterol medication may seem easier to understand and manage every day. In order for this medicine to work properly, it is essential to take it every day, as prescribed by your doctor. These medications need to remain in your body at all times to be effective. Developing a goal and a plan with your doctor or pharmacist helps to lessen any roadblocks and can help you have a healthy cholesterol level.
The Primary Connection: Leading the way to better health care

Independent Health believes that one of the key actions needed to transform health care is to revitalize and grow primary care at the local level. Recently, Independent Health and a diverse group of community physicians launched the first phase of the new program The Primary Connection. The name was chosen to reflect the focal point of the endeavor—to empower the primary care physician.

Using the Patient-Centered Medical Home (PCMH) principles as the foundation, this innovative program will allow continued investment in the primary care community through achievement of the goals of the Triple Aim:

- increased quality
- high levels of satisfaction
- decreased cost

While the PCMH program focused on each individual physician’s practice, The Primary Connection model will focus on increased coordination and collaboration between primary care physicians and specialists.

Empowering the primary care physician

“The Primary Connection allows the primary care physician to be a vital part of improving our health care system,” said Thomas Foels, M.D., Executive Vice President and Chief Medical Officer, Independent Health. “We are empowering primary care physicians to expand their influence and provide more patient-centered care. The successes we have experienced in our PCMH program have well-positioned us for continued success as we begin to implement The Primary Connection program.”

The Primary Connection is Independent Health’s most ambitious effort yet to partner and collaborate with physicians. It requires tight affiliation between a patient’s primary care physician, practice team, other health care providers and Independent Health. The goal is to establish a better-performing model for the community and to provide primary care physicians with the information they need to guide their patients to the providers (specialist, hospital and so forth) willing to collaborate on the most effective and efficient way to care for the patient.

Spirit of true collaboration

“The Primary Connection represents a true opportunity for primary care physicians to lead the change in care delivered in this community, empowering them as the core in the health care delivery system,” said Pamela Menard, Senior Vice President, Healthcare Delivery Innovation, Independent Health. “The program will establish a new primary care legacy by providing medical students and nurses with training and mentoring opportunities within the primary care practice that will influence them to choose primary care as their specialty.”

The Primary Connection is a major priority for Independent Health. In the spirit of true collaboration and shared ownership, Independent Health will continue on its path to increase the access, affordability and quality of health care for all those in our community.
Providing dental benefits that will make you smile

Independent Health is pleased to announce that we will now be working with Delta Dental to provide preventive dental coverage to all of our Medicare Advantage plan members in 2013.

As of January 1, 2013, your oral exams, routine cleanings, bitewing and full-mouth X-rays will be fully covered with no additional cost to you when you visit a dentist in the Independent Health’s Delta Dental Medicare Advantage network. When you visit an in-network Delta Dental provider, the dentist will bill Delta Dental directly, making it easier and more convenient for you.*

Here’s how your preventive dental benefits will work:

<table>
<thead>
<tr>
<th>Services Covered in Full</th>
<th>In Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oral Examinations</td>
<td>2x per calendar year</td>
</tr>
<tr>
<td>Routine Cleanings</td>
<td>2x per calendar year</td>
</tr>
<tr>
<td>Bitewing X-rays</td>
<td>2x per calendar year</td>
</tr>
<tr>
<td>Full Mouth X-Rays</td>
<td>1x in a 36-month period</td>
</tr>
</tbody>
</table>

To locate a participating Independent Health Delta Dental Medicare Advantage dentist, please contact Delta Dental at 1 (800) 873-3103, Monday – Friday, 8 a.m. to 8 p.m.

*If you visit a dentist outside the Independent Health Delta Dental Medicare Advantage network, Delta Dental will pay you 50% of the rate paid to participating providers. You will be responsible for the other 50% plus you may be responsible for other applicable charges, if any.

Certain exclusions apply. Please see your Evidence of Coverage for more details. The benefit information provided is a brief summary, not a complete description of benefits. For more information contact the plan. Limitations, copayments, and restrictions may apply. Benefits, premium and/or copayments may change on January 1 of each year. For more information, call (716) 250-4401 or 1 (800) 665-1502 (TTY users call 1 (800) 432-1110); Monday through Sunday from 8 a.m. to 8 p.m. (October 1 to February 14), and Monday through Friday from 8 a.m. to 8 p.m. (February 15 to September 30).

