



## Diabetes Versus My Sweet Tooth

*By Joseph Sims, SCAN Senior Advocate*

I went to the doctor on my 65<sup>th</sup> birthday because of some issues I'd been having. Not to get too personal, but I'd developed a skin rash and found myself needing to use the bathroom way too often. The nurse took a urinalysis, and the doctor and I were chatting in his office. A few minutes later, the nurse knocked on the door, opened it slightly and said, "Yes." I couldn't figure out what was going on, but the doctor kind of smiled at me and said, "Mr. Sims, it looks like you have diabetes." What a birthday present!

It turns out skin rashes and frequent urination are two classic symptoms of diabetes. Other common signs are increased thirst, hunger, fatigue and blurred vision. Sometimes, however, there are no symptoms at all. So I guess I was one of the lucky ones because I was diagnosed early, before any real damage was done.

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## The Sugar Challenge

I struggled with the diagnosis at the beginning, knowing it meant I would have to give up my favorite desserts. I didn't like the idea of taking medications, but I told myself, "at least you won't have to take insulin." However, pricking my fingers several times a day was not a lot of fun.

I admit that I cheated like crazy at the beginning. But a year or so later I had to change primary care doctors and my new doctor was one tough lady—and I mean that in a very good way. She helped me finally get the diabetes under control with Metformin and Glipizide and no more cheating. It was tough. Right across the road from her office was a Krispy Kreme donut shop, and I had to buckle down real hard not to go over there after my appointments. But I really started noticing the difference as I gradually got things under control. No more problems with frequent urination and I just felt a lot better all around.

## Regular Doctor Visits

When SCAN came to San Diego, in 2007, my wife and I went to one of their events and decided to switch plans and join SCAN. I was pleasantly surprised when my new doctor prescribed a blood glucose monitor, FreeStyle Lite, and I discovered there would be no co-pay for the meter or for the test strips and lancets! But the best surprise of all was that I could now test at sites other than my fingertips. I have discovered several good sites in my arm, though I do get bruising occasionally.

My doctor checks my A1C every three months and with her help and my perseverance I was recently told that I'm almost in the "pre-diabetic" range! My eye doctor also checks my eyes twice each year for any diabetic retinopathy, and my doctor checks my feet regularly for diabetic neuropathy.



## Eating Smart Sweets

I continue to keep my blood sugar under control with the help of my medications and by eating sugar-free and no-sugar-added treats. Probably my favorite dessert these days is a small slice of no-sugar-added cherry pie, with one scoop of Breyers Carb Smart vanilla ice cream. They taste just as good to me as the high-calorie, carb-loaded desserts I used to gorge on. My wife has convinced me to eat more vegetables, fruits and legumes. With her help, I have lost more than 15 pounds. I have also started exercising more.

Also, I recently started diabetes self-management education classes. The classes are helping me make healthy food choices and to stay motivated to maintain healthy habits. I don't want to lose any ground in my ongoing fight against this very tough, unforgiving disease!



*Joe Sims is a Senior Advocate in San Diego. Now 84 years of age, diabetes hasn't slowed him down. Besides walking for 30-40 minutes every day, Joe likes listening to music—classical, Brazilian, Irish and jazz. He is a Benedictine oblate at Prince of Peace Abbey, in Oceanside, CA and keeps abreast of politics in the U.S., Ireland and Brazil.*



## THESE SHOTS COULD SAVE YOUR LIFE

We recommend all our members have a flu shot each year and a pneumonia shot at least once at or after the age of 65. But for our members with diabetes, we want to stress how important these vaccines are for you.

According to the American Diabetes Association, *people with diabetes are three times more likely to die from the flu or pneumonia* ([www.diabetes.org](http://www.diabetes.org)). Remember your:

- **Flu shot:** Every year in the fall.
- **Pneumonia shot:** There are two types of shots. Talk to your doctor to see which one(s) are right for you.

While the information in this newsletter has been reviewed by the medical and pharmacy experts at SCAN Health Plan, it is general information. Your doctor will know what is best for you. If you have questions or concerns about your diabetes, please check with your doctor.



# How SCAN Helps You Manage Your Diabetes

As SCAN member and Senior Advocate Joe Sims shares in his cover story, getting your diabetes under control is not a one-person job. It takes a team effort. His doctors, the different health educators he’s met with over the years, and his family have all helped Joe stay motivated and stay on track. As a result, Joe is in great health and great shape despite having diabetes for almost 20 years.

