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A NEWSLETTER FOR SCAN HEALTH PLAN® MEMBERS

DIABETES EDITION 2020



'Do the Homework and Show Up for the Tests'

A Good Self-Manager Shares Her Tips for Success

Even though SCAN member June L.'s mother and grandmother each had lived with diabetes, it was a shock to June when she was diagnosed with type 2 diabetes. Despite her family's history, June felt unprepared when she set out on her own diabetes journey. That was 19 years ago, and June has spent the time since learning, experimenting and adapting to figure out how to take control of her diabetes and her life. We talked to June recently about what she's discovered about managing diabetes.

What happened when you first found out you had diabetes?

June: My doctor sent me to classes to learn how to use the meter and how to take care of myself in general. But it took me quite a while to learn what I needed to do to get my blood sugar down. I tried herbal medicine for a while, but when that didn't work, I started taking the Glucophage my doctor prescribed instead.

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Have there been challenges for you?

June: I found out I had diabetes when I was recovering from a bad fall. I had terrible headaches from the accident, but I knew I had to exercise and tried very hard to walk every morning. In the beginning, I just put one foot in front of the other and was able to make it once around the park. Gradually, I worked up to six rounds—over two miles. I've been doing that every day for 19 years.

I also had to change my eating habits. After eating white rice all my life, I learned that it's not good for me because it's a simple carbohydrate. Now I eat brown rice because it's a complex carbohydrate. It's hard to change something you've been used to eating for more than 50 years.

Also, I learned to eat less of dishes I like but that aren't good for my diabetes. If I have a bowl of pho, for example, I eat only half the bowl and take the other half home. I had to give up some things altogether, like orange juice. I can't even treat myself to it once in a while because I know I won't be able to stop once I start!

What do you do when your blood sugar isn't where it should be?

June: When my blood sugar is high, it's usually because I've eaten the wrong foods. So I try to eat right, and I self-test in the morning, at night and sometimes at noon, too. And I see my doctor every three months for an A1c test. My blood sugar also goes up if I'm under pressure. If that's the case, I exercise and do something to relieve the stress, like sit in the jacuzzi at the health spa. The walk around the park is helpful because I love to be outdoors. And before the quarantine, I was going to yoga, taking spinning classes and swimming, too.



I've come a long way, but I still have to work at it and keep trying to get better every day."

—June L.



What helps you stay motivated?

June: I was caring for my father when I found out I had diabetes. I realized then that if I didn't take care of myself, how was I going to be able to take care of him? He's gone now, but I still have family who depend on me.

What is key to your success?

June: Discipline. You need to take the medicine on time, eat at regular times, not skip meals and not splurge...too much. I've stopped going to buffet restaurants because I think, "Oh, I can eat it all and then go home and take the medicine," but that's not the answer.

Support from others has been important, too. My husband helps me keep track of what I eat and how much I exercise. And my doctor is very helpful. But your doctor can only do part of the job. It's like being a student: You're the one who has to do the homework and show up for the tests if you want to succeed in the class.

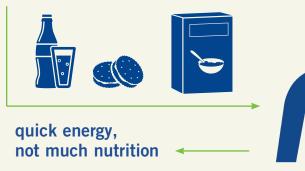
June's current goals are to exercise more and eat better so that she can bring down her A1c and cut back on the amount of medication she needs.

Simple Vs. Complex Carbs

Your body turns carbohydrates into glucose used for energy for your cells, tissues and organs—but in different ways.

SIMPLE CARBOHYDRATES, or simple sugars, provide quick energy but little nutrition. They can be found naturally in fruits and milk, but most often are in processed foods including soda, cookies and many breakfast cereals.

COMPLEX CARBOHYDRATES are high in fiber, so they take longer to break down and provide more lasting energy. Find them in peas, beans, whole grains, oats and fiber-rich vegetables, such as broccoli and carrots.









lasting energy, more nutrition

MESSAGE FROM SCAN'S MEDICAL DIRECTOR

Keeping on Top of Your Diabetes— Even When You're Under the Weather



For those of us with diabetes, getting sick can make it harder to control blood sugar and increases our risk for developing other serious health issues. You might find that when you're sick your blood sugar doesn't act as it usually does. Most often, it will be higher than usual. But it can be lower if you don't have an appetite or can't eat. So, it's important to be prepared and know what to do if you get sick. Here are some guidelines that can help:

- Try to eat as you would normally, but if you can't stomach eating a whole meal, at least have 50 grams of carbohydrates every four hours. That's about $1\frac{1}{2}$ cups of unsweetened applesauce.
- **Drink lots of fluid** to avoid getting dehydrated. Unsweetened sports drinks, broth and tea are good, or just plain water is usually fine. If you're unable to eat, you may need to drink something with sugar in it. Sip small portions so your blood sugar doesn't get too high too quickly.
- Take your diabetes medications and insulin as usual, but if you find your sugars are running over 180 mg/dL for more than a few days, contact your doctor. He or she may adjust your medicines until your blood sugar is back to normal.
- Test your blood sugar several times a day—levels can fluctuate quite a bit when you're sick. And, take your temperature every morning to check for fever.

