Member Newsletter

The Earlier the

Better: Colon

Cancer Screenings

How a CBC Test Can Help You Understand Your Overall Health

November is Diabetes
Awareness Month!

AND much more!







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CONCIERGE

SERVICE LOCATIONS

Service Area

Concierge Service Locations

★ Headquarters & Concierge Location



BREVARD/INDIAN RIVER/MARTIN/ST. LUCIE

2501 S. Federal Hwy. Fort Pierce, FL 34982 (888) 274-8575

CHARLOTTE/MANATEE/SARASOTA

12145 Mercado Dr., Venice, FL 34293 (888) 850-5315

CITRUS/HERNANDO

8373 Northcliffe Blvd., Spring Hill, FL 34606 (888) 211-9921

HILLSBOROUGH/POLK

3611 W. Hillsborough Ave., Suite 208, Tampa, FL 33614 **(888) 211-9918**

LAKE/MARION/SUMTER

3101 SW 34th Ave., Suites 902-903, Ocala FL 34474 (888) 420-2539

ORANGE/SEMINOLE

92 Dean Rd., Suite 300, Orlando FL 32825 (888) 364-7905

OSCEOLA

1339 E. Osceola Pkwy, Kissimmee, FL 34744 **(888) 609-0690**

PASCO

8601 Little Road, New Port Richey, FL 34654 (888) 609-0698

PINELLAS

3665 East Bay Dr., Unit #220, Largo, FL 33771 (888) 609-0699

VOLUSIA

852-35 Saxon Blvd., Unit #21, Orange City, FL 32763 (888) 389-6018

Register & Do More Online with our Member Portal!

Here are some of the benefits you will receive:



Place & track orders for your over-the-counter medication and diabetic supplies



Print and order your ID CARD, provider directory, formulary and other Plan materials



View your claims activity and benefit information



Track your out-of-pocket expenses. (MOOP)



Try our Personal Health Tracker and other Member Self Management Tools



Find a Plan Doctor, Pharmacy, Hospital and covered drug



Gain access to health & wellness information, including electronic prescription refill reminders



Access important Plan forms and documents from a central location



Complete your Health Assessment Form; enroll in one of our Disease Management Programs

See next page on how to sign up now for the Member Portal.

Log onto www.youroptimumhealthcare.com

click on **Member Login** and **Register Today!**



Medicare Plans

Members

Providers

Agents & Broker

OTC

Quick Link

Sea

Q

Member Login

Optimum HealthCare, Inc. is an HMO with a Medicare contract. Enrollment in Optimum HealthCare, Inc. depends on contract renewal. This Information is not a complete description of benefits. Call 1-866-245-5360 (TTY: 711) for more information. From October 1 to March 31, we are open 7 days a week from 8 a.m. to 8 p.m. EST. From April 1 to September 30, we are open Monday through Friday, 8 a.m. to 8 p.m. EST. Optimum HealthCare, Inc. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Optimum HealthCare, Inc. cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. Optimum HealthCare, Inc. konfòm ak Iwa sou dwa sivil Federal ki aplikab yo e li pa fè diskriminasyon sou baz ras, koulè, peyi orijin, laj, enfimite oswa sèks. Español (Spanish): ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-245-5360 (TTY: 711). Kreyòl Ayisyen (French Creole): ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou.

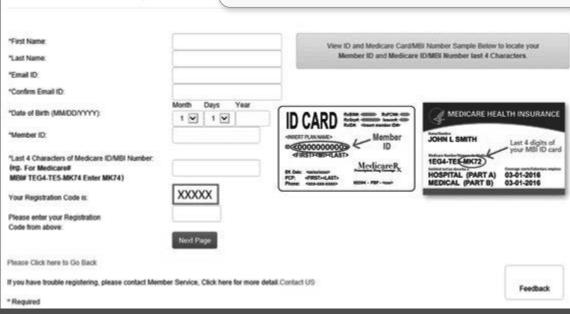
Please check previous page for Member Portal Registration benefits.



If it's your first time accessing the Member Portal, click on the "New User Sign Up" button to create a user name and password to log in with.

Sign in to Member Portal	First Time Users		
Email:	Please create a user name and password. You will need your Member ID Number from your ID Card and Medicare last 4 characters from your Medicare Card. New User Sign Up		
Password:			
Forgot Password Click here for Privacy Policy			
Secure Log In	FAQ		
	Help Manual		

The 'New Member Registration' page will be displayed. Begin by entering in the required information.



www.youroptimumhealthcare.com



New Items Added to our 2023 OTC Catalog

Now we are offering 159 OTC Catalog Items

We care about our member's overall health and wellbeing.

To better serve our members, we have increased our OTC items offered starting in 2023. Eleven new products have been added. Now, members can choose from 159 Items from 19 different categories of products and supplies by ordering online or over the phone.



The following Items might be available to order before 2023. Please log on to the member portal, visit the OTC page on the Health Plan website https://www.youroptimumhealthcare.com/otc-order-online or ask member services for more information while placing your order.

