

Did you know?

About 618 people in the United States are killed by extreme heat every year.

Stay cool by wearing light, loose-fitting clothing. Go to an air conditioned space. And drink plenty of water.

Source: Centers for Disease Control and Prevention

Toothache?

A toothache is the fifth most common reason for an emergency room (ER) visit. But up to 79 percent of dental ER visits could be better handled in a dentist's office. Most hospitals don't have dentists in the ER. There isn't much they can do to help patients with toothaches.

Community Plan

That's why it's important to have a dental home. This is the office where you get your dental care. When you have a regular dentist, he or she can help you when you have pain. More importantly, he or she can help you avoid toothaches with preventive care.

Regular exams, cleanings and x-rays are covered benefits. They help the dentist find and treat small problems before they turn into big problems.

Overland Park, KS 66210 10895 Grandview, Ste. 200 UnitedHealthcare Community Plan SN.

know more about your dental benefits? Call Member Services toll-free at 1-877-542-9238, TTY 711.

Smile. Need to find a dentist who accepts your plan? Want to

It's your choice.

You have the right to make your own medical decisions. Your provider will explain your treatment choices to you.

You have the right to say "no" to treatment. You may be asked to sign a form saying "yes" to treatment you want. This is called informed consent.

But what if you are too sick to give consent? An advance directive will make sure providers know what kind of treatment you want. Types of advance directives for medical care include:

- A living will explains what kind of treatment you want.
- A durable power of attorney lets someone else make decisions for you. You can also have a durable power of attorney for mental health care.



Write it down. Ask your doctor or hospital for a form to help you create an advance directive. Forms are also available online. Give copies of the form to your providers and someone you trust. Keep one for yourself.



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Breathe easy.

Understanding your asthma or COPD medication.

There are many different medications for asthma and chronic obstructive pulmonary disease (COPD). Your doctor will prescribe the right ones for you. Be sure to take your medications the way your doctor says you should. Don't stop taking them without talking to your doctor, even if you are feeling better. You should have a written action plan to help you know what to take and when.

Long-term medications:

Most people with asthma and COPD take medicine every day, even when they are feeling well. These long-term medications keep asthma and COPD under control. They can be oral or inhaled. Most help by reducing swelling and opening airways.

Rescue medications:

Inhaled rescue medications are for when you are coughing or short of breath. Rescue medications can help you breathe better in minutes. They work for a few hours. Carry rescue medications with you all the time. Keep taking your long-term medication, even when you are also using your rescue inhaler.

We can help. We have disease management programs. They help people with asthma, diabetes and other conditions. Call Member Services toll-free at **1-877-542-9238, TTY 711**, to learn more.

Prescribed an opioid?

3 questions to ask your doctor.

Drug overdoses are now the leading cause of death in people under 50. The recent rise in overdoses is due to a sharp increase in opioid use. Opioids include prescription drugs such as Vicodin and Oxycontin. They also include heroin and other illegal drugs.

Many people who become addicted to opioids started using them when they were prescribed for pain. Others misused leftover pills from a friend or family member. Starting June 1, 2018, a new policy will have limits on opioid drugs that may require prior authorization.

If your doctor or dentist prescribes a pain reliever, take charge of your health and find out exactly what you are getting. Here are three questions to ask your provider:

- **1. Are there other options that can treat my pain?** Opioids are not the only option. Other options for treating pain could help you feel better. These include over-the-counter pain relievers or physical therapy.
- **2. What are my risks for addiction?** Some people may be more prone to addiction than others. Taking opioids over a period of time can increase the risk of dependence and addiction.
- **3. How does this medicine mix with other medicines I'm taking?** Opioids can be deadly when mixed with other drugs, especially those taken for treatment of anxiety, sleeping disorders and seizures. It's a bad idea to mix alcohol with an opioid pain reliever.

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Need help? Treatment for substance use disorders is a covered benefit. Call the Substance Abuse and Mental Health Services Administration's Treatment Referral Routing Service at **1-800-662-HELP (4357)** to begin recovery.

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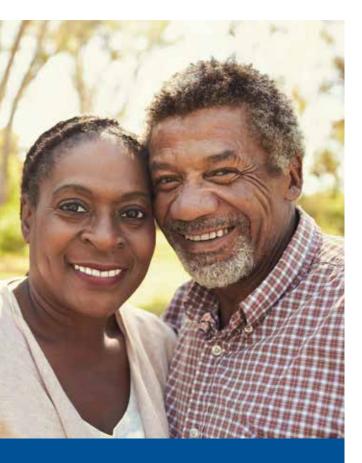
Is my medicine covered?

