

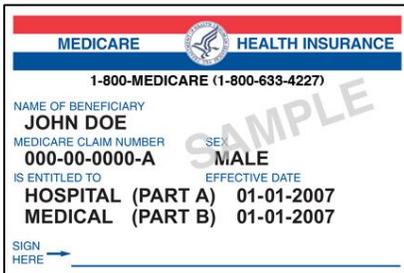
## **FALL 2013 NEWSLETTER**

Steven E. Reznick, M.D. FACP

7280 W. Palmetto Park Rd., Suite 205 N, Boca Raton, FL 33433

561-368-0191 or email [DrR@BocaConciergeDoc.com](mailto:DrR@BocaConciergeDoc.com)

### **Medicare Prescription Drug Plan Open Enrollment Period**



A sample Medicare Health Insurance card for John Doe. The card includes the Medicare logo and the text "HEALTH INSURANCE". It lists the beneficiary's name as JOHN DOE, Medicare claim number as 000-00-0000-A, and sex as MALE. It also shows the effective date for both Hospital (Part A) and Medical (Part B) as 01-01-2007. There is a "SIGN HERE" field with an arrow pointing to the right. A large "SAMPLE" watermark is overlaid on the card.

It is that time of year again to review your current Medicare Part D prescription drug plan options and make changes if there is something available that is better for you. The open enrollment period extends until December 7th, 2013 for the 2014 calendar year. If you make no new selection you will continue to use the product you currently have if it is still available.

To make your review you will need a computer and internet access. Go to [www.medicare.gov](http://www.medicare.gov) and look for prescription drug plans. Then, click that option. It will ask you to provide your current medications and dosage, using the generic drug name, and how often you take it. It will also ask you to provide your zip code to find a preferred pharmacy. Enter your medications and run the program. You will get a list of the prescription programs in your area and the different options.

Keep it simple. Your monthly payment will be higher if you want no deductible. Make sure the monthly payments for no deductible aren't more expensive than the actual dollar value of the deductible. If you have any questions give us a call.

### **Medicare Advantage is not Medicare!**



CMS, the parent organization of Medicare, has gone to the private sector and contracted with health insurance companies including United Healthcare, Blue Cross Blue Shield, Aetna, Cigna and others to offer a private managed care insurance product to Medicare age recipients. CMS or "Uncle Sam" is supposed to pay a flat, fee for all the services rendered to a Medicare recipient, to the private insurer to cover their enrollees' medical needs. The fee was originally 95% of what Medicare paid on the average for a Medicare patient annually. This was supposed to save the government money. In exchange for that annual fee the insurer, or Medicare Advantage plan, is supposed to cover your health care, provide pharmaceutical coverage and products and; provide a set of extras or enhancements such as eye glasses, sneakers, and gym memberships for wellness programs. It is managed care.

There are strict rules and regulations about who you can and cannot see as a physician. There is a strict formulary of medications and there are contracted institutions you must go to such as hospitals, labs and imaging centers to receive appropriate tests. For the coverage to apply you must see a physician contracted to that insurance company's panel. Non-emergency hospital admissions, trips to the emergency room and post-illness care are all subject to the approval and review of non-physician personnel before the insurance company will pay for it. You

lose your choice of going to the best institution or practitioner in exchange for lower up front monthly costs, minimal or no co-pays, no out of pocket pharmaceutical “donut hole” costs and the extras - glasses, sneakers, gym memberships. You are issued a Medicare identification card that is virtually indistinguishable from the card a traditional Medicare patient uses. It is less expensive to the patient and works wonderfully if you are healthy and do not need health care. Unfortunately, individuals over 65 years old usually have, or develop, medical issues frequently.

B.J. is an 89 year old retired physician who got his Medicare Advantage plan through his medical society in the NY metropolitan area. He suffered a series of small strokes and was hospitalized for four days after being brought to the hospital by the paramedics on an urgent basis. His speech was impaired, his strength and balance did not allow him to walk without assistance. He was swallowing poorly with food. It was as likely to end up going down the wrong pipe and choking him as it was to get into his stomach, so nutrition was an issue. His wife and daughter did not feel he could go from the hospital directly home because he was too weak to walk. His elderly wife could not handle him in this weakened state. I suggested a short stay in a skilled nursing facility for strengthening, gait and balance training and speech therapy to rejuvenate his swallowing process safely. We checked on the bed availability at three of the facilities in our area that did a nice job with this type of problem and there was bed availability.

B.J.’s health insurance was a Medicare Advantage plan, the Empire plan. They wanted him to be placed in a facility that I would not send my worst enemy to. They wanted him to go home from the hospital. The hospital case manager and I spent two days arguing with them about the need for placement, extending the patient’s hospital stay by two days and then they only approved a two day stay with a reassessment to be done on the third day which was a Saturday. Had he been a traditional Medicare patient we would have sent him to the best place for his problem and he would have been eligible to stay for 21-30 days with full coverage. Post-illness care can be a problem with Medicare Advantage plans.

