

HOUSE CALL

KelseyCare Advantage
Celebrating 10 years

April 2018

CONQUERING ARTHRITIS PAIN



Are the joints in your body achy all the time? You may have arthritis. Arthritis is inflammation of one or more of your joints. The main symptoms are joint pain and stiffness, which typically become worse with age. The most common types of arthritis are osteoarthritis and rheumatoid arthritis.

Whether sitting, standing or engaging in activity, it's important to pay attention to your joints.

- **Keep joints moving.** Do daily, gentle stretches that move your joints through their full range of motion.
- **Use good posture.** A physical therapist can show you how to sit, stand and move correctly.
- **Know your limits.** Balance activity and rest, and don't overdo. In addition, lifestyle changes are important for easing pain.
- **Manage weight.** Being overweight can add to complications of arthritis and contribute to arthritis pain. Making gradual, permanent

lifestyle changes resulting in weight loss is often the most effective method of weight management.

- **Quit smoking.** Smoking causes stress on connective tissues, which can increase arthritis pain.

When you have arthritis, movement can help reduce your pain and stiffness, improve your range of motion, strengthen your muscles, and increase your endurance.

Choose the right kinds of activities — those that build the muscles around your joints, but don't damage the joints themselves.

Focus on stretching, range-of-motion exercises and gradual progressive strength training. Include low-impact aerobic exercise, such as walking, cycling or water exercises, to improve your mood and help control your weight.

Avoid activities that involve high impact and repetitive motion, such as:

- Running; • Jumping; • Tennis;
- High-impact aerobics;

- Repeating the same movement, such as a tennis serve, again and again.

Medications are available to relieve arthritis pain. Most are relatively safe, but none are completely free of side effects. Talk with your doctor to come up with a medication plan specific to your pain symptoms.

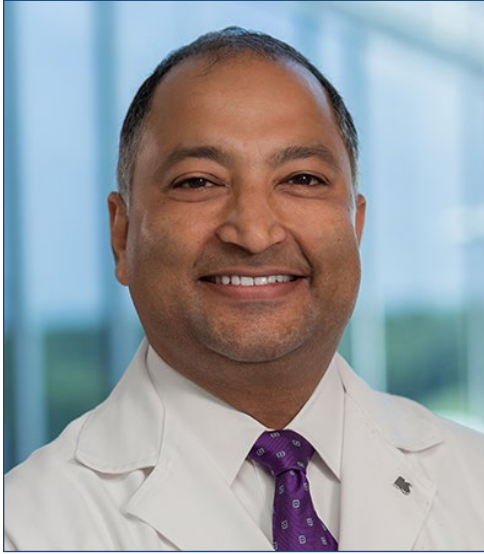
Over-the-counter pain medications, such as acetaminophen (Tylenol, others), ibuprofen (Advil, Motrin IB, others) or naproxen sodium (Aleve) can help relieve occasional pain triggered by activity your muscles and joints aren't used to — such as gardening after a winter indoors.

Cream containing capsaicin may be applied to skin over a painful joint to relieve pain. Use alone or with oral medication.

Consult your doctor if over-the-counter medications don't relieve your pain or if you find yourself using over-the-counter pain relievers regularly. But, do not ignore severe and prolonged arthritis pain either.

HOSPITALISTS ENHANCE QUALITY OF HOSPITAL STAY

by Rupesh Nigam, M.D.



The term ‘hospitalist’ was first coined in 1996. Since then, the popularity and importance of using hospitalists to enhance the quality of patient care in the hospital has rapidly grown into an essential part of the hospital care experience. What exactly is a hospitalist? This definition helps simplify the complex role of a hospitalist as: “A primary care physician or internist who assumes responsibility for the observation and treatment of hospitalized patients and returns them to the care of their private physicians when they are discharged from the hospital.”

At Kelsey-Seybold Clinic, the Hospitalist Program includes a team of 15 highly qualified physicians providing specialized care for hospitalized patients at CHI St. Luke’s Hospitals and The Woman’s Hospital of Texas. In addition, a large group of affiliate physicians take care of Kelsey-Seybold patients at other Houston area hospitals.

The hospitalist provides an ongoing link between the patient and his or her PCP/internist during the hospital stay. This continuous flow of information ensures continuity of care for the patient at all times. The hospitalist does not replace the outside physician, but works hand-in-hand with the physician to provide the patient with correct procedures, tests and treatments using evidence-based diagnoses. He or she also communicates and collaborates with other Kelsey-Seybold specialists as needed to best coordinate care for the patient. At the same time, the hospitalized patient is getting personal, patient-centered care.

One of the main roles of the hospitalist is to determine and maintain the appropriate care necessary for the level of severity of an illness or injury. Equally important is the role to enhance both the quality of care and how that

care is delivered through treatment coordination, improving the patient’s experience and reducing or eliminating unnecessary procedures. Eliminating duplication of tests and procedures where results have already been determined saves both the patient and the hospital time and resources. Once discharged, the hospitalist makes sure the patient is returned to the care of his or her PCP or internist.

In summary, through hands-on interaction and an understanding of each patient’s medical history, hospitalists are able to provide quality individualized care during the hospital stay and improve patient satisfaction.

Dr. Rupesh Nigam is a hospitalist who cares for Kelsey-Seybold Clinic patients during a hospital stay. He joined Kelsey-Seybold in 2011 and is the Associate Medical Director of Hospital Services.



KELSEY CARE ADVANTAGE MARKS MILESTONE *Celebrating 10 years*

2018 is a big year for KelseyCare Advantage. It marks 10 years that we have been delivering high-quality care to Medicare-eligible patients throughout greater Houston. KelseyCare Advantage launched in 2008 with an enrollment of about 2,000 members. A decade later, we manage care for more than 32,000 members.

“KelseyCare Advantage has seen tremendous growth in the last decade – growth we are proud of because it reflects our quality of care and the high level of service we provide our patients,” said KelseyCare Advantage Medical Director Donnie Aga, M.D. “Our

patients have always been at the center of everything we do to improve our plan, which is why I believe we have been able to maintain a 4- to 5-star CMS rating. It’s why we have seen exponential growth in 10 years and have a high renewal rate every year.”

Our members have access to the Kelsey-Seybold Clinic network of providers and their affiliates. Known as the nation’s first accredited Accountable Care organization by the National Committee for Quality Assurance, Kelsey-Seybold manages care for all KelseyCare Advantage members, focusing on the tenets of the “Triple Aim” – better quality,

improved health, and lower cost.

“With so much uncertainty in the healthcare marketplace, to have an organization reach the 10-year milestone is significant,” said Marnie Matheny, president of KelseyCare Advantage. “Evidence-based care, appropriate levels of care in the right setting with the most appropriate provider, means better outcomes for our members, and our focus on prevention and compliance means lower total medical cost. We are so proud of this health plan and all that we have accomplished and look forward to continuing to serve our members for the next 10 years and beyond.”

Shrimp Marinated in Lime Juice and Dijon Mustard

INGREDIENTS

- 1 medium red onion, chopped
- 1/2 cup fresh lime juice, plus lime zest as garnish
- 2 tablespoons capers
- 1 tablespoon Dijon mustard
- 1/2 teaspoon hot sauce
- 1 cup water
- 1/2 cup rice vinegar
- 3 whole cloves
- 1 bay leaf
- 1 pound uncooked shrimp, peeled and deveined (about 24)

DIRECTIONS

In a shallow baking dish, combine the onion, lime juice, capers, mustard and hot sauce. Set aside.

In a large saucepan, add the water, vinegar, cloves and bay leaf. Bring to a boil and add the shrimp. Cook for 1 minute, stirring constantly.

Drain and transfer the shrimp to the shallow dish containing the onion mixture, making sure to discard the cloves and bay leaf. Stir to combine. Cover and refrigerate until well-chilled, about 1 hour.

Garnish with lime zest. Serve cold.

Nutritional analysis per serving
Serving size: About 3 shrimp

Calories	60
Total fat	Trace
Saturated fat	Trace
Trans fat	Trace
Monounsaturated fat	Trace
Cholesterol	91 mg
Sodium	182 mg
Total carbohydrate	3 g
Dietary fiber	0.5
Total sugars	1 g
Added sugars	0 g
Protein	12 g

Recipe

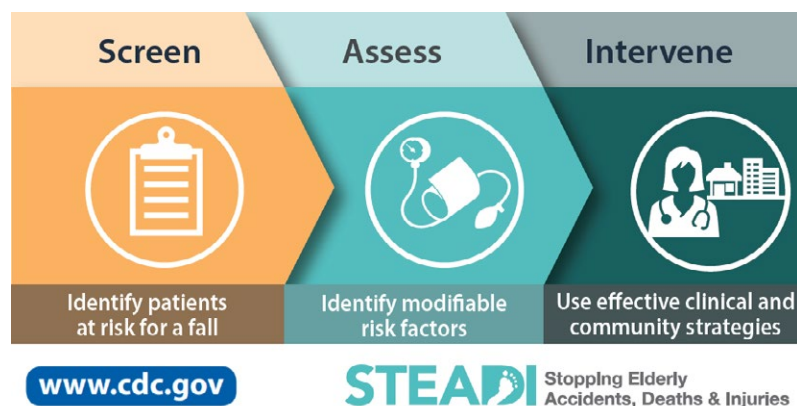
FALL PREVENTION



Centers for Disease
Control and Prevention
National Center for Injury
Prevention and Control

KelseyCare Advantage is serious about fall prevention. The Centers for Disease Control (CDC) developed a new program to aid healthcare providers who treat older adults who are at risk of falling or who may have fallen in the past.

Your Kelsey-Seybold Primary Care Physician has been trained and educated on the STEADI program, which stands for Stopping Elderly Accidents, Deaths & Injuries. When you schedule your next annual physical you will be asked to complete a short survey to identify if you are in need of additional support to prevent falls. This quick and easy survey can be done online or on paper.



There are several things you can do now to lower your risk of falls. Regular exercises to improve leg strength and balance is essential. Calcium and vitamin D supplements are also helpful to strengthen your bones. Get your vision checked to make sure your eye sight is as good as possible. And finally check your foot wear to make sure your shoes are in good shape and fit you correctly.

Recommended Exercise: CHAIR RISE EXERCISE

WHAT IT DOES: Strengthens the muscles in your thighs and buttocks.

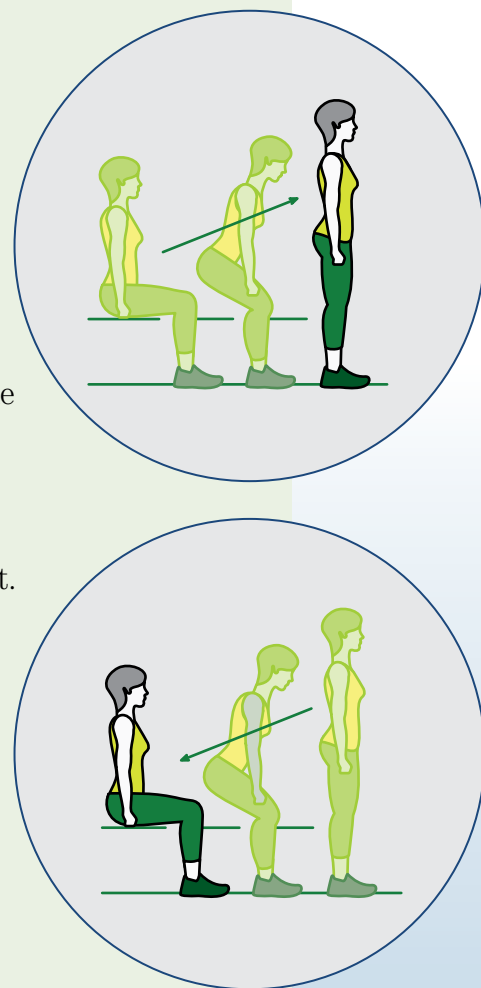
GOAL: To do this exercise without using your hands as you become stronger.

HOW TO DO IT:

1. Sit toward the front of a sturdy chair with your knees bent and feet flat on the floor, shoulder-width apart.
2. Rest your hands lightly on the seat on either side of you, keeping your back and neck straight, and chest slightly forward.
3. Breathe in slowly. Lean forward and feel your weight on the front of your feet.
4. Breathe out, and slowly stand up, using your hands as little as possible.
5. Pause for a full breath in and out.
6. Breathe in as you slowly sit down. Do not let yourself collapse back down into the chair. Rather, control your lowering as much as possible.
7. Breathe out.

Repeat 10-15 times. If this number is too hard for you when you first start practicing this exercise, begin with fewer and work up to this number.

Rest for a minute, then do a final set of 10-15.



GET YOUR ANNUAL PHYSICAL DONE EARLY!

We would like to thank all of our KelseyCare Advantage members for participating in their healthcare! You all do a great job of coming in for your annual physical each year and we want you to keep it up.

The most recent cold and flu season proved to be extremely busy and even fatal. In 2018, we encourage our members to get their annual physicals completed **before** the next flu season starts – even if you had your physical recently at the end of 2017.

If you normally schedule your annual physical in October, November and December of each year, we encourage you to make that appointment prior to the end of September. Don't worry, it's ok that it's been less than a year, it's still **FREE!**

IF YOU HAVEN'T BEEN IN FOR YOUR ANNUAL PHYSICAL, NOW IS THE PERFECT TIME TO COME IN

Do you have a busy schedule? We have plenty of appointments!

Trouble getting to the clinic?

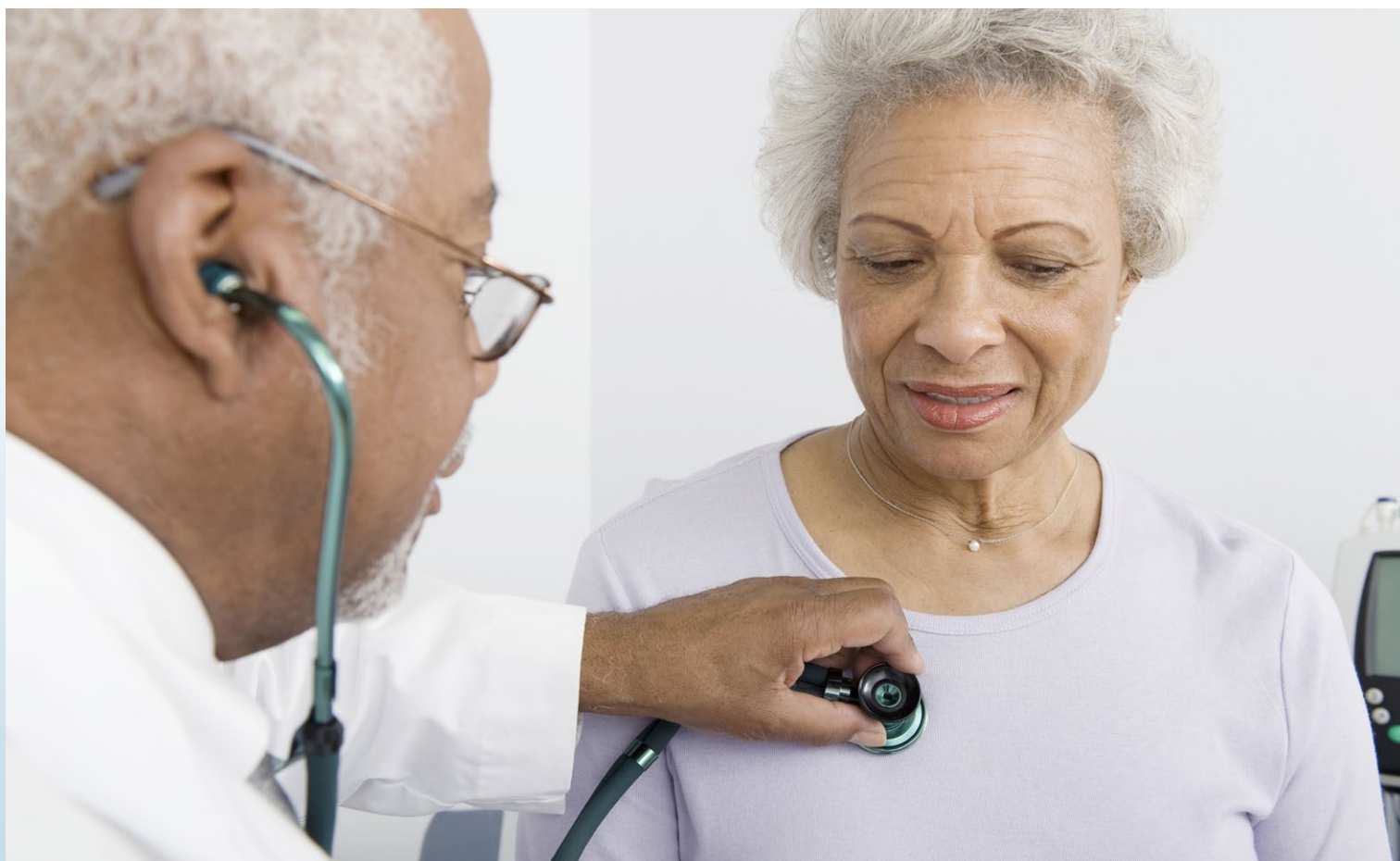
Use your transportation benefit that can get you to your appointment at no cost.

