

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 materials or call the number on the back of your health plan ID card for specifics.

Hally Health

Be smart – get your preventive screenings!

You shouldn't see your doctor *just* when you're sick. Going in for your annual physical or wellness visit – and getting your preventive screenings and shots – is also key to staying healthy. As your trusted partner working to help you improve your overall health and wellness, we've listed some of the most important screenings that can help you catch health problems early. Read on – and reach out to your doctor for more information and to schedule your screenings today.



Breast Cancer Screening

U.S. Preventive Services Task Force (USPSTF) guidelines recommend that women age 50 to 74 get a mammogram every two years. If you're over 74, talk to your doctor for recommendations.

Colorectal Cancer Screening

The USPSTF recommends people age 45 to 75 get screened for colorectal cancer regularly. And 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. A colonoscopy is the preferred screening method, but you can talk to your doctor to see if other options are right for you. Options include: fecal occult blood test (gFOBT) or FIT (fecal immunochemical test) annually; Cologuard® every three years; a flexible sigmoidoscopy every five years; or a colonoscopy every 10 years.

Cervical Cancer Screening

Women age 21 to 29 should have a Pap test every three years – and HPV testing should not be used unless it's needed after an abnormal Pap test result.

Beginning at age 30, you should get a Pap test combined with an HPV test every five years (as long as the test results are normal). If the results are abnormal, you may need to be screened more often.

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 – a simple test that can help identify whether you have osteoporosis (thinning bones). It can also help you and your doctor create a plan to prevent broken bones in the future.

Tests for High Blood Pressure

When your blood pressure (the force of your blood pushing against your vessels) is consistently too high, it can lower life expectancy and lead to serious (and possibly deadly) health conditions. Blood pressure of 130/80 or higher is considered high (hypertension). Your doctor's blood pressure goal for you will depend on your personal factors.

BLOOD PRESSURE CATEGORY	SYSTOLIC mm Hg (Upper Number)	and/or	DIASTOLIC mm Hg (Lower Number)
NORMAL	LESS THAN 120	and	LESS THAN 80
ELEVATED	120 – 129	and	LESS THAN 80
HIGH BLOOD PRESSURE (HYPERTENSION) STAGE 1	130 – 139	or	80 – 89
HIGH BLOOD PRESSURE (HYPERTENSION) STAGE 2	140 OR HIGHER	or	90 OR HIGHER
<u>HYPERTENSIVE CRISIS</u> (Consult your doctor immediately.)	HIGHER THAN 180	and/or	HIGHER THAN 120

If you have diabetes, your doctor will probably have you get these preventive screenings too:

Diabetic Retinal Exam – With diabetes, you’re at higher risk for glaucoma, cataracts and diabetic retinopathy. Since many eye problems occur before you notice any symptoms, the American Diabetes Association® (ADA) recommends a yearly diabetic retinal eye exam to find issues early. If your exam’s normal, you can wait two years, rather than one, for your next exam. Make sure your exam results are sent to your primary care doctor.

Nephropathy (Kidney Health) Screening –

This yearly urine test measures level of kidney function and looks for early signs of damage. Diabetes can cause kidney damage and potential failure. The ADA also recommends keeping your blood sugar and blood pressure under control to help protect your kidneys.

HbA1c Testing – A1C blood testing shows what

your average blood sugar has been over the past three months. Get this test at least twice a year. If you have medication changes or are still working to meet your blood sugar goals, you may need to get the test more often. The goal for most adults with diabetes is an A1C under 7%. However, some people with other health issues may have a different goal – ask your doctor what yours should be.

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



What to Know About Seasonal Affective Disorder

Seasonal affective disorder – or SAD – is a type of depression that occurs during certain times of the year. Here’s what you need to know to help you or a loved one dealing with this common issue.

It’s not just during the cold months.

There are two types of SAD. The most common, often called “fall-onset SAD,” begins in the late fall and continues into the spring or early summer. This is sometimes known as “winter depression.” But SAD can also begin in the spring and continue until the fall or later (called “spring-onset SAD”).

