

# YOUR HEALTH ADVANTAGE

A magazine about your health  
for BCN Advantage members  
Spring 2020

**Keep  
things in  
balance**



**PROTEIN  
POWERS  
MUSCLE  
MAINTENANCE**

**PROTECT  
YOURSELF  
FROM FRAUDS  
AND SCAMS**

Health and wellness or prevention information.



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# Dear Member:



Author Leo Tolstoy once said, “Spring is the time of plans and projects.” Whether it’s finding creative ways to get your exercise in or planting a garden, spring is the perfect time to start something new.

This edition of *Your Health Advantage* features a recipe for shrimp BLT salad. We’re also debuting a new column called “Ask Grace,” featuring our resident dietitian, Grace Derocha.

You can send her questions about nutrition and healthy cooking, and she’ll answer one in each issue. You’ll also meet Maxine Henderson, a 93-year-old baker and cookbook author, on **Pages 4-5**.

On **Pages 10-11**, we’ve got information and tips on how to avoid fraud and scams. Do you Google your symptoms at the first sign of a cough or snuffle? We’re breaking down this common habit on **Page 16**. Is your hair getting thinner? Read about why hair loss happens and how to deal with it on **Page 23**.

We’ve also got info to share about diabetes, blood pressure and other health topics.

In a previous issue, we asked: What are your favorite Michigan getaways during winter? Here are some of your responses:

## “Lewiston and Traverse City.”

– Roger and Rose T., St. Clair Shores, Michigan

## “Frankenmuth.”

– Denise K., Fowlerville, Michigan

## “A snug home, with family and some good board games for fun.”

– Sigrun W., Grand Rapids, Michigan

As always, we love hearing from you. We’d appreciate it if you’d take the time to fill out and return the business reply card inside the magazine. I hope you enjoy reading *Your Health Advantage*. Make the most of these beautiful spring days.

Wishing you good health,

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Go digital and take charge of your health





# Ypsilanti cookbook author STILL BAKING TREATS FOR FAMILY AND FRIENDS

If Emma “Maxine” Henderson taps on your front door, open fast. Chances are good she’s got a batch of freshly baked cinnamon rolls in hand. It’s not the healthiest of offerings, but the 93-year-old Ypsilanti, Michigan, resident says a little indulgence in life’s sweet things is good for the soul.

For much of her life, Maxine has baked both sweet and savory treats for family, friends and customers at farmers markets in both St. Clairsville, Ohio, and Ypsilanti, where she and her husband, Roland, raised three sons and two daughters. Her recipes, which include small pies, jams, jellies and cookies, were in such high demand that she decided to share them.

“I started writing cookbooks,” she says, adding that she now has a three-book collection



of breads, snacks and general cooking recipes. "I especially enjoy making bread. Cooking with yeast has always been interesting to me."

In addition to the recipes, the cookbooks highlight artistic oil paintings created by her husband. They include folksy-style views of the Ohio centennial farmhouse that both he and his father were born in and that he later purchased from the estate and restored.

### 'A mover and a shaker'

During the farmhouse restoration, son Ken says, the couple kept their condo in Ypsilanti. "Mom was constantly driving the 250 miles between the two homes. She always drove the slower, scenic route, where she found small country stores that would sell her books."

People loved the cookbooks so much that after buying one, they'd come back to purchase more as gifts, Ken says, adding that thousands were sold.

He describes his mother as "a mover and a shaker" who was active in her community and church, where she would hand out fresh vegetables from the family's oversized garden. Ken says he fondly remembers how much the neighborhood kids also enjoyed his mom's treats.

He said they would often gather to skate on the family's makeshift backyard ice rink, knowing she would be there with hot chocolate and homemade cookies.

Roland worked as a mechanical engineer in Detroit. Maxine was a lab technician at the former Beyer Hospital in Ypsilanti. The couple met in Denver, where they were both attending college after World War II, Ken says.

### Still on the go

Maxine says she dearly misses her husband, who passed more than 20 years ago. She's grateful that



*Emma "Maxine" Henderson and one of her cookbooks.*

she still lives independently. She likes to rise early, eat breakfast, take walks outside and attend the same Belleville church she's gone to for 66 years. Her healthy diet, which includes homemade vegetable and bean soups, chili and lots of fruits and vegetables, has kept her in "pretty good health."

Maxine says she especially enjoys hosting afternoon sewing circles. "Sometimes, I'll have friends over for lunch," she says, adding

that she'll prepare coffee and light refreshments while they chat and crochet.

She says she also enjoys visits from her son because "he cooks for me now." Ken says he and his siblings all grew up to be pretty good cooks. But one of the best lessons his mother taught her kids was not necessarily how to cook, he says. "She taught us how to enjoy good homemade food."





# KEEP THINGS IN BALANCE

Do these 3 exercises to prevent falls

# W

hen you see a cartoon character tumble on TV, it's funny. In reality, falling is a serious matter that becomes more serious as we age. Falls are the most common cause of injury in people over age 65. Of those falls, 30% to 60% cause minor injuries such as bruises, scrapes and cuts. One in 10 falls causes more severe injury.

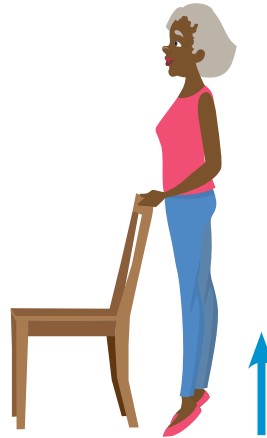
Age is a risk factor for falls, especially for individuals with muscle weakness, movement disorders like Parkinson's disease, diabetics with nerve damage, people with arthritis, and those with vision or hearing problems or dementia.

Environment also plays a role. Slippery bathroom floors, poorly lit hallways or stairs, clutter and throw rugs increase the risk for falls.

Here are some exercises that will help improve your strength to prevent falls:

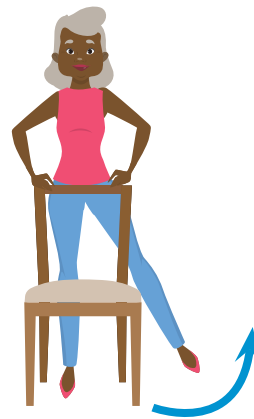
### 1. Calf raises

- Hold on to a chair or the kitchen counter for balance.
- Slowly rise up on your toes as far as you can while counting to four.
- Hold for two to four seconds.
- Lower your heels to the floor while counting to four.
- Repeat 10 times and then rest for a minute before doing a second set of 10.



### 2. Side leg raises

- Stand behind a chair with your feet slightly apart.
- Hold on to the back of the chair for balance.
- Keep a slight bend in your standing leg.
- Slowly lift one leg out to the side with your toes facing forward. Hold for one count.
- Slowly lower your leg.
- Repeat 10 to 15 times. Do the other leg 10 to 15 times. Repeat one more round per side.



### 3. Single leg balance

- Hold on to a chair for balance.
- Bend your right knee and lift your right foot off the ground while you balance on your left leg. Hold for 10 seconds.
- Repeat 10 to 15 times. Repeat on the opposite side.
- Do a total of two rounds on each side.



Find ways to fit these exercises into your daily routine. Small changes can add years to your life and life to your years.

