Be Smoke-Free

You know smoking is bad for you. Here’s a reminder of the health conditions it can cause or worsen:

- Heart disease and stroke
- Cancer of the lungs, esophagus, mouth, bladder, kidneys and pancreas
- Lung diseases like emphysema, COPD and chronic bronchitis
- Lower bone density and increased risk of fractures

It’s never too late to quit and lower your risk of these health problems. Your doctor can offer advice, refer you for counseling or prescribe smoking cessation aids. We can help you, too.

Our Tobacco-Free PATH program is available to you and all eligible EmblemHealth-enrolled family members (aged 18 and older) at no cost. You’ll get free telephone support, guidance and a personalized plan to quit.

Join today by calling:

New York State residents 1-866-NY-QUITS (1-866-697-8487)
Nonresidents of New York State 1-877-500-2393 TDD 711
Healthy Eating — A Balancing Act

Eating a balanced diet can make a big difference in your family's health. Follow these tips:

- **Colorful fruits and vegetables** are usually the highest in vitamins and minerals, so try to get them into every meal. Aim for five each day. Add fruit to your breakfast cereals and enjoy them as a healthy dessert. Carrots, snow peas and cherry tomatoes make great snacks.

- **Choose whole grains** like whole wheat bread or pasta and whole grain rice for long-lasting energy.

- **Calcium** is a key nutrient the body needs to stay strong and healthy. Good sources of calcium include dairy like low-fat milk, yogurt and cheese.

- **Protein** gives us energy and keeps us full. Include lean meats, poultry, fish and beans in your diet. Nuts are a tasty addition to any meal.

Certain foods may seem “off-limits”, but just have less of them less often!

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**Benefit Change: Permanent Nursing Home Stays**

**Phase I: New York City Residents**

Effective February 1, 2015, the Medicaid Managed Care (MMC) nursing home benefit will expand. It will include coverage of permanent stays in residential health care facilities for Medicaid recipients aged 21 and over who reside in the five boroughs of New York City.

- Medicaid recipients in permanent nursing home status prior to February 1, 2015 will continue to be covered by fee-for-service Medicaid.
- MMC will be responsible for members who enter permanent resident status on and after February 1, 2015. These members will no longer be disenrolled from their managed care plan.

**Phase II: Nassau, Suffolk and Westchester County Residents**

Effective April 1, 2015, the MMC nursing home benefit will expand again. It will include Medicaid recipients aged 21 and over who live in Nassau, Suffolk and Westchester counties.

**Voluntary Enrollment**

Effective October 1, 2015, eligible New York City, Westchester, Nassau and Suffolk county Medicaid recipients who were permanent residents in a nursing home will be able to enroll in managed care on a voluntary basis.

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**AdvantageCare Physicians: Providers of Choice**

Through AdvantageCare Physicians (ACP), members receive a patient-centered approach to care. Before the date of your appointment, your care team — which consists of your primary doctor, a nurse, a medical assistant, and a patient service representative — plans for your arrival. They review your medical needs, previous lab results and treatment plan for your condition. If you need to see a specialist, a plan of action is put into motion. That's what coordination of care is all about.

Whether you need to see a specialist, get an X-ray, have blood drawn or have a mammogram, it can all take place — in most cases — at the same location, coordinated by your PCP.

Members of any EmblemHealth plan may choose AdvantageCare Physicians as their provider of choice. For a closer look, visit acpny.com. And to find a doctor, visit emblemhealth.com.

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*Health Matters* is published by EmblemHealth to inform members of current health issues and improve the use of services. This publication should not replace the care and advice of your doctor. Always talk to your doctor about your personal health needs.
Improving Your Care

The mission of our Quality Improvement Program is to make sure you get the best medical and behavioral health care services from our network doctors, practitioners, hospitals and other providers. We do this by:

• Helping you stay healthy by providing primary and preventive care, reminding you when you need screenings and tests and helping you to take an active role in your health with educational mailings, phone calls, newsletter stories and health news, facts and alerts posted on emblemhealth.com.

• Helping you get better quickly and live well with chronic illness through our health and case management programs. We help members with asthma, cancer, coronary artery disease, diabetes, heart failure, HIV/AIDS, kidney disease, sickle cell anemia and high-risk pregnancies to better understand and manage their conditions.

• Providing our network doctors with tools and resources to help give you the best care possible.

Please visit emblemhealth.com for more on our Quality Improvement Program and its success.

Your Breast Reconstruction Surgery Benefits

The Women’s Health and Cancer Rights Act of 1998 requires health plans to cover breast reconstruction following a mastectomy. All health plans also have to provide plan participants with a notice of this coverage each year.

We understand that there are many important decisions to consider before undergoing reconstructive breast surgery. That’s why we want to make sure you’re fully aware of your benefits.

If a covered member has a mastectomy, lymph node dissection or lumpectomy and decides after consulting with his or her doctor to have reconstructive surgery, covered services include:

• Reconstruction of the breast on which the mastectomy was performed
• Prostheses
• Surgery and reconstruction of the other breast to produce a symmetrical (similar) appearance
• Treatment of physical complications at any stage of the mastectomy, including lymphedema care

Please be aware that this coverage is only for members diagnosed with breast cancer. The benefits do not apply to elective cosmetic surgery, which is not covered.

