Who Is in Control: You or Your Diabetes?

“I wish I could say I am compliant, but this is a difficult disease for me. My intellectual side knows what to do; the emotional side throws discipline out the window.”

— SCAN Health Plan member living with diabetes since 2004

Most people with diabetes can relate to how hard it is to cope with the daily demands of managing a chronic disease. There’s carb counting, blood sugar testing, exercising, taking medications—and sticking to it no matter how you feel. All of this can make it tough to stay committed 24 hours a day, seven days a week.

It is a challenge worth taking on, though. Successfully managing your diabetes will help you feel better now. And, it is the best way to delay or prevent serious complications, such as kidney disease, nerve damage and heart attack.

Living with diabetes may not always be easy, but many people find that they can get a handle on their diabetes and live their lives to the fullest. The goal, as one person put it, is “to control your diabetes; not the other way around.”

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Managing your diabetes successfully can help you “feel better, be healthier and live longer.”

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Make It Personal
It can help to have a clear idea of what you are working toward—a simple statement that you can repeat when the going gets tough. Maybe your goal is simply to feel better or to avoid other health problems. Or there might be something more specific that keeps you motivated. For example, if having enough energy to play with your grandchildren is important to you, clip a photo of them on your blood sugar diary to encourage you to stay on track. Once you start eating better and exercising more, you’ll feel better. That can motivate you even more!

Change Your View
Some people choose to look at their diabetes as an opportunity. “The fact is much of what diabetes should be doing are the things we all should be doing but often put off,” says Cindy Casalegno, a case manager and certified diabetes instructor at SCAN. “When you have diabetes, now you have a ‘real’ reason to eat healthy, exercise, manage stress and see your doctor.”

Another way to stay positive and motivated is to learn all you can about your diabetes. Understanding what is happening in your body, how it can affect your health and what you can do to manage it gives you more control over your health and your life. Your primary care team is a good source of information. Your doctor may also be able to recommend a diabetes support group you can join. It can help to talk with others who know what you are going through because they are going through it, too.

Keep Your Balance
Managing your diabetes is a balance. You don’t want the disease to take over your life, but you do need to make daily decisions with your diabetes in mind. For example, it’s possible to create meal plans that are healthy, delicious and fit your lifestyle. With a little planning, you can still eat the foods you like, dine at your favorite restaurant and even treat yourself to dessert on special occasions. (See more about eating right on pages 4 and 5.)

As far as exercise goes, did you know that any physical activity lowers your blood glucose level? So find something you like, then try to do it for 30 minutes every day. If that’s too much at first, start with 10 minutes three times a day. Keep a record of your activity and how it changes your blood sugar levels. Share it with your doctor at your next visit.

Managing diabetes is not always easy, but you can do it, and the rewards are worth it. “People who are successful at managing diabetes realize it pays off,” says Cindy Casalegno. “They feel better, are healthier and live longer.”

Who is in control then?

DO YOU NEED TO SEE A SPECIALIST FOR YOUR DIABETES CARE?

An endocrinologist is a doctor who specializes in hormonal conditions, like diabetes or thyroid disease. So if you have diabetes, does that mean you should be seeing an endocrinologist? Not necessarily.

“Primary care doctors are trained to care for most common conditions, including diabetes,” says SCAN Chief Medical Officer Romilla Batra, MD. “If your primary care doctor helps you stay on top of your tests and screenings and your blood sugar is under control, then there’s no need to see an endocrinologist.”

If, however, you’re having trouble managing your diabetes despite sticking with your treatment plan, ask your doctor about seeing a specialist. “If standard treatments aren’t working, or if you have other conditions or complications, an endocrinologist can bring additional expertise,” says Dr. Batra.

Even if you see an endocrinologist, you will still need to see your primary care doctor regularly. He or she will:

- Help you set goals. Your doctor will let you know what your blood sugar levels should be on a daily basis and also help you set activity goals.
- Oversee your preventative tests and screenings. See page 7 for a list of the important tests for people with diabetes.
- Prescribe and review medications. Even if your endocrinologist prescribes your diabetes medications, your primary care doctor will review all your medications and check for interactions.

You Can Count on SCAN

Did you know that according to the American Diabetes Association there are 29.1 million people in the United States who have diabetes? Even so, it is not unusual to feel at times like you’re alone in dealing with the challenges that come from living with it 24 hours a day, seven days a week.

That’s why every year, in addition to bimonthly issues of SCAN Club, we create a special diabetes edition of the newsletter. We want you to know that you are not alone. Because it can be encouraging to know there is support available to help you better understand and manage your diabetes. And because learning how other people are living healthy, full lives can be reassuring and helpful.