Common Symptoms

Symptoms are often similar to those of other types of depression – a lingering depressed mood for two weeks or more; feeling sad, hopeless or cranky most of the day; and difficulty enjoying the things you used to love. Additionally, symptoms may include low energy and prolonged tiredness, insomnia (trouble sleeping) or hypersomnia (excessive sleeping), restlessness, feelings of guilt or worthlessness, weight changes, confusion or forgetfulness, and more. Often, people with fall-onset SAD experience hypersomnia, weight gain and an appetite for starchy foods. Spring-onset SAD is commonly marked by insomnia, weight loss and less appetite.

Treatment and Tips

If you think you or a loved one has SAD, reach out to your doctor – they can help you find the best treatment for your (or your loved one’s) unique needs. They might suggest talk therapy with a counselor, light therapy or antidepressant medications.

Getting good sleep is also key to dealing with SAD and its symptoms. Try these helpful tips:

- Follow a regular sleep routine every day (as much as possible).
- If you can’t fall asleep, get out of bed and try again later.
- In the morning, sleep to the point of feeling rested – then get up and start your day.
- Don’t smoke. And don’t have caffeine or alcohol in the evening.
- Keep your bedroom dark, cool and quiet.
- Get your exercise during the day, not right before bed. And walk or jog outside to get your daily dose of sun.
- Use a “dawn-simulating” lamp that brightens your bedroom gradually in the morning, before the sun comes up.

For even more helpful tips, reach out to your doctor. SAD is common, but it doesn’t have to get in the way of you or your loved one living a full, healthy – and happy – life.

References

David Avery, MD, “Seasonal affective disorder: Treatment,” UpToDate®, 2022.

“Patient education: Seasonal affective disorder (The Basics),” UpToDate®, 2022.



Announcing Our New and Improved Member Account and Mobile App

Get started today!

We're excited to announce that we've launched a new Hally® member account and mobile app. Both are available now, and you'll love the new experience they offer! They place you and your needs front and center.

Why have we launched a new member account and mobile app?

- It gives you a better member experience.
 - You'll get better service and streamlined care, because it helps us work more closely with your doctors – and the hospitals, clinics and specialists you know and trust.
 - How? The new member account and mobile app are supported by MyChart – a very popular platform that many doctors, hospitals and clinics already use. By using the same platform they use, we can better coordinate your care if needed. The end result? Better service and streamlined care for you.
 - You get enhanced security, protecting your account through a two-factor authentication process.
 - You get more seamless and direct access to all your healthcare needs within one single app. If your doctors or hospitals are already using MyChart, you can add their organizations directly on the new mobile app.
- Just like on our previous Hally app and on hally.com, you get the same secure, instant and easy access to your health plan's coverage, where you're able to:
 - Sign up for alerts.
 - Go paperless by opting in for secure e-Delivery of your plan materials.
 - Pay your monthly premium or set up recurring payments.
 - View your claims, authorizations and Explanations of Benefits.
 - Find doctors, healthcare facilities and pharmacies covered by your plan.

But the best part? There's a new look, enhanced speed and download times, advanced connectivity to your doctor and much more! With the new member account and mobile app, your needs are met better than ever before.

- You also stay seamlessly connected to all the Hally health resources, programs, perks and offerings you've come to know and love – and within a new, enhanced experience! You get the tools, tips and resources you need to help you live your healthiest life.

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

You can get started right away – the new Hally member account and mobile app are available now!
Here's how to set up your new member account:

If you received a code via letter or email, follow these steps to register:

1. In your desktop browser, head to hally.com and click "LOGIN."
2. Follow the instructions provided within your letter or email.

