

winter calendar

DECEMBER

21

Winter begins



It's not too late to get a flu shot!

25 Christmas Day

31 New Year's Eve

JANUARY

New Year's Day



Check out our Facebook page at facebook.com/
USFHP.SouthernNewEngland.

21Dr. Martin Luther King, Jr. Holiday

FEBRUARY

2 Groundhog Day



February is American Heart Month. Learn ways to stay heart-healthy at heart.org.

14 Valentine's Day

18 Presidents Day

MARCH

10

Daylight Saving Time begins (set clocks ahead)

17 St. Patrick's Day

20 Spring begins

FITNESS





PAGE 7 Dr. Rollinger on avoiding slips and falls
PAGE 10 Staying strong to

stay young PAGE 11 Walking tips for ice and snow

WELLNESS

COMMUNITY





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Lowering flu risk PAGE 8 A new way to manage alcohol use PAGE 12 No-stress winter stew





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Top member satisfaction

ratings again! PAGE 4 The 2018
Colonel Robert Hawes Award for
Community Service

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**. If you're nearby, come visit our headquarters in the historic Brighton Marine building in Brighton, Massachusetts. You can also get to know us better at **usfamilyhealth.org** or at **facebook.com/USFHP.SouthernNewEngland**.



a message from David Chicoine, our Senior Vice President and Plan CEO



Making it simple for you to use our health plan is a goal that we have been committed to throughout the last three decades.

Simplicity

I was visiting my 90-year-old mother recently to help her go through some things she wanted to give to her grandchildren. As we looked through pictures and various trinkets, she told of the stories behind the images or items. It was a full life captured in memories of experiences enjoyed with people she loved and cared about. It made her happy to talk about them. The interaction reminded me that the importance of our lives is tied more to the experiences we share than the wealth or material things we accumulate. I made a promise to myself to focus more on living for the experience than on living for having nice things.

It may seem obvious that we should keep our lives simple. But sometimes our culture is oriented around acquisition of things or having the next best toy. It is easy to get caught up in that. There are certainly pleasures to be had by working hard and treating yourself to a present from time to time. However, as I was sitting with my mom talking about all the experiences of her life, she never once talked about the things she bought or had. Rather, she talked

about the people who had passed through her life and with whom she shared good times. Her greatest joy is to spend time with her grandchildren. She remains fully engaged in life even at 90 but she does so with simplicity and directness.

I realized that at US Family Health Plan, our goal is much the same: to take the complexity of the health care system and make it more manageable and simple to navigate. We bring together the important resources that our members need in order to live long and healthy lives, and we deliver them as seamlessly and simply as possible. As I am sure you can imagine, it can be a challenging endeavor to coordinate all the components of health care, from hospitals to doctors and nurses, pharmacies, and the thousands of ancillary providers of services. There are myriad regulations to follow and to administer. But making it simple for you to use our health plan is a goal that we have been committed to throughout the last three decades.

I wish you all a happy new year with a focus on the experiences of life well lived.



Understanding Referrals

Because US Family Health Plan is a TRICARE Prime option, government regulations require us to have a referral-management system. In order to see a specialist, you need to obtain a referral from your PCP. In some cases, you will also need authorization from US Family Health Plan.

In-network specialists

To see a specialist in the US Family Health Plan network, you need a referral from your PCP for the service to be covered at the in-network rate. You can find in-network specialists at **usfamilyhealth.org** (click on "Our Network," then on "Find a Doctor") or by calling Member Services at **1.800.818.8589**.

Out-of-network specialists

To see an out-of-network specialist, you need (1) a referral from your PCP, and (2) authorization from US Family Health Plan. Your PCP initiates the authorization process by calling Member Services and submitting the requested documentation.

If you don't obtain a referral

If you see a specialist without obtaining a referral from your PCP (or, in the case of out-of-network specialists, both a PCP's referral and Plan authorization), you will pay at the Point of Service rate, which is significantly more expensive than payment for services rendered with a referral or, in the case of out-of-network services, with a PCP's referral and Plan authorization.

Emergencies

You don't need a referral in an emergency. Just go to the emergency room. But if the visit leads to a follow-up appointment, contact your PCP for a referral.

Questions?

Please call Member Services at **1.800.818.8589.** ■

Top Satisfaction Ratings!

The 2018 CAHPS survey of adult health plans in the U.S. once again places US Family Health Plan in the 99th percentile for member satisfaction. The survey results are invaluable to us: they help us understand what we do well and what we can do better. Warm thanks to all who participated.

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Massachusetts Military Heroes Fund Receives 2018 Colonel Robert Hawes Award for Community Service

Kathryn King, Program Assistant with the Massachusetts Military Heroes Fund; David Chicoine, Senior Vice President and CEO of US Family Health Plan; Diane Nealon, Executive Director of the Fund; and Michael Dwyer, President and CEO of Brighton Marine Health Center.