If you have any questions about this or any of your other benefits, please call Customer Service or visit emblemhealth.com.
Behavioral Health Update

In the last issue, we informed you that Medicaid Managed Care (MMC) will soon cover behavioral health services and a new kind of MMC plan called Health and Recovery Plan (HARP). It will offer extra services to eligible members. The effective date for these changes is July 1, 2015, pending approval from the Centers for Medicare & Medicaid Services.

In the meantime, remember to keep your doctors informed about your care. It’s proven that better health results happen when patients, doctors and health plans work together to share information. Ask for and sign a “Release of Information” form each time you see a different doctor. This allows them to share your treatment plan information and work together to keep you healthy. Your health information will only be shared with your care team.

Every Visit Matters

See your doctor as soon as you think you’re pregnant. Early prenatal care and attending every appointment can help you have a healthy baby. You should see your doctor about 14 times before your baby comes and at least one time between 21 and 56 days after you give birth.

Join our free Healthy Beginnings PATH program: 1-877-736-2229. We’ll help guide you through your pregnancy even if it’s not your first time. You’ll get a pregnancy book, access to a 24/7 nurse call line for your questions and much more. If you recently had a baby, speak with a nurse case manager during the first 8 weeks after your delivery. You’ll discuss breastfeeding, your after-delivery doctor’s visit and get answers to any newborn care questions. Call 1-888-447-0337.

Don’t Take High Blood Pressure Lying Down!

High blood pressure is called the silent killer. It often has no symptoms, yet it is a major cause of heart attacks, strokes and death.

Knowing your blood pressure is very important. Many people think the only way to find out their blood pressure is by visiting their doctor. The truth is you can check your blood pressure at home! You can get a blood pressure monitor — electronic or manual — at any drugstore or online with a prescription from your doctor. Check your blood pressure even if you are on medicine for it. Many people who take medicine for high blood pressure think they are under control, when they aren’t.

Take your blood pressure when you are calm, sitting and at the same time of day. (Check both arms because there can be a difference.) Do this twice a week and write it down. Then share the information with your doctor.

A Deadly Mix

Depression is hard enough, but it can get worse when mixed with alcohol or drugs. Studies find that people who suffer from depression are more likely to abuse alcohol and those who abuse alcohol and drugs are at greater risk of having depression. For some, this combo can lead to taking their own life.

Why People Abuse Alcohol and Drugs

Most people turn to alcohol and drugs because it makes them feel better or numbs their pain. Those feelings are temporary. What they are often left with is depression because alcohol and drugs actually lowers the brain chemicals that help prevent depression. If you or someone you know has an addiction problem or is depressed, talk to your doctor and get help.

We can help, too. Call Emblem Behavioral Health Services Program (EBHSP): 1-888-447-2526. You may also wish to contact Alcoholics Anonymous (aa.org) or Narcotics Anonymous (na.org).
Help for You at Home

Staying on top of all your health care needs can be hard. The good news is that there’s help. The New York State Department of Health offers the Medicaid Health Home program to assist you in staying healthy. You don’t have to change your health care plan or your doctors. And your Medicaid benefits will stay the same. All Health Home services are free and joining the program is your choice!

How does it work?

With Health Home, you will have a care manager who will work with you and your current doctors to help you get the care you need, when you need it. Also, your care manager will help you:

• Find a doctor if you need one
• Manage your medications and medical treatments
• Get transportation to your medical appointments
• Get social services you may need, such as housing and food assistance
• Learn how to eat well and stay active
• Take better care of yourself when you go home after being in a hospital

Who is eligible for this program?

Members are selected for this program based on health care utilization and having one or more medical conditions or health care needs. Eligible conditions include asthma, COPD, diabetes, heart disease, mental illness, substance abuse or HIV/AIDS.

HARP Members

When the Health and Recovery Program (HARP) is available, all members selected for HARP will be referred to the Health Home program. HARP plans are designed to meet the unique needs of members living with serious mental illness and substance abuse.

For more information about the Health Home program, call us at 1-888-377-8277, Monday through Friday, between 9 am and 5 pm.

Wellness Reminder: Four Things to Remember

- See your primary doctor once a year for a well care visit.
- Visit your dentist twice a year.
- Get an eye exam once a year.
- Get a flu shot every fall. Ask your doctor if you should get the pneumonia vaccine and any other shots.

Pharmacy and Medical Provider Directories Are Available

Need to find a network pharmacy or medical provider near you? Your pharmacy and provider directories are available now! To order, call Customer Service. Our online provider directories are updated daily. So for the most up-to-date listings, sign into emblemhealth.com and follow the links to search for a pharmacy or medical provider.
Screen Out Cancer!

Being screened (tested) for cancer, even if you feel fine, helps to catch cancers in early stages when they are more easily treated — giving you the best chance for a cure.

Four cancers for which screening is very important:

1. **Colorectal (colon) cancer**
   Get screened (tested) for colorectal cancer starting at age 50 (or earlier if you’re at high risk). Colon cancer has a high cure rate if caught early.
   Tests include:
   - Colonoscopy every 10 years
   - Flexible sigmoidoscopy every 5 years
   - Fecal occult blood test (FOBT) or fecal immunochemical test (FIT) every year

2. **Breast cancer**
   A mammogram is a test to screen for breast cancer. Women aged 40 and older should have a mammogram every 1 to 2 years.

