

ENGAGE

QUARTERLY MAGAZINE | FALL 2019

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Near You

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Financial Abuse?

Serving the Health
Needs of Those Who
Served

Embrace Your Fears

MyBlueKCMA.com



BLUE MEDICARE
ADVANTAGE

Healthful Reminders

- ❑ **Schedule your mammogram.** It's covered in full by Blue Medicare Advantage. Plus, you'll earn a \$25 gift card through your Member Rewards Program for completing this action.
 - ❑ **Get a flu shot.** It's the best way to protect yourself against the virus. And it's covered 100% by your Blue Medicare Advantage plan.
 - ❑ **Complete your 2019 annual wellness appointment.** You'll earn a \$25 gift card for this, too!
- ❑ **Review your Blue Medicare Advantage plan options.** This Annual Enrollment Period, look forward to updated plans with richer benefits.
 - ❑ **Go pumpkin picking.**
 - ❑ **Bake Pumpkin Cinnamon Maple Bourbon Bars.** Chef Kyle says you're gonna love 'em.
 - ❑ **Start a new holiday tradition.**
 - ❑ **Chase away the holiday blues with some festive tunes.**

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NEW FOR 2020

Always looking to improve your member experience, Blue KC is bringing new benefits to the market in 2020. Be sure to make the most of them, and read the Annual Notice of Change (ANOC) you received at the end of September.

- Go from \$15 – \$0.**
The Essential PPO is now \$0 per month and our lowest maximum out of pocket!
- Grownups love allowances.**
Our plans will offer up to \$750 in annual dental allowances and up to \$350 in annual eyewear allowances.
- More healing benefits.**
All Blue Medicare Advantage plans now cover acupuncture treatment. And the Blue Medicare Advantage Essential PPO includes therapeutic massage.
- More OTC purchasing power.**
Members will now receive a monthly \$25 over-the-counter item allowance. This can be used for things like vitamins and first aid supplies.
- Feel free to catch a ride.**
There's a \$0 copay for non-emergency transportation. Need to go to the doctor's or pharmacy? Our convenient transportation is here to help.

More ways to earn \$25.
In 2020, you can earn member rewards for getting a flu shot vaccine and having a diabetic eye exam.



Register for a Member Meeting Near You

We are excited about the changes to the Blue Medicare Advantage plan designs and benefits for 2020, and we hope you are too! Our Blue Medicare Advantage experts are hosting member meetings to explain these changes in detail and answer your questions.

Visit [MedicareBlueKC.com/MemberMeetings](https://www.MedicareBlueKC.com/MemberMeetings) or call 1-855-200-8246 (TTY 711) to find a complete list of events and register.

- Oct. 29, 10:00 AM**
Holiday Inn – Village West
1931 Prairie Crossing Parallel Pkwy
Kansas City, KS 66111

Nov. 5, 10:00 AM
Holiday Inn – Village West
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Nov. 7, 11:00 AM
Riverside Community Center
4498 NW High Dr
Riverside, MO, 64150

Nov. 11, 10:00 AM
Platte City YMCA
3101 Running Horse Rd
Platte City, MO 64079
- Nov. 12, 10:00 AM**
Olathe Community Center Room C
1205 E Kansas City Rd
Olathe, KS 66061

Nov. 13, 10:00 AM
Grain Valley Community Center
713 Main St
Grain Valley, MO 64701

Nov. 21, 10:00 AM
Harrisonville Community Center
2400 S Jefferson Pkwy
Harrisonville, MO 64701

Nov. 25, 10:00 AM
Olathe Community Center Room C
1205 E Kansas City Rd
Olathe, KS 6606

Register at [MedicareBlueKC.com/MemberMeetings](https://www.MedicareBlueKC.com/MemberMeetings)



Serving the Health Needs of Those Who Served

Blue KC is here to make sure Medicare-eligible vets get the healthcare they need when they need it. If wait times at your VA medical facilities are an issue, or if it's a hassle to travel to the nearest VA, you've got other options.

Using Blue Medicare Advantage to Your Advantage

- Enjoy timely access to other care facilities – like primary care doctors or urgent care facilities.
- Get second opinions from doctors who are outside the VA system.
- Access additional services like prescription drug coverage and health club memberships.
- Establish a relationship with a private primary care physician.

