Men and women are equally likely to develop diabetes, and both must work closely with their doctors to manage it. But diabetes is not exactly an equal opportunity offender. Here are some of the ways the condition uniquely affects each gender:

**Women can get gestational diabetes.** Up to one in 10 women will develop diabetes during pregnancy. If a mother’s blood glucose returns to normal soon after the birth, her risk for type 2 diabetes remains higher for 10 to 20 years after.

**More men undergo amputation.** A combination of poor blood flow and nerve damage contributes to foot infections in people with diabetes. These infections can lead to amputation. Researchers recently reported that amputations are more frequent among men.

**Women with diabetes are more prone to depression.** Depression strikes women roughly twice as often as men, and mood problems go hand in hand with diabetes.

**Diabetes has a bigger effect on women’s heart risks.** Women with diabetes have almost the same risk for heart disease as men without diabetes.

> **Win Against Diabetes by Eating Right**

Healthy foods can help you live a longer, fuller life. And remember, eating right doesn’t have to be expensive. Turn to page 6 for tips on how to find foods that are good for you, even when you are on a budget.
An Rx for Medical Identity Fraud

While you are having a new prescription filled, your pharmacist says your new drug conflicts with another medication your records show you take. But you are not taking that medication. Or maybe on a recent bill you see a charge for a mysterious medical item.

You could be the victim of medical identity fraud. This new type of identity theft happens when someone steals your medical information and uses it to get medical products, treatment, or services. If you are a victim, your medical records can contain mistakes. These mistakes could hurt your ability to get needed care.

Detecting Medical Identity Theft

If you suspect that your medical identity has been stolen, take these steps:

1. Look over all Explanation of Benefits forms from US Family Health Plan. Do this even if you owe nothing. If anything seems wrong, talk with your insurance agent.
2. At least once a year, ask your agent for a list of the benefits the company paid in your name. That will show if the company paid for care you did not get.
3. Check your credit reports for suspicious medical debts. You can get a free yearly credit report from each of the three consumer reporting companies. Call 1-877-322-8228 or visit www.annualcreditreport.com.

You also can ask for copies of your current medical records from Pacific Medical Centers and US Family Health Plan.

Protecting Your Medical Identity

To keep your medical identity to yourself, it is your right to do the following:

- Learn where your medical information has been sent. For example, if you recently switched to US Family Health Plan, your records may have gone to several new doctors or hospitals.
- Get wrong or incomplete information removed from your files
- Have correct information added

Today, the Internet carries more and more personal health information. So remember to keep your name, Social Security number, credit card accounts, and health insurance information to yourself. Share your personal medical information only with doctors and other health workers.

Quick Tips

Staying alert regarding your medical identity could save you a lot of grief.

To protect yourself:

- Guard your insurance card just as you would your ATM and credit cards.
- Report any loss or theft immediately.
- Review all insurance statements you receive. Contact the insurer to ask about suspicious charges.
- Check your credit report each year.
- Ask your health care provider for a copy of your medical records.

Stay On Top of Your Medical Records

To request that copies of your medical records from another doctor be sent to Pacific Medical Centers, or to request copies of your PacMed records for your personal use, visit www.pacificmedicalcenters.org/index.php/help-faq/medical-records or call (206) 621-4150.
A recent study in the *Journal of Clinical Oncology* confirms again what doctors already knew: Applying sunscreen regularly helps prevent the deadly skin cancer melanoma. However, some products are better than others—meaning that knowing how to select the right sunscreen is key to protecting your skin.

**Clearer Labeling Is Here**
This year, sunscreen labels have undergone an upgrade to help decode their declarations. Some will clearly state that they protect against skin cancer. Products that can make this claim are those that:
- Provide broad-spectrum protection, meaning they block both UVB rays (which cause sunburn) and UVA rays (which cause skin aging and cancer)
- Have a sun protection factor (SPF) of 15 or higher

What's more, you'll no longer see the word “waterproof.” Instead, they'll be labeled “water-resistant.” Each one will list the length of time it can protect you: either 40 or 80 minutes.

**How to Shop for Now**
Follow our guide to make sure you're choosing and using sunscreen wisely:
- Select products that are at least SPF 15. The FDA says there’s no proof that numbers above 50 provide any greater protection.
- Look for the ingredients avobenzone, oxybenzone, zinc oxide, and titanium dioxide on the label. These provide protection from both types of harmful rays.
- Reapply every two hours. If you are sweating heavily or going in and out of the water, do so every 40 minutes, even if you're using a water-resistant formula.
- Don’t use sunscreen as an excuse to bake in the sun longer. Try to stay in the shade between 10 a.m. and 4 p.m., when the sun’s rays are strongest.

