

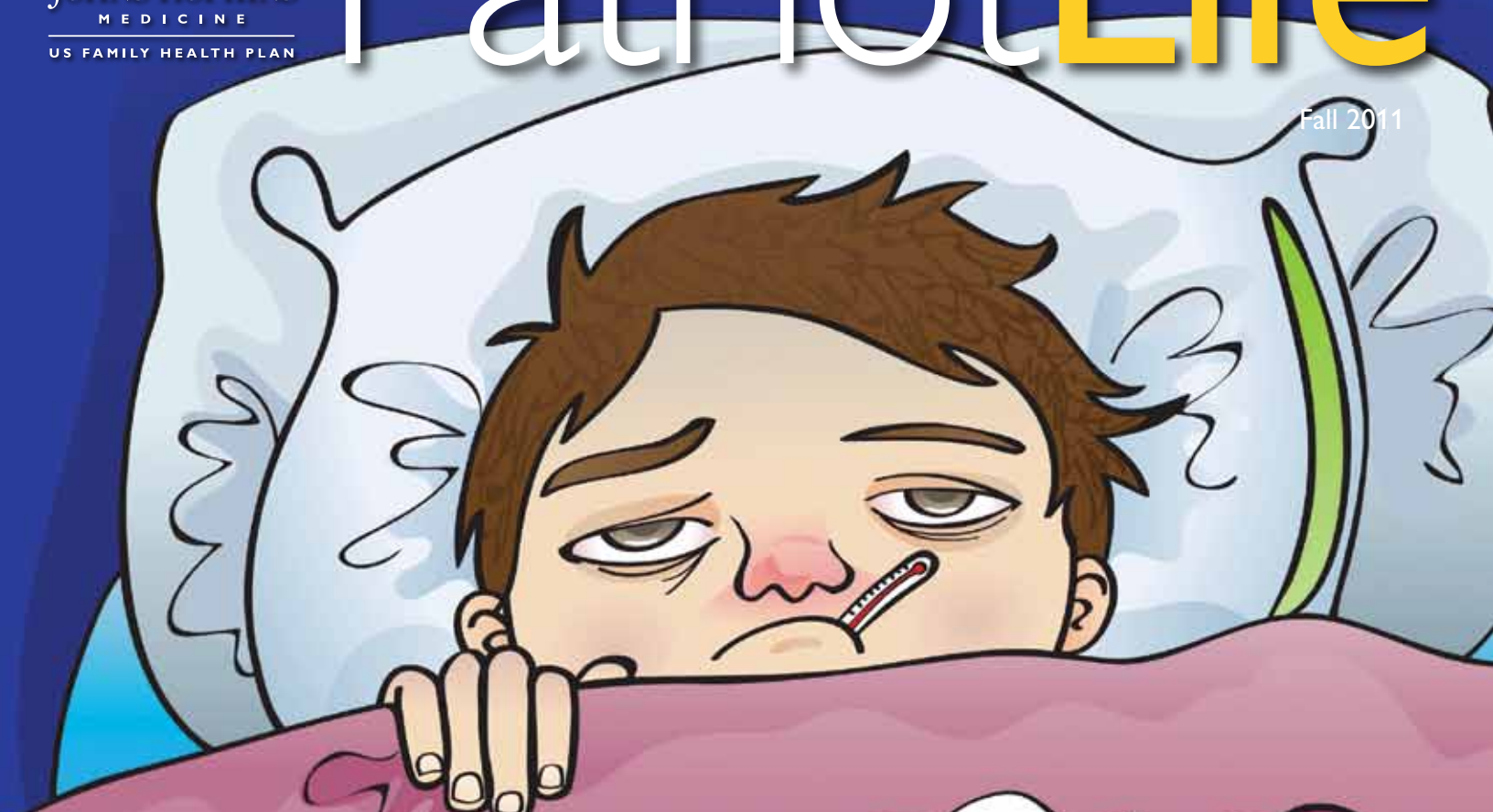
JOHNS HOPKINS US FAMILY HEALTH PLAN



JOHNS HOPKINS
MEDICINE
US FAMILY HEALTH PLAN

PatriotLife

Fall 2011



inside

YOUR HOLIDAY
EATING SURVIVAL
GUIDE

TOP RATED
IN MARYLAND

PRESCRIPTION
COPAY UPDATE



DON'T LET FLU
DO THIS

TO YOU



Your Holiday Eating Survival Guide

Despite conventional wisdom and ages of advice telling us not to overeat during the holiday season, lots of folks do it anyway, resulting in weight gain, stomach upset and other issues.

