

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 your ID card for specifics.

Hally health

Celebrating National Nutrition Month®

Did you know that March is National Nutrition Month®? It's an annual campaign run by the experts at the Academy of Nutrition and Dietetics, and for 50 years it's been helping Americans make healthy – and yummy! – food choices.

This year's theme is "Food Connects Us." The Academy reminds us that food isn't only fuel for our bodies, but that it also connects us to our loved ones, our cultural heritage, shared traditions and beautiful memories.

Gathering together to plan, prepare, cook and eat a meal also gives us the chance to learn more about the foods in our favorite dishes, where they come from, and the health and nutrition facts of each of the ingredients. Food greatly affects our health and well-being, so connecting to this knowledge is key.

There are experts who can help: registered dietitian nutritionists (RDNs). These professionals can teach us about the healthy (or harmful) effects of specific foods, and they can help create a meal plan personalized to your specific health needs. They're a go-to person to discover how foods impact our health throughout our lives.

Did you know that we have registered dietitian nutritionists on our staff? They're here to help you as health coaches and as our health and wellness coordinator. To speak with a health coach for one-on-one nutrition advice, call the number on your ID card. It's a free, built-in part of most plans, just waiting for you to use!



National Nutrition Month® is a federally registered service mark of the Academy of Nutrition and Dietetics. National Nutrition Month® themes, graphics and assets are copyrighted by the Academy of Nutrition and Dietetics. Unauthorized use of "National Nutrition Month®" is strictly prohibited.

Here are some more great resources on National Nutrition Month® and eating healthy:

- [EatRight.org/National-Nutrition-Month](https://www.eatright.org/National-Nutrition-Month)
- [hally.com/category/food-cooking](https://www.hally.com/category/food-cooking)
- [MyPlate.gov](https://www.myplate.gov)

Why Blood Pressure Matters



Your blood pressure is more important than you probably realize. In fact, many different parts of your body can be harmed when your blood pressure gets too high. Here's what you should know, from the American Heart Association®.

What Can Happen

High blood pressure, also known as hypertension, can cause great harm to your body over time. If your blood pressure gets too high and you aren't able to control it, all of the following can happen:

- **Heart attack.** Your blood vessels can become blocked, preventing blood flow to your heart.
- **Stroke.** The vessels that bring blood to your brain can burst or become blocked.
- **Kidney disease.** Damage to your blood vessels can prevent your kidneys from filtering blood properly.
- **Heart disease and heart failure.** When you have high blood pressure, your heart needs to work harder. This can cause serious, long-term damage.
- **Vision loss.** The vessels in your eyes can become greatly damaged.
- **Sexual dysfunction.** High blood pressure can cause erectile dysfunction in men and may lead to a lower sex drive for women.

Take action.

But it's not all gloom – you have the power to help prevent these issues, by maintaining a healthy blood pressure. Ask your doctor for tips, and:

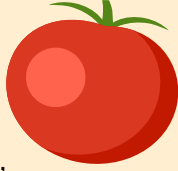
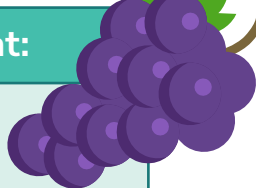
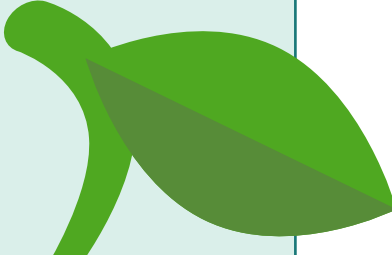
- **Regularly check your blood pressure.** Buy an at-home blood pressure monitor or use a monitor at a public place, like a pharmacy. Talk with your doctor about what numbers you should aim for.
- **Live a heart-healthy lifestyle.** Get enough physical activity, eat healthful foods, don't smoke, get plenty of sleep, limit (or avoid) alcohol and keep stress in check.
- **Take your medications as prescribed.**

Also check out the resources we have available: Learn more about blood pressure and staying healthy by visiting [hally.com](https://www.hally.com) and searching for "blood pressure." It's our honor to treat you as a partner in helping you improve your overall health and wellness.

Diabetes 101

Healthy Eating with Kidney Disease

We value your well-being and treat you as a partner in helping you improve your overall health and wellness. Part of this is helping you know what's best to eat when faced with certain chronic conditions and diseases. If you have both diabetes and chronic kidney disease, here's the information you need to know from the experts at the Centers for Disease Control and Prevention (CDC). Cut this out and keep it as a handy guide on your fridge.

