

The newsletter for NHP members



# Our Neighborhood

Fall | Winter 2011

**The Flu Shot — What  
You Need to Know**

**What it is Like to  
Have a Mammogram**

**The Most Important  
Thing to do When  
Living with Diabetes**

**New! The Food Plate**

**The SafeLink Hotline**

[nhp.org](http://nhp.org)



**Neighborhood  
Health Plan™**

Your health. Our promise.

# Table of Contents



## Featured Topics

- 3 Living with Diabetes**
- 4 Your Child's Health**
- 7 New! The Food Plate**
- 8 Womens' Health**
- 11 The SafeLink Hotline**
- 2 Autumn Allergies**
- 4 You Really Need a Check-up after Your Baby is Born**
- 5 Could Your Child Have a Concussion?**
- 6 Drug Safety and How to Dispose of Drugs Safely**
- 8 What Happens When You Have a Mammogram**
- 12 The Risks of Colon Cleansing**
- 13 Do You Have an Advance Directive?**

## Important Information About the Flu Shot

Don't take chances with the flu. Anyone can get the flu. Even healthy kids and adults can get sick from the flu and spread it to family and friends. The best way to protect yourself is to get the flu vaccine now.

Winter is just around the corner and that means greater risk of getting the flu. Getting the flu can cause you to have a fever, sore throat, cough, chills, head and body aches and problems with your lungs. Many people die from the flu every year. The Center for Disease Control urges all people over the age of six months to get the flu vaccine.

### Flu Vaccine facts

- The vaccine is safe
- You cannot catch the flu from the vaccine
- The earlier you get the shot the better (don't wait until people around you get sick)
- You need to get the shot every year (even if you had it last year)
- People with egg allergy may still be able to get the vaccine (consult your doctor)

There are two types of flu vaccine available:

- The flu shot, which is given by injection into the muscle
- Nasal spray, which is sprayed into the nostrils (nasal spray vaccine is not recommended for everyone)

If you have any questions about getting the flu vaccine, please call your doctor's office. For up-to-date information on the flu, [www.cdc.gov/flu](http://www.cdc.gov/flu) or [www.aapredbook.org/flu](http://www.aapredbook.org/flu)

## Are You High Risk for a Serious Case of the Flu?

Some people have a higher risk of getting very sick if they catch the flu. People with high risk include:

- Pregnant women
- Young children
- Seniors and the elderly
- People with chronic health problems like asthma, diabetes, or heart and lung disease

If you live with a person with high risk, you should get the vaccine. You don't want to spread the flu to them.



## A Chance to Join NHP's Member Advisory Committee!

NHP is always trying to find ways to improve. Would you like to be on a team of Medicaid and Commonwealth Care members that helps NHP make our services, materials, and website even better?

We are looking for some new members to join our Member Advisory Committee. We meet three or four times a year on a Friday morning. We give our members a VISA gift card for each meeting they attend, and we pay the cost of travel to get to our office.

If you want to know more, please call 617-979-5815 to speak to our Member Advisory Committee staff member, or call the NHP Customer Care Center at 1-800-462-5449.

## Is the Flu Shot Safe for People with an Egg Allergy?

*Now people with egg allergies should not be afraid to get the shot. Call your health care provider to discuss new information.*

Up until now, people who are allergic to eggs have not been able to get the flu shot. The vaccine is made with eggs and people thought it could be harmful. Studies show that most people with mild egg allergies (like hives or a skin rash) did not have a problem with the flu shot.

The risk of having serious problems from the flu is greater than the risk of having problems from the shot. The new guidelines say:

- A health care provider who is familiar with egg allergies should give the shot
- The nasal spray should not be used
- Skin allergy testing is not needed
- The full dose of vaccine can be given
- The person should be observed in the office for 30 minutes after the shot

# Living with Diabetes

## Preventive Care for Adults Aged 21 and Over

Routine preventive care is an important part of staying healthy. NHP urges all members to visit their primary care providers for preventive care. Examples of covered preventive care benefits include:

- Physical exams — every one to three years
- Blood pressure monitoring — at least every two years
- Cholesterol screening — every five years
- Pelvic exams and Pap tests (women) — initiate Pap test and pelvic exam at three years after first sexual intercourse or by age 21. Every one to three years depending on risk factors.
- Breast cancer screening/  
Mammogram — every other year over the age of 50.
- Colorectal cancer screening — fecal occult blood test annually, sigmoidoscopy every 3 to 5 years, colonoscopy every 10 years starting at age 50
- Flu shot — annually
- Eye exams — once every two years
- Diabetes screen — every three years beginning at age 45. Screen more often and beginning at a younger age for those who are overweight and if risk factors are present.
- Dental — call the NHP Customer Care Center to ask about specific dental coverage that is available through NHP or MassHealth.

NHP covers many more preventive care benefits. You can find a full listing on NHP.org. Be sure to talk to your primary care provider about your routine health care needs.

## Autumn Allergies

Fall is the season of freshly-picked apples and the annual kaleidoscope of brightly-colored trees. It can also be a problem for those who suffer from seasonal allergies.

As nice as the fall is, it can be hard on those with fall allergies. The most common causes are:

- Ragweed — the leading cause of allergy symptoms. This common weed's pollen is in the air for most of the fall.
- Mold spores from dying leaves



Over-the-counter medicines such as anti-inflammatory nose sprays or antihistamines are effective in dealing with allergy symptoms during autumn. If the symptoms persist, please consult your doctor.