So how can SCAN help?

**This newsletter.** In addition to our bimonthly newsletter, we send you an extra issue of SCAN Club every year all about diabetes.

**Straight TeleTalk.** This year for the first time we are holding a Straight TeleTalk about diabetes. See box below for more information.

**Health Check Record.** This booklet, sent to members every year, includes a special chart listing the extra preventive care and screenings people with diabetes should have regularly. (See page 5 for more about these tests.)

**Postcard reminders.** Some of these quick-read postcards are specific to the diabetes care you are due for (eye exam) and others are not (mammogram and colon cancer screening).

**Personalized phone calls.** Some of you may already have received calls about your medications this year. We’ll also be reaching out soon to our members with diabetes who may still be due for some of the preventive care listed in your Health Check Record.

**Benefits.** While copayments may vary, all SCAN plans cover:

- ✓ Supplies to monitor your blood glucose (blood sugar) level. This includes a blood glucose monitor, test strips and more.
- ✓ Regular visits to your doctor and even to a podiatrist if you need extra foot care.
- ✓ Eye doctor visits to check for diabetic retinopathy.
- ✓ Diabetes medications and insulin.



## A DIABETES STRAIGHT TELETALK

A Straight TeleTalk is a large-scale conference call hosted by SCAN. This year, we are hosting a TeleTalk all about diabetes. If you are getting this newsletter, you are on our TeleTalk invitation list, too. The Diabetes TeleTalk will take place in September, so you can expect an invitation soon!

### Here’s how TeleTalks works:

- |                                      |   |
|--------------------------------------|---|
| <b>1. Watch for your invitation.</b> | About a week before the TeleTalk you’ll receive either an automated phone call OR a postcard with the date and time of the event. <i>There’s no need to RSVP.</i>   |
| <b>2. Wait for the call.</b>         | A few minutes before the event starts you’ll receive an automated call on your home phone. Then you have the choice to either: <ul style="list-style-type: none"><li>- Stay on the line and listen to the call. It will last 30-40 minutes.</li><li>- Hang up if you don’t want to take part.</li></ul> |





# The Truth About a “Diabetic Diet”

Be honest, are you picturing bland, boring foods? Not long ago, that might have been the case. People with diabetes were put on restrictive diets.

Today, doctors know that the same healthy diet that’s good for everyone is also great for people with diabetes. Eating to manage your diabetes means eating fresh, delicious, nutritious foods that will boost your energy and improve your mood. It’s possible to enjoy mealtime without feeling deprived.

The key is eating a variety of foods, including vegetables, whole grains, fruits, non-fat dairy foods, healthy fats, and lean meats or meat substitutes. Your doctor or dietitian can help create a specific meal plan that is best for you.

### Try the Plate Method

The Plate Method doesn’t require any counting. Just fill half of your plate with non-starchy vegetables, a quarter of your plate with whole grains or a starchy vegetable (potatoes, corn, etc.) and the last quarter with lean proteins. Round out your meal with a serving of fruit or non-fat dairy. Nuts and healthy fats, such as avocados, can also be added to your meal.

Here are some helpful tips for meal planning:

- Prepare as much food as possible yourself. Made from scratch will always be the healthiest option.
- Space your meals evenly throughout the day and plan for healthy snacks.
- Keep serving sizes in check so you don’t consume too much sugar or too many carbs all at once.
- Plan ahead. By stocking your refrigerator with healthy foods, you’ll have everything you need to make a quick meal.

Finally, keep in mind that this is a lifelong process. You will do better on some days than others. If you get off track, get right back on as soon as you can. It will be easier to do as you notice how much better you feel when you are eating the way you should.

### DIABETES SUPERFOODS

The American Diabetes Association (ADA) has developed this list of 10 “superfoods” for people with diabetes.

How many of these superfoods are part of your diet?