Thank You to Our Veterans

To show our appreciation, we are committed to providing the healthcare you deserve:

- We're lifelong partners in your health.
- We understand veterans' unique care needs.
- We share important health screening reminders.
- We provide information on the importance of taking medications regularly.
- We offer 90-day fills for \$0 at your local pharmacy or by mail order.

Sources: U.S. Department of Veterans Affairs; Military.com

Now That's a PUZZLE



Sudoku is a logic-based, combinatorial number-placement puzzle. The objective is to fill a 9x9 grid with digits so that each column, each row, and each of the nine 3x3 subgrids that compose the grid contains all of the digits from 1 to 9.

	7			2		9		
	4		8		6			
	1	2				3		
						8	7	
	6		9	7	2		5	
	2	5						
		1				2	9	
			5		4		3	
		7		6			1	

8	1	5	6	9	2	7	3	4
7	3	9	4	1	5	6	8	2
4	6	2	7	8	3	1	5	9
6	9	1	8	3	4	5	2	7
3	5	4	2	7	6	8	9	1
2	7	8	1	5	9	4	6	3
9	8	3	5	4	7	2	1	6
1	2	7	9	6	8	3	4	5
5	4	9	3	2	1	9	7	8



Mammograms Save Lives

A mammogram takes about 20 minutes from start to finish. And yes, you'll experience some discomfort. But it's worth it. After all, a mammogram is the best way to find cancer early, when it is easiest to treat.

Even if you don't have any symptoms or known risks for breast cancer, you should have a regularly scheduled mammogram. Most women between ages 50 and 74 should have a screening mammogram every two years. Are you up-to-date on this important test?

Tips for your next mammogram.

- Don't put on deodorant, powder, cream or perfume the day of your exam.
- Consider wearing a skirt or pants, so you only have to take off your top and bra.
- Visit the same facility so it's easy to compare your results from year to year.
- If you don't get your test results within 10 days, follow up with your provider.

Source: Centers for Disease Control and Prevention; American Cancer Society; National Breast Cancer Foundation



Embrace Your Fears

By Andrew Daniels

Water was the source of deep anxiety for this SilverSneakers® member. But she dove in—and changed her life.

About a year ago, Rosa Juarez found herself confused and scared in the locker room of the YWCA where her rheumatologist suggested she go to help ease her arthritis symptoms.

Rosa, 65, could hardly walk anymore. Her doctor said water aerobics might work wonders. The only problem? Rosa had been afraid of the water her whole life.

As she was getting changed to enter the pool, the smell of chlorine sent Rosa into a panic attack. But then, she saw the woman she now refers to as “my angel.”

“She was the most adorable, short lady, with blue twinkling eyes, snow-white hair, and the sweetest smile looking up at me,” Rosa said.

She doesn’t remember her name, but she remembers hearing the older woman’s soft voice as the room quieted. “Is this your first time here?” she asked. Rosa nodded.

“Don’t be afraid,” the woman said as she reached out her hand and led Rosa to the pool.

“Everyone!” she called to the other women laughing in the water. “This is Rosa’s first time, and she’s afraid.”

As if on command, the other class members approached Rosa to help her in, with one gently guiding her to the water, another giving her a belt to help her float, and her angel staying by her side as she personally modeled each move that the class instructor called out.

All of Rosa’s fears had suddenly slipped away. “I was going to be fine,” she said. “I couldn’t thank God enough for giving me this angel to encourage me.”

Today, Rosa loves the water. Her gym buddies haven’t just helped her with handling her anxiety and building a stronger body, they’ve also showed her how to enjoy life in the wake of major personal loss—something she wasn’t sure was possible.

“I now look forward to another day,” she said.

Rosa Finds Fitness—and Meaningful Friendships

You can now catch Rosa at her YWCA every day of the week. After her new friends helped her get over her fear of the water, she began benefiting from its healing powers.

“I couldn’t even walk or bend down,” she says. “I can walk perfectly fine now.”

When she isn’t taking water aerobics, stretching, or line dancing, Rosa is simply enjoying the company of her fit pals.

“This place is filled with kindness, smiles, and caring elderly ladies who, like me, go for therapeutic reasons, but who have also formed a family here and care for each other,” she says. “Some of us have lost loved ones and have also found new friends to love.”

