

Spring 2018

A US FAMILY HEALTH PLAN MAGAZINE

SUN...
Friend or Foe?
Protecting Your Skin

US Virgin Islands
***On the Road
to Recovery***



**How to Talk
to Your Kids
After a Tragedy**

**RETIRING?
*What You Need
to Know***

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WELL-BEING



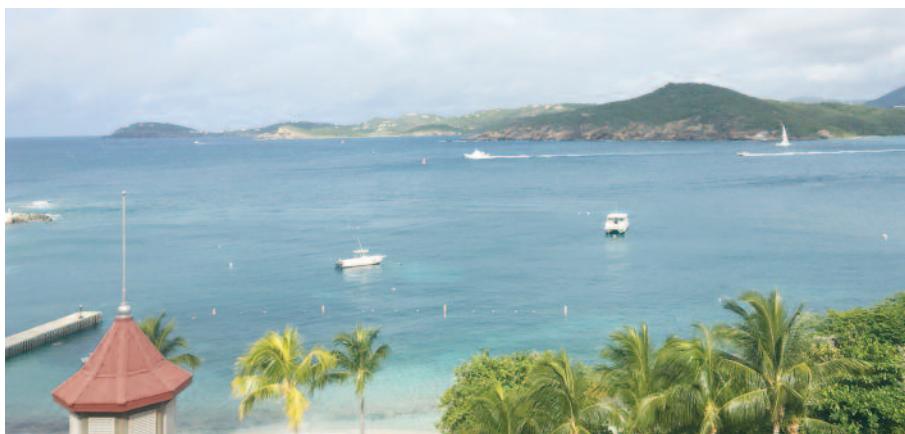
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See if we captured your smile.



Who We Are

The Uniformed Services Family Health Plan (USFHP) @ Saint Vincents is a TRICARE® Prime military health plan sponsored by the Department of Defense (DoD). We've been providing comprehensive care for military families and retirees for over 35 years. We provide the full TRICARE® Prime benefit including routine doctor visits, specialty care, hospitalization, urgent and emergent care, preventative health care services and prescription coverage—plus extras such as \$0 to low cost eyeglass benefit, annual physical exams and discounts to fitness clubs. USFHP members have access to some of the best hospitals and physicians in the nation.

We pride ourselves on providing friendly, personal service. If you have questions call us toll free (800) 241-4848. You can visit our website @ www.usfhp.net or at <https://www.facebook.com/usfhp.net/timeline>.



A US FAMILY HEALTH PLAN
MAGAZINE

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From the Executive Director

The winter season is a natural time of rest, reflection, and an overall slower pace. With the cold temperatures and the long, dark nights we often take refuge in our warm homes and find a sanctuary where we renew after the rush and pressures of the previous three seasons. Winter is a season of preparation.

Then there is the time of in between, a time of transition when it is still winter and yet we can smell the arrival of spring, especially on warmer days when rain gives off that undeniable hue of new life. We can sense spring and within us something begins to stir.

The time from winter to spring is a major turning point. It is during this time, we switch from rest and preparation to becoming active and working towards our personal goals.

During this transition, take the time to think on what you would like to birth anew. What has been removed in your life to make room for the new and beautiful about to be born? What is it you would like to start manifesting in the spring season? It is always wise to think on these issues in the present moment, for you know what they say about time... it flies, especially in transition.

Jeff Bloom

SPOTLIGHT

Army First Sergeant Theresa Arentzen, Retired

How many adventures can you pack into one lifetime?

How many races can you run?

If you enlist, how far can you climb up the military chain of command before retiring?

How many troops can you mentor?

If you marry and start a family, how strong will it be?

What kind of children will you raise?

What kind of spouse will you be?

How much living can you fit into one life?

Every day, one US Family Health Plan member sets out to prove the possibilities are endless. "It all depends on how many times you are willing to pay it forward," says retired Army First Sergeant Theresa Arentzen, who is working on her 10th year with Employer Support of The Guard and Reserve (ESGR) after serving a total of 22 years in the Pennsylvania Army National Guard. Arentzen currently serves as the ESGR Northeast Regional Lead for 14 states, a position she took on in 2013. Though this is her second career, her commitment to serving her community continues.

"My passion is helping service members and their families," says Arentzen, who volunteers for multiple military support organizations such as **Philadelphia Operation Stand Down** (an organization that helps homeless veterans), **USO of Pennsylvania and Southern New Jersey** (with stocking stuffers, back to school supplies and a multitude of other tasks needed to be completed), **111th Family Programs** (supporting numerous events and projects), **Our Community Salutes** (This group thanks new high school students who enlisted into the Armed Forces), **Operation Home Front** (Back to school supplies for service members and their families and Holiday events and food bank items). Arentzen is also a member of **Blue Star Moms Chapter PA9**.

To top it off, Arentzen is an avid athlete, who now uses her love of racing to advocate for veterans. Tucked away in her office at the Horsham Air Guard Station in Pennsylvania is a wall neatly adorned with dozens of race bibs, ribbons, and medals for the events in which she has run, biked, or volunteered. The wall, which includes awards that vary from obstacle mud runs to the famous Broad Street Run in Philadelphia, is still a work in progress. Arentzen has no plans of retiring as an athlete.

When asked if she has a favorite award, Arentzen humbly changes the subject to include one of her newest passions. "I really enjoy being a member of **Horsham Project Hero**," says



Arentzen. "This program helps disabled veterans to become active again by using bikes as a way to get them up and moving again." Arentzen's eyes light up when she describes how the program gave her a second chance at racing after she suffered from injuries that prevented her from distance running.

The First Sergeant's volunteer service has not gone unnoticed. On February 18th, 2018 Arentzen received the **Washington Crossing Foundation**

Award for her service and participation as a Revolutionary War Reenactor. That's right. Arentzen loves the Army so much that she "reenlisted" as a private to join **Glovers Marbleheaders**. "This group is known for rowing General Washington and his troops across Delaware River at Christmas Time," says Arentzen, who is in her sixth year of reenacting. "This really kicked off my interest to learn how hard the first soldiers had it by becoming a Revolution War Reenactor with the 6th Pennsylvania Regiment. I have been enjoying it ever since."

According to her bio, Arentzen's major military awards and decorations include: Meritorious Service Medal, Army Commendation Medal (5th Award), Army Achievement Medal (4th Award), Army Good Conduct Medal (5th Award), National Defense Service Medal (2nd Award), Kosovo Campaign Medal, Armed Forces Reserve Medal with Bronze Hourglass and with "M" Device, Noncommissioned Officer's Professional Development Ribbon with Numeral 3, Army Reserve Components Achievement Medal, