



summer calendar

JUNE



June is National PTSD Awareness Month. Learn about resources at ptsd.va.gov

14

Happy Birthday U.S. Army! Flag Day

19

Father's Day Juneteenth

21

Summer begins (at last!)

JULY

4

Independence Day

9

Eid al-Adha (est.)

AUGUST

4

Happy Birthday U.S. Coast Guard!

8

Victory Day (Rhode Island)

SEPTEMBER

5

Labor Day

11

Patriot Day

18

Happy Birthday U.S. Air Force!

22

Autumn begins

25

Rosh Hashanah starts at sundown

COMMUNITY

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WELLNESS





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and teens PAGE 6 Keeping little ones sun-safe • If your eyelid twitches PAGE 7 Our 24-Hour Nurse Advice Line • When to worry about poison ivy PAGE 8 PTSD: What it is and where to find help PAGE 10 Enjoying the best of southern New England's summer produce

FITNESS





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Great spots for walking in southern New England BACK COVER Where an active US Family Health Plan member likes to hike

US Family Health Plan members choose from a network of over 2,000 civilian primary care providers and thousands of specialists, plus a large network of civilian hospitals.

Who We Are

US Family Health Plan of Southern New England is a Department of Defense TRICARE Prime option, and one of six regional US Family Health Plan programs across the nation. Our large network of civilian doctors, hospitals, and other health providers serves Plan members who live in Massachusetts, Rhode Island, and parts of southern New Hampshire and northern Connecticut.

We pride ourselves on friendly, personal service. If you have questions, call us at **1.800.818.8589**. You can also get to know us better at **usfamilyhealth.org** or at **facebook.com/USFHP.SouthernNewEngland**.



a message from Gail Schlesinger, our Senior Vice President and Plan CFO



Lending a Hand

In March, my neighbors had a new baby girl named Emmie. When I dropped off a small gift, I told the couple that if they were ever in a pinch and needed some help, to please give me a call.

We had run into each other several times since then and they appeared to have everything under control. But things were different this week. They sent me a text one day to ask if by any chance I could take Emmie for an hour or so that night. They were preparing for their COVID-delayed wedding celebration and couldn't get anything done with a seven-week-old who wanted to be held all the time. Not only was I delighted to take care of this beautiful little girl, but I was happy they remembered that I was there if they needed help.

When I dropped Emmie off later that night, they commented that when they realized they needed help, they remembered my offer. They also said that from our interactions they were sure that I was someone they could trust with their precious newborn.

This outreach for help and then "being there" reminded me of what we at US Family Health Plan strive to do for all of you. You may not need us today, but there will probably be a time for each of you when you need that helping hand. Whether you need to understand your medications better, you're facing a complex medical condition, or you simply don't understand your benefits, we're here to help.

If you've never used our mail order pharmacy, or you don't remember the details, please keep in mind that in addition to filling your prescriptions, our pharmacists can help you with questions about medications. They're an amazing team and our members often compliment them. "Pharmacy is 10+, courteous, very pleasant and helpful," one note recently said. If you need to reach them, call **877.880.7007** (Monday through Friday, 8:30 am to 5 pm) and press 0 to be transferred to a staff member who can help.

If you're facing a medical issue and would like some help or advice, you can call our Member Services team at **1.800.818.8589** and ask to be connected to our Case Management team. You don't need a referral from your PCP.

The same goes for any billing, referral, benefit, or enrollment issues. Don't hesitate to reach out to Member Services. If they can't answer your question, they'll talk to other team members to get you the assistance you need.

Our team is knowledgeable and thoughtful and takes pride in serving you. Of course, we aren't perfect. If you ever run into an issue that isn't getting resolved, please don't hesitate to call my office at **617.562.5505**. I always want to be there for you to lend a helping hand.



Welcoming Holyoke Health

We're pleased to add Holyoke Health, with over two dozen providers, to the US Family Health Plan network. You can learn more about our newest family member at **hhcinc.org**.

