



Breathe easy



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Understand your asthma medicines.

When you have asthma, taking the right medicine at the right time is really important. It can help you breathe better. That will let you do more of the things you enjoy.

Most people with asthma need two kinds of medicines:

Long-term control medicines help keep down swelling inside your airways. You'll take these drugs every day to help prevent asthma attacks. Control medicines might come in a pill or an inhaler. That's a device that lets you breathe in the medicine through your mouth.

Rescue medicines relax the muscles around your airways. That makes it easier for you to

breathe when you're having an asthma attack. Rescue medicines are inhaled.

If you need an inhaler, ask your doctor or pharmacist to show you the right way to use it. That will help you get the most out of your medicine.

Follow your asthma action plan

Your asthma action plan spells out what medicines to take

and when. It also tells you what steps to take if you feel your asthma getting worse.

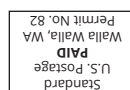
Don't have an action plan?

You can get one from your doctor. See a sample at **MoreHealth.org/ActionPlan** and take it to your next doctor visit.

Sources: American Lung Association; National Heart, Lung, and Blood Institute

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Could it be asthma? How to spot the symptoms.

Think about how hard it would be to breathe through a straw for minutes or hours on end. That's how breathing can sometimes feel for people who have asthma. Asthma is a chronic lung disease that causes the airways to narrow. This can make it hard to breathe.

More than 25 million Americans now live with asthma, and that number continues to rise. And while asthma affects people of all ages, it most often starts when you're a kid.

It's important to spot the symptoms of asthma and to get medical help for it.

What are the signs?

Sometimes asthma symptoms are mild and go away on their own. But at other times, symptoms can get worse. When this happens, it could bring on an asthma attack.

Common asthma symptoms include:

- Coughing
- Wheezing
- Chest tightness
- Shortness of breath

Not all people with asthma have the same symptoms. And having these symptoms doesn't always mean someone has the disease.

If you think you have asthma, see your doctor. He or she can find out if you have the disease by:

- Looking at your health history
- Doing a physical exam
- Performing a simple lung function test

What causes it?

The cause of someone's asthma isn't always known. But a number of things — known as triggers — can bring on symptoms or make them worse. Common triggers include:

- Allergens, such as dust mites; animal dander; mold; and pollens from trees, grasses and flowers
- Cigarette smoke, air pollution and certain chemicals
- Respiratory infections
- Physical activity
- Stress

If you do have asthma, your doctor can help you find out

Treating asthma

There is no cure for asthma. But it can be managed well if you learn how to control your asthma. It's important to get ongoing care and watch for signs that the disease is getting worse.

Asthma is treated with two types of drugs:

- **Quick-relief drugs.** These provide temporary relief from asthma symptoms.
- **Long-term control drugs.** These are taken daily to control airway swelling.

It's important to take your asthma drugs the right way. So be sure to follow your doctor's instructions.

Most of the time you can treat asthma symptoms on your own. But get medical help right away if you:

- Have trouble walking or talking because you are out of breath
- Develop blue lips or fingernails

By working with your doctor and learning how to manage your asthma, you can breathe freely and live an active life.

what your triggers are. You can then learn how to avoid them.

Sources: American Academy of Allergy, Asthma & Immunology; National Heart, Lung, and Blood Institute

Reaching for those tissues again? It could be hay fever.

You're sneezing and coughing. And your eyes are watery, red and itchy. Then there's that runny, stuffy nose. Maybe you remember having the same miserable symptoms last year when the seasons changed.

What gives?

You may have seasonal allergies — or what's commonly called hay fever.

Pollen could be your problem

If you do have hay fever, it doesn't necessarily mean you're allergic to hay. The culprit could just as easily be a tree. That's because a variety of airborne pollens can set off allergy symptoms, depending on your location and the time of year. And one thing you'll notice is that those symptoms arrive with the seasons.

According to the American Academy of Allergy, Asthma & Immunology, hay fever is often triggered by:

- Tree pollen in early spring
- Grasses during late spring and early summer
- Weeds in late summer and fall



Pollen is usually harmless. But if you have hay fever, your immune system mistakes pollen for an invader, triggering the release of chemicals (such as histamine) that lead to those uncomfortable symptoms.

Finding relief

If you think you might have allergies, tell your doctor. You may need a skin test or blood test to learn what you're allergic to. Then your doctor can recommend a treatment plan, which may include:

Avoiding your allergy triggers. Try to spend less time outdoors when pollen counts are high.

You can find pollen counts online or get them through apps on your smartphone.

