

HOUSE CALL

KelseyCare Advantage
Celebrating 10 years

October 2018

ARM YOURSELF AGAINST FLU

Flu season is upon us and it's no secret that, of all age groups, the 65+ crowd faces the greatest risk of developing serious complications from the flu. In fact, the Centers for Disease Control and Prevention (CDC) estimates that of all the people hospitalized each year with flu, up to 70 percent are seniors. Even more troubling is the fact that 70 to 85 percent of flu-related deaths occur among people 65 and older.

FLUZONE HIGH DOSE

Approved for U.S. use in 2009, this is a high-potency vaccine that contains four times the amount of antigen as a regular flu shot, which creates a stronger immune response for better protection. This vaccine, according to a 2013 clinical trial, was 24 percent more effective than the regular-dose shot at preventing flu in seniors.

FLUAD

Available in the U.S. since 2016, this vaccine contains an added ingredient called adjuvant MF59 that also helps create a stronger immune response. In a 2012 Canadian observational study,

FLUAD was 63 percent more effective than a regular flu shot.

The CDC does not recommend one vaccination over the other, and to date, there have been no studies comparing them.

You should also know that both the Fluzone High-Dose and FLUAD can cause milder effects than the standard-dose flu shot, like pain or tenderness where you got the shot, muscle aches, headache or fatigue. Neither vaccine is recommended for seniors who are allergic to chicken eggs, or those who have had a severe reaction to a flu vaccine in the past.

Two different flu shots – the Fluzone High Dose and FLUAD – are designed specifically for seniors (you only need one of them). They provide extra protection beyond what a standard flu shot provides. While they cannot guarantee you won't get the flu, they will lower your risk.



KELSEY-SEYBOLD DELIVERS NATIONALLY ACCREDITED CANCER CARE

Kelsey-Seybold Clinic is proud of the comprehensive, high-quality care that specialists deliver at the Kelsey-Seybold Cancer Center. But, earlier this year, came even more reason to be proud, as the facility received recognition from the largest oncology society in the U.S. The Cancer Center was recognized by the QOPI® Certification Program, an affiliate of the American Society of Clinical Oncology, as successfully completing a three-year certification program for outpatient hematology-oncology practices that meet nationally recognized standards for quality cancer care.



“This certification from QOPI® highlights our commitment to excellence and our mission to provide our patients quality cancer care that meets or exceeds national quality measures.”

- TJ Patel, M.D., Chief of Hematology/Oncology at Kelsey-Seybold Clinic.

Conveniently located at the Main Campus Clinic on W. Holcombe and the Spring Medical and Diagnostic Center in Spring, the Kelsey-Seybold Cancer Center offers nationally accredited and highly personalized cancer treatment in a comfortable, outpatient setting with free parking and complimentary valet parking.

BOTH LOCATIONS HOUSE INFUSION CENTERS THAT PROVIDE THE FOLLOWING SERVICES:

- Chemotherapy
- Injectable anticoagulants
- Intravenous administration of medications including antibiotics, antifungals, antivirals and hydration solutions
- Patient teaching and education
- Routine care for venous access devices
- Ambulatory pumps
- Iron infusions
- IVIG-immune globulin (gamma globulin)
- Therapeutic phlebotomies
- Remicade and other biotherapy treatments

In addition to chemotherapy and infusion therapy, the Cancer Center offers minimally-invasive breast biopsies and other imaging studies. The Kelsey-Seybold Cancer Center is home to state-of-the-art diagnostics such as PET, CT, MRI, genetic testing and stereotactic breast biopsy.

Learn more about the Kelsey-Seybold Cancer Center here [<https://www.kelsey-seybold.com/medical-services-and-specialties/cancer-center>].

To schedule an appointment, please call 713-442-1080, Monday-Friday, from 8 a.m. to 5 p.m.

SENSIBLE NUTRITION FOR SENIORS



We've all heard how important it is to maintain good nutrition throughout our lifetime. In addition to helping us feel our best and stay strong, healthy eating can reduce the risk of some diseases that are common among older adults. And, if you already have certain health issues, good nutrition can help you manage the symptoms.