No time to call to schedule? Use the MyChart App or schedule your appointment through your MyKelseyOnline account.

Don't have a PCP? We can help! Call the KelseyCare Concierge number and ask a representative to help you find the right PCP for you.

HOPE TO SEE YOU SOON!

Member services is available daily from 8:00 am-5:00 pm, at 713-442-CARE (2273) or 1-866- 535-8343. TTY/TDD users should call 1-866-302-9336.



UNDERSTANDING STAGES OF COVERAGE FOR MEDICARE PRESCRIPTION DRUG COVERAGE

KelseyCare Advantage members with Medicare prescription drug coverage—often referred to as Medicare Part D—need to understand exactly how the coverage stages work. Without a clear understanding, you may end up paying more for your medications than you anticipated.

Although Part D covers a large portion of your prescription drug costs, it doesn't cover all of them. How much you pay for a drug depends on which stage of coverage you are in at the time you get a prescription filled or refilled. Here is a breakdown of Medicare's Part D coverage stages:

STAGE 1 - YEARLY DEDUCTIBLE STAGE

During this stage, you pay the full cost of your drugs. You stay in this stage until you have paid \$50 for your drugs (\$50 is the amount of your deductible).

STAGE 2 - INITIAL COVERAGE STAGE

During this stage, the plan pays its share of the cost of your drugs and you pay your share of the cost. You stay in this stage until your year-to-date "total drug costs" (your payments plus any Part D plan's payments) total \$3,750.

STAGE 3 - COVERAGE GAP STAGE OR "THE DONUT HOLE"

For Tier 1 Preferred Generic drugs, you pay your Initial Coverage Stage Copay. For brand name drugs, you pay 35% of the price (excluding

the dispensing fee and vaccination administration fee, if any), and 44% of the price for all other generic drugs. You stay in this stage until your year-to-date "out-of-pocket costs" (your payments) reach a total of \$5,000.

STAGE 4 - CATASTROPHIC COVERAGE STAGE

You enter catastrophic coverage when your TrOOP (true-out-of-pocket) costs are \$5,000. During Stage 4, KelseyCare Advantage pays most of the cost for your drugs.

Members who are not participating in the Medicare "Extra Help" program can expect to pay:

- The greater of \$3.35 or 5% for a generic medication.
- The greater of \$8.35 or 5% for a brand medication.

You will stay in the catastrophic coverage stage for the remainder of the coverage year.

HELP DURING THE DONUT HOLE, AND MORE

For many seniors, the Stage 3 Coverage Gap or "donut hole" is the stage of most concern, because it means paying more out-of-pocket than in other stages. However, there are a few things to keep in mind that may help you through this stage.

1. KelseyCare Advantage shares the cost of your medications by providing coverage of all Tier 1 preferred generic drugs during the Stage 3 donut hole.

2. The Medicare Coverage Gap Discount Program provides manufacturer discounts on brand name drugs to Part D enrollees who have reached the coverage gap and are not already receiving "Extra Help." A 50% discount on the negotiated price (excluding the dispensing fee and vaccine administration fee, if any) is available for those brand name drugs from manufacturers that have agreed to pay the discount. The plan pays an additional 15% and you pay the remaining 35% for your brand drugs.
3. You also receive some coverage for generic drugs on Tier 2 and Tier
5. The plan pays 56% of the price for generic drugs and you pay the remaining 44% of the price.