**Sources include:** Centers for Disease Control and Prevention; National Institutes of Health; U.S. Department of Health and Human Services

## Fall-prevention checklist

Here are some other things you can do to avoid a fall:

Have your vision checked at least once a year.



Ask your doctor or pharmacist to review all your medicines; some may cause dizziness or drowsiness.



Make your home safer. Clear the floor of clutter, improve the lighting around stairs and other hazardous spots and install grab bars in the bathroom.



Always wear supportive, low-heeled shoes.



Join a yoga or tai chi class to improve balance and coordination.



# PROTEIN POWERS MUSCLE MAINTENANCE

**Ask any bodybuilder with a pantry full of shakes and powders — protein plays a key role in building muscle. But it's not only young, fit athletes who stand to gain from this power nutrient.**

**A blend of protein sources, from both animals and plants, can keep older adults from losing muscle size and strength as they age. This offers a simple way to offset one of the more harmful changes associated with getting older.**

## **Muscle loss normal, but not inevitable**

Once you reach age 50, your muscles begin to shrink 1% to 2% per year. Your strength also starts to deteriorate — dropping 1.5% annually. Pass age 60 and that rate doubles.

The consequences extend beyond puny biceps. Losing muscle mass boosts your risk for falls, fractures and disability. Maintain your muscle, on the other hand, and you'll stay strong and independent.

Fortunately, you don't have to sit by and watch your arms, legs and abs wither away. Adding adequate animal protein — including meat, fish, eggs and dairy — to your diet can help you maintain the size of your muscles. Meanwhile, plant protein preserves muscle strength. Good sources include beans, lentils and soy products such as tempeh and tofu.

## **Pump up the protein**

Did you say "cookie?" Yes, you can power your muscles with a sweet potato protein cookie. Visit [www.ahealthiermichigan.org](http://www.ahealthiermichigan.org) and search "protein cookie" for the recipe.







### **Amp up your daily diet**

Ample protein also helps you fight infection and recover from an accident or surgery. Men 51 and older should aim for 5.5-ounce equivalents of protein per day, while women should shoot for 5-ounce equivalents. One-ounce equivalent means an ounce of meat (or fish), one egg, a quarter-cup cooked beans or a half-ounce of nuts or seeds.

To add more protein power to your daily meal plan:

- Mix up your main course. Try lean steak or roasts, pork tenderloin and poultry. And make seafood your protein of choice at least twice a week.
- Boost salads, soups, rice and casseroles with beans.
- Spread peanut butter on your morning toast or afternoon crackers.
- Stir low-fat cheese or an extra serving of egg whites into your omelet or scrambled eggs.
- Make soup and oatmeal with skim milk instead of water. Or spoon dry milk powder into smoothies, mashed potatoes or soups.
- Add pine nuts to pasta, slivered almonds to steamed veggies or toasted cashews to stir-fries.

**Sources include:** Academy of Nutrition and Dietetics; Harvard Health Publishing; *Journal of Nutrition*; U.S. Department of Agriculture; U.S. Food and Drug Administration

# PROTECT YOURSELF FROM FRAUDS AND SCAMS





**F**raud and scams are everywhere, and they don't just target seniors.

"These scams affect everybody," says 1st Lt. Michael Shaw, a public information officer for the Michigan State Police. "I don't want seniors to feel they're targeted, because they aren't."

### Current scams

In one scam, a caller says your grandchild was arrested and you need to post bond. You're asked to provide a credit card number or purchase gift cards for bail. The caller will then use your credit card or the gift card numbers. "Law enforcement will never call to ask for gift cards or credit cards for bail," Shaw says.

In another scam, you get a call or email saying you've won a lottery,

but you must pay a fee to claim your prize.

"If you didn't enter a lottery, you can't win," Shaw says. "And if you won, you won't have to pay to get your prize." He recommends hanging up or not responding to emails, which often contain computer viruses or spyware that can steal your personal information.

### Medicare fraud

Other schemes target Medicare recipients by offering "free" services, says Steven Ryner, manager, Fraud Investigation, Blue Cross Blue Shield of Michigan.

He warns seniors to be careful when attending health fairs. You may be offered a "free" test, but then you're asked for your medical ID card. "You'll often see a claim show up on your *Explanation of Benefits*," Ryner says.

For example, you're offered a DNA test to see if you're predisposed to various diseases. The test is supposedly free, but you're asked for your medical ID card. An unscrupulous doctor issues a prescription, and the test is then billed to Medicare. "It's a very expensive scheme," Ryner explains. He recommends talking with your doctor if you think you need genetic testing.

Other scams offer free back or knee braces. The criminals manipulate your response to say you ordered a brace. An unscrupulous doctor writes a prescription, and Medicare is billed. You'll get a brace but, Ryner says, these devices require custom fitting. Similar scams involve diabetes testing supplies or pain-relief ointments.

"They may tell you it's free, but it's costing the health care system," Ryner explains.

## Tips to avoid becoming a victim

- If you think a caller is suspicious, hang up.
- Never open emails or click links from unknown senders.
- Avoid working with contractors who go door-to-door. Ask relatives or friends for recommendations or check with your local Better Business Bureau. In Michigan, many contractors are required to have licenses, Shaw says. Verify a license at [www.michigan.gov/lara](http://www.michigan.gov/lara).
- Don't provide your bank account number if you get a call from your bank. Same goes for your Social Security number. Your bank has your account number, and the Social Security Administration has your Social Security number.
- Use caution when posting on social media. Avoid announcing your vacation dates; that's an invitation to thieves, Shaw says.

- Don't contribute to charities that contact you by phone. Legitimate organizations will mail information to you. Check charities at [www.charitynavigator.org](http://www.charitynavigator.org).
- Ask to see an ID badge before letting a police officer or utility company worker in your home. If you're still unsure, call 9-1-1.
- Carefully review your *Explanation of Benefits*. If you think a charge is suspicious, call the Blue Cross Anti-Fraud Hotline at 1-888-650-8136 from 8:30 a.m. to 4:30 p.m. Monday through Friday. TTY users, call 711.

If you're the victim of a scam, don't be embarrassed. "There are just as many 20-year-olds who get duped," says Ryner, a former police officer. Report the incident to police.



## HOOK, LINE AND SINKER:

# The health benefits of fish and seafood

**A balanced diet that includes a variety of fish and seafood is great for your heart health. The American Heart Association recommends eating two servings of nonfried fish every week. A serving is equal to a 3.5-ounce fillet or  $\frac{3}{4}$  cup of flaked fish. Here's what fish and seafood bring to the table:**

### High-quality protein

Fish and shellfish are tasty sources of high-quality protein. Examples of shellfish include shrimp, crab, lobster, clams, scallops and oysters. Your body uses protein to make and maintain bones, muscles and skin.

### Omega-3 fatty acids

Fish and shellfish also contain omega-3 fatty acids. These healthy fats help:

- Reduce your risk for dangerous abnormal heart rhythms
- Decrease levels of triglycerides — a type of fat in the blood
- Slow the buildup of fatty deposits that clog arteries
- Lower your risk for heart disease, cardiac arrest, stroke and heart failure

For the most benefit, choose types of fish that are high in omega-3s, such as salmon, mackerel, herring, lake trout, sardines and albacore tuna. Other fish and shellfish — such as cod, tilapia, catfish, and shrimp — have omega-3s in smaller amounts. Choose wild-caught varieties when possible to minimize higher levels of toxins sometimes found in farm-raised fish.