Eat LESS:	Healthy Foods You Can Eat:
<ul style="list-style-type: none"> • Salt (sodium). Packaged foods and restaurant dishes are often high in salt, so pick fresh, homemade options. • Sugar and foods high in refined carbs (cookies, crackers, soda, etc.). • Potassium (depending on the stage of your kidney disease). Too much of this mineral can cause heart problems. Oranges, tomatoes, potatoes, whole-grain bread and many other foods are high in potassium.  • Phosphorus (depending on the stage of your kidney disease). Large amounts can damage your bones, eyes, heart and blood vessels. Meats, dairy, nuts, beans, many packaged foods, whole-grain bread and more are high in phosphorus. • Protein (depending on the stage of your kidney disease). Ask your doctor what the right amount is, since getting too little protein isn't healthy either. Ask how much is best for you – and what protein foods you should focus on. 	<ul style="list-style-type: none"> • These types of fruits: apples, grapes, berries, cherries and plums.  • These veggies: onions, cauliflower, eggplant and turnips. • Proteins: lean meats (fish, poultry), eggs and unsalted seafood. • Carbs: white bread, bagels, sandwich buns, unsalted crackers and pasta. • Instead of seasoning with salt, use spices, herbs, mustard and flavored vinegars. But do NOT use “salt substitutes” unless your doctor tells you they're OK – many of these are high in potassium. • Drinks: water, clear diet sodas, unsweet tea. • Helpful tip: If you drink orange juice to boost low blood sugar, switch to kidney-friendly apple or grape juice. You'll get the same effect with a lot less potassium! 
AVOID:	
<ul style="list-style-type: none"> • Herbal supplements. These are NOT safe if you have kidney disease. Some vitamins can also be harmful. ALWAYS ask your doctor before taking any supplements or vitamins. 	

Most importantly...

Work closely with your doctor and dietitian. Your specific diet will vary based on what stage of kidney disease you're in, as well as if you're on dialysis or not. Your doctor and dietitian will know what's best, even if your needs change. Ask them for tips, resources – and even tasty recipes. You got this!

For more information, tips and resources on diabetes management, visit hally.com and search “diabetes.”

Annual Wellness Visit vs. Annual Physical

It's important to get an annual wellness visit and a physical. We're here to help explain what the differences are – and why you should get both every year.

Annual Wellness Visit

An annual wellness visit is a yearly appointment with your primary care provider (PCP) where you and your PCP work together to develop a prevention plan personalized for you. The focus is prevention, and it's an opportunity for you to have a conversation about your overall health, health risks and end-of-life preferences. This visit includes creating or updating a personalized health plan that lists your preventive screenings as well as chronic condition management.

There are many benefits to having an annual wellness visit. It helps detect concerns sooner than a regular office visit, reduces your risk of disease development and increases your chances of getting preventive care services. An annual wellness visit also gives your PCP a more complete picture of your health, which can help with medical advice and future diagnoses. Make sure to bring a complete list of the medications you take, your vaccine history (if you have it), and a list of all the providers and specialists you see.

Here's what may take place during your annual wellness visit:

- Measurements (weight, height and blood pressure).
- Screenings/assessments (fall risk, hearing, depression, cognition and activities of daily living).
- Medication review (prescription drugs, over-the-counter medications and supplements).
- Obtaining a personal and family medical history.
- Creating a list of your healthcare team (providers, specialists, care coordinators, etc.).
- Creating a wellness plan, including a screening and vaccine schedule.



Your health plan covers in-network annual wellness visits at 100%. But if your healthcare provider finds a new health problem and takes steps to treat it during your visit, you may be billed for the diagnostic care you receive.

Annual Physical

An annual physical is different from an annual wellness visit. A physical is a “hands-on” exam, while the annual wellness visit is a “hands-off” exam. Your annual physical is a head-to-toe assessment. During this exam, your PCP will check your vital signs, like blood pressure, heart rate, respiration rate and temperature.

They'll examine your abdomen, head, neck, lungs, heart, skin, arms, legs, balance, strength and mental state. Just like the annual wellness visit, the focus is on prevention and screening. For most of our Medicare Advantage plans, you'll pay nothing for your annual physical as long as you see an in-network provider.

