



Aetna Better Health® of New Jersey



Spring/Summer 2020

Your advance directive: A crucial piece of paperwork.

Imagine you're so sick or hurt that you can't speak for yourself. Your providers may be unclear about the type of medical care you want.

That's why you need an advance directive. It's a legal document. No matter how ill you are, it can spell out what care you want — and don't want. It can state your wishes about getting:

- CPR (if your heart stops beating or your breathing stops).
- Feedings through a tube.
- Long-term care on a breathing machine.
- Tests, medicine or surgeries.
- Blood transfusions.

There are two main types of these documents:

A living will. This gives legal instructions for your care. It's not the same as a will when a person dies.

A health care power of attorney.

This lets you name someone else to make health care decisions for you if you aren't able to do so. It doesn't give anyone the power to make other financial or legal decisions for you.

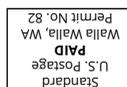
Advance directives aren't just for older adults. Serious medical problems can happen at any age.

Your provider can tell you more about advance directives. Once you have one, be sure to give copies to your family, your provider and the person you name as your health care agent.

You can change your decisions at any time. However, if you make changes in an advance directive, be sure to tell your provider and loved ones.

Source: National Institutes of Health

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Lower your risk of falling.

You can make small changes to help prevent falls. Each year, 1 in 4 older adults will fall. Falling can lead to broken bones, trouble getting around and other health problems — especially if you are age 65 or older.

A fracture (broken bone) can cause pain and disability. It can also make it hard to do everyday activities without help, like cooking a meal or taking a shower. Broken hips are a major cause of health problems and death among older adults.

You don't have to be afraid of falling. Take these steps to prevent falls:

- Talk to your provider about falls and how to prevent them.
- Do exercises to improve your balance and leg strength.
- Review all medicines with your provider or pharmacist. Some medicines can make you dizzy or sleepy.
- Get your vision checked by an eye doctor every one to two years. Update your glasses or contact lenses when your vision changes.
- Make your home safer. For example, add grab bars inside and outside your bathtub or shower — and put railings on both sides of stairs.
- Area rugs can also cause trips, slips or falls. Remove any to avoid getting hurt.
- Keep kitchen items you use often in easy-to-reach cabinets.

Follow these safety tips:

- Always wear shoes with non-slip soles, even inside your home. Don't walk barefoot or wear slippers or socks instead of shoes.
- Stand up slowly after sitting.
- Sit up first and then stand up slowly after lying down.

Source: Health.gov



How to choose a disability-friendly provider.

Do you have a provider you see for regular check-ups? That's a key part of living well if you have a disability.

A primary care provider can help you stay healthy and feel your best. You can get help with things that matter to you, too, like:

- Staying active.
- Getting around.
- Easing pain.
- Managing stress.

Pre-check-up checklist

You deserve a provider you trust and feel at ease with. Here are a few things to look for:

- Are the office and exam rooms easy to get to? What about parking spaces? Are there ramps or elevators for a wheelchair, scooter or walker?

- Are the exam rooms disability-friendly? Is it safe and easy for you to get to and from the exam table or chair?

- Is the office staff helpful? Do they make you feel comfortable?

- Do they communicate well with you? Do they provide information in a way you can understand?

- Does the provider have experience with your disability?

- Does the provider spend enough time with you?

For help finding a provider in your network, call **1-855-232-3596 (TTY: 711)**.

Sources: American Academy of Family Physicians; Centers for Disease Control and Prevention; National Institute on Aging

Caring for an aging parent?

How to reduce your risk of caregiving burnout.

Stepping into the role of caregiver for your older parent can be very rewarding. It's heartfelt work — and it's also often stressful work.

Over time, too much stress can wear anyone down. If the stress becomes overwhelming, you could begin to experience a sense of exhaustion and hopelessness that experts call caregiver burnout. At that point, you can't properly take care of your own health, much less tend to your parent's health and needs.

Am I burned out?

The symptoms of caregiver burnout can include:

- Eating too much or too little or drinking or smoking more.
- Feeling tired or run down a lot.
- Having trouble concentrating.
- Feeling irritable or resentful toward your parent.
- Neglecting your own needs.

Caregiver stress and burnout can also contribute to mental health problems, like depression, and can even harm your physical health.

Take action

Burnout often happens when caregivers don't take time to care for their own physical and emotional health. Here are some tips from experts that can help reduce your risk for burnout and make you a better, happier caregiver.

Ask for caregiving help. Other family members or even friends may be willing to help with some daily tasks — like driving your parent to medical appointments or running errands.

Nourish your health. Eat a healthy, balanced diet and get enough exercise and sleep. If you can, take your parent on short walks.

Make time for hobbies or other activities you enjoy. Try to take at least a few minutes each day to unwind and recharge.

Get relief. Ask a relative or close friend to stay with your parent, or consider using a respite service (such as an adult day center) so you can enjoy a break.

Stay connected. It's important to keep up your friendships. If you can't leave the house, invite a friend over for coffee or lunch.

Join a support group in person or online. Share your feelings with other people who may know what you're going through and who can offer encouragement and possible solutions to ongoing problems.

Schedule check-ups with your provider. Speak up if you feel sad, hopeless or overwhelmed.

Sources: American Heart Association; Family Caregiver Alliance; HelpGuide





OLDER ADULTS



What's your move?

Physical activity can make daily life better.

When you're active and strong, it's easier to:



Do everyday tasks, like chores and shopping



Keep up with the grandkids



Stay independent as you get older

And it has big health benefits, too.

- ✓ Less pain
- ✓ Better mood
- ✓ Lower risk of many diseases

How much activity do I need?

Moderate-intensity aerobic activity

Anything that gets your heart beating faster counts.



Break it up over the whole week however you want!

Physical activity can help manage many health problems.

✓ Reduce symptoms of arthritis, anxiety, and depression

✓ Help keep diabetes and high blood pressure under control

Just getting started?

No problem — start slow and do what you can. **Even a 5-minute walk has real health benefits.** Build up to more activity over time.

Mix in stretches and activities to improve your balance, too! Keep your body flexible and help lower your risk of falls.

And all sorts of activities count.



Even things you have to do anyway



Even things that don't feel like exercise

You can get more active.

No matter your age, you can **find a way that works for you.**



So take the first step. Get a little more active each day. **Move your way.**

Find tips to get moving and build a weekly activity plan.

health.gov/MoveYourWay/Activity-Planner



SPOTTING THE SIGNS OF ELDER ABUSE

Abuse can happen to any older person, by a loved one, a hired caregiver, or a stranger. Abuse can happen at home, at a relative's home, or in an eldercare facility.



Watch for these signs of abuse:



Seems **depressed, confused, or withdrawn**



Isolated from friends and family



Has **unexplained bruises, burns, or scars**



Appears **dirty, underfed, dehydrated, over- or undermedicated,** or not receiving needed care for medical problems



Has **bed sores** or other preventable conditions



Recent **changes in banking or spending patterns**

Talk with the older adult and then contact the local Adult Protective Services, Long-Term Care Ombudsman, or the police.

Visit <https://www.nia.nih.gov/health/topics/elder-abuse> to learn more about elder abuse and how to get help.



Cognitive decline: Take the time to talk.

If you have a loved one with dementia or another cognitive problem, talking can be hard.

Misunderstandings can occur on both sides. That can upset everyone.

Try these tips:

- Turn off the radio or TV, or move to a quiet room. You want to lessen distractions.
- Avoid surprise. Look the person in the eyes before touching or speaking to him or her.
- Call the person by name. (You might want to identify yourself too.)
- Speak slowly in a calm voice. Avoid talking to the person like he or she is a child.
- Remember the power of body language. For example, don't cross your arms. Keep your face friendly.

- Ask simple questions that can be answered with a yes or no. If the person doesn't seem to understand, repeat the question using the same wording.
- Use familiar names for people instead of "she" or "they." Pronouns can confuse someone with dementia.
- Be patient. If it seems the person is trying to answer, it's OK to suggest words.
- Use touch and other nonverbal cues. It can help keep the person focused on you and what you're saying.

Ask others for help. Seek support from family members and friends. If you're feeling overwhelmed, reach out to your provider. Ask your loved one's provider for resources.