“People lose sight of what the holiday really means,” says Johns Hopkins clinical dietitian specialist Marsha E. Davis. “If you view it as a get-together with people you haven’t seen in a long time, it helps balance out the eating issue.”

Whether you’re headed to a buffet cocktail party or sit-down dinner, Davis says, you can practice “mindful eating”—eating slowly and savoring every bite.

At buffets, fill your plate only once, with the foods you really want. Look for the vegetable trays with dip or hummus; avoid fried or high-fat foods. It’s easy to think that because most appetizers are small, they can’t have too many calories, Davis says, when that’s not the case. If you are tempted by higher-fat foods, take just one.

Beware the calories in alcoholic beverages, she says, which can add up quickly. Worse, alcohol lowers your inhibitions, so you’re more likely to forget portion control and overeat.

At sit-down dinners, mentally

divide your plate. Put vegetables or fruit on half, starches on one quarter, protein on the other. Leave some food on your plate. “You don’t have to eat it all,” Davis says.

Have a healthy snack before you leave home so you don’t arrive too hungry. Protein-containing foods are very satisfying: Try a low-fat string cheese alone or wrapped in a slice of turkey, a container of Greek yogurt, hummus and pita, or half an apple spread with peanut butter.

If you’re bringing a dish, modify your family favorite with lower-calorie ingredients; use spices and herbs to boost flavor.

Skipping breakfast and lunch to “save up” for a lavish dinner can lead to overeating, indigestion or heartburn, especially if you load up on spicy foods. If you have reflux problems, avoid tight-waisted clothing and wait at least three hours after eating before lying down.

Most important, don’t fret if you overdo it, Davis says. If you overeat at Thanksgiving, you have four weeks before the Christmas holiday to eat better. “Look at Thanksgiving as one day, Christmas as one day, New Year’s as one day,” she says, “not one day wrapped into six weeks.”

Tips to Boost Your ‘Good’ Cholesterol

- **Lose some weight**—for every 2 pounds you take off, you could bump up your level of high-density lipoprotein (HDL) cholesterol.
- **Avoid the simple carbohydrates** found in white rice, white bread and white sugar.
- **Avoid the trans fats** found in margarine, French fries, cakes and cookies.
- **Use monounsaturated vegetable oils.**
- **Eat fish high in omega-3 polyunsaturated fats:** herring, mackerel, salmon, sardines, sea bass.

For more insight on this or other health topics, visit johnshopkinshealthalerts.com.

CONSUMER REPORTS KUDOS

The Johns Hopkins US Family Health Plan (USFHP) has been ranked by *Consumer Reports* as the best private health insurer in Maryland.

Consumer Reports analyzed 830 health care plans across the country that are ranked by the National Committee for Quality Assurance (NCQA), an independent, quality-measurement organization called. The Johns Hopkins US Family Health Plan recently earned the highest NCQA rating—Excellent—which is reserved for health care plans that meet or exceed rigorous requirements for consumer protection and quality. The rankings were based on an overall combined score range of 1 to 100 (higher is better) points. The total score was partially determined by numeric values that were assigned in the rankings' categories of consumer satisfaction, and treatment and prevention.