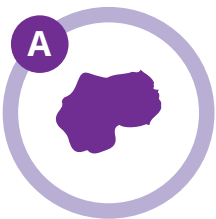
Taking over-the-counter or prescription medicines. Options include nasal steroid sprays and antihistamine pills. These medications generally work best when you start them just before allergy season begins.

What about allergy shots?

Allergy shots (immunotherapy) might be another option. It takes time, but the shots can build up your body's resistance to specific hay fever triggers. Many people who get allergy shots see their symptoms improve or even disappear.

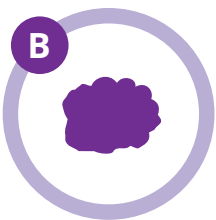
The ABCDEs of melanoma.

Melanoma is the most deadly form of skin cancer. These ABCDEs can help you tell if you should see a doctor about a mole or spot. Even one of these signs is a reason to see a doctor right away.



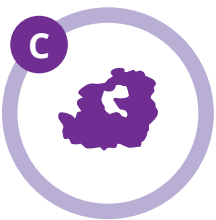
A Asymmetry

Half of the mole or spot is unlike the other half.



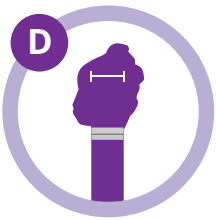
B Border

It has an irregular or undefined border.



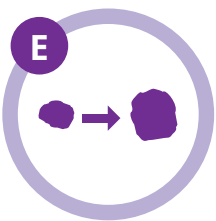
C Color

The color changes from one area to another.



D Diameter

The mole or spot is larger than a pencil eraser. (Can be smaller.)



E Evolving

It looks different from others on your body or is changing.

Source: American Academy of Dermatology

Q & A: Learn the facts about melanoma.

You may have heard that melanoma is the most serious type of skin cancer. And that's definitely true. But why is that? Read on for answers to this and other must-know questions about melanoma:

Q: *What is melanoma?*

A: Melanoma is a type of skin cancer that starts in the melanocytes, cells that give skin its color.

Q: *Why is it so dangerous?*

A: Melanoma is far less common than other types of skin cancer, such as squamous and basal cell carcinomas. But melanoma is more likely to spread deep into the skin or to other parts of the body if it isn't treated in time. It can even be fatal if it is diagnosed at a late stage.

Q: *Who is at risk for melanoma?*

A: You are more likely to get melanoma if you have fair skin that burns easily. But even people with dark skin can get melanoma. In fact, anyone can get this disease. One of the biggest risk factors is exposure to ultraviolet (UV) light over the years — including light from the sun, sunlamps or tanning beds. Having many

moles can also raise your risk of melanoma.

Q: *Can you prevent it?*

A: You can reduce your risk by limiting UV exposure. When spending time outdoors, wear sunscreen with a sun protection factor (SPF) of 30 or higher. Whenever possible, stay in the shade and wear protective clothing and gear, like long-sleeved shirts, hats and sunglasses. And don't try to tan — from the sun's rays or in a tanning booth.

Q: *What does melanoma look like?*

A: Signs to watch for include a new skin spot or a change in an existing mole.

When evaluating moles for possible melanoma, remember the ABCDEs of melanoma: See the infographic on the left for details.

Tell your doctor if you notice any of these signs or if you notice other moles or skin changes that itch, ooze, bleed or just look abnormal. Melanoma can be successfully treated when caught early.

Sources: American Academy of Dermatology; National Cancer Institute

Act F.A.S.T.

Know the sudden signs of stroke

F **Face drooping.**
Does one side of the face droop? Is it numb? Ask the person to smile. Is the smile uneven?

A **Arm weakness.**
Is one arm weak or numb? Ask the person to raise both arms. Does one arm drift downward?

S **Speech difficulty.**
Is speech slurred or hard to understand? Can the person repeat back a simple sentence?

T **Time to call 911 —**
even if the signs go away. Getting fast treatment may help limit damage to the brain.

Other stroke symptoms

Sudden:

- Numbness or weakness, especially on one side of the body
- Confusion
- Difficulty seeing with one or both eyes
- Trouble walking or dizziness
- Severe headache

Source: American Stroke Association



Stroke: Why the need for speed.

Maybe the most important thing you should know about stroke is that it is always an emergency. *Always.*

A stroke can occur when a blood vessel that feeds oxygen and blood to the brain is blocked by a clot. That's called an ischemic stroke, and it's the most common kind. According to the American Stroke Association (ASA), ischemic strokes make up about 87% of strokes.

A stroke also can occur when a blood vessel ruptures, spilling blood into the surrounding brain. This is called a hemorrhagic stroke. Hemorrhagic strokes account for about 13% of all strokes, according to the ASA.

Why is stroke always an emergency?