Holyoke Health Center

230 Maple Street Holyoke, MA 413.420.2200

Chicopee Health Center

505 Front Street Chicopee, MA 413.420.2222

Staying on Top of Plan Information



Keep in mind that you can learn the basics and more about your US Family Health Plan benefits at usfamilyhealth.org. You'll have access to our online Member

Handbook, plus information about our Home Delivery Pharmacy, telehealth, and more. You can also register here for our Secure Member Portal, where you can access claims, referrals, and authorizations.

The Scoop on **Medicare Part B**

For "grandfathered" members

If you joined US Family Health Plan before October 1, 2012, you can still have Medicare coverage. For each individual member who has Medicare Part B coverage, there is no annual enrollment fee for US Family Health Plan, and no copayments for any covered services except prescriptions.

- Members may not use their Medicare benefit for services covered by US Family Health Plan. This restriction prevents duplication of coverage under government-sponsored programs.
- Members may not use Medicare for a service that has been denied or for unauthorized care obtained from an out-of-network provider.
- Members may not enroll in Medicare-sponsored managed care plans (HMOs) while enrolled in **US Family Health Plan.** This includes Medicare Advantage Plans, also known as Part C plans.

- The use of Medicare benefits by a US Family Health Plan member for covered services is grounds for disenrollment from the Plan. However, the use of Medicare for services not covered by US Family Health Plan, such as end-stage renal disease (dialysis), is allowed.
- For members ages 65 and over who were with the Plan before October 1, 2012, having Medicare Part B is not required for continued enrollment in the Plan. But if you have Medicare Part B, we urge you to retain this coverage. If you don't enroll when you're initially eligible, or you drop Medicare Part B and choose to enroll later, you will pay a higher Part B premium and there will be a waiting period before your coverage is effective.
- · If you ever disenroll from US Family Health Plan or move out of our service area, you must have Part B to continue to receive TRICARE benefits.

Questions? Call Member Services 1.800.818.8589.





Anxiety and Depression in Children

Early treatment is key

The U.S. Preventive Services Task Force has released a draft recommendation that all children between the ages of 8 and 18 be screened for anxiety. The task force had previously recommended that all children between the ages of 12 and 18 be screened for depression. These recommendations appear against the backdrop of an explosion in mental health referrals and an increase in teenage suicide.

A national emergency

Before the COVID-19 pandemic, a national survey found that 8 percent of children had a current anxiety disorder. With the pandemic, that number has increased significantly. Data from the Centers for Disease Control and Prevention released in April 2022 found that 37 percent of youth have experienced poor mental health since March 2020. In the fall of 2021, the American Academy of Pediatrics, along with the American Academy of Child and Adolescent Psychiatry and the Children's Hospital Association, issued a statement calling children's mental health a national emergency.

Screening tests

The screening tests are simple questionnaires that providers can administer to adolescents. If the children answer enough of the questions positively, it indicates a high level of anxiety or depression. The goal is to identify children at risk early on in their illness, so that they can be treated before a crisis. Some mental illnesses are easy to spot, but anxiety and depression in children are not. Many pediatricians are

already using these screening tests to identify children at risk so they can be referred for treatment before problems grow worse.

The task force noted that untreated anxiety can be serious. In the short term, anxiety can cause physical symptoms, such as headaches or upset stomachs, and can cause children to avoid school, outside activities, or social situations. Anxiety can increase the risk of children developing poor coping mechanisms, such as substance use, or can lead to panic attacks or depression.

Early treatment is key

In most cases, when children's anxiety is treated early, anxiety medication may not be necessary. Starting treatment earlier may mean that a child won't need to take medication later in life.

Furthermore, the younger a child is when screened for anxiety or depression, the easier it is to treat a problem. That's because many mental health problems worsen with age. Also, if providers treat a problem when the child is younger, treatment often requires fewer sessions than if the problem is more complex in an older child.

If you feel your child may suffer from anxiety or depression, please discuss it with their primary care provider.