This is our fifth annual diabetes edition, and it is just one of the tools SCAN provides to help you manage your diabetes. The Health Check Record mailed to you in June is personalized for you and includes a list of preventive care and screenings people with diabetes should have regularly. Refer to it for exams you need to have, and use the chart to record when you get the tests done.

Don’t be surprised if you receive some extra reminders from SCAN, too. You might receive a postcard in your mailbox from SCAN and/or a personalized phone call to remind you when you are due for an eye exam or other important screening. We want to be sure we are doing everything we can to help you get the exams needed to manage your diabetes, plus other preventive screenings to keep you healthy.

Your SCAN benefits also help you manage your diabetes.

While copayments vary, all SCAN plans cover:

- Visits to your doctor for regular exams and screenings
- Visits to an eye doctor to check for diabetic retinopathy
- Diabetes medications and insulin prescribed by your doctor
- A blood glucose monitor, test strips and other supplies from a select manufacturer to track your blood glucose, when prescribed by your doctor

Is there another way we can help? Our Member Services Associates are just a phone call away at 1-800-559-3500, 8 a.m. to 8 p.m., Monday through Friday.

ASK MEMBER SERVICES: LOWER COSTS FOR DIABETES MEDICATIONS

I am having trouble paying for my diabetes medications. Is there anything I can do?

There are a number of ways to lower the costs of your medications. Ask your doctor if there is a generic or other medication available that costs less and works as well as a brand-name medication you are taking. Also, consider getting your prescriptions filled at a SCAN Preferred pharmacy or through SCAN’s mail-order pharmacy. These are pharmacies in the SCAN network that offer lower copayments for many medications. Many members can also save money and time by getting 90-day supplies of the medications they take on an ongoing basis. The 90-day discounts apply at your local pharmacies and through SCAN’s mail-order pharmacy.

While there are less expensive generic medications for many brand-name medications, unfortunately there is no generic available for insulin. If you take insulin for your diabetes and the cost is making it hard to stay on your treatment plan, you can:

- Ask your doctor if there are samples of the medication available.
- Contact the company that makes the insulin (ask your pharmacist if you don’t know).
- Ask if they have a patient assistance program and if you qualify.
- Call SCAN Member Services to see if you qualify for the Low-Income Subsidy (LIS) program.
Step Up to the Plate to Manage Your Diabetes

Managing diabetes can be a bit like the game of baseball. Think about it: Every time a pitch comes across the plate, there is an opportunity for the batter. Will he hit a home run over the fence or a foul ball for a strike? Each time you step up to your plate, you have an opportunity, too. Successfully managing diabetes is in big part about making healthy decisions about what you eat at every meal. Making the right adjustments in your diet can help you feel better and live longer. Now, isn’t that a grand slam?

Improve Your Focus
Making healthy decisions might not always be easy at first. Breaking old habits or giving up some of your favorite comfort foods can be difficult. It can help to adjust the way you look at it. Instead of thinking about what you’re giving up, focus on what you’re gaining: a longer, healthier and more active life. Who doesn’t want that?

Eat Well, Not Less
“You don’t have to eat less; you just have to eat well,” says Sarah Bellefleur, a nutritionist and SCAN’s director of Network Quality. If you test your blood glucose regularly, you will learn how certain foods affect your blood sugar levels. Use that information to create meal plans that include foods you enjoy and keep your blood sugar in your target range. The key to eating healthfully is to have a variety of whole, natural foods, including vegetables, whole grains, legumes, fruits, healthy fats and lean meats, on your plate.

The Plate Method is a simple way to make sure your meals are well-balanced. First, think of an imaginary line down the middle of your plate. Then…

» Fill one half of the plate with non-starchy vegetables. Broccoli, zucchini, spinach, green beans or salad—the more greens, the better!

» Next, fill a quarter of the plate with a healthy grain or starch. For example, try brown rice, quinoa, beans, lentils or half a sweet potato.

» In the quarter that’s left, put some lean protein. Good choices are chicken, ground turkey or fish that is rich in Omega-3s (salmon, for instance).

Good Carbs Vs. Bad Carbs
You might have heard the terms “glycemic load” or “glycemic index.” Basically, these have to do with the amount of carbohydrates in a food and how it will affect blood sugar levels. “Highly processed foods, white potatoes and white breads will raise blood sugars significantly and should be limited,” says Sarah. “Eating lots of green leafy vegetables, lentils and beans will ensure that you are incorporating many of the ‘good carbs’ in your diet. And, foods below 55 on the glycemic index can actually help your body conserve insulin.”