Sources: Family Caregiver Alliance; National Institutes of Health

New Jersey state resources for individuals and caregivers.

The Jersey Assistance for Community Caregiving Program (JACC). The Jersey Assistance for Community Caregiving Program (JACC) provides in-home services to enable an individual, at risk of placement in a nursing facility and who meets income and resource requirements, to remain in his or her community home. By providing a uniquely designed package of supports for the individual, the JACC delays or prevents placement in a nursing facility. Call toll-free at **1-877-222-3737** or visit **State.NJ.US/HumanServices/DOAS/Services/JACC/**.

Stress-Busting Program for Family Caregivers. It is a nine-week program that consists of weekly, 90-minute sessions with a small group of caregivers. Caregivers learn many new skills, including information about the disease process, stress management techniques and a variety of other content. It is designed to improve the quality of life of family caregivers who provide care for persons with chronic diseases and to help caregivers manage their stress and cope better with their lives. To find a class in your area, call the Division of Aging Services (DoAS) at **609-588-6654** or visit **CaregiverStressBusters.org**.

Statewide Respite Care Program. This program provides respite care services for elderly and functionally impaired persons age 18 and older to relieve their unpaid caregivers of stress arising from the responsibility of providing daily care. A secondary goal of the program is to provide the support

necessary to help families avoid making nursing home placement of their relatives. To reach the Statewide Respite Care Program in your county, call toll-free at **1-877-222-3737** or visit **ADRCNJ.org**.

Project Healthy Bones. This 24-week exercise and education program for people with, or at risk of, osteoporosis includes exercises that target the body's larger muscle groups to improve strength, balance and flexibility. Call **609-588-6654** or visit **State.NJ.US/HumanServices/DOAS/Services/PHB/Index.html**.

Move Today. Move Today is a 30-minute to 45-minute non-aerobic exercise class designed to improve flexibility, balance and stamina. Participants assess their health, physical well-being and intent to make behavior changes before and upon completion of the program. The exercises and guidelines are based on current nationally recognized standards and science. Please visit **State.NJ.US/HumanServices/DOAS/Services/Move/Index.html**.



Speak up about late-life depression.

Growing older brings changes. Dear friends may move away. Retirement may not be what we imagined. We might face a sudden health problem.

It's normal to feel uneasy or even sad at times like this. But most of us adjust and feel like ourselves again.

Depression is different. It can make you feel so sad, empty or anxious that it's hard to function. It can be hard to sleep, eat, concentrate, work — or enjoy life at all. And it can linger.

Could you be depressed?

If you or a loved one is struggling with depression, here are three crucial facts to know:

1. **Depression isn't a sign of weakness or a character flaw.** It is a medical illness. You can't simply snap out of it.
2. **Treatment can help.** Often depression can be treated with counseling, medicine that acts on brain chemicals, or both.

3. **The earlier treatment starts, the better.** Left untreated, depression can last for weeks, months or even years. But treatment can start working in a matter of weeks.

This last point is why it's so important to let a provider know right away if there's any chance you're depressed. Reaching out can help you heal.

Sources: American Academy of Family Physicians; National Institute on Aging

Seven facts about opioids everyone should know.

It's vital to have the facts when it comes to prescription opioids. The more you know, the likelier you are to get the best pain control safely — which may not include opioids at all. Check out the following info and tips:

1. **Not every pain problem requires an opioid.**
Ask your provider about other ways to treat your pain. For example, nonopioid medications and physical therapy have fewer risks and side effects. Sometimes these other treatments may work better than opioids.
2. **Opioids have serious risks, including addiction.**
Tell your provider if you have a personal or family history of addiction. This can increase your risk of opioid addiction.