Charles Rollinger, MD, is our Vice President of Medical Management and Quality

You can learn more about anxiety, depression, and other emotional concerns at **healthychildren.org**, a comprehensive parenting site provided by the American Academy of Pediatrics. Click on "Health Issues," then on "Emotional Problems."



Sun-Smart Tips for Children

Just a few serious sunburns can put your child at risk for skin cancer later in life. Kids, just like adults, need protection from ultraviolet (UV) rays when they're outside. Be sure to provide your child with:

- Shade when necessary. Plan indoor activities in the middle of the day (from 10 am to 2 pm). If that's not possible, find shade under a tree, umbrella, or pop-up tent. Keep a baby under six months old out of direct sunlight altogether.
- A hat that shades the face, scalp, ears, and neck.
 If your child wears a baseball cap, be sure to protect exposed skin with sunscreen.
- **Sunglasses.** They protect your child's eyes from UV rays, which can lead to cataracts later in life.
- A broad-spectrum sunscreen with an SPF (sun protection factor) of at least 15. For the best protection, apply sunscreen generously 30 minutes before your child goes outdoors and reapply every two hours and after swimming. Remember to protect ears, noses, and tops of feet.

Source: CDC.gov/healthequity/keep kids safe this summer





The Mystery of the Vibrating Eyelid

Many people experience mild twitching of an eyelid when they're under stress or sleep deprived. The twitching may happen on and off for a few days. Although the twitching can be annoying, it usually stops on its own. You can help minimize the twitching if you:

- Get more rest
- Reduce your intake of caffeine
- Wear sunglasses in bright light
- Stay hydrated

Rarely, eyelid twitching can be a sign of a serious medical condition. Be sure to talk with your health care provider if the twitching lasts for a long time or spreads to other parts of your face, your eyelid suddenly droops, or both eyelids are twitching at the same time.

Worried About a Tick Bite?

You Can Call Our 24-Hour Nurse Advice Line

Summer means more time outdoors, which is healthy and fun for kids and grown-ups alike. But it can also mean poison ivy, tick bites, and minor scrapes and scratches. Fortunately, as a US Family Health Plan member, you can use our handy, reliable, free Nurse Advice Line, available 24 hours a day, 7 days a week.

Call **1.866.767.4546** and a registered nurse can help you:

- Decide whether you should go to the emergency room
- Learn more about medications and medical tests
- Learn new ways to stay healthy

Through the Nurse Advice Line, you also use the "Healthwise Audio Health Library," which covers more than 300 health, wellness, disease, and medical-test topics. Go to **audiohealthlibrary.carenet.com** to learn how to access the audio articles. If you don't have access to the internet, call **1.866.767.4546** and say that you'd like to use the audio library.

Please note that you can also find the Nurse Advice Line number on your Member ID card.



Poison Ivy

Poison ivy isn't really "poison," but it can cause an allergic reaction to a resin called "urushiol" in the plant's leaves. Some people aren't sensitive to it, but others can face unpleasant itchy rashes and blisters that last up to three weeks.

If you think you've been in contact with the plant, wash your skin right away. If you have a mild case, you can treat it with over-the-counter products like calamine lotion or hydrocortisone cream. But see a doctor if:

- The rash is severe or widespread or if it affects your mouth, eyes, or genitals.
- Blisters are producing pus.
- You develop a fever higher than 100° F.
- The rash doesn't get better within two or three weeks.

Seek emergency care right away if you inhaled smoke from burning poison ivy or are having trouble breathing after contact with poison ivy.



PTSD

A Normal Response to an Abnormal Situation

If you or someone you care about shows symptoms of Post-Traumatic Stress Disorder (PTSD), you aren't alone. According to the U.S. Department of Veteran Affairs, every year, 11 to 20 percent of veterans of Operations Iraqi Freedom and/or Enduring Freedom have PTSD related to combat experiences. The rate for Gulf War veterans is about 12 percent. The most recent study of Vietnam veterans found that 30 percent experienced PTSD in their lifetime.

