

Have You Had Your Well-Visit Yet This Year?

As an MVP member, one of your benefits is an annual FREE* preventive care visit (also called a well-visit, or a physical) with your doctor. MVP members can go once per calendar year to the doctor for a preventive check-up and not have to pay a copay or deductible!

Visiting your doctor regularly can help identify potential health problems, and you can get all of the preventive screenings and immunizations you need to stay healthy. While you may visit your doctor when you are sick, it is important to have a full physical once a year to cover the following:

- Health history
- Lab tests (as needed)
- Complete physical exam
- Developmental and behavioral health screening
- Vision/hearing screening
- Advice to help you or your child stay healthy

*Please refer to your health plan contract for coverage information.



WE VALUE YOUR OPINION

Please take a few minutes to fill out a brief, anonymous survey at www.mvplistsens.com. We will use this information to create a better experience for all of our members. All responses are 100 percent confidential.

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LivingWell

SUMMER 2016

MVP Health Care® wants to keep our members healthy. One of the ways we can do so, is to keep you well informed on preventive care, including screenings and tests, health education, and proper drug or medication use. Take the time to work on your personal health now, to prevent health problems later.

Included with this newsletter are preventive care guidelines with key recommendations for men, women, and children. They are organized by age for easy reference and may be helpful to share with your doctor when discussing which screenings and tests are right for you.

For more healthy resources and programs, visit www.mvphealthcare.com and select *Members*, then *Live Healthy*.

Information in this newsletter does not constitute medical advice. If you have questions about your health, please talk to your doctor.



MVPCOM0029 (06/2016)

IMPORTANT HEALTH INFORMATION
FOR MVP MEMBERS



Preventive Care Edition

Get the Most Benefit From the Medications You Take

If your doctor or your child's doctor has prescribed a medication to treat a chronic condition, here are a few tips to help you achieve the most benefit from the medication:

- **Schedule a follow-up appointment** with the doctor who wrote your prescription. With many newly prescribed medications, it is recommended that you see your doctor within the first month. Some adjustment in dose or even a different medication may be needed.
- **Change for the better may take up to several weeks** after starting a new medication. Stick with it and don't make any changes without first talking to your doctor. If you and your doctor decide that you no longer need the medication, it may need to be tapered off slowly. Any resulting problems should be reported to your doctor at once.
- **Side-effects may occur** at the beginning of treatment (or when suddenly stopping medication) and may go away with time. Contact your doctor or pharmacist if you have any side effects that are bothersome.
- **Set specific routines to take your medication.** For instance, it might help you remember when to take your medication if you associate it with a normal, daily activity such as eating a meal, brushing your teeth, or going to sleep.

Below are some tips and additional information specific to certain classes of medications.

Antibiotics

Antibiotics may be prescribed for bacterial infections such as strep throat. Often, you begin feeling better after just a few days on the medication and think that your illness is cured. It is important to complete the course of medication—if the full dose of antibiotics is not taken your symptoms may recur, requiring additional treatment. This may also contribute to the development of resistance in the bacteria. This is one

Continued on page 2.



Do You Have Depression?



Many people experience normal feelings of sadness or grief from time to time, but feelings that persist for two weeks or longer may indicate depression that needs treatment. If, over the last two weeks, you have experienced at least four of the symptoms below and one symptom is either loss of interest or feeling down/depressed then you may be depressed:

- Little interest or pleasure in doing things
- Feeling down, depressed, or hopeless
- Trouble falling asleep, or sleeping too much
- Feeling tired or having little energy
- Poor appetite or overeating
- Feeling bad about yourself—or that you are a failure, or have let yourself or your family down
- Trouble concentrating on things, such as reading the newspaper or watching television
- Moving or speaking so slowly that other people could have noticed, or the opposite—being so fidgety or restless that you have been moving around a lot more than usual
- Thoughts that you would be better off dead, or of hurting yourself in some way

If you have thoughts of suicide or harm, seek immediate help. If you screen positive for depression, make an appointment with your doctor and bring your list of symptoms along. Even if you have just a few of the above symptoms, you may still benefit from treatment—it is important to talk to your doctor about these feelings. Depression is easily treated and there are several options including anti-depressant medication and behavioral therapy. The sooner you seek treatment the better your chance for a fast recovery and return to normal.

Continued from page 1.

of the reasons we have increasing problems with antibiotic resistance and “super-bugs” like MRSA (Methicillin-Resistant Staphylococcus Aureus).