<table>
<thead>
<tr>
<th>GLYCEMIC INDEX CHART</th>
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<tbody>
<tr>
<td><strong>High Glycemic Index Carbohydrates</strong></td>
</tr>
<tr>
<td>Baked potato, French fries</td>
</tr>
<tr>
<td>Potato chips</td>
</tr>
<tr>
<td>Honey, cooked carrots, corn flakes, popcorn</td>
</tr>
<tr>
<td>Pumpkin, watermelon</td>
</tr>
<tr>
<td>Sugar, white bread, chocolate, soda (cola), cookies, corn, white rice, ravioli</td>
</tr>
<tr>
<td>Raisins, beets, jams/preserves</td>
</tr>
<tr>
<td>Bananas, cantaloupe</td>
</tr>
</tbody>
</table>

TIP: If you treat yourself to a higher glycemic food on occasion, be sure to eat it with high-fiber foods and some protein (such as a few almonds) to slow down how quickly the sugar is absorbed into your bloodstream.

THESE TESTS ARE IMPORTANT

Tingling or numbness in the toes can be a cause for concern for anyone but particularly for someone with diabetes. Nerve damage is just one of several complications that people with diabetes are at a higher risk for developing. The good news is that just as having your cholesterol checked regularly can help head off heart problems, there are regular tests and screenings that can head off complications from diabetes.

We’ve listed them here, along with the recommended timing, but talk with your doctor about whether you will need to have a test more often.

<table>
<thead>
<tr>
<th>TEST/SCREENING</th>
<th>GENERAL RECOMMENDATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood test to measure blood sugar (A1C test)</td>
<td>Every 2 to 3 months</td>
</tr>
<tr>
<td>Diabetic eye exam</td>
<td>At least yearly</td>
</tr>
<tr>
<td>Blood or urine test to measure kidney function</td>
<td>At least yearly</td>
</tr>
<tr>
<td>Foot exam by a doctor or nurse</td>
<td>At least yearly</td>
</tr>
<tr>
<td>Review diabetes medications/insulin with doctor</td>
<td>At each visit</td>
</tr>
</tbody>
</table>

The Health Check Record mailed to you in June is a handy tool for keeping track of these important screenings. You can also find a diabetes screening chart on the SCAN website at www.scanhealthplan.com. Type “Health Check Record” into the “Search SCAN” box at the top of the page.
If Your Doctor Gives You a Prescription...

So you’ve been eating well and exercising every day for months. But your blood sugar levels still aren’t where you and your doctor want them. What now? At this point, your doctor may recommend prescription medications, such as pills or insulin. If you are already taking medications, it’s important to note that diabetes medications work in different ways to lower blood sugar. This means you might need to try a few to find the best for you. Some diabetes pills work together to lower blood sugar, so your doctor might prescribe more than one for you to use.

Want to know more? Here are answers to some questions you might have about diabetes medications.

I feel great! Can I cut back or stop my medications now?

Skipping a dose or stopping your medications is not a good idea. It can lead to blood sugar levels that are too high or too low. If your diabetes isn’t controlled, it puts you at risk for serious health problems, like stroke, heart attack and even blindness. Talk with your doctor before ever cutting back or stopping a diabetes medication.

Can I take my diabetes medications at the same time I take my other medications?

It depends. Some medications act differently when taken with other medications or even certain foods! How do you find out if it’s safe to take your diabetes medications—especially important if you are taking insulin?

Try one or more of these tips:

- Make it part of your routine by tying your medications to something you do every day, such as walking the dog or brushing your teeth.
- Use a pill box with compartments for each day of the week.
- Download Express Script’s mobile app for your smartphone for free through iTunes or Google Play. You can use it to set alarms to remind you to take your medications—even order your mail-order refills on it.
- Sign up for an automatic refill reminder program through your pharmacy.
- Synchronize your ongoing medications so that you can pick them all up in one trip. Ask your pharmacist about setting this up.
- Get 90-day supplies of your regular medications. You will make fewer trips to the pharmacy and you’re less likely to run out of your medications as quickly. Ask your doctor if 90-day prescriptions make sense for you.

Between my diabetes medications and my other medicines, it’s hard to remember to take them all when I am supposed to. Is there anything I can do to stay on track?

Getting your medications organized can make a difference. We asked Senior Advocates who have diabetes to share some of their strategies.