Why You Should Get Both

It's important to have both an annual wellness visit and an annual physical. This gives you and your PCP the most complete view of your health and helps you create a personalized prevention plan to keep you as healthy as possible. Contact your PCP to schedule your appointments.

For more information about annual wellness visits or annual physicals, call the number on your ID card.

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

Closing Gaps in Care: Spring into screenings.

As springtime blooms, it's a perfect time to hit "refresh" on your own well-being. Stay healthy all year long by setting up your annual screenings and exams. Schedule early, since appointments often become harder to get as the year goes on.

Annual Wellness Visit (Not Applicable to All Health Plans)

If your plan includes an annual wellness visit, make sure to set this up. This yearly appointment with your primary care provider (or another member of their team) allows you to make a personalized wellness and prevention plan.

Breast Cancer Screenings

According to guidelines from the experts at the CDC:

- **Women age 40 to 74** should talk to their doctor about when to start getting mammograms – and how often to get them.
- **Women age 50 to 74 at average risk** should get a mammogram every two years.
- **Women of all ages** should give themselves a breast self-exam once a month. Visit [NationalBreastCancer.org/Breast-Self-Exam](https://www.nationalbreastcancer.org/Breast-Self-Exam) for more info.

Cervical Cancer Screenings

Here are the CDC recommendations:

- **All women age 21 to 64** should be screened for cervical cancer.
- **Pap tests** and **HPV tests** are the best screening tools.
- Begin screening with **Pap tests at age 21**. If your results are normal, get tested every three years.
- At **age 30**, talk to your doctor about which screening tool (Pap test, HPV test or both) is your best option.

Colorectal Cancer Screenings

According to the CDC:

- **Adults age 45 to 75** should get regular colorectal cancer screenings.
- **Several different types of screenings are available:** colonoscopy, sigmoidoscopy, CT colonography and at-home stool tests. **Ask your doctor which type is best for you and how often you need to get it.**



Diabetic Retinal Eye Exams

- **Adults age 18 to 75 with diabetes** should get a retinal eye exam every year. This will help your doctor find and treat eye problems early, before they get more serious.
- If your results look good, your doctor may say it's OK to wait two years for your next exam.
- Your exam may be covered by your health plan as long as your eye doctor codes the exam visit with a medical diagnosis.

Kidney Health Evaluations

- Every year, **adults age 18 to 85 with diabetes** should get a kidney health evaluation that includes **both** an estimated glomerular filtration rate (eGFR) test **and** a urine albumin-creatinine ratio (uACR) test. Diabetes can cause kidney damage, and these tests check how well your kidneys are working.

Osteoporosis Screenings

The American Academy of Orthopaedic Surgeons recommends:

- **Getting a DEXA scan** if you're at risk of osteoporosis. Postmenopausal women age 45 to 65 are most at risk, but both women and men can get osteoporosis, and at any age. Talk to your doctor about your risk.

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



Diabetes and Eye Health

When you think of diabetes, you might not think of your eyes – but you should. Diabetes can harm the health of your eyes and the quality of your vision. Read on to discover key information from the CDC.

Diabetic Retinopathy

Many people have never heard of diabetic retinopathy (DR), but it's one of the main causes of blindness in adults. It occurs when high blood sugar levels damage the blood vessels in your eye, causing vision loss that can even result in complete and permanent blindness.

Everyone with diabetes is at risk for DR. It's also key to know that having high blood sugar, blood pressure or cholesterol levels raises your risk, as does smoking. And the longer you've had diabetes, the more likely you are to get DR.

It's vital that you get a dilated eye exam at least once a year because many people don't notice any symptoms during the early stages of DR. The exam can help catch it when it's easiest to treat, before symptoms even become noticeable. Once DR symptoms start appearing, they can include:

- Blurry vision.
- Difficulty seeing colors.
- Spots, dark shapes or distortion in your vision.
- Empty or dark areas in your vision (or "blind spots").
- Flashes in your vision.
- Trouble reading or doing fine-detail work.
- Loss of eyesight.

If you notice any of these symptoms – or any other changes in your vision – call your eye doctor right away.

Protect your eyes.

You have the power to protect your vision by preventing, delaying or slowing DR. Here's how you can help lower your chance of vision loss:

- **Never skip your dilated eye exam.** Get this at least once a year – and your eye doctor may want to check your eyesight even more frequently based on your specific health factors.

During your exam, they'll check how well you can see, plus they'll take an up-close look at your eyes and the blood vessels inside them. This exam is key to catching any issues early, so you can get started on any treatment you might need to protect your sight.