Thanks to the gym, Rosa has taken the next step she didn’t know existed. “I discovered there was something beyond retirement,” she says. “Before, I was just sinking. I was dying here in my home. I didn’t want to go out at all. But SilverSneakers gave me a purpose to continue with my life.”

That doesn’t just mean exercising and socializing. Rosa has since joined a retired teachers association, started volunteering at her church, and even enrolled in her local community college, where she’s learning French and Italian.

She says none of these activities would be possible if she hadn’t joined SilverSneakers.

“It did so much for me,” Rosa says. “I will forever be thankful.”

Always talk with your doctor before starting an exercise program.

Find Your Place with SilverSneakers

All Blue Medicare Advantage plans include SilverSneakers at no extra cost. The program lets you access more than 16,000 fitness locations¹ across the nation, plus try classes² and tools designed to keep older adults strong and independent. Get your SilverSneakers member ID and exclusive content by logging into or creating your online account at [SilverSneakers.com/StartHere](https://www.silversneakers.com/StartHere). Remember, there’s no additional cost to you – SilverSneakers is included with your Blue Medicare Advantage health plan.

1. Participating locations (“PL”) are not owned or operated by Tivity Health, Inc. or its affiliates. Use of PL facilities and amenities is limited to terms and conditions of PL basic membership. Facilities and amenities vary by PL.
2. Membership includes SilverSneakers instructor-led group fitness classes. Some locations offer members additional classes. Classes vary by location.

*SilverSneakers is a registered trademark of Tivity Health, Inc.
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Armed to Fight the Flu

The Centers for Disease Control and Prevention recommend a yearly vaccine as the first and most important step in protecting yourself against flu viruses. Each year, vaccines are made to protect against the three or four different kinds of flu viruses expected to be in circulation.

Sometimes, it’s extremely challenging to find an effective vaccine because the flu virus can change so quickly. Last year was one of those times—and the flu shot didn’t provide total protection.

According to officials, the flu shot is always worth getting because it may be able to work against some strains and it’s likely to prevent hospitalizations. So when you’re ready to protect yourself, remember this. When you get a flu shot from an in-network provider, Blue KC will pay 100% of the allowable charge.



Are You a Target for Financial Abuse?

There are many types of abuse, from emotional and physical abuse to neglect and abandonment. But there's one form of abuse among older adults that's becoming more widespread and harder to detect: financial abuse. With this form of exploitation, your money or belongings are stolen.

The National Institute on Aging cautions that someone you've never met can steal your financial information by phone or email. That's why it's important to be wary of sharing your information, whether over the phone or online. **And during the Annual Open Enrollment Period (AEP) you should be especially vigilant.**

Here's a warning from AARP to all Medicare beneficiaries. Be aware of these four common scams during the AEP.

Scam 1

IF: Someone claiming to be from Medicare calls and says they need your Medicare number and credit card information to sign you up for health coverage...

THEN: Hang up. Medicare never calls beneficiaries to sign them up.

Scam 2

IF: Someone calls saying you have to sign up for a Part D Prescription Drug plan or you'll lose your Medicare coverage...

THEN: Hang up. Buying a Part D plan is completely voluntary. It has nothing to do with the rest of your Medicare coverage.

Scam 3

IF: Someone calls claiming to be a Medicare representative and says they need to confirm your billing information to keep your coverage active...

THEN: Hang up. Medicare employees don't make cold calls and aren't allowed to ask for payment information over the phone or online.

Scam 4

IF: Someone calls asking for your new Medicare number in order to update your account or send you the latest annual enrollment information...

THEN: Don't give out your new 11-character identifier over the phone.

The cost of financial abuse and fraud to older Americans is estimated to range from \$2.9 billion to \$3.6 billion annually.

Sources: National Institute on Aging; National Council on Aging; AARP

Pumpkin Cinnamon Maple Bourbon Bars

1 large cake pan – 16-24 bars



It's the perfect time of year for pumpkins and maple, and for bourbon and spice. These bars are so ridiculously good, they'll disappear as soon as you cut them.