SR. No	Section	Item#	Item	Item Description	Qty.	Price
1	Allergies	1G	Generic Comparable of Claritin	Allergy Relief Tablets, Loratadine 10mg	30 ct	\$8
2	Analgesics	2N	Generic comparable of Bio Freeze	Pain Relief Spray	89 ml	\$12
3	Antacids	3E	Generic comparable of Mylanta	Antacid/Anti-Gas Liquid	335 ml	\$6
4	First Aid	9E	Gauze Roll	Gauze Roll 4"	2 yds	\$5
5		9U	Non-Stick Pads	Non-Stick Pads	10 ct	\$6
6	Miscellaneous	11M	Vaseline	Petroleum Jelly Vaseline	113 gm	\$3
7		11N	Pedometer	Pedometer	1 ct	\$20
8		110	Sharps container	Home Sharps container	1 ct	\$6
9	Topical Oral	12K	Generic comparable of Abreva	Cold Sore Treatment	2 gm	\$25
10		12L	Generic comparable of Biotene	Dry Mouth Spray	30 ml	\$12
11		12M	Generic comparable of Compound W	Liquid Wart Remover	9 ml	\$8



To see the current OTC list and to place an order, visit the Health Plan website to access your member portal account or call us at 1-866-900-2688, TTY: 711.

To place online orders through the OTC (Over-the-Counter) and Diabetic System, you must be an active member and registered through the Member Portal. The Member Portal is a central destination for all information related to your health, benefits, providers, claims and medications.



Do Your Part to Learn How to

Protect Yourself & Your Benefits

Scam calls can seem very real, even scary or urgent in the moment. This tactic is used to create a sense of urgency to get your personal information. With



It is important to always pay attention when speaking to someone you do not know. Scammers may try to contact you in different ways like by telephone, email, postal mail, text messages and fliers. They are looking to steal your personal information such as your Medicare number, which can be used to bill for services you did not receive.

Scammers can also use a fake CallerID name saying they are from Medicare or another known entity, to get you to share your personal information. They might offer to send free medical supplies like crutches, knee braces, canes, topical creams etc., genetic testing kits for DNA swabs to check for cancer or because they are sending out your new Medicare Card.

Please, never give your personal information out to anyone you do not know and trust! It is important that you are always aware and in control of your healthcare benefits.

Here Are Some Tips!



Never give your personal information to anyone you do not know and trust, in person or over the phone.



Medicare and your Medicare Advantage Plan will never contact you for your Medicare Number or other personal information.



Medicare will never call you to sell you anything.



If you get a phone call from someone claiming to be from Medicare, and asking for your personal information like your Medicare Number, hang up!



Never sign up or give out your personal information to any social media ad(s) offering free gift cards for doing lab tests or any other services.



Never enroll for any plan you do not know or trust. Please contact the Plan for assistance if you are trying to change your health plan.



Always check your EOB's (Explanation of Benefits) for any mistakes.

 When you go to your doctor's appointment, write down the dates you went and save any receipts you get from the doctors. That way, you will be able to compare it with the EOB you receive from the Plan to check for any errors.

To report suspected Medicare fraud, contact Optimum HealthCare at 1-866-245-5360

Getting More out of Your Doctor Appointments: Communication is Key



The doctor-patient relationship is an important one. It is built on trust and communication. It is necessary to be able to communicate well with your doctors. This is true whether it is your Primary Care Physician (PCP), a Specialist, or if you are in the hospital. When you feel you are able to openly talk to your doctor, you can have better health results. Your doctor wants to help you with your health. Better health results improve your overall well-being.

You should plan ahead for your next doctor's visit, especially after leaving the emergency department or hospital. It's a good idea to schedule an appointment with your PCP within 7 days after discharge from the hospital or emergency department visit. This includes for inpatient observation stays. Many problems can happen during this time with which your doctor might be able to help. Sometimes doctor's appointments are stressful, or you feel rushed. Preparing ahead of time and writing things down can help to maximize your visit and minimize your stress.

BE PREPARED:

In order to get more out of your doctor appointments, it is essential that you are prepared. Being organized ahead of time can help make the best use of time with your doctor.

- Keep a diary or journal of your symptoms to show your doctor. This gives the doctor a better idea of what has been going on, instead of trying to use your memory to recall and discuss how you have been feeling over a period of time.
- Update your medicine list in preparation for your appointment. This list should include prescriptions, overthe-counter medicines, vitamins, and other supplements such as herbal products. Remember to bring this list (or your pill bottles) with you to your appointment.
- Bring any treatment plans or discharge instructions you have received, as well as any laboratory or test results. This should include any Urgent Care or Emergency Room visits.

ASK QUESTIONS:

Talking to your doctor can be overwhelming, but questions are expected from you. Your questions can help prompt the doctor to talk about something important that may have been forgotten. You should not feel like you are bothering them. If you don't know what to say to your doctor, ask about what is important for you know at this time.

Try to make a list of questions ahead of time. If you are in the hospital, keep a notepad at your bedside. As you think of things, jot them down. It is always important to say "I'm not sure what you just said" if you don't understand. You can also say, "This is what I heard... did I get it right?" It may also be easy to forget what the doctor says, no matter your age.