Memorial Day Garden of Flags, Boston Common.

US Family Health Plan and Brighton Marine have presented the annual Colonel Robert Hawes Award for Community Service to the Massachusetts Military Heroes Fund, a Brighton-based organization that helps families of fallen service members.

The fund, launched in 2009, was created to provide real and significant services, including:

- Financial grants to help keep a household stable during the crisis of losing a family service member
- Social work to help families address emotional issues that may stand in the way of obtaining benefits and services
- Guidance and advocacy related to obtaining benefits, including referrals to resources
- Community-building events that bring families together in a relaxed and supportive environment

The fund also organizes the imposing Garden of Flags on Boston Common every Memorial Day weekend. Each flag planted represents a Massachusetts service member who gave his or her life in military service. The 2018 garden contained 37,000 flags.

Diane Nealon, Executive Director, accepted the award on the fund's behalf, which included a check for \$5,000.

As he presented the award, David Chicoine, Senior Vice President and CEO of US Family Health Plan, spoke about the important qualities that Colonel Hawes exemplified. "Ultimately," he said, "what Colonel Hawes stood for was caring about people and giving back to the community."



Colonel Robert Hawes

Robert Hawes, a retired Army colonel, dedicated much of his life to ensuring that military members and their families receive the services they deserve. Through his efforts, the Brighton Marine Health Center, slated to close in the 1980s because of federal budget cuts, remains open and continues to thrive as a nonprofit community partnership.

Colonel Hawes, who never received payment for his work, became Brighton Marine's first President and Chairman and later Chairman Emeritus. He served the organization until his death in 2007.



The American Academy of Pediatrics (AAP) has updated its guidance for children's rear-facing car seats.

Previously, the AAP encouraged families to seat children in rear-facing car seats until at least age 2. The new recommendation is to seat children in rear-facing car seats for "as long as possible, until they reach the highest weight or height allowed by their seat."

Whether you're a parent, grandparent, or another care provider for children, it's important to review the AAP's guidance about car seat safety:

- 1 Children should ride in a rear-facing car safety seat as long as possible, up to the limits of their car safety seats. This includes nearly all children under age 2 and many children up to age 4.
- 2 Once the children meet the limits of their rear-facing seats and are turned around, they should remain in a forward-facing car safety seat up to that seat's weight and height limits. Most car seats can accommodate children up to 60 pounds or more.
- 3 When children exceed the forward-facing seat's limits, they should ride in a belt-positioning booster seat until they can use a seat belt that fits correctly.
- Once they exceed the booster limits and are large enough to use the vehicle seat belts alone, children should always use both the lap and shoulder belts.
- 5 All children under age 13 should be transported in the rear seat of vehicles for optimal protection. ■

Children should ride in a rear-facing car safety seat as long as possible, up to the limits of their car safety seats.

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Cough—and Sneeze—Like a Vampire

INTO YOUR ELBOW



Winter brings more than snow to New England: the cold and flu season is blowing in, too. One way you can help limit the spread of infection is by covering your mouth when you sneeze or cough. *But not with your hand.*

If you don't have a tissue handy, please cough or sneeze into your elbow. When you cough or sneeze into your hand, the droplets that are released land on your skin and are transmitted to whatever you touch next. Door handles, bus poles, and elevator buttons become contaminated sites ready to spread germs to the next person who touches them.

It's Not Too Late for Your Flu Shot

Although the Centers for Disease Control and Prevention (CDC) recommends that people get a flu vaccine by the end of October, getting vaccinated later can still be beneficial.

If you haven't had your flu shot already, you can make an appointment with your Primary Care Provider or stop in at a pharmacy clinic. Either way, US Family Health Plan covers the cost.

100 YEARS AGO

The 1918 flu pandemic killed over 50 million people across the world, including 675,000 in the United States. About 40,000 of the U.S. deaths were service members, a drastic blow to the military in wartime.

Discovery in 1930 that influenza was a virus, not a bacterium, led to the development of a flu vaccine. It was made available to U.S. service members in 1945 and to the general public the following year. Learn more at **cdc.gov/flu**.



SLIPS, TRIPS, AND FALLS

Limiting the Risks

We are in the months when snow and ice are on the ground. Here in New England, people are growing more concerned about falling and hurting themselves. Those over 65 have special cause for worry, because about 4 out of 10 people this age fall each year.

Many of these falls result in hip fractures, which are painful, serious, and a major life disruption. About three quarters of people who fracture their hip can never resume the level of function that they had before the fracture occurred.

Steps to take

Fortunately, there are steps you can take to reduce your fall risk, indoors or out.