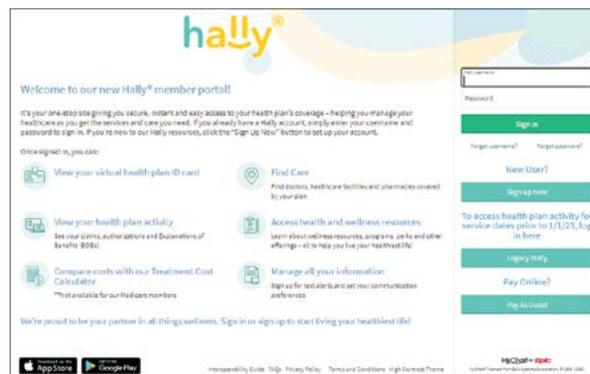
To register without a code:

1. In your desktop browser, head to hally.com and click "LOGIN."
2. Click "Sign up Now."
3. On the right hand side of the page, click "Sign up online."
4. Enter the required demographic information, complete the CAPTCHA (a test the computer uses to make sure you're a real human, not a robot) at the bottom of the page and click "Next."
5. After clicking "Next," you may be asked to verify your email address. To do so, click "Send to my email" and enter the code sent to your email.
6. Enter the username and password you'd like to use for your account. Click "Next."
7. Enable email and text message (SMS) notifications. Click "Sign In" to complete the sign-up process.

Note: Depending on how you pay your premium, you may be asked to reenter your payment information. If you're currently enrolled in Autopay, no further action is needed.

If you don't already have the MyChart mobile app, you need to download it to access your Hally account on the go. Here's how:

- Once your new Hally member account is all set up, download the MyChart mobile app by visiting the App Store® or Google Play®, or simply scan one of the QR codes at right.



Apple® and App Store® are registered trademarks of Apple Inc. Google Play® and the Google Play Logo are registered trademarks of Google LLC.

Already have the MyChart mobile app?
Many of our members already have the MyChart mobile app through their doctor or hospital – if you're one of them, great news! No need to re-download anything – just add us to the app.



If you have any questions or need help, contact tech support at (877) 647-2326. We're here for you!



Diabetes 101

An Eye Disease to Watch Out For

If you have diabetes, it's extra important to keep track of your eye health. Diabetes can cause a disease called diabetic retinopathy, which can lead to vision loss and even blindness. Here's what you need to know, from the American Academy of Ophthalmology®.



Diabetic Retinopathy: The Basics

With diabetes, high blood sugar levels can damage the blood vessels in your retina (the layer of tissue at the back of each eye). The vessels can swell and leak – or even close, stopping the blood flow. Sometimes new, abnormal vessels begin growing on the retina. All these things can lead to vision loss.

Two Stages

In general, there are two stages of diabetic eye disease. The early stage is called **non-proliferative diabetic retinopathy (NPDR)**, and a lot of people with diabetes have it. When you have NPDR, your tiny blood vessels leak, causing your retinas to swell. If your macula (an area in the center of each retina) swells, it's called a macular edema – and this is the most common cause of vision loss for people with diabetes. With NPDR, your retinas' blood vessels can also close (called macular ischemia). Additionally, tiny particles sometimes form in your retinas. All these issues affect your vision – when you have NPDR, your eyesight is usually blurry.

The later stage of diabetic eye disease is called **proliferative diabetic retinopathy (PDR)**, and it's very serious. With PDR, new blood vessels start growing on your retinas. These fragile vessels often bleed into the gel-like fluid that fills your eyes. When they only bleed a little, you'll probably just see a few dark-colored floaters. But when they bleed a lot, it can completely block all vision. The new vessels can also create scar tissue, which can lead to even more problems.

What to Watch For

You can have diabetic retinopathy and not notice anything abnormal, at least in its early stages. That's why yearly eye exams are so important, because they can catch it before symptoms appear. As the disease gets worse, you may notice these common signs, which will usually affect both eyes:

- A growing number of floaters.
- Blurry vision, or eyesight that shifts between blurry and clear.
- Dark or blank areas in your field of vision.
- Seeing colors as faded or “washed out.”
- Poor night vision.
- Loss of vision.

Take action today.

You can take action to help prevent vision loss from diabetic retinopathy. Follow these tips:

- Get your yearly dilated eye exam – every year.
- Talk to your doctor about ways to control your blood sugar. This can help prevent damage to your eyes' vessels.
- If you notice changes to your eyesight, call your eye doctor right away.
- If you're diagnosed with diabetic retinopathy, get treatment right away – while it's still in its early stages.