### Low in saturated fat

Fish and shellfish are naturally low in saturated fat — the kind of fat that raises cholesterol levels and increases your risk for heart disease and stroke. So, fish and shellfish are good alternatives to foods heavy in saturated fat, such as many red and processed meats. Just make sure unhealthy fat isn't added during cooking. It's best to skip the fried fish. Grilling, baking, broiling and boiling are healthier ways to prepare your catch of the day.

Consider adding fish or seafood to your plate today to reel in some great health benefits.

**Sources include:** American Diabetes Association; National Library of Medicine; U.S. Department of Agriculture; U.S. Food and Drug Administration







## Healthy recipe

Clip & save



# Shrimp BLT Salad

This delicious dish is simple and easy to make.

Shrimp is a good source of lean protein, vitamin D and iron. Mixed greens are a rich source of folate, which is good for cellular health. Grape tomatoes provide fiber and vitamins A and C. Spices add great flavor to the shrimp while keeping sodium in check.

### Servings: 6

1 Tbsp. paprika	2 Tbsp. extra-virgin olive oil
½ Tbsp. garlic powder	Juice of 1 lime
½ tsp. plus a pinch cayenne pepper	Pinch of sugar
Kosher salt to taste	4-6 cups mixed salad greens, chopped
Freshly ground black pepper to taste	4 slices thick-cut bacon or turkey bacon, cooked and chopped
1 lb. large raw shrimp, peeled and deveined	1 cup grape tomatoes, halved

1. Heat broiler. In a small bowl, combine paprika, garlic powder and cayenne. Season with salt and pepper.
2. On a large rimmed baking sheet, toss shrimp with paprika mixture, then broil, flipping once, until pink, about 5 minutes.
3. Make dressing: In a small bowl, whisk together olive oil, lime juice, a pinch of cayenne and a pinch of sugar until combined.
4. Add greens to salad bowl and top with shrimp, bacon and tomatoes. Serve dressing on the side. Enjoy!

### Nutritional information per 1.5 cup serving:

184.2 calories, 9.6 g total fat, 1.9 g saturated fat, 157.3 mg cholesterol, 306.9 mg sodium, 4.2 g carbohydrates, 18.2 g protein, 2.2 g sugar and 1.7 g fiber.





## New feature

Welcome to our new feature, “Ask Grace.” In each issue, registered dietitian Grace Derocha, RD, CDE, MBA, will answer reader questions about diet and nutrition.

### Ask Grace

Grace Derocha is a registered dietitian, certified diabetes educator and certified health coach at Blue Cross Blue Shield of Michigan. She’s passionate about helping others live healthier and happier lives.



**I have diabetes, and I’d like to learn more about carbohydrates. I know there are “good” carbs and “bad” carbs.**

It’s important to understand that carbs are necessary. Our bodies use carbs to turn blood sugar into energy.

#### Examples of ‘good’ and ‘bad’ carbs

Complex carbs, or “good” carbs, gradually increase blood sugar levels and have had little processing.

#### Examples of “good” carbs include:

- Whole-grain bread, pasta, cereal, oatmeal, brown rice
- Fruits
- Vegetables
- Low-fat dairy products
- Beans, nuts and seeds

Carbs to limit or avoid are those that rapidly spike blood sugar levels.

#### Examples of “bad” carbs include:

- White bread, pasta or rice
- Baked goods, ice cream, sweetened cereal, soda, desserts and other foods with added sugar

#### What to look for on food labels

- **Serving size** – If the serving size is 1 cup and there are two servings per container, double the carb count if you eat the entire container.
- The **total carbohydrate** label includes carbs, sugar (natural and added), starch and fiber of a food item per serving.
- Check the **ingredients** because they’re listed in order of amount in that product. The first ingredient is most prevalent, and the last one is the least.

#### How many carbs should you eat or drink?

On average, people with diabetes should get between 40% to 45% of their calories from carbs. Most women need three to four carb servings (45 to 60 grams) per meal, while most men need about four to five (60 to 75 grams).

By choosing healthier carbs, you’ll gradually increase blood sugar levels rather than quickly spiking them. Pairing carbs with lean protein and heart-healthy fats will also slow down the digestion process to help regulate blood sugars. Carbs shouldn’t be off-limits — just be mindful of what kinds of carbs you’re eating.





# Are you at risk for **DIABETES?**

Learning that you have a high risk of developing Type 2 diabetes might sound like bad news. But it has a good side: Armed with this information, you can take steps now that may prevent or delay diabetes. Answer these questions to see if you're at risk.

Question	Answer	Points	Score
<b>What's your age?</b> Your chance of getting diabetes increases as you grow older.	<input type="checkbox"/> 39 or younger	0	
	<input type="checkbox"/> 40-49	1	
	<input type="checkbox"/> 50-59	2	
	<input type="checkbox"/> 60 or older	3	
<b>Are you physically inactive most days of the week?</b> Regular physical activity helps reduce your diabetes risk.	<input type="checkbox"/> No	0	
	<input type="checkbox"/> Yes	1	
<b>Are you overweight or obese?</b> Calculate your body mass index at <a href="http://www.cdc.gov/bmi">www.cdc.gov/bmi</a> . Eating wisely and being active can help you reach and stay at a healthy weight.	<input type="checkbox"/> No	0	
	<input type="checkbox"/> Overweight	1	
	<input type="checkbox"/> Obese	2	
<b>Are you a man or a woman?</b> Men are more likely than women to have undiagnosed diabetes.	<input type="checkbox"/> Woman	0	
	<input type="checkbox"/> Man	1	
<b>If you're a woman, did you ever have gestational diabetes (diabetes during pregnancy)?</b> A history of gestational diabetes increases your risk for Type 2 diabetes.	<input type="checkbox"/> No or not applicable	0	
	<input type="checkbox"/> Yes	1	
<b>Have you ever been diagnosed with high blood pressure?</b> A healthy, active lifestyle helps ward off diabetes and high blood pressure.	<input type="checkbox"/> No	0	
	<input type="checkbox"/> Yes	1	
<b>Are you African American, Hispanic or Latino American, American Indian or Alaskan Native?</b> These groups have higher diabetes rates than the general U.S. population.	<input type="checkbox"/> No	0	
	<input type="checkbox"/> Yes	1	
<b>Do you have a parent, brother or sister with diabetes?</b> Your genes affect how prone you are to developing diabetes.	<input type="checkbox"/> No	0	
	<input type="checkbox"/> Yes	1	
Total Score:			

A total score of 5 or more indicates a high diabetes risk. If you score in that range, share your results with your doctor and ask about getting tested for diabetes.

