THE KEY TO A GOOD LIFE IS A GREAT PLAN

Health TALK

The right care

How utilization management works

UnitedHealthcare Community Plan does utilization management (UM). All managed care health plans do. It’s how we make sure our members are getting the right care at the right time and in the right place.

A doctor reviews all coverage requests when the care does not seem to meet guidelines. Approval or denial decisions are based on care and service as well as your benefits. The decisions are not made because of financial or other rewards.

Members and doctors have the right to appeal denials. The denial letter will tell you how to appeal. The appeal request must be submitted within 90 days of the denial.

Questions? You can talk to our UM staff. Just call 1-800-941-4647 (TTY 711) toll-free.
They are available 8 a.m.–6 p.m EST, Monday–Friday. If you need to leave a message, someone will call you back.
Before baby

Have a healthy pregnancy.

Nearly one third of women will have a pregnancy-related complication. Prenatal care can help prevent problems, or catch them early. It’s best to see your provider for a check-up before you get pregnant. Then, see your provider:

- at least once before your 12th week;
- every four weeks until your 28th week;
- every two weeks until your 36th week;
- every week until delivery; and
- four to six weeks after delivery (and also two weeks after delivery if you have a C-section).

At your prenatal visits, you will be given screening tests. Screening tests look for potential problems that might not have any symptoms. If you are at average risk, you will likely have the following tests, plus others your provider recommends for you:

- **FIRST VISIT:** Your blood will be drawn to check your blood type and test for anemia (low iron). Your blood will also be tested for certain STDs and immunity to German measles and chicken pox.

- **EVERY VISIT:** Your urine will be checked for protein and sugar. Too much sugar in your urine could mean you have gestational diabetes. Protein in your urine could signal preeclampsia, which is very high blood pressure in pregnancy. Your provider will also check your blood pressure and weigh you at each visit.

- **18–20 WEEKS:** You will probably have at least one ultrasound. Ultrasound uses sound waves to examine the fetus, placenta and amniotic sac for potential problems. It may also show the sex of the baby.

- **24–28 WEEKS:** Most providers order a glucose screening to check for gestational diabetes. Additional tests may be needed if your pregnancy is high risk or there seems to be a problem.

**Take the first step.** Healthy First Steps is a free program for pregnant women and new moms. It provides information and support. Call 1-800-599-5985 (TTY 711) toll-free to find out how you can join.

**BY THE BOOK**

Have you read your Member Handbook? It is a great source of information. It tells you how to use your plan. It explains:

- the benefits and services you have;
- the benefits and services you don’t have (exclusions);
- how to find out about network providers;
- how your prescription drug benefits work;
- what to do if you need care when you are out of town;
- when and how you can get care from an out-of-network provider;
- where, when and how to get primary, after-hours, behavioral health, specialty, hospital and emergency care;
- your member rights and responsibilities;
- our privacy policy;
- how to voice a complaint or appeal a coverage decision;
- how to request an interpreter or get other help with language or translation;
- how the plan decides if new treatments or technologies are covered; and
- how to report fraud, waste and abuse.

**Get it all.** You can read the Member Handbook online at UHCCommunityPlan.com. Or call Member Services toll-free at 1-800-941-4647 (TTY 711) to request a copy of the handbook.
Ask Dr. Health E. Hound
Q: When does my child need to see the PCP?

A: It’s important to have well-child visits with your child’s primary care provider (PCP) on time. These visits may also be called check-ups or EPSDT visits. Take your baby for well-child visits at the following ages:

- 3 to 5 days;
- under 6 weeks;
- 2 months;
- 4 months;
- 6 months;
- 9 months;
- 12 months;
- 15 months;
- 18 months; and
- 24 months.

Then, take your child or teen to his or her PCP every year through age 20.

At well-child visits, your child’s PCP will make sure your child is growing and developing well. Your child will get any tests and vaccines he or she is due for. The doctor will check your child’s weight and body mass index (BMI). The PCP will answer your questions about your child’s health.

Beat the rush. If your child is due for a check-up, call to make an appointment today. Your child’s PCP is listed on his or her member ID card. Try not to wait until the summer, when pediatrician offices are very busy. Bring any school, sports or camp forms you need filled out to the appointment.