Your eyesight is too important to take lightly – be smart and stay on guard against diabetic eye disease.

References

Kierstan Boyd, “Diabetic Retinopathy: Causes, Symptoms, Treatment,” American Academy of Ophthalmology®, 2022.

Quick Facts

About Congestive Heart Failure

Congestive Heart Failure (CHF)

- When your heart doesn't pump as well as it should. This forces your heart to work harder to keep blood flowing through your body.
- Over 6 million U.S. adults have CHF.
- Contributes to hundreds of thousands of deaths in the U.S. every year.
- Has many causes and develops over time. Causes can include damage from past heart attacks or untreated high blood pressure, or having coronary artery disease, leaking heart valves or heart rhythm issues.

Treatments

- Treatments usually include a combo of lifestyle changes and medications.
- This helps strengthen your heart, reduces the work it has to do and helps control your retention of fluid.

Helpful Lifestyle Changes

- Eat less sodium (salt).
- Don't smoke.
- Limit alcohol.
- Ask your doctor if you should lower the amount of fluids you drink.
- Get regular sleep and perhaps even a daytime nap. Balance being active and resting.
- Make sure to get your exercise – but also ask your doctor what types of physical activity are best for you.
- Weigh yourself every morning – and keep a weight log to share with your doctor.
- Ask your doctor about other helpful lifestyle changes too!

A top-down view of a white bowl with a green rim, filled with a thick, orange-red tomato soup. The soup is garnished with diced tomatoes, cucumbers, and onions. The bowl sits on a white plate with a green border, which is placed on a rustic wooden surface. A piece of golden-brown, crusty bread is tucked behind the bowl. In the upper right corner, several whole cherry tomatoes are visible. The overall scene is bright and appetizing.

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Let's cook
something
delish!

Slow Cooker Vegetable Turkey Soup

6 servings
Serving size: 2 cups

Ingredients

- 1 lb. ground skinless turkey breast
- 3 large carrots, sliced crosswise into rounds
- 2 medium zucchini, halved lengthwise and sliced
- 1 small onion, chopped
- 1 28-ounce can no-salt-added tomato sauce
- 1 15.5-ounce can no-salt-added cannellini beans, rinsed and drained
- 2 medium garlic cloves, minced
- 1 T. dried Italian seasoning, crumbled
- ½ t. salt
- ½ t. pepper
- 4 c. fat-free, low-sodium chicken broth

Directions

1. Put all the ingredients in a slow cooker, stirring to combine and breaking up turkey.
2. Cook, covered and on low for 8 hours, or until turkey is no longer pink.

Find more delicious recipes at hally.com/category/food-cooking. Yum!

Calories: 224, Total fat: 2 g, Saturated fat: 1 g, Cholesterol: 51 mg, Sodium: 314 mg, Total carbohydrate: 27 g, Fiber: 7 g, Total sugars: 11 g, Protein: 26 g

Source: <https://recipes.heart.org/en/recipes/vegetable-turkey-soup>

Photo may include foods and ingredients that aren't a part of this recipe or included in the nutrition analysis.

Doctor's Orders

Learn more about colorectal cancer.

Colorectal cancer is one of the most common cancers – but also highly curable when caught early. Here's some key information from the not-for-profit healthcare organization **Fight Colorectal Cancer**.

Signs and Symptoms

Watch out for these signs. But also know two key things: symptoms aren't the same for everyone, and many people get colorectal cancer without noticing any symptoms (which is why regular screenings are so important).

- **Blood in your stool (poop) or bleeding from your rectum.** Make sure to let your doctor know the color of the blood (and of your stool); whether the blood's on or in your stool; how often it occurs; and if any other symptoms happen at the same time.
- **Significant or ongoing changes in your bowel habits.** Everyone has different habits for going to the bathroom – there is no one “normal.” But if you experience big or lasting changes to your usual routine, talk to your doctor. For example, if your stools become hard to pass or their color becomes black/tarry, clay-colored, white or deep red. Schedule a doctor's visit if you haven't passed stool for three days; have very narrow stool; experience mild abdominal pain; get sudden urges to go to the bathroom while being unable to control your bowel movement; or have unexplained weight loss. And get immediate medical help if there's blood, mucus or pus in your stool; you have severe abdominal pain; you can't pass gas; or if you have watery, diarrhea-like stools for 24+ hours.
- **Narrow stools.** If your stools are more narrow (thinner) than usual, it's often not a cause for concern – especially if this happens only once in a while. But if you have repeated narrow stools for over a week, talk to your doctor.
- **Frequent gas-passing pains, bloating, abdominal cramps or feelings of fullness.**
- **Rapid or unexplained weight loss.**
- **Extreme tiredness, fatigue or weakness.**