Your plan covers a long list of medicines or prescription drugs. There are no copays for medicines that are covered on the Preferred Drug List (PDL) or Formulary. The PDL list is a subset of all drugs covered under the plan. Your doctor uses these lists to make sure the medicines you need are covered.

If you are asked to pay for your medicines, call Member Services at **1-877-542-9238**. They can work with you to find out why. Some reasons you may be asked to pay for all or part of your medicine are:

- You have a primary insurance coverage other than your UnitedHealthcare KanCare plan. Always make sure you give the pharmacy all of your insurance cards.
- You try to refill too soon. Sometimes an early refill is allowed.
- You are using a pharmacy that is out of network. You must use an in-network pharmacy.
- Your medication is not a preferred PDL drug. You will need to work with your doctor to select a preferred PDL drug.
- Your medication may require a prior authorization. Your doctor can work directly with UnitedHealthcare.
- You just became eligible, or had a change to your eligibility status.
- You just joined UnitedHealthcare from a different plan.
- You have an unmet spenddown.

You can find both the Preferred Drug List and the formulary list online at **myuhc.com/CommunityPlan**. You can search for a medicine name on the website. You can also call the OptumRx Help Desk at **1-877-305-8952**, Monday–Sunday, 24 hours a day.



Resource corner.

Member Services: Find a doctor, ask benefit questions or voice a complaint in any language (toll-free). 1-877-542-9238, TTY 711

Our website and app: Find a provider, read your Member Handbook or see your ID card, wherever you are. myuhc.com/CommunityPlan

Health4Me®

NurseLineSM: Get 24/7 health advice from a nurse (toll-free). 1-855-575-0136, TTY 711

KanQuit: Get free help quitting smoking (toll-free). KSQuit.org 1-800-784-8669

National Domestic Violence Hotline: Get 24/7 support, resources and advice (toll-free). 1-800-799-SAFE, TTY 1-800-787-3224 thehotline.org

Crush cancer.

Are you due for a screening?

Cancer screenings can help catch common cancers early. When caught early, cancer is often treatable. Some cancers can even be prevented with screenings. For people at average risk, the American Cancer Society recommends:

WHAT: Mammography.

WHY: To catch breast cancer early.

WHEN: Annual mammograms for women starting at age 40 or 45, depending on risk. Mammograms every 2 years beginning at age 55. (Women at high risk may continue annual screenings after age 55.)

WHAT: Colonoscopy.

WHY: To catch or prevent colorectal cancer. **WHEN:** Colonoscopy for men and women every 10 years beginning at age 50. Other tests for colorectal cancer are also available; intervals vary.

WHAT: Pap and HPV screening.

WHY: To catch or prevent cervical cancer.

WHEN: Pap screening for women every 3 years between ages 21–29. Pap and HPV tests every 5 years between ages 30 and 65. Testing can end at age 65 for women with a history of normal Pap results.



Are you at risk? Talk to your doctor about your risk factors for cancer. Ask if you should begin screenings at a younger age or get them more often.







UnitedHealthcare Community Plan does not treat members differently because of sex, age, race, color, disability or national origin.

If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to:

Civil Rights Coordinator UnitedHealthcare Civil Rights Grievance P.O. Box 30608 Salt Lake City, UTAH 84130

UHC_Civil_Rights@uhc.com

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again.

If you need help with your complaint, please call the toll-free member phone number listed on your health plan member ID card, TTY 711, Monday through Friday, 8:00 a.m. to 6:00 p.m.

You can also file a complaint with the U.S. Dept. of Health and Human Services.

Online: https://ocrportal.hhs.gov/ocr/portal/lobby.jsf

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html

Phone:

Toll-free 1-800-368-1019, 1-800-537-7697 (TDD)

Mail:

U.S. Dept. of Health and Human Services 200 Independence Avenue SW Room 509F, HHH Building Washington, D.C. 20201

If you need help with your complaint, please call the toll-free member phone number listed on your member ID card.

We provide free services to help you communicate with us. Such as, letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the toll-free member phone number listed on your health plan member ID card, TTY 711, Monday through Friday, 8:00 a.m. to 6:00 p.m.