Then there was H.B., a 69 year old overweight hypertensive man, still running his business, with new onset of significant shortness of breath and chest heaviness when walking a short distance. We called the cardiologist “on the plan” who set up an appointment two weeks later. I called him to discuss the need for a timelier visit but it is managed care and that is the best he could do. . The cardiologist ordered a nuclear stress test after seeing him. This required approval again and this took his staff three more days. The test was scheduled for a week after that. HB flunked that test. The cardiologist wished to perform an angiogram to look for blockages. He referred the patient to an interventional cardiologist on the plan who could not see the patient for three weeks. He saw the patient three weeks later and recommended doing a cardiac catheterization or angiogram. It was scheduled for the next week instead of the next day as it should have been.

When the patient arrived early in the morning for his catheterization as an outpatient, he was told that the insurance company had not yet approved the procedure. He lay on a gurney from 7:00 a.m. until 2:35 p.m. without getting approval, or fluids, or a meal. At 2:40 p.m. they sent him home. This occurred two more times on two separate days before the approval was obtained.

The angiogram showed a 97% blockage of a left main coronary artery which they could not pass a stent through. Try as they might, they could not get it through. The interventional cardiologist was the practitioner under contract to the plan - not necessarily one of my top choices or the most skilled in our area for that problem. He called in a cardiovascular surgeon to bypass the lesion surgically. He took HB to the ER later that day and successfully bypassed the blockage. He approached me after the procedure and asked me, “Why did you guys wait so long to get him tested and some treatment. He was lucky with that “widow-maker lesion that he didn’t drop dead. Why did it take eight weeks to get him fixed? ”

The next couple of months are the open enrollment period for individuals who qualify for Medicare to either stay in the traditional program or switch to a Medicare Advantage plan. Managed care Medicare Advantage plans work well if you are healthy and if your budget does not allow you to buy a co-insurance policy and pay any portion of your prescription medication costs. If you sign up for the Medicare Advantage plan you do relinquish your choices. Think twice before you give up your freedom and choice to save a few dollars per month.

## **Cold and Flu Season Coming**



As we head into fall and winter we see an increase in the number of viral respiratory illnesses in the community. Most of these are simple self-limited infections that healthy individuals can weather after a period of a few days to a week of being uncomfortable from runny noses, sinus congestion, sore throats, coughs, aches and pains and sometimes fever. There are studies out of Scandinavia conducted in extreme cold temperature environments that show that taking an extra gram of Vitamin C per day reduces the number of these infections and the severity and duration in elite athletes and Special Forces military troops. Starting extra vitamin C once you develop symptoms does little to shorten the duration or lessen the intensity of the illness. Vigorous hand washing and avoidance of sick individuals helps as well.

Flu shots prevent viral influenza and should be taken by all adults unless they have a specific contraindication to influenza. A cold is not the flu or influenza. Whooping cough or pertussis vaccination with TDap should be taken by all middle aged and senior adults as well to update their pertussis immunity. We often see pictures of individuals wearing cloth surgical masks in crowded areas to prevent being exposed to a viral illness. Those cloth surgical masks keep the wearers secretions and “germs” contained from others but do nothing to prevent infectious agents others are emitting from getting through the pores of the mask and infecting them. If you wish to wear a mask that is effective in keeping infectious agents out then you need to be using an N95 respirator mask.

Once you exhibit viral upper respiratory tract symptoms, care is supportive. If you are running a fever of 101 degrees or higher taking Tylenol or an NSAID will bring the fever down. Staying hydrated with warm fluids, soups and broths helps. Resting when tired helps. Most adults do not “catch” strep throat unless they are exposed to young children usually ages 2-7 that have strep throat. Sore throats feel better with warm fluids, throat lozenges and rest.

You need to see your doctor if you have a chronic illness such as asthma, COPD, heart failure or an immunosuppressive disease which impairs your immune system and you develop a viral illness with a fever of 100.8 or higher. If your fever is 101 or greater for more than 24 hours it is the time to contact your doctor. Breathing difficulty is a red flag for the need to contact your physician immediately.

Most of these viral illnesses will make you feel miserable but will resolve on their own with rest, common sense and plenty of fluids.

## **It's Time to Get Your Influenza (Flu) Shot**

We are vaccinating patients against the flu. If you have not scheduled a visit to get your flu shot please call the office and schedule an appointment. We administer the trivalent inactivated product. We do not stock the quadrivalent vaccine which is in very short supply or the egg free vaccine due to their cost, short shelf life and limited demand. If you are an adult you should be receiving a flu shot.

If you are over 65 years old you should have been given your Pneumovax injection one time. If you are 50 and older you should have received an anti – shingles vaccine called Zostavax. Every seven to ten years you are advised to have a tetanus booster. During one of those times you should be receiving the tetanus plus whooping cough booster known as Tdap. If you have any questions feel free to contact me.

## **New Web Site**



Recently, my web site went through a redesign. I encourage you take a look and let me know what you think of it. If you have any recommendations on how it may be improved, I ask you to pass those along. Also, be sure to let your network of friends, family members, co-workers and others know about it.

**[www.BocaConciergeDoc.com](http://www.BocaConciergeDoc.com)**

---

### **Steven E. Reznick, M.D., FACP**

7280 W. Palmetto Park Rd., #205N, Boca Raton, FL 33441

**561-368-0191 | [www.BocaConcierge Doc.com](http://www.BocaConcierge Doc.com)**