Be prepared the next time you visit your dentist

Dental professionals recognize that good regular oral health is an important part of an older adult’s overall health. When you go to your exam, make the most of it by coming prepared with the following information and items:

- Your complete medical history with up-to-date information on your health (including any allergies, recent surgeries, illnesses or hospitalizations)
- Complete names, doses and frequencies of any medications you’re taking (prescription or over-the-counter)
- Your current physician’s name
- Your dentures or partials
- Information about emergency contacts

Talk with your dental professional if you are anxious about the exam, or if reduced mobility or dexterity have hampered your daily dental hygiene routine. For example, arthritis sufferers may benefit from certain dental products such as a battery-operated toothbrush with large handles.

For more helpful dental tips, visit the oral health and wellness section at www.deltadental.com.
New fitness benefit to be offered in 2013

As an Independent Health Medicare Advantage Plan member, we want to make sure that it’s easy for you to stay active and healthy. Therefore, beginning in 2013, you will be able to take advantage of the new Healthy Benefits Fitness Program at no additional cost to your monthly plan premium.

Through this program, you will receive a one-year membership at one of more than 100 fitness facilities located throughout Western New York. This includes access to all the amenities of the fitness facility you join as part of your membership—treadmills, free weights, fitness classes and more.

How to use this benefit

• Members who actively use the SilverSneakers® Fitness Program will automatically be sent a Healthy Benefits Card in January 2013.
• Members who have the current Healthy Benefits Card can use that same card to access their fitness facility membership; however, they will no longer be able to use the card for yoga, tai chi or Pilates classes or Weight Watchers as covered in 2012.
• All other members will need to call Member Services to request a Healthy Benefits Card any time after January 1, 2013.

Once you receive your Healthy Benefits Card from us, you simply present the card at a fitness facility from our list of Healthy Benefits locations and your membership begins. Please note: You will be required to pay a one-time, $20 activation fee to the fitness facility. Your card cannot be used to pay this fee.

To find a Healthy Benefits location in your area, please visit independenthealth.com/medicare.

If you have any questions about this program, call our Member Services Department at (716) 250-4401 or 1 (800) 665-1502 (TTY users call 1 (800) 432-1110):
• Between October 1 and February 14, call Monday through Sunday, 8 a.m. to 8 p.m.
• Between February 15 and September 30, call Monday through Friday, 8 a.m. to 8 p.m.

The benefit information provided is a brief summary, not a complete description of benefits. For more information contact the plan. Limitations, copayments, and restrictions may apply. Benefits, formulary, pharmacy network, premium and/or coinsurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium.

Did you know? Want to keep your brain in tip-top shape? Then a workout may be in order. New findings suggest that aerobic exercise can have a brain-boosting effect for older adults. Adults ages 58 to 77 who walked three times a week for 45 minutes—for a total of 135 minutes—gained some positive brain benefits. After six months, the walkers had improved brain functioning and an enhancement in independent living, compared with older adults who only stretched regularly.
The Independent Health Foundation has expanded the Healthy Options program to include new restaurants, a redesigned website and a new partnership with D’Avolio Olive Oils, Vinegars and More and Prima Oliva Olive Oils and Vinegars to help Western New Yorkers eat healthy whether dining out or at home.

“The Independent Health Foundation’s Healthy Options program has been successful, and we’ve seen a great impact in our community, but we know the work isn’t done,” said Carrie Meyer, Executive Director, Independent Health Foundation. “Together, as a community, we can become healthier. Expanding to new restaurants, redesigning our website to make it easier to use and more informative, and also encouraging people to cook healthy at home can help us all be healthier.”

In 2004, the Independent Health Foundation created the Healthy Options Buffalo program to help our community make more informed decisions when dining out and to help address the high rates of stroke and heart disease prevalent in Western New York. The program was integrated into the Taste of Buffalo three years later, making it the only food festival in the U.S. to require that all participating restaurants offer a healthy-option item. Healthy Options, which are considered lower in fat, saturated fat, cholesterol and sodium, are now offered in more than 100 Buffalo-area restaurants.

Cooking at home can also be healthy and fun to do. Under the new partnership with D’Avolio and Prima Oliva, Independent Health members will receive a 10% discount on all store products, with a portion of the sales invested back into the Foundation. Members can take advantage of the discount by showing their Independent Health member ID card at any D’Avolio or Prima Oliva location.

For more information on the Independent Health Foundation’s Healthy Options program, go to www.healthyoptionsbuffalo.com. All Foundation programming is made possible through the support of CTG, OptumHealth and Family Choice of New York.

Our dedication to our members

Independent Health is dedicated to finding solutions to improve the health of our members and the community. We learn which major medical conditions affect our members and create programs to help members better manage those conditions. We contact our physicians on a regular basis so that they may best help their patients.

While Independent Health rewards physicians for providing high levels of quality care to patients, we do not specifically reward, hire, promote or terminate physicians, providers or other individuals making medical decisions for denying coverage or service of care. Coverage decisions are based only on appropriateness of care and service and the provisions of the patient’s contract. Independent Health does not provide financial incentives for coverage decisions or financial incentives that encourage decisions resulting in underutilization.
When is it necessary to take an antibiotic?

Chances are you’ve taken an antibiotic, especially if you’ve ever been diagnosed with pharyngitis, chronic bronchitis or a middle ear infection. Antibiotics are most commonly prescribed for bacterial infections because they kill bacteria or slow their growth in order for our own immune system to do its job and make us well again.

If you have a viral infection, such as the common cold or flu, do not expect or insist that your doctor prescribe you an antibiotic. Taking an antibiotic when you have a virus will not make you feel better and can contribute to antibiotic resistance. Only your doctor can determine the type of infection you have and whether an antibiotic is necessary.

So what can you do to feel better if antibiotics won’t treat your illness because it’s caused by a virus?

For upper respiratory infections, such as sore throats, ear infections, sinus infections, colds and bronchitis, try the following:

- Get plenty of rest.
- Drink plenty of fluids.
- Use a clean humidifier or cool-mist vaporizer.
- Avoid smoking, secondhand smoke and other pollutants (airborne chemicals or irritants).
- Take acetaminophen, ibuprofen or naproxen to relieve pain or fever. Over-the-counter pain relievers, decongestants and saline nasal sprays may help relieve some symptoms, too.

As always, if you have questions about antibiotics or any other medications, please speak with your doctor or pharmacist.

It’s important to pack your car for bad weather

No one plans on getting stranded or stuck when traveling, but it’s best to be prepared, especially in bad weather. Sometimes snow, heavy rain, high winds, fog or other weather hazards can leave you stranded on the side of the road for hours.

Is your car weather friendly?
A dead battery or a burned-out headlight is a nuisance in nice weather. But these and other mechanical problems can be hazardous in thick fog, rain or other bad conditions.

Before driving in inclement weather, have your mechanic check your car’s:

- Battery
- Wipers and windshield-washer fluid
- Ignition
- Headlights, brake lights and hazard lights
- Heater and defroster
- Exhaust system
- Brakes
- Oil
- Antifreeze

Be prepared for a weather emergency
If you’re planning a car trip, listen to the weather or call the state highway patrol for road conditions. If you must drive in bad weather, pack weather-appropriate emergency supplies. These might include:

- A cell phone
- A flashlight and extra batteries
- Jumper cables
- Extra clothing, such as rain gear, a wool cap and mittens
- Blankets
- A spare tire in good condition
- A shovel, ice scraper and snow brush
- Flares to signal your location
- Extra windshield-wiper fluid
- Sand to provide traction under your wheels
- A first aid kit and any needed medications
- Snacks and water

If that snowstorm causes you to be stranded from home, you will be grateful you took the time to think ahead.
Steps to prevent osteoporosis can cut hip fracture risk

A hip fracture is much more than a broken bone. When it occurs in older adults, it can be deadly. That’s why, facing a growing population of mature adults, health care providers are taking a closer look at how to prevent hip fractures and one of their main contributing factors: the bone-robbing condition of osteoporosis.

The problem of hip fracture
A hip fracture is a break in the thighbone just below the hip joint. Most occur in postmenopausal white women, with one in seven at risk for eventually suffering a fracture. The main reason that older people are so vulnerable is because the bones can become progressively weak, due in large part to osteoporosis.