Besides the pollen and mold spores, the cold air and low humidity can cause the lining of the nose to become swollen.

Symptoms include:

- Sneezing
- Runny or stuffy nose
- Itchy and watery eyes

There are things you can do to feel better. To help you cope during the season:

- Vacuum often using a HEPA type filter if you can. A clean house will reduce the amount of pollen and spores.
- Use a humidifier to help relieve nasal dryness.
- Change air filters once a month during the fall. The air in your home will have far less mold spores, dust mites, and pollen.

## The First Step in Managing Your Diabetes

You can prevent many of the problems caused by diabetes. The most important thing you can do is to keep your blood sugar under control by:

**Taking your insulin or other medicine.** Insulin lowers blood sugar. With the help of your health care provider, you can learn when and how to take your insulin or other diabetes medications.

**Checking your blood sugar often.** Keeping your blood sugar level within a certain range is the best way to stay healthy. A simple blood self-test can tell you what your blood sugar level is.

**Eating healthy, balanced meals and snacks.** Healthy eating can lead to good health results: stable blood sugar, a strong heart, weight control, and more.

**Getting regular exercise.** Check with your doctor to find out which activities will be safe for you. Try to do a total of about 30 minutes of aerobic exercise—such as walking—most days of the week. If you are just starting out, start with five minutes a day and gradually add more time. Even small amounts of exercise can help.

### Get routine check-ups

A routine check-up includes the following tests:

**A-1-C Blood Test** — Two to four times a year — checks your blood sugar levels over the past three months

**Cholesterol Blood Test** — Once a year — checks how much “abnormal” cholesterol is in your blood

**Urine Test** — Once a year — checks your kidneys

**Full Eye Exam** — Once a year — checks how healthy your eyes are

### Help is out there!

Your doctor or nurse can answer your questions about living with diabetes. They can refer you to a specialist if you need one. You might see:

- An endocrinologist
- A certified diabetes educator
- A dietitian
- An eye doctor
- A nutritionist
- A foot doctor

To feel your best, you need to control your diabetes and blood pressure. Your doctor or nurse can help you, but it is up to you to take the first step.



## High Blood Pressure and Diabetes

Having both diabetes and high blood pressure increases your risk of:

- Heart attack
- Stroke
- Eye disease
- Kidney disease

To start to control high blood pressure, make sure you:

- Have your blood pressure checked regularly
- Take steps to reach your blood pressure target

The American Diabetes Association and the National Institutes of Health suggest a target blood pressure of less than 130/80 mmHg for people with diabetes. When you keep your blood pressure below that, you lower your risk for the kinds of problems listed above.

There are simple changes you can make to control your blood pressure. Those changes can prevent or delay diabetes-related problems. Talk with your health care provider to learn more about what you can do.

## Thumbs Up Health Guides

A healthy lifestyle includes:

- Eating more fruits and vegetables
- Exercising at least 30 minutes a day

Experts say leading a healthy lifestyle may reduce the risk of:

- Stroke
- High blood pressure
- Diabetes
- Some cancers

NHP offers two books that can help you to live well, *Thumbs Up for Healthy Food Choices* and *Thumbs Up for High Blood Pressure Control*. Both guides are in English and Spanish. They use photos and graphics to show health facts, and are easy to use by adults and children. Thumbs up and thumbs down pictures help you learn about healthy choices and actions. Ask for a copy by calling the NHP Customer Care Center.

# Your Child's Health

## Health and Safety Birth to Two Years

Part of being a good parent is making sure your child is healthy and safe. Keep in mind that children under the age of two need special attention.

**Your child's immune system is not fully developed.** This means your child can get infections and they could get very sick. Take your child to the doctor for all scheduled well-child visits. The doctor will tell you which vaccines your child needs. Be sure to take your child for these shots on time. Practice healthy habits to protect your child. Wash your hands often and keep toys clean.

**Your child has no fear and does not know about danger.** You need to take steps to keep your child safe from everyday hazards in your house and outside. Watch your child closely. Pay attention if you have pets. Here are some other ways to keep babies and toddlers safe:

- Always use a rear facing car seat
- Place baby on his or her back when sleeping
- Keep small items out of reach
- Baby-proof your house
  - Use child security gates to block stairs
  - Cover electrical outlets
  - Keep chemicals and cleaning items locked up
- Use equipment correctly
- Never use worn or broken equipment (car seats, baby strollers, cribs)

If you are using pre-owned products, make sure they are safe. Check that it has not had a product recall. You can check a list of products recalled for safety reasons at U.S. Consumer Product Safety Commission

online at [www.cpsc.gov](http://www.cpsc.gov) (look for the "Search Recalls" link on the homepage) or by calling 1-800-638-2772.

No one can watch a child's every move or make a home 100% safe all the time. Try to find a balance between staying safe and letting your child explore.

## 10 Reasons to Have a Postpartum Check-up after Your Baby is Born

Your check-up after the birth of a baby is a great time for you to talk with your doctor or nurse. They want to know how you are doing.