- Wear appropriate footwear. Avoid shoes with high heels or sticky bottoms, which can get caught in doorways or carpets. Outdoors in the winter, wear boots that fit well and have a thick, non-slip tread and wide, low heels.
- Make sure that you can see well if you need to use the bathroom at night. Many falls occur at night when people don't want to turn a light on for fear of disturbing their partner. Keep a flashlight by your bed to help light your way, and install nightlights in the hall and bathroom.
- Use a cane or walker if you have a physical problem such as arthritis or a neurological condition that makes it difficult to walk. Many of my patients won't use such aids because, they say, "they're for old people," but the consequences of not using them can be severe.

- Drink alcohol in moderation, if at all.
 Alcohol is known to increase the risk of falls.
- Avoid storing things on high shelves.
 Reaching and climbing can cause serious falls.
- Clear your floor. Put shoes in an out-ofthe-way place when you're not wearing them. Keep slippers on a bedside table. Remove scatter rugs and avoid keeping piles of magazines and other papers on the floor.
- Be aware that many prescription medications can affect balance and increase your chances of falling.
 Sleeping pills and anti-anxiety pills are particular risks, but other medications, such as high-blood pressure medications, can cause lightheadedness when a person gets up suddenly. If you're taking medications that affect your balance, talk with your doctor about ways to stay safe.

Staying fit is key

To reduce the risk of falling, it's important to stay in good physical condition. Regular exercise to strengthen muscles and promote balance and coordination will reduce the risk of injury. Activities such as tai chi, which is available at many senior centers, and yoga have been shown to help.

The National Institute on Aging at the National Institutes of Health provides instructions for some simple balance exercises at go4life.nia.nih.gov/exercise-type/balance. ■



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

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VetChange

A New Way to Manage Alcohol Use

Veterans and active-duty service members who have experienced combat stress often turn to alcohol to try and reduce symptoms like insomnia, hypervigilance, and anxiety. Unfortunately, over time, alcohol tends to make combat stress symptoms worse.

Clinical programs are helpful, but many veterans don't choose to use them. They may live far from facilities or worry about the stigma of seeking treatment. VetChange, an online program developed by the National Center for PTSD, the Boston VA Healthcare System, and Boston University, can help.

With VetChange, veterans can learn ways to manage their alcohol challenges in private and at their own pace, on a smartphone, tablet, or computer. The service is free and confidential.

To start using VetChange, go to www.ptsd.va.gov/apps/change. ■





For healthy adults, drinking more than these single-day or weekly limits is considered "at-risk" or "heavy" drinking:

MEN — More than 4 drinks on any day or 14 per week

WOMEN — More than 3 drinks on any day or 7 per week

About 1 in 4 people who exceed these limits already has an alcohol-use disorder, and the rest are at risk for developing an alcohol-use disorder. People can also have problems drinking less than these amounts, particularly if they drink too quickly.

Source: Rethinking Drinking. The National Institute on Alcohol Abuse and Alcoholism.

If You Host a Holiday Party...

Holiday gatherings can be a great way to reconnect with friends and spread good cheer. But they can also be settings where people drink more alcohol than they intend to. To keep a lid on the alcohol situation when you're hosting:

- Offer a variety of nonalcoholic drinks water, club soda, and juice. They can help counteract alcohol's dehydrating effects and may slow the rate of alcohol absorption into the body. They also make it easier for people to avoid drinking alcohol if they are cutting down or have stopped drinking.
- *Provide plenty of healthy foods and snacks.* Food can slow the absorption of alcohol and reduce the peak level of alcohol in the body by about one third.
- *Take "no" for an answer.* When someone says no or puts their hand over their drink, it really does mean that they don't want more.
- Help your guests get home safely. Use designated drivers and car services.

Source: Rethinking Drinking. The National Institute on Alcohol Abuse and Alcoholism.

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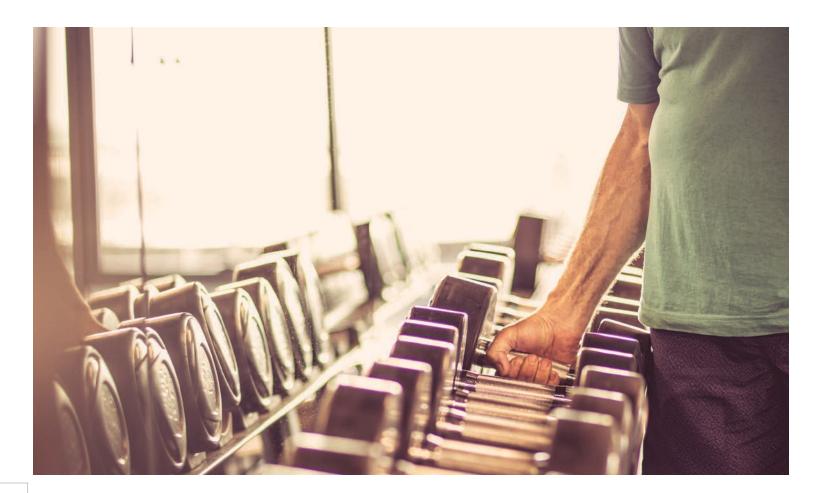
Stay Strong to Stay Young

As we age, many of us start to lose muscle. This is usually caused by a condition called "sarcopenia," which can start as early as age 40 and causes some people to lose as much as half of their muscle mass by age 70.