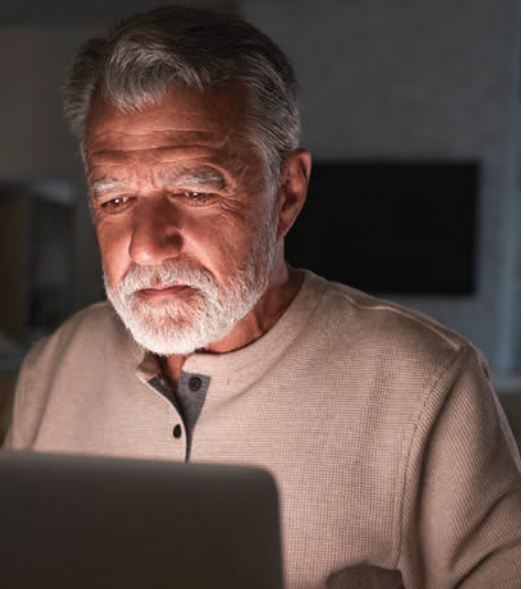
Sources include: American Diabetes Association; American Heart Association; Centers for Disease Control and Prevention



## Dr. K's corner

**Marc D. Keshishian, M.D.**, is senior vice president and chief medical officer of Blue Care Network.

# The dangers of 'Dr. Google'



**You spot a small rash on your arm, feel a tickle in the back of your throat or notice strange stomach pains. Who do you turn to first for answers? Google.**

Suddenly, you're flooded with information from websites, online forums, social media and videos. **How do you know what's reliable and what isn't?**

### Watch for anxiety

Looking up a symptom online may be handy and helpful. But it can also be confusing and scary. You may be convinced you have a disease. This is common in the medical profession and is often referred to as "medical student syndrome." If your online research makes you anxious, take a break from the internet. Talk with your doctor instead.

### Be a savvy searcher

Make certain you're using online health resources that

are trustworthy. Here are a few websites you can trust:

- MedlinePlus (National Library of Medicine), [www.medlineplus.gov](http://www.medlineplus.gov)
- Centers for Disease Control and Prevention, [www.cdc.gov](http://www.cdc.gov)
- American Academy of Family Physicians, [www.familydoctor.org](http://www.familydoctor.org)
- U.S. Department of Health and Human Services, [www.healthfinder.gov](http://www.healthfinder.gov)
- National Institutes of Health, [www.nih.gov](http://www.nih.gov)

### Contact a professional

If you need an answer to a health question, why not call Blue Cross Blue Shield of Michigan's free 24-Hour Nurse Line? Call 1-800-775-BLUE (2583) at any time to speak with a registered nurse.

You can also connect with a doctor online without an appointment for minor illnesses when you can't get to your primary care doctor's

office. To use Blue Cross Online Visits<sup>SM</sup>, download the Online Visits app, visit [www.bcbsmonlinevisits.com](http://www.bcbsmonlinevisits.com) or call 1-844-606-1608. TTY users, dial 711.\*

If you're really concerned about your symptoms, visiting an urgent care center is an option, too. They're usually open nights and weekends, and can treat problems such as strep throat, rashes and the flu.

If you still prefer to search online as your first option, know this: Even the best online information may not apply. "Dr. Google" is no substitute for getting personalized advice from your doctor.

\*Copay may apply.

**Sources include:** American Psychiatric Association; *Journal of Medical Internet Research*; National Institutes of Health; *Psychosomatics*; *Psychotherapy and Psychosomatics*





# Don't turn a blind eye to blurred vision

If you've ever experienced blurred vision, you're not alone. It might be a temporary condition, or it could be a sign of something called age-related macular degeneration or AMD. AMD is a leading cause of vision loss for older adults in the U.S. It's a painless disease that blurs the vision you need for activities such as reading or driving. While it doesn't lead to complete blindness, AMD affects the macula, the part of the eye that allows you to see fine detail. Side vision remains normal.

## Symptoms

Blurred central vision is a key symptom. If you're looking straight at a clock with hands, and you have AMD, you might see the clock numbers, but not the hands in the center.

## There are the two types of AMD:

### Dry macular degeneration

- Most common
- Causes you to slowly lose central vision
- No treatment

### Wet macular degeneration

- More serious – you lose vision faster
- Causes scarring of the macula
- May be treated with medications injected into the eye with a thin needle twice a month

The most common medications used are Avastin®, Eylea® and Lucentis®. Each works differently to stop the growth of extra blood vessels in the eye. According to Medicare requirements, Avastin is used first before moving to Eylea or Lucentis. Each effectively treats wet AMD.



## Ask the Pharmacist

**Rosalyn Sims, PharmD,** is a clinical pharmacist with the Medicare Advantage Specialty Drug Management Program at Blue Cross Blue Shield of Michigan.

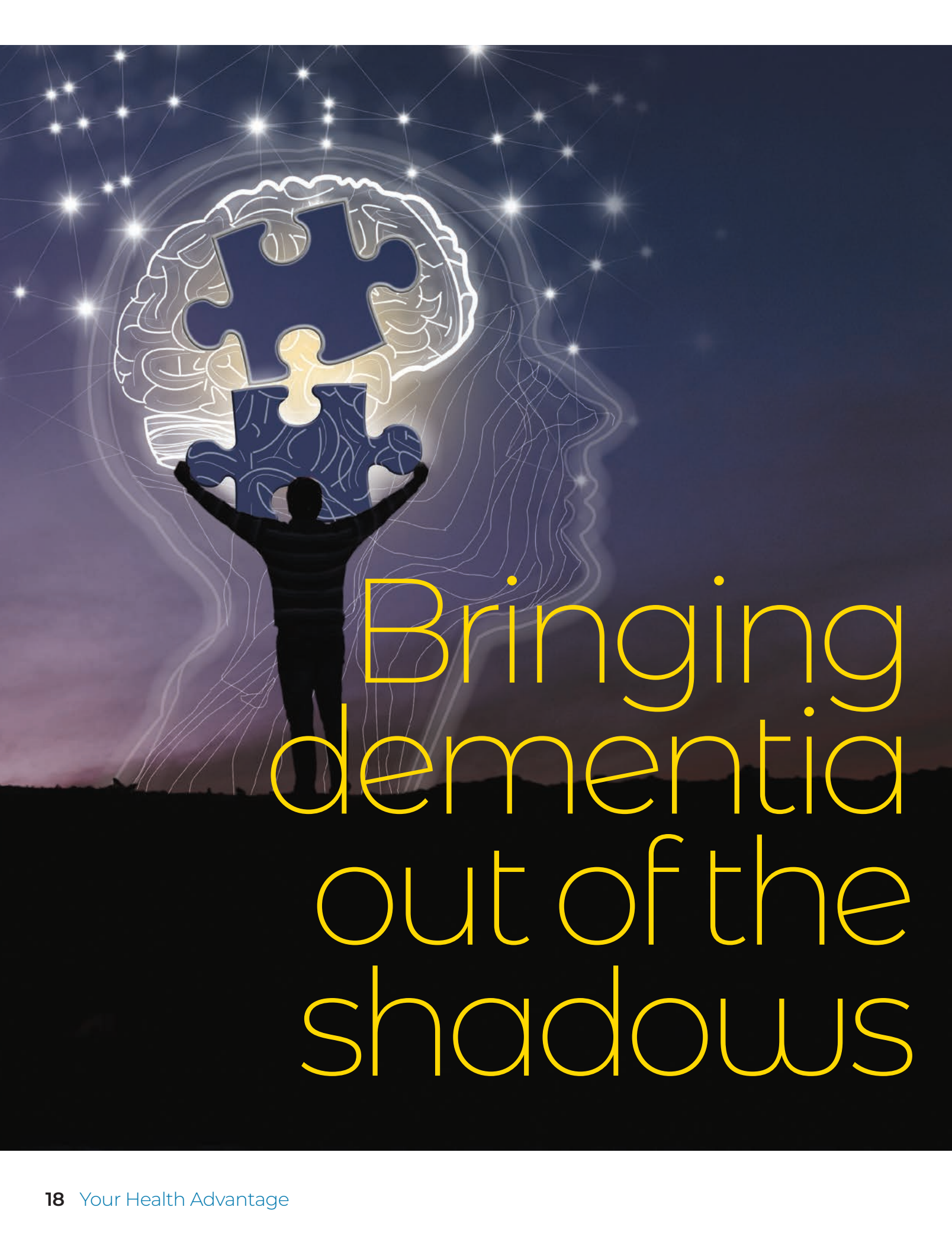
## Risk factors

Risk factors for getting AMD include:

- Eating a diet high in saturated fats
- Being overweight
- Being a smoker
- Being over 50 years old
- Having a family history of AMD
- Having heart disease or high cholesterol
- Being Caucasian

If your vision is unusually fuzzy or distorted, make an appointment with an ophthalmologist (eye specialist) to look for early signs of AMD.

**Sources include:** American Academy of Ophthalmology; National Eye Institute



# Bringing dementia out of the shadows



Up to half of people ages 85 and older may have some form of dementia. Yet this condition has long been misunderstood.

For example, many people believe dementia and Alzheimer's disease are the same. They're not. Dementia is a general term for a decline in memory, thinking and reasoning that makes daily life difficult. Alzheimer's disease is a specific brain disease that is the most common cause of dementia.

Many people also believe that dementia is a normal part of aging. That isn't true, either. A doctor should evaluate serious memory loss and impaired thinking at any age.

Fortunately, science can help dispel myths and promote better care for people with dementia. Thanks to research and medical technology, we're constantly learning more about the condition.

### Understanding the causes

Historically, the inner workings of the brain have been cloaked in mystery. But this is starting to change. There are different types of dementia caused by different issues inside the brain. Doctors have more tools to help them identify the various types of dementia with greater precision than in the past.

In Alzheimer's and several other diseases, certain proteins clump together and damage healthy brain cells. Over time, the brain cells stop working and die. In vascular dementia, blocked blood vessels deprive brain cells of the oxygen they need to survive. Some people have more than one cause for their dementia.

### Customizing the treatment

There's no cure for Alzheimer's disease or vascular dementia. But there's a lot that can improve the lives of people with these conditions.

For example, research shows that people with dementia benefit from person-centered care. This approach to managing the disease stresses:

- Individualizing care for the person with dementia
- Helping the person engage in meaningful activities
- Prioritizing emotional well-being and quality of life
- Building a positive relationship with care providers

### Keep in mind

Conditions such as depression, medicine side effects and vitamin deficiencies can cause dementia-like symptoms. In these cases, when the underlying condition is treated, the symptoms may go away.

If you have concerns about yourself or a loved one, consult a doctor. An accurate diagnosis is the first step toward getting the right treatment.

**Sources include:** Alzheimer's Association; American Geriatrics Society; *Clinical Interventions in Aging*; National Institutes of Health; *PLOS One*

## Finding helpful resources

You've just found out that a family member has dementia. Where do you turn for help?

Rethinking Dementia helps people with dementia and their caregivers find the support and services they need. It's a collaborative effort that brings together more than 20 community organizations, including Blue Cross Blue Shield of Michigan. For tips, articles and services, go to [www.rethinkingdementiami.org](http://www.rethinkingdementiami.org) or call 616-247-9630.





GET HELP FOR  
YOUR ACHY,  
BREAKY BONES



R

ES

**Osteoporosis is a disease that develops silently. But fractures of the wrist, spine, ribs and hip are anything but silent. They're painful and disabling.**

**Here's what you need to know about your risk for osteoporosis and how to help prevent it.**

### Who's at risk?

Women are much more likely to get osteoporosis than men. But that doesn't mean men don't need to worry about keeping their bones healthy. Other factors put you at risk for osteoporosis, including:

- **Older age** — Bones become less dense and weaker with age.
- **Race** — White and Asian women are most at risk. But all races may get the disease.
- **Weight** — People who weigh less and have less muscle are more at risk for this condition.
- **Lifestyle factors** — Lack of physical activity, heavy alcohol use, smoking and dietary calcium and vitamin D deficiency may increase your risk.
- **Certain medicines** — Some medicines may increase your risk.
- **Family history** — Having a family history of bone disease may make you more likely to have it, too.

Some ways to treat osteoporosis are also ways to prevent it. Take these steps to keep your bones strong and healthy now and as you get older.

### Get screened

Talk with your doctor to see whether you need a bone density test. Women should have a bone density test completed to assess for osteoporosis from ages 65 to 85.

Ask your doctor about getting tested if you:

- Are older than 50 and have broken a bone
- Lost height or have hunched posture
- Have sudden back pain
- Are taking medications known to cause bone loss

If you've had a fracture, ask your doctor whether you need additional screening or medication.

### Be active

Weight-bearing exercise, like brisk walking and climbing stairs, strengthens bones. You can also use free weights or weight machines. Stretching, yoga and tai chi improve your balance and reduce the risk of falling. Work with your doctor to develop a safe exercise plan.

### Eat a bone-healthy diet

This includes plenty of fruits and vegetables, as well as vitamin D and calcium. Ask your doctor whether you need a supplement. In addition, limit alcohol and sodium. Drinking too much alcohol increases the risk for bone loss and falls. And eating too much sodium causes your body to get rid of calcium in urine.

### Quit smoking

If you smoke, try to quit. Quitting isn't easy, but it's one of the best things you can do for your bones.

### Follow your treatment plan

If you're diagnosed with or are at high risk for osteoporosis, your doctor may prescribe medicine to help maintain your bone health. These include:

- Estrogen and hormone replacement therapy. Hormone therapy can help prevent osteoporosis in postmenopausal women.
- Bisphosphonates. These medicines reduce bone loss, increase bone density and reduce the risk for fractures.
- Selective estrogen receptor modulators. These medicines help prevent bone loss in postmenopausal women.
- Parathyroid hormone. This medicine is used in adults with osteoporosis who are at high risk for having a fracture.

Your bones support you all day long, so support them with these bone-friendly steps.