The goals of the visit are to make sure:

1. Your body has returned to normal
  2. Your weight and blood pressure are checked
  3. You have any lab tests that may be needed
  4. You have a primary care provider to help you when you are not pregnant, and schedule other preventive care appointments
- Also, it is the time to talk to your doctor or nurse about:
5. When you can begin to exercise and resume sexual activity
  6. Birth control methods
  7. Your feelings
  8. Timing before becoming pregnant again
  9. Breastfeeding
  10. Any concerns you may have

Take care of yourself. Have your check up after the birth. When you are healthy, it is easier to care for the new little one in your life!

## Preventive and Well-child Care for All Children

Children who are under age 21 should go to their primary care provider for checkups even when they are well. As part of a well-child checkup, your child's doctor will offer screenings to find out if there are any health problems. These screenings include:

- Health
- Vision
- Dental
- Hearing
- Behavioral health
- Developmental
- Immunization status



There is no co-pay for your child's well-child checkups. At well-child checkups, your child's primary care provider can find and treat small problems before they become big ones.

The ages to take a child for full physical exams and screenings are:

- 1 to 2 weeks
- 1 month
- 2 months
- 4 months
- 6 months
- 9 months
- 12 months
- 15 months
- 18 months

Ages 2 through 20 — children should visit their doctor once a year.

Children should visit their doctor any time there is a concern about their medical, emotional, or behavioral health needs, even if it is not time for a regular checkup.

## Could Your Child Have a Concussion?

*Fall and winter games and sports can be safe when the proper equipment is used and when played by the rules, but accidents can happen any time.*

Playing rough is part of being a kid. But sometimes a bump on the head needs more than an ice pack. If a blow to the head is serious, it can cause a form of brain injury called a concussion.

Children and athletes who suffer head injury and concussion should be seen by a doctor, and may be kept from playing until cleared by their doctor. This is very important. After a first concussion, children have a much higher chance of a second one in the first few weeks after return to play. More concussions will increase the chance of serious brain injury.

Most concussions do NOT cause a child to pass out. **The most common symptoms are confusion and loss of memory.** A quick test for confusion would be to ask the child to repeat his or her name, birth date, the time, and the place. The list below describes concerns for serious head injury.

Call a doctor right away if your child is hit in the head and:

- Is younger than 6 months.
- Throws up more than once.
- Has a seizure or passes out.



*If your child may have bumped his head, watch out for confusion and loss of memory, the most common the signs of concussion. If you need to, get the advice of your primary care provider.*

- Has a bad headache that gets worse as time passes.
- Has trouble walking, talking, seeing, or seems confused.
- Is still dizzy after a while.
- Has blood or watery fluid coming out of the nose or ears.
- Has a cut that keeps bleeding after you put pressure on it for 10 minutes.
- Is weak or numb in any body part.
- Is very cranky and can't stop crying.
- Has trouble staying awake.
- Fell from a height greater than 3 feet.

To protect your child, make sure he or she:

- Wears a helmet when riding a bike, skating, skate boarding, or riding a scooter. Replace the helmet if it is damaged.
- Never rides in the street unless he or she can control the bike and follow traffic rules.
- Is always with an adult until old enough to ride alone.
- Sits in a rear-facing car seat until age two, forward-facing car seat through age four, booster seat through age eight and until thirteen rides in back seat. Be sure the car seat or booster seat is installed correctly and secured.
- Cannot fall down stairs or out of windows. Install safety gates and window guards in your home.

## Asthma Treatment May Change from Season to Season

Summer is a great time for kids. For many kids with asthma summer brings relief of their symptoms.

The summer is better for asthma control because kids have:

- Fewer colds
- Less time indoors
- No cold air to breathe

That is why some kids with asthma can either reduce their dose or even stop taking their control medicine in the summer. Sometimes the doctor will suggest it. Sometimes parents reduce the dose on their own.

If this is true for your child, be careful. Things can change very quickly once fall arrives.

- Returning to school means contact with a lot of kids. That can lead to respiratory infections, which are a common asthma trigger.
- Ragweed, which some kids are allergic to, starts to bloom in the fall and mold grows on fallen leaves.

ERs and hospitals treat more kids for severe asthma attacks in the fall. These are sometimes the children who had stopped taking their control medicine over the summer and did not start again in the fall.

### What should you do?

Talk to your child's doctor if you cut back on the dose or stopped your child's asthma control medicine.

Let the doctor know how your child's asthma was over the summer and discuss what to do for the fall and winter. Complete the quick and easy Asthma Control Test to give you and your doctor helpful feedback on how your child has been doing. You can get a copy of the Asthma Control Test at: [www.nhp.org/PDFs/Providers/Survey\\_ACT\\_child\\_EN.pdf](http://www.nhp.org/PDFs/Providers/Survey_ACT_child_EN.pdf).

**NHP asthma care managers will work with you and your doctor or nurse to find the treatment plan that works for you. Call us at 1-800-433-5556 x4644.**

# New! The Food Plate

## How You Can Get Rid of Drugs that You are No Longer Taking

- Remove any personal information from the bottle label
- Most drugs should NOT be flushed down the toilet
- Take drugs (in their labeled containers) to a community drug take-back program. October 29, 2011 is a National Take-Back Day. Look for information in your community or check [www.DEA.gov](http://www.DEA.gov).
- If a community drug take-back program is not available, keep the drug in its container and mix it with coffee grounds or kitty litter to make it unusable, then put it in a sealed bag or other container to prevent leaking. You can then get rid of the drug by throwing it away in the trash.