- Bring someone with you to the appointment. They
 can listen to what the doctor says to you and provide
 support for any instructions. They can also ask
 questions especially if they know you well. They may
 also remember something the doctor said that you
 don't remember.
- It is okay to write things down so you remember, or you can have someone else write things down. Keep the notes handy. Make sure you understand any instructions given before you leave. It's always helpful to repeat back what you heard.
- It is essential to try to ask all of your questions before you leave your appointment. Know who to call at the doctor's office in case you think of any other questions after your visit.
- Make sure you know what to do if you start to experience any side effects from your medications, or other issues. Ask when to call if there are issues. For example, your doctor may say to call if you feel dizzy on the new medication or if getting shortness of breath doing your usual activities.

KNOW YOUR HEALTH CONDITION(S):

As a patient, it is important to understand your health condition enough to talk about it. You should be able to:

- Spot symptoms
- Know what to look for if you are getting worse or better
- Explain to your doctor how you are feeling.

Know what to do and when to call your doctor to report changes. It is up to you to understand when to call your physician and when to get emergency treatment. Being able to communicate with your doctor is a key tool to help you monitor your health. You will get more benefit out of your doctor visits too.





ith so many testing options available, patients today are more empowered than ever to catch and prevent life-threatening diseases like colon cancer. Routine screenings help us stay healthy and identify conditions earlier.

As we get older, our bodies change and become more susceptible to cancers. Over time, our cells begin to deteriorate and acquire more errors. Luckily, the world of screening and diagnostic testing is vast and full of preventative measures to help us detect or even avoid chronic health problems as we age. Currently, colorectal cancer is the third leading cause of cancer deaths in adults. But not all is grim. We've been cutting the numbers down over time. For example, total annual deaths from colorectal cancer in 2019 were down nearly 56% from where they were in 1970. And a large part of this is due to cancer screening and early detection.

Who needs colon cancer screening?

Whether or not you should be screened or tested for colon cancer is determined by several factors. The most undeniable factor is age. The U.S. Preventive Services Task Force (USPSTF) suggests adults between the ages of 45 and 75 be screened regularly for colorectal cancer^{IV}.

Good lifestyle habits can have a tremendous impact on how our bodies develop and handle diseases like colon cancer. Simply put, the better your general health is, the better your body is at defending itself against chronic diseases. The following lifestyle habits have been shown to have potential positive effects on avoiding or slowing the spread of various cancers:

- Engaging in regular, daily physical activity. Even a 15-30 minute walk every day can improve your overall quality of life.
- 2. Consuming a diet high in fruits and vegetables. These healthy foods are chock full of vitamins and nutrients, especially antioxidants.
- 3. Consuming a diet high in fiber and low in fat. Fiber helps move everything along in your colon, so a diet high in fiber can lower the amount of time that something is in your body, giving it less of a chance to stick around and do damage. Because fat makes inflammation worse, a diet high in fat can slow down our bodies trying to rid themselves of toxic or dangerous elements.
- 4. Consuming little to no alcohol or tobacco. As we know, these recreational activities actually help foreign invaders out by lowering or hindering our immune responses.
- 5. Maintaining a healthy weight. Everybody is different, but you and your physician know where your healthy weight should be. Ensuring you remain at or around that weight helps your body in numerous ways, and one of the most vital ones is disease prevention and maintenance.

bcorp



Generally speaking, these habits are not difficult and will have positive effects on other aspects of your lifestyle as well. Any and all of these lifestyle habits can be grouped into a general wellness plan.

What are some ways to screen for colon cancer and which one is the most accurate?

Regular screenings can detect precancerous polyps, and your physician or another specialist will be able to proactively remove them to prevent cancer before it starts. If one or more has already turned cancerous, early screening still puts you in a good position to begin treatment early. Screening options vary based on your family and medical history for colon cancer.

 Colonoscopy: The precancerous polyps can be easily detected with an invasive procedure known as a colonoscopy. A physician sends a camera into your colon and scopes out any and all abnormalities within. It is the most-common method of screening for colon cancer. Colonoscopies are usually performed every 10 years based on your family and medical history. 2. FIT Test: A FIT (fecal immunochemical test)^{vi} is a screening tool designed to catch any bleeding in your digestive tract. It requires no preparation or thick liquid drinks. Typically, you will be supplied with a kit to use at home. All you have to do is follow instructions provided with the kit, collect a stool sample, and then either mail or return it to your physician, healthcare practitioner or lab. A FIT test will indicate whether or not further testing, like a colonoscopy, is necessary. This test is recommended on a yearly basis for people over 45 who are at average risk for colon cancer.

A positive FIT result may lead to a negative colonoscopy result. But, the FIT screening will help keep you ahead of the curve when it comes to colon cancer.

It's really all about "the earlier, the better." As we learn more and more every day about aggressive forms of cancer like colorectal or other bowel cancers, we're increasing our abilities to be vigilant when it comes to detecting them before they can get out of hand.

Bottom line: Catching colon cancer early gives you a survival chance of 91%.