Attention Deficit Hyperactivity Disorder

If your child is on medication to treat Attention Deficit Hyperactivity Disorder (ADHD), it is important to follow-up with his/her physician. For the most part:

- Once a child has started on a medication for ADHD, it is important that they be seen by his/her physician within 30 days. This is so that any possible side-effects can be discussed and medications adjusted accordingly.
- If your child remains on this medication he/she should be seen two more times over the next nine months to discuss his/her treatment for ADHD and whether any adjustments need to be made.

Antidepressants

Antidepressants help to balance the chemicals in your brain that regulate your mood. In addition to improving mood, when prescribed to treat depression, antidepressants may help increase your level of energy, increase interest in activities, reduce thoughts of unworthiness, and improve sleep and appetite. When these brain chemicals are in proper balance, your depression may get better. However, it is important to remember when you begin feeling better NOT to stop taking the medication—typically antidepressants should be taken for at least six months after you begin to feel better. This can help you from slipping back into a depression. Your doctor may even want you to take the medication for longer. Initially, it may take up to 5–6 weeks before the medication takes its full effect so remember to give it time. Also, side effects may disappear as your body adjusts within the first six weeks of treatment. Your doctor will instruct you when to contact them about side effects.

PREVENTIVE CARE GUIDELINES FOR MEN

Recommendations apply to most men of normal risk. Additional tests and immunizations may be recommended based on specific risk factors. Visits recommended every 1-3 years and should include:



	MEN AGES 19–39	MEN AGES 40–49	MEN AGES 50–64	MEN AGES 65 & OVER
HEALTH HISTORY & LIFESTYLE ASSESSMENT	Complete or update assessment, including family history; activity; tobacco, alcohol, and drug use; and sexual practices			
PHYSICAL EXAM	<ul style="list-style-type: none"> • Height and weight (Body Mass Index) • Blood pressure 	<ul style="list-style-type: none"> • Height and weight (Body Mass Index) • Blood pressure • Vision screening 	<ul style="list-style-type: none"> • Height and weight (Body Mass Index) • Blood pressure • Vision screening 	<ul style="list-style-type: none"> • Height and weight (Body Mass Index) • Blood pressure • Hearing and vision screening¹
TESTS	<ul style="list-style-type: none"> • All men aged 35 and older should be screened for lipid disorders; younger men aged 20 and older should be screened if they are at increased risk for heart disease • Screen for Type 2 diabetes if blood pressure >135/80 	<ul style="list-style-type: none"> • Screen for lipid disorders every five years • Screen for Type 2 diabetes if blood pressure >135/80 • Screen for abnormal blood glucose and Type 2 diabetes, ages 40–70 who are overweight or obese 	<ul style="list-style-type: none"> • Screen for lipid disorders every five years • Screening for colorectal cancer (CRC) using fecal occult blood testing, sigmoidoscopy, or colonoscopy, beginning at age 50 and continuing until age 75; if you are over age 50, talk with your doctor regarding the frequency of screening needed • Screen for Type 2 diabetes if blood pressure >135/80 • Screen for abnormal blood glucose and Type 2 diabetes, ages 40–70 who are overweight or obese 	<ul style="list-style-type: none"> • Screen for lipid disorders every five years • Screening for colorectal cancer (CRC) using fecal occult blood testing, sigmoidoscopy, or colonoscopy, beginning at age 50 and continuing until age 75; if you are over age 50, talk with your doctor regarding the frequency of screening needed • Screen for Type 2 diabetes if blood pressure >135/80 • Screen for abnormal blood glucose and Type 2 diabetes, ages 40–70 who are overweight or obese
IMMUNIZATIONS	<ul style="list-style-type: none"> • One-time dose Tetanus/Diphtheria/Pertussis; Tetanus/Diphtheria booster every 10 years • Flu vaccine annually • HPV Vaccination for men ages 19–21 if not previously vaccinated • Varicella vaccine for those without evidence of prior infection • MMR vaccine for adults born after 1957 without evidence of prior MMR vaccine 	<ul style="list-style-type: none"> • One-time dose Tetanus/Diphtheria/Pertussis; Tetanus/Diphtheria booster every 10 years • Flu vaccine annually • Varicella vaccine for those without evidence of prior infection • MMR vaccine for adults born after 1957 without evidence of prior MMR vaccine 	<ul style="list-style-type: none"> • One-time dose Tetanus/Diphtheria/Pertussis; Tetanus/Diphtheria booster every 10 years • Flu vaccine annually • Shingles (Herpes Zoster) vaccine for ages 60 and up unless contraindicated • Varicella vaccine for those without evidence of prior infection • MMR vaccine for adults born after 1957 without evidence of prior MMR vaccine 	<ul style="list-style-type: none"> • One-time dose Tetanus/Diphtheria/Pertussis; Tetanus/Diphtheria booster every 10 years • Flu vaccine annually • Pneumococcal vaccine once in a lifetime from age 65; booster as recommended • Shingles (Herpes Zoster) vaccine for ages 60 and up unless contraindicated • Varicella vaccine for those without evidence of prior infection
COUNSELING/SCREENING	<ul style="list-style-type: none"> • Diet and exercise • Smoking cessation • Alcohol/substance abuse prevention • Sexually transmitted diseases/HIV/sexual behavior • Family planning • Dental health • Sun exposure • Injury prevention (including seat belt, helmet use) • Life stage issues-family, child • Depression • Health Care Proxy/Advance Directives • Screen for HIV infection ages 15–65 	<ul style="list-style-type: none"> • Diet and exercise • Smoking cessation • Alcohol/substance abuse prevention • Sexually transmitted diseases/HIV/sexual behavior • Family planning • Dental health • Sun exposure • Injury prevention (including seat belt, helmet use) • Life stage issues-family, child • Depression • Health Care Proxy/Advance Directives • Screen for HIV infection ages 15–65 	<ul style="list-style-type: none"> • Diet and exercise • Smoking cessation • Alcohol/substance abuse prevention • Sexually transmitted diseases/HIV/sexual behavior • Dental health • Sun exposure • Injury prevention (including seat belt, helmet use) • Life stage issues-bereavement • Depression • Health Care Proxy/Advance Directives • Screen for HIV infection age 15–65 • One time screening for HCV infection to adults born 1945–1965 	<ul style="list-style-type: none"> • Diet and exercise • Smoking cessation • Alcohol/substance abuse prevention • Sexually transmitted diseases/HIV/sexual behavior • Dental health • Sun exposure • Injury prevention (including seat belt, helmet use and falls) • Life stage issues-bereavement • Depression • Health Care Proxy/Advance Directives • Bladder control problems • Screen for HIV infection age 15–65 • One time screening for HCV infection to adults born 1945–1965
HIGH RISK INDIVIDUALS	<ul style="list-style-type: none"> • Aspirin therapy recommended for ages 45–79 when benefit outweighs risks • Screen for Abdominal Aortic Aneurysm (AAA) x 1 in men ages 65–75 who are smokers or who ever smoked • For additional vaccine recommendations, refer to the CDC Adult Immunization Schedule at www.cdc.gov/vaccines/schedules/hcp/adult.html 			