3. **Cervical cancer**
   Pap tests look for cervical cancer, one of the most easily treated cancers. If you are a woman aged 21 to 29, you should have a Pap test every 3 years. Women between the ages of 30 and 64 should have a Pap test every 5 years.

4. **Skin cancer**
   Everyone is at risk for skin cancer, so have a routine skin exam once a year.

**Talk to Your Doctor**
Show this article to your doctor, talk about your risk and concerns and then get tested.

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**Stick to the Script**
If you’re like most people, keeping track of your medicines can be hard. Here’s something you can do to stay on track and take your medicine as directed by your doctor:

**Create a Medication Plan**
1. On a sheet of paper, write the following:
   - Name of my medicine ______________________________
   - I take it for ______________________________
   - How often I take it and when ______________________________
   - My next refill date ______________________________
2. Bring your list to your doctor and together fill in the rows for each medicine you take. You will then have a Medication Plan!
3. Next, make copies of your Plan. Place one in your wallet or purse and one on your refrigerator door so you will always be able to “stick to the script.”
¡Detecte el cáncer!

Realícese un examen (prueba) de cáncer, incluso si se siente bien, ayuda a detectar distintos tipos de cáncer en las etapas tempranas, que es cuando se tratan con mayor facilidad, que le da una mejor oportunidad de curarse.

Cuatro tipos de cáncer para los que las pruebas de detección son muy importantes:

1. **El cáncer colorrectal (colon)**
   Realícese el examen (prueba) de cáncer colorrectal a partir de los 50 años de edad (o antes si se encuentra en un mayor riesgo). El cáncer de colon tiene un alto índice de cura si se detecta a tiempo. Las pruebas incluyen:
   - Colonoscopía (examen de colon) cada 10 años
   - Sigmoidoscopia flexible (examen del colon y el recto) cada 5 años
   - Prueba de sangre oculta en heces (Fecal occult blood test, FOBT) o prueba inmunoquímica en heces (fecal immunochemical test, FIT) cada año

2. **Cáncer de mama**
   Una mamografía es una prueba para detectar el cáncer de mama. Las mujeres a partir de los 40 años de edad deben hacerse una mamografía cada 1 o 2 años.

3. **Cáncer cervical**
   Las pruebas de Papanicolaou buscan detectar el cáncer cervical o del cuello del útero, uno de los tipos de cáncer más fáciles de tratar. Si es una mujer entre 21 y 29 años de edad, debe realizarse una prueba de Papanicolaou cada 3 años. Las mujeres entre 30 y 64 años de edad deben realizarse una prueba de Papanicolaou cada 5 años.

4. **Cáncer de piel**
   Todos están en riesgo de contraer cáncer de piel, por ello debe realizarse un examen de piel una vez al año.

**Hable con su médico** Muéstrele este artículo a su médico, hable sobre su riesgo y sus inquietudes y luego hágase las pruebas.
Lo ayudamos a manejar su salud

Priorizar todas sus necesidades de atención médica puede resultar difícil. La buena noticia es que existe ayuda. El Departamento de Salud del Estado de Nueva York ofrece el programa “Health Home” de Medicaid para ayudarlo a mantenerse sano. No es necesario que cambie su plan de atención médica ni sus médicos. Y sus beneficios de Medicaid seguirán iguales. ¡Todos los servicios “Health Home” son gratuitos y unirse al programa es opcional!

¿Cómo funciona?

Con “Health Home”, tendrá un administrador de atención que trabajará con usted y sus médicos actuales para ayudarlo a obtener la atención que necesita, cuando la necesite. Además, su administrador de atención lo ayudará a:

• Encontrar un médico si lo necesita
• Administrar sus medicamentos y tratamientos médicos
• Conseguir transporte para sus citas médicas
• Obtener los servicios sociales que pueda necesitar, como vivienda y asistencia alimentaria
• Aprender a comer bien y mantenerse activo
• Cuidarse mejor cuando se va a casa luego de haber estado en el hospital

¿Quién es elegible para este programa?

Se seleccionan los miembros para este programa según el uso de la atención médica y de que sufran de uno o más problemas médicos o según sus necesidades de atención médica. Los problemas de salud elegibles incluyen asma, enfermedad pulmonar obstructiva crónica (EPOC o COPD), diabetes, enfermedad cardíaca, enfermedad mental, abuso de sustancias o VIH/SIDA.

Miembros de HARP

Cuando el Programa de salud y recuperación (Health and Recovery Program, HARP) esté disponible, todos los miembros seleccionados para HARP serán referidos al programa de “Health Home”. Los planes HARP están diseñados para satisfacer las necesidades únicas de los miembros que conviven con enfermedades mentales graves y abuso de sustancias.

Para obtener más información sobre el programa de “Health Home”, llámenos al 1-888-377-8277, de lunes a viernes, entre las 9 am y las 5 pm.

Recordatorio sobre bienestar: Cuatro cosas para recordar

Consulte con su médico primario una vez al año para una visita de control.

Visite a su dentista dos veces al año.

Examíñese la vista una vez al año.