ASK A SENIOR ADVOCATE

Connecting with other people who are also working to manage their diabetes can make a difference. We asked Senior Advocates who have diabetes to share some of their strategies.

When looking at the number of carbs in a food, pay close attention to the serving size listed! I estimate my serving sizes by using my fist for one cup, my palm for three ounces and my hand for one or two ounces of a snack, such as mixed nuts.

— Dottie Sabo, Enchon Member since 2009

When I take my diabetes medications, I feel great! Can I cut back or stop my medications?

Don’t make any changes to your medications without your doctor’s help.

I need help keeping track of my medications. What can I do?

Try one or more of these tips:

- Use a pill box with compartments for each day of the week.
- Download Express Script’s mobile app for your smartphone for free through iTunes or Google Play. You can use it to set alarms to remind you to take your medications—even order your mail-order refills on it.
- Sign up for an automatic refill reminder program through your pharmacy.
- Synchronize your ongoing medications so that you can pick them all up in one trip. Ask your pharmacist about setting this up.
- Get 90-day supplies of your regular medications. You will make fewer trips to the pharmacy and you’re less likely to run out of your medications as quickly. Ask your doctor if 90-day prescriptions make sense for you.

How Do You Know If Your Diabetes Is Under Control?

The only true way to know if your diabetes is under control is to measure your blood sugar levels. There are two tests that measure blood sugar:

**A1C test**—This test is done in your doctor’s office or at the lab every two to three months.

**Daily self-tests**—These are the “finger pricks” you do at home, and they give an instant picture of the amount of sugar in your blood. Regular self-testing is especially important if you are taking insulin.

The general goals for these tests are listed here but your doctor can help set goals that are right for you.

Copy and use the diary below to write down the reading from your glucose monitor each time you test. This can help you make smart decisions about meals, exercise and medications.

**BLOOD SUGAR DIARY**

My blood sugar should be _____ to _____ mg/dl before meals and _____ to _____ mg/dl after meals.

<table>
<thead>
<tr>
<th>WEK BEGGINING: _____ / _____</th>
<th>BREAKFAST</th>
<th>LUNCH</th>
<th>DINNER</th>
<th>AT BEDTIME</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>BEFORE</td>
<td>2 HOURS</td>
<td>BEFORE</td>
<td>2 HOURS</td>
</tr>
<tr>
<td><strong>MON</strong></td>
<td>My blood sugar reading</td>
<td>Medication I took (insulin/tablets)</td>
<td>Notes (What I ate, how I felt, etc.)</td>
<td></td>
</tr>
<tr>
<td><strong>TUE</strong></td>
<td>My blood sugar reading</td>
<td>Medication I took (insulin/tablets)</td>
<td>Notes (What I ate, how I felt, etc.)</td>
<td></td>
</tr>
<tr>
<td><strong>WED</strong></td>
<td>My blood sugar reading</td>
<td>Medication I took (insulin/tablets)</td>
<td>Notes (What I ate, how I felt, etc.)</td>
<td></td>
</tr>
<tr>
<td><strong>THU</strong></td>
<td>My blood sugar reading</td>
<td>Medication I took (insulin/tablets)</td>
<td>Notes (What I ate, how I felt, etc.)</td>
<td></td>
</tr>
<tr>
<td><strong>FRI</strong></td>
<td>My blood sugar reading</td>
<td>Medication I took (insulin/tablets)</td>
<td>Notes (What I ate, how I felt, etc.)</td>
<td></td>
</tr>
<tr>
<td><strong>SAT</strong></td>
<td>My blood sugar reading</td>
<td>Medication I took (insulin/tablets)</td>
<td>Notes (What I ate, how I felt, etc.)</td>
<td></td>
</tr>
<tr>
<td><strong>SUN</strong></td>
<td>My blood sugar reading</td>
<td>Medication I took (insulin/tablets)</td>
<td>Notes (What I ate, how I felt, etc.)</td>
<td></td>
</tr>
</tbody>
</table>

**GENRAL A1C GOALS**

<table>
<thead>
<tr>
<th>If you are healthy and active:</th>
<th>If you are older and have serious health problems:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 7%</td>
<td>Between 7% and 8%</td>
</tr>
</tbody>
</table>

**GENERAL SELF-MONITOR TARGETS**

<table>
<thead>
<tr>
<th>Before meals:</th>
<th>1 to 2 hours after meals:</th>
</tr>
</thead>
<tbody>
<tr>
<td>70 to 130 mg/dL</td>
<td>Less than 180 mg/dL</td>
</tr>
</tbody>
</table>
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4

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