Also, at the beginning of each plan year, all Part D recipients start Stage 1 again. Coverage limits may change yearly, so make sure you know each year what you will be expected to pay.

If you're a member of a KelseyCare Advantage employer group plan or have Low Income Subsidy, it's important to note that your coverage levels may be different. Please consult your Evidence of Coverage, or call Member Services for more information.

If you have questions or concerns, please call Member Services, available daily from 8:00 am-5:00 pm, at 713-442-CARE (2273) or 1-866-535-8343. TTY/TDD users should call 1-866-302-9336.

ASK DENISE

Q. *I received a transition supply letter in the mail, what does this mean?*

A. A transition supply is typically a one-time, 30-day supply of a drug that Medicare drug plans must cover when you're in a new plan or when your existing plan changes the way it provides coverage for a particular medication. These medications may be non-formulary medications, medications that initially require a prior authorization, or medications that are covered but the dose you are taking goes beyond the maximum daily dose the plan allows. A transition supply waives these restrictions so you are able to get your medication without any interruption to your therapy and allows you time to discuss options with your prescriber.

Q. *What do I need to do to continue to get my medication after I receive a transition supply?*

A. When you receive a transition supply, a letter will be mailed to you detailing the reason for the transition supply and the type of restriction your particular medication has on the formulary. When you receive a transition fill, you should call your doctor right away to talk about switching to a drug that

is on your plan's formulary without restrictions. If no other drug will work for you, you or your doctor can request a coverage determination where the plan will continue to provide coverage for the medication if you meet the required criteria.

Q. *Will I pay a deductible each time I fill my prescriptions?*

A. No, you begin in the Deductible stage when you fill your first prescription of the year*. The Rx and Rx+Choice Plans each have a Deductible stage. The deductible is \$50. During the deductible stage, you pay the full cost of your drugs. Once you have paid \$50 for your drugs, you enter the Initial Coverage stage, where you pay copayments or coinsurance for your prescriptions. Note: Coverage level may be different for Low Income Subsidy members.



Denise M. Jonathan,
Pharm. D., R.Ph.

DO YOU HAVE A QUESTION FOR DENISE?

With each quarterly newsletter, Denise answers questions that are submitted by KelseyCare Advantage members. If you have a general pharmacy or prescription question, please submit them to HouseCall@KelseyCareAdvantage.com.

Advice provided by Denise is for educational purposes only and does not constitute medical advice or a guaranty of treatment, outcome, or cure.

GENETIC TESTING FOR BREAST CANCER

Most cancers occur by chance. In some families we see more cancer than would be expected by chance alone. In those families, determining if an inherited gene is the cause of the cancer is important. Individuals with hereditary cancers have much higher cancer risks than the general population.

WHO SHOULD BE TESTED?

If you have a personal or family history of:

- Breast cancer before age 50.
- Ovarian cancer at any age.
- Male breast cancer at any age.
- Bilateral breast cancer.
- Both breast and ovarian cancer.
- Relative with BRCA mutation.

- Ashkenazi/Eastern European Jewish descent.
- Personal history of pancreatic cancer at any age.

The test consists of a blood sample sent to a lab for analysis. Results are received in about 2 weeks.

The results will be reported as positive, negative or variant.

Positive results in BRCA1 or BRCA2 mutations require increased monitoring with breast exams, mammogram/MRI of the breast. It may also include preventive surgery such as mastectomy (removal of breasts) and oophorectomy (removal of ovaries) to help decrease your risk for breast and ovarian cancer.

These mutations (BRCA1 & BRCA2) are passed on in a family.

If you have the mutation, your parents, children, brothers and sisters have up to a 50% chance of having the same mutation.

Testing is the only way to identify mutation carriers.

It is important to share test results with family members.

When you come to your appointment to discuss genetic testing, for those family members who have cancer, be sure to have the type of cancer and age at diagnosis. Also have copies of the genetic testing results for those family members who have tested positive.

Important Plan Information