Vacúnese contra la gripe cada otoño. Pregúntele a su médico si debe vacunarse contra la neumonía o aplicarse cualquier otra vacuna.

Se encuentran disponibles directorios de farmacias y proveedores médicos

¿Necesita encontrar una farmacia o un proveedor médico de la red cerca de donde se encuentra? ¡Sus directorios de farmacias y proveedores ya están disponibles! Para pedirlos, llame al Servicio de Atención al Cliente. Nuestros directorios de proveedores en línea se actualizan a diario. Por eso, para obtener las listas más actualizadas, inicie sesión en español.emblemhealth.com y siga los enlaces para buscar una farmacia o proveedor médico.
Actualización sobre salud del comportamiento

En la última edición, le informamos que la atención administrada de Medicaid (MMC) pronto cubrirá servicios de salud del comportamiento y un nuevo tipo de plan de MMC llamado Plan de salud y recuperación (Health and Recovery Plan, HARP). El plan ofrecerá a los miembros elegibles servicios adicionales. La fecha de entrada en vigencia de estos cambios es el 1 de julio de 2015, una vez aprobado por los Centros de Servicios de Medicare y Medicaid.

Mientras tanto, recuerde mantener informados a sus médicos sobre su atención. Está comprobado que se logran mejores resultados de salud cuando los pacientes, médicos y planes de salud trabajan juntos para compartir información. Solicite un formulario de “Divulgación de información” cada vez que consulte con un médico diferente y fírmelo. Esto les permite compartir la información de su plan de tratamiento y trabajar juntos para mantenerlo saludable. Solo se compartirá su información de salud con su equipo de atención.

Cada consulta cuenta

Si cree que está embarazada, consulte a su médico de inmediato. La atención prenatal temprana y asistir a cada cita médica puede ayudarla a tener un bebé saludable. Debe consultar con su médico aproximadamente 14 veces antes de la llegada de su bebé y al menos una vez entre 21 y 56 días luego del parto.

Únase a nuestro programa gratuito Healthy Beginnings PATH: 1-877-736-2229. Le brindaremos orientación a lo largo de su embarazo, incluso si no se trata del primero. Obtendrá un libro sobre embarazo, acceso a una línea de enfermería que funciona las 24 horas del día y los 7 días de la semana para hacer preguntas y mucho más. Si tuvo un bebé recientemente, hable con un enfermero administrador de casos durante las primeras 8 semanas luego del parto. Hablarán sobre la lactancia materna, su visita al médico luego del parto y obtendrá respuestas sobre el cuidado del recién nacido. Llame al 1-888-447-0337.

¡No ignore la presión alta sanguínea!

La presión alta sanguínea es denominada el asesino silencioso. Con frecuencia no muestra síntomas, pero aun así es una de las principales causas de ataques cardíacos, derrames cerebrales y muerte.

Es muy importante que conozca su presión sanguínea. Muchas personas creen que la única forma de averiguar su presión sanguínea es yendo al médico. ¡La verdad es que puede controlarse la presión sanguínea en casa!

Puede obtener un monitor de presión sanguínea, ya sea electrónico o manual, en cualquier farmacia o en línea con una receta de su médico. Contrólese la presión sanguínea incluso si toma un medicamento para la presión. Muchas personas que toman medicamentos para la presión alta sanguínea creen tener el control, pero no es así.

Tómese la presión sanguínea cuando esté tranquilo, sentado y a la misma hora del día. (Controle ambos brazos, ya que puede haber una diferencia). Hágalo dos veces por semana y anótela. Luego, comparta la información con su médico.

Una mezcla mortal

La depresión es bastante dura, pero puede empeorar si se combina con alcohol o drogas. Los estudios demuestran que las personas que sufren de depresión tienen más probabilidades de abusar del alcohol y quienes abusan del alcohol y de las drogas tienen un mayor riesgo de sufrir depresión. Para algunos, esta combinación puede llevar al suicidio.

Por qué las personas abusan del alcohol y de las drogas

La mayoría de las personas utilizan el alcohol y las drogas porque las hacen sentir mejores o “bloquea” el dolor. Esas sensaciones son temporales. Con frecuencia lo que queda es la depresión porque el alcohol y las drogas en realidad disminuyen las sustancias químicas cerebrales que ayudan a evitar la depresión. Si usted o alguien que conoce tiene un problema de adicción o depresión, hable con su médico y consiga ayuda.

La misión de nuestro Programa de Mejora de la Calidad es asegurarse de que obtenga los mejores servicios de atención médica y salud del comportamiento de los médicos, profesionales, hospitales y otros proveedores de nuestra red. Hacemos esto de la siguiente manera:

• Lo ayudamos a mantenerse saludable al brindarle atención primaria y preventiva de calidad, al recordarle cuándo necesita pruebas y análisis y ayudándolo a tener un papel activo en su salud con material educativo enviado por correo, llamadas telefónicas, historias en boletines informativos y noticias sobre salud, hechos y alertas que se publican en espanol.emblemhealth.com.

• Lo ayudamos a mejorarse rápidamente y a vivir mejor con enfermedades crónicas a través de nuestros programas de salud y administración de casos. Ayudamos a miembros con asma, cáncer, enfermedad de las arterias coronarias, diabetes, falla cardíaca, VIH/SIDA, enfermedad del riñón, anemia de células falciformes (o células con forma de medialuna) y embarazos de alto riesgo para que comprendan y manejen mejor sus problemas de salud.

