Colon Cancer Screenings Can Save Lives

The earlier colon cancer is found, the easier it is to treat. That’s why it is important to get your Colon Cancer Screening when your doctor recommends it.

Who should be screened?

- People who are in good health should start regular screenings at age 45 and continue to age 75.
- People at risk of colorectal cancer should talk to their doctor about how often to get screened and understand which test is right for them.
- People ages 76 through 85, the decision to be screened should be based on a person’s overall health, prior screening history and a doctor’s recommendation.

Screenings are done either with a test that looks for signs of cancer in a person’s stool (a stool-based test), or with an exam that looks at the colon and rectum (a visual exam). Talk with your doctor about which screening is right for you.

Sources: cancer.org, Healthline.com, cdc.gov/cancer/colorectal/basic_info/screening/tests.htm

Don’t Miss Out on Important Plan Information

To give you the best service possible, we need to have your most current contact information. This includes your mailing and email address and a phone number where we can call you. If your contact information has changed, please call us at 1-866-783-1444 (TTY: 711).

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- Regular Checkups Are Important for Good Dental Health
- Don’t Risk Losing Your Medicaid Coverage
- New Tools to Help Manage Chronic Conditions
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Regular Checkups Are Important for Good Dental Health

Getting a checkup and cleaning every 6 months from your dentist is important to keep your gums and teeth healthy. If you are due for a checkup or cleaning, call now since it can take a while to get an appointment.

Seeing a dentist who knows you and your history is the best way to track changes in your oral health over time.

Make sure you practice good dental hygiene at home by:
• Brushing twice a day with fluoride toothpaste
• Flossing once a day
• Limiting sugary drinks and snacks

The best place to get routine care is in your dentist’s office. If you have a serious dental-injury (related to a fall or accident), you should go to the Emergency Room.

For help finding a dentist, changing your dentist, or dental benefit questions, call our dental partner, Healthplex, at 1-800-468-9868 (TTY: 711), Monday – Friday from 8 am to 6 pm.

Source: Healthline.com

Don’t Risk Losing Your Medicaid Coverage

Your VNS Health Total benefits depend on keeping your Medicaid coverage active.

Sixty days (60) before it is time for you to recertify your Medicaid coverage, you will get a letter from the Social Security Administration, the New York State Department of Health or the Human Resources Administration.

If you do not recertify your Medicaid coverage within 90 days of getting the letter, you will lose your Medicaid benefits and VNS Health Total will be required to disenroll you from the plan.

When you get the letter, gather the documents you need and complete the paperwork. Once you complete the paperwork, please mail it back to us in the business reply envelope by the deadline listed on the Medicaid Renewal form.

If you need help recertifying, call your Care Team at 1-866-783-1444.

Reminder
If you are new to Medicaid, or you have moved in the last 3 years, please make sure to update your contact information with your local Medicaid office.
Help Us to Serve You Better
The Centers for Medicare and Medicaid Services (CMS), (through SPH Analytics) may ask you to complete a satisfaction survey either by mail or by telephone.

What is the Consumer Assessment of Healthcare Provider & Systems Survey (CAHPS)?
CAHPS measures your satisfaction with the services you receive from your Medicare plan and prescription drug plan from VNS Health.

This survey is your chance to share how you feel about your health plan and the services you receive.

The survey is anonymous. CMS will share the results from the survey with us so we can provide more effective care. Completing the survey does not affect your benefits in any way.

Can I get Help Filling Out the Survey?
If you need help filling out the survey, you can ask your aide or family member to help you, but the answers must be your own. You can also complete the survey over the phone with a live representative. Call the toll-free number listed on the survey you receive in the mail.

Comfort Care Options
Hospice and palliative care are available to you as a VNS Health Total member.
When you’re sick, you want curative care — the kind that cures what ails you. But when your health takes a turn for the worse, you might just want medicine that makes you feel okay. The kind of care that treats pain, nausea, and other kinds of discomfort — the kind that makes you feel better — is called palliative care.

When no amount of care can cure your condition, you and your family may want another kind of care. You may want help feeling better in body, mind, and spirit, and have as good a quality of life as you can, while you and your family get ready for what’s coming. This kind of care is called hospice care.

Contact your Care Team for information about this benefit or visit our website at vnshealthplans.org/comfort-care-options-for-vns-health-medicare-members/.