Military PTSD encompasses a wider category than combat-related stress. Military sexual trauma, sometimes called "MST," is also a cause of PTSD. This means any sexual harassment or sexual assault that occurs while you are in the military. It can happen to both men and women, during peacetime, training, or war.



Symptoms

Symptoms of PTSD can start soon after a traumatic event, or they can begin months or even years later. They include:

- Reliving the event through flashbacks and nightmares. A sight or sound fireworks, a car backfiring, a scene in a movie can bring back the event. Current events may also call up difficult memories. The COVID-19 pandemic brought back painful memories of feeling helpless for many people, and the invasion of Ukraine has made many service members relive their combat experiences.
- Feeling keyed up. Sometimes called "hypervigilance." Feeling constantly on the lookout for danger. You might get angry easily or have problems sleeping.
- Numbness. Finding it hard to talk about your feelings or finding that loving feelings you once had are diminished, or feeling at a distance from reality.
- Feeling a need to misuse alcohol or drugs to reduce feelings of stress.

Treatment

If symptoms last longer than four weeks, cause you intense distress, or interfere with your personal or work life, it's important to get treatment. Treatment can include:

- Cognitive behavioral therapy
- Eye-movement desensitization and reprocessing (EMDR)
- Talk therapy, either one-on-one or in a support group
- Medication

Resources

US Family Health Plan

Members can self-refer for the first eight mental health visits in a Plan Year (January 1 through December 31). Before you make an appointment, call **1.800.208.9565**, identify yourself as a US Family Health Plan member, and ask for a list of authorized network mental health providers.

National Center for PTSD

ptsd.va.gov

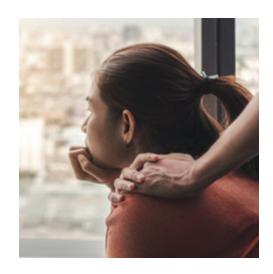
A comprehensive, expertly prepared supply of information and online tools from the U.S. Department of Veterans Affairs for people with PTSD and Military Sexual Trauma, including help for their families and friends. The center's "PTSD Coach" app provides grounding exercises to help people cope with symptoms.

Home Base Veteran and Family Care

homebase.org 617.724.5202

A partnership between the Red Sox Foundation and Massachusetts General Hospital that provides comprehensive services to veterans of all wars and to their families.

If you or someone you care about shows symptoms of Post-Traumatic Stress Disorder (PTSD), you aren't alone.





When it comes to peas

Fresh Is Best!

Here in southern New England, the arrival of fresh peas, always earlier than corn and tomatoes, means that summer is really here. There are few kitchen-prep experiences as pleasant as shucking a pea pod to find the little kernels tucked inside, preferably while you sit on your front steps or a porch.

Freshly shucked peas aren't just adorable — they're good for you.

They're packed with fiber and hearthealthy minerals like potassium, magnesium, and calcium. They're also dense with vitamin A, which supports your eyesight.

Here are two ways to use the fleeting fresh pea to provide cool relief on a hot summer night.

Hutchins Farm Produce Schedule

Yes, peas show up around the middle of June in southern New England, but what about potatoes? Eggplants? Leeks? Go to **Hutchinsfarm.com** and click on "Produce Information." You'll find a chart of approximate growing times for summer produce in this area.





Summer Rice Salad with Peas and Herbs

2 large servings

2 cups cooked and cooled rice, white or brown

½ cup olive oil

Juice from one lime or lemon (or add more if desired)

3 cups shelled peas, blanched in simmering water for 2 minutes, then drained and cooled

½ cup each of mint and parsley leaves, washed, dried, and chopped

 $\frac{1}{2}$ cup red onion, chopped or thinly sliced

In a medium-size salad bowl, mix the olive oil and lime or lemon juice together. Add the peas and let them soak up the dressing for five to ten minutes. Add the rice, herbs, and red onion and toss everything together. Add a sprinkle of salt if the salad seems to need it.

Switch it up: Use frozen peas instead of fresh, cilantro or basil in place of either of the herbs, and spike with red-pepper flakes at the end if you want to give the salad a bit of kick.



