

# MORE FROM LIFE<sup>®</sup>

## NO MORE EXCUSES

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Classic honey flan

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## FROM OUR PRESIDENT

Dear Cigna-HealthSpring friends,



Time passes so quickly. It's hard to believe we're already heading into fall. Winter is right around the corner — and so is flu season. It's so important to get vaccinated every year that the Centers for Disease Control

and Prevention created an awareness campaign called “No More Excuses,” to show that getting a shot is easy.

As a Cigna-HealthSpring member, you can get yours from your main doctor or any

other in-network location that accepts Cigna-HealthSpring STAR+PLUS, like your local pharmacy. And be sure to ask your doctor if you need one or both pneumonia shots.

See you next issue!



Shawn Morris  
President, Cigna-HealthSpring

## CONNECT WITH US



### Member Services

**1-877-653-0327 (TTY: 7-1-1)**

Monday to Friday

8 a.m. to 5 p.m. Central Time

### Service Coordination

**1-877-725-2688 (TTY: 7-1-1)**

Monday to Friday

8 a.m. to 5 p.m. Central Time



[www.facebook.com/Cigna](http://www.facebook.com/Cigna)



[www.twitter.com/Cigna](http://www.twitter.com/Cigna)



[WeCanHelp@HealthSpring.com](mailto:WeCanHelp@HealthSpring.com)



[STARPLUS.MyCignaHealthSpring.com](http://STARPLUS.MyCignaHealthSpring.com)

## MEDICAL TRANSPORTATION PROGRAM

The Medical Transportation Program (MTP) is part of the Texas Health and Human Services Commission (HHSC). If you have no other way to get to your doctor or drugstore, MTP can help. Call at least 2 business days before you need a ride (5 days if your doctor is outside of town). Have the following information ready when you call:

- > Your Medicaid ID number or Social Security number

- > Your address and phone number
- > Address and phone number of the place you need to go
- > Date and time of your visit
- > Any special needs

To request transportation, call your Service Coordinator or **1-877-MED-TRIP (1-877-633-8747)**. This is a free call in Texas.

# PROTECT YOURSELF

## No more excuses!

Are flu and pneumonia shots on your fall season to-do list? If not, they should be. Getting a flu shot each year is the best way to protect you and your family from illness. Keep reading to learn more.

### DO I REALLY NEED A FLU SHOT?

Yes! You should get one every year because flu viruses constantly change. And the previous shot's protection wears off.

### WHAT IF I DON'T GET ONE?

The flu can be very serious for high-risk groups like children and older adults. It can lead to hospitalization, even death. Even if you're not at high risk, you can pass the virus on to others who might be. During a regular flu season — October to May — about 90% of flu-related deaths occur in people aged 65 and older.