VNS Health Health Plans complies with Federal civil rights laws. VNS Health Health Plans does not exclude people or treat them differently because of race, religion, color, national origin, age, disability, sex, sexual orientation, gender identity, or gender expression. ATENCION: si habla español, tiene a su disposición servicios gratuitos de asistencia linguística. Llame al 1-866-783-1444 (TTY: 711).
注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-866-783-1444（TTY：711）。

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New Tools to Help Manage Chronic Conditions

Livongo® is a new healthy living program to help members better manage chronic conditions like diabetes, and high blood pressure, and for members who are at risk for getting diabetes. It is available at no cost to plan members.

Depending on your needs you can get help with:

- **Diabetes Management that includes**: a blood glucose monitor, unlimited test strips, one-on-one coaching, and access to readings to help you keep track of your blood sugar

- **Blood Pressure Management that includes**: a blood pressure monitor, one-on-one coaching with real-time tips to help you manage your blood pressure and feel your best.

- **Healthy Living & Diabetes Prevention that includes**: an easy-to-use scale, a personalized action plan including tips on nutrition and meal plans along with one-on-one coaching to support you in your journey to better health.

To see if you are eligible for this program, please call Livongo at 855-578-2650, (TTY: 711), 24 hours a day, 7 days a week and mention the code VNSHEALTHPLANS.

You can also sign up through Livongo’s website at explore.livongo.com/VNSHEALTHPLANS/now.

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Don’t Forget to Mail Your Consumer Directed Personal Assistance MD Order Form

Your VNS Health Total benefits depend on keeping your Medicaid Every year, we will send you another CDPAS MD Order form by mail. Each time, you need to take this form to your provider and have them complete it, sign it, and return it to us within 30 days of their appointment with you or payment to your assistant(s) could be delayed.

It is **important** that your provider include:
- their license number
- the date of your exam
- the date they signed the form

Without that information, the form will be returned to your provider and your services may be delayed.

**This could also delay payment to your assistant(s).**
Regular Checkups Are Important for Good Dental Health

Any questions? Call us toll-free at: 1-866-783-1444 (TTY: 711)

October 1, 2023 – March 31, 2023
7 days a week, 8 am – 8 pm

April 1, 2023 – September 1, 2023
Weekdays, 8 am – 8 pm

vnshealthplans.org

Transportation Reminder
To schedule transportation, call 1-877-718-4219 (TTY: 711) at least 48 hours in advance from 8 am to 8 pm, Monday – Friday.

If Something Seems Wrong, Tell Us.
VNS Health Total is committed to finding and stopping fraud, waste, or abuse in our health care plans.

Anonymous Reporting

Cinnamon Popcorn

Cinnamon is full of antioxidants and popcorn has a lot of fiber. Together, they make a quick and healthy snack.

Ingredients
- 8 cups of popped popcorn
- 2 teaspoons sugar
- ½ teaspoon ground cinnamon
- Butter flavored non-stick cooking spray

Instructions
Preheat oven to 350 degrees F. Line a shallow roasting pan with foil, if desired. Spread popcorn in the shallow roasting pan. In a small bowl combine sugar and cinnamon.
Lightly coat popcorn with cooking spray, tossing to coat evenly. Sprinkle with cinnamon mixture, tossing again to coat evenly. Bake about 5 minutes or just until crisp.

Source: Diabetic Living Magazine
The Affordable Connectivity Program is an FCC program that helps connect families and households struggling to afford internet service.

The benefit provides:

- Up to $30/month discount for internet service;
- Up to $75/month discount for households on qualifying Tribal lands; and
- A one-time discount of up to $100 for a laptop, desktop computer, or tablet purchased through a participating provider.

A household is eligible for the Affordable Connectivity Program if the household income is at or below 200% of the Federal Poverty Guidelines, or if a member of the household meets at least one of the criteria below:

- Participates in any of the following assistance programs: SNAP, Medicaid, Federal Public Housing Assistance, Veterans Pension or Survivor Benefits, SSI, WIC, or Lifeline;
- Participates in any of the following Tribal specific programs: Bureau of Indian Affairs General Assistance, Tribal TANF, Food Distribution Program on Indian Reservations, or Tribal Head Start (income based);
- Participates in the Free and Reduced-Price School Lunch Program or the School Breakfast Program, including through the USDA Community Eligibility Provision;
- Received a Federal Pell Grant during the current award year; or
- Meets the eligibility criteria for a participating broadband provider’s existing low-income internet program.

TWO STEPS TO ENROLL

1. Go to AffordableConnectivity.gov to submit an application or print a mail-in application

2. Contact your preferred participating provider to select an eligible plan and have the discount applied to your bill.

Some providers may have an alternative application that they will ask you to complete.

Eligible households must both apply for the program and contact a participating provider to select a service plan.

LEARN MORE

Call 877-384-2575, or
Visit fcc.gov/ACP