## Access and Utilization

For information about the utilization management (UM) process, and authorization requests and decisions, you have access to NHP Monday through Friday from 8:00 a.m. to 6:00 p.m., and Thursdays from 8:00 a.m. to 8:00 p.m. Call 1-800-462-5449 (TTY 1-800-655-1761) or send a fax 1-617-772-5512.

The Clinical Operations staff is accessible to members seeking information about the UM process Monday through Friday 8:30 a.m. to 5:30 p.m. by calling 1-800-462-5449 (TTY 1-800-655-1761). You may leave a message or send a fax after hours. The lines are available 24/7. All messages left after hours will be read the next business day.

## Drug Safety

By Catherine Pappas, PharmD  
Director of Pharmacy

Did you know that according to the FDA "Safe Use Initiative":

- At least 1.5 million side effects to drugs occur every year.<sup>1</sup>
- Over 5 million people over the age of 11 report taking a prescription pain reliever for a non-medical reason one month before the survey.

### So what can you do to use drugs safely?

To take drugs safely, you should make sure that you:

- Know the name of the drug
- Know why you are taking it
- Know how to take it
- Know about the side effects
- Read all of the labels on the drug bottle and follow the directions
- Tell your health care providers about drugs that you are taking. Include any over-the-counter drugs and "natural" supplements
- Keep a list of all of the drugs you take
- Know how to get rid of drugs the right way (see sidebar)

### How to store your drugs:

- In a safe place where kids and pets cannot get them
- In a secure place or a locked cabinet or storage box
- As directed on the label of the drug—does it need to be in the refrigerator or at room temperature?

1. Institute of Medicine, [www.iom.edu](http://www.iom.edu)



## If Your Child is Taking Medicine for ADHD

By Beacon Health Strategies, Neighborhood Health Plan's Behavioral Health Partner

Most of the time, medicine is used to treat Attention Deficit Hyperactivity Disorder (ADHD). If your child does take ADHD medicine, here are a few tips to keep in mind.

- It is important that you and your child follow the directions given by your provider. Your child must take the medicine as directed for it to work well.
- You and your child should follow up with your provider in the first month of taking the medicine.
- Ask your provider any questions you have about the medicine itself, or side effects your child may have.
- Once you have met with your provider, remember to schedule two more visits in the next few months.
- Do not stop your child's medicine without first talking to your provider.

### Questions?

Do you have questions about medicines and treatment for ADHD? If so, please contact your child's provider, or call Beacon Health Strategies, Neighborhood Health Plans' behavioral health partner at 1-800-414-2820.

## New Dietary Guidelines for Americans

### Out with the Food Pyramid and in with the Food Plate

The Dietary Guidelines for Americans by The U.S. Department of Agriculture (USDA) and the Department of Health and Human Services have changed.

The old advice was to eat a diet with lots of grains to get the fiber we need. New guidelines say that we should be getting more fiber from many sources like fruits and vegetables.

The American Dietetic Association says that most adults are not getting enough:

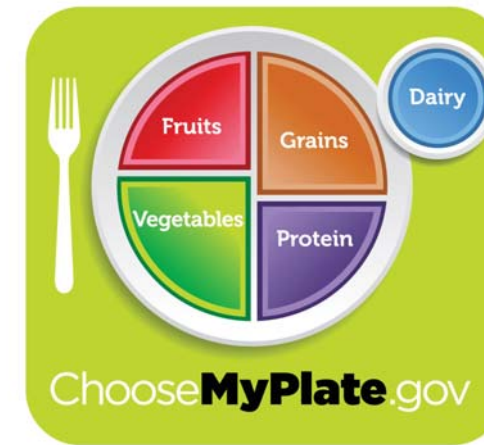
- Fruits
- Vegetables
- Whole grains

They say there is a lot of work to do to get the word out about:

- Healthy food choices
- Reducing calories
- Portion control

Along with the new 2010 Dietary Guidelines, the old food pyramid is now a brightly colored picture of a food plate. They hope that this new graphic will be easy for people to use.

The plate has four color-coded sections showing how much of each food group to eat. A glass of low fat or skim milk is shown by a small circle called dairy.



## Small Changes in Lifestyle May Have a Big Effect on Weight

A recent study of men and women looked at changes in:

- Diet
- Lifestyle
- Long-term weight gain

The study warned even small weight gain over time might add to problems with:

- Diabetes
- Cardiovascular disease
- Cancer

The study looked at how eating more of certain foods caused people to gain weight. Foods like yogurt, nuts, fruits, and vegetables helped them to lose weight.

Some other things that caused people to gain weight were:

- Drinking more alcohol
- Too much or too little sleep
- Watching too much TV

It is no surprise that those who did exercise lost weight.

Source: Mozaffarian D, et al "Changes in diet and lifestyle and long-term weight gain in women and men" *N Engl J Med* 2011; 364: 2392-2404.

## New Interactive User-friendly Website

The USDA has a new website at [www.choosemyplate.gov](http://www.choosemyplate.gov). You can learn more about the new guidelines and how to use the Food Plate. You can create menus and a custom food plan. There are also recipes that use the Food Plate color codes. That makes it easy to know which food groups are included.