REFERENCES:

- Labcorp: https://www.labcorp.com/makewayforbetter "CDC: https://www.cdc.gov/cancer/colorectal/
- "Cancer.net: https://www.cancer.net/cancer-types/colorectal-cancer
- [™] Cancer.org: https://www.cancer.org/cancer/colon-rectal-cancer/detection-diagnosis-staging/acs-recommendations.html
- VCDC: https://www.cdc.gov/cancer/colorectal/ Vi Labcorp: https://www.labcorp.com/help/patient-test-info/fecal-immunochemical-test-and-fecal-occult-blood-test



How a CBC Test Can Help You Understand Your Overall Health



f you want a clear view of your health, it begins with your blood. A complete blood count (CBC) test analyzes the cells that circulate in your blood. It's the most common test ordered by physicians and can provide valuable information on your overall health and help detect problems like anemia, inflammation, and infection.

Why take a CBC test

Because a CBC is clinically meaningful if you have abnormal results, it's a good baseline test for understanding your health. Here are a few reasons why you may choose to take a CBC test:

- General wellness check: Review your overall health
- Diagnosis: Identify potential causes of symptoms, including weakness, tiredness, fever, bruising, swelling and redness
- Chronic Conditions: Monitor active health conditions that impact your blood count

- Medications: Understand the impact of certain medications, such as rheumatoid arthritis treatments, or blood count over time
- Pre-surgery: Low platelet counts put surgical patients at risk of abnormal bleeding so the procedure may be delayed - or you and your doctor may develop a different treatment plan

If you do receive abnormal results, you have the option to dig deeper by discussing results with your doctor and determining next steps.

What can a CBC test detect?

A CBC test is extremely comprehensive, measuring different types of cells in your blood. That includes your white blood count, which is linked to your body's ability to fight off infections and foreign agents that cause inflammation. It also measures your platelets, which indicate your body's propensity to bleed or clot in certain situations. Measurements of your red blood cell count, hemoglobin and hematocrit are indicators of your oxygen-

carrying capacity in red blood cells. When those levels are low, the decreased levels of oxygen can cause symptoms such as fatigue, dizziness, and headaches. Also different sizes and shapes of red blood cells may indicate a more chronic treatable condition like iron deficiency.

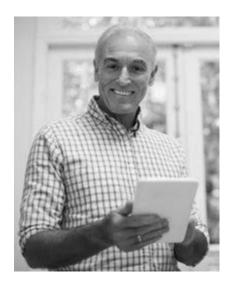
A CBC test can detect a number of different conditions including:

- Anemia
- Autoimmune disorders
- Bone marrow disorders
- Dehydration
- Infections/Inflammation
- Hemoglobin abnormalities
- Leukemia/Lymphoma
- Sickle cell disease
- Iron, folate or B12 deficiency
- Liver disease

Take charge of your health

At the end of the day, your overall health is in your hands. It's up to you to stay connected to your doctor and get the testing you need including CBC. The conversations with your doctor add to the growing tapestry of monitoring and maintaining your health.

Health & Wellness on the Member Portal



Designed with you in mind, our secure Member Portal has many great features and tools you can use to stay informed about your Health Plan information. There are also self-management interactive tools that can help you achieve health and wellness.

These tools can help you with the following topics:

- Calculating your weight-to-height ratio, also known as Body Mass Index (BMI)
- Quitting Smoking and Tobacco Use
- Fitness & Exercise
- Healthy Eating
- Stress Management
- Depression
- At-Risk Drinking

We encourage you to frequently visit our member portal at **www.youroptimumhealthcare.com.**We are actively working to add new features and tools to help you to achieve your health goals. If you have any questions about these self-management tools, please call Member Services at 1-866-245-5360 or TTY/TDD 711.

Another great tool at your disposal is our Case Management team. Depending on your goals, a nurse and/or social worker will be in regular contact with you over the phone to work on your health goals.

Here are some common goals with which our case management team may be able to help:

- Avoiding falls at home and when you go out.
- Managing complicated or multiple health conditions.
- Understanding your doctor's instructions.
- Navigating your cancer treatment.
- Addressing basic needs like safety, transportation and having enough food at home.
- Identifying and applying healthy habits.
- Understanding your discharge instructions after a hospital stay.

Your health is unique and so are your goals. There are many more ways we can help you on your health journey. You can call us, toll free, Monday through Friday, 8:00 am - 4:00 pm EST at 1-888-211-9913.

Participating in Case Management and/or using these self-management tools is free and voluntary. You can choose to stop participating at any time. It will not affect your benefits.

Managing Medication Costs



What do you do when the cost of your medication increases? Being prepared with a plan on how to control your medication cost is a good idea. Often the more expensive medications are the brand name medications. Asking your doctor about a lower cost generic medication may save you money at the check-out.

Potential options to help control costs:

- Set aside money each month to help cover the cost of your medicine once you hit the donut hole, or coverage gap. This means there's a temporary limit on what the Plan will cover for drugs. This phase begins when you and your Plan have spent a certain amount for covered drugs.
- Pay attention to the Explanation of Benefits (EOB) the Plan sends you each month. This will tell you how much more money you will spend before you hit the donut hole. Once you are in the donut hole, it will tell you how much money you have left to spend before you get out of it.
- Take steps to lower your medicine costs. Use generic drugs whenever possible and look for pharmacies that offer free or reduced prescriptions.

- You might also get a better price if you order through a preferred mail order pharmacy. Consider ordering 3-month supplies of your eligible prescriptions if your Plan offers a discount.
- Talk to your doctor about each of your medications and ask if there are cheaper alternatives that can provide the same benefit? Do they have any samples they can offer you?