Nutrition can sometimes seem complicated. But the National Institute on Aging has put together 10 nutritional tips for seniors that should simplify things:

1. DRINK PLENTY OF LIQUIDS

As we age, many of us may lose some of our sense of thirst. Drink water often. Low-fat or fat-free milk or 100% juice also helps you stay hydrated. Limit beverages that have lots of added sugars or salt. Learn which liquids are better choices.

2. MAKE EATING A SOCIAL EVENT

Meals are more enjoyable when you eat with others. Invite a friend to join you or take part in a potluck on a regular basis. A senior center or place of worship may offer meals that are shared with others. There are many ways to make each mealtime a fun experience.

3. PLAN HEALTHY MEALS

Find trusted nutrition information from ChooseMyPlate.gov and the National Institute on Aging. Get advice on what to eat, how much to eat, and which foods to choose, all based on the Dietary Guidelines for Americans. Find sensible, flexible

ways to choose and prepare tasty meals so you can eat foods you need.

4. KNOW HOW MUCH TO EAT

Learn to recognize how much to eat so you can control portion size. When eating out, pack part of your meal to eat later. One restaurant dish might be enough for two meals or more.

5. VARY YOUR VEGETABLES

Include a variety of different colored vegetables to brighten your plate. Most vegetables are a low-calorie source of nutrients. Vegetables are also a good source of fiber.

6. EAT FOR YOUR TEETH AND GUMS

Many people notice that their teeth and gums change as they age. People with dental problems sometimes find it hard to chew fruits, vegetables, or meats. Don't miss out on needed nutrients! Eating softer foods can help. Try cooked or canned foods, such as unsweetened fruit, low-sodium soups or canned tuna.

7. USE HERBS AND SPICES

Foods may seem to lose their flavor as we age. If favorite dishes taste different, it may not be the cook! Maybe your sense of smell, sense of taste or both have changed. Medicines may also change how foods taste. Add flavor to your meals by using herbs and spices.

8. KEEP FOOD SAFE

Don't take a chance with your health. A food-related illness can be life-threatening for an older person. Throw away food that might not be safe. Avoid certain foods that are always risky for an older person, such as unpasteurized dairy. Other foods can be harmful to you when they are raw or undercooked, such as eggs, sprouts, fish, shellfish, meat or poultry.

9. READ THE NUTRITION FACTS LABEL

Make the right choices when buying food. Pay attention to important nutrients to know as well as calories, fats, sodium and the rest of the Nutrition Facts label. Ask your doctor if there are ingredients and nutrients you might need to limit or increase. You'll find more helpful information about this here. [<https://www.nia.nih.gov/health/reading-food-labels>]

10. ASK YOUR DOCTOR ABOUT VITAMINS OR SUPPLEMENTS

Food is the best way to get nutrients you need. Should you take vitamins or other pills or powders with herbs and minerals? These are called dietary supplements. Talk to your doctor about whether these are right for you. Some can interfere with your medicines or affect your medical conditions.

RECOGNIZING ARTHRITIS AND TREATING IT

No matter how old you are, arthritis can suddenly flare up, causing pain that can sometimes be debilitating. Arthritis is very common among seniors, with nearly half of those age 65 and older suffering from some type of arthritis pain.

If you've never had arthritis, but suddenly feel unexplained joint pain, you may be developing arthritis.

Other signs include:

- Joint swelling
- Joint stiffness
- Tenderness or pain when touching a joint
- Problems moving the joint
- Warmth and redness on a joint

If you begin to experience any of these symptoms and they don't go away within two weeks, contact your doctor. If you develop a fever along with any of those symptoms, make sure to see a doctor right away. Your doctor may take an X-ray or perform other tests done to determine if you have arthritis or something else.

Not all arthritis cases are the same. Different types require different treatments:

OSTEOARTHRITIS

Osteoarthritis is the most common form of arthritis in seniors. When cartilage begins to tear and wear away, osteoarthritis sets in. Pain can range from stiffness to pain when walking, bending down or even sleeping. Osteoarthritis is most common in the hands, neck, lower-back, knees and hips.

Treatment: Osteoarthritis pain can be treated with acetaminophen or other pain relievers. Many are available over-the-counter, while some may be prescribed. In some cases, doctors may advise shots in the joints to relieve the pain. In the most severe cases, surgery may be required.