Other resources on the website include:

- Nutritional information about the food groups
- Weight loss plans
- Feedback on your physical activity
- "Tip of the Day"
- Coloring sheets in English and Spanish for kids
- Information for pregnant or breastfeeding women, preschoolers, and kids

[Read about our free guide, Thumbs Up for Healthy Food Choices on page 2.](#)

The chart below shows how much weight people gained or lost by eating more of these foods. Eating more potato chips on a daily basis caused people to gain the most weight.

Weight Gain		Weight Loss	
Potato chips	1.69 lbs	Vegetables	.22 lbs.
Potatoes	1.28 lbs.	Fruits	.49 lbs.
Sugary drinks	1.00 lbs.	Nuts	.57 lbs.
Red meats	.95 lbs.	Yogurt	.82 lbs.
Cold-cuts	.93 lbs.	Whole grains	.37 lbs.

All the values are per serving added per day to the diet over four years

# Women's Health

## What Happens When You Have a Mammogram

If you are age 40 or older you need a mammogram every year. It is never too late to start protecting yourself from breast cancer. Finding cancer as early as possible could save your life.

### Planning your visit

Plan your visit when you do not have your period. You will not have any swelling and your breasts will not be tender. Right after your period is the best time to go. If you want your mammogram done by a woman, you can request this when you make the appointment.

### Before the mammogram

Do not use products or wear anything that can show up on the mammogram. Things like:

- Jewelry on your chest or around your neck
- Deodorant
- Perfume
- Powder

You can put on whatever you want after the mammogram.

Wear a top and bottom instead of a dress. You will undress from the waist up and wear a gown, staying dressed from the waist down.

### When you arrive

Every day many women have mammograms, so it is set up for women to get in and out quickly.

- Check in at the desk
- You will be taken to a private changing room
- Change into a short gown
- Sit in a waiting room only for women having a mammogram

While waiting, you maybe asked to fill out a short form about your health, past surgeries, and any breast problems you have.

### The mammogram

When the technician calls your name, you go into a small room with an x-ray machine. The technician may ask you a few questions. You can ask any questions you may have.

To take the mammogram, you stand facing the machine. The technician will take four x-rays, two of each breast.

She places one breast at a time on the machine, and gently lowers a clear plastic plate to spread the breast and keep it in place for a good picture. It may feel tight and you may feel pressure, but it does not often cause pain. As soon as the picture is done, she lifts the plastic plate off your breast.

The time to take the four images is very short, maybe ten minutes. Getting your body into position for each of the four views takes up most of that time. It takes only seconds for the machine to take each picture.

### After the mammogram

You will wait for a few minutes so that the technician can make sure the film is going to come out okay. In a few minutes, she will tell you that you can get dressed and leave.

A doctor trained to read mammograms (radiologist) looks at your x-rays. A report then goes to your care provider. Sometimes, the radiologist will need more pictures. You may get a call asking you to come back for another mammogram.

You will get a letter letting you know the results. If you have not received a letter 30 days after your mammogram, you should call and ask for the results.

### For more information and mammography resources

Neighborhood Health Plan — [www.nhp.org](http://www.nhp.org)

Mammography locations — [www.massmammography.com](http://www.massmammography.com)

Dana Farber Mammography Van — 617-632-1974

YWCA Boston — [www.ywcaboston.org/healthy-text-reminder-service/](http://www.ywcaboston.org/healthy-text-reminder-service/)



## Health Risks for Women Smokers

By Janet Kosow, MS, TTS, Tobacco Treatment Specialist

Tobacco use is the leading preventable cause of death in the US. It increases your risk for heart disease, lung cancer, stroke and other types of cancers.

The Centers for Disease Control and Prevention (CDC) say that smoking causes the deaths of about 178,000 women in the United States each year.

One study<sup>1</sup> showed that women who start smoking have more chance of having a heart attack than men who start smoking. The study of 2.4 million people showed a 25% higher risk for women.

Tobacco has many negative health effects. Tobacco use:

- Makes diabetes and other chronic diseases worse
- Damages the skin leading to wrinkles
- Can increase your risk of infertility and affect your reproductive health
- Contains a lot of chemicals in the smoke. Any exposure to tobacco smoke is harmful to you and your family.



According to the 2010 U.S. Surgeon General's report, there are 7,000 chemicals in tobacco smoke. Any exposure to tobacco smoke is harmful to you and your family.

Smoking can even affect your baby's health.

- Women who stop smoking before they get pregnant can reduce the risk of having an underweight baby.
- Quitting during the first months during pregnancy also decreases the possibility of your baby being born early.

It is never too late to quit smoking. Your heart rate begins to drop right after your last smoke, and your body begins to heal itself within 20 minutes. It can take time for your body to repair, but it is worth it. Quitting is one of the best things you can do for your health and your quality of life.

<sup>1</sup>The Lancet, August, 2011



Remember that quitting is a one day at a time process. NHP's smoking cessation program can help you to quit smoking. To learn more about our smoking cessation program, call NHP's Tobacco Treatment Specialist directly at 617-204-1447 or email at [quitsmoking@nhp.org](mailto:quitsmoking@nhp.org).

## NHP Coverage for Post-mastectomy Surgery

NHP, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema.

For more information, call the NHP Customer Care Center at 1-800-462-5449 (TTY 1-800-655-1761) for more information.