- **Control your blood sugar, blood pressure and cholesterol levels.** Ask your primary care doctor for tips, resources and advice.



- **Don't smoke.** If you need help quitting, reach out to your doctor. Plus, many of the health plans we provide and administer include Quit For Life®, a personalized program to help you quit smoking. If you're interested, call the number on your ID card and ask if your plan includes Quit For Life.
- **Get moving.** Make sure you get enough physical activity, which – believe it or not – helps protect your eyes as you manage your diabetes.

Finally, if you do find yourself diagnosed with DR, begin treatment as soon as you can. The sooner you're treated – even if you don't have any symptoms yet – the better your care will work.

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

An Important Conversation with Your Doctor

Medicines can be miracles. And many of us take multiple medications every day. But sometimes taking certain combinations of medicines can be harmful. Also, as we get older, sometimes the cons of taking a certain drug begin to outweigh the pros. At this point, it's key to talk to your doctor about whether you should continue on these medications. Here's some information, and some thoughts to consider, about two specific scenarios.



Using BOTH an Opioid and a Benzodiazepine

It can be very dangerous to be taking both an opioid medication and a benzodiazepine drug. It can increase your risk of respiratory depression and fatal overdose. According to the CDC, nearly 14% of overdose deaths in 2021 involving opioids also involved benzodiazepines.

Opioids are strong pain medications. They include:	Benzodiazepines treat muscle spasms, seizures, insomnia, anxiety disorders, alcohol withdrawal and more. They include:	
<ul style="list-style-type: none"> • Morphine. • Oxycodone. • Codeine. • Methadone. • Oxymorphone. • Hydrocodone. • Hydromorphone. • Fentanyl. • Tramadol. • Buprenorphine. • And others. 	<ul style="list-style-type: none"> • Diazepam (Valium, Diastat, Valtoco). • Alprazolam (Xanax). • Triazolam (Halcion). • Lorazepam (Ativan, Loreev). • Clonazepam (Klonopin). • Chlordiazepoxide (Librium). • Clobazam (Onfi, Sympazan). • Clorazepate (Tranxene). • Estazolam (ProSom). 	<ul style="list-style-type: none"> • Flurazepam (Dalmene). • Midazolam (Nayzilam, Seizalam, Versed). • Oxazepam (Serax). • Quazepam (Doral). • Remimazolam (Byfavo). • Temazepam (Restori). • And others.

Taking MULTIPLE Anticholinergic Drugs

It can also be harmful to be taking multiple anticholinergic medications. If you're taking more than one of these, it can raise your risk of cognitive decline as you get older. Plus, side effects can lead to falls, arrhythmias and seizures.

Anticholinergic drugs treat nausea, irritable bowel syndrome, Parkinson's disease, COPD, asthma, stomach or intestinal ulcers, motion sickness, overactive bladder, eye problems, and more. They include:		
<ul style="list-style-type: none"> • Spiriva (Tiotropium). • Ipratropium (Atrovent). • Hyoscyamine (Levsin). • Solifenacin (Vesicare). • Oxybutynin (Ditropan XL). • Cyclopentolate (Cyclogyl). • Atropine (Isopto Atropine). • Glycopyrronium (Qbrexza). • Glycopyrrolate (Robinul). 	<ul style="list-style-type: none"> • Scopolamine (Transderm Scop). • Trihexyphenidyl. • Benztropine (Cogentin). • Dicyclomine (Bentyl). • Atropine (Atropen). • Belladonna Alkaloids. • Clidinium. • Darifenacin (Enablex). 	<ul style="list-style-type: none"> • Fesoterodine (Toviaz). • Flavoxate (Urispas). • Homatropine Hydrobromide. • Orphenadrine. • Propantheline (Pro-Banthine). • Methscopolamine. • Tolterodine (Detrol). • Trospium. • And others.

What You Should Do

If you're currently taking both an opioid medication and a benzodiazepine drug, OR if you're currently on multiple anticholinergic medications, talk to your doctor. Ask them if it's necessary for you to take these drugs, and whether the risks might outweigh the benefits.

Ask if there are other treatment/drug options and whether it might be best to taper off of one or more of your current drugs ("tapering" means gradually reducing the amount of a drug you take). Talk about side effects you should be looking out for. Your doctor will be an expert on your health, and they'll give you the advice you need while finding the best treatment plan for your safety and well-being.