Causes

Several factors can contribute to sarcopenia, but these are the most common:

- Less physical activity. People may walk or exercise less because they are afraid of falling (see Dr. Rollinger's article on page 7). Or they may spend increasing time sitting to use computer screens and other devices.
- **Inadequate protein.** Building and maintaining muscle requires adequate nutrients, especially protein, which is the main component of healthy muscle tissue. Protein and exercise work together to build muscle.



Treatment

Fortunately, sarcopenia can be slowed and sometimes even reversed. Two key steps are to eat plenty of protein and perform strength-training exercise. Protein works together with exercise to build muscle.

Kick up your protein intake

Seek out foods that are rich in the amino acid called "leucine." They include fish, chicken, beef, eggs, nuts, seeds, milk, and cheese.

Strength training

Exercise makes muscles contract and release "muscle growth factors," which leads to muscle growth. No matter what your age, you can benefit from a strength-training program using resistance bands or free weights.

The National Institutes of Health provides easy-to-understand instructions for a series of strength-training exercises at **go4life.nia.nih.gov/exercise-type/strength/**. Be sure to start slowly and increase repetitions gradually.

If you haven't exercised in a while or you have a health condition, be sure to talk with your doctor about ways to start an exercise routine safely.



PROTEIN POWER SNACKS

If you tend to reach for potato chips or sweets for a snack, think about going for these instead:

- A hard-boiled egg
- Peanut butter or almond butter on apple wedges or banana slices
- Canned tuna on whole-grain crackers
- Cheese cubes mixed with nuts and chopped celery
- · A small glass of milk



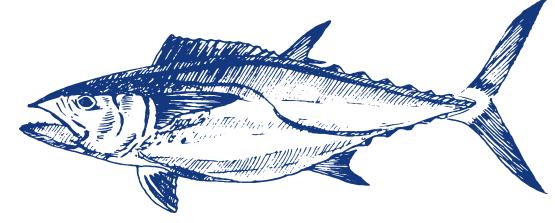
Safe Winter Walking

New England winters seem to arrive without notice. One day you're taking a sunny afternoon walk in your sneakers, and the next morning the sidewalk is covered with ice. Be prepared.

- ☐ Allow extra time to reach your destination so you don't feel rushed.
- ☐ Wear winter boots that fit well and have thick, non-slip treads and low heels.
- ☐ Consider using stretch ice cleats that slip on over your shoes or boots.
- ☐ When getting into and out of a car, hold onto the door frame, not the door itself.
- ☐ If you encounter a slippery surface, point your feet slightly out while you walk, bend slightly, and take short steps or shuffle. ■

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Simple and Tasty

Tuna with White Beans, Celery, and Peppers

Take a break from complicated holiday cooking with this healthy, super-speedy supper. The white beans provide B vitamins, iron, potassium, and zinc. The bell peppers provide a surge of vitamin C. The tuna? It supplies omega-3 fatty acids, which have anti-inflammatory properties, and selenium, an important anti-oxidant.



2 servings (but easy to double)

1 tablespoon olive oil

1 small red onion, sliced

2 celery stalks, sliced

1 red or yellow bell pepper, sliced

1 (15-oz) can of white (cannellini) beans, drained and rinsed or ³/₄ cup of dry white beans, soaked, cooked, and drained

1 (3-oz) can of white tuna in water, drained

½ cup sliced baby arugula or spinach leaves

Heat the olive oil in a skillet over medium heat. Add the onion, celery, and pepper and sauté for 3 or 4 minutes. Add the beans and cook for 2 more minutes.

Add the tuna, breaking it up slightly with a fork. Then add the arugula or spinach slices and cook just until they wilt.

If you want to, sprinkle with a little salt and pepper (or a squeeze of lemon if you're being cautious about sodium) just before serving.

Now take the time you've saved and put your feet up!

Recipe and photo courtesy of Oldways (oldwayspt.org).





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Let the Snow Begin!

Shovel, salt, boots, earmuffs — here in New England we're good at winter-storm smackdowns. We wish you well as you tough out the season. We also wish you warmth in your favorite reading chair, the cozy reassurance of an occasional hot chocolate, and plenty of time to share the holidays with friends and loved ones.

Please remember that we like to hear from you, either on our Facebook page at facebook.com/ USFHP.southernnewengland or by sending a note to kerry.tucker@usfamilyhealth.org.

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