### WHERE CAN I GET A FLU SHOT?

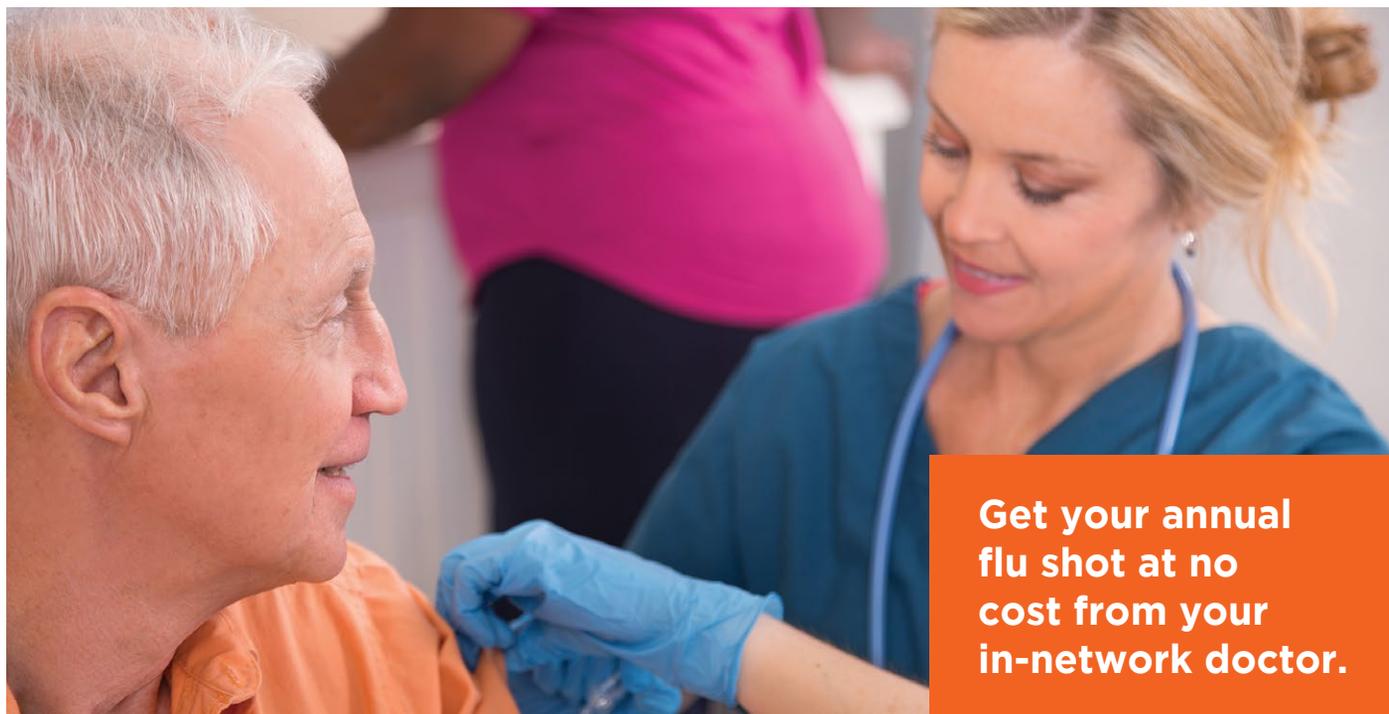
You can get your annual shot at no cost from your Cigna-HealthSpring doctor or other in-network location that accepts Cigna-HealthSpring STAR+PLUS, like

your local drugstore or clinic. To find a location near you, visit [flu.gov](https://www.flu.gov) and enter your ZIP code in the finder search box.

### DO I NEED A PNEUMONIA SHOT TOO?

Now is a good time to make sure you're fully protected. In addition to an annual flu shot, you should also get vaccinated against pneumonia. There are now two pneumonia shots, and you should get them both. If you haven't had them, or can't remember if you have, talk to your doctor. He or she will decide which vaccine you need first and how long you should wait between shots. Pneumonia shots are no cost as long as you get them from your Cigna-HealthSpring doctor.

Sources: Centers for Disease Control and Prevention; National Institute of Allergy and Infectious Diseases



**Get your annual flu shot at no cost from your in-network doctor.**

A photograph of two women high-fiving. The woman on the right is smiling broadly, wearing a pink shirt. The woman on the left is partially visible, also wearing a pink shirt. A blue banner is overlaid on the bottom left of the image.

# HOW TO WIN THE BATTLE OF THE BULGE

Instead of a die-t, try a live-it

Are you one of the 45 million Americans who go on a diet each year? If so, you might also be one of the 44 million dieters who gain it all back — and then some. So what's the secret to lasting weight loss?

You might be surprised at the answer: Say no to diets!

Instead, try a live-it. By making a few, small changes to the way you eat, you can say goodbye to those extra pounds forever. First, let's take a look at a couple of tactics you may have already tried and should steer clear of in the future:



## Fad diets

Someone's always talking about the latest, greatest diet. Whether it's no carbs, cabbage soup or a grapefruit with each meal, fad diets rarely create lasting results. They can even be dangerous. Bypassing food groups can rob you of nutrients you need to stay healthy.



## Yo-yo dieting

Diet, lose weight, gain it back, diet, lose weight, gain it back ... sound familiar? This weight-loss cycling is called yo-yo dieting, and it's been linked to long-term weight *gain* — the exact opposite of what you're trying to achieve. It can also increase the risk of heart disease and sudden cardiac death.

*Continued*

It takes time to lose weight in a healthy way and allow your body to adjust. By making permanent lifestyle changes that include eating fewer calories and adding physical activity to your daily routine, you'll drop pounds in a healthy, lasting way. Here are a few things to focus on:

## Portion control

It's no secret that food servings have gotten larger over the years. That translates to more calories consumed. In 1970, Americans ate an average of 2,160 calories a day. Today, it's nearly 2,700 — a 25% increase!