CAGEd in
Is it a drug or alcohol problem?

Many people think they have their alcohol or drug use under control and don’t need help. However, some people drink or take drugs compulsively or without control. They may not be able to judge the size of their problem correctly. They may be addicted to drugs or alcohol.

The CAGE-AID test can help determine if someone has an addiction. It includes the following four simple questions:

1. Have you ever felt you ought to CUT DOWN on your drinking/drug use?
2. Have people ever ANNOYED YOU by criticizing your drinking/drug use?
3. Have you ever felt bad or GUILTY about your drinking/drug use?
4. Have you ever had a drink or taken a drug first thing in the morning as an EYE-OPENER, to steady your nerves or get rid of a hangover?

If a person answers yes to any of these questions, he or she may have a problem.

Need help? Alcoholism and drug addiction are serious. They need to be diagnosed and treated by the right providers. If you think you need help, call 1-800-941-4647 (TTY 711) toll-free to learn how to use your behavioral health benefits.
Under control

Make your diabetic health a priority.

It takes constant, careful monitoring to keep diabetes under control. Regular testing helps you see how you’re doing. Which of these tests are you missing?

- **A1C BLOOD TEST**: This lab test shows how well your blood sugar has been controlled over the last two to three months. It tells you how well your treatment is working. Get this test three or four times per year.

- **CHOLESTEROL**: Diabetes and cholesterol are a combination that can damage your heart. Your doctor can tell you the HDL (good cholesterol), LDL (bad cholesterol) and total cholesterol numbers you should aim for. Get this test once a year.

- **KIDNEY FUNCTION**: Diabetes can damage your kidneys. This test makes sure yours are working right. Get this test once a year.

- **DILATED EYE EXAM**: Uncontrolled diabetes can cause blindness. In this test, eyedrops make your pupils bigger so the retina can be checked. It helps find problems before you’ll ever notice them. Get this test once a year.

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**We make it easy.** These tests are covered benefits. We also have a special program to help people with diabetes take care of their health. Call Member Services toll-free at 1-800-941-4647 (TTY 711) to find out more.

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**A ONE-TWO PUNCH**

Human papillomavirus (HPV) is the most common sexually transmitted infection. Sometimes, it causes cancer. It leads to most cases of cervical cancer in women. It also causes some anal and oral cancers in both men and women.

There is a vaccine for HPV. It works best when given before teens become sexually active. Boys and girls should get it at age 11 or 12; however, it can be given as early as age 9 or as late as age 26. Ask about it at your pre-teen’s next check-up.

In the future, the HPV vaccine will prevent most cases of cervical cancer. It wasn’t available when today’s adults were pre-teens.

Women should continue to get screened for cervical cancer with Pap tests. It’s a quick and simple test that looks for early signs of cancer. Your doctor uses a brush or swab to collect some cells from your cervix. A lab looks at the cells under a microscope. Pap tests are recommended for women age 20 and over. Ask your doctor how often you should be tested.
Know your BMI

Are you too heavy?

Two out of three adults are overweight or obese. So are one out of three children. Being overweight puts you at risk for many problems. These include heart disease, high blood pressure and Type 2 diabetes. Are you too heavy? Know your body mass index (BMI). This figure tells you if your weight is too high for your height.

- 18.5 to 24.9 is a healthy weight.
- 25 to 29.9 is overweight.
- 30 or higher is obese.

Your doctor can tell you what your BMI is, or you can calculate it yourself in three steps:
1. Multiply your height in inches by your height in inches.
2. Divide your weight in pounds by the answer to #1.
3. Multiply your answer to #2 by 703.

Know your number. Want a computer to do the math for you? You can enter your weight and height to find out your BMI at cdc.gov/healthyweight/assessing/bmi.

Are you due?

A colonoscopy is a test that looks for — and prevents — colon cancer. A recent long-term study proved that this test saves lives. It showed that people who had the test were twice as likely to survive colorectal cancer than people who didn’t have the test. The people in the study all had polyps removed.