**PacMed’s Dermatologists Can Help You**
If you notice a change in the size, shape, color, or feel of an existing mole, or you want to learn more about how to protect your skin, make an appointment with one of our dermatologists. Visit [www.pacificmedicalcenters.org/index.php/what-we-do/dermatology](http://www.pacificmedicalcenters.org/index.php/what-we-do/dermatology) or call (206) 505-1300.

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**Are You At Risk for Skin Cancer?**
If you check any of the boxes below, you may be at increased risk for skin cancer:
- I am more than 50 years old.
- I have light-colored eyes and fair skin that burns or freckles easily.
- I live in an area with a lot of bright sunlight.
- I’ve had a lot of long-term exposure to the sun without good protection.
- I have used sunlamps or tanning booths, especially before age 30.
- I have unusual moles or more than 50 ordinary moles.
- I’ve had skin cancer in the past.
- I have two or more close relatives who have had melanoma.
- I had at least one severe, blistering sunburn as a child or teen.
- I have a weakened immune system.
- My skin is sensitive to the sun due to a medical condition or medication.

To cut your future risk, cover up while you’re in the sun and use sunscreen. Ask your doctor for more information.
The next time you reach for a new medicine, think: Am I taking any medications or eating any foods that don’t mix well with this?

To guard against harmful drug interactions, always check with your doctor before starting any new medication, including over-the-counter (OTC) medications. Here are some examples:

**Antibiotics:** Some do not mix with dairy foods, citrus fruits and juices, or calcium or iron supplements.

**Nasal decongestants and antihistamines:** Some do not mix with blood pressure medications, antidepressants, or tranquilizers. Also, mixing a sedative with an antihistamine may slow your reactions and could make driving a car or operating machinery dangerous.

**Certain heart medications, such as calcium channel blockers for chest pain:** Avoid grapefruit and grapefruit juice, which change how the body absorbs these drugs.

**Saint-John’s-wort:** This popular herb is used to combat depression. But Saint-John’s-wort can interact harmfully with many different OTC and prescription medicines. These include antidepressants, birth control pills, some heart medications, some drugs used to treat cancer, warfarin, and seizure control drugs.

**Blood thinners:** Drugs such as warfarin help prevent blood clots in people prone to stroke and heart attack. Before taking prescription blood thinners, tell your doctor if you are taking or plan to take aspirin; naproxen; medications for cancer, cholesterol, colds and allergies, depression, diabetes, heart disease, mental illness, or thyroid problems; birth control pills; or heparin. Many herbal supplements, including quai and ginkgo biloba, also interact harmfully with warfarin.

Drug interactions may make your drug less effective or increase the action of a particular drug. An interaction may cause you to experience an unexpected side effect. If you are starting a new medication and have any unexpected side effects, tell your doctor.

You can help prevent interactions by reading all medication labels—especially the warnings. Do this for all medications, vitamin supplements, and herbal remedies. And, do not forget to tell your doctor about everything you’re taking. He or she will rely on this information when deciding what type of medication to prescribe for you.

To help avoid a risky drug interaction, follow these tips:

- Tell your doctor about every prescription, OTC drug, and supplement that you are taking.
- At least once a year, bring all your medicines and supplements to your doctor.
- When given a new medicine, ask if it is safe to take with other prescription and OTC medicine and dietary supplements.

**Need to Fill Your Prescriptions?**

Members’ Rights

As a US Family Health Plan member, you have the right to:

- Receive information about covered benefits and cost sharing.
- Receive information about the US Family Health Plan, and our services, licensure, certification, and accreditation status.
- Receive information about our practitioners, providers, and health care facilities, including information about the composition of our network.
- Have a choice of health care providers that is sufficient to ensure access to appropriate high-quality health care.
- Receive information on member satisfaction.
- Be informed of the processes for accessing specialists and emergency services.
- Receive considerate and respectful care, with recognition of your personal dignity at all times.

continued on next page
Have access to all of the health care and treatment services we provide, including care management information, consistent with available resources and generally acceptable standards.

Have access to emergency health care services when and where the need arises.

