

SimplyWell

Wellness tips and encouragement from Hally® health.

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Benefits and coverage may vary from plan to plan. Please review your plan documents or call the number on the back of your member ID card for specifics.

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Love your heart.

Valentine's Day might be over, but we'd love for you to keep thinking about hearts. Your heart, specifically. The one beating in your chest. Keeping your heart healthy is incredibly important, and we're here to help. Read on to discover tips, information and more.



Did you know?

Heart disease is the leading cause of death in the U.S. for both men and women, according to the CDC. It affects over 100 million Americans - and not just older adults. Taking care of your heart is important at all ages.

Get your exercise.

Make sure you stay physically active. Try to get at least 150 minutes of moderate - or 75 minutes of more vigorous - physical activity every week. Always ask your doctor what types of exercise are right for you. If you're busy and can't carve out large blocks of time for workouts, find ways to include short bursts of physical activity in your day. Take the stairs rather than the elevator, park far away from entrances or use routine house chores as a way to break a sweat. Be creative - your heart will thank you!

Eat a healthy, balanced diet.

- Get plenty of fruits and veggies.
- Pick whole grains (and products made with them).
- Get your protein mainly through healthier foods such as nuts, fish and lean meats.

- Buy low-fat or nonfat milks, cheeses and yogurt.
- Seek less-processed foods and limit how much salt, added sugar and saturated fat you eat.

And more:

- Don't smoke, vape or use any other tobacco or nicotine products.
- Limit how much alcohol you drink, or avoid it altogether.
- Keep control of your blood pressure and cholesterol levels.
- Know your family's health history - and talk to your doctor about it.

There you have it - a quick game plan for taking care of your heart. For more tips, resources and advice, visit [hally.com](https://www.hally.com) and search "heart." Valentine's Day is behind us, but your health and well-being deserve love all year long.

Global Hearts Initiative

For the past six years, the World Health Organization and CDC have been leading the Global Hearts Initiative - a worldwide effort to improve cardiovascular health. Be a part of this important initiative. Make sure you, your family and your friends follow these important steps to keep your hearts healthy.



Don't smoke or use tobacco.



Stay active.



Eat less salt.



Avoid foods with trans-fatty acids.



Control your blood pressure.

Cardiovascular disease is the **#1** cause of death worldwide.

17.9 million deaths every year.



ER vs. Urgent Care

We know it can be confusing - you or a loved one's sick or injured, and you're wondering where you should go to get the care you need. Should you head to your doctor's office? The emergency department? The local urgent care clinic? Here's some information to help you make the best decision, based on your health condition, how severe it is and more.

Your doctor knows you best.

Your main doctor – also called your primary care provider or PCP – knows a lot about your health. They know your health history and can help figure out if your current issue fits in with any other conditions you have. If it's not an emergency, you can call your PCP for the illnesses and injuries listed in the table and see if they can get you in for a visit.

If Your Doctor Can't See You

If your PCP can't see you right away – or if the office is closed because it's after hours, on a weekend or during a holiday – you can go to an urgent care clinic (sometimes called a convenient care, prompt care or walk-in clinic). Urgent care is also for non-emergency issues. These clinics have doctors and nurses on hand, and unlike your PCP's office, you can walk in without an appointment anytime they're open.



Virtual Visits – A Growing Trend

Virtual visits are another option for certain types of non-emergency care. Depending on your health plan, you might have access to board certified doctors and counselors by phone or secure video through the Hally® mobile app or on hally.com – at any time of the day, 365 days a year, from the comfort of your home.