• Les brindamos herramientas y recursos a nuestros médicos de la red para ayudarlos a proporcionarle la mejor atención posible.

Visite espanol.emblemhealth.com, para conocer más sobre el Programa de Mejora de la Calidad y su éxito.

Sus beneficios para cirugía de reconstrucción de mamas

La Ley de salud de la mujer y derechos de pacientes de cáncer de 1998 exige que los planes de salud cubran la reconstrucción de la mama luego de una extirpación de seno (mastectomía). Además, cada año todos los planes de salud deben avisarles a los participantes del plan acerca de esta cobertura.

Comprenderemos que existen muchas decisiones importantes a considerar antes de someterse a una cirugía de reconstrucción de seno o mamaria. Es por eso que queremos asegurarnos de que conozca bien sus beneficios.

Si un miembro cubierto se somete a una mastectomía, una disección de nódulos linfáticos o extirpación de tumor (bulto) y decide, luego de consultar con su médico, someterse a una cirugía de reconstrucción, los servicios con cobertura incluyen:

• Reconstrucción del seno en el cual se realizó la mastectomía
• Prótesis
• Cirugía y reconstrucción del otro seno para producir una apariencia simétrica (similar)
• Tratamiento de las complicaciones físicas en cualquier etapa de la mastectomía, incluida la atención de linfedemas (acumulaciones de líquido linfático)

Tenga en cuenta que esta cobertura es solo para miembros a quienes se les diagnosticó cáncer de mama. Los beneficios no se aplican a cirugía cosmética por elección, la cual no se encuentra cubierta.

Si tiene preguntas sobre este o cualquier otro de sus beneficios, llame al Servicio de atención al cliente o visite espanol.emblemhealth.com.
Alimentación sana: una cuestión de equilibrio

Una dieta equilibrada puede marcar una gran diferencia en la salud de su familia. Siga estos consejos:

- **Las frutas y verduras** coloridas son generalmente las que tienen más vitaminas y minerales, por eso debe tratar de usarlas en cada comida. Su objetivo debe ser de cinco por día. Agregue frutas a los cereales del desayuno y disfrútelas como un postre saludable. Las zanahorias, arvejas chinas y los tomates cherry son excelentes bocadillos.

- **Elija granos integrales** como el pan o la pasta de trigo integral y el arroz integral para obtener una energía duradera.

- **El calcio es un nutriente clave** que el cuerpo necesita para mantenerse fuerte y saludable. Buenas fuentes de calcio incluyen los lácteos como la leche, el yogur y el queso descremados.

- **Las proteínas** nos dan energía y nos mantienen llenos. Incluya carnes sin grasa, aves, pescado y frijoles en su dieta. Las nueces son un agregado delicioso para cualquier comida.

Ciertos alimentos pueden parecer estar “prohibidos”, pero simplemente consumálos en menor cantidad y con menor frecuencia.

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**Fase I: Residentes de la Ciudad de Nueva York**

A partir del 1 de febrero de 2015, se ampliará el beneficio de hogar de ancianos de Atención Administrada de Medicaid (Medicaid Managed Care, MMC). Incluirá la cobertura de estadías permanentes en instituciones de atención médica residenciales para los beneficiarios de Medicaid de 21 años de edad o mayores que residan en los cinco condados de la Ciudad de Nueva York.

- Los beneficiarios de Medicaid que tengan un estado de residente permanente de hogar de ancianos antes del 1 de febrero de 2015 seguirán estando cubiertos por Medicaid fee-for-service (Honorario por Servicio).

- MMC será responsable de los miembros que obtengan estado de residente permanente desde el 1 de febrero de 2015 en adelante.

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**Fase II: Residentes de los Condados de Nassau, Suffolk y Westchester**

A partir del 1 de abril de 2015, se ampliará nuevamente el beneficio de hogar de ancianos de MMC. Incluirá a los beneficiarios de Medicaid de 21 años de edad o mayores que residan en los condados de Nassau, Suffolk y Westchester.

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**Inscripción Voluntaria**

A partir del 1 de octubre de 2015, los beneficiarios de Medicaid de los condados de la Ciudad de Nueva York, Westchester, Nassau y Suffolk que eran residentes permanentes de un hogar de ancianos podrán inscribirse en la atención administrada de manera voluntaria.

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**Médicos de AdvantageCare: proveedores preferidos**

A través de los Médicos de AdvantageCare (AdvantageCare Physicians, ACP), los miembros reciben un enfoque de la atención médica centrado en el paciente. Antes de la fecha de su cita médica, su equipo de atención médica, formado por su médico primario, un enfermero, un asistente médico y un representante de servicios a pacientes, planifica su llegada. Revisan sus necesidades médicas, los resultados de pruebas de laboratorio anteriores y planes de tratamiento para sus problemas de salud. Si necesita consultar con un especialista, se pone en movimiento un plan de acción. De eso se trata la coordinación de la atención médica.

Ya sea que necesite consultar con un especialista, hacerse una radiografía, una extracción de sangre o hacerse una mamografía, todo puede llevarse a cabo, en la mayoría de los casos, en el mismo lugar, coordinado por su médico primario.