## Do You Need a Provider Directory?

NHP's Provider Directory is available on the NHP website at [www.nhp.org](http://www.nhp.org).

To obtain information on contracted providers, or to request a copy of the NHP Provider Directory, members who do not have access to the Internet may call the NHP Customer Care Center at:

1-800-462-5449

(TTY 1-800-655-1761)

Monday–Friday 8:00 a.m.–6:00 p.m.

Thursdays 8:00 a.m.–8:00 p.m.

## What to Do in an Emergency

In a medical emergency call 911 or go to the emergency room right away.

You do not need to get a referral for emergencies. The hospital does not need to be part of the NHP provider network.

Call your primary care site the next day to tell them about your emergency room visit.

If you are not sure if it is an emergency, you can call your primary care site at any time. They will tell you when to go to the emergency room or to their office.

### When you go to your primary care provider:

- Skin rash
- Earache
- Sore throat
- Coughing
- Runny nose
- Diarrhea

### When to go to the emergency room:

- Broken bones
- Bleeding that won't stop
- Poisoning
- Trouble breathing
- Very bad pain
- High fever in a child who is less than two years old or pressure

## Making Sure Our Members Get High Quality Care

Neighborhood Health Plan and its behavioral health partner, Beacon Health Strategies (Beacon), believes it is important that all of our members' needs are met by providers\* in our mental health and substance abuse network.

To get good care with no break in treatment, find a provider who is in Beacon's network. There are two ways to find an in-network provider.

- Call member services and ask for names and phone numbers of in-network providers near you or
- View the list of providers in Beacon's network at [www.beaconhealthstrategies.com](http://www.beaconhealthstrategies.com).

Call Beacon to see if your current health care provider is in the network. If you need help finding a provider in the network, our staff will help you to find one near you.

Have questions? Contact us at 1-800-414-2820  
Online referral—[www.beaconhealthstrategies.com](http://www.beaconhealthstrategies.com)

\*Providers include doctors, nurses, or therapists.

*To make sure our members get high quality care, providers must meet our high standards before they can become a provider for Beacon.*

## Did you Know a Nurse Practitioner Can Be Your Primary Care Provider?

### What are Nurse Practitioners (NPs)?

- NPs are registered nurses who have advanced education and training in the diagnosis and treatment of illness
- NPs often have the same training and similar certifications as those required of doctors. They provide primary care services as doctors do and often work closely with doctors.

### What can NPs do for you?

- They can be your health care provider
- Provide a wide range of health care services
- They see patients of all ages
- Focus on illness as well as how that illness effects the lives of patients and their families
- Teach you about your health. They tell patients about their health care options and help them to make choices about their care

### What do NPs do?

- Counsel and educate patients on self-care and treatment options
- Diagnose and treat acute illnesses, infections, and injuries
- Diagnose, treat, and monitor chronic diseases such as diabetes, high blood pressure, asthma
- Obtain medical histories and conducts physical exams
- Order, perform, and interpret diagnostic tests such as lab tests, x-rays, EKGs
- Prescribe medicines
- Prescribe physical therapy and other rehabilitation treatments
- Prescribe medical equipment such as wheelchairs, blood glucose monitoring devices, syringes
- Provide prenatal care and family planning services
- Provide well-child care, including screening and vaccinations
- Provide routine health care for adults, including annual physicals

Neighborhood Health Plan approves and enrolls NPs. If you are a patient at a site that employs NPs, you have the option of using an NP for your health care needs.

Additional information is available from the American Academy of Nurse Practitioners [www.aanp.org](http://www.aanp.org).



## CASA MYRNA

## Interview with a Domestic Violence Service Provider

By Sarah Roberts, Domestic Violence Intern, Neighborhood Health Plan

*This summer, I interviewed Jenny Efimova who manages the SafeLink Hotline at Casa Myrna, a local domestic violence agency. Below I have paraphrased her comments on the hotline, who they can help, and how they can help.*

**Sarah:** What is SafeLink, and how does it work?

**Jenny:** Since 2000, SafeLink is the only statewide domestic violence (DV) hotline.

The hotline is:

- Open 24 hours a day, 7 days a week
- Toll free
- Anonymous
- Confidential

*We want to make sure this resource is widely used and that people can call us and know that there is help, and that there will be a better day. There are people who understand what victims are going through, and if you are experiencing abuse, you are not alone.*

In general, we provide:

- 24-hour crisis intervention
- Safety planning
- Supportive listening
- Referrals to different types of help such as: shelters, legal services, housing, mental health, and other community based resources.

We also have what we call the bed update. We can see what shelter spaces are open in Massachusetts at any time.

**Sarah:** Is SafeLink available in different languages?

**Jenny:** There are three main languages on staff:

- English – available 24 hours a day
- Spanish – available 24 hours a day
- Portuguese

We also have access to a phone translation service in 140 languages. If we do not have a caller's language on staff, we call the language line.

**Sarah:** Who calls SafeLink, and what can someone expect if they call?

**Jenny:** There are all kinds of callers. Many are looking for shelter. People call a lot for our bed update. Mostly our

- Police officers
- Therapists
- Guidance counselors from schools

Our goal is to connect the caller to their local resources.

## The SafeLink Hotline

goal is to assess a person's safety. Many of our callers are in danger, and we are their first contact for help.