Be smart – take these steps.

- **Stay up to date on your colorectal cancer screenings.** Beginning at age 45, get screened for colorectal cancer – and keep getting screened as often as your doctor says. This is very important even when you have no symptoms or family history of the disease. Let this sink in: 60% of colorectal cancer deaths can be prevented with screening. Talk to your doctor about screening options (it's not just colonoscopies!) and what's best for you.
- **If you have a family history of colorectal cancer or any other risk factors, ask your doctor about beginning your screenings at an even younger age.**
- **No matter how old you are, if you experience any of the signs or symptoms above, don't ignore them – reach out to your doctor right away.**

Colorectal cancer affects far too many lives – but, thankfully, we have tools to prevent it or catch it early. Stay up to date with your screenings, watch for warning signs and keep a close relationship with your doctor. Your health will thank you.

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

Right Care, Right Place

Know where to go for care.

When you need a healthcare service, where should you go? Should you call your primary care provider? Visit the hospital or urgent care clinic? It all depends, based on what your illness, injury or need is; how severe it is; how soon you need care; your location; and more. Use this guide to help – and cut it out and put it on your fridge for easy reference.



Where to Go	When to Go	Typical Costs	Appointment Needed?
Primary Care Provider (PCP)	Non-emergency care. Physicals and wellness checks, vaccines, routine care and illness. Available in person and (often) by phone/video.	\$-\$\$	Yes. Available during usual business hours. Same-day often available.
Virtual Visits*	Non-emergency care. Illness, injury, behavioral health and more. Available from home or anywhere, by phone or video through hally.com.*	\$ Free with some plans.	No. Available 24/7, 365. Wait Time: ~15 mins.
Urgent Care Clinic	Non-emergency care. Illnesses and injuries that need care right away. Available in person.	\$-\$\$	No. Available for extended hours. Often open seven days a week.
Emergency Department	Emergency care. Immediate treatment for serious or life-threatening illnesses, injuries and issues.	\$\$\$\$	No. Available 24/7, 365. Potentially longer wait times.

For coverage information – or if you have any questions – call the number on the back of your health plan ID card. **And remember, always call 911 right away if you have a life-threatening medical or mental health emergency.**

Have you tried out virtual visits?*

Getting expert, trusted help for your physical, emotional and behavioral health needs has never been easier. Many plans offer **virtual visits**, which let you connect with board certified doctors and psychiatrists, as well as licensed therapists, by phone or secure video 24 hours a day, 365 days a year – all through your phone, tablet or computer.

Physical Health Needs – Get help for your allergies, insect bites, rashes, cold and flu

symptoms, ear problems, pink eye, nausea, vomiting, diarrhea and many other common conditions.

Emotional and Behavioral Health Needs – Get help for anxiety, stress, depression, grief, PTSD, trauma, bipolar disorder, addictions and substance issues, and more.

Easily set up a virtual visit online from **hally.com**.* Simply log in and get started today.

**Virtual visits aren't available on all plans. Also, some plans feature virtual visits through a source other than hally.com. To see if virtual visits are available on your plan (and to see if they're offered through hally.com), please see your health plan materials or call the number on the back of your health plan ID card.*

For more information about virtual visits, or help getting started, call the number on the back of your health plan ID card.

Virtual care isn't meant to treat all medical conditions – please remember to always visit the emergency department or call 911 for emergencies.

You'll need to have an online member account (for your health plan) before you're able to access virtual visits. If you haven't already created an account, visit login.hally.com.