Also, the Health Plan has Social Workers available who may be able to assist you in finding assistance with your medication costs. You can reach a Social Worker by contacting the Case and Disease Management department at 1-888-211-9913 (TDD/TTY: 711). Regular business hours are Monday through Friday 8 a.m. to 4 p.m. EST.



Coordinating Your Care to **Keep You Safe**

We are dedicated to keeping our members safe. One way for you to stay safe is to help your doctors coordinate your care. You can help them by tracking all of the services you receive and medications you take. This is especially important if you see a behavioral health specialist. For example, if your behavioral health provider prescribes you new

or different medications, make sure they tell your primary doctor about these changes. Some combinations of medications can be dangerous. In fact, you should always make sure any doctor you see knows all of the medications you are taking. This will help you avoid dangerous medication interactions.

Your behavioral health providers should ask you for consent to share your information with your primary doctor. This is to ensure your privacy. You should encourage any specialist you see to communicate with your primary doctor. This will make sure you receive only the necessary procedures. It will also help your doctors work together as a team to provide you with the best care. Taking an active role in coordinating your care will help your doctors keep you safe.

Medication Reconciliation POST DISCHARGE (MRP)

Health and safety for our members are top priority. Together we can prevent harm and adverse reactions from the medicine you take. You can help by scheduling a follow up visit with your PCP (Primary Care Physician). You should make an appointment soon after leaving the hospital.

Your PCP will reconcile any medicine from your hospital doctor with your current medicine to ensure the safest and most effective treatment plan for you. Please bring your discharge paperwork and all new medicine from the hospital to your PCP visit.





An Ounce of Prevention Is Worth a Pound of Cure

Have you ever thought about that old proverb? It's really true for protecting yourself against serious diseases like influenza (flu) and COVID-19 by taking preventive actions. It's time again to stop by your local pharmacy and offer your arm for a flu shot. The flu vaccine can help you to avoid catching the flu or can reduce its symptoms.

You may have hesitated to get the flu vaccine. According to the Centers for Disease Control and Prevention (CDC). there are some common misunderstandings about it:

• MISUNDERSTANDING #1: You can get the flu from the flu vaccine.

THINK AGAIN! The flu vaccine is made with either a killed virus or with only one protein from the flu virus. You might have mild, local side effects for a day or two after a flu vaccination, like soreness or swelling at the site of the shot, but you won't catch the flu from it. If you do develop a sore throat or cough, it's likely from one of the many cold viruses circulating during the cooler months.

• MISUNDERSTANDING #2: It's better to get sick with the flu than to get the vaccine.

THINK AGAIN! The flu virus can cause serious, even fatal illness, especially in young children, older adults and people with chronic health conditions.

• MISUNDERSTANDING #3: The flu vaccine will protect you 100% from the flu for that year.

THINK AGAIN! No vaccine can be guaranteed to be 100% effective for every person who gets it. The flu vaccine may prevent the flu, but if not, will at least reduce symptoms and Physician visits related to it.

The flu vaccine has a long history of preventing thousands of hospitalizations and deaths related to the flu.

• MISUNDERSTANDING #4: The "stomach flu" is the same as the illness prevented or lessened by the flu vaccine.

THINK AGAIN! Many people refer to an illness causing nausea, vomiting and diarrhea as "the flu." The flu affected by vaccine is a respiratory disease, not a gastrointestinal disease.

How about receiving a flu shot and COVID booster at the same time? In an article on the current flu season the CDC says, '...you can get a COVID-19 vaccine and a flu vaccine at the same time. Even though both vaccines can be given at the same visit, people should follow the recommended schedule for either vaccine: If you haven't gotten your currently recommended doses of COVID-19 vaccine, get a COVID-19 vaccine as soon as you can, and ideally get a flu vaccine by the end of October.'

When you get the flu vaccine and also the COVID-19 vaccine, you get double protection for yourself, your family and everyone you come in contact with. Ask your Primary Care Physician (PCP) about getting this year's flu vaccine in addition to the COVID-19 vaccine!





Lose Weight, Gain Health and Wellness

It is important to maintain a healthy weight. Being overweight can lead to many health conditions, such as diabetes, high blood pressure, high cholesterol, and heart disease. Losing weight improves your mobility, which especially helps if you have lung disease such as COPD. Losing even a little bit of weight can help reduce the risk of serious health problems. It may also give you more energy and make you feel better all around.

Steps to Weight Loss

- 1. The first step is simply **making a** commitment to weight loss.
- 2. Once you make the commitment to a healthier lifestyle, you can assess where you are in your weight loss journey and set realistic goals. Everyone has a different goal for a healthy weight. A good measure of healthy weight is Body Mass Index (BMI). Ask your doctor to calculate your BMI, which is determined from a person's weight and height. Knowing your BMI can help you understand your weight category and if you are at risk for health problems.

3. The final step is to make lifestyle changes. Losing weight needs to be thought of as a lifestyle change instead of a short-term diet or program. It is essential when trying to lose weight that you do it in a healthy way and follow your doctor's instructions. The key to losing weight includes healthy eating and portion control in conjunction with exercise. You want to lose weight slowly (1 to 2 pounds a week) and focus on keeping the weight off.

