

Welcome Note - Richard Martin, MD FAAFP - CMO Keystone ACO

Wow! Do you believe that we are moving through 2020 already? Welcome to the Winter edition of the KACO Connections Newsletter!



As I write this, the new strain of Coronavirus is presenting itself as a worldwide threat. Coronaviruses are not new and have been associated with colds and upper respiratory infections through the years. This is a new strain, however, and as its genetic structure has changed, humans have no immunity to it, therefore it is proving to cause severe illness and possibly death. There currently is no vaccine and antibiotics do not work as it is a virus. The best defense is prevention! So be sure to avoid crowds and sick people. Stay home if you become sick yourself. Don't touch your face, eyes, or nose. Wash your hands often with soap and

water. Scrub for 20 seconds (the time it takes to sing the alphabet song). Alcohol based sanitizers are another option but be sure to massage palms and the backs of your hands and don't forget the fingertips and nail beds.

The flu (influenza) has become a big health risk again this year (as it does every year). It's not too late to get a flu shot as we expect to see influenza through March and possibly April. Follow the same prevention tactics as noted above. There are antiviral medications available that work best if started within 48 hours of symptoms, so if you experience sudden onset of high fever, headache, body aches, dry cough, see your health care team and get tested as soon as possible. Additionally, in this newsletter you will find advice on diet and nutrition and healthy habits such as the annual wellness exam. Dr. Laurie Cox has provided us with a wonderful patient story that demonstrates the effectiveness of empathetic care provided by our ACO team.

Remember good health begins with you. Healthy eating habits, regular activity, and appropriate screening tests are up to you and are critically important.

Annual Wellness Visits – Why Bother?

Keystone Accountable Care Organization (ACO) recommends that each of us (yes, I am insured by Medicare as well) completes an Annual Wellness Visit.

An Annual Wellness Visit is NOT the same as an annual physical exam and is paid for by your Medicare insurance. The purpose of this exam is to improve your wellness as much as possible and to plan for the reality of increased likelihood of weakness as we advance in age. You and your Primary Care Physician will develop a comprehensive plan for your health and adjust it year by year.

At this visit, you and the staff of your Primary Care office will review the following health care related issues:

- Update any needed immunizations
- Advise improvements needed for personal safety in your home and community
- Catch up on screening procedures for early detection of cancer, diabetes, high blood pressure, or other health problems
- Assess level of mental and neurologic function
- Recommend improved diet and appropriate exercise
- Plan needed changes for housing and chronic care when it becomes necessary
- Understand and complete an advanced care directive including choosing a medical power of attorney for health care decisions

Many Primary Care Physician offices offer the option of including a medical evaluation and management visit at the same time as your annual wellness visit. This allows you to consider your medical issues simultaneously with wellness concerns. An additional fee will generally be assessed by these offices.



James Redka, MD
Family Practice Center PC

Meal Planning

The beginning of a new year is often a time when many of us decide to focus on new habits. Goals are usually set with some common ones being the desire to get organized, be healthier, eat better, and to improve our financial situations. Meal planning is just one way to work on each of these goals. It's the organizational process of thinking ahead for the food you would like to prepare during a specific time period. You can plan for days, weeks or a month at a time. Begin with the plan for what meals you will create prior to shopping and make a list. Putting careful thought into this part of the meal planning process is a great way to ensure you are making good healthy choices while including a variety of options.

If you need fresh ideas, gather recipes from books, or web sites or swap recipes with family and friends. Many websites offer recipes specific to dietary needs such as diabetic and heart healthy options. Create an organized place to save recipes so they're easy to find whether in a binder, recipe box or an electronic file for those found on-line.

Plan what meals you would like to make in the time period you have chosen perhaps a week or month and make a list including meals for each day listed on your plan. Post your list where it's visible to yourself and others as a daily reminder. While planning, remember to cook seasonally so you can incorporate foods that are readily available such as fresh vegetables for salads.

Remember to include healthy recipes with your selections and try swapping unhealthy ingredients for better choices. For instance, there is a great lentil taco filling recipe included in this issue to replace traditional taco filling.

The next step is to inventory all the ingredients you have available in your pantry to avoid unnecessary spending. Create a shopping list with everything needed for meals included in your meal plan. Review grocery store circulars and clip coupons for savings. Select your shopping day and put groceries away in an organized manner so ingredients are easy to find. This will help to keep you on track and easily follow your meal plan. Wash and cut any fresh vegetables as soon as you return from your shopping trip to save you time during meal preparation.