Refuse treatments to the extent permitted by law and government regulations and the right to be informed of the consequences of such refusal of treatment.

Question the adequacy of care being provided.

Have privacy and confidentiality concerning your medical care and records to the extent permitted by law. You have the right, and will be afforded the opportunity, to approve or refuse the release of such information, except when release is required by law or the Department of Defense.

Know the identity and professional status of the health care provider primarily responsible for providing and managing your care, as well as other health care personnel involved in your treatment.

Participate in decisions involving your health care. Members who are unable to fully participate in treatment decisions have the right to be represented by parents, guardians, family members, or other conservators.

Understand an explanation of the diagnosis, treatment, and prognosis of your illness.

Be informed of possible complications, risks, benefits, and alternative treatments associated with consent or refusal for treatment in order to make knowledgeable decisions about your course of care.

Be advised if the US Family Health Plan proposes to engage in or perform experimental research in order to make knowledgeable decisions about your care. You have the right to refuse to participate in experimental research.

Receive care and treatment in a safe environment and to be informed of the facility’s rules and regulations that relate to patient and visitor conduct.

Be informed of the US Family Health Plan member grievance and appeal system, designated for the initiation, review, and resolution of patient complaints and appeals. You have the right to file complaints and appeals with US Family Health Plan, as outlined in the Grievances and Appeals Processes section of the Member Handbook.

Use our internal complaint and appeal processes to address concerns that may arise.

Receive considerate, respectful care from all members of the health care system without discrimination based on race, ethnicity, national origin, religion, sex, age, mental or physical disability, sexual orientation, genetic information, or source of payment.

Report recommendations or questions you have to a Member Services Representative. Doing so will help us better serve all members.

**Members’ Responsibilities**

As a US Family Health Plan member, you are responsible for:

- Becoming knowledgeable about your health plan coverage and health plan options, including all covered benefits, limitations and exclusions, rules regarding use of network providers, coverage and referral rules, appropriate processes to secure additional information, and the process to appeal coverage decisions.
- Providing your physician complete information, to the best of your knowledge, regarding your past medical history and other matters relating to your health.
- Becoming involved in specific health care decisions.
- Complying with the medical and nursing treatment plan, including the follow-up care, agreed upon by you and your health care provider(s). This includes keeping appointments and notifying providers, in a timely manner, when an appointment cannot be kept. You also have the responsibility of letting your provider know whether or not you understand the treatment plan and what is expected of you.
- Maximizing healthy habits, such as exercising, not smoking, and maintaining a healthy diet.
- Making a good-faith effort to meet financial obligations, including paying applicable copayments at the time the services are received.
- Following the claims process and using the disputed claims process when you have a disagreement concerning your claims.
- Being considerate of the rights of other patients, and of US Family Health Plan personnel and network providers.
- Being respectful of the property of other persons and facilities
- Following provider facility rules and regulations affecting patient conduct, including no-smoking rules, parking regulations, etc.
- Reporting wrongdoing and suspected fraud to appropriate resources or legal authorities.
The Pacific Medical Centers website has all the tools you need to stay on top of your health needs.
Visit www.pacificmedicalcenters.org to find a doctor or PacMed location, learn more about the US Family Health Plan, and discover all the health care services available to you.

Find us online, even on the go! Scan the icon above with your smartphone to make a doctor’s appointment, get help preparing for your doctor visit, and more. Get the free mobile app at http://gettag.mobi.

WE’RE SOCIAL, TOO!
“Like” us on Facebook, at www.facebook.com/pacificmedicalcenters
Find us on Twitter: @PacMedWA
Medical Home: Is it Right for You?

If you are in excellent health, your medical care may require little more than a yearly checkup. Your doctor takes your blood pressure, recommends a preventive screening test or two, and tells you to keep up the good work.

But what if you have a chronic condition such as diabetes, heart disease, or asthma? Suddenly, your access to consistent, comprehensive care may seem a lot more important in our fragmented health care system.

If you are newly diagnosed with diabetes, for instance, you may need to change familiar diet and exercise habits, learn to check your blood sugar, take several medications on a timetable, and coordinate appointments.

Fortunately, some primary care and pediatric practices are adopting an approach known as a medical home or patient-centered medical home that can help you coordinate the complexities of your care.

The Basic Concept
Patient-centered medical homes take a whole-person approach. Professional members of a medical home work as a team to ensure each patient gets continuous and comprehensive care.