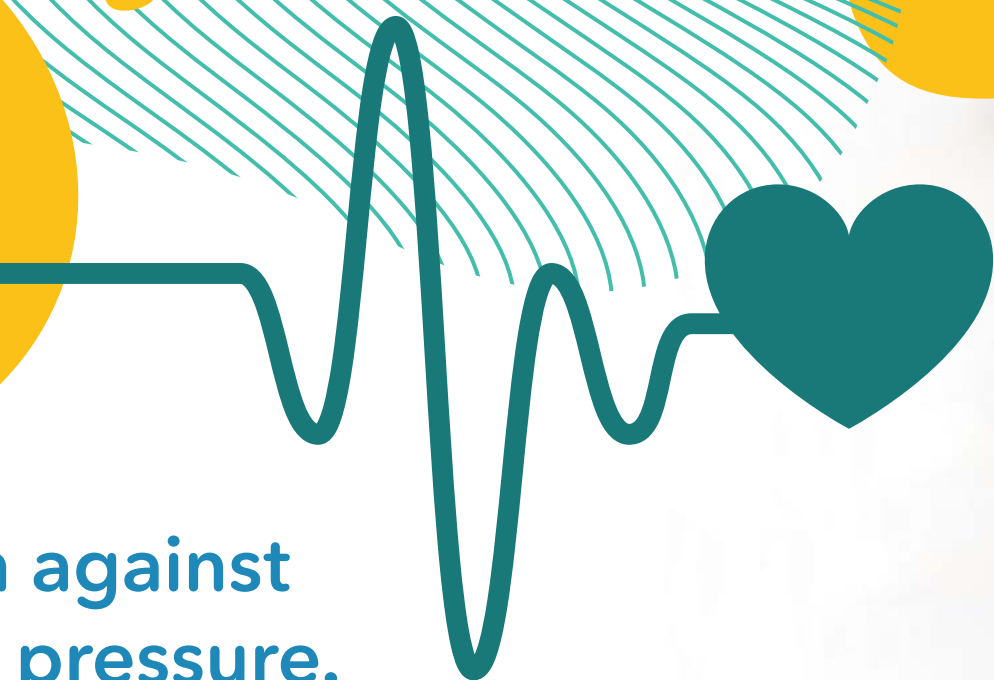
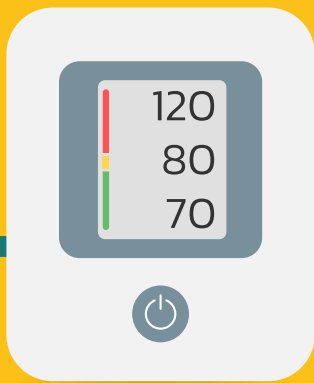
Emergency Care

For all emergencies and life-threatening issues, immediately head to the nearest emergency department (ER) or call 911.

Virtual Visits	Your PCP or Urgent Care	Emergency Department (ER)
<ul style="list-style-type: none"> • Acne. • Allergies. • Behavioral health. • Cold or flu symptoms. • Ear problems. • Insect bites. • Nausea, vomiting or diarrhea. • Pink eye. • Rash. 	<ul style="list-style-type: none"> • Cold or flu symptoms. • Dizziness. • Ear problems. • Insect bites. • Minor falls. • Nausea, vomiting or diarrhea. • Pink eye. • Simple cuts. • Sore throat. 	<ul style="list-style-type: none"> • Chest pain. • Head, neck or back injuries. • Bad cuts. • Bad burns. • Severely broken bones. • Severe pain. • Shortness of breath. • Significant injury or blood loss. • Stroke symptoms.

These are examples, not complete lists. If you think your condition is a life-threatening emergency, call 911 or go to the nearest ER. And if you need more help deciding where to go for non-emergency care, you can call the Nurse Advice Line at the number on the back of your member ID card 24/7.

For information on coverage and costs for specific types (and locations) of care, please see your health plan documents or call the number on the back of your member ID card.



Take action against high blood pressure.

High blood pressure is sometimes called a “silent killer.” It puts us at risk of serious health issues like heart attacks and strokes, but few people know this alarming fact: high blood pressure itself shows no signs or symptoms in most cases. So it’s hard to know you have it before it’s too late - unless you take action and follow these steps.

First, bust some myths.

According to the American Heart Association (AHA), many people think they’ll first notice symptoms - such as sweating, facial flushing, nervousness or difficulty sleeping - if their blood pressure’s becoming too high. This is false. Don’t ignore your blood pressure just because you don’t “feel” or “see” anything strange.

Know your risk factors.

The first step to taking action is knowing your risk factors - and talking to your doctor about them. According to the AHA, a number of things can put you at greater risk of developing high blood pressure.