Plan to use leftovers in other meals during the week by adding them to casseroles, stir-fry, omelets, quiche. Use your imagination and be creative. Consistent meal planning will help you to save time and money. You may also get organized in the kitchen and learn how to make better, healthier food choices.

Lentil Taco Filling (DCE.Org)



Ingredients

3 cups cooked lentils
2 cups diced bell pepper
1.5 cups finely chopped white onion
4 cups chopped button or cremini mushrooms
3-4 teaspoons taco seasoning
A dash or two of garlic
1-2 teaspoons olive oil

Directions

1. Cook the lentils according to package directions, or if using canned precooked, rinse well and put aside.
2. Coat a large pan with the olive oil. Put on medium heat and add the bell pepper and onion to brown for about 5-7 minutes, stirring frequently.
3. Throw in the mushrooms, cover and cook for another few minutes, stirring occasionally.
4. Toss in the lentils, taco seasoning, and garlic and stir well. Heat uncovered for 3-5 minutes until warmed through.

Enjoy this filling in corn tortillas or lettuce wraps or even over salad. Top with avocado, cheese, salsa and or Greek yogurt.

Nutrition Facts

Serving Size: 1 cup (filling only!)

Servings Per Recipe: 6

Amount Per Serving

Calories 150

Total Fat 2 g

Saturated Fat 0 g

Sodium 230 mg

Total Carbohydrate 25 g

Dietary Fiber 11 g

Sugars 6 g

Protein 10 g

Keystone ACO Beneficiary Story

Maude Evelyn Switzer, otherwise known as “Sis” is remarkable woman with one more remarkable story. On September 27th, 2019, she was leaving exercise class where she has been a regular attendee when she tripped and fell and injured her leg. She was taken to a nearby Family Practice office and x-ray showed that she fractured her right patella. Mrs. Switzer is an independent woman who lives in her own home and after consulting with orthopedic surgery, elected to go back to her home with an application of a straight leg brace on her right leg.



She was unable to put any weight on her right leg but tried to take care of herself with her right leg stretched out. However, about 2 weeks after the fall, one of her friends contacted me as her family doctor to state that she didn't think things were going well at home. It was extremely difficult for her to do her activities of daily living like prepare food, and her general

condition was declining.

Fortunately, Mrs. Switzer sees a doctor who is part of the Keystone ACO and we were able to arrange for her to come to the office the afternoon after we received the phone call and able to assess that indeed, she was starting to fail to thrive. Her case manager, Jennifer Brackbill RN, expedited her direct admission to Locust Grove Rehab and Nursing Home which is in the same town that Mrs. Switzer resides.

She was able to directly go to the rehab without a 3-day stay at the hospital because the Keystone ACO contracts with Medicare which allows this service in special circumstances. We were quickly able to get her started with physical and occupational therapy and pain control and she rapidly recovered the strength that she was losing. After a little over a month, she was strong enough and well enough to return to her own home and no longer needed the brace.

The best part of the story is, one month after she returned to her own home independently, she turned 105 years old!

Laurie Cox, MD
Geisinger Clinic

If You're Having Difficulty Affording Medications, Have a Discussion with Your Provider

History of Medicare Part D

On December 8, 2003 the Medicare Prescription Drug, Improvement and Modernization Act was signed into law and implemented on January 1, 2006, to provide prescription medication coverage under Medicare.

What is The Donut Hole?

Before 2020 Medicare Part D benefit was set up to include a gap in coverage, known as the donut hole. Once in the donut hole, you were responsible for 100% of the entire cost of your medication until your personal out of pocket cost reached a certain level, called the catastrophic limit.

Changes in Medicare Part D for 2020

As part of the Affordable Care Act of 2012, this loss of prescription coverage inside the donut hole has been eliminated starting in 2020 and once you are in the donut hole (after \$4020 of total cost of medication used) your copay (patients responsibility) will change to 25% of the cost of the medication instead of the 100% of the cost as in the past.