RHEUMATOID ARTHRITIS

Rheumatoid Arthritis (RA) is an autoimmune disease. With RA, the body attacks the lining of the joints just as it would if it were trying to protect you from disease. The pain that RA patients experience comes from the inflammation in the joints. RA most commonly flairs in the fingers, wrist, shoulders, elbows, hips, knees, ankles, feet and neck. It can also attack the heart, blood vessels and nervous system.

Treatment: Besides over-the-counter anti-inflammatory medicines, your doctor may also prescribe anti-rheumatic drugs to slow down the damage from the disease.

GOUT

Anyone who has had gout understands why it is considered one of the most painful forms of arthritis. Gout sets in when uric acid forms in the connective tissues or joint spaces, leading to pain, swelling and heat in the joint. It is often triggered after a patient eats foods like shellfish, liver, dried beans, peas, anchovies or gravy. Gout can also worsen by being overweight, drinking too much alcohol and by taking certain medications, including certain blood pressure medications.

Treatment: Your doctor will most likely discuss what triggered the attack so you can avoid it the next time. In addition, he/she may prescribe corticosteroids to reduce the swelling.

REACTIVE ARTHRITIS

Reactive arthritis is a reaction to an infection somewhere else in the body. While a symptom of reactive arthritis includes joint inflammation, it can also include conjunctivitis (pink eye) and inflammation of the urinary tract.

Treatment: Since this type of arthritis is caused by an infection, a doctor will most likely prescribe antibiotics to treat the infection. You may also be advised to take anti-inflammatory drugs.

While each type of arthritis has its own unique treatments, here are some general treatment options:

- Daily Exercise – One way to prevent and treat joint stiffness and pain is to keep them moving. Walking, swimming, bike riding; anything that keeps you moving.
- Strengthening Exercises – Lifting weights is a good way to build muscle. Strong muscles help protect your joints.
- Range-of-Motion Exercises – Dancing and yoga keep you moving and improve flexibility.

Hot or cold compresses to the area affected may also help relieve pain. You can protect your joints by resting and eating a well-balanced diet. Wearing the right shoes protects your feet and reduces the strain on your joints.

ATOPIC DERMATITIS TREATMENT OPTIONS

Atopic Dermatitis, also known as Eczema, is a common skin condition that causes dryness, redness, itchiness, and general discomfort. Although there is currently no cure for eczema, there are many options including lifestyle changes, prescription and non-prescription medication that can help control symptoms.

LIFESTYLE CHANGES:

Implementing eczema friendly daily routines are a great way to reduce symptoms and prevent recurrence. There is evidence that routines such as daily moisturizing, hydration and trigger avoidance can help reduce skin dryness, redness and itching.

Moisturizing:

- Maintaining proper skin hydration is key to controlling Eczema symptoms.
- Creams, such as (such as Eucerin®, Cetaphil®, and Lubriderm®) or ointments (such as petroleum jelly, Aquaphor®, and Vaseline®) help keep moisture in the skin, preventing dryness.
- Lotions, especially those containing alcohol or fragrances can worsen eczema symptoms and should be avoided.

Baths & Showers:

- Short, lukewarm showers and baths can relieve eczema discomfort and hydrate the skin.
- Long, hot showers or baths can dry out the skin and should be avoided.
- Unscented, hypoallergenic soaps and shampoos should be used to prevent skin inflammation.
- Apply a cream or lotion immediately after bathing or showering.

Recognize Your Triggers:

- Eczema “flares” are often caused by social, environmental or psychological factors.
- Take note of any new conditions associated with flare ups such as: food, clothing, soap, detergent, feelings such as stress or any other outside factors that could be the cause of aggravated symptoms.

MEDICATION:

Based on the severity of the condition, doctors may prescribe medication to help with symptom management. Listed below are the most common medications prescribed for eczema.

Steroids:

- Steroid creams such as Hydrocortisone can be prescribed by your doctor to reduce inflammation of the skin. These creams come in different strengths, and long-term use is not recommended, since they can cause thinning of the skin. Steroid creams should be used as prescribed by your doctor.
- The lower strength steroid cream Hydrocortisone 1% is available over-the-counter and does not require a prescription. Do not use over-the-counter Hydrocortisone for longer than 14 days, unless otherwise instructed by your doctor.
- Oral steroids also reduce skin inflammation and can be prescribed by your doctor if necessary. However, steroid pills are associated with common side effects that are seen with long term use.