- **Age** - As you get older, high blood pressure becomes more likely. However, even children and young adults can have it.
- **Family history** - You’re more at risk when your parents or other close relatives have had high blood pressure.
- **Gender** - Through age 64, high blood pressure’s more common in men. At 65+, however, it’s more common in women.

- **Race** - Black men and women tend to develop high blood pressure more often than those of other racial backgrounds in the U.S.

Control the things you can change.

You can’t control the risk factors mentioned above. But there are other risk factors you can take action against, to help prevent and manage high blood pressure.

- **Risk factor:** Too little physical activity.
Action: Stay active and get your exercise. Talk with your doctor about what types of physical activity are right for you.
- **Risk factor:** An unhealthy diet.
Action: Limit the salt you eat. Also reduce saturated fats and added sugars.
- **Risk factor:** Too much alcohol.
Action: Drink less or avoid alcohol altogether.
- **Risk factor:** Smoking.
Action: Don’t smoke or use tobacco.
- **Risk factor:** An unhealthy weight.
Action: Manage your weight. Ask your doctor for help if needed.



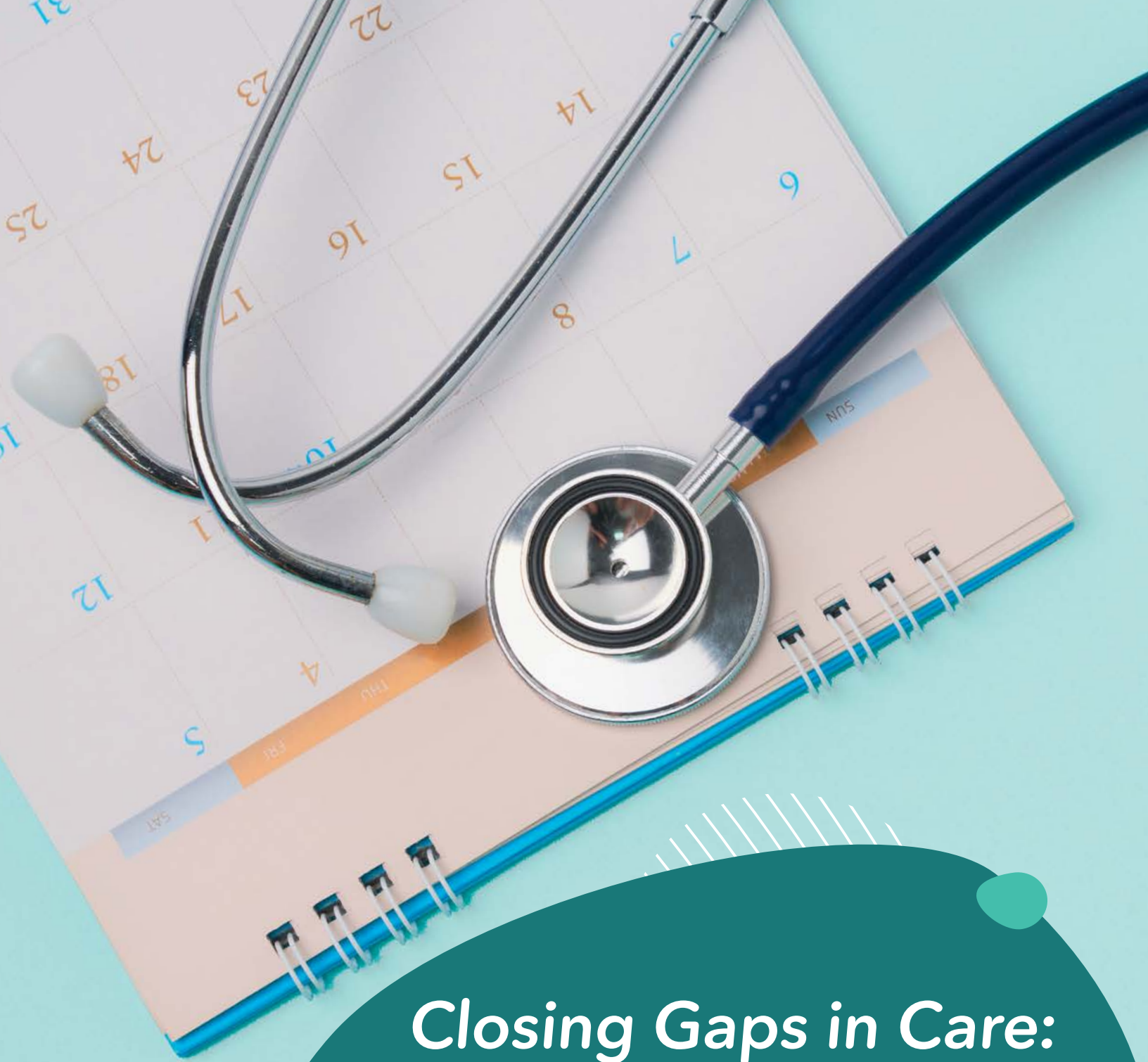
High blood pressure is serious, but you have power against this silent foe. Start today - you got this!

