

# myconnection

connecting you to better health & wellness

{ SPRING 2015 | FOR MEMBERS OF NEW MEXICO HEALTH CONNECTIONS }



{ BE INFORMED }

## What's a PCP?

### HEALTH INSURANCE TERMS YOU SHOULD KNOW

**+** **It's easy** to become confused in the healthcare system, especially if you have health insurance for the first time in a while—or ever! In each issue of *My Connection*, we'll define a different term that you're likely to come across as a New Mexico Health Connections member.

What is a PCP? PCPs are doctors and other qualified providers who manage your healthcare needs. They provide services such as annual exams, routine immunizations (vaccines, shots), and treatment for illnesses and injuries.

Why do you need one? Finding and developing a relationship with a PCP will help you and your family get the most out of your health

plan benefits. Seeing your PCP regularly can help you find and treat health problems before they become complicated and costly to treat.

#### Where do I find a PCP?

Our network of PCPs includes doctors, physician assistants (PAs) and certified nurse practitioners (CNPs) in the areas of family medicine, internal medicine and pediatrics. You might be able to choose another type of provider if that provider's scope of practice includes all aspects of primary care and if the provider chooses to accept the responsibilities of a PCP. Note: An OB-GYN or a doctor of Oriental medicine must obtain approval from our medical director to be designated as a PCP.

#### NURSE ADVICE LINE

### Trusted help, whenever you need it

**+** For the times when you have an illness or injury, can't reach your doctor and are not sure what to do, keep this toll-free number handy: **877-725-2552**. NurseAdvice New Mexico has experienced registered nurses available who can offer guidance on your health problem and help you know what steps to take. (For hearing-impaired/TTY help, call **800-659-8331** or **711**.)

### Got a PCP? Let us know!

After you find a PCP, please let us know of your choice. You may do this in one of two ways:

1. Call Customer Service toll-free at **855-7MY-NMHC (855-769-6642)**, Monday through Friday, 8 a.m. to 5 p.m., MST.
2. Log in to our "Member & Provider Login." You will find a link to the portal at the top-right corner of our home page, **www.mynmhc.org**. You can change your PCP at any time in one of the two ways listed above.

#### Find a provider online

Go to **www.mynmhc.org** and click on "Find a Provider" at the top of the page. You can browse the provider directory by provider name or specialty using the "Online Provider Search Tool."

You also can view a PDF of the entire provider network. Please read the search instructions underneath the directory link.

After choosing a PCP, be sure to call his or her office and make sure the PCP is accepting new patients—even if the directory says he or she is. You may have to call several PCP offices before finding one who can see you in a timely fashion. Most PCPs will want you to set up a first visit before they consider you a patient.

# Spreading good health all over New Mexico

Community health workers (CHWs) have been in New Mexico for more than 50 years. They sometimes refer to themselves as community health representatives, *promotoras/promotores de salud* and navigators. But do you know what these professionals do?

Stefanie Vigil, NMHC’s director of Community Health, sat down with Venice Ceballos, CHW, manager of CHW programs for University of New Mexico Project ECHO, to discuss the valuable role CHWs play.

“CHWs have a deep understanding of the cultures, beliefs and languages of the people and areas they serve,” Ceballos says. “They are especially useful in parts of the state with limited or no access to healthcare and resources. They work in a variety of settings: clinics, social service organizations, health insurance companies, on their own or as volunteers. They also work with people and their families in their own homes.”

## Can you help me?

A CHW is able to make complex healthcare information clearer.

“For example, a CHW can talk to someone newly diagnosed with type 2 diabetes,” Ceballos says. “He or she can explain what having diabetes means and how the patient can manage the disease. The CHW can also help a person take charge of his or her own health by identifying appropriate resources in the community.”

Sometimes there is a wide cultural gap between a provider and a patient. CHWs help bridge that gap. They provide the cultural background that is often missing

in the healthcare system. CHWs can also help people find useful resources, such as rides to doctor visits, healthy foods, or ways for handling financial stress.

## State-certified CHWs

Certification through the New Mexico Department of Health for CHWs will soon be available. Certification is voluntary, which means that CHWs won’t be required to become certified. They can also be grandfathered into certification if they show that they meet all of the state’s requirements.

NMHC believes in the value of CHWs. We have partnered with several organizations across the state to provide CHW services to our members. Are you interested in working with one? Call our office at **844-691-9984**.



## Women: You’re covered

**+** Your plan provides benefits for mastectomy-related services. This includes all stages of reconstruction and surgery to achieve symmetry between the breasts. It also includes prostheses and complications resulting from a mastectomy, including lymphedema. These benefits are required by the Women’s Health and Cancer Rights Act of 1998.