**Sources include:** National Institutes of Health; U.S. Preventive Services Task Force

# Crossword puzzle

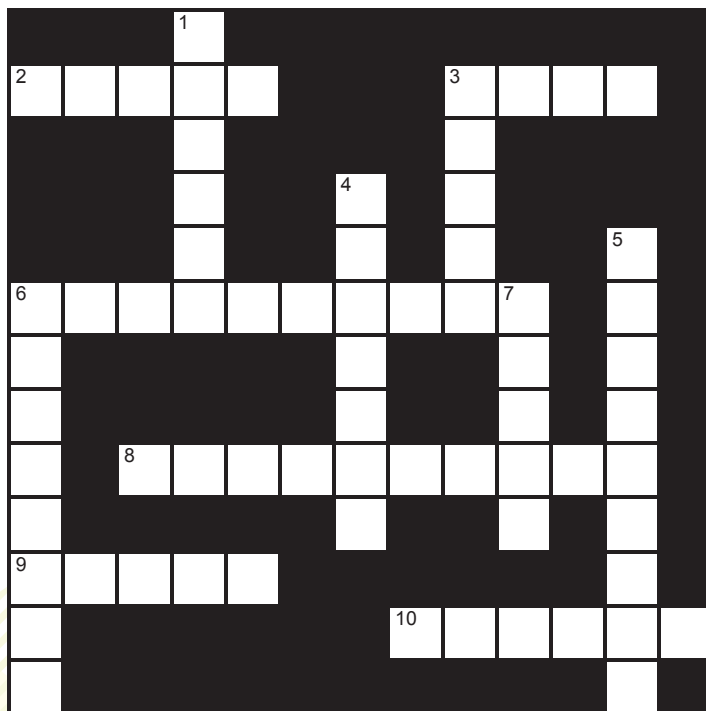


## Across

- 2 Anxiety in the doctor's office can cause spikes in \_\_\_\_ pressure for nearly half of U.S. adults.
- 3 A balanced diet that includes a variety of \_\_\_\_ and seafood is great for your heart health.
- 6 If you are unsure of how to dispose of your medications, ask your \_\_\_\_.
- 8 Talk with your doctor to determine the best place to have your \_\_\_\_ procedure.
- 9 Our bodies use \_\_\_\_ to turn blood sugar into energy.
- 10 To avoid being scammed, never open \_\_\_\_ or click links from unknown senders.

## Down

- 1 "Dr. Google" is no substitute for getting personalized health advice from your \_\_\_\_.
- 3 \_\_\_\_ are the most common cause of injury in people over age 65.
- 4 Blurred vision could be a sign of something called age-related \_\_\_\_ degeneration.
- 5 If you create an online Blue Cross account, you can receive many of your plan documents \_\_\_\_.
- 6 Regular \_\_\_\_ activity helps reduce your diabetes risk.
- 7 Member Emma "Maxine" Henderson has published \_\_\_\_ cookbooks.



Puzzle answers on Page 24

## CLARIFICATION ON SAFE DRUG DISPOSAL

Some readers had concerns about the drug disposal information in our Fall 2019 "Make home sweet home safe" story, so here's some clarification:

- Your best bet is to bring medicines you no longer need to a local drug take-back program. To find a program near you, visit the website listed at the end of this article.
- If there are no take-back programs near you, remove the medication from its container and mix it with an unappealing substance, such as used coffee grounds or cat litter. Seal it in a plastic bag and place in your trash.
- The U.S. Food and Drug Administration says some medicines, such as powerful narcotic pain medicines and other controlled substances, should be poured down the sink or flushed down the toilet when they're no longer needed.
- If you're unsure, check with your pharmacist.

Learn more about all disposal methods at

[www.fda.gov/consumers/consumer-updates/where-and-how-dispose-unused-medicines](http://www.fda.gov/consumers/consumer-updates/where-and-how-dispose-unused-medicines).



# Get to the root of your thinning hair

**I**s your forehead growing taller? Is the part in your hair getting wider? You're far from alone if your crowning glory is looking a little less glorious these days.

Genes are a very common cause for hair loss in both men and women.

## Blame your parents!

Hair loss is often the normal result of having specific genes. In addition, hormonal changes may play a role in women's hair loss after menopause.

It can be unsettling to look in the mirror and see more of your scalp staring back. Hereditary hair loss typically follows a predictable pattern:

- Men may have a receding hairline or a bald patch that starts in the center of their scalp.
- Women may notice that their part is wider or their ponytail is skimpier. Eventually, this may lead to all-over thinning.

Without treatment, this kind of hair loss tends to gradually worsen over time. But you may be able to slow it down with prescription or over-the-counter medicine. Talk with your primary care doctor or a dermatologist about your treatment options.

## Other possible causes

Don't just assume that hair thinning is hereditary, however. There are several potential causes that aren't genetic, including:

- Emotional or physical stress
- Health conditions such as diabetes and lupus
- Medications such as those for heart problems and gout
- Chemotherapy and radiation therapy
- Hairstyles that pull your hair too tightly
- Harsh hair treatments such as perms and hot oil treatments

This kind of hair thinning is often treatable or temporary. It may also provide crucial clues about the state of your overall health.

So, even if you're fine with seeing more of your scalp lately, you should still discuss hair thinning with your doctor and face the issue head-on.

**Sources include:** American Academy of Dermatology; American Academy of Family Physicians; National Institutes of Health





# You and your doctor have choices

Save money by considering alternate locations

When you need surgery, you have options that could save you money.

**Outpatient surgical costs are driven in large part by where you have your procedure done.** For example, a colonoscopy in an outpatient clinic may cost you significantly less than one at a hospital.

Talk with your doctor to determine the best place to have your outpatient procedure. Some routine, noninvasive and minimally invasive outpatient procedures can be performed at an outpatient clinic, sometimes called an ambulatory surgical center, versus a hospital. You'll receive high-quality care but at a lower out-of-pocket cost. These procedures include:

- Lens and cataract procedures
- Colonoscopy and biopsy
- Upper gastrointestinal endoscopy and biopsy

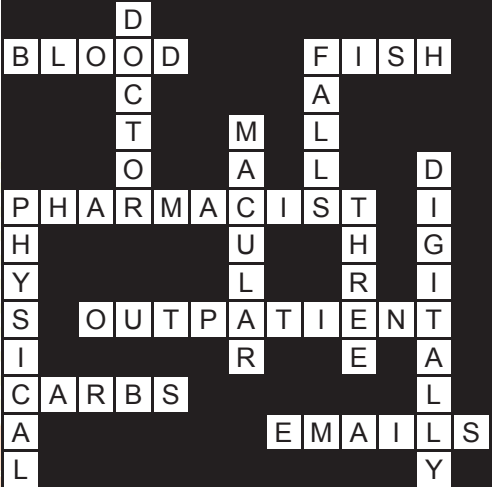
Even some hip and knee replacement surgeries can be done in outpatient surgical centers with no need to spend the night.

By working with your doctor to determine the most appropriate location for care, you can save money, be discharged sooner and recover in the comfort of your own home.

Interested in learning more? Check your *Medicare Advantage Resource Guide* and your *Evidence of Coverage*.

# Crossword puzzle answers

From Page 22





# Get answers at [www.bcbsm.com/medicare](http://www.bcbsm.com/medicare)



You can also find this information in your *Evidence of Coverage*. To get a copy for your plan, call Customer Service at the phone number on the back of your BCN Advantage ID card.