For more specific details and information about coverage and costs for virtual offerings, please see your health plan materials or call the number on the back of your health plan ID card.



Cut here!

Antioxidants – Your Body’s Ally in Health

You’ve probably seen the word “antioxidants” on food packages or heard it on your favorite cooking show – but what exactly are antioxidants? It’s a big word, for things that can offer big protection for your health. Read on to learn more!



The Basics

Vitamin C, vitamin E and carotenoids (which include beta-carotene, lycopene and lutein) are all antioxidants. They protect your cells against free radicals. And what exactly are free radicals? They’re molecules that are created when your body breaks down food or when you’re exposed to tobacco smoke or radiation – and they may play a role in causing cancer, heart disease and other health problems. Antioxidants help keep your cells healthy, protecting them from the damage caused by these free radicals.

Carotenoids

There are 600+ types of carotenoids in the foods we eat! Beta-carotene, lycopene and lutein are perhaps the best known. Foods high in carotenoids may help prevent certain cancers, lower your risk of macular degeneration (eye damage that can cause loss of vision) and more. Looking for tasty meals with lots of carotenoids? Include red, orange and deep-yellow veggies, and certain dark-green leafy veggies too. Think sweet potatoes, carrots, tomatoes, winter squash, Brussels sprouts, broccoli and spinach. Yum!

Vitamin E

Vitamin E protects your health in many ways. As an antioxidant, it helps protect your cells from damage that could lead to cancer, heart disease, cataracts and more as we age. It can also offer protection from chronic diseases. Find vitamin E in vegetable oils, nuts, seeds, peanut butter, whole grains, wheat germ and fortified cereals.

Vitamin C

This is perhaps the best known of all. Vitamin C helps protect your body from infection and cell damage, helps you absorb iron, helps produce collagen (the tissue that holds your muscles and bones together), and more. Up your levels of vitamin C with citrus fruits (think oranges, grapefruits and tangerines), strawberries, sweet peppers, broccoli, tomatoes and potatoes.

Even More Antioxidants

Other antioxidants include flavonoids, tannins, phenols and lignans. Find these in veggies, herbs, fruits, whole grains, nuts, seeds, spices and cocoa.



Getting hungry?

And getting excited about protecting your health? Find delish recipes at hally.com/category/food-cooking – have fun exploring and search for dishes with the foods mentioned above. You’ll love the variety of tasty options!

References

“Healthy Lifestyle: Antioxidants, Slide show: Add antioxidants to your diet,” Mayo Clinic, 2022.

Esther Ellis, MS, RDN, LDN, “Antioxidants Protecting Healthy Cells,” Eat Right®, Academy of Nutrition and Dietetics, 2021.

Busting Myths About Vaping

Don't be fooled – vaping is not harmless. In fact, it can be quite dangerous to your health. Let's bust some common myths that are out there.

Vaping is safe.

False. Although many e-cigarettes have fewer chemicals than regular cigarettes, they still have many toxic or cancer-causing chemicals. They are far from safe.

Vaping isn't addictive.

False. It's rather simple. Nicotine is highly addictive. If your e-cigs have nicotine in them, they're addictive.

Vaping can't harm your brain.

False. Your brain's still developing into your 20s. Vaping can harm it as it grows.

Vapes are not tobacco.

False. They contain nicotine from tobacco leaves, and the Food and Drug Administration (FDA) considers them tobacco.

Vaping helps you quit smoking.

False. The FDA does not approve vaping as a way to quit smoking.

Get help quitting.

Tobacco – yes, including vapes – is dangerous. But we know quitting isn't easy. In fact, many people don't succeed until their second, third – or even twelfth – time trying. But it's worth trying – and trying again – until you're able to stop. And you don't have to do it alone. There's a lot of help waiting for you:

- Reach out to your doctor and ask them for help quitting.
- Call the number on the back of your health plan ID card and ask if your plan includes Quit For Life® – a personalized program to help you quit. Visit hally.com/care to learn more.
- Visit cdc.gov/tobacco for tips, resources and more.