FOR THE PUMPKIN BASE YOU'LL NEED

- Whole eggs – 4 each
- Egg yolks – 1 each
- Brown sugar – ½ cup
- White sugar – 1 cup
- Flour – 2 - 2¼ cups
- Pumpkin puree, canned – 16 oz.
- Canola oil – 1 cup
- Maple syrup – 1 tsp.
- Baking soda – 1 tsp.
- Baking powder – 2 tsp.
- Salt – 1 tsp.
- Cinnamon, ground – 2 tsp.
- Nutmeg, ground – 1 tiny pinch
- Clove, ground – 1 tiny pinch
- Allspice, ground – 1 tiny pinch
- Vanilla extract – ½ tsp.

FOR THE MAPLE CREAM CHEESE FROSTING YOU'LL NEED

- Butter, softened – 1 cup
- Cream cheese, softened – 8 oz.
- Vanilla extract – 1-2 tsp.
- Powdered sugar – 2-3 cups – sifted
- Real maple syrup – ½ - 1 Tbsp.
- Optional – add 1 tsp. - 1 Tbsp. of bourbon

GARNISH OPTIONS

- Candied pecans – 1-2 cups
- Maple syrup – drizzle
- Powdered sugar – dusting

METHOD OF PREPARATION

1. Preheat oven to 350 degrees.
2. In a large mixing bowl, add eggs, sugar, oil and pumpkin and mix with whisk or electric mixer until fluffy and airy.
3. Sift the flour, cinnamon, salt, baking soda and baking powder in a separate bowl.
4. Stir flour mixture into pumpkin mixture until combined.
5. Spread the cake batter evenly into an ungreased pan.
6. Bake for 20-35 minutes in the preheated oven.
7. While cake is baking, make frosting by whipping the butter and cream cheese together with an electric mixer.
8. Stir in maple syrup, vanilla and powdered sugar. Mix until smooth.
9. Once cake is done, remove cake from oven and allow to cool completely before frosting.
10. Once cake is cool, start frosting the cake.
11. Cover and put in refrigerator for 1-2 hours or overnight until frosting has completely set up and is firm.
12. Cut into bars.
13. Garnish.

CHEF NOTES

To make gluten-free, substitute a gluten-free flour mix that is measured for cup-to-cup equal substitutions.

If batter is too wet, add a tiny amount of flour.

Optional to add up to 1 Tbsp. of bourbon to the frosting while mixing for an added depth of flavor. May omit bourbon if desired.

From the kitchen of Blue KC Chef Kyle Williams. Bon appétit!



Member Notification of National Coverage Determination (NCD)

We’re required by the Centers for Medicare & Medicaid Services (CMS) to notify our members of any national coverage determination changes. Count on Blue KC to keep you informed about whether or not Medicare will pay for an item or service.

Here’s a look at your current coverage updates.

The Centers for Medicare & Medicaid Services (CMS) will cover autologous treatment for cancer with T-cells expressing at least one chimeric antigen receptor (CAR) when administered at healthcare facilities enrolled in the Federal Drug Administration (FDA) risk evaluation and mitigation strategies (REMS) and used for a medically accepted indication. This means it is:

- used for either an FDA-approved indication (according to the FDA-approved label for that product) or
- for other uses when the product has been FDA-approved and the use is supported in one or more CMS-approved group of studies.

The use of non-FDA-approved autologous T-cells expressing at least one CAR is non-covered. Autologous treatment for cancer with T-cells expressing at least one CAR is non-covered when the requirements listed above are not met. *(Posted 8/7/2019)*

Decision Memo for Chimeric Antigen Receptor (CAR) T-cell Therapy for Cancers (CAG-00451N)

The Centers for Medicare & Medicaid Services (CMS) has determined that Next Generation Sequencing (NGS) as a diagnostic laboratory test is reasonable and necessary and covered nationally, when performed in a CLIA-certified laboratory, when ordered by a treating physician and when the following requirements are met:

1. The patient has:
 - a. either recurrent, relapsed, refractory, metastatic, or advanced stages III or IV cancer; and
 - b. either not been previously tested using the same NGS test for the same primary diagnosis of cancer or repeat testing using the same NGS test only when a new primary cancer diagnosis is made by the treating physician; and
 - c. decided to seek further cancer treatment (e.g., therapeutic chemotherapy).
2. The diagnostic laboratory test using NGS must have:
 - a. FDA approval or clearance as a companion in vitro diagnostic; and
 - b. an FDA approved or cleared indication for use in that patient’s cancer; and
 - c. results provided to the treating physician for management of the patient using a report template to specify treatment options.