The test looks at the large intestine with a camera. It also removes polyps, which are small lumps. Polyps that are removed are tested for cancer. Most polyps are not cancer, but removing them prevents them from ever becoming cancer. If cancer is found, it is very treatable when caught early.

Is it time? Have your first colonoscopy when you turn 50. It could be as long as 10 years until you need another one. If you have a family history of colorectal cancer, talk to your doctor about starting screening earlier.
Take risks to heart

Are you at risk for heart disease?

New heart disease prevention guidelines were written last year. They address risk factors for heart disease and stroke. These include blood pressure, obesity, cholesterol and lifestyle. Your age, gender, race and family history are also considered.

The new guidelines suggest that providers use an online risk calculator. Then, your provider will work with you to reduce your risk if needed. This could include lifestyle changes and/or medication.

Your target numbers for blood pressure and cholesterol may be different from what they used to be. They are now specific to you.

See your PCP. Ask your PCP about your heart disease risk factors. Learn more about the new guidelines at Heart.org.

Know the signs

Strokes happen when a blood vessel in the brain bursts or is blocked. Depending upon which brain areas are affected and how long it was before treatment began, stroke survivors may suffer mild to severe disabilities.

Knowing the symptoms of stroke can help you get medical help fast. Symptoms include sudden:
- numbness or weakness of face, arm or leg;
- confusion, trouble speaking or understanding;
- vision changes in one or both eyes;
- trouble walking or staying balanced;
- severe headache;
- nausea or vomiting.

There are three simple tasks that can help you determine if someone is having these symptoms. If someone is having a stroke, he or she may not be able to:
1. smile;
2. raise both arms; or
3. coherently speak a simple sentence.

Act fast. Call 911 at the first sign of a possible stroke. Quick treatment is essential.
Sneezing season

Does your child seem to get a lot of colds in the spring? Is your child’s asthma worse in the summer? Your child could have seasonal allergies, also called hay fever. Seasonal allergies cause symptoms such as:
- sneezing;
- runny nose;
- itchy nose or throat;
- coughing;
- wheezing or worsening asthma; or
- red, itchy or watery eyes.

Airborne pollens and molds trigger seasonal allergies. Plants and trees release their pollens and molds at different times. A child may only be allergic to certain kinds of plants and trees, and children may react differently to these triggers. That is why one child may have itchy eyes in May and another child sneezes often in July. If you think your child may have seasonal allergies, talk to his or her provider.

Learn more. To learn more about allergies and other children’s health topics, visit KidsHealth.org.

What to do when your child has a sore throat

Children often get sore throats. They can mean the beginning of a cold or virus. They usually go away on their own.

Sometimes, a sore throat can mean your child has strep throat. With strep throat, your child will likely have a fever. He or she might also have a stomachache, headache or red and white patches in the throat. If you think your child may have strep throat, take him or her to the doctor. The doctor will do a strep test.

Strep throat is caused by bacteria. It needs to be treated with antibiotics. It is contagious until one day after your child starts taking medicine. If your child is prescribed antibiotics, it’s important to finish the whole prescription, even after he or she feels better. Otherwise, some bacteria may be left and the infection can come back. Untreated or incompletely treated strep can cause serious health problems, like scarlet fever or blood infections.
UnitedHealthcare has teamed up with Sesame Workshop to create Lead Away! This program gives families information on preventing lead poisoning. Make sure your whole family knows these simple steps to stay safe from lead.

1. **STAY AWAY FROM DUST.** Tell your child not to touch dusty things. You can help keep lead away by wet-dusting and wet-mopping regularly.

2. **LEAVE YOUR SHOES AT THE DOOR.** Taking shoes off at the door helps keep lead away from your home. It’s an easy way to make sure that dirt and dust stay outside.

3. **WASH YOUR HANDS BEFORE YOU EAT.** Show your child how to wash his or her hands well with soap and warm water. Together, wash your hands for at least 20 seconds. Try singing “Twinkle, Twinkle, Little Star” and keep scrubbing until you’re done!

A blood test can help you find out if your child has any lead in his or her body. It’s important to know so you can make sure your child gets help if he or she needs it. Check with your doctor about the best time to test your child. Usually, children are tested at ages 1 and 2.