Prescription Assistance Programs

While the changes in 2020 to the donut hole costs represents an improvement in providing coverage of medications, it does not eliminate the copay (patients responsibility). As the total cost of medications continue to increase, the 25% copay may still be a large cost. There are programs available if you are having difficulty paying for your medications. You can also talk with your provider to see if there might be a less expensive medication that will meet your needs. The following programs are several options that are available to get help with your costs of prescription drug coverage.

Medicare / Social Security: Extra Help program

Contact: **1-800-772-1213**

Requirements: currently on Medicare, reside in the US and meet income and asset limits

Benefits: copays will be no more than \$8.95 for Brand medications and \$3.60 for generics

State of Pennsylvania: PACE and PACEnet program

Contact: **1-800-225-7223**

Requirements: 65 years of age or older, resident of PA and meet income only limits, (no asset limit)

Benefits: copays will be no more than \$15 for Brand medications and \$9 for generics

Drug Manufacture assistance programs - Some companies offer programs to help pay for medications they produce for people enrolled in Medicare prescription drug coverage (Part D)

Web sites:

www.rxassist.org

www.needymeds.com

Bill Ehmann Pharm.D, BC-ADM, CDE

Ambulatory Care Clinical Pharmacist

Health Reminders

- Schedule your Annual Wellness Visit - bring a list of questions to your appointment
- Get a flu shot if you have not yet done so
- Get regular blood pressure checks
- Schedule an eye exam
- Schedule a dental visit
- Review current medications with your provider and ask any questions you may have
- If you smoke, discuss a cessation plan with your provider
- Schedule appropriate preventative screenings
 - Mammograms
 - Colonoscopies

Primary Care vs Urgent Care vs Emergent Care

Emergency Department visits can be expensive and wait times can be longer than expected. Below is a guide to help you decide which type of health care facility might be the best for your needs. You should call your Primary Care Provider's office or your Care Manager first to ask for an appointment unless it is a true emergency. You may also contact your Primary Care Provider's office for a list of available services and office hours. As always, in case of an emergency, call 911 or go to the nearest emergency room.

Primary Care	Urgent Care	Hospital Emergency Room
<ul style="list-style-type: none">• Physicals, vaccinations and screenings• Management of chronic conditions, such as diabetes, congestive heart failure• Flu-like symptoms• Fever; vomiting• Cough, colds, sinus problems, earaches• Sprains, back pain• Rashes• Minor eye problems• Minor cuts and abrasions• Minor aches and pains	<ul style="list-style-type: none">• Allergies• Colds/Flu/Fever• Cuts, scrapes, abrasions• Insect bites/tick removal• Minor laceration repair• Rashes• Sinus, ear, urinary, respiratory and other infections• Sore throats• Sprains and strains	<ul style="list-style-type: none">• Chest Pain• Severe Pain• Sudden shortness of breath• High fever• Severe weakness• Loss of consciousness• Traumatic injury• Accident affecting the use of body parts or causing severe pain or significant bleeding• Sudden worsening of a chronic condition (e.g., asthma allergies)• Poisoning

Know the signs of a Stroke! If any of the following symptoms are present, call 911 right away.

F – Face: Ask the person to smile. Does one side of the face droop?

A – Arms: Ask the person to raise both arms. Does one arm drift downward?

S – Speech: Ask the person to repeat a simple phrase. Is the speech slurred or strange?

T – Time: If you see any of these signs, call 9-1-1 right away.

Tips to Follow During and After a Hospital Stay

Being admitted to the hospital can be a very challenging and stressful time. Below are a few tips to help you during your hospital stay and after you are discharged.

1. Have a pen and tablet nearby to write down:
 - a. The names of your doctors and other staff members important to your care
 - b. Any questions you may have for your healthcare team (and their responses when answered)
2. Have a family member or friend involved in your care and include them in the process of your discharge planning.
3. If there is something you don't understand (for example – you do not know why you are taking a medication) call a “time-out” and ask your doctor or nurse for clarification.
4. Ask what your possible discharge date will be and start to plan for that day
 - a. How will you get home from the hospital?
 - b. Can you get to the store?
 - c. Can you prepare your meals? Talk with your hospital discharge planner if you are unable to do so or if you are unable to get assistance with these tasks.

On the day of discharge have someone present while you receive your discharge instructions.