Try these tips to reel in your portions:

- > **Use a smaller plate.** Big plates make servings look smaller, which can lead to overeating.
- > **Learn about healthy serving sizes;** for example, a normal serving of meat, fish or poultry is about the size of your palm. And a cup of fruit is the size of your fist.
- > **Say no to super sizing.** Fast-food workers are trained to ask, so just say no!

## Eat to lose

You have to eat to lose weight and keep it off. That may seem at odds with the concept of weight loss, but eating the right foods means you can drop pounds without putting your health in jeopardy. Don't skip meals. Depriving yourself only ups the chances of eating too much of the wrong things later.

## Know how much is enough

Obesity increases your risk for diabetes, heart disease and hypertension. Believe it or not, losing just five to 10 percent of your body weight can help you avoid these

and other health problems. For example, if you weigh 200 pounds, aim for a 10-20 pound loss.

When you're ready to get started on a healthier you, call our Service Coordination department at **1-877-725-2688** and ask to speak to a Cigna-HealthSpring health coach. Be sure to talk to your doctor before making changes to your diet or starting any exercise program.

Sources: Medline Plus; Centers for Disease Control and Prevention; Gallup; Health.com; American Heart Association



**Create healthier versions of the foods you love by substituting better-for-you ingredients. See page 12.**

## Obesity screening and counseling

If you have a body mass index (BMI) of 30 or higher, you may be covered for face-to-face therapy sessions to help you lose weight. The sessions have to take place in a primary care setting, like a doctor's office, where it can be coordinated with your other care and a personalized prevention plan. This service is at no cost to you. Talk to your Service Coordinator for more information.

# CONNECTING THE DOTS DOCS

If you live with an ongoing health condition, you probably see a specialist — maybe more than one. At times, you might even visit your specialists more often than your main doctor.

Because ALL your providers are vital members of your health care team — and because their goal is to keep you healthy — it's important that everyone on your team communicates with one another. Here are a few things you can do to keep your doctors connected with you, each other and your health care needs.

After a specialist visit:

- > **Ask questions.** If you get home and feel confused or have questions about your medicine, treatment plan or what you should do next, call your specialist's office.
- > **Follow up with your main doctor.** Your specialist should have reported back to your main doctor about your visit. This may include test results, a diagnosis and/or a treatment plan. Ask your main doctor if you need to schedule an appointment to go over next steps in your treatment.
- > **Keep any follow-up specialist appointments.** These appointments are important to ensure a successful treatment plan. And always bring a list of your medications with you to share with your doctor. He or she can help you keep your list updated.



## Have you received a bill from a provider?

You should never be balance billed for a service covered by your Cigna-HealthSpring plan. If you do receive a bill from a specialist or other provider, don't pay it. Instead, call Member Services or send us the bill. We'll contact the provider directly and take care of it.

# IMPORTANT INFORMATION FROM CIGNA-HEALTHSPRING ABOUT...

## Our drug list

The Texas Medicaid Preferred Drug List (Formulary) is updated monthly. The list includes both generic and brand name drugs. Updates may include the addition of brand name and generic products, removal of brand name products, and the addition or removal of quantity limits, step therapy, prior authorization requirements, etc. View Formulary changes on our website at **STARPLUS.MyCignaHealthSpring.com**. Select the Members tab, then choose Pharmacy Information from the drop-down menu.

## STDs/HIV

HIV, or human immunodeficiency virus, attacks the immune system and can cause AIDS (acquired immunodeficiency syndrome). However, having HIV doesn't mean you have AIDS.

If you think you've been exposed to HIV, it's important to get tested. Your plan covers HIV screening once a year, or up to three times a year during pregnancy.