3. **You must follow directions when taking opioids.** If you and your provider decide opioids are right for you, it is extremely important to take them just as prescribed. For instance, never take opioids in greater doses or more often than you should. This can cause an overdose, which may cause someone to stop breathing and die.
4. **Opioids, alcohol and some medicines don't mix.** Combining opioids with alcohol or certain medicines can increase the risk of an overdose. It's especially dangerous to take opioids and anti-anxiety medicines (such as Xanax or Valium), sleeping pills (such as Lunesta or Ambien) or muscle relaxants (such as Soma or Flexeril).
5. **You should understand possible side effects before taking an opioid.** For instance, opioids can cause constipation, nausea and vomiting, depression, decreased sex drive, and (ironically) increased sensitivity to pain. In addition, some people need more of their opioids, over time, to get the same effect.
6. **Opioids can fall into the wrong hands.** You should store your opioids in a secure location, such as a locked cabinet. Never share your opioids with anyone else. If you have leftover pills when you finish treatment, ask your provider or pharmacist what to do with them. All of this helps reduce the risk of opioid misuse.
7. **Opioids are effective at managing pain in cancer patients.** Pain is a common side effect of cancer and its treatment. Federal guidelines for limiting the use of opioids to control pain don't apply to people with cancer.

Sources: American Society of Clinical Oncology; Centers for Disease Control and Prevention

24-hour nurse line.

Our members can call our toll-free medical advice line at **1-855-232-3596 (TTY: 711)** 24 hours a day, 7 days a week. Trained medical professionals answer every call.

They are always ready to help with medical questions and problems. You and your family can get health advice whenever you need it, at no cost to you.



Two types of arthritis: What's the difference?

Most people know that arthritis causes a lot of aches and pains, but what you might not know is arthritis isn't just one disease.

Here's a quick look at two of the most common forms of arthritis and some of the ways in which they differ.

Osteoarthritis (OA)

This is the most common type of arthritis. It's the one most people think of when they hear the word *arthritis*. OA most often strikes the hands, hips, knees, lower back, neck and big toe. It happens when the cushioning cartilage between bones within a joint slowly wears away.

OA can cause:

- Pain.
- Stiffness.
- Swelling.
- Reduced range of motion in a joint.

OA typically occurs with age, but excess weight, joint injuries, genes and being female can raise your risk too.

Rheumatoid arthritis (RA)

RA is an autoimmune disease. It happens when the body's own immune system attacks the joints and other tissues by mistake.

RA typically strikes joints in the hands, feet, wrists, elbows, knees and ankles. Joints on both sides of the body (such

as both hands) may be affected at the same time.

It can cause:

- Pain, stiffness and swelling in more than one joint.
- Joints that feel stiff when you wake up.
- Fever.
- Tiredness.
- Loss of appetite.

People with RA may have symptom flare-ups followed by times when they feel better.

Take control of arthritis

If you think you might have arthritis, let your provider know. With RA, it's especially important to find out as soon as possible. The reason? Early treatment may help prevent further joint damage.

While neither RA nor OA can be cured, both can be managed. Treatments can include:

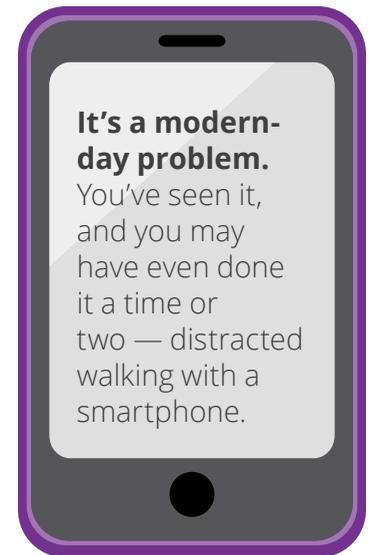
Medicines. Medicines for RA can help slow the disease and prevent joint damage. Pain medicines help ease the symptoms of OA.

Lifestyle changes, such as regular exercise (like walking or swimming) and weight control.

Sources: Arthritis Foundation; Centers for Disease Control and Prevention

A heads-up...

About distracted walking.



Talking on the phone.

Sending texts.

Listening to music.



The danger:

falls, stumbles, collisions — and potentially serious injuries.

Phones down, heads up! Walk this way:

- **Keep your focus** on what's in front of and around you.
- **Stop walking** and move to a safe place — to check your phone, text or take calls.
- **Skip the earbuds** or turn down the volume to hear what's going on around you.

AETNA BETTER HEALTH® OF NEW JERSEY

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 - o Qualified sign language interpreters
 - o Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - o Qualified interpreters
 - o Information written in other languages

If you need a qualified interpreter, written information in other formats, translation or other services, call the number on your ID card or **1-800-385-4104**.