## Log in to your Blue Cross member account to find:

- Benefits and services that are included in, and excluded from, your coverage
- Copayments and other charges for which you are responsible
- Providers who participate with us, including their credentials and where they practice
- Primary and specialty care and behavioral health and hospital services whenever you need such care, both during and after business hours

## Enter *HMO frequently asked questions* in the search box\* to find out:

- How to get care and coverage when you're out of our service area and what benefit restrictions may apply
- How your Blue Care Network prescription drug plan works
- How you can resolve problems, including sending us a complaint or appealing a coverage decision that you don't agree with and your right to an independent external review
- How to submit a claim for covered services, if ever you need to

## Enter *Important information* in the search box\* to find out:

- What your rights and responsibilities are
- How to get translation help
- How we protect your health information
- How we determine care decisions based on appropriateness of care and service, and don't provide financial incentives for decisions that result in less care
- How we evaluate new technology with respect to covered benefits

## Enter *Continuing care with a doctor* in the search box\* to find out:

- How you can continue treatment with a doctor not in your plan's network

## Enter *Emergency care* in the search box\* to find out:

- How to use emergency or urgent care services and when to call 911

\*This is a two-step process. After typing in the search term, you'll get a "search" result. Click on this item to be directed to the appropriate website.

# How do I take my blood pressure at home?

Anxiety in the doctor's office can cause spikes in blood pressure for nearly half of U.S. adults, a recent study found. To help avoid what's been termed "white coat hypertension," we recommend you check your blood pressure at home to get a more accurate reading. It's easy with the newer blood pressure monitors. And, if you have a history of high blood pressure, taking it at home helps track how well your treatment is working.

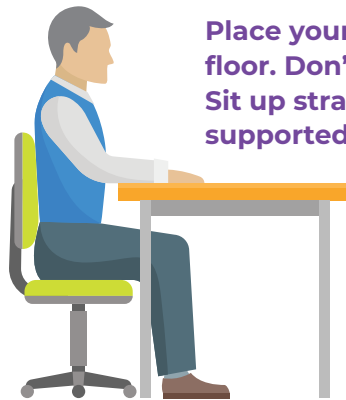
## Tips for using a home blood pressure monitor

Carefully follow the directions for your particular monitor.



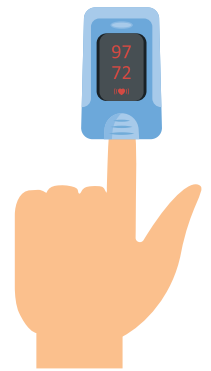
Sit still and think calming thoughts. Don't talk.

Rest your arm comfortably on a flat surface. Position the bottom of the arm cuff directly above the bend of your elbow.



Place your feet flat on the floor. Don't cross your legs. Sit up straight with your back supported by the chair.

Avoid using wrist or finger monitors. They're less reliable than monitors with upper arm cuffs.



## BEFORE

**30 minutes before:**  
Don't exercise, smoke or consume caffeine.

**5 minutes before:**  
Sit down and rest.

## AFTER

Recheck your blood pressure 1 or 2 more times, about a minute apart.

Record all your results.



## Work with your doctor

Keep in mind that blood pressure rises and falls throughout the day due to emotions and activity. Doctors aren't as concerned with isolated high blood pressure readings. They focus more on a patient's typical blood pressure throughout the day. Follow your doctor's advice about how often to check it.

Once a year, bring your blood pressure monitor to a doctor's visit. Check it for accuracy against the equipment at the doctor's office.

Sources include: American Heart Association; Centers for Disease Control and Prevention; Hypertension





## It's personal: A cholesterol treatment plan just for you

**D**o you know your cholesterol levels? They can offer a window into your heart health.

High cholesterol often has no symptoms. Left untreated, it can cause fatty deposits that build up inside your arteries. These deposits may lead to:

- Heart disease
- Heart attack
- Stroke
- Other problems

When you know your cholesterol levels, you can take important steps to lower them, if necessary, to protect your heart.

### Cholesterol control updates

The American College of Cardiology and the American Heart Association recently published new cholesterol

management guidelines. One of the changes is that health care providers should take a more personalized approach when treating patients.

When providers are choosing a treatment plan, the guidelines say they should consider the patient's:

- Age
- Heart disease risk
- LDL (bad) cholesterol level
- Health (such as whether the patient has Type 2 diabetes)

Based on that information, the guidelines offer a road map for treating patients with lifestyle changes and medications, such as statins. If your doctor prescribes a statin, make sure you take it correctly.

Another update is that they now recommend prescribing other cholesterol-lowering drugs. For example, people who've had a heart attack or stroke

and are at high risk of having another one may gain from taking other medications, such as ezetimibe and PCSK9 inhibitors. These medications can help bring cholesterol levels within a healthier range.

### Team up with your doctor

The guidelines note that doctors and patients should work together to create a treatment plan. Talk with your doctor if you:

- Have high cholesterol
- Are at risk for heart disease
- Don't know your cholesterol numbers

Together, you can decide when you should be tested and how to improve your heart health.

**Sources include:** American College of Cardiology; American Heart Association; *Circulation*

# HEALTH ISSUE? Know the 4 types of care

If you have a medical concern and need help, you've got options. Remember to always call your primary care doctor first for all your health care needs — from a routine checkup to an injury or illness (such as high fever or unusual pain). If you visit a specialist, keep your primary care doctor in the loop about your appointments. Here's where and how to get the care you need.

TYPE OF CARE	YOU MAY NEED IT FOR ...	YOU'LL RECEIVE CARE ...	WHAT YOU NEED TO DO
<b>Regular and routine care appointments</b>	An appointment for care with your primary care doctor that may include but is not limited to: <ul style="list-style-type: none"> <li>• Follow-up appointment related to a problem-focused issue such as blood pressure</li> <li>• Annual gynecologic exams</li> <li>• Immunizations</li> </ul>	Within 30 business days	<ul style="list-style-type: none"> <li>• Call in advance.</li> <li>• Take all prescriptions and over-the-counter medicines as prescribed.</li> <li>• Always bring your immunization records.</li> <li>• Make a list of questions to ask your doctor.</li> </ul>
<b>Urgent care</b>	A condition that is not life-threatening but is potentially dangerous, such as: <ul style="list-style-type: none"> <li>• High fever (101 degrees for more than 24 hours)</li> <li>• Persistent vomiting</li> <li>• Diarrhea</li> <li>• Rash</li> </ul>	Within 48 hours	<ul style="list-style-type: none"> <li>• Call your primary care doctor. Your doctor or an on-call doctor will provide care or direct you to an urgent care center.</li> <li>• If your doctor is unavailable, you can locate an urgent care center near you at <a href="http://www.bcbsm.com/find-a-doctor">www.bcbsm.com/find-a-doctor</a>.</li> </ul>
<b>Emergency care for life-threatening conditions</b>	A condition that requires immediate intervention to prevent death or serious harm to you	Immediately	<ul style="list-style-type: none"> <li>• Seek help at the nearest emergency room or call 911.</li> <li>• Contact your primary care doctor upon discharge.</li> </ul>
<b>Hospital care</b>	Conditions that require a hospital stay	As needed	<ul style="list-style-type: none"> <li>• Your primary care doctor may assist with coordinating your hospital care.</li> </ul>

## Behavioral health specialists

are available 24 hours a day, seven days a week. You do not need a referral from your doctor.



# Use these guidelines when you need behavioral health care

Call the mental health help number on the back of your BCN ID card to get behavioral health care. This includes substance abuse care and mental health services. A care manager evaluates your needs and arranges for services.