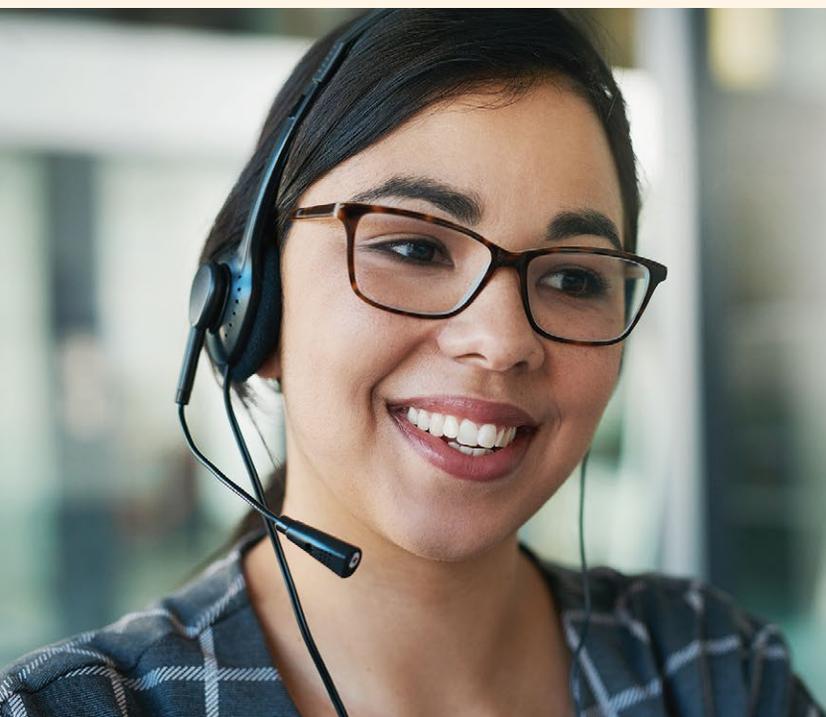
## Employment assistance/supported employment

Employment assistance helps you find a job that's a good fit based on your interests, skills and workplace needs.

Supported employment helps disabled members adapt to their work settings and keep their jobs. It provides support if you're self-employed, work from home or work where people without disabilities also work. You'll receive help and training based on your needs.

## Emergency medicine supply

If you try to fill a prescription only to learn Cigna-HealthSpring has to approve it first, you may be able to get a 72-hour supply of the medication at no cost. Ask your pharmacist if this option is available to you. Then when the prescription is approved, you can fill the rest.



For more information about these services and programs, call Member Services at **1-877-653-0327 (TTY: 7-1-1)**, Monday to Friday, 8 a.m. to 5 p.m. Central Time



# IT TAKES A VILLAGE

## A teamwork success story

***“Alone we can do so little; together we can do so much.”***

**Helen Keller’s famous saying perfectly describes Cigna-HealthSpring’s approach to health care. One member’s experience with Service Coordinator Laura proves that a little teamwork can make a big difference.**

Samuel,\* 61, has diabetes, high blood pressure, high cholesterol and depression. Laura, his Service Coordinator, knew Samuel needed help based on the health risk assessment he completed as a Cigna-HealthSpring member. But before she could help him improve his health, she had a few obstacles to overcome.

First, Samuel speaks only Spanish, and, while his wife speaks English, she has trouble with some words. So Laura relied on their daughter, Martina,\* to fill in the gaps and act as interpreter, since she’s fluent in English.

Then Laura discovered that Samuel wasn’t taking his blood pressure or diabetes medicine; sometimes he even took his wife’s

medicine. He wasn’t testing his blood sugar regularly and he hadn’t seen a doctor or any specialists about his health conditions.

“I discovered Samuel wasn’t really plugged in,” Laura says. “He didn’t have a doctor and wasn’t getting care. So we started with the basics: finding him a main doctor and providing diabetes education.”

Both Samuel and his wife also dealt with depression. They felt socially isolated because they had left their community to move in with their son. Even though they lived with family, they still felt disconnected.

“They didn’t have any community engagement, and that can affect mental

*Continued*

health and worsen depression,” says Laura. “I focused first on getting Samuel medically stable with doctor’s appointments and follow-up care. Then I gave him information that could help provide social support.”

Laura sent Samuel a list of community resources, including senior centers in his area. She let him know about computer classes in Spanish at his local library. And she helped him find information about local Hispanic events and gatherings.

To address his gaps in medical care, Laura scheduled doctor appointments for him and coordinated visits with an optometrist and a dentist. Laura also worked with Martina to order a glucose meter so her dad could test his blood sugar at home.

Samuel now sees a main doctor, who has referred him to specialists for his diabetes care. He regularly tests his blood sugar at home. And he’s taking his own diabetes medicine. Laura continues to work with Samuel and his family to ensure his journey to better health is successful.