If you believe that Aetna has 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 Civil Rights Coordinator at:

Address: Attn: Civil Rights Coordinator
4500 East Cotton Center Boulevard
Phoenix, AZ 85040
Telephone: **1-888-234-7358 (TTY 711)**
Email: MedicaidCRCoordinator@aetna.com

You can file a grievance in person or by mail or email. If you need help filing a grievance, our Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW Room 509F, HHH Building, Washington, D.C. 20201, 1-800-368-1019, 1-800-537-7697 (TDD).

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

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ENGLISH: ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call the number on the back of your ID card or **1-800-385-4104 (TTY: 711)**.

SPANISH: ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al número que aparece en el reverso de su tarjeta de identificación o al **1-800-385-4104 (TTY: 711)**.

CHINESE: 注意: 如果您使用繁體中文，您可以免費獲得語言援助服務。請致電您的 ID 卡背面的電話號碼或 **1-800-385-4104 (TTY: 711)**。

KOREAN: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 ID 카드 뒷면에 있는 번호로나 **1-800-385-4104 (TTY: 711)** 번으로 연락해 주십시오.

PORTUGUESE: ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para o número que se encontra na parte de trás do seu cartão de identificação ou **1-800-385-4104 (TTY: 711)**.

GUJARATI: ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાયતા સેવાઓ તમારા માટે ઉપલબ્ધ છે. તમારા આઈડી કાર્ડની પાછળ આપેલા નંબર પર અથવા **1-800-385-4104** પર કોલ કરો (TTY: 711).

POLISH: UWAGA: Jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer podany na odwrocie Twojego identyfikatora lub pod number **1-800-385-4104 (TTY: 711)**.

ITALIAN: ATTENZIONE: Nel caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuita. Chiamare il numero sul retro della tessera oppure il numero **1-800-385-4104 (utenti TTY: 711)**.

ARABIC: ملحوظة: إذا كنت تتحدث باللغة العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل على الرقم الموجود خلف بطاقتك الشخصية أو على **1-800-385-4104 (للصم والبكم: 711)**.

TAGALOG: PAUNAWA: Kung nagsasalita ka ng wikang Tagalog, mayroon kang magagamit na mga libreng serbisyo para sa tulong sa wika. Tumawag sa numero na nasa likod ng iyong ID card o sa **1-800-385-4104 (TTY: 711)**.

RUSSIAN: ВНИМАНИЕ: если вы говорите на русском языке, вам могут предоставить бесплатные услуги перевода. Позвоните по номеру, указанному на обратной стороне вашей идентификационной карточки, или по номеру **1-800-385-4104 (TTY: 711)**.