And perhaps most importantly...

Check your blood pressure often and know your numbers. This is the best way to know if your blood pressure is at a healthy or unhealthy level. It's also the best way to notice any changes and take action before things get worse. Buy an at-home blood pressure monitor and ask your doctor how often you should use it - perhaps even daily. Also ask your doctor what numbers are considered healthy for a person of your age, gender and health.

For most people, the goal is to have the top number (called the systolic) below 120 and the bottom number (called the diastolic) below 80.

For a short video on how to take your blood pressure at home, visit [hally.com](https://www.hally.com) and search "blood pressure."



Closing Gaps in Care: Get your preventive screenings.

You shouldn't only see the doctor when you're sick. It's just as important to go in for your annual physical or wellness visit, and for your regular screenings and tests. This can help prevent diseases and other health issues - even before they start - or catch them early when they're most treatable. Here are some of the most important screenings to know about. Ask your doctor which ones you need and when you should get them.

Breast Cancer Screening

The U.S. Preventive Services Task Force (USPSTF) recommends women age 50 to 74 get a mammogram every two years. Call your doctor to get a referral for your mammogram. If you're over 74 or younger than 50, talk to your doctor for screening recommendations.

Screening for Colorectal Cancer

The USPSTF recommends that people age 45 to 75 get screened for colorectal cancer regularly. If you're younger than 45 and think you may be at high risk, or if you're older than 75, ask your doctor if you should be screened. There are several types of screenings. A colonoscopy is the preferred method, but talk to your doctor to see if other options might be right for you. Options include:

- Fecal occult blood test (gFOBT) or FIT (fecal immunochemical test), annually.
- Cologuard® every three years.
- Flexible sigmoidoscopy every five years.
- Colonoscopy every 10 years.

Cervical Cancer Screening

Women age 21 to 29 should get a Pap test every three years. HPV testing should not be used in this age group unless it's needed after an abnormal Pap test result. Beginning at age 30, women should be screened with a Pap test combined with an HPV test every five years, as long as the test results are normal. If your results are abnormal, you may need to be screened more frequently.

Bone Mineral Density (DEXA) Screening

If you're 45 or older and have recently broken a bone, ask your doctor if you should have a DEXA scan. This simple test can help identify if you have osteoporosis (thinning bones). It can also help you and your doctor create a plan to prevent broken bones in the future.

Important Screenings for People with Diabetes

If you have diabetes, your doctor will probably set up these screenings for you:

- **Diabetic Retinal (Eye) Exam** - See our "Diabetes 101" article in this issue for more information about how diabetes can affect your eyes. Getting this exam every year is important for your sight.
- **Nephropathy (Kidney) Screening** - Diabetes can cause kidney damage and even failure. This yearly urine test helps catch any problems.
- **HbA1c Testing** - A1C tests show what your average blood sugar has been over the past three months. Get this test at least twice a year, and ask your doctor what your goal should be for your scores.

This is not a complete list of all the preventive screenings and tests you can get, so check with your doctor for all they recommend. Take action to help prevent illnesses or catch them in their early stages - it'll be well worth the doctor visits!

For information on coverage and costs (if applicable) for specific screenings, tests and exams, please see your health plan documents or call the number on the back of your member ID card.

A close-up photograph of a white plate featuring a large, pan-seared salmon fillet with a golden-brown crust. Beside the salmon is a fresh vegetable salad consisting of green leafy vegetables, sliced cherry tomatoes, and a few raspberries. The background is a dark, out-of-focus surface.