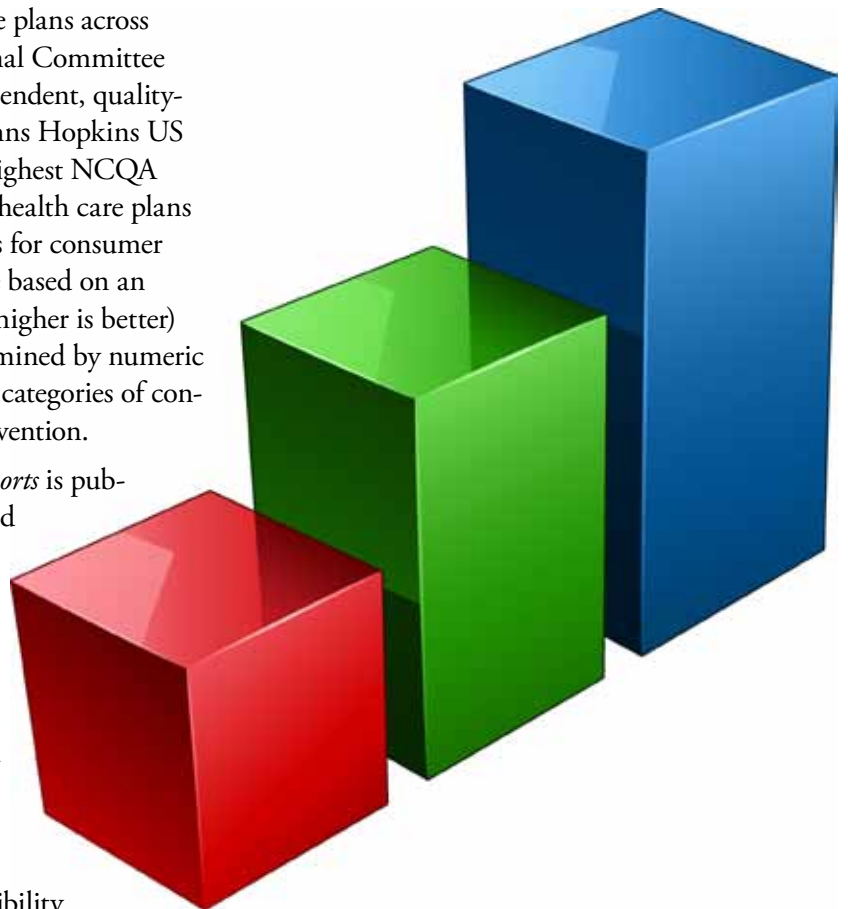
This is the second year that *Consumer Reports* is publishing NCQA's rankings, which examined insurance plans in all 50 states and Washington, D.C. Together, these plans enroll an estimated 127 million Americans.

"It is a great honor and we are very proud to be recognized by *Consumer Reports* and ranked among the top plans in the country and in our state," says Mary Cooke, vice president of Johns Hopkins USFHP.

"With this recognition comes the responsibility to continue providing the high-quality health care our military beneficiaries expect and deserve."

Nationally, Johns Hopkins USFHP ranked 23 out of 390 listed insurers. The plan currently serves approximately 35,000 members in Maryland, Washington, D.C., parts of Pennsylvania, West Virginia, Delaware and Northern Virginia.

Details: consumerreports.org/health/insurance/private-hmo-1.htm



To prevent spreading flu

- **Cover your nose and mouth** with a tissue when you cough or sneeze, then toss the tissue in the trash.
- **Wash hands often with soap and water** or an alcohol-based hand cleaner, especially after coughing or sneezing.
- **Avoid touching your eyes, nose or mouth** to keep germs from spreading.
- Try to **stay away from sick people**.
- **Be cautious about taking young babies to crowded places** during flu season.
- **Stay home from work or school** if you are sick until at least 24 hours after you no longer have a fever or signs of a fever, without the use of a fever-reducing medicine.
- While sick, **limit contact with others as much as possible** to keep from infecting them. Stay in a separate room and use a separate bathroom if possible.

Flu *History*

One of the most deadly flu pandemics in history occurred in 1918–1919, affecting millions of people worldwide. Recent estimates suggest that global mortality was 50 million to 100 million people—the equivalent of 10 times the number of people who live in New York City today. More people died from that flu than have died from plague or from AIDS. An estimated 675,000 Americans were among the dead.

The huge infection and mortality rates severely disrupted the nation's economy. Claims against life insurance policies skyrocketed; hospitals, drug stores and funeral homes were overloaded; and small businesses went bankrupt. Movie theaters, amusement parks and other public gathering places were closed.

In October 1918, some researchers began to argue that influenza was caused by a virus, though it wasn't until 1933 that the influenza A virus, which causes almost every type of endemic and pandemic flu, was isolated. Researchers isolated the influenza B virus in 1940, and the influenza C virus in 1950.

Flu vaccines were introduced in the United States in 1944. By the 1950s, vaccine makers could routinely release vaccines to be used in the prevention or control of future pandemics. During the 1960s, increased understanding of the virus enabled scientists to develop more potent and purer vaccines.

Pandemic influenza returned twice more in the 20th century, in 1957–1958 and in 1968–1969, though those outbreaks were much less severe.



Are You Prepared?

MOST PEOPLE TODAY are pretty blasé about flu, but they shouldn't be, says William Convey, M.D., an internist at Johns Hopkins Community Physicians' Frederick office.