Libérese del tabaco

Usted sabe que fumar es malo para su salud. Aquí le recordamos los problemas de salud que puede causar o empeorar:

- Enfermedad cardíaca o derrame cerebral
- Cáncer de pulmón, esófago, boca, vejiga, riñones y páncreas
- Enfermedades pulmonares como enfisema, enfermedad pulmonar obstructiva crónica (EPOC o COPD) y bronquitis crónica
- Menor densidad de los huesos y mayor riesgo de fracturas

Nunca es demasiado tarde para dejar de fumar y reducir el riesgo de sufrir estos problemas de salud. Su médico puede aconsejarlo, referirlo para que obtenga asesoramiento o recetarle ayudas para dejar de fumar. Nosotros también podemos ayudarlo.

Nuestro programa Tobacco-Free PATH (Camino para dejar de fumar) se encuentra disponible sin costo para usted y todos los miembros de su familia inscriptos en EmblemHealth elegibles (desde los 18 años de edad en adelante).

Obtendrá apoyo telefónico gratuito, orientación y un plan personalizado para dejar de fumar.

Únase hoy mismo llamando a:

Residentes del estado de Nueva York **1-866-NY-QUITS** (1-866-697-8487)

Residentes fuera del estado de Nueva York **1-877-500-2393** TDD 711

¿Sospecha de fraude con el seguro?
Llame al 1-888-4KO-Fraud (1-888-456-3728)

Programa PATH
1-888-881-3112

Recursos en la web
espanol.emblemhealth.com
espanol.emblemhealth.com/familycaregiver
questdiagnostics.com/espanol

CÓMO COMUNICARSE CON NOSOTROS

Servicio de Atención al Cliente
1-855-283-2146 TDD: 711
Diariamente, de 8 am a 8 pm

Deje de fumar
1-866-NY-QUITS
(1-866-697-8487)

Programa PATH un comienzo saludable
1-877-736-2229

Servicios de laboratorio:
Quest Diagnostics
1-888-277-8772 (Citados)
1-866-697-8378
(Servicio al Cliente)

Programa de Servicios de Salud del Comportamiento de Emblem (EBHSP)
1-888-447-2526
1-800-401-4822 (miembros de la red Montefiore)

Servicios de administración de casos
1-800-447-0768

**Recursos en la web**
espanol.emblemhealth.com
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IMPORTANT INFORMATION ABOUT YOUR PRIVACY RIGHTS

NOTICE OF PRIVACY PRACTICES

Effective September 1, 2013

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE READ IT CAREFULLY.

EmblemHealth, Inc. is the parent organization of the following companies that provide health benefit plans: Group Health Incorporated (GHI), HIP Health Plan of New York (HIP) and HIP Insurance Company of New York, Inc. (HIPIC). All of these entities receive administrative and other services from EmblemHealth Services Company LLC which is also an EmblemHealth, Inc. company.

This notice describes the privacy practices of EmblemHealth companies, including GHI, HIP and HIPIC (collectively “the Plan”).

We respect the confidentiality of your health information. We are required by federal and state laws to maintain the privacy of your health information and to send you this notice.

This notice explains how we use information about you and when we can share that information with others. It also informs you about your rights with respect to your health information and how you can exercise these rights.

We use security safeguards and techniques designed to protect your health information that we collect, use or disclose orally, in writing and electronically. We train our employees about our privacy policies and practices, and we limit access to your information to only those employees who need it in order to perform their business responsibilities. We do not sell information about our customers or former customers.

How We Use or Share Information

We may use or share information about you for purposes of payment, treatment and health care operations, including with our business associates. For example:

• Payment: We may use your information to process and pay claims submitted to us by you or your doctors, hospitals and other health care providers in connection with medical services provided to you.

• Treatment: We may share your information with your doctors, hospitals, or other providers to help them provide medical care to you. For example, if you are in the hospital, we may give the hospital access to any medical records sent to us by your doctor.

• Health Care Operations: We may use and share your information in connection with our health care operations. These include, but are not limited to:
  – Sending you a reminder about appointments with your doctor or recommended health screenings.
  – Giving you information about alternative medical treatments and programs or about health-related products and services that you may be interested in. For example, we might send you information about stopping smoking or weight loss programs.
  – Performing coordination of care and case management.
  – Conducting activities to improve the health or reduce the health care costs of our members. For example, we may use or share your information with others to help manage your health care. We may also talk to your doctor to suggest a disease management or wellness program that could help improve your health.
  – Managing our business and performing general administrative activities, such as customer service and resolving internal grievances and appeals.
  – Conducting medical reviews, audits, fraud and abuse detection, and compliance and legal services.
  – Conducting business planning and development, rating our risk and determining our premium rates. However, we will not use or disclose any of your genetic information for underwriting purposes.
  – Reviewing the competence, qualifications, or performance of our network providers, and conducting training programs, accreditation, certification, licensing, credentialing and other quality assessment and improvement activities.

• Business Associates: We may share your information with others who help us conduct our business operations, provided they agree to keep your information confidential.

Other Ways We Use or Share Information

We may also use and share your information for the following other purposes:

• We may use or share your information with the employer or other health-plan sponsor through which you receive your health benefits. We will not share individually identifiable health information with your benefits plan unless they promise
to keep it protected and use it only for purposes relating to the administration of your health benefits.