Once you start feeling better, continue keeping a close eye on your blood sugar. If your doctor increased medicines to deal with higher levels while you were sick, your blood sugar could go too low during recovery. Ask loved ones to be on the lookout for warning signs you might not recognize—such as a lack of focus, sweating or slurred speech—so you can take action before it gets more serious. (See page 4 for more on low blood sugar.)

It's also important to listen to your body. I'm an avid exerciser, but when I'm sick and would rather lie down than work out, I do. My sugars might then go up, but I can treat that. Just eat as healthy as you can, exercise when you feel up to it and focus on regaining your health so you can go back to your regular routine.



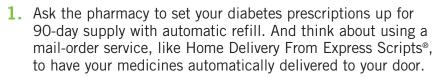
Note: If symptoms are not improving or you're having trouble controlling your blood sugar, call or email your doctor or diabetes care team right away.

Prepping for an Emergency

We've learned a lot recently about what some people stock up on when facing an emergency. And while toilet paper is important, the items below are considered must-haves for those with diabetes.

- **Enough diabetes supplies to last two weeks:** Diabetes medications, insulin and supplies, lancets, glucose tablets, extra batteries for your meter or pump—whatever you use to control your diabetes.
- Sugar-free over-the-counter medicines for treating diarrhea, pain, indigestion, fever and colds if you get sick.
- Non-perishable foods with and without sugar that can help manage your blood sugar.

For Dr. Offenberger, emergency preparedness is more about inventory management than creating a specific diabetes emergency kit. Here are some of his tips:





- 2. Check your stock regularly. "Ordering diabetes supplies isn't as easy as getting a prescription filled at the pharmacy, so it's important not to wait until the last minute," Dr. Offenberger says. "I set a reminder on my phone for every 90 days to take stock of my supplies. That way I can order whatever's running low, check on orders already in progress and nudge things along if necessary."
- 3. Cycle your supplies, putting medication to the back of the stock as you receive it and moving what was already there to the front.



A1c and Your Diabetes

Are You Seeing the Big Picture?

Uncontrolled diabetes often doesn't have symptoms, so the only sure way to know if your diabetes is in check is to measure the amount of sugar in your blood. But if you're relying only on daily finger pricks or glucose pump readings, you're not getting all the information you and your doctor need.

Here's why: Daily self-tests give you a snapshot of your blood sugar level at a given moment. But it's also important to see how your blood sugar acts over time. For this, you need a lab test known as Hemoglobin A1c, HbA1c or just A1c.

General A1c Goals for People With Diabetes:

- If you're healthy and active: Less than 7% (154 mg/dL)
- If you're older and have serious health problems: 7% to 8% (183 mg/dL)

While we're being asked to stay home, check with your doctor to see if you should get your A1c test on your regular schedule.

Should You Get Tested?

Most people with diabetes should have their A1c tested on a regular basis—every three to four months is typical. Keep a journal of your A1c results so you can get the big picture of your blood sugar over time. You don't need to fast to do the test.

The Lowdown on Low Blood Sugar

Imagine you're enjoying time in the garden, busy with moving pots here and pulling weeds there. Out of nowhere, you start to feel panicky, nervous and agitated. *What's going on?*

These are signs that your blood sugar may have dropped too low, a condition known as hypoglycemia. Hypoglycemia can be serious, but it can be easy to detect and treat.

What to Look for

If you experience any of these feelings, it could be because your blood sugar is too low.

- Panicky shaky, sweating, nervous, headache, fast heartbeat
- Weak dizzy, hungry, tingling in your mouth
- Dazed and confused sleepy, moody, can't think clearly, blurred vision

What to Do When It Happens

Check your blood sugar, if possible. If it's below 70 mg/dL, use The 15-15 Rule:

- Have 15 grams of carbohydrates, and check your blood sugar after 15 minutes.
- Repeat every 15 minutes until your blood sugar is at least 70 mg/dL.

Simple sugars get into the bloodstream fastest: Try four ounces of juice or regular soda, four Lifesavers or a tablespoon of sugar or honey. Or take a glucose supplement, which comes in liquid, gel or tablet form.



But if the symptoms continue, get care right away.

How to Prevent It

Managing diabetes is a balancing act. These three M's can help ensure you strike the right balance.

Meals

- Don't skip meals or put off eating. If you do miss a meal, have a snack close to the time you would usually eat.
- If you're starting a new diet, test your blood more regularly for a while to know how it affects your blood sugar levels.