A stroke starves the brain of the nutrients it needs. If a stroke interrupts blood flow to a particular part of the brain that controls a body function, that part of the body won't work normally.

That's why stroke is a leading cause of disability in the U.S. It kills brain cells. Quick medical treatment is crucial to minimize the long-term effects of stroke and to reduce the risk of death.

The best way to get emergency medical help for a stroke is to call **911**.

How to travel well with diabetes.

Dreaming of a getaway? You can't take a vacation from diabetes, but you can take care of yourself when you travel. To help things go smoothly, check out these tips before you leave home:

Schedule a checkup. See your doctor before your trip to make sure you're healthy enough to travel. Plus, if you need vaccines, the doctor can help you get up-to-date.

Be sure to ask for:

- A letter saying you have diabetes. It should list the medicines and supplies you use. This could help with airport screening.
- A prescription for your diabetes medicines in case you run low.
- Tips on adjusting your medicines while you're away.

Your doctor can also help you check if there are any travel warnings for your destination.

Take extra supplies. Pack double the medicine and supplies you think you'll need. Luggage can get lost, so keep these items with you in a carry-on bag. Don't forget:

- Medicines
- Test strips, needles and glucose-meter batteries
- Tablets to treat blood-sugar lows
- Your medical ID bracelet or necklace

Tell airport screeners you have diabetes. Keep your medicines in their original containers apart from your other luggage. Visit [TSA.gov](https://www.tsa.gov) to learn more about what you can bring.

Take care of insulin. Extreme heat or cold can weaken insulin. Don't store it in a glove box or trunk, in checked luggage, or in direct sunlight.

Bring food to eat. Meals might not always be served when you need to eat. Pack healthy snack options like fruits, nuts, granola bars or peanut butter crackers. If you'll be flying, call the airline and ask for a low-sugar meal.

Check your blood sugar often. Will you be more active than usual on vacation? The extra exercise could affect your blood sugar level.

Sources: American Association of Diabetes Educators; American Diabetes Association; Centers for Disease Control and Prevention



Did you know that Diabetes Self-Management Education (DSME) is a covered benefit for Aetna Dual members?

Aetna Better Health of Ohio offers diabetes education to members at no cost.

The education will provide information on nutrition, physical activity and medications in a one-on-one, group or virtual format.

Talk to your doctor about your interest in the education and they will refer you to the program that is best for you.

If you have any questions about the benefit, please contact your care manager.

Chile and lime chicken potato tacos.

Makes 4 servings.

Ingredients

- ½ pound Yukon Gold or red potatoes, cut into bite-size cubes
- Olive oil cooking spray
- ½ cup onion, chopped
- ½ pound boneless, skinless chicken breast, diced
- ¼ cup bell pepper, finely chopped
- ½ cup Monterey Jack cheese, low-fat, shredded
- 1 teaspoon Mexican seasoning blend
- ½ cup red chile enchilada sauce
- 8 6-inch corn tortillas, warmed
- 1 cup tomatoes, diced
- 1 cup romaine lettuce, shredded
- 2 radishes, sliced
- Salsa, low sodium (optional)



Directions

- Place potatoes in microwave-safe bowl and cover with plastic wrap. Microwave on high for 5 to 7 minutes.
- Spray a large skillet liberally with cooking spray. Add potatoes and onion to skillet. Cook over medium-high heat for 5 minutes, stirring and coating with cooking spray occasionally.
- Stir in chicken, pepper and seasoning, and cook for 5 minutes more.
- Add enchilada sauce and simmer for 5 minutes.

- Place an equal amount of cheese on each tortilla, and heat in a skillet until cheese is melted.
- Add potato mixture, tomatoes, romaine lettuce and radishes to each tortilla. Serve.

Nutrition information

Serving size: ¼ recipe. Amount per serving: 320 calories, 44g carbohydrates, 6g total fat (2g saturated fat), 40mg cholesterol, 5g dietary fiber, 20g protein, 540mg sodium.

Source: Produce for Better Health Foundation

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In addition, your health plan provides auxiliary aids and services, free of charge, when necessary to ensure that people with disabilities have an equal opportunity to communicate effectively with us. Your health plan also provides language assistance services, free of charge, for people with limited English proficiency. If you need these services, call Customer Service at the phone number on your benefit ID card.

If you believe that we have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our Grievance Department (write to the address listed in your Evidence of Coverage). You can also file a grievance by phone by calling the Customer Service phone number listed on your benefit ID card (TTY: 711). If you need help filing a grievance, call Customer Service Department at the phone number on your benefit ID card.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at https://ocrportal.hhs.gov/ocr/cp/complaint_frontpage.jsf.

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