Eating Right for Weight Loss

Healthy eating is all about making smart food choices and controlling your portion sizes. Smaller portions equal fewer calories. Eating healthy requires planning ahead, especially when you grocery shop. Try to eat many different types of colorful fruits and vegetables, which give your body a wide range of useful nutrients. Make sure at least half of your grains are from whole grains that contain fiber, which will keep you full longer. Avoid eating too many foods that are heavily processed, contain solid fats, or have a lot of added sugars. Eat lean cuts of meat and poultry. Choose foods that are baked, broiled, grilled, steamed, sautéed or boiled, instead of fried. Season foods with condiments such as lemon juice, herbs, and spices, rather than butter and salt. Your doctor may want you to follow a certain diet depending on your health conditions. Ask your doctor if you have any dietary restrictions, such as low sodium and/ or a lower sugar or sugar-free diet.

Exercising for Weight Loss

The other part of achieving and maintaining a healthy weight is physical activity. Exercise gives you great health benefits. Remember to always check with your doctor before starting any new exercise program. Your doctor will know which activities are best for you, and will warn you about anything you should know before you start your program. In any exercise program, you should start

slow and build up the length and the amount of times per week that you exercise. A general goal is to aim for at least 30 minutes of physical activity every day. Exercise doesn't have to be complicated. You can start by adding some simple changes to your daily routine such as walking and taking the stairs instead of the elevator. In addition to the physical benefits of exercise (losing weight and building stronger muscles), regular physical activity also improves your mood and boosts your energy levels. This helps your overall well-being and can make you feel happier and more relaxed.

Keeping Track of Your Progress

It is important to continually self**monitor** when trying to lose weight. It is a good idea to weigh yourself regularly (daily, weekly or monthly). Record your weight in a journal to show your progress. You can also use a journal or food diary to record and monitor healthy eating habits. This allows you to keep track of your meals and snacks. Jot down what you ate each day as well as times when you felt hungry. To monitor your physical activity, you can keep a calendar to mark the days that you exercise. At the end of the month, you can see how many days you exercised. These tools can motivate you to keep up your lifestyle changes. As an incentive, use these tools to treat yourself with **nonfood** items at certain milestones (10 pounds, 20 pounds, or 5 days in a row of exercise).

All of these tips will help you achieve and maintain your weight loss goals.
Remember, becoming and staying healthy is a long-term lifestyle change!





November is Diabetes **Awareness Month!**

According to the Centers for Disease Control and Prevention (CDC), more than 37 million people in the United States have diabetes, and 1 in 5 of them do not know they have it.

Diabetes is a long-lasting health condition that affects how the body turns food into energy. With type 2 diabetes, the body does not use insulin well and cannot keep blood sugar at normal levels. Type 2 diabetes develops over many years and some people do not have any symptoms, so it is important to check sugar levels if you may be at risk.

Symptoms may include:

- Increased hunger
- Increased thirst
- Feeling very tired
- Weight loss
- Frequent urination (pee), often at night
- Blurred vision
- Sores that heal slowly
- Tingling in the hands or feet
- Very dry skin

Risk factors include:

- Overweight or have obesity
- Age 45 years or older
- Family history of diabetes
- African American, American Indian, Asian
- American, Hispanic/ Latino, or Pacific Islander
- Prediabetes
- History of gestational diabetes (diabetes during pregnancy)

Type 2 Diabetes can be prevented or delayed with healthy lifestyle changes such as losing weight and keeping it off, getting regular physical activity (at least 30 minutes, 5 days a week- start slow to build up to your goal), and eating a healthy diet most of the time. The best chance for preventing type 2 diabetes is to make lifestyle changes that can be kept up for a long time.

Ask your Primary Care Physician (PCP) about what other changes you can make to prevent or delay type 2 diabetes.

Am I Getting Close to Using up My **Plan Benefits?**

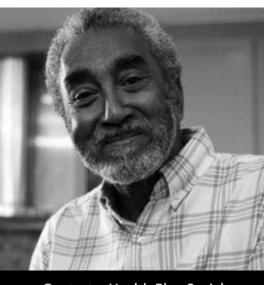
What do you do when you learn you are close to using up your Medicare covered benefits? In some cases, the Health Plan may be able to help you to find other resources. This may allow you to continue to receive your present care or services. You might have worries about:

• Reaching the "donut hole" also known as the medication coverage gap. Talk to your doctor about what medications work

with your conditions. Be honest and discuss what you can afford. There might be alternatives that will work for you.

 Running out of your skilled nursing benefits and you don't feel that you can take care of yourself at home.

The Health Plan's Social Services team may be able to help. They can assist you by connecting you with available community resources in your area. Sometimes pharmaceutical companies have programs to help you pay for your medications if you qualify. There are also programs that can assist you with some of your care needs to support you in your home. This may include a home meal delivery program or access to other resources in your area. Many people find support programs through their Church or social network.



Contact a Health Plan Social Worker at 1-888-211-9913 or TTY/TDD 711 to see if resources are available to you. Regular business hours are Monday through Friday 8 a.m. to 4 p.m. EST.

