

# HOUSE CALL

KelseyCare Advantage

January 2019

## START USING YOUR BENEFIT TODAY!



The SilverSneakers® fitness program is an innovative health, exercise and wellness program designed to help seniors lead a healthy, active lifestyle, and enrich their social lives. As a KelseyCare Advantage member, you can start using your SilverSneakers benefit right away to get stronger, feel better and improve your life.

### WORK OUT AT A FITNESS CENTER

SilverSneakers gives you access to a basic fitness center membership at more than 15,000 fitness locations across the United States, including most YMCAs, Curves, Snap Fitness and many others. You can use any SilverSneakers location, any time they're open, as often as you want. You have access to the equipment, group classes and other features included in a basic fitness membership\*, and can choose locations near home, on vacation, while visiting family or traveling.

### CONNECT WITH SILVERSNEAKERS AT HOME

Members who don't have convenient access to a SilverSneakers location, or are unable to get there for any reason, can still benefit from SilverSneakers. The SilverSneakers website offers a wealth of resources, including exclusive access to SilverSneakers On-Demand™ workout videos, health and nutrition tips, recipes, inspiration and more. Sign up for the newsletter, read blog articles, find classes and much more.

### MAKE NEW FRIENDS WHILE GETTING FIT AND HEALTHY

SilverSneakers makes getting fit and healthy fun, but it is also a great way to meet new people and stay socially connected. In fact, 58% of participants said they have made new and valuable friendships through SilverSneakers.

### GETTING STARTED IS EASY

As a KelseyCare Advantage member, you already have

SilverSneakers! If you haven't already, you will receive a SilverSneakers membership card in the mail, but all you need to get started today is your member ID number. There are three easy ways to access your SilverSneakers member ID number:

1. Take your KelseyCare Advantage ID Card to your nearest participating SilverSneakers location (find locations at [www.SilverSneakers.com/Locations](http://www.SilverSneakers.com/Locations))
2. Visit [www.SilverSneakers.com/StartHere](http://www.SilverSneakers.com/StartHere) and follow the instructions
3. Call 1-888-423-4632 (TTY: 711) to speak with a SilverSneakers representative

*\*Amenities and classes vary by location.*

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# CONGESTIVE HEART FAILURE AND THE CHF CLINIC

Heart Failure (also known as CHF - Congestive Heart Failure), occurs when your heart muscle doesn't pump blood and oxygen as well as it should to support the other organs in your body. Heart Failure is recognized as a growing epidemic but one that is manageable. Research shows that early diagnosis and treatment can improve quality and length of life for people who have Heart Failure. Further, ongoing and rigorous tracking / monitoring allows for timely intervention and has shown to improve patient outcomes dramatically.

For our members, benefits of the program include,

1. Direct access to nurses and doctors
2. 24/7 monitoring & help
3. Education on various topics including dietary changes, lifestyle changes and when to seek early interventions

4. Avoidance of expensive and disruptive emergency room visits and / or hospitalizations
5. Outpatient / office-based IV therapy
6. Improved quality of life and a prolonged life

Compared to usual care, care at a multidisciplinary specialized Congestive Heart Failure Clinic reduced the number of hospital readmissions and improved quality of life.

## WHAT IS THE CHF CLINIC?

The CHF Clinic is Kelsey-Seybold's newest program that is a patient focused & next generation of compassionate care.

It is a team of specialists including Cardiologist, trained nurses, and others who work together using latest advancements such as virtual medicine, and technology like blue tooth scales and blood

pressure machines which connect to the MyChart application in the electronic medical records system (EPIC).

The goals of the CHF clinic are to have an ongoing engagement with our patients to identify early signals of deteriorating heart health, provide timely care and reduce hospitalizations.