Call Customer Service at **855-7MY-NMHC (855-769-6642)** to learn more.

# Make a plan to fight back

## Having surgery? Tips to help prevent infection

This is a given if you’re facing surgery: You want a smooth recovery. So do the doctors, nurses and other healthcare providers taking care of you.

As a result, your medical team will do its very best to reduce your risk of an infection at your surgical site, a rare but possible complication of surgery.

That’s why, for example, your surgeon may start you on antibiotics before your operation and have you continue them for a short time afterward. It’s also why everyone in the operating room wears special masks, gowns and gloves.

And just like your medical team, you should take precautions—before and after your surgery—to stay free of infections. Here’s how you can do that.

### Before surgery:

- Share your history. Tell your surgeon about any medical problems you have. Some, such as diabetes, make you more susceptible to infections.
- Clean with care. Follow your surgeon’s directions about cleaning your skin before your operation.
- Be cautious about shaving. It can irritate your skin and raise your risk of an infection. So don’t shave near where you’ll be operated on.

### After surgery:

- Insist on clean hands. Be sure that all healthcare workers clean their hands before examining you. Also, ask friends and family to do the same before visits.
- Become informed. Before you leave the hospital, make sure you understand how to care for your wound. And always clean your hands before and after caring for it.



- Act quickly. Call your surgeon right away if you have any signs of an infection. These include a fever, cloudy fluid that drains from the surgical site, and pain or redness around the site.

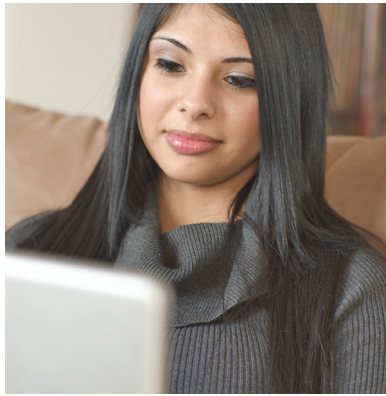
Source: Centers for Disease Control and Prevention



# BEHAVIORAL HEALTH

## 10-minute screening: Are you at risk?

**B**ehavioral health conditions include depression, anxiety, bipolar disorder and post-traumatic stress disorder (PTSD). Our online screening tool, the M3 Clinician, can assess how likely you are to have any of these conditions.



[www.mynmhc.org](http://www.mynmhc.org). Click on “Member & Provider Login” at the top-right of the page. You will need to register and activate your personal NMHC account, if you haven’t already done so. After logging in, scroll down to the “My Health Tools/Resources” section of the home page and click on the “M3 Clinician” link.

You can complete the screening in under 10 minutes. After you finish, you will receive an overall risk score. You can print the score or email it to yourself. If you are at high risk of developing a known behavioral health issue, the M3 Clinician will encourage you to talk to your primary care or behavioral health provider. You may take the screening as often as you like.

To access the M3 Clinician, log in to the member portal. Go to our website,

This service is available to members 18 years and older. By completing the screening, you give NMHC your consent to use your health information. Only NMHC employees in the medical management division, including care managers, have access to your results. Care managers can use your results to help you find resources for specific conditions or healthcare needs that they identify.

## Compounding pharmacies

A compounding pharmacy creates custom-made drugs, also called compounded drugs, to treat individual patients’ needs. Regular pharmacies do not fill prescriptions for compounded drugs. If your doctor writes you a prescription for a compounded drug, you must fill it at a compounding pharmacy.

In April 2015, we are starting a program to credential compounding pharmacies. This program is called the Safe and Effective Compound Use Reassurance Effort (SECURE). We will use SECURE to verify that all network compounding pharmacies meet certain quality and safety standards for compounded drugs. We will post a list of credentialed compounding pharmacies on our website later this year. If a compounding pharmacy is not on the list, it will be considered out-of-network.

# COLONOSCOPY

## Don’t skip this test

**I**t’s a test many people dread, but it has the potential to save lives. We’re talking about a colonoscopy, which is used to screen for colorectal cancer, one of the top causes of cancer deaths in the U.S.

If you’ve been avoiding this test, here are some questions and answers about it that may convince you to give it a try.

### Q Why should I get one?

**A** Colonoscopy can find cancer—or the polyps (abnormal growths) that may become cancer—early, when treatment is often most successful.

It also gives your doctor immediate access to polyps, so they can be removed right away. That’s not true with other colon cancer screening methods, which all require a follow-up colonoscopy if polyps or other problems are found.