TYPE OF CARE	YOU MAY NEED IT FOR ...	YOU'LL RECEIVE CARE ...	WHAT YOU NEED TO DO
<b>Initial visit for routine behavioral health care</b>	This visit happens when there is no immediate danger to your health and your ability to cope is not at risk.	Within 10 business days of your request	Tell the behavioral health care manager of any special needs to ensure appropriate referral.
<b>Follow-up routine behavioral health care</b>	Follow-up routine care appointments are visits at later, specified dates to evaluate your progress and other changes that have taken place since a previous visit.	Within 30 business days	Tell the behavioral health care manager of any special needs to ensure appropriate referral.
<b>Urgent behavioral health care</b>	Conditions that are not life-threatening, but face-to-face contact is necessary within a short period of time (for example, severe depression)	Within 48 hours of your request	Call your behavioral or mental health provider. If you don't have a behavioral health provider, call the mental health help number on the back of your BCN ID card.
<b>Emergency behavioral health care</b> for conditions that are <i>not life-threatening</i>	Conditions that require rapid intervention to prevent deterioration of your state of mind, which, left untreated, could jeopardize your safety	Within 6 hours of your request	Call your behavioral or mental health provider. If you don't have a behavioral health provider, call the mental health help number on the back of your BCN ID card.
<b>Emergency behavioral health care</b> for life-threatening conditions	A condition that requires immediate intervention to prevent death or serious harm to you or others	Immediately from a health care practitioner, either by phone or in person	<ul style="list-style-type: none"> <li>• Seek help at the nearest emergency room or call 911.</li> <li>• Contact your primary care doctor within 24 hours.</li> </ul>
<b>Hospital care</b>	Conditions that require a hospital stay	As needed	Your primary care doctor will arrange your hospital care and direct the care of any specialists at the hospital.

If you're hospitalized, it's a good idea to continue care with an outpatient mental health professional immediately after discharge. Your follow-up appointment should be within seven days after you leave the hospital. Hospital discharge planners work with BCN to help you schedule this appointment. You can also schedule it by calling the mental health help number on the back of your BCN ID card.

# Health Briefs

## Don't delay colorectal cancer screening

Let's face it: No one looks forward to a colonoscopy. But if you're due for one, get it done. The U.S. Preventive Services Task Force recommends having your first colonoscopy at age 50. The American Cancer Society suggests starting at age 45.

Colonoscopies help find colorectal cancer. Risk factors for colorectal cancer include:

- Overweight or obesity
- Family history of colorectal cancer or polyps
- Personal history of colorectal polyps or inflammatory bowel disease
- Smoking
- Drinking too much alcohol
- Type 2 diabetes
- Lack of exercise
- Consuming a lot of processed meats

### Take the following steps to help lower your odds for developing colorectal cancer:

- Don't smoke.
- Stay at a healthy weight.
- Eat a healthy diet with lots of whole grains and produce.

**Sources include:** American Cancer Society; U.S. Preventive Services Task Force



## Remember your eyes when applying sunscreen

Did you know that 5% to 10% of skin cancers occur on the eyelids? A study in the journal *PLOS One* found that about 75% of people don't completely cover the eyelids when they put on sunscreen.

You may avoid using lotion around your eyes because you're afraid it will sting. The Skin Cancer Foundation recommends using mineral formulas with zinc or titanium dioxide. These sunscreens are good for sensitive skin and won't burn your eyes as you sweat.



## Take steps to protect your kidneys

If you have diabetes, your kidneys may be at risk. About a quarter of adults with diabetes have kidney disease.

To keep your kidneys healthy, be sure to:

- Manage your blood glucose levels.
- Control your blood pressure.
- Take the medicines your doctor prescribes.
- Exercise regularly. Aim for at least 150 minutes (two hours and 30 minutes) of moderate-intensity aerobic activity every week.

**Sources include:** National Institutes of Health; U.S. Department of Health and Human Services



# Quality improvement program

Everyone wants quality health care, but how do you know you're getting it? BCN Advantage has a quality improvement program that provides a comprehensive, standard way for us to measure, evaluate and improve clinical care and services. The program identifies the important aspects of health care and continuously improves the quality and safety of the care and services we provide you. Two of the measurements used by BCN Advantage are the Healthcare Effectiveness Data and Information Set (also known as HEDIS®) and the Centers for Medicare & Medicaid Services star rating.

HEDIS is the most widely used set of performance measures in the managed care industry and is just one of the tools BCN Advantage uses to improve the quality of patient care. HEDIS makes it possible to compare the performance of health plans throughout the nation.

Medicare evaluates plans based on a 5-star rating system. Star ratings are calculated each year and may change from one year to the next. The star rating system uses quality measurements that are widely recognized within the health care industry to provide an objective method for evaluating health plan quality.

BCN Advantage received an overall 4.0-star rating from CMS for the 2020 star rating (2018 measurement year). Clinical HEDIS measures finished with a star rating of 4.5, which demonstrates BCN Advantage's commitment to strong clinical quality for our members.

The following clinical measures received a 4-star rating or higher (2018 measurement year):

- Adult BMI assessment
- Breast cancer screening
- Colorectal cancer screening
- Comprehensive diabetes care — blood sugar controlled, eye exams and testing for kidney disease
- Disease-modifying anti-rheumatic drug therapy for rheumatoid arthritis
- Medication reconciliation post-discharge
- Osteoporosis management in women who had a fracture
- Plan all-cause readmissions

BCN Advantage will continue to focus on improving clinical HEDIS measures. Focus measures for 2020 include:

- Statin therapy for patients with cardiovascular disease

Our quality improvement programs help doctors measure and improve care. *Your Health Advantage* and [www.bcbsm.com/medicare](http://www.bcbsm.com/medicare) give you information about these programs. For more information about our quality improvement programs or guidelines, please contact our Quality Management department:

- By email at [BCNQIQuestions@bcbsm.com](mailto:BCNQIQuestions@bcbsm.com)
- By phone at 248-455-2808, 8 a.m. to 4 p.m., Monday through Friday. TTY users should call 711.

**Blue Care Network complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.**

**ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-450-3680 (TTY: 711).**

ملحوظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-450-3680 (رقم هاتف الصم والبكم: 711).

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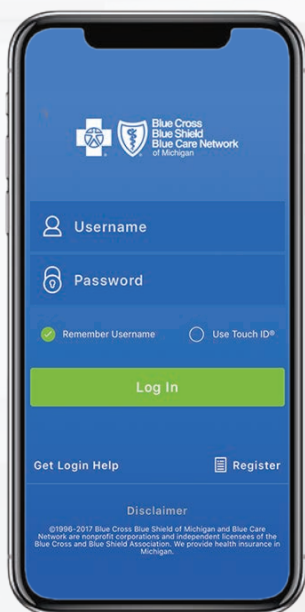
Developed by StayWell

## GO DIGITAL and take charge of your health

Have you ever gone to a doctor's appointment and accidentally left your member ID card at home? When you download the Blue Cross mobile app from the App Store or Google Play, you'll always have your virtual ID card on your smartphone or tablet.

Also, after you create your online account, you can view plan documents such as your *Explanation of Benefits* and recent claims, and receive many of your plan documents digitally, instead of in paper format.

Register online today at [www.bcbsm.com/register](http://www.bcbsm.com/register). It's that easy.



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