¹If you have a family history of glaucoma talk with your doctor about whether screening may be right for you. Guidelines adapted from the U.S. Preventive Services Task Force. Talk to your doctor about which preventive services are right for you. Your Plan benefits may allow for services more frequently than what is listed here. MVPClinical0007 (Revised 05/2016)

PREVENTIVE CARE GUIDELINES FOR WOMEN

Recommendations apply to most women of normal risk. Additional tests and immunizations may be recommended based on specific risk factors. Visits recommended every 1-3 years and should include:



	WOMEN AGES 19-39	WOMEN AGES 40-49	WOMEN AGES 50-64	WOMEN AGES 65 & OVER
HEALTH HISTORY & LIFESTYLE ASSESSMENT	Complete or update assessment, including family history; activity; tobacco, alcohol, and drug use; and sexual practices			
PHYSICAL EXAM	<ul style="list-style-type: none"> Height and weight (Body Mass Index) Blood pressure 	<ul style="list-style-type: none"> Height and weight (Body Mass Index) Blood pressure Vision screening 	<ul style="list-style-type: none"> Height and weight (Body Mass Index) Blood pressure Vision screening 	<ul style="list-style-type: none"> Height and weight (Body Mass Index) Blood pressure Hearing and vision screening¹
TESTS	<ul style="list-style-type: none"> Screen women aged 20 and over for lipid disorders if they are at increased risk for heart disease Pap test beginning at age 21 and at least every three years (women ages 30-65 may instead choose to have a Pap test with HPV test every five years) Annual Chlamydia screening for sexually active women age 24 and younger and older women at risk Rubella antibody screening once Screen for Type 2 diabetes if blood pressure >135/80 	<ul style="list-style-type: none"> Screen women aged 45 and older for lipid disorders every five years Screen 40 to 44-year-old women for lipid disorders if they are at increased risk for heart disease Pap test at least every three years (women ages 30-65 may instead choose to have a Pap test with HPV test every 5 years) Annual Chlamydia screening for at-risk sexually active women Rubella antibody screening once Mammogram frequency to be discussed with your doctor Screen for Type 2 diabetes if blood pressure >135/80 Screen for abnormal blood glucose and Type 2 diabetes, age 40-70 years who are overweight or obese 	<ul style="list-style-type: none"> Screen for lipid disorders every five years Screening for colorectal cancer (CRC) using fecal occult blood testing, sigmoidoscopy, or colonoscopy, beginning at age 50 years and continuing until age 75 years; if you are over age 50, talk with your doctor regarding the frequency of screening needed Pap test at least every three years (women ages 30-65 may instead choose to have a Pap test with HPV test every five years) Chlamydia screening if at risk Mammogram every 1-2 years Osteoporosis screening for post-menopausal women at risk age 50 or older² Screen for Type 2 diabetes if blood pressure >135/80 Screen for abnormal blood glucose and Type 2 diabetes, age 40-70 years who are overweight or obese 	<ul style="list-style-type: none"> Screen for lipid disorders every five years Screening for colorectal cancer (CRC) using fecal occult blood testing, sigmoidoscopy, or colonoscopy, beginning at age 50 years and continuing until age 75 years; if you are over age 50, talk with your doctor regarding the frequency of screening needed Pap test is optional after age 65; discuss with your doctor whether you should have this test Mammogram every 1-2 years until age 74; then as indicated after age 74 Osteoporosis screening for women ages 65 and up Screen for Type 2 diabetes if blood pressure >135/80 Screen for abnormal blood glucose and Type 2 diabetes, age 40-70 years who are overweight or obese