Flu is the No. 1 infection cause of death, Convey says: "The virus is a remarkably aggressive killing machine." The virus consists of short strands of genetic material that frequently reassemble themselves to outwit the immune system. "It's particularly nasty and can outpace its host, infecting and using up cells before it's even finished attacking."

Each year, up to 20 percent of the population catches the seasonal flu, 200,000 people are hospitalized with flu-related complications and about 36,000 die from it. Symptoms of fever, body aches, headaches, chills, cough, fatigue, runny nose and sometimes vomiting and diarrhea can sack people for up to 10 days.

It's extremely contagious, spreading from person to person through coughing, sneezing or touching a surface containing flu germs. To prevent illness, the federal Centers for Disease Control and Prevention recommends that everyone over the age of 6 months receive a flu vaccine, especially children, pregnant women, people with chronic medical conditions, older adults and health care



workers and caregivers. The vaccine contains a weakened version of the virus or harmless fragments of the virus, encouraging the immune system to make proper antibodies before being exposed to infection.

“Immunizations are one of the very best ways to trick the body into thinking it’s already had the disease,” Convey says. Vaccines for both the seasonal flu and shingles are provided at no cost to USFHP members.

Flu vaccine is redesigned each year to protect against the three strains of virus predicted to be the most common. Experts expect this year’s flu strains to be similar to last year’s. There are no vaccine shortages; people with mild allergies to eggs can now receive the vaccine, though those with severe allergies should still avoid it. Check with your primary care provider if you believe you have other reasons why you should not get the vaccine.

Seasonal flu activity changes from year to year, but most often peaks in January or February. Convey advises people to get vaccinated by late October, as flu cases increase starting around Thanksgiving. Janet Siddiqui,

M.D., a pediatrician with Johns Hopkins Community Physicians’ Odenton office, already has seen some patients with flu.

Over-the-counter supplements like vitamin C, zinc, Echinacea and multivitamins can’t hurt you but they have no proven track record in preventing flu, Convey says. Siddiqui recommends eating a balanced diet, getting regular exercise and getting enough sleep each night to further boost immunity.

Treating flu is mainly a combination of fluids and rest. Antiviral medications like oseltamivir and zanamivir can lessen the duration of flu illness but must be started within 24 to 48 hours of getting ill to be effective. It’s always OK to call your doctor to check in, Siddiqui says, especially if you or your child can’t keep food or drink down or if symptoms are lingering. Seek immediate medical attention if you have difficulty breathing, severe or persistent vomiting, bluish or gray skin color, pain or pressure in the chest or abdomen or if flu-like symptoms improve but then recur with a worse cough and fever.

For more information: <http://www.flu.gov> or <http://www.cdc.gov/flu>.

Common Flu Myths

1

The vaccine gave me the flu.

The flu shot cannot cause flu. It takes a couple of weeks for the vaccine to kick in. Generally, a person saying this would have been exposed to the virus a week or two before receiving the vaccine and didn’t have enough immunity to fend off the illness.

2

I had the flu vaccine last year, so I don’t need it again.

Each year, scientists develop a new vaccine aimed at preventing the strains of flu predicted to be the most prominent. Immunity from one year’s vaccine wanes and may not confer adequate immunity for the next flu season.

3

Stomach flu is a form of flu.

A virus causing vomiting and/or diarrhea without accompanying body aches or fever most likely is not a case of flu but a case of gastroenteritis.

4

If there’s no fever, it’s not flu.

Some people, especially older people, can have flu with no fever.

5

Young, healthy people don’t need flu vaccines.

The Centers for Disease Control recommends that everyone over the age of 6 months receive flu vaccine. It boosts your chances of avoiding illness yourself and spreading it to others. Healthy adults might live or work with others who are at higher risk for flu, like infants, older people or those with asthma and other chronic conditions. The vaccine can protect them by default.

Enrollment Fee Changes

The Department of Defense recently announced that military retirees enrolling in TRICARE Prime, including the US Family Health Plan, after Oct. 1, 2011, will begin paying an additional \$2.50 per month for individual members and \$5 per month for members and family.

This change does not affect any retirees currently enrolled and only affects future enrollees. Annual fees for beneficiaries enrolled in TRICARE Prime before Oct. 1 will remain at \$230 and \$460 until Oct. 1, 2012.

Active duty service members will continue to receive health care with no out-of-pocket costs.