Here's something that's not a myth: You deserve the best health and quality of life. Fact. Take action today and get the help you need to quit tobacco for good. And don't be fooled by vapes – they're just another harmful form of tobacco in disguise.



Headaches, Migraines and When to See Your Doctor

Headaches. They can be small or quite painful, rare or frequent. It's easy to wonder: When is a headache particularly worrisome – and when should I see my doctor about them? We're here to help, with expert advice from the American Migraine Foundation.

Red Flags

If you experience any of these “red flags,” reach out to your doctor. They'll evaluate your headaches and probably do some exams. In some cases, they may also order tests or set up further investigations.

Thunderclap Headache:

Very bad headache that reaches max pain in a second or two.

Positional Headache:

Has big shifts in intensity when you change position.

Headache from Exertion:

Headache started by sneezing, coughing, straining or sexual activity.

Constant Headache:

Lasting ache that's always in the same location.

Headache that never goes away.

Headache paired with fever, chills, weight loss or night sweats.

Vision Loss:

Headache along with worsening vision in one or both eyes.

Big changes in how often you get headaches, their pattern or their characteristics.

Pregnancy:

Headaches that begin (or change) during pregnancy, labor and delivery, or right after the birth.

New Headaches:

Ones that start (or change) in people over 50 or those who have (or had) conditions like cancer, HIV or other autoimmune illnesses.

Migraine aura symptoms that begin immediately, last over an hour or do not resolve.

Headache paired with: weakness on one side of your body; changes in your consciousness; vertigo; or trouble seeing, walking, speaking or understanding.



Keep track of your headaches.

To manage your headaches – and to help you stay alert for those dangerous red flags – keep track of your symptoms. This will also help you discover possible triggers and notice how well medications and other treatment regimens work. Start a headache journal and note your symptoms, when they begin and end, how your sleep is affected, what you're eating, how medicines are working, and anything else you want to include. Or set up a spreadsheet with this information if that's easier. You can even download a headache tracking app to your smartphone or tablet – there are many to choose from, and they can set up automatic alerts to remind you to write down your symptoms. Find whatever works best for you.

And most importantly...

Talk to your doctor. This is key, since they know your health and have the expert knowledge to help you. If you notice gradual and concerning changes in your headaches, set up an appointment. Prepare beforehand for the appointment by writing down your symptoms, the changes that concern you and anything else you think's important. Your doctor will help you decide what the best next steps are – whether it's imaging, a new treatment or something else. Please note: if you ever have any large, sudden changes in your headaches, seek *immediate* medical help – don't wait to set up an appointment that could be days away.

Headaches can be...well...quite the headache. But make sure you take care of your long-term health by watching out for those dangerous red flags and by always keeping your doctor involved. Together you can chart the best course *ahead*.

Drug Use and Addiction: What You Should Know

If you or a loved one is facing difficulties with drug use or addiction, know that you're not alone – and that there's a lot of help out there. Here's some key information about drug use, addiction, treatment and more, from MedlinePlus (a service of the National Library of Medicine).

Some Basic Information

Put simply, drugs are chemical substances that affect your body and mind. They include the illegal drugs we hear a lot about, but also alcohol, tobacco, marijuana, over-the-counter and prescription medications, and more. Drugs can be very harmful to our health and well-being – so we should never use any of the illegal substances and never misuse any medications. For legal medicines, misuse means taking the drugs differently than your doctor prescribed; taking larger doses; injecting, inhaling or consuming them in a different way than you're supposed to; using them to get high rather than for healing or treatment; or taking drugs prescribed to someone else.

Drug Addiction

Drug use, misuse and abuse can all lead to drug addiction – a chronic brain disease that causes you to keep taking drugs repeatedly. When you're addicted, it becomes much harder to stop. Every person's brain and body are different, so some people become addicted more easily or quickly after starting drug use – but some become addicted over time or never at all. Whether you become addicted depends on many things. Risk factors may include:

- Your genetics and biology.
- Untreated mental health issues.
- Trouble or stress at home, school or work, or with making friends.
- Starting drug use at a young age.
- Being around others who use drugs.