(Posted 3/16/2018)

Decision memo for Next Generation Sequencing (NGS) for Medicare Beneficiaries with Advanced Cancer (CAG-00450N)

The Centers for Medicare & Medicaid Services (CMS) has determined that the evidence is sufficient to cover ambulatory blood pressure monitoring (ABPM) for the diagnosis of hypertension in Medicare beneficiaries under certain circumstances. *(Posted 7/2/2019)*

ABPM devices must be:

- capable of recording and plotting blood pressure measurements for 24 hours;
- provided to patients with oral and written instructions and a test run in the physician’s office must be performed; and
- interpreted by the treating physician or treating non-physician practitioner.

For eligible patients, ABPM is covered once per year.

Decision Memo for Ambulatory Blood Pressure Monitoring (ABPM) (CAG-00067R2)

The Centers for Medicare & Medicaid Services (CMS) will cover Transcatheter Aortic Valve Replacement (TAVR) for the treatment of symptomatic aortic valve stenosis through Coverage with Evidence Development (CED).

Certain conditions must be met, including, but not limited to the following:

- The procedure is furnished with a complete aortic valve and implantation system that has received Federal Drug Administration approval.
- The patient (before and after surgery) is under the care of a multidisciplinary heart team that includes a cardiac surgeon and an interventional cardiologist experienced in the care and treatment of aortic stenosis, which has evaluated and documented the patient’s suitability for surgical or other treatment.
- TAVR must be furnished in a hospital with on-site heart valve surgery and interventional cardiology programs, and post-procedure intensive care facility with personnel experienced in managing patients who have undergone open-heart valve procedures. *(Posted 6/21/2019)*

Decision Memo for Transcatheter Aortic Valve Replacement (TAVR) (CAG-00430R)

The Centers for Medicare & Medicaid Services (CMS) has made changes to the coverage criteria for implantable cardioverter defibrillators (ICDs). *(Posted 2/15/2018)* These changes include:

- addition of diagnostic tests that can evaluate conditions appropriate for treatment with ICD.
- requirement for optimal medication therapy for at least 3 months for certain conditions.
- requirement for a patient shared decision-making interaction prior to implantation of a device for certain patients.
- provides exceptions to waiting periods for certain patients.
- ends the requirement for data collection.

Decision Memo for Implantable Cardioverter Defibrillators (CAG-00157R4)



Beat the Holiday Blues

‘Tis the season to be jolly. But what if you’re feeling more like “bah humbug”? If so, you’re not alone.

According to the National Alliance on Mental Illness, the holiday blues are temporary feelings of anxiety or depression that can be associated with the extra stress, unrealistic expectations or even memories that accompany the season. The holidays can be especially hard for older adults, who may miss loved ones, have health concerns or be worried about money.

The holiday blues can start prior to Thanksgiving and last until after the New Year. Unlike clinical anxiety or depression, the holiday blues only cause short-term problems. Even still, it’s important to take them seriously—they can lead to long-term mental health issues.

What are the symptoms?

- Fatigue
- Tension
- Frustration
- Loneliness or isolation
- Sadness
- A sense of loss

Tips for avoiding the holiday blues.

- Stick to your normal routine.
- Get enough sleep.
- Don’t isolate yourself.
- Spend time with caring, supportive people.
- Give yourself permission to grieve.
- Eat and drink in moderation.
- Get exercise.
- Don’t overcommit yourself.

Sources: National Alliance on Mental Illness; Health in Aging Foundation

Informative Member Meetings

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to find a complete list of events and register.

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Telephone lines are open 8 a.m. to 8 p.m.,
7 days a week. You may receive a messaging
service on weekends and holidays from April 1
to September 30. Please leave a message and
your call will be returned the next business day.

*Blue Cross and Blue Shield of Kansas City's Blue
Medicare Advantage includes both HMO and PPO plans
with Medicare contracts. Enrollment in Blue Medicare
Advantage depends on contract renewal.*

*Medicare Advantage Compliance and Fraud,
Waste & Abuse Hotline (anonymous 3rd Party Vendor):
844-227-1790*

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products are offered by Missouri Valley Life and Health
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Health and wellness or prevention information.

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