We talk to them and try to figure out what is happening in their life that caused them to call us. We discuss safety planning and the options they have. We always want to make sure they are getting services. SafeLink is that first contact for someone to get help. We then make those connections for the caller.

**Sarah:** Do you ever have callers who aren't victims, but maybe are family or friends of victims?

**Jenny:** Yes, we get calls from friends and family. That is when we try to:

- Discuss the dynamics of domestic violence
- How hard it can be for victims to leave
- The challenges loved ones face, and
- The importance of being a support system for the victim

We also try to get the caller to give the SafeLink number to the person that they are worried about, or to call their local DV program.

Apart from victims, the most common callers are:

- A social worker or social services provider
- Someone from a hospital or health care center

**Sarah:** What else would you like readers to know about SafeLink, or about domestic violence?

**Jenny:** We want to make sure that people who are living in abuse:

- Get help
- Know they are not alone—there is help out there
- Know it is not their fault
- Know that abuse is wrong

*It is important to remember that there are different types of abuse, and that being hit isn't the only symptom of domestic violence. It's about power and control. When one person tries to gain power over another in a relationship, it is abuse.*

To contact the multi-lingual, SafeLink Hotline call 1-877-785-2020 (TTY 1-877-521-2601). If you are in immediate danger, dial 911.

**SafeLink**  
1.877.785.2020

## What are the Risks of Colon Cleansing?

A new report in the Journal of Family Practice, says that there is no scientific proof that colon cleansing has any benefit for people. As a matter of science and fact, there is more chance of harm than good.

Researchers found no proof in support of this practice. In their report, they say that colon cleansing can be risky because of:

- Lack of training
- Lack of cleanliness
- The use of liquids and equipment not approved by the Food and Drug Administration can make colon cleansing risky.

There have been cases that led to pain, vomiting, and infection, and some caused serious problems such as:

- Air embolism
- Septicemia (bacteria in the blood)
- Fatal parasitic infections

If you are thinking of having a colon cleansing, please talk to your doctor.

Mishori R, et al "The dangers of colon cleansing" J Family Pract 2011; 60: 454-457.

## Affirmation

NHP recognizes that under-use of medically necessary services has the potential to have an adverse affect on our members' health and wellness. For this reason, NHP promotes appropriate use of services. NHP's utilization management (UM) decisions are based only on appropriateness of care and service and existence of coverage. NHP does not specifically reward practitioners, or other individuals, conducting utilization reviews for issuing denials of coverage or service, nor does NHP provide financial incentives to UM decision-makers to encourage decisions that result in under-use of medically necessary services.

## NHP's Physician Compensation Agreement

We pay NHP providers in one of two ways. Some providers are paid on a fee-for-service basis, meaning they are paid each time you receive care. This is the way most specialists are paid. Some primary care providers receive a fixed amount per member per month. This is called "capitation." Please see your NHP provider directory if you want to know how your provider is paid by NHP.

## Important Information for Members

Neighborhood Health Plan (NHP) is a licensed health maintenance organization (HMO). As an HMO, we have certain requirements that you, as a member, must meet in order to ensure coverage of health care services that you receive. NHP also has certain obligations to you that we must fulfill as part of our agreement with you. These requirements and obligations are found in your NHP member handbook. If you are a commercial member, please also refer to your Benefit Summary. If you are a MassHealth member, please refer to your NHP covered services booklet and excluded services list. All of these documents can be found on NHP's website at [www.nhp.org](http://www.nhp.org). Your NHP member handbook and your benefits or services documents are important and contain the following:

- NHP's toll-free number and hours of operation
  - The name and customer services telephone number of any of NHP's subcontractors
  - The availability of interpretation services by telephone for non-English members
  - The availability of written materials in different languages or alternative formats and how to obtain them
  - Benefits and services included in, and excluded from, coverage and how to access those benefits and services
  - Pharmacy benefits, procedures, and programs
  - Behavioral health benefits
  - Copayments and other charges for which you are responsible
  - Benefit restrictions and non-covered services, your access to them, and the cost
  - How to submit a claim for covered services
  - How to obtain information about providers who are in NHP's network
  - How to obtain primary care services, the role of primary care providers, and where to access them
  - How to obtain specialty care services and hospital services and the referral process
  - How to obtain behavioral health services
  - How to obtain services after normal office hours
  - How, when, and where to obtain emergency services
  - How to obtain care and coverage when you are out of the service area
  - How to obtain information on advance directives or end of life planning
  - How to voice a complaint or grievance
  - How and when to appeal an NHP decision and the effects on your covered services
  - How to obtain a hearing on an NHP decision at the Board of Hearings or the Office of Patient Protection
  - How NHP evaluates new technology
  - What your rights and responsibilities are as an NHP member
- As an NHP member, you are required, with certain exceptions, to obtain services from NHP-contracted providers in the NHP network. You can choose a provider by going to NHP's Provider Directory on our website at [www.nhp.org](http://www.nhp.org), or you may request a printed copy by calling NHP at 1-800-433-5556.