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Let's cook
something
delish!

Napa Valley Glazed Salmon

Ingredients

- 2 Tbsp honey
- 1 tsp dried thyme
- 2 tsp Dijon mustard
- 1 tsp finely grated lemon zest
- 1 tsp white pepper
- 1¼ lbs salmon, cut into 4 pieces

Servings: 4
Serving Size: 3 ounces

Nutrition Nugget:

The white droplets forming on the top of salmon are rich in omega-3s, and so is the gray colored meat right next to the skin.

Enjoy both to reap the most omega-3s.

1. Preheat oven to 350°F.
2. Combine the honey, thyme, mustard, lemon zest and pepper in a small bowl.
3. Arrange the salmon, with the skin side down, in a shallow roasting pan lined with cooking foil. Using the back of a spoon, spread the honey mixture to coat the top of each fillet.
4. Bake, uncovered, for 20 minutes, or until the internal temperature reaches 145°F and flesh is opaque and flakes with a fork.

NOTES: Extra Serving Suggestion: Slice leftover salmon and place on top of a bed of mixed greens and chopped tomatoes for an easy lunch or dinner.

Variation: Substitute your favorite dried or fresh herb for the thyme – or combine several.

TIP: To store fresh fish a day or two after purchase, rinse and place in a bag with ice. Pour off melted ice and replace with more ice chunks.

Calories: 270; Total fat: 11g; Saturated fat: 1.5g; Cholesterol: 90mg; Sodium: 135mg; Total carbohydrate: 10g; Dietary fiber: 0g; Protein: 32g | Source: eat right® Academy of Nutrition and Dietetics



Diabetes 101:

Keep your eyes healthy.

Many people don't realize that diabetes can harm their eyes. Here's what you need to know - including actions you can take to help protect your sight.

Diabetes and Your Eyes

According to the CDC, people with diabetes are more at risk for serious eye problems. In fact, diabetes is the main cause of blindness in adults age 20 to 74 and a major cause of blindness for those 75+. Common eye issues for people with diabetes include:

- **Retinopathy** - Small blood vessels in the eye weaken and can leak blood. This disease can lead to blindness - and it has no noticeable symptoms early on - so it's important to get your eyes checked regularly. Don't skip those exams!
- **Glaucoma** - The nerve that connects the eye to the brain is damaged, which can cause vision loss or blindness.
- **Cataracts** - The clear lens of the eye becomes clouded and makes vision blurry.

How To Protect Your Eyes

There are many things you can do to help protect your vision and keep your eyes healthy.

- **Get an eye exam every year.** These checkups help you find and treat any problems early. Your exam can be done by either an ophthalmologist or an optometrist. If your exam is normal, they might have you wait two years before your next one. **Make sure you always send your exam results to your primary care doctor.**

- **Visit your eye doctor right away** if you have a sudden change in your eyesight; take longer than usual to adjust to darkness; or see small black spots or lines that don't go away, or any red spots or red fog.
- **Manage your blood sugar.** A1C tests will help you measure your blood sugar levels. Ask your doctor what your goal should be for the test results, and get their advice for how to improve your scores.
- **Keep your blood pressure in check.** Check your blood pressure often and ask your doctor what your personal goal should be.
- **Maintain healthy cholesterol levels.** Work with your doctor to keep your cholesterol numbers in an appropriate range.
- **Don't smoke or use tobacco products.**
- **Stay active and get regular exercise.**

Your eyesight is too important to ignore. Reach out to your primary care and eye doctors for more help and advice, and keep your eyes healthy - and seeing clearly - for years to come.



E-Cigarettes - Far from Harmless

Did you know that American youths use e-cigarettes more than any other tobacco product? According to a 2018 study by the CDC, more than 3.6 million U.S. middle and high school students reported using e-cigarettes. This included nearly 21% of all high students and about 5% of middle schoolers. Far from being “safe” or “harmless,” as sometimes claimed, e-cigarettes can be quite dangerous. Here’s what you should know.

What exactly are e-cigarettes?