While the process may vary from one practice to the next, the leading physician is responsible for coordinating all the person's health care needs. That includes acute and chronic care, preventive care, and end-of-life care. This system aims to reduce the risk that health problems will worsen and require hospitalization.

Team members may include doctors, nurses, pharmacists, physical therapists, and others. They help coordinate patient care in a variety of settings, such as hospitals, clinics, and specialists' offices.

Let's say, for instance, that a person is diagnosed with cancer. Instead of setting the patient loose to find a specialist and make his or her own appointments, a medical home team can schedule the visit, prepare the patient for the appointment, and follow up to make sure the patient and the primary care provider (PCP) receive test results and treatment recommendations.

Key Principles
The professional members of the American Academy of Family Physicians, American Academy of Pediatrics, American College of Physicians, and American Osteopathic Association have agreed on a set of key principles for patient-centered practices:

- Evidence-based medicine and decision-making tools guide treatment plans and protocols.
- Patients are actively involved in decisions affecting their health and care.
- Physicians' practices will work on behalf of their patients to ensure they attain optimal, patient-centered outcomes.
- Team members who provide care are compassionate partners to patients and their families.
- Medical homes will provide easier access to care through open scheduling, expanded hours, and increased options for communication between patients, their doctors, and support staff.

A Personalized Health Care Experience
PacMed has received Patient-Centered Medical Home recognition from the National Committee for Quality Assurance for its efforts to provide patients with a personalized health care experience while creating a homelike environment. If you think you might be a good candidate for this type of program, ask your PCP for more information.
Healthy Eating Doesn’t Have to Be Expensive

Your money or your health? When it comes to nutrition, sometimes it can seem like a choice between the two. Researchers recently calculated the cost of following the government’s dietary guidelines in one metropolitan area. Eating the right foods, such as vegetables and whole grains, was more expensive than loading up on sugar and saturated fat, they reported in the journal *Health Affairs*.

But do not turn to the dollar menu just yet. It is still possible to eat well without breaking the bank. Here’s how:

- Make a meal plan. Each week, survey your pantry, scope out coupons, and scour grocery-store circulars. Search for recipes using ingredients that are on sale or that you already have, and plot out healthy dishes for each meal. Then make a shopping list—and stick to it.

- Savor the season. Fruits and vegetables picked at their prime are less expensive. Search farmers markets for fresh, reasonably priced produce.

- Grow your own. Spring and early summer is the best time to plant seeds or seedlings. Invest a little in them now and you will reap lots of rewards later in the summer. Even if you do not have space for a garden, you can grow lettuce in a window box, cherry tomatoes in a pot on your front porch, or herbs in indoor containers.

- Cut to it. Whole produce often costs much less than precut. Chop your fruits and vegetables at home instead. Also, steer clear of single-serving packs and bagged salads—you will pay more for the packaging.

- Learn to love legumes. Kidney, garbanzo, and black beans pack a powerful protein punch for less money than meat, and without the saturated fat. Buy them dried or canned.

Cranberry Salsa

**Ingredients**

- 4 oz. 100 percent cranberry juice blend
- 1 1/2 cups diced tomatoes
- 1 cup fresh cranberries, sliced thin
- 1/4 cup ripe medium avocado, diced
- 1/2 cup diced pineapple
- 1/2 cup thinly sliced scallions
- 2 tbsp. lemon juice
- 1/4 cup finely chopped jalapeno peppers
- 2 cloves crushed garlic (about 1 tsp.)

**Directions**

Place juice into a saucepan. Boil for about five minutes until reduced to about 1 tablespoon of syrup. Place the reduced juice and all remaining ingredients into a medium bowl and stir until incorporated. Chill and serve immediately with favorite chips and vegetables.

**Per Serving**

Serves eight

Each half-cup serving provides:

- Calories 35, Total fat 1 g, Saturated fat 0 g, Cholesterol 0 mg, Sodium 0 mg, Total carbohydrate 8 g, Dietary fiber 2 g, Sugars 4 g, Protein 1 g

« PacMed’s Dietitians Are Here for You

If you want to start eating healthier—whether to manage your chronic condition or to lose weight—but you’re not sure where to start, make an appointment with one of Pacific Medical Centers’ dietitians. Visit [www.pacificmedicalcenters.org/index.php/what-we-do/dietician](http://www.pacificmedicalcenters.org/index.php/what-we-do/dietician) or call (206) 505-1300.
3 Steps to Slash Blood Pressure

High blood pressure affects one in three Americans. The condition leaves them at risk for heart disease, stroke, and kidney failure, often without causing a single symptom.