Signs of a Drug Problem

- Loss of interest in favorite things.
- Having extreme energy, talking fast or saying strange things.
- Being unusually tired and sad.
- Quick swings feeling bad, then good.
- Issues at work, school or home.
- No longer taking care of health or hygiene.
- Spending lots of time alone.
- Missing appointments or meetings.
- Sleeping at odd hours.
- Eating less or more than usual.

Treatment, Help and More

Drug use and addiction affect many people. There's nothing to be embarrassed about, as long as you commit to taking action to quit and get better. If you or a loved one is facing these issues, there's plenty of help that's easy to get.

- **Talk to your doctor.** They're your partner on your side. And they have expert knowledge, resources and more.
- **Take steps to get treatment.** Options include counseling (talk therapy), medicines or both. Ask your doctor what's best for your unique issues, health and lifestyle preferences.

If you have a severe addiction, you might need hospital-based or residential treatment.

- **Join a support group in your community or online.**
- **If you have mental health issues, get help for those also.** This will raise your chances of beating addiction too.

Finally, also reach out to family, friends, mentors and other loved ones for support. Drug use and addiction are serious, but there's never been more help available. Get expert advice and treatment from your doctor, love and support from those around you, and encouragement and optimism from the fact that so many people have successfully beat this before.

Stay healthy during and after pregnancy.

We get it – having a baby isn't a 24/7 fairy tale, and it comes with a lot of emotions, difficult and confusing "to dos," and a whole lot of things to remember. But you shouldn't forget to take care of your own personal health and well-being – and that of your baby. Here's some quick information to help you both stay healthy during and after your pregnancy.



The Basics

The most important factor in preventing health complications during your pregnancy and after your baby arrives is receiving quality prenatal (before delivery) and postnatal (after delivery) care. The steps to receiving proper care – and keeping both you and your baby healthy – include services and support tailored to your specific needs. Your doctor and care team will be the best “go-to experts” in deciding your unique care plan, and here are some general guidelines and recommendations:

- Experts recommend that you have 13 to 14 prenatal care visits with an obstetrician, midwife or other maternity care professional before your delivery.
 - Your prenatal care visits should begin as early in your pregnancy as possible. According to the CDC, babies born to mothers who've not received prenatal care are three times more likely to have a low birth weight and five times more likely to die. Once you learn you're pregnant, you should begin prenatal care immediately so your doctors can monitor your health and your baby's progress.
 - Throughout your pregnancy – in addition to your prenatal care visits – you should also make sure to eat nutritious foods, live a healthy lifestyle and keep getting your other regular healthcare checkups too.
- The experts also recommend that you have several postnatal checkup visits after you have your baby. Postnatal care is sometimes also called postpartum care.

- These checkups and services will help you adjust to the many physical, social and psychological changes that often result from giving birth.
- Your first postnatal care visit – with your gynecologist or other obstetric healthcare provider – should take place within three weeks of giving birth. During this first postnatal visit, your care team will develop a plan for your ongoing postnatal care, which will conclude with a comprehensive exam no later than 12 weeks after giving birth.

Why It's So Important

These pre- and postnatal visits are key to your and your baby's health. Positive outcomes are more likely when you stay up to date with your care throughout pregnancy, birth and the postnatal period. Your care team will help you watch for and treat any complications that arise; give you physical, mental and emotional support; and help prepare you to best care for and feed your newborn.

Nothing is more important than the health of you and your baby. Commit to a comprehensive plan for during and after your pregnancy that includes regular prenatal and postnatal care visits, a healthy diet, exercise, and the other steps your doctors tell you are key – in your unique situation – to staying healthy and prepared. Give yourself the best possible odds for ensuring a happy, healthy outcome for both mother and baby.



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Want to make a difference?

We are looking for members who are comfortable sharing their perspectives and feedback on how we, as a health plan, can improve for the greater good of our plan participants. If you are interested in learning more, please email Gregg.Mottola@HealthAlliance.org. Meetings are typically held on a quarterly basis, so you would be asked to share your perspective three to four times a year. As always, our goal is to represent our plan participants' diverse geographic, cultural and medical backgrounds.

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