- E-cigarettes produce an aerosol - think fog or mist - by heating a liquid that usually contains nicotine (the addictive drug in regular cigarettes), flavorings and other chemicals. Users inhale this aerosol into their lungs.
- They’re known by many different names - e-cigs, vapes, vape pens, e-hookahs, mods, tank systems, electronic nicotine delivery systems and more. Some look like regular cigarettes, cigars or pipes, while others look more like pens, USB sticks and other everyday items.
- In addition to nicotine, e-cigarettes can also be used to deliver marijuana and other drugs.

How are they harmful?

The aerosol that users breathe into their lungs can contain harmful substances. In addition to the nicotine, these might include cancer-causing chemicals, flavorings linked to lung disease and heavy metals like nickel, tin and lead. Perhaps scariest of all, it’s hard for users to know exactly what ingredients their e-cigarettes contain. And even some e-cigarettes marketed as “0% nicotine” have been found to include the drug.

And while scientists are still learning about the long-term health effects of using e-cigarettes, here’s what we already know:

- Most e-cigarettes contain nicotine, which is highly addictive and can harm a youth’s brain development. It’s also a health danger for pregnant women and toxic to their developing babies.
- Although e-cigarettes generally contain fewer harmful chemicals than regular cigarettes, they still have cancer-causing chemicals and tiny particles that reach deep into the lungs.
- Some children and adults have been poisoned by swallowing, breathing or absorbing e-cigarette liquid.
- Defective e-cigarette batteries can cause fires or explosions.
- Young people who use e-cigarettes may be more likely to use regular cigarettes later on.

If you’re a parent or guardian - or grandparent, teacher, coach or mentor - talk to the children and teens in your life about the dangers of e-cigarettes. And set a good example for them by being tobacco free yourself. Find much more information at [cdc.gov/e-cigarettes](https://www.cdc.gov/e-cigarettes).



Facts About Heart Disease and Stroke

High Blood Pressure

High blood pressure is a leading risk factor for heart disease and stroke. It damages and narrows the arteries that carry blood to your heart and brain. About 1 in 3 U.S. adults - over 100 million - have high blood pressure, and only half of these Americans have it under control. Eating too much sodium is one thing that can lead to high blood pressure.

See our “Take action against high blood pressure” article in this issue for more information and health tips.

High Cholesterol

High levels of LDL cholesterol - often called the “bad” type - also put you at greater risk for cardiovascular disease. This cholesterol can build up in your arteries and limit the flow of blood to your brain, heart and other organs. The CDC estimates that 86 million U.S. adults could benefit from taking medications to help manage their cholesterol, but only 55% are doing so.

Diabetes

Adults with diabetes are at greater risk of dying of heart disease. They’re also more likely to have a stroke. Over time, high blood sugar from diabetes can damage the blood vessels in your heart and block those leading to your brain. Many people with diabetes also have high blood pressure and cholesterol levels, putting them at even greater risk.

More than 868,000 Americans die every year from heart disease, stroke or another cardiovascular disease. That’s roughly 1 of every 3 deaths. These are just two of the alarming stats from the CDC. These diseases also cost our healthcare system \$214 billion dollars annually. Cardiovascular diseases affect many lives - so it’s important you know what might put you at higher risk. The following information comes from the scientists and doctors at the CDC.

Smoking and Secondhand Smoke

Of every four deaths from heart disease and stroke, one’s caused by smoking. Smoking can damage and narrow your blood vessels, block the flow of blood to your heart and brain, lower your levels of “good” cholesterol and more. About 34 million U.S. adults smoke.

Unhealthy Weight and Diet - and Too Little Exercise

People who are overweight are at greater risk of heart disease and stroke. And for adults of all weights, not getting enough physical activity can also lead to heart disease. Diet is key too - healthy eating can reduce your risk of heart disease. Focus on fruits and veggies, whole grains and lean proteins. Limit saturated and trans fat, salt and added sugar.

Now that you know your risks, you can take actions to live your healthiest life.

See our “Hally health: Love your heart” article in this issue for specific tips that can help you prevent heart disease, stroke and more.



Seasonal Affective Disorder - Facts, Help and More

Many of us struggle with depression, extreme sadness and other mental health issues. For some, these occur - or are particularly strong - at certain times of the year. Seasonal Affective Disorder (SAD) is the name for depression, mania or hypomania that affects people when the seasons change.