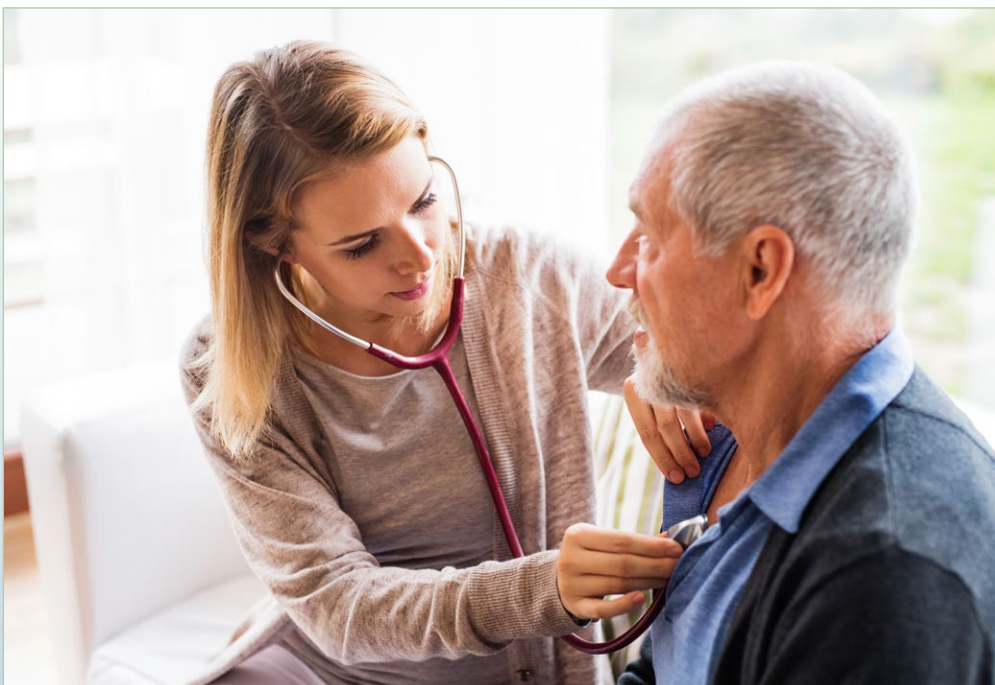
## HOW IT WORKS?

At the core of the program are weekly calls with specialized nurses to check on your wellness including collecting information about your weight, blood pressure, diet and lifestyle. For those who are not able to join a call, other modes of interaction like questionnaires on the MyChart application can be used to add to or supplant voice calls.

From these weekly calls, we will be able to identify at a very early stage possible deterioration of your cardiac health and take proactive action.

Further, this program provides ongoing education geared towards managing and improving your heart health. Dietary and lifestyle changes are discussed along with possible interventions like office-based IV therapy.

In summary, CHF clinics have shown substantial and statistically significant benefits with monitoring for patients with chronic heart failure. Monitoring is not a treatment but rather a different way of systematically organizing effective patient centric care.

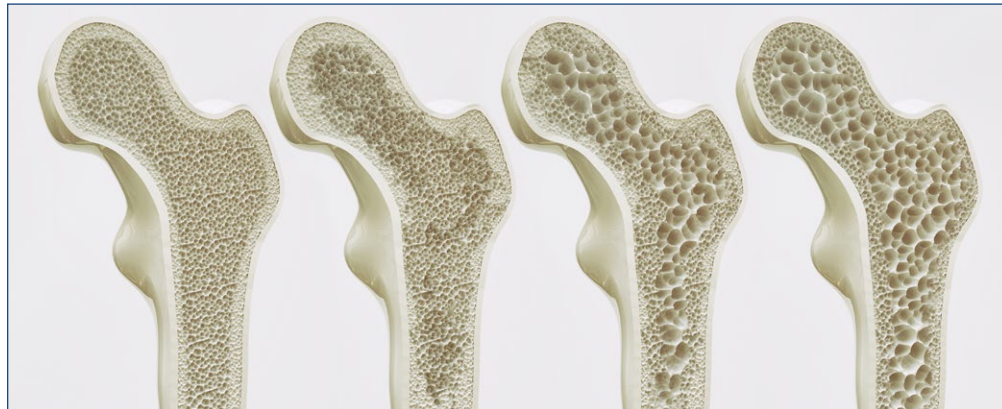


# BONING UP ON OSTEOPOROSIS

One of the health concerns we need to pay close attention to as we grow older is osteoporosis – a bone disease that occurs when the body loses too much bone, too little bone or both. As a result, bones become weak and may break from a fall or, in severe cases, from sneezing or minor bumps.