## Member Rights and Responsibilities

As a valued member of Neighborhood Health Plan (NHP), you have the right to:

- Receive information about NHP, our services, our providers and practitioners, your covered benefits, and your rights and responsibilities as a member of NHP.
  - Receive oral interpretation services free of charge for any materials in any language.
  - Have your questions and concerns answered completely and courteously.
  - Be treated with respect and with consideration for your dignity.
  - Have privacy during treatment and expect confidentiality of all records and communications.
  - Discuss and receive information regarding your treatment options, regardless of cost or benefit coverage, with your provider in a way which is understood by you. You may be responsible for payment of services not included in the covered services list for your coverage type.
  - Be included in all decisions about your health care, including the right to refuse treatment.
  - Change your primary care provider.
  - Access emergency care twenty-four (24) hours a day, seven (7) days a week.
  - Access an easy process to voice your concerns, and expect follow-up by NHP.
  - File an appeal or complaint if you have had an unsatisfactory experience with NHP or with any of our contracted providers, or if you disagree with certain decisions made by NHP.
  - Make recommendations regarding NHP's member rights and responsibilities.
  - Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation.
  - Freely apply your rights without negatively affecting the way NHP and/or your provider treats you.
  - Ask for and receive a copy of your medical record and request that it be changed or corrected.
  - Receive the covered health services you are eligible for as outlined in your member handbook or covered services list.
- As a member of NHP, you also have responsibilities. It is your responsibility to:
- Choose a primary care provider, the provider responsible for your care.
  - Call your primary care provider when you need health care.
  - Tell any health care provider that you are an NHP member.
  - Give complete and accurate health information that NHP or your provider needs in order to provide care.
  - Understand the role of your primary care provider in providing your care and arranging other medical services that you may need.
  - To the degree possible, understand your health problems and take part in making decisions about your health care and in developing treatment goals with your provider.
  - Follow the plans and instructions agreed to by you and your provider.
  - Understand your benefits what's covered and what's not covered.
  - Call your primary care provider within forty-eight (48) hours of any emergency or out-of-area treatment. If you experienced a behavioral health (mental health and substance abuse) emergency you should contact your behavioral health provider, if you have one.
  - Notify NHP and MassHealth of any changes in personal information such as address, phone, marriage, additions to the family, eligibility of other health insurance coverage, etc.
  - Understand that you may be responsible for payment of services you receive that are not described as covered in your member handbook or covered services list for your coverage type.

## Do You Have an Advance Directive?

### What is an Advance Directive?

It is a legal document that protects you when you can no longer speak for yourself and make decisions because of an illness, disability, or injury. This document allows someone to speak for you and protects your right to refuse treatment if you don't want it, or to ask for treatment if you want it.

It is important to talk to your doctor about an Advance Directive. Your doctor can be helpful in answering questions about medical care if you can no longer speak because of an illness, disability, or injury. If you are 18 years old or older, you should have an Advance Directive.

You can choose someone in your family or a close friend that you trust to make serious health care decisions. You should tell the person that you choose your wishes about what should happen in case you can no longer speak and make decisions for yourself. It is always good to choose a second person in case the first person finds it too hard to make decisions or needs help making decisions. You should not choose your doctor as the person to do this for you, because then a different doctor would have to take care of your health care.

Once you have chosen someone and have told them your wishes, you will have to have a written document that says who you have chosen to make your health care decisions if you are unable to make them for yourself. This document has to be signed by you and you must have two people witness and sign the document to prove that you signed it. You can find this document at [www.massmed.org](http://www.massmed.org) and go to:

### Patients > End Of Life Care > Health Care Proxy Information And Forms.

Or you can call NHP at 1-800-433-5556 and speak to one of our Customer Care Center representatives who can send you a copy of this form.

Once you have signed an Advance Directive, you should give copies to your spouse or partner, your doctor, the hospital you use, the person you chose to make decisions, and the second person you chose. Be sure to keep a copy for yourself. If you want, you can give a copy to other family members, close friends, or your clergy.

If you ever change your mind about the person that you chose to make health care decisions when you are not able to make them, you can tear up the Advance Directive and start over.



# Neighborhood Health Plan™

Your health. Our promise.

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## NHP Executive Mendis Honored



On August 26th, the Boston Business Journal named NHP's Chief Medical Officer, Paul Mendis, M.D. as one of its 2011 "Champions in Healthcare," in the Community Outreach Category.

Dr. Mendis has been with NHP since 1999, and has served on the front lines of health care delivery for more than 20 years as a primary care provider, as well as Chief of Internal Medicine at the Dimock Community Health Center.

Dr. Mendis is also the new President of the Massachusetts Health Council (MHC). The MHC provides a place for health care leaders to come together to make changes to improve and protect the health of the people of the state.

## NHP Achieves Multiple NCQA Honors



MEDICAID AND COMMERCIAL

The National Committee for Quality Assurance (NCQA) has again awarded the highest NCQA accreditation status to Neighborhood Health Plan. The "Excellent" status is for both NHP's Medicaid and Commercial products.

In addition, NHP has been ranked as one of the top five Medicaid plans in the country for the 4th year in a row, and has also been ranked as one of the top 50 commercial plans in the country in 2011.

The NCQA reviews and reports on the quality of managed care plans. NHP also earned the "Excellent" rating in the last review three years ago, for its high quality care for members.

## Our Neighborhood

A publication of  
Neighborhood Health Plan  
Boston, Massachusetts

NHP Customer Care Center  
1-800-462-5449

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**David Segal**, Chief Operating Officer  
**Paul Mendis**, MD, Chief Medical Officer  
**James Glauber**, MD, Senior Medical Director  
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