Healthy bones are constantly rebuilding themselves. A main component of bone—calcium—is continually absorbed by the body and then replaced. Osteoporosis results if more calcium is absorbed than is replaced. Over time, the bones become weak and are at increased risk for breakage. In fact, one in two women and one in five men older than age 65 will have bone fractures related to osteoporosis.

Most hip fractures among adults older than age 65 are caused by falls. And once the break occurs, these patients have a hard time returning to the same quality of life. According to the Centers for Disease Control and Prevention (CDC), one out of five hip fracture patients dies within a year of his or her injury.

Preventing hip fractures
Preventing hip fractures goes hand in hand with osteoporosis prevention. The CDC says that osteoporosis screening and treatment, combined with fall-prevention strategies and exercise, provides the most effective protection against a hip fracture.

To reduce falls, make changes around your home to eliminate fall hazards such as clutter on floors and stairs, loose rugs and electrical cords. Have your vision checked annually by an eye doctor and update eyeglasses to maximize vision. Consider purchasing a pair with single-vision distance lenses for activities such as walking outside.

In addition, to help prevent osteoporosis and subsequent hip fracture, it is important that you get enough calcium and vitamin D. Calcium keeps the bones strong, and vitamin D plays a role in how the body uses that calcium.

Talk with your health care provider. Find out if there are other things you can do based on your particular health care needs. Also ask your doctor to review the medicines you are taking to identify drugs with side effects that may cause dizziness or drowsiness.
Breast cancer, by the numbers

You may have heard this key breast cancer stat: About one in eight women will develop the disease in her lifetime. It sounds like a lot, right? But there’s another number that’s more encouraging: About 2.5 million women living now have survived the disease.

In fact, fewer U.S. women develop and die of breast cancer as each year goes by. The improvement is likely due to increased screenings and advances in treatment.

Let’s take a look at the basics of breast cancer and some other notable numbers.

Calculating your risk
Breast cancer occurs when cells in the breast grow out of control. The most common type of breast cancer, ductal carcinoma, begins in the ducts through which milk flows. Cancer can also develop in the glands that produce milk. Eventually, malignant cells may spread through your breast and to other parts of your body.

Doctors don’t always know why one woman develops breast cancer and another doesn’t. But they do know certain factors increase your risk of developing the disease. Some, such as drinking alcohol, can be changed. Other numbers that raise your risk are not as easily altered, including:

- Being age 55 or older
- Having changes in the cancer-related genes BRCA1 or BRCA2
- Menstruating before age 12
- Having a first-degree relative with breast cancer
- Not having children by age 30

Adding up your screening options
Cancer stages are numbered from 0 to 4, with higher numbers indicating more advanced disease. Finding cancer early, at stage 0 or 1, improves the chances that treatment will work.

The American Cancer Society recommendations for early breast cancer detection in women without breast symptoms include:

- Women in their 20s and 30s should have a clinical breast exam (CBE) as part of a regular health exam by a health care professional, preferably every three years
- Women should consider performing breast self-exams (BSEs), starting in their 20s
- Women ages 40 and older should have a mammogram every year and continue to do so for as long as they are in good health
- Starting at age 40, women should have a CBE by a health professional every year

Independent Health provides mastectomy benefits
As a result of the Women’s Health and Cancer Rights Act of 1998, Independent Health provides benefits for mastectomy-related services including reconstruction and surgery to achieve symmetry between the breasts, prostheses and complications resulting from a mastectomy, including lymphedema.
Always need to go?  
Bladder retraining can help

Having an overactive bladder can be frustrating, even debilitating. The frequent, sudden urge to go, the accidental leaks, the constant worry of finding a restroom—all of it can take a major toll on your quality of life. But with bladder retraining, you can cut down on unwanted bathroom breaks and learn how to manage your overactive bladder.

With bladder retraining, you can establish a more normal urination schedule. You learn how to urinate at set times—not just when the urge occurs—to slowly extend the time between bathroom breaks. This increases the amount of urine your bladder will hold, which reduces the frequency of your urges.

**Steps to success**
Before embarking on a bladder retraining program, talk with your doctor. He or she can tell you if you’re ready for bladder retraining and help develop a program to follow. If your symptoms are fairly mild, you can try bladder retraining on your own.