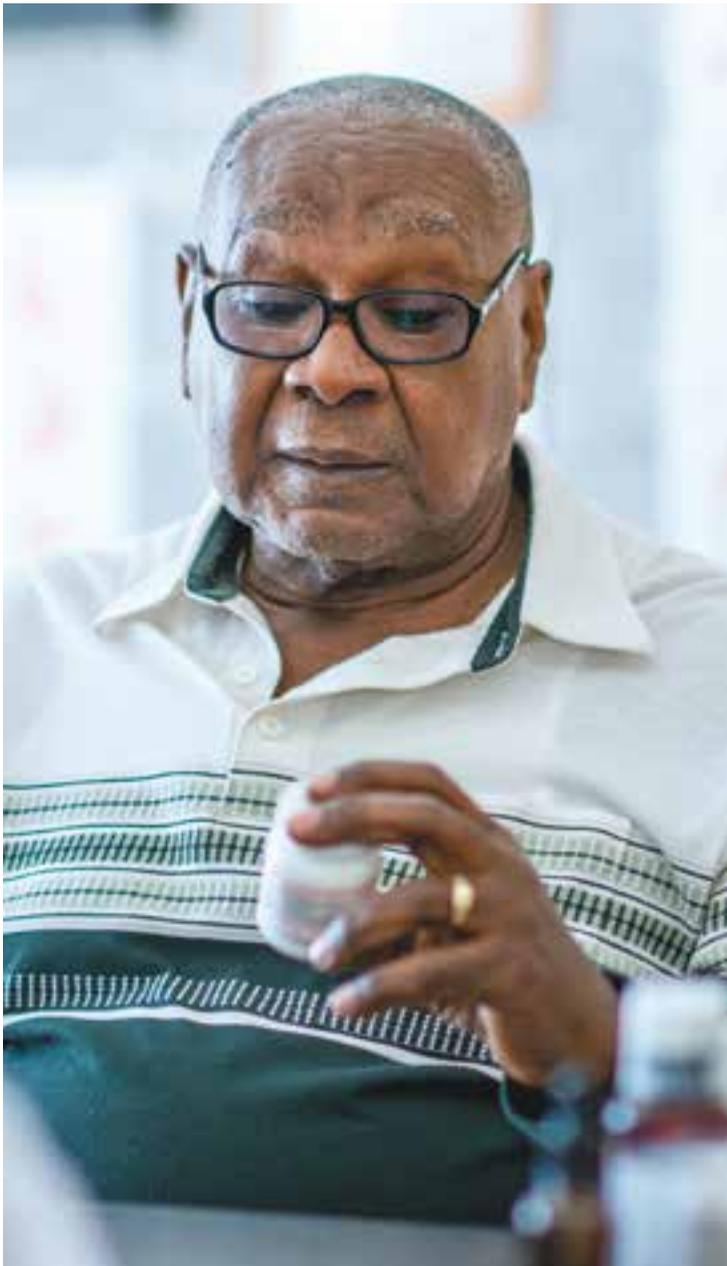
FRENCH CREOLE: ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd nan lang ou pale a ki disponib gratis pou ou. Rele nan nimewo ki sou do kat Idantifikasyon (ID) w la oswa rele nan **1-800-385-4104 (TTY: 711)**.

HINDI: ध्यान दें: यदि आप हिंदी भाषा बोलते हैं तो आपके लिए भाषा सहायता सेवाएं नि:शुल्क उपलब्ध हैं। अपने आईडी कार्ड के पृष्ठ भाग में दिए गए नम्बर अथवा **1-800-385-4104 (TTY: 711)** पर कॉल करें।

VIETNAMESE: CHÚ Ý: nếu bạn nói tiếng việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Hãy gọi số có ở mặt sau thẻ id của bạn hoặc **1-800-385-4104 (TTY: 711)**.

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URDU: توجہ دیں: اگر آپ اردو زبان بولتے ہیں، تو زبان سے متعلق مدد کی خدمات آپ کے لئے مفت دستیاب ہیں۔ اپنے شناختی کارڈ کے پیچھے موجود نمبر پر یا **1-800-385-4104 (TTY: 711)** پر رابطہ کریں۔



Take with care.

Your new medicine checklist.

Your provider is prescribing you a new medicine. What should you do next?

- Ask the name of the medicine.** This way, you'll notice if the pharmacy gives you something different.
- Know why you're taking it.** You're more likely to use a medicine correctly if you know how it's helping you.
- Be clear on how to take it.** For example, ask:
 - What side effects might I have?
 - Should I take it before, with or after meals?
 - Is there anything I should avoid while taking this?
 - What should I do if I forget a dose?
- Make sure your provider knows what else you're taking.** Go over a list of all the medicines you're taking — including vitamins and herbal products.
- Read the label — and take it only as directed.** Still have questions? Follow up with your provider or pharmacy. Never stop taking a medicine without talking with your provider first.

 **Store medicines in a secure location. Keep them out of the reach and sight of kids, visitors and pets.**

Sources: BeMedWise Program; U.S. Food and Drug Administration

Contact us



Member Services

1-855-232-3596

24 hours a day,
7 days a week

TTY: 711

AetnaBetterHealth.com/NewJersey

March Vision

1-844-686-2724

TTY: 1-877-627-2456

LIBERTY Dental Plan

1-855-225-1727

TTY: 711

Medical Transportation

(LogistiCare)

1-866-527-9933 (TTY: 1-866-288-3133)

Non-medical Transportation

(Access Link — initial approval may take up to 30 days)

1-800-955-2321 (TTY: 1-800-955-6765)

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