IMMUNIZATIONS	<ul style="list-style-type: none"> One-time dose Tetanus/Diphtheria/Pertussis; Tetanus/Diphtheria booster every 10 years Flu vaccine annually HPV vaccine for ages 19-26 as recommended Adults born after 1957 without evidence of prior MMR vaccine should be vaccinated Varicella vaccine for those without evidence of prior infection HPV vaccine before age 26 if not previously vaccinated 	<ul style="list-style-type: none"> One-time dose Tetanus/Diphtheria/Pertussis; Tetanus/Diphtheria booster every 10 years Flu vaccine annually Adults born after 1957 without evidence of prior MMR vaccine should be vaccinated Varicella vaccine for those without evidence of prior infection 	<ul style="list-style-type: none"> One-time dose Tetanus/Diphtheria/Pertussis; Tetanus/Diphtheria booster every 10 years Flu vaccine annually Shingles (Herpes Zoster) vaccine for ages 60 and up unless contraindicated Adults born after 1957 without evidence of prior MMR vaccine should be vaccinated Varicella vaccine for those without evidence of prior infection 	<ul style="list-style-type: none"> One-time dose Tetanus/Diphtheria/Pertussis; Tetanus/Diphtheria booster every 10 years Flu vaccine annually Pneumococcal vaccine once in a lifetime from age 65; booster as recommended Shingles (Herpes Zoster) vaccine for ages 60 and up unless contraindicated Varicella vaccine for those without evidence of prior infection
COUNSELING/SCREENING	<ul style="list-style-type: none"> Diet: discuss calcium with all women and folic acid with those at risk for or considering pregnancy Exercise promotion Smoking cessation Alcohol/substance abuse prevention Sexually transmitted diseases/HIV/sexual behavior Family planning Dental health Sun exposure Injury prevention (including seat belt, helmet use) Life stage issues-family, child Depression Health Care Proxy/Advance Directives Screen for HIV infection ages 15-65 Family violence 	<ul style="list-style-type: none"> Diet: discuss calcium with all women and folic acid with those at risk for or considering pregnancy Exercise promotion Smoking cessation Alcohol/substance abuse prevention Sexually transmitted diseases/HIV/sexual behavior Family planning Dental health Sun exposure Injury prevention (including seat belt, helmet use) Life stage issues-family, child, bereavement Depression Health Care Proxy/Advance Directives Screen for HIV infection ages 15-65 Family violence 	<ul style="list-style-type: none"> Diet: discuss calcium and vitamin D Exercise promotion Menopause management Smoking cessation Alcohol/substance abuse prevention Sexually transmitted diseases/HIV/sexual behavior Dental health Sun exposure Injury prevention (including seat belt, helmet use) Life stage issues-bereavement Depression Health Care Proxy/Advance Directives Screen for HIV infection ages 15-65 One time screening for HCV infection to adults born 1945-1965 Family violence 	<ul style="list-style-type: none"> Diet: discuss calcium and vitamin D Exercise promotion Menopause management Smoking cessation Alcohol/substance abuse prevention Sexually transmitted diseases/HIV/sexual behavior Dental health Sun exposure Injury prevention (including seat belt, helmet use and falls) Life stage issues-bereavement Depression Health Care Proxy/Advance Directives Bladder control problems Screen for HIV infection ages 15-65 One time screening for HCV infection to adults born 1945-1965 Family violence
HIGH RISK INDIVIDUALS	<ul style="list-style-type: none"> Aspirin therapy recommended for ages 55-79 years when benefit outweighs risks For additional vaccine recommendations, refer to the CDC Adult Immunization Schedule available at www.cdc.gov/vaccines/schedules/hcp/adult.html 			