Perhaps you've heard of people experiencing SAD during the long winter months. But it can also occur in the springtime. Read on to learn more about SAD, including tips for how to treat and manage it. The information comes from the healthcare experts at UpToDate®. If you're one of the millions of Americans who deal with SAD, you're not alone - and we hope this article can help.

Types

- **Fall-onset SAD** begins in late fall and continues into the spring or summer. It's sometimes called "winter depression."
- **Spring-onset SAD** begins in spring and continues into the fall or winter. It's less common than fall-onset SAD.

Symptoms

- Prolonged depression.
- Loss of interest in activities you enjoy.
- Lasting feelings of hopelessness, sadness, worthlessness, guilt or crankiness.
- Loss of sleep (common in spring-onset SAD) or excessive sleepiness and more time spent sleeping (common in fall-onset SAD).
- Appetite changes.
- Weight loss (common in spring-onset SAD) or weight gain (common in fall-onset SAD).
- Confusion, forgetfulness or difficulty concentrating.

Treatment and Management

- **Talk to your doctor.** Tell them your symptoms and if you think you might be experiencing SAD. Ask them if they recommend that you see a therapist or counselor, begin light therapy, start taking any medications or have any other advice. They'll know what's best for your exact situation.
- **Follow good sleep habits.** Set a regular routine. If you can't fall asleep, don't force yourself - get up and try again later. In the morning, get up once you feel rested enough, rather than lingering in bed. Keep your bedroom cool, dark and quiet. Don't smoke, and avoid alcohol and caffeine in the late afternoon and evening.

- **Stay physically active.** Exercise by yourself or with a friend. Take a walk outside if the weather allows. Your body and mind will both feel better.
- **Add light to your life.** Turn on lamps and overhead lighting, especially in the morning and evening. Get a dawn-simulating lamp that brightens gradually in the morning before the sun rises.

SAD is both common and treatable. Talk to your doctor, reach out to others for help and follow the tips above. You deserve the healthiest, happiest life - every season of the year.



Pharmacy Corner:

Beta Blockers

If you have high blood pressure and other medications haven't helped, your doctor might prescribe a beta blocker for you. Here's what you need to know about these common medicines. The information comes from the healthcare experts at Mayo Clinic.

The Basics

Beta blockers help reduce blood pressure by blocking the effects of the hormone epinephrine. They get your heart to beat more slowly and with less force, which lowers your blood pressure. They also help widen your blood vessels, which improves your blood flow.

Beta blockers aren't recommended as the first line of treatment if you only have high blood pressure and if other medications - such as diuretics - work for you. But if these other drugs don't work, your doctor might give you a beta blocker. They also may prescribe a beta blocker as one of multiple medications to help lower your blood pressure.

In addition to helping with blood pressure, beta blockers are also used to prevent, treat or manage symptoms for people who have an irregular heart rhythm, heart failure, chest pain, heart attacks, migraines and certain types of tremors.

Types and Examples

Some beta blockers mostly affect the heart, while others affect the blood vessels too. Examples of beta blockers include Acebutolol, Atenolol (Tenormin), Bisoprolol (Zebeta), Metoprolol (Lopressor, Toprol XL), Nadolol (Corgard), Nebivolol (Bystolic) and Propranolol (Inderal, InnoPran XL).

Side Effects

- Fatigue.
- Weight gain.
- Cold hands or feet.
- Trouble sleeping.
- Shortness of breath.
- Depression.

If you have asthma, you probably shouldn't take beta blockers - due to concerns that they might trigger severe asthma attacks. And for those with diabetes, these medicines may block signs of low blood sugar (such as rapid heartbeat). Always ask your doctor if the medications are right for you, given your current health status and other conditions you may have. Also know that if you're prescribed a beta blocker, you should never stop taking it abruptly - doing so could increase your risk of serious heart problems.



Beta blockers aren't for everyone, but they're one tool in the management of high blood pressure and other conditions. If you think these medications might help improve your health, talk with your doctor about the various pros and cons.



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Benefits and coverage may vary from plan to plan. Please review your plan documents or call the number on the back of your member ID card for specifics.