- ☐ Beans
- ☐ Berries
- ☐ Citrus fruits
- ☐ Dark green leafy vegetables
- ☐ Fat-free milk and yogurt
- ☐ Nuts
- ☐ Salmon (and other fish high in omega-3 fatty acids)
- ☐ Sweet potatoes
- ☐ Tomatoes
- ☐ Whole grains



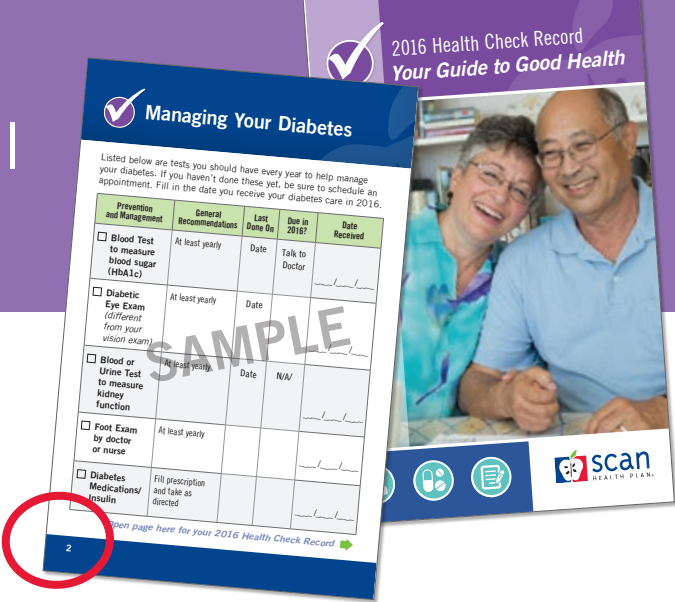
### Blood Sugar Friendly Breakfasts

Tired of the same ol’ bowl of high-fiber cereal? Try these tasty and budget-friendly breakfast options:

- **Avocado toast.** Instead of butter, spread mashed avocado on whole grain toast. Top with an egg or a scoop of cottage cheese and season to taste.
- **Fruit and nuts.** A small piece of fruit and a handful of raw almonds make a healthy meal you can grab and go.
- **Breakfast burrito.** Warm a small, whole-grain tortilla, scramble one egg and wrap it in the tortilla with a sprinkle of low-fat cheese and some fresh salsa.

# The Screenings and Tests all Diabetics Should Have

Your personalized Health Check Record was mailed in June. Did you take a look at page 2? This is the page with the diabetes-specific tests and screenings you need each year.



<b>Blood test to measure blood sugar (HbA1c)</b> <i>at least twice a year</i>	The hemoglobin A1c (HbA1c) test shows your average blood sugar over the last 3 months. This is not a fasting blood test and can be done any time of day. See below for more on blood sugar levels.
<b>Diabetic Eye Exam</b> <i>at least once a year</i>	This is different from your vision exam. Your eye doctor will look for signs of diabetic retinopathy. If you have already been diagnosed with diabetic retinopathy, your doctor may want to do these eye exams more often.
<b>Foot Exam</b> <i>at least once a year</i>	Have your doctor, physician's assistant, or nurse take a close look at your feet every year—every visit is a better idea, especially if you've noticed any problems. Check your feet regularly for red patches, sores, blisters, infections, toenail fungus or callus build-up.
<b>Kidney Function Test</b> <i>at least once a year</i>	These tests will allow your doctor to monitor how well your kidneys are working over time. It can be a blood test or urine test.

## Know Your Blood Sugar Targets

Find out from your doctor what your blood glucose (blood sugar) targets are for both “finger sticks” and your hemoglobin A1c (HbA1c) blood test. Below are the goals set by the American Diabetes Association ([www.diabetes.org](http://www.diabetes.org)) for *most* people with diabetes.

### Are your goals the same or different?

**For finger sticks:** These measure your daily blood glucose numbers and should be done as often as your doctor recommends.

- Goal before meals: 70-130 mg/dL (milligrams per deciliter)
- Goal 1 to 2 hours after the start of a meal: less than 180 mg/dL

**For HbA1c:** This blood test measures your average blood sugar level for the past 3 months. It lets your doctor see how well your blood sugar is controlled. Have this blood test at least twice a year.

- Goal if you are healthy and active: Less than 7 percent
- Goal if you are older and have other serious medical problems: between 7 and 8 percent







# Exercise Your Right to Health

**“Whether you need to start exercising or think you might need to increase what you do, talk to your doctor about how much and what types of physical activity are right for you.”**

It's no secret that medication and diet can help control high blood sugar, but did you know exercise works too? When you exercise:

- Blood sugar levels can drop and stay lowered for up to 24 hours.
- Muscles become more sensitive to insulin, which also helps to lower blood sugar levels.