Topical Calcineurin Inhibitors:

- Topical Calcineurin Inhibitors such as Tacrolimus (Protopic®) 0.03% or 0.1% ointment, or Pimecrolimus (Elidel®) 1% cream are a class of topical prescription medication that are used in patients who have not been responsive to steroids, or for sensitive skin areas such as the eyelids, face, groin, etc.

Injectable Medication:

- Dupixent® is a new injectable medication for adults with moderate to severe atopic dermatitis. This medication is reserved as a last resort for patients who are not responsive to any other medication.

REFERENCES:

Eichenfield LF, Tom WL, Berger TG, Krol A, Paller AS, Schwarzenberger K, et al. Guidelines of care for the management of atopic dermatitis: section 2. Management and treatment of atopic dermatitis with topical therapies. *J Am Acad Dermatol*. 2014 Jul;71(1):116-32.

ASK DENISE

Q. *How can I find out whether my prescriptions will be covered in 2019?*

A. Our list of covered drugs is called a Formulary or “Drug List.” The 2019 Drug List includes the drugs that we will cover next year. We made changes to our 2019 Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs. Review the Drug List to make sure your drugs will be covered next year and to see if there will be any restrictions. You can get the complete Drug List by visiting our website (www.kelseycareadvantage.com) or by calling Member Services at 713-442-CARE (2273). We’re available from 8 a.m. to 8 p.m. Monday through Sunday.

Q. *I reviewed the 2019 List of Drugs but did not find my prescription. What do I do?*

A. At the beginning of each calendar year, the plan can provide you with a one-time, temporary transition supply of a drug when the drug you take is no longer on the Formulary and/or the drug has a new restriction. Before this supply ends, speak to your physician to determine whether you should change the drug you are currently taking or request an exception from KelseyCare Advantage to continue coverage. **Don’t leave the Pharmacy without your medication!** You may be eligible for a transition supply. You or your pharmacist can call the Optum Rx number

on the back of your ID card 24/7 to determine if you qualify.

Q. *Will I pay the 2019 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. If you are in a program that helps pay for your drugs, the deductible may not apply to you.

Q. *Why is it important for me to know how much my drugs cost?*

A. Knowing the total cost of your drugs will help you plan how much you will pay out of pocket during the year for your drugs. The total cost of your drugs affects when you enter the coverage gap and how much you will have to pay out of pocket while you are in this stage of coverage. Understanding the total cost will help you anticipate how much you will be spending on your drugs throughout the year. Once you have identified which drugs are concerns for you financially, you can discuss them with your doctor to determine whether there are any lower cost alternatives that may be appropriate for you.



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

Q. *Do I pay the same cost-share regardless of what pharmacy I use?*

A. Our network includes pharmacies that offer standard cost-sharing and pharmacies that offer preferred cost-sharing. You may go to any of our network pharmacies. However, your costs may be even less for your covered drugs if you use a network pharmacy that offers preferred cost-sharing rather than a network pharmacy that offers standard cost-sharing. Effective January 1, 2019 – Kelsey Pharmacy, HEB Pharmacy, and CVS Pharmacy will be the network pharmacies that offer preferred cost-sharing.

A WEIGHTY SUBJECT



As we grow older, continuing to eat the same types and amounts of food without becoming more active means we will likely put on weight. That's because metabolism (how you burn the calories you eat) tends to slow down with age.

The National Institute on Aging (NIA) suggests that seniors check their weight once a week. Then you'll know whether you are balancing calories going in and out of your body or whether you need to be more active.

Becoming more active doesn't mean spending all day at the gym or hiring a personal trainer. Think about the kinds of physical activities that you enjoy — walking, running,

bicycling, gardening, housecleaning, swimming, or dancing. Try making time to do what you enjoy on most days of the week. And then increase how long you do it or add another fun activity.

When discussing weight with your doctor, he or she might mention BMI (Body Mass Index). Your BMI is a number based on your height and weight that can be compared to a chart to see if you are considered overweight or underweight. Obesity is a growing problem for all age groups in the United States. In older adults who are overweight, the decision whether to lose some or all of that extra weight is complicated, and BMI is just one factor. Body changes that come with age and

health problems may mean that an older person's desired weight is higher than for someone younger.

Learn more about maintaining healthy weight at <https://www.nia.nih.gov/health/maintaining-healthy-weight>.

Important Plan Information