Plan Type	Old Annual Payment	NEW Annual Payment
Family	\$460	\$520
Individual	\$230	\$260

For more information, visit www.TRICARE.mil/mybenefit/home/Medical/Costs

Prescription Copayment Update

We have been notified by the Department of Defense that TRICARE pharmacy copayments for Johns Hopkins US Family Health Plan beneficiaries are changing on Nov. 1, 2011. This chart shows the current and future copayment amounts.

The next time you pick up a prescription at the pharmacy or use the mail-order option, you will be asked to pay the new copayment. During the first quarter of 2012, you will receive a new membership card showing the copayment changes.

You can have your prescription for up to 90 days of medication filled at your community Rite Aid or you can choose the mail order option it that is more convenient for you.

If you have any questions, please visit hopkinsmedicine.org/usfhp or contact our Member Services Department at 1-800-808-7347.

	Current Copay		New Copay Effective Nov. 1, 2011	
Rite Aid Retail Up to 30-day supply	Generic	\$3	Generic	\$5
	Brand Name	\$9	Brand Name	\$12
	Non-formulary <i>(unless you establish medical necessity)</i>	\$22	Non-formulary <i>(unless you establish medical necessity)</i>	\$25
Rite Aid Retail and Home Delivery Up to 90-day supply	Generic	\$3	Generic	\$0
	Brand Name	\$9	Brand Name	\$9
	Non-formulary <i>(unless you establish medical necessity)</i>	\$22	Non-formulary <i>(unless you establish medical necessity)</i>	\$25



Hugh Fatodu

answers
your questions

Johns Hopkins US Family Health Plan members often have questions about their pharmacy benefits. For answers to some of your most common queries, we checked in with **Hugh Fatodu**, director of pharmacy benefits for Johns Hopkins US Family Health Plan .

How do mail order prescriptions work?

The mail order program for the Johns Hopkins US Family Health Plan (USFHP) is administered through Rite Aid pharmacy in the Wyman Park building in Baltimore. To set up your mail order prescription service, fill out the mail order form, attach your prescription and mail it to the pharmacy. You can also have your physician call in the order. The pharmacy fills the order and sends it to your home (or to another mailing address if you travel for work). All medications are sent in temperature-sensitive packaging to ensure integrity of the products. You can also pick up a 90-day supply of your medication at any local Rite Aid; just show your Johns Hopkins USFHP card when you present the prescription.

Is there a difference between generic and brand-name drugs?

A generic drug is the same as a brand-name drug in dosage, safety, strength, quality and the way it works. However, generic drugs cost less—sometimes up to 85 percent less. The U.S. Food and Drug Administration requires generic drug manufacturers to meet the same rigorous standards as major pharmaceutical companies for quality, purity, potency and strength of the products. Recent research on heart drugs showed that brand-name heart drugs did not work any better than their generic equivalents.



Should I get my flu shot at Rite Aid or from my primary care provider's (PCP) office?

Generally, you should call your PCP office to set up an appointment for a flu shot. If you are unable to get there during regular office hours, you can get a flu shot at your local Rite Aid. Just show your Johns Hopkins USFHP card and the pharmacist will administer the shot at no charge. Later this year, shingles vaccine will be available (at selected Rite Aid pharmacies) at no cost to Johns Hopkins USFHP members age 60 and older.

For more information, visit hopkinsmedicine.org/usfhp/members_visitors/pharmacy_medication_prescription.html.

IN YOUR OWN WORDS

I was very pleased with the service I received when I went to Johns Hopkins Community Physicians at Charles County.

Everyone I met was friendly and genuinely seemed to enjoy working at JCHP. Dr Raman listened to my concerns and developed a diagnostic plan for my condition.

Thanks to everyone at the practice.

—Joanne Bollhofer-White

Patriot Life, the official newsletter of the Johns Hopkins Uniformed Services Family Health Plan (USFHP), is published quarterly by Johns Hopkins Medicine Marketing and Communications. For more information, call 410-614-4991.

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www.hopkinsmedicine.org/usfhp

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Johns Hopkins US Family Health Plan We're In Your Neighborhood

The Johns Hopkins US Family Health Plan has more than 75 primary care offices to serve our members, including six new locations (yellow bullets) in Delaware, Eastern Shore Maryland and Accomack County, Va.

Need the most up-to-date listing?

Visit hopkinsmedicine.org/usfhp and click *Members & Visitors* then *Locations*.