Movement

- Test your blood sugar before exercising or other physical activity.
 If it's lower than 120 to 150 mg/dL, eat a snack before you get moving.
- If you're doing more exercise than usual, check your blood sugar after you work out, too, until you have a better idea of how the new activity affects your blood sugar.

Medications

If you have to fast, don't take your diabetes medicines until you're ready to eat. If you take insulin, ask your doctor how much insulin you should take when you're fasting. Never drive a car if you've taken mealtime insulin and not eaten!

Beyond Insulin: Diabetes Meds and What They Do

Sorry to say, there is no single magic pill that can treat diabetes. However, there are many different types of drugs that can work with the other parts of your diabetes management plan to keep your blood sugar at healthy levels. Sometimes, one drug is enough. But if one medication alone doesn't do the trick, your doctor may prescribe a combination of diabetes pills or injectables, or these drugs plus insulin.

Now that newer diabetes medications are injected under the skin, it can be confusing to know whether a drug is insulin or not. We've listed some of them below, along with each one's tier in the 2020 SCAN Formulary.

Drug Category	Brand Name	Tier	Type/ What They Do
GLP-1 Agonists	Bydureon Byetta Victoza Ozempic Trulicity	3 3 3 4	Non-insulin injection/ Stimulate the pancreas to produce more insulin after meals and reduce appetite
SGLT2 Inhibitors	Invokana Farxiga	3 3	Tablet/ Prevent glucose from being absorbed in the kidneys—so, there's less glucose in the blood
SGLT2 Inhibitors and Metformin	Invokamet (regular and XR) Xigduo XR	3 3	
DPP-4 Inhibitors	Januvia Onglyza	3 3	Tablet/ Increase the effect of hormones that help reduce blood glucose levels, without causing hypoglycemia or negatively affecting cholesterol levels
DPP-4 Inhibitors and Metformin	Janumet (regular and XR) Kombiglyze XR	3	
Amylin Analogues	SymlinPen	5	Non-insulin injection/ Work with insulin to control blood sugar

Depending on your health issues, your doctor may also prescribe a medication used to treat conditions other than diabetes. For example, colesevelam is a cholesterol-lowering medication that also reduces blood sugar levels and can be safer for people who may not be able to use other diabetes medications because of liver problems.

Ask Member Services

Q: My doctor says I should get a special "diabetic" eye exam. Is it part of my SCAN benefits?

A: Yes. It's called a diabetic retinopathy test. If you haven't had your vision exam (through EyeMed) this year, your vision provider can do this test. Be sure to mention that you have diabetes. Already had this year's eye exam? Your doctor can refer you for a diabetic retinopathy test.

But this isn't the only benefit available to SCAN members who have diabetes. Did you know you're also covered for:

- Visits to your doctor for regular exams, including foot exams
- Lab work, including regular A1c blood tests
- A blood glucose monitor, test strips and other supplies needed to monitor your blood sugar, when your doctor prescribes them
- Training to learn ways to manage diabetes
- Therapeutic shoes and inserts if you have nerve damage from diabetes
- Meetings with a nutritionist to learn how and what to eat
- Membership in local gyms and health clubs through SilverSneakers®

Benefits and copays can vary depending on your plan, so check your Evidence of Coverage or call Member Services to find out which benefits are available to you.



Look Into SCAN Balance (HMO SNP)

In addition to the benefits listed at left, SCAN Balance offers additional benefits specifically to members with diabetes. SCAN's Balance plan is currently available within areas of Los Angeles, Orange, Napa, Sonoma and Stanislaus counties. To learn more, call Member Services.



My Doctor Says It's Prediabetes What Now?

- 1. Consider yourself lucky. Prediabetes, like diabetes, often has no clear symptoms. By finding out now, you've got the advantage: With early treatment, people with prediabetes can delay developing diabetes, or prevent it completely.
- 2. Know what it means. When you've got prediabetes, your blood sugar level is higher than normal, but not high enough to be called diabetes. Basically, your body isn't producing enough of the insulin that helps muscle and other tissue absorb the body's glucose. And when that happens, there ends up being a backlog of unused sugar in your bloodstream.
- 3. Start making changes now. People are more at risk for developing diabetes the older they get—all the more reason to not wait another day to make the small changes that can greatly reduce the chance you'll end up with diabetes.
 - Aim for at least 30 minutes of moderate exercise a day, five days a week. Eat regular meals that are healthy, nutritious and include a balance of whole grains, proteins, fruits, vegetables and healthy fats.
 - If you're overweight, losing five to seven percent of your weight can make a big difference in your risk for developing diabetes. Try cutting back on portion sizes and avoiding foods high in fat or low in nutritional value—soda, processed foods and fruit juices, for example.
 - Take steps to improve your overall health, such as stop smoking, reduce stress and get enough sleep.