- We may share your information with a health plan, provider, or health care clearinghouse that participates with us in an organized health care arrangement. We will only share your information for health care operations activities associated with that arrangement.
- We may share your information with another health plan that provides or has provided coverage to you for payment purposes. We may also share your information with another health plan, provider or health care clearinghouse that has or had a relationship with you for the purpose of quality assessment and improvement activities, reviewing the competence or qualifications of health care professionals, or detecting or preventing health care fraud and abuse.
- We may share your information with a family member, friend, or other person who is assisting you with your health care or payment for your health care. We may also share information about your location, general condition, or death to notify or help notify (including identifying and locating) a person involved with your care or to help with disaster-relief efforts. Before we share this information, we will provide you with an opportunity to object. If you are not present, or in the event of your incapacity or an emergency, we will share your information based on our professional judgment of whether the disclosure would be in your best interest.

**State and Federal Laws Allow Us to Share Information**

There are also state and federal laws that allow or may require us to release your health information to others. We may share your information for the following reasons:

- We may report or share information with state and federal agencies that regulate the health care or health insurance system such as the U.S. Department of Health and Human Services, the New York State Department of Financial Services and the New York State Department of Health.
- We may share information for public health and safety purposes. For example, we may report information to the extent necessary to avert an imminent threat to your safety or the health or safety of others. We may report information to the appropriate authorities if we have reasonable belief that you might be a victim of abuse, neglect, domestic violence or other crimes.
- We may provide information to a court or administrative agency (for example, in response to a court order, search warrant, or subpoena).
- We may report information for certain law enforcement purposes. For example, we may give information to a law enforcement official for purposes of identifying or locating a suspect, fugitive, material witness or missing person.
- We may share information with a coroner or medical examiner to identify a deceased person, determine a cause of death, or as authorized by law. We may also share information with funeral directors as necessary to carry out their duties.
- We may use or share information for procurement, banking or transplantation of organs, eyes or tissue.
- We may share information relative to specialized government functions, such as military and veteran activities, national security and intelligence activities, and the protective services for the President and others, and to correctional institutions and in other law enforcement custodial situations.
- We may report information on job-related injuries because of requirements of your state worker compensation laws.
- Under certain circumstances, we may share information for purposes of research.

**Sensitive Information**

Certain types of especially sensitive health information, such as HIV-related, mental health and substance abuse treatment records, are subject to heightened protection under the law. If any state or federal law or regulation governing this type of sensitive information restricts us from using or sharing your information in any manner otherwise permitted under this Notice, we will follow the more restrictive law or regulation.

**Your Authorization**

Except as described in this Notice of Privacy Practices, and as permitted by applicable state or federal law, we will not use or disclose your personal information without your prior written authorization. We will also not disclose your personal information for the purposes described below without your specific prior written authorization:

- Your signed authorization is required for the use or disclosure of your protected health information for marketing purposes, except when there is a face-to-face marketing communication or when we use your protected health information to provide you with a promotional gift of nominal value.
- Your signed authorization is required for the use or disclosure of your personal information in the event that we receive remuneration for such use or disclosure, except under certain circumstances as allowed by applicable federal or state law.

If you give us written authorization and change your mind, you may revoke your written authorization at any time, except to the extent we have already acted in reliance on your authorization. Once you give us authorization to release your health information, we cannot guarantee that the person to whom the information is provided will not re-disclose the information.

We have an authorization form that describes the purpose for which the information is to be used, the time period during which the authorization form will be in effect, and your right to revoke authorization at any time. The authorization form must be completed and signed by you or your duly authorized representative and returned to us before we will disclose any of your protected health information. You can obtain a copy of this form by calling the Customer Service phone number on the back of your ID card.
Your Rights

The following are your rights with respect to the privacy of your health information. If you would like to exercise any of the following rights, please contact us by calling the telephone number shown on the back of your ID card.

Restricting Your Information

• You have the right to ask us to restrict how we use or disclose your information for treatment, payment or health care operations. You also have the right to ask us to restrict information that we have been asked to give to family members or to others who are involved in your health care or payment for your health care. Please note that while we will try to honor your request, we are not required to agree to these restrictions.

Confidential Communications for Your Information

• You have the right to ask to receive confidential communications of information if you believe that you would be endangered if we send your information to your current mailing address (for example, in situations involving domestic disputes or violence). If you are a minor and have received health care services based on your own consent or in certain other circumstances, you also may have the right to request to receive confidential communications in certain circumstances, if permitted by state law. You can ask us to send the information to an alternative address or by alternative means, such as by fax. We may require that your request be in writing and you specify the alternative means or location, as well as the reason for your request. We will accommodate reasonable requests. Please be aware that the explanation of benefits statement(s) that the Plan issues to the contract holder or certificate holder may contain sufficient information to reveal that you obtained health care for which the Plan paid, even though you have asked that we communicate with you about your health care in confidence.

Inspecting Your Information

• You have the right to inspect and obtain a copy of information that we maintain about you in your designated record set. A “designated record set” is the group of records used by or for us to make benefit decisions about you. This can include enrollment, payment, claims and case or medical management records. We may require that your request be in writing. We may charge a fee for copying information or preparing a summary or explanation of the information and in certain situations, we may deny your request to inspect or obtain a copy of your information. If this information is in electronic format, you have the right to obtain an electronic copy of your health information maintained in our electronic record.