Start off by keeping track of how often you use the restroom. Then set a schedule for urinating that’s slightly longer than your typical habits. For example, if you tend to urinate every 30 minutes, try to wait 15 minutes longer before voiding. Maintain the 45-minute schedule as best as possible for about four weeks. That’s how long it usually takes to successfully and consistently increase your wait time. Once this is accomplished, push back your schedule another 10 or 15 minutes.

**Flexibility for the future**
On average, it takes about three months to retrain your bladder to a more normal urinary frequency. Try to stick to your plan as much as possible, but keep in mind that some intervals between voiding may be a bit longer and some a bit shorter. And don’t worry about bladder retraining at night. The progress you make in the daytime will help during sleep, too.

Health care fraud can cost you

The Coalition Against Insurance Fraud estimates that health care fraud costs Americans $54 billion a year. This type of fraud is committed when a dishonest provider or consumer intentionally submits, or causes someone else to submit, false or misleading information to obtain benefits to which they may not be entitled.

Some examples of consumer health care fraud include:
- Filing claims for services or medications not received
- Forging or altering bills or receipts
- Using someone else’s coverage or insurance card
- Leaving other dependents on your health insurance contract when they are no longer eligible

If you suspect possible fraud or abuse, call our confidential Fraud Hotline at 1 (800) 665-1182. Callers have the option of remaining anonymous.
Resources for those with HIV

Human immunodeficiency virus, commonly known as HIV, is a virus that attacks the body’s immune system. Over time, most people infected with HIV become less able to fight off life-threatening infections and cancers. AIDS (acquired immune deficiency syndrome) is the last stage of HIV disease.

A person of any age, sex, or race can become infected with HIV if he or she participates in unprotected sex or needle-sharing activities with someone who is infected with HIV.

It is very important to seek medical guidance if you feel you have been exposed to HIV.

Independent Health’s Case Management Department is available to help members with HIV or AIDS receive proper treatment. Simply call 1 (800) 501-3439 and ask to speak with a member of our case management team. TTY users call: 1 (800) 432-1110.

The New York State Department of Health also has the following resources for people exposed to the HIV virus:

- 1 (800) 541-2437 (AIDS general information)
- 1 (800) 872-2777 (HIV counseling)
- 1 (800) 542-2437 (AIDS drug assistance program)
- 1 (800) 233-7432 Español (Spanish AIDS hotline)

Grief and loss: The process of healing

Even though death is a part of life, losing a loved one can be one of the most difficult events you can experience. Understanding grief and learning how to cope with grieving can help you heal and move forward with your life as you honor the person you miss.

Grieving people often experience intense and enduring feelings of disbelief, shock, despair, sadness and guilt that can be difficult to deal with. Even so, these emotions are appropriate and part of the healing process that can allow you to move on with your life.

Support from other people who are sensitive and understanding of the loss is one of the most important elements in healing. That support can come from close friends, other family members, grief support groups and psychotherapists.

In addition, taking care of yourself by getting enough sleep, eating a healthy diet, exercising regularly and maintaining your normal routine is important. Resist the urge to numb the pain with alcohol or drugs; doing so can delay recovery and lead to further problems.

Although many expressions of grief are similar to those experienced by people who are depressed, clinical depression is a medical disorder, and grief is a normal response to loss. Grief can lead to depression, however. If your experience with grief is debilitating or you have any thoughts of suicide, contact your doctor or a mental health professional.
Preventive care guidelines

Are you up-to-date on your preventive care? Use this summary to remind yourself when you or your loved ones are due for a physical exam, preventive screening, immunization or lab test. A complete list of all preventive care guidelines is at [www.independenthealth.com](http://www.independenthealth.com). Or call our Member Services Department for a copy.