Staying Healthy



Your Health Plan has a great benefit available to help you stay fit and healthy. Silver Sneakers is a gym membership that is available to you at no additional cost. You can identify a participating health club location by looking for the Silver Sneakers sign or by going online to SilverSneakers.com. Obtaining a free membership is simple. Contact Member Services at the Health Plan (1-866-245-5360 or TTY/TDD:711) to learn more about the benefit and how you can participate. A healthy and active lifestyle is an excellent way to deter illness and keep yourself feeling your best.

Following a proper diet will also help to maintain your weight and decrease stress on your joints. Your Health Plan has Nurses available to assist you in your healthy lifestyle goals. Please contact your Health Plan today and ask to speak with Member Services for assistance in identifying a Silver Sneakers membership. You can also speak with a Nurse Case Manager at the Health Plan for assistance in meeting your health care goals. They can be reached by calling 1-888-211-9913 (TTY/TDD: 711). Regular business hours are Monday through Friday 8 a.m. to 4 p.m. EST.



Follow-Up After Hospitalization for Mental Illness (FUH)



Your mental health care doesn't end once you leave the hospital. To continue your recovery you should engage in follow-up care within a week of your discharge. Participating in follow-up care supports your transition back home. It may also reduce the chance of you being readmitted to the hospital. Follow-up care helps you maintain the progress made during hospitalization. It's always important to keep your PCP (Primary Care Physician) informed of any health services.

Don't Miss Calls from the Health Plan!

Have you missed calls from the Health Plan because those calls have been marked as Spam? You can prevent these calls from being marked as Spam by adding the Health Plan phone number to your cell phone's contacts. Simply add the telephone number 813-506-6000 to your contact list in your cell phone and the Health Plan's number will no longer show up as **Spam** on your caller ID. And since there are so many scammers out there, it's also a great way to verify that the caller is truly from your Health Plan.

Annual Election Period (AEP) Oct 15th – Dec 7th, 2022

On October 1st, all Medicare health insurance plans began providing information on the benefits they will offer in their upcoming 2023 plans. The Plan also mailed current Medicare members their Annual Notice of Change letter on or before September 30, 2022. The Annual Notice of Change letter explains any changes to your existing plan in 2022.

Notice to members enrolled in the following plans for 2023

- 028 Optimum Diamond Rewards (HMO C-SNP)
- 029 Optimum Diamond Rewards COPD (HMO
- 032 Optimum Gold Plus Plan (HMO)

On September 27, 2022, the Centers for Medicare & Medicaid Services (CMS) released the 2023 premiums, deductibles, and coinsurance amounts for the Medicare Part A and Part B programs, and the 2023 Medicare Part D income-related monthly adjustment amounts. The standard monthly premium for Medicare Part B enrollees will be \$164.90 for 2023. For members participating in the above plans, we previously provided material with a Part B premium reduction amount greater than the updated Part B premium amount for calendar year 2023. Your new part B premium reduction amount will be up to \$164.90.

To assist in answering your questions; our Member Services Call Center will be available 7 days a week beginning October 1, 2022, through March 31, 2023, from 8am. - 8pm. EST.

How to Receive Regular Services



Your PCP (Primary Care Physician) will arrange your health care needs. You will need to have your PCP send in any requests for referrals or authorizations. The Plan's Utilization Management (UM) Department makes decisions on those requests as quickly as possible. On average, a decision is made within 2 days after we have received the request from your PCP along with any supporting medical information. If you have any questions about UM decisions or the UM process, please contact Member Services. This number is located on the back of your ID card.

How to Receive Emergency Services



The Plan does not require any authorizations for visits to Emergency Departments or Urgent Care Centers. If you feel you have an emergency, please go to the nearest hospital or Urgent Care Center for help. After your visit it is very important that you call your PCP (Primary Care Physician) and make a follow-up appointment. This visit with your PCP is to make sure you are getting better.

New Medical Technology



The Plan is always looking for ways to give our members the best care possible. One way we do this is by reviewing new technology for things like medical procedures, drugs, and devices. To be considered, a new technology must meet strict government rules. Our Medical Staff researches new technology by reviewing the latest scientific studies. We also talk with specialists in that area of medicine. Once the Plan approves a new technology, it is added as a covered service.



FLU SHOTS

Don't forget to get your flu shot since there is no cost to Medicare members. Just show your Health Plan identification card. The flu, also known as influenza, can cause significant illness or even death in young children, young adults, pregnant women, older adults and people with chronic illnesses.

It will take at least two weeks after the vaccine is given to provide protection against the viruses. The vaccine protection will last throughout the flu season. It is best to get your flu shot as early as it is available for the best protection when flu activity is highest.

CVS, Walgreens, Publix, and many of our other participating pharmacies offer the flu vaccine. For example, Walgreens Pharmacies (where you can register beforehand at www.Walgreens.com) and CVS Minute Clinics offer flu shots daily with no appointment necessary. However, please call the pharmacy in advance to ensure that they have a supply of the vaccine on hand.

Other pharmacies in the Health Plan network also provide flu shots at no cost to Medicare members. For a listing of other participating pharmacies, please contact our customer service department at:

1-866-245-5360 TTY: 711

You can also access our online provider directory at: www.youroptimumhealthcare.com

Additionally, many Primary Care Physican also offer the flu vaccine. Please check with your doctor to see if they offer the vaccine. You may also be able to get a flu shot at your local health department.