The National Osteoporosis Foundation estimates that about 54 million American adults are at risk for osteoporosis and low bone mass. More than half of U.S. adults over age 50 are at risk of breaking a bone and should ask their doctor if a bone density test is a good idea. For younger people reading this article, proper nutrition and physical activity are critical to maintaining healthy bone mass and preventing broken bones later in life.

Broken bones are a serious complication of osteoporosis,



especially with older patients. These breaks are most likely to occur in the hip, spine or wrist, but bones in other parts of the body can break, too. Or a patient may notice that he or she is losing height, or their upper back is curving forward. If you experience either of these scenarios, check with your doctor right away.

Certain health conditions/diseases and medicines can cause bone loss. If you have any such concerns, discuss them with your doctor.

The good news is that osteoporosis can be diagnosed and treated before anyone breaks a bone. The even better news is that Kelsey-Seybold has an Osteoporosis Clinic <https://www.kelsey-seybold.com/medical-services-and-specialties/endocrinology/osteoporosis-clinic>. For more information or to make an appointment there, call 713-442-3222.



# MEN'S LIVING: STAYING FIT AFTER 50

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According to the World Health Organization, American women live about five years longer than men. Experts say that one reason is that men have greater exposure to on-the-job dangers, a general propensity to high-risk behaviors such as alcohol abuse, smoking, driving recklessly, and the fact that men are typically less likely to visit a doctor when they are sick.

The most important guidelines for a healthy lifestyle after age 50 are the same for men and women at any age:

- Eat a healthy diet.
- Maintain a healthy weight.
- Get 7 to 8 hours of sleep.
- Stay physically active.
- Don't smoke.
- If you drink alcohol, have no more than two drinks a day (standard drink is: 12 ounces of beer/wine cooler, 5 ounces of wine, 1.5 ounces of distilled spirits).
- Get routine exams and screenings.

Following these guidelines can help men age healthfully and reduce the risk of many diseases that are more common in older men, such as heart disease, high blood pressure and diabetes. Even men who have not followed these guidelines until now can benefit from healthy changes. It's never too late to make better choices!

A healthy diet can help men over 50 reduce their risk of heart disease, type 2 diabetes, obesity and certain types of cancer. Fruits, vegetables, whole grains and fat-free or low-fat

dairy products are healthy choices. Lean meats, poultry, fish, beans, eggs and nuts are good sources of protein, too. For heart health and weight management, it's important to eat foods that are low in saturated fats, trans fats, cholesterol, salt and added sugars.

Physical activity is the best way for men over 50 to improve heart health, muscle strength, flexibility and balance. Physical activity helps reduce the risk of some diseases, including dementia.

Aerobic or cardio exercise gets the heart pumping and uses large muscle groups. Walking, biking, and swimming are all aerobic exercises. Strength training involves using weights to build up muscle. Working out with dumbbells or on weight machines are examples of strength training.

Experts recommend both types of exercise. Men who have not been active should consult their doctor before starting an exercise program and select activities they enjoy to improve their odds for success.

The following list includes some of the most important screenings for men over age 50, but does not include all possible screenings. Men over age 50 should consult a physician about what screenings to have and how often.

**Blood pressure.** High blood pressure increases the risk of heart attack, stroke, and other diseases. A blood pressure check is an easy, painless, noninvasive screening that can be done in the doctor's office.

**Cholesterol.** High cholesterol increases the risk for heart disease, and stroke. A blood test is used to measure cholesterol level.

**Prostate cancer.** A simple blood test called the PSA (prostate-specific antigen) test can find early prostate cancer. The U.S. Preventive Services Task Force suggests that all men over age 50 talk to their doctor about having a PSA test and understand the risks and benefits of the test. African-American men have a higher risk than white men for prostate cancer at a younger age and should start talking to their doctor about the test when they are in their 40s.