### Q When and how often should I be tested?

**A** Screening for people at average risk of colorectal cancer starts at age 50. If the first test is clear, get a follow-up one in 10 years. If

not, get retested in five years.

People at higher risk, including people with ulcerative colitis, Crohn’s disease or a strong family history of colon cancer, should start earlier. Talk with your doctor about your individual screening plan.

### Q How do I prepare?

**A** The best results come when the bowel is clean. For many, that means a day or two on a clear liquid diet and a round of strong laxatives the night before the test. You may also need to take an enema. This prep work is often considered the worst part of having a colonoscopy.

### Q How’s it done?

**A** The patient is given sedatives and pain medicine. The doctor then inserts a long, flexible tube into the colon. The tube is equipped with a tiny light and camera. Your doctor examines images sent from inside the colon on a monitor. Any polyps can be removed with delicate tools inserted through the tube.

Most people sleep through the 30- to 60-minute test.



### Q What happens next?

**A** You’ll be monitored while the anesthesia wears off. You won’t be allowed to drive home, so arrange transportation beforehand.

Some test results will be available right away. Others may take a few days.

Sources: American Cancer Society; National Cancer Institute

### Spring 2015

MY CONNECTION is published as a health and wellness service for the members of NEW MEXICO HEALTH CONNECTIONS. Information comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your primary care provider. Models may be used in photos and illustrations.

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Find us online:  
[www.mynmhc.org](http://www.mynmhc.org)



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## PRESCRIPTIONS

# 90-day supply available at your retail pharmacy

**M**any NMHC members who take routine medications prefer to get a 90-day supply of their prescriptions. In 2014, you could do this only by going through our mail-order pharmacy. But this has changed for 2015. Now you can receive a 90-day supply of medications from your retail pharmacy. All you need is a prescription for the 90-day supply from your provider. If you prefer to receive your 90-day drug supply by mail, you can continue to do so.

Getting a 90-day supply does not change your copay or coinsurance responsibilities. You'll still need to pay three copays for a three-month supply. However, this option allows you to keep a greater supply of your medications on hand, which will help you stay on medications for chronic conditions. You'll also make fewer trips to the pharmacy.

For more information on how to get a 90-day supply of your medication, talk to your local retail pharmacist.



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{ INSIDE }

### *My Connection:* Your helping hand

We produce this newsletter three times a year to keep in touch with our members. Our first priority is to help you be your healthiest. That's where *My Connection* comes in. It's full of information about how you can get the most out of your plan benefits and help prevent major health problems.

You can find an electronic version of this newsletter on our website: [www.mynmhc.org/forms-2.aspx](http://www.mynmhc.org/forms-2.aspx). Scroll down to "*My Connection*, Our Member Newsletter."



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## Message from Martin



**N**ew Mexico Health Connections (NMHC) is a nonprofit, Consumer-Operated and -Oriented Health Plan, or a CO-OP. What does that mean for you?

*Nonprofit* means that any money left over after paying for health services and covering our administrative costs must be reinvested into things that benefit our members. This includes lowering your premiums and investing in quality care. We care for you; we don't profit from you. This is a refreshing departure from the old ways of health insurance.

*CO-OP* means we are member-driven. The majority of our board of directors come from our membership. We began that process late last year with the election of two new members to our board, and we will elect two more at the end of 2015. Our members have a voice in our growth. This is a new model of health insurance in New Mexico. I believe it makes sense for the way healthcare is changing.

NMHC is committed to helping you stay healthy. We have a new HMO plan that offers a \$0 copay for the first three primary care visits. We created this option to go with the \$0 copay for many generic medications for nine chronic conditions and the first three behavioral health visits. Preventing illness whenever possible is better for everyone—especially when you don't have to worry so much about the cost.

Throughout 2015, we will continue to keep our insurance as simple and affordable as we can. I pledge that at NMHC, we always will put you first. That's why we do what we do, as a nonprofit and a CO-OP health plan. Thank you for being a member of NMHC.

▶ **Martin Hickey, MD, CEO of New Mexico Health Connections**

### Numbers you need to know

#### CUSTOMER SERVICE:

855-7MY-NMHC  
(855-769-6642),  
Monday–Friday,  
8 a.m. to 5 p.m.

- Benefits.
- ID cards.
- Billing questions.
- Claims questions, status and reconsiderations.
- Member login help.
- General information.

#### CATAMARAN, OUR PHARMACY BENEFIT MANAGER:

855-577-6550

#### BRIOVA, CATAMARAN'S SPECIALTY PHARMACY:

866-618-6741