Curried Brown Rice with Pumpkin Seeds, Apricots and Spinach

Makes: 4 Servings
Serving Size: 1 Cup

Ingredients

- 1 cup brown rice (short grain, uncooked)
- 1 tablespoon olive oil (or cooking oil)
- 2 garlic cloves, chopped
- 1 red onion, peeled and finely chopped (medium)
- 1 tablespoon curry powder
- 2 cups fresh spinach, chopped
- 2 cups low-sodium vegetable broth (or low-sodium chicken broth)
- Salt and pepper (optional, to taste)
- 1 cup dried apricots (chopped)
- 1/2 cup pumpkin seeds, toasted (pepitas)

Directions

1. Rinse the rice well.
2. Heat the oil over medium heat in a large, heavy saucepan.
3. Add the onions and garlic and cook for three to four minutes, then stir in the curry powder.
4. Add the rice and broth and bring to a boil over high heat.
5. Reduce the heat, cover and simmer for 30 to 45 minutes until the liquid is absorbed.
6. Remove from heat and stir in the apricots and spinach.
7. Replace cover and let sit for 10 minutes.
8. Add the pumpkin seeds, salt, pepper (and more curry if desired) and fluff with a fork.
9. Serve immediately.

Let's cook something delish!

Calories: 476, Total Fat: 19 g, Saturated Fat: 3 g, Cholesterol: 0 mg, Sodium: 152 mg, Total Carbohydrate: 67 g, Fiber: 9 g, Total Sugars: 21 g, Protein: 15 g, Calcium: 102 mg, Iron: 5 mg, Potassium: 500 mg

Source: MyPlate, myplate.gov/recipes/supplemental-nutrition-assistance-program-snap/curried-brown-rice-pumpkin-seeds-apricots
Photo may include foods and ingredients that aren't a part of this recipe or included in the nutrition analysis.

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

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 your 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 your ID card.*

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

Stay steady, prevent falls.

Falls are not something to take lightly. According to the CDC, millions of falls are reported in the U.S. every year among older adults. And each year, these falls result in thousands of deaths and millions of emergency department visits. As we age, our risk of falling goes up. But this shouldn't stop us from living life and doing things we love. You can take action to help avoid falls – and we have key tips and resources to help you! Here's what you should know and do.

Talk to your doctor – they're your best resource!

We strongly encourage you to reach out to your doctor to chat about falls and fall risks.

- Have them complete a personalized fall-risk assessment with you.
- Tell your doctor if you've fallen in the past, worry about falling or have moments when you feel unsteady.
- Go over the medications you take, including over-the-counter ones. Your doctor will know if any can cause side effects like dizziness, confusion or sleepiness.
- Ask if a bone mineral density (DEXA) screening (to test the strength of your bones) or vitamin supplements (to help improve bone, muscle and nerve health) are right for you.
- Have your doctor check your feet – and ask about proper footwear (like shoes with nonskid soles rather than house slippers) and whether you may benefit from seeing a foot specialist.
- Ask if you should start using a walker, cane or other type of support.

More Steps to Take

- **"Fall-proof" your home.** Remove clutter, throw rugs, and any wires or cords that are in the way. Make sure you have enough lighting to see clearly and get night-lights for your hallways. Have sturdy handrails and good lighting in all staircases. Install grab bars in the bathroom and get a nonslip mat for your shower or bath.
- **Stay active.** Certain exercises can improve your strength and balance – which can help prevent falls. Try yoga (or chair yoga), tai chi or some other fun activity! Ask your doctor what exercises they recommend.
- **Get your yearly eye exam.** Bad eyesight can lead to falls. Get new glasses or contacts if your vision's changed.



More Resources Just for You

- Visit **hally.com** and search for "fall risk."
- Go to **MayoClinic.org** and search for "fall prevention, simple tips to prevent falls."
- For a checklist to help you spot and fix hazards in your home, go to **cdc.gov** and search "Check for Safety, A Home Fall Prevention Checklist for Older Adults."
- Visit **nia.nih.gov** (the National Institute on Aging's website) and search "fall prevention."
- Check out **cdc.gov/falls** for facts, resources, tools and more.

Falls are serious, but you have the power to help prevent them. Talk to your doctor today and take action to lower your risk and stay steady on your feet. You got this!

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



Cut here!



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HEALTH AND WELLNESS OR
PREVENTION INFORMATION

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 your ID card for specifics.