¹ If you have a family history of glaucoma talk with your doctor about whether screening may be right for you.

² If you are under age 50, talk with your doctor about your personal risk for osteoporosis and the need for testing.

Guidelines adapted from the U.S. Preventive Services Task Force. Talk to your doctor about which preventive services are right for you. Your benefits may allow for services more frequently than what is listed here.

Be Smart About Antibiotics

When you are suffering from a cold, flu, or sinus infection, the only thing you want to do is get better. You may go to your doctor expecting an antibiotic to put you on the road to recovery, but antibiotics are not always the best treatment option. Using antibiotics when they are not needed contributes to the growing problem of antibiotic resistance, or “super bugs.” It also exposes you or your child to unnecessary side-effects or reactions from the medication.

Antibiotics heal bacterial infections, not viruses—which are the cause of many common illnesses.

Antibiotics CANNOT treat:

- Colds, runny noses, or most coughs
- Influenza (the flu)
- Most bronchitis
- Sore throats not caused by strep
- Some sinus infections
- Some ear infections



Many of these illnesses just need to “run their course” before you feel better. Some colds or other viruses can last up to two weeks. If your or your child’s illness gets worse or seems to last longer than expected, you may need to see a doctor.

A child with a sore throat accompanied by a fever or any problems swallowing or breathing may need to get checked sooner. A lab test will need to be done to determine if your child has strep throat, which is caused by bacteria so it does need to be treated with an antibiotic to prevent complications like rheumatic fever.

Cancer Screenings and Prevention

Are You Up-to-Date?

Most people know someone who has had cancer and either had to undergo treatment (including chemotherapy and radiation) or has lost their life from it. The good news is—the overall death rate (all cancers combined) in the U.S. has been decreasing over recent years. One contributing factor is earlier diagnosis and treatment.

Screening for cancer can help:

- to prevent certain types of cancer by identifying lesions that could be treated before they turn into cancer
- prevent death from cancer by finding the disease in an early state when it is most treatable
- to reduce the intensity and length of treatment required.

Although there are over 100 different types of cancer and many screenings available, we will focus on a few of the more common screenings. For more information on other cancer screenings appropriate for your age and gender, please refer to the table at the end of this newsletter and talk to your doctor.

Cervical Cancer Screening

Regular Pap tests are recommended for women ages of 21-65, even if you are not currently sexually active. The cervix is the lower opening of the uterus—cancer that develops here can spread to other parts of the

body. Regular testing by a Pap smear can help your doctor find and treat abnormal cell changes on your cervix before they develop into cancer. In addition to screening for cervical cancer, the HPV vaccine is recommended for both boys and girls at age 11 or 12. It prevents infection with the Human Papillomavirus, which is a leading cause of cervical cancer.

Breast Cancer Screening

Mammograms are generally recommended for women starting around age 40. A mammogram is an x-ray that can help find a small lump that may not be noticeable by a breast exam alone. It can often find breast cancer very early—up to two years before it can be felt by your doctor during an exam. Often breast cancer has to grow to at least the size of a pea before you or your doctor can feel it. Having a regular mammogram is important to help detect cancer in the early stages when it is most treatable.

Colorectal Cancer Screening

Screening for colorectal cancer is recommended for both men and women starting around age 50. There are several different ways to screen for this cancer:

- colonoscopy every 10 years
- sigmoidoscopy every five years, along with fecal occult blood testing (FOBT) every three years
- fecal occult blood testing (FOBT) yearly

Talk to your doctor about which type of test and frequency is right for you.