Exercising just once will have immediate positive effects. Exercising regularly can have long-lasting effects, such as reducing the need for certain diabetes medications. The more strenuous the workout, the longer it will affect blood sugar. And even if you don't lose weight, you'll still reap the benefits of keeping your blood sugar under control.

## Beyond Glucose Control

Exercise doesn't just help manage blood sugar. It also reduces the risks of other health problems that are more common in those with diabetes.

Regular exercise will keep your heart healthy and help manage cholesterol levels. It also helps lower blood pressure.

Talk to your doctor about the best types of exercises for you, the best time to exercise and the possible effect exercise will have on your medications.



## Check Yourself

Different exercises can affect the body in different ways. For some, exercise can even raise blood sugar levels. Testing your blood sugar may be as important as the exercise itself. When starting out, make sure to check your blood sugar before and after doing various exercises to see how your body responds.

Make sure to carry carbs with you while exercising. If your blood sugar drops too low, have a 15 gram carb snack (such as a ½ cup of fruit juice) ready to eat or drink to raise it back up.

It's also important to monitor your feet. Wear the right athletic shoes for the activity you're doing, and check and clean your feet regularly.

## Activity Goals

Generally, the goal is to do 30 minutes of aerobic activity at least five days a week. Aerobic exercise includes walking, jogging, tennis, swimming, and biking. If those activities are too much for you, try chair exercises, yoga, stationary bikes or water exercises.

Be sure to do strength training, too. Lifting weights isn't the only way to strength train. Exercises where you are pushing or pulling your own bodyweight, like doing push-ups and squats, or using resistance bands, also count. Strength train for 20 to 30 minutes two or three times a week to get the full benefits.

If you aren't in the habit of regular exercise, it may sound like a lot. But it's a relatively small investment for a big pay-off in your health.



## Want to Walk More? START COUNTING!

Research\* has shown that people who used pedometers increased their physical activity by 27%. They walked about 2,500 steps more per day, shed more pounds and had a larger drop in blood pressure than those who didn't use a pedometer.

*\*Journal of the American Medical Association, November 21, 2007*



# Medications Matter

## Questions members ask about their diabetes medications

Even if you don't need medication to control your diabetes today, you may need it in the future. That's because diabetes is a progressive disease. As your diabetes changes, your treatment and medications may need to change too. Your doctor will prescribe a treatment plan that is just right for you. It may include pills, insulin, or a combination of both.

### **Q. My diabetes medications are so expensive. What can I do?**

**A.** Discuss lower cost alternatives with your doctor. For example, some insulins on the SCAN Formulary are on tier 6 (Select Care Drugs), which has lower copays than the insulin options on tier 3. Switching to 90-day supplies on many generic oral medications may also help with cost.

### **Q. How can I keep track of all these medications?**

**A.** If a daily pill box isn't working for you, try making and using a checklist. Find out from your doctor if there's a way to simplify your pill-taking.

### **Q. If I'm feeling better does that mean I can stop taking my medications?**

**A.** With your diabetes under control, you may think you don't need your medication anymore. But you do! It's really important that you keep taking your prescribed medication.

### **Q. Do I have to stick myself with a needle?**

**A.** If you take insulin, then yes. Insulin must be directly injected into the body, either by syringe, insulin pen or pump. Keep in mind, though, that insulin needles are much thinner than other commonly used needles.

### **Q. Do I have to check my blood glucose levels?**

**A.** Monitoring your blood glucose is the best way to track if your diabetes is under control. If your doctor tells you that you should be monitoring your blood glucose, it is important to do so, especially if you are taking insulin. Keep a blood sugar diary and bring it with you to your appointments.

If there is something keeping you from following your prescribed treatment plan, talk to your doctor right away.

## **ABOUT DIABETES MEDICATIONS**

There are different types of diabetes pills. They work in different ways to lower blood sugar, for example, they can either:

- Help the body release more insulin.
- Reduce the amount of sugar the liver releases.
- Improve how your body responds to the insulin that it already makes.
- Slow how quickly your body turns the food you eat into sugar.

You may need to try different medications to find what works best for you. Some people need more than one type of medication. These pills can work together to bring blood sugar under control.

Need Assistance? **SCAN** is here to help.



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**6** Exercise Your Right to Health



**7** Frequently Asked Medication Questions