Amending Your Information

• You have the right to ask us to amend information we maintain about you in your designated record set. We may require that your request be in writing and that you provide a reason for your request. We may deny your request for an amendment if we did not create the information that you want amended and the originator remains available or for certain other reasons. If we deny your request, you may file a written statement of disagreement.

Accounting of Disclosures

• You have the right to receive an accounting of certain disclosures of your information made by us for purposes other than treatment, payment or health care operations during the six years prior to your request. We may require that your request be in writing. If you request such an accounting more than once in a 12-month period, we may charge a reasonable fee.

Please note that we are not required to provide an accounting of the following:

– Information disclosed or used for treatment, payment and health care operations purposes.
– Information disclosed to you or following your authorization.
– Information that is incidental to a use or disclosure otherwise permitted.
– Information disclosed to persons involved in your care or other notification purposes.
– Information disclosed for national security or intelligence purposes.
– Information disclosed to correctional institutions or law enforcement officials.
– Information that was disclosed or used as part of a limited data set for research, public health or health care operations purposes.

Collecting, Sharing and Safeguarding Your Financial Information

In addition to health information, the plan may collect and share other types of information about you. We may collect and share the following types of personal information:

• Name, address, telephone number and/or email address;
• Names, addresses, telephone numbers and/or email addresses of your spouse and dependents;
• Your social security number, age, gender and marital status;
• Social security numbers, age, gender and marital status of your spouse and dependents;
• Any information that we receive about you and your family from your applications or when we administer your policy, claim or account;
• If you purchase a group policy for your business, information to verify the existence, nature, location and size of your business.
• We also collect income and asset information from Medicaid, Child Health Plus, Family Health Plus and Healthy New York subscribers. We may also collect this information from Medicare subscribers to determine eligibility for government subsidized programs.
We may share this information with our affiliates and with business associates that perform services on our behalf. For example, we may share such information with vendors that print and mail member materials to you on our behalf and with entities that perform claims processing, medical review and other services on our behalf. These business associates must maintain the confidentiality of the information. We may also share such information when necessary to process transactions at your request and for certain other purposes permitted by law.

To the extent that such information may be or become part of your medical records, claims history or other health information, the information will be treated like health information as described in this notice.

As with health information, we use security safeguards and techniques designed to protect your personal information that we collect, use or disclose in writing, orally and electronically. We train our employees about our privacy policies and practices, and we limit access to your information to only those employees who need it in order to perform their business responsibilities. We do not sell information about our customers or former customers.

### Exercising Your Rights, Complaints and Questions

- **You have the right to receive a paper copy of this notice upon request at any time.** You can also view a copy of this notice on the Web site. See information at the end of this page. We must abide by the terms of this notice.

- **If you have any questions** or would like further information about this notice or about how we use or share information, you may write to the Corporate Compliance department or call Customer Service. Please see the contact information on this page.

- **If you believe that we may have violated your privacy rights,** you may file a complaint.

### Personal Information After You Are No Longer Enrolled

Even after you are no longer enrolled in any plan, we may maintain your personal information as required by law or as necessary to carry out plan administration activities on your behalf. Our policies and procedures that safeguard that information against inappropriate use and disclosure still apply if you are no longer enrolled in the Plan.

### Contact Information

Please check the back of your ID card to call us or use the following contact information for your plan. Read carefully to select the correct Customer Service number.

### Changes to this Notice

We are required to abide by the terms of this Notice of Privacy Practices as currently in effect. We reserve the right to change the terms of the notice and to make the new notice effective for all the protected health information that we maintain. Prior to implementing any material changes to our privacy practices, we will promptly revise and distribute our notice to our customers. In addition, for the convenience of our members, the revised privacy notice will also be posted on our Web site: [www.emblemhealth.com](http://www.emblemhealth.com).

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**Write to:**
Corporate Compliance Dept. P.O. Box 2878
New York, NY 10116-2878

**Call:**

**EmblemHealth program members:** 7 days a week, 8 am-8 pm, 1-877-842-3625, TTY: 711

**EmblemHealth Medicare members:** 7 days a week, 8 am-8 pm
PPO: 1-866-557-7300, TTY: 711
HMO: 1-877-344-7364, TTY: 711
PDP (City of NY Retirees): 1-800-624-2414, TTY: 711
PDP (non-City of NY Retirees): 1-877-444-7241, TTY: 711

**FIDA members:** 7 days a week, 8 am-8 pm, 1-855-283-2148, TTY: 711

**GHI members:** 7 days a week, 8 am-8 pm, 1-800-624-2414, TTY: 711

**HIP “GHI HMO” plan members:** 7 days a week, 8 am-8 pm, 1-877-244-4466, TTY: 711

**HIP/HIPIC members:** 7 days a week, 8 am-8 pm, 1-800-447-8255, TTY: 711

**Medicaid, Family Health Plus and Child Health Plus members:** 7 days a week, 8 am-8 pm, 1-855-283-2146, TTY: 711

**Select Care HMO members:** 7 days a week, 8 am-8 pm, 1-888-447-7703, TTY: 711