Pea Gazpacho

4 cup-size servings

2 cups buttermilk

4 cups shelled peas

12 mint leaves, washed and dried

2 tablespoons finely chopped scallions

Heat, but don't boil, the buttermilk in a medium saucepan. Add the peas and simmer the mixture for no more than two minutes — enough to cook the peas without letting them get mushy. Pour into a blender, add the mint, and blend on low for one minute.

Refrigerate until cold, and top with the scallions just before serving.





Physical Activity

Break It Up and It's Still Good for You

The latest Physical Activity Guidelines for Americans asks adults to aim for 150 minutes of moderate exercise in a week. But what counts as "moderate"? And what about the timing? If you go on a two-and-a-half-mile hike on Sunday afternoon, can you stay on the couch for the rest of the week?

What's "moderate"?

"Moderate," according to the Guidelines, can mean quick walking (another reason to get that puppy you've always wanted), swimming, biking, or vigorous dancing — anything that gets your heart rate up.

The 30-minute chunk

As for spacing out those 150 minutes, experts recommend breaking them into 30-minute chunks, five times a week. Many people can work this easily into everyday life. Although the time commitment is low, the rewards are high: a lower risk of premature death and of many medical conditions, including cardiovascular disease, several kinds of cancer, and type 2 diabetes.

The even smaller chunk

If your life doesn't allow for half hours of exercise, you can benefit from even shorter bursts. Taking a break from sitting to climb a flight of stairs, walking around your building, or doing some quick tidying up all count toward your healthy 150 minutes. If you keep the intensity of these short bouts relatively high, they're even better for you.

What about that long weekend hike?

A 2017 study reported that "weekend warriors" — that is, people who fulfill their physical activity in one or two sessions a week — may still lower their risk of premature death, cardiovascular disease, certain cancers, and type 2 diabetes. But they may increase their risk of exercise-related injuries and miss out on some of the benefits of regular exercise, including improved mood.

Source: G O'Donovan, I Lee, M Hamer, E Stamatakis. Association of "Weekend Warrior" and Other Leisure Time Physical Activity Patterns with Risks for All-Cause, Cardiovascular Disease, and Cancer Mortality, JAMA Intern Med. 2017 Mar 1; 177(3); 335-342.

Great Walks in Southern New England

We're lucky to live near some terrific summer walking spots, including these:

Ashuwillticook Rail Trail

Cheshire, MA

An old railroad track converted into a 10-foot-wide paved trail running 12.7 miles through the Hoosic River Valley. mass.gov/locations/ashuwillticook-

rail-trail

The Marginal Way
Ogunquit, ME
Along the coast from Perkins
Cove to Ogunquit Beach (wheelchair accessible).

ogunquit.org

Ravenswood Park

Gloucester, MA Ten miles of carriage paths and trails for walking.

thetrustees.org

Colt State Park

Bristol, RI Canoeing, kayaking, biking, walking, and spectacular views of Narragansett Bay.

riparks.com

For ideas about places to hike near Southwick, Massachusetts, be sure to read the note from member Joseph DiMartino on the back cover of this issue.





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Get Outside

What a relief it is to be able to get out and about more, even if the extra-warm summer weather means getting out of bed a little earlier to hike or bike.

A big thank-you to member Joseph DiMartino of Southwick, Massachusetts, for insights into satisfying hikes in his neck of the woods:

"We're fortunate to have quite a few trails available. Since we are in our 60s now, day hikes suit us very well. Our favorites are parts of the M&M [Metacomet-Monadnock] Trail up on Mount Tom in Holyoke, and the New England Trail as it winds through Agawam and Southwick. Another is the McLean Game Refuge in Granby, Connecticut.

We like to get a few hours in with a mix of hills and flat. We also enjoy the bike paths, the Norwottuck Rail Trail and the Columbia Greenway, which connect to quite a few others and provide many miles of enjoyment."

Where do you like to hike, bike, or wander? Please let me know at **kerry.tucker@usfamilyhealth.org** and I'll pass your tips along in an upcoming issue.

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