1. Be sure to have a follow-up appointment made with your doctor within 5-7 days.
2. Questions you want to ask:
 - a. Are there tests or bloodwork that need to be completed and what is the time frame in which it should be done?
 - b. What do I do with the medication that I have at home?
3. Many hospitals now offer to have your medications filled at the hospital before you leave – be sure to ask if it's available and take advantage of this service.
4. Ask to speak to the Pharmacist if you have any questions or concerns regarding your medication.
5. You should feel confident in performing any new tasks. For example, ask for further instruction if you are given a medication that you must inject or if you have a catheter or other new device to tend to.
6. If you are out of the area, ask how to obtain your records or have them sent to your doctor.

We recognize that coming home from the hospital can also be a very stressful time as there may be many changes to your routine. Knowing this, we will have a Nurse Case Manager reach out to you within 24-48 hours after your discharge. They will review things like your medications and discharge instructions. If you do not speak to a Nurse Case Manager or feel that you need assistance at any time, please call 1-800-883-6355 (This line is answered from 8am-4:30pm Monday through Friday and should NOT be utilized for emergencies).

Joann Sciandra, MHA BSN RN CCM
Vice President, Care Coordination and Integration

Physician Groups

- Advanced Inpatient Medicine Wayne PC
- AOP Inc.
- Capital Anesthesia LLC
- Caring Community Health Center
- Digestive Disease Institute Inc.
- Enteron Inc.
- Evangelical Medical Services (Lewisburg and surrounding communities)
- Family Practice Center PC
- Geisinger Clinic
- Geisinger HM – Joint Venture LLC
- Geisinger Jersey Shore Foundation Inc., Jersey Shore
- Geisinger Lewistown Hospital Family Health Associates
- Jackson Siegelbaum Gastroenterology Ltd.
- Lycoming Internal Medicine, INC
- Medical Arts Allergy PC
- Pennsylvania Gastroenterology Consultants PC
- Spirit Physicians Services Inc.
- The Wright Center Medical Group (Scranton & surrounding communities)
- Ultra Care Urgent & Family Care
- Urology of Central Pennsylvania Inc.
- Valley ENT Sinus and Allergy
- Wayne Memorial Community Health Centers
- West Shore Endoscopy Center LLC

Participating Hospitals

- Evangelical Community Hospital, Lewisburg
- Geisinger Bloomsburg Hospital, Bloomsburg
- Geisinger Community Medical Center, Scranton
- Geisinger Holy Spirit, Camp Hill
- Geisinger Jersey Shore Hospital, Jersey Shore
- Geisinger Lewistown Hospital
- Geisinger Medical Center, Danville
- Geisinger Wyoming Valley Medical Center, Wilkes Barre
- Wayne Memorial Hospital, Honesdale

Visit our website for more information on Keystone ACO and to see previous KACO Connections issues.

KeystoneACO.org

Is there a specific topic you would like to see addressed in future newsletter issues? You can email your suggestions to:

KeystoneACO@KeystoneACO.org



Resources...

Senior Medicare Patrol – Pennsylvania Senior Medicare Patrol (PA-SMP)

Senior Medicare Patrols are groups of volunteer organizations, who are available to provide education to you, your families, and caregivers on how to prevent, detect, and report health care fraud, errors, and abuse. There are also resources available which include personalized counseling, evaluating complaints, local community events, and volunteer opportunities.

Please take an active role in protecting yourself and Medicare from fraud and abuse. Visit the following website www.smpresource.org and click on “Find Help in Your State”. You will then be provided with several contact options.

State Health Insurance Assistance Programs — SHIP - Provide local, in-depth, and objective insurance counseling and assistance to Medicare-eligible individuals, their families, and caregivers. - Visit the following websites for additional information.

<https://www.shiptacenter.org/> - HOME

<https://www.shiptacenter.org/about-medicare/regional-ship-location/pennsylvania> - SPECIFIC TO PA

To Contact Medicare

For additional information on accountable care organizations, please contact Medicare at 1-800-Medicare, (1-800-633-4227) and ask for the Medicare ACO Department.

TTY users should call 1-877-486-2048. You may also visit www.medicare.gov/acos.html

Keystone Accountable Care Organization, LLC
100 North Academy Avenue
Danville, PA 17822
Phone: 570-271-6403
Fax: 570-214-1314
E-mail: KeystoneACO@KeystoneACO.org
Website: KeystoneACO.org



Mailing Address Line 1
Mailing Address Line 2
Mailing Address Line 3
Mailing Address Line 4
Mailing Address Line 5