<table>
<thead>
<tr>
<th>ADULTS</th>
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<tbody>
<tr>
<td><strong>Preventive health exam</strong></td>
</tr>
<tr>
<td>• Every 1–3 years: physical exam with BMI measurement (height and weight) and blood pressure, cognitive functioning exam, update medical history, surgical history and family history</td>
</tr>
<tr>
<td><strong>Adult screenings</strong> (women and men)</td>
</tr>
<tr>
<td>• Fasting lipid profile: every 1–5 years (men beginning at age 35, women beginning at age 40)</td>
</tr>
<tr>
<td>• Colorectal cancer screening (beginning at age 50):</td>
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<tr>
<td>• Colonoscopy every 10 years until age 80</td>
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<tr>
<td>• Fecal occult blood/fecal immunochemical test every year or flexible sigmoidoscopy every 5 years</td>
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<tr>
<td>• Double contrast barium enema every 5 years (Medicare Advantage members only)</td>
</tr>
<tr>
<td>• Type 2 diabetes screening (if blood pressure is greater than 135/80 mm Hg)</td>
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<tr>
<td>• EKG screening annually (Medicare Advantage members only)</td>
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<tr>
<td>• Glaucoma screening annually (Medicare Advantage members only)</td>
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<tr>
<td><strong>Screenings for women</strong></td>
</tr>
<tr>
<td>• Mammogram and clinical breast exam annually (beginning at age 40)</td>
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<tr>
<td>• Pap test:</td>
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<tr>
<td>• Women between the ages of 30 and 65 should have a Pap test, plus HPV (human papillomavirus) testing, every five years.</td>
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<tr>
<td>• Women older than the age of 65 who have had regular Pap tests with normal results do not require testing.</td>
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<tr>
<td>• Chlamydia screening annually if at risk</td>
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<tr>
<td>• Osteoporosis screening annually (65 years of age and older)</td>
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<tr>
<td><strong>Screenings for men</strong></td>
</tr>
<tr>
<td>• Testicular exam annually</td>
</tr>
<tr>
<td>• Abdominal aortic aneurysm (once between ages 65–75 if you ever smoked)</td>
</tr>
<tr>
<td><strong>Immunizations</strong></td>
</tr>
<tr>
<td>• Tetanus/diphtheria booster every 10 years (1 booster should be DTaP which includes pertussis)</td>
</tr>
<tr>
<td>• Influenza (flu shot) annually</td>
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<tr>
<td>• Pneumococcal (pneumonia shot) once at age 65</td>
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<tr>
<td>• Zoster vaccine (single dose for those 60 and older)</td>
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<tr>
<td><strong>Counseling</strong></td>
</tr>
<tr>
<td>• Diet, exercise, STDs, HIV, drug and alcohol use, depression, prescription and over-the-counter medications, sun exposure and injury prevention</td>
</tr>
<tr>
<td>• Aspirin therapy (talk to your doctor)</td>
</tr>
<tr>
<td>• Fall protection (65 and older)</td>
</tr>
</tbody>
</table>
Join initiative to prevent heart attacks and strokes

Do you know someone who has had a heart attack or stroke? You’re not alone. Americans suffer more than 2 million heart attacks and strokes every year, and every day 2,200 people die of cardiovascular disease. And heart disease and stroke are among the leading causes of disability in our country—keeping more than 3 million people from enjoying the quality of life they’d like.

That is why the CDC and the Centers for Medicare & Medicaid Services has created Million Hearts™, a national initiative aimed at preventing 1 million heart attacks and strokes over the next five years. Million Hearts is bringing together a wide range of heart disease and stroke prevention programs, policies and activities to raise awareness about what can be done to prevent heart disease and stroke in our nation.

We’re all at risk. People of all ages, genders, races and ethnicities can have a heart attack or stroke. However, certain groups—people ages 40 to 60, African-Americans and women—are at higher risk. But many of the people who are at high risk for heart attack or stroke don’t know it. Each of us can take steps to achieve the goal of preventing 1 million heart attacks and strokes.

Be one in a Million Hearts by taking the pledge to:

- Prevent heart disease and stroke in your family by understanding the risks
- Get up and get active by exercising for 30 minutes on most days of the week
- Know your ABCS:
  - **A** = Appropriate Aspirin Therapy
  - **B** = Blood Pressure Control
  - **C** = Cholesterol Management
  - **S** = Smoking Cessation
- Stay strong by eating a heart-healthy diet that is high in fresh fruits and vegetables and low in sodium, saturated and trans fats, and cholesterol
- Take control of your heart health by following your doctor’s instructions for medications and treatment

For more information about this important initiative or to confirm your pledge, visit http://millionhearts.hhs.gov.