“It truly takes a village,” Laura says. “To know they have someone in their court — someone who is supporting them — is so important



**“To know they have someone in their court — someone who is supporting them — is so important and integral to getting the care they need.”**

and integral to getting the care they need. I think they feel supported by me and know they can come to me when there are issues and problems.

“When I complete a home visit, I walk away with a full heart,” she continues. “I enjoy connecting with members like Samuel to form relationships where they trust me to be there for them on an emotional level. I come away with a sense of accomplishment, of doing good for another human being. It’s extremely rewarding.”

\* Names have been changed to protect privacy

## SUDOKU

	7	4	1					2
			5		6		4	9
	8	9			7	3		
		6			2		9	7
9	2						3	4
7	1		6			8		
		2	7			9	5	
1	9		4		5			
3					8	4	1	

### How do you Sudoku?

The object of Sudoku is to fill in the numberless squares so every row, every column and every 3x3 box contains the numbers 1 to 9 only once.

The solution is on page 11.

# “COULD I HAVE DONE MORE?”

## Myths and truths about suicide

“Why?” If suicide has touched your life, you may have asked this question more than once. Why did he do it? Why did she feel she had nowhere to turn? Why couldn’t I save him?

Myths about suicide abound, and it’s important to understand the truth.



**Myth: Talking about suicide might make someone consider it.**

**Truth:** Mental health experts say if you’re worried about someone, the best course of action is to talk openly with them. It may be a difficult conversation to have, but asking about suicidal thoughts can often break through the secrecy that feeds suicidal behavior. Talking could motivate that person to get help.

**Myth: People who talk about suicide don’t usually go through with it.**

**Truth:** People who talk about it are most likely reaching out for help. They may be dealing with anxiety and hopelessness and feel there are no other options.

**Myth: People who threaten suicide are just looking for attention.**

**Truth:** Suicide threats are most often a cry for help, not just a way to get attention.

**Myth: Most suicides occur with no warning.**

**Truth:** In most cases, warning signs are there as clues that have been missed, ignored or misinterpreted. Research shows that up to 80% of suicidal people send signals of intent to others, hoping they’ll be recognized as a cry for help. These signals may include joking about suicide.

Suicide is the  
**10<sup>th</sup>**  
leading preventable  
cause of death in  
the U.S.

Each year  
**44,193**  
Americans die  
by suicide.

There’s  
one death  
by suicide every  
**13**  
minutes.

On average,  
there are  
**121**  
suicides  
each day.

There are  
approximately  
**750,000**  
suicide attempts  
each year.

Men age  
**75**  
and older have  
the highest suicide  
rate of any  
age group.

**Myth: If someone has attempted suicide once, he or she is not likely to try again.**

**Truth:** While there are times suicide risk might be short term and related to a specific situation, in many instances it's a long-term issue. That means if the situation isn't resolved, the danger of another attempt remains.

**Myth: There's nothing you can do to stop someone who has decided to commit suicide.**

**Truth:** Most people who are suicidal don't really want their lives to end — they want the pain to stop. By offering emotional support, you can be an important lifeline. And you can help that person get the support he or she needs by calling 9-1-1 or contacting local mental health professionals.

**Myth: Only people with a mental disorder consider suicide.**

**Truth:** Many people with mental disorders don't consider suicide, and not all people who commit suicide have a mental disorder; in fact, the vast majority of people diagnosed with depression never try to take their own lives.

Sources: American Foundation of Suicide Prevention; National Institute of Mental Health

## Sudoku solution

from page 9

6	7	4	1	3	9	5	8	2
2	3	1	5	8	6	7	4	9
5	8	9	2	4	7	3	6	1
8	4	6	3	5	2	1	9	7
9	2	5	8	7	1	6	3	4
7	1	3	6	9	4	8	2	5
4	6	2	7	1	3	9	5	8
1	9	8	4	6	5	2	7	3
3	5	7	9	2	8	4	1	6

## There is help!

If you're in crisis, contact Cigna-HealthSpring's Behavioral Health hotline at **1-800-959-4941 (TTY: 7-1-1)**, or call the National Suicide Prevention Lifeline at **1-800-273 TALK (1-800-273-8255)**, 24 hours a day, 7 days a week.