For more information about the flu vaccine, talk with your primary care Physician or visit the Center for Disease Control website at https://www.cdc.gov/flu/prevent/vaccinations.htm.

Support Groups

Facing a stressful situation can be difficult. You don't have to go through it alone. There are many support options for you. Some people prefer talking with a professional. Others prefer support groups. Some prefer a combination of both.

A support group is a group of people who share a common experience or problem. Support groups are specific to a certain topic or situation. This may include depression, grief, or a medical condition. Groups typically meet on a regular basis. They may offer encouragement, advice, and comfort. Some groups are peer-led. Some are led by a professional. There are many benefits to joining a support group, such as reducing isolation or loneliness. Support groups can also provide reassurance that you are not alone in your situation. You can find support groups being offered in person and online.

If you need help finding a support group in your area, the Health Plan has social workers who may be able to help you. To speak with a social worker, call the Case and Disease Management department at

1-888-211-9913. Or TTY/TDD 711. Regular business hours are Monday through Friday 8 a.m. to 4 p.m. EST. You can also call the Plan's behavioral health vendor, Beacon Health Options at 1-888-273-3710, if you are interested in speaking with a mental health professional. While we encourage you to talk to your doctor, a referral from your doctor is not needed to access these services.



Always Available to Our Members

The Plan offers a lot of information for our members on our website. This includes resources and programs available to our members. Please visit our website at: www.youroptimumhealthcare.com

Click on the links below for more information on the following topics: (PLEASE NOTE: link to "About Us" is located by scrolling down to the bottom banner of website page and "Quick Links" is located at top of website page)

- Advance Directives: About Us → Utilization & Quality → Advance Directives
- Case & Disease Management Programs: About Us → Utilization & Quality → Case Management or Disease Management
- Clinical Health Guidelines: About Us → Utilization & Quality → Clinical Practice Guidelines
- Fraud, Waste & Abuse: Quick Links → Fraud, Waste & Abuse
- Grievance & Appeals: Quick Links → Grievances & Appeals
- Medical Record Standards: About Us → Utilization & Quality → Medical Record Standards
- Member Rights & Responsibilities: About Us →
 Utilization & Quality → Member Rights and Responsibilities
- Newsletters: Quick Links → Newsletters

- Patient Safety Programs: About Us → Utilization & Quality → Quality Management
- Preventive Health Guidelines: About Us → Utilization & Quality → Quality Management → Preventive Health Information
- Privacy: Quick Links → Privacy Practices
- Quality Management Programs: About Us → Utilization & Quality-> Quality Management
- Quality Management Performance: About Us → Utilization & Quality
 → Quality Management → Monitoring Quality
- Utilization Management Programs: About Us → Utilization & Quality
 → Utilization Management
- UM Decisions: About Us → Utilization & Quality → Utilization Management

NON-DISCRIMINATION **NOTICE**

MULTI-LANGUAGE INTERPRETER SERVICES

Discrimination Is Against the Law

Notice Informing Individuals about Nondiscrimination and Accessibility Requirements

Optimum HealthCare, Inc. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Optimum HealthCare, Inc. does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Optimum HealthCare, Inc.:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Optimum HealthCare Civil Rights Coordinator.

If you believe that Optimum HealthCare, Inc. has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Optimum HealthCare Civil Rights Coordinator

P.O. Box 152727 Tampa, FL 33684

Phone: 1-866-245-5360, TTY: 711

Fax: 813-506-6235

You can file a grievance by mail, fax, or phone. If you need help filing a grievance, the Optimum HealthCare Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-866-245-5360 (TTY: 711). Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-866-245-5360 (TTY: 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务,帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务,请致电1-866-245-5360(TTY: 711)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康 或藥物保險可能存有疑問,為此我 們提供免費的翻譯服務。如需翻譯 服務,請致電 1-866-245-5360 (TTY: 711)。我們講中文的人員將樂意為 您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-866-245-5360 (TTY: 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-866-245-5360 (TTY: 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trá lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quí vị cần thông dịch viên xin gọi 1-866-245-5360 (TTY: 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quí vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-866-245-5360 (TTY: 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 답해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-866-245-5360 (TTY: 711) 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다. Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-866-245-5360 (ТТҮ: 711). Вам окажет помощь сотрудник, который говорит порусски. Данная услуга бесплатная.

إننا نقدم خدمات المترجم الفوري Arabic: المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على . . . سيقوم شخص (TTY: 711) 5360-245-866. بمساعدتك. هذه خدمة مجانية ما يتحدث العربية

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-866-245-5360 (TTY: 711)पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-866-245-5360 (TTY: 711). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portugués: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saude ou de medicação. Para obter um intérprete, contacte-nos através do número 1-866-245-5360 (TTY: 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwog nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-866-245-5360 (TTY: 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer1-866-245-5360 (TTY: 711). Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品処方薬プランに関するご質問にお答えするために、無料の通訳サービスがありますございます。通訳をご用命になるには、1-866-245-5360 (TTY: 711)にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。



P.O. Box 151137, Tampa, FL 33684

Health & Wellness Information