**Colon cancer.** The American Cancer Society recommends that all men should be screened for colon cancer starting at age 50 until age 75. Several types of screening are available to find polyps in the colon that could develop into colon cancer. Men over age 50 should talk about the different types of colon cancer screening with their doctor. Men with a family history of colon cancer should talk to their doctor about screening at a younger age and those who are over age 75 should talk to their doctor about whether they need to continue being screened.

Men can age gracefully and healthfully with the right diet and plenty of exercise. Remember: It's never too late to start making good decisions.

# 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.

## 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 \$3,820.

## 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 25% of the price (excluding the dispensing fee and vaccination administration fee, if any), and 37% 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 \$5,100.

## STAGE 4 - CATASTROPHIC COVERAGE STAGE

You enter catastrophic coverage when your TrOOP (true-out-of-pocket) costs are \$5,100. 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 \$3.40 or 5% for a generic medication.
- The greater of \$8.50 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 70% 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 5% and you pay the remaining 25% for your brand drugs.
3. You also receive some coverage for generic drugs on Tier 2 and Tier 5. The plan pays 63% of the price for generic drugs and you pay the remaining 37% 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

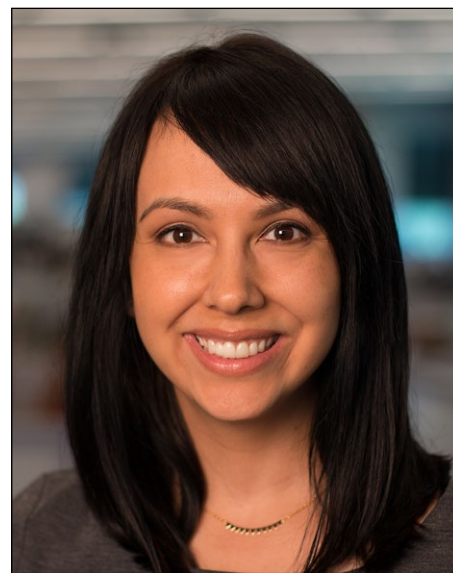
the plan will continue to provide coverage for the medication if you meet the required criteria.

**Q.** *Will I pay 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.

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**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](mailto: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.

# TRANSPORTATION TIPS

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It's been six months since we rolled out our new transportation vendor and we hope you are enjoying it! We wanted to pass on a few tips that might be helpful for the new year.

**Medical Appointments Only** – Remember that your transportation benefit is to be used for non-emergency medical appointments only, please do not ask your driver to make additional stops along the way, as these are not covered by our plan.

**Wheelchair Rides**- To ensure your ride successfully matches with one of our drivers, we recommend booking 24 hours in advance for wheelchair rides.

**Are you in the correct vehicle?**  
Make sure you confirm with your

driver that they are picking you up. Ask them to confirm your name just to make sure.

**Home-to-Clinic**-Some drivers may try to contact you at the phone number you provided at the time of booking to let you know he/she is approaching your home. Please be ready 10-15 minutes prior to your scheduled pick up time. **The driver will not knock** on your door when he/she arrives at your home. When you book your ride, please provide the customer service representative with any special pick up instructions that will aid the driver such as if you live in a gated community with a security code etc.

**Clinic-to-Home**- Some drivers may try to contact you at the phone

number you provided at the time of booking to let you know he/she is approaching your pick up location. If you have initiated a pick up, please answer the call even if you are unfamiliar with the phone number so you and the driver can coordinate your ride home.

**Drivers should not ask you to pay for the ride or provide a tip.** If a driver asks you for money, tell them the trip is paid for by your health plan.

**Don't Forget!** If you cancel or reschedule **your doctor's appointment**, please remember to cancel/reschedule your transportation by calling (713) KCA-RIDE.

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Important Plan Information

11511 Shadow Creek Parkway | Pearland, TX 77584