# SMART SUBSTITUTIONS

## Revising your recipes for healthier meals

Do you avoid your favorite foods because they're too darn unhealthy? What if you could make your favorite dishes healthier simply by substituting some ingredients? Here are some tasty alternatives to consider when making your favorite recipes:

Instead of:	Substitute:	Instead of:	Substitute:
 Vegetable or canola oil	 Mashed bananas or applesauce	 Sour cream	 Plain Greek yogurt
 French fries	 Baked sweet potato fries	 Pancake syrup	 Fruit compote
 Mayo on sandwiches	 Mashed avocado	 Salt	 Herb-based seasonings like garlic and onion powders

See the honey flan recipe on page 14 for a great example of how to substitute ingredients without sacrificing taste. It uses skim instead of whole milk and honey instead of sugar. For even more healthy substitutions, visit [www.heart.org](http://www.heart.org) and enter "smart substitutions" in the search box.

# YOU'VE GOT A FRIEND

## Ombudsman can lend a helping hand



We can all use a friend. Someone who's in our corner. Someone who cares about our quality of life and actively works to improve it. If you live in a long-term care or assisted living facility, that friend may come in the form of an ombudsman (pronounced OM-budz-man), a Swedish word that means "someone who speaks for others."

### WHY IS THERE A NEED FOR AN OMBUDSMAN?

While most facilities provide good care, sometimes one may violate the rights of its residents. These violations can include abuse, neglect, poor care or lack of meaningful activities. An ombudsman visits facilities to monitor conditions and levels of care. He or she can serve as a voice for residents who may be unable to speak for themselves.

### WHAT DOES AN OMBUDSMAN DO?

An ombudsman can:

- > Help residents understand their rights and options in their facility and in the community
- > Listen to the resident's side of a problem
- > Resolve complaints and concerns (ranging from food service to therapy)

Services are free and confidential.

### WHO CAN USE OMBUDSMAN SERVICES?

Services are available to:

- > Anyone age 18 or older who is or has been a resident of a long-term care facility
- > Friends and relatives of a facility resident or former resident
- > Facility staff members with resident-related concerns
- > People who are considering using a long-term care facility

Residents have the right to involve the ombudsman as much or as little as desired. He or she is not connected with Cigna-HealthSpring or any other insurance company or health plan.

For more information or to ask for help, call the Texas Department of Aging and Disability Services at **1-800-252-2412 (TTY: 1-877-648-2233)**, Monday to Friday, 8:30 a.m. to 5:00 p.m. Central Time. Or visit **[www.dads.state.tx.us/news\\_info/ombudsman](http://www.dads.state.tx.us/news_info/ombudsman)**. You can also send an email to [lrc.ombudsman@dads.state.tx.us](mailto:lrc.ombudsman@dads.state.tx.us).

# CLASSIC HONEY FLAN

A heart-healthy twist on a classic dessert

## Directions

Preheat oven to 325°F. Spray four ovenproof custard cups with cooking spray. Prepare water bath by bringing water to boil in saucepan over medium-high heat. In mixing bowl, combine whole egg, egg substitute, milk, ¼ cup plus 1 tablespoon honey, lemon zest and vanilla. Beat until mixed but not foamy. In separate bowl, combine 2 tablespoons honey with cinnamon. Place custard cups in baking dish large enough to accommodate water bath. Spoon ½ tablespoon honey/cinnamon mixture into each cup. Divide egg mixture into cups. Place baking dish on middle oven rack; carefully pour boiling water into it 1-inch deep. Bake 45 minutes or until knife blade comes out clean when inserted. Serve warm or cold.

Makes 4 ½-cup servings

Per serving: 199 calories; 2g total fat; 1g saturated fat; 55mg cholesterol; 114mg sodium; 0g total fiber; 8g protein; 40g carbohydrates; 235mg potassium

Recipe is from the National Heart, Lung, and Blood Institute's *Delicious Heart Healthy Latino Recipes* collection at [www.nhlbi.nih.gov](http://www.nhlbi.nih.gov).



## Ingredients

Nonstick cooking spray  
1 large egg  
½ cup egg substitute  
1½ cups fat-free (skim) milk  
¼ cup plus 3 tablespoons honey, divided  
½ teaspoon grated lemon zest  
1 teaspoon vanilla  
½ teaspoon ground cinnamon

## CIGNA-HEALTHSPRING MEMBER SERVICES

Monday to Friday  
8 a.m. to 5 p.m. Central Time

**1-877-653-0327 (TTY: 7-1-1)**



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