Are you among them? Ask your doctor to check your pressure. If it is:
- Less than 120/80, it is normal
- Between 120/80 and 140/90, you have prehypertension and are at risk for high blood pressure
- 140/90 or higher, you have hypertension

You can take steps to prevent and treat this silent killer. Start with three S’s:

**Sleep:** People who get less than seven hours or 10 hours or more of slumber a night appear to be at higher risk for high blood pressure. It is not just quantity, but also quality of sleep that matters. Talk with your doctor if you regularly have trouble sleeping.

**Stress:** When we are under pressure, our bodies release stress hormones that raise our heart rate and blood pressure. To reduce stress, exercise regularly, talk with family and friends, and remember to laugh.

**Salt:** Experts recommend reducing your sodium intake to about 1 teaspoon of table salt per day, especially if you are aiming to lower blood pressure.

New Law May Affect Your US Family Plan Eligibility

Congress recently passed and the president signed into law the Fiscal Year 2012 National Defense Authorization Act. It contains provisions affecting eligibility for military health care benefits at ages 65 and over. In short, after September 30, 2012, military health care beneficiaries ages 65 and over will no longer be eligible to join the US Family Health Plan.

Because you are already a member of the PacMed US Family Health Plan, your membership will not be affected. Current members will be grandfathered, meaning you can continue in the plan for life. The legislation only impacts those who are not already members as of September 30, 2012.

This new legislation may seem confusing, but please rest assured: If you are currently a member of the PacMed US Family Health Plan, you will not be affected. You will continue to enjoy the same outstanding health care and services we are proud to provide to those who have served our country. Again, only those beneficiaries joining the PacMed US Family Health Plan after September 30, 2012, will be affected.

Many of you contacted your elected officials as part of the advocacy effort to protect these valuable benefits for future enrollees. We are pleased to report that these letters had a significant impact, as members of the congressional delegation were instrumental in developing a compromise that pushed the implementation date to October 1, 2012. Everyone at the PacMed US Family Health Plan is deeply appreciative of our membership’s response and support.

Want to Know More About NDAA?
Spread the Word: PacMed Can Help Your Friends, Too

If you are satisfied with the care you receive at Pacific Medical Centers, do your military friend a favor: Tell them about US Family Health Plan. All active-duty family members and retired military personnel and their families are currently eligible for US Family Health Plan’s low- or no-cost coverage.

US Family Health Plan members enjoy:
- Access to a highly regarded medical staff—more than 120 physicians, all board certified
- Same-day primary care appointments
- Convenient locations throughout the Puget Sound region
- Appointments, lab, and X-ray in one place
- Coordinated care—registered nurse case managers who work with you to assure you get the care, information, and services you need to stay healthy
- Discounts on noncovered health-related products and services, such as eyeglasses, chiropractic care, acupuncture, fitness clubs, vitamins, and supplements
- First-class, personable customer service

Refer a Friend!
Encourage your military friends to visit www.pacificmedicalcenters.org or call 1-888-4PACMED (472-2633) to find out how they can benefit from Pacific Medical Centers and US Family Health Plan.

Ask Member Services

Q: Who can answer questions about eligibility, benefits, or providers in the US Family Health Plan network?
A: If you have questions regarding eligibility, benefits, or providers in our network, call the Member Services Department at 1-800-585-5883. Member Services Representatives are available Monday through Friday, 8 a.m. to 3:30 p.m.

Q: Where can I get my prescriptions filled?
A: Your US Family Health Plan coverage provides you with two options: You can order your prescriptions by mail or get them from a retail pharmacy. Take note:
- US Family Health Plan’s Mail Order Pharmacy benefit is administered by Maxor and provides you with a 90-day supply. Generic prescriptions filled by mail order are free.
- The retail benefit provides you with a 30-day supply. Prescriptions can be filled at most Pacific Medical Centers clinics or at select Bartell Drugs pharmacies in Snohomish County.

For more information about prescriptions or for a Maxor mail order form, visit www.pacificmedicalcenters.org/index.php/us-family-health-plan/prescriptions.

Speak with Member Services
If you have a question about US Family Health Plan enrollment, talk with a Member Services Representative by calling 1-800-585-5883 or (206) 621-4090.