Depending on your risk factors, your doctor may prescribe an oral diabetes medication, like metformin, to take along with making lifestyle improvements.

4. Get educated. Ask your doctor about referring you to a diabetes prevention program to learn how to eat healthier, be more active and manage stress. You may be eligible for a Medicare Diabetes Prevention Program (MDPP) that helps seniors with prediabetes overcome challenges so they can maintain a healthy weight and a healthy lifestyle.

For Breaking News, Look to Your Feet!

"Reading" your feet can tell you a lot about your diabetes, including if your blood sugar is under control and whether you're running into any potential problems.

If your blood sugar isn't controlled, it could cause nerve damage, known as diabetic neuropathy. Some people notice tingling, pain or extreme temperature changes in their feet. Others lose the feeling entirely, so they wouldn't feel it even if their foot was cut or injured.

That's why it's important to take a good look at your feet—from top to sole, toe to toe and in between—every day. Be on the lookout for dry skin, cracks, blisters, red spots or sores that won't heal. Have your doctor check your feet at every visit.



When It's Time to See a Podiatrist

Don't try to remove a corn or callous or treat an ingrown toenail on your own. Medicare allows seniors with diabetes to go to a podiatrist for services like these, including toenail trimming.

- If your plan doesn't include a routine podiatry benefit, you'll need to get a referral from your doctor to see a podiatrist in your medical group. Once the referral is approved, you can make an appointment and pay your plan copayment for seeing a podiatrist.
- If your plan does include a podiatry benefit, or if you're a member of SCAN's Balance plan, you can see a podiatrist without a referral for the routine services. **Call Podiatry Plan, Inc. at 1-800-367-7762** to find a podiatrist in your area.

Keep COVID-19 Scams at a Distance, Too

Con artists often target seniors with diabetes. Some promise deals on diabetes supplies and equipment that sound too good to be true (because they are). Others peddle miracle creams for pain or cures for other symptoms that many seniors with diabetes experience. And lately, scammers have added a new twist to their schemes. They're using the COVID-19 crisis to get to seniors' wallets and healthcare benefits.



How They Work

Katherine Yue, manager of SCAN's Special Investigations Unit, gives an example of how the conversation might go if a scammer calls or shows up at your door:

"Hi. COVID-19 is affecting so many older adults so we're testing Medicare beneficiaries first before everyone else. Would you like to have your test done at home?"

"Yes? That's great. So, we'll just need to get some information first. Do you have any underlying conditions, like diabetes or chronic pain?"

"OK, now all I need now is your Medicare ID number so we can order your at-home test."

Once they have this personal information, scammers can use your benefits to make fraudulent claims for all kinds of products and services you never get. Or if you do receive them, they often don't work or, even worse, could hurt you.

How to Protect Yourself

- Never give out personal information unless you're sure it's someone you can trust.
- Take a good look at Your Monthly Summary that comes from SCAN. If there's a product or service you didn't receive, call SCAN Member Services.



If you or someone you know may have been the target or victim

of a scam, the Department of Justice's Criminal Division wants to hear about it. You can report it by phone or online complaint form here:

National Center for Disaster Fraud (NCDF) Hotline: 866-720-5721 (Open 24/7) Online: justice.gov/disaster-fraud

Stay or Go? Here's How to Know

The recent quarantines may have you wondering if you should put off preventive screenings and other tests you may be due for now. While some routine appointments can safely be delayed for the time being, check with your doctor about when—and how—you should get the tests and other care important to keeping your diabetes in check. Your doctor may decide, for example, that it's important for you to go to the lab to have your A1c checked and may schedule you for a follow-up "virtual care" visit by telephone or computer to review your results.

Want a fast and easy way to find out if you're due for any care?

Look to the Health Check Record in your SCAN online member account. It includes a personalized chart with the six essential tests, screenings and other care recommended for people with diabetes.

If you don't have an online account yet, sign up for one at scanhealthplan.com/register.

PREVENTION AND MANAGEMENT	GENERAL RECOMMENDATIONS	
☐ Blood test to measure blood sugar (HbA1c)	At least yearly – every three months is recommended	
Diabetic eye exam (different from your vision exam)	At least yearly	
☐ Blood or urine test to measure kidney function	At least yearly	
☐ Foot exam by doctor or nurse	At least yearly	
☐ Diabetes medications/ insulin	Fill prescription and take as directed	
☐ Medications to lower cholesterol and/ or prevent heart disease (statins)	Fill prescription and take as directed	

Need Assistance? SCAN Health Plan is here to help.

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Sales Information 1-800-547-1317; TTY: 711

8 a.m. – 8 p.m. Pacific Time (PT) Seven days a week from Oct. 1 – Mar. 31 Monday – Friday from Apr. 1 – Sept. 30



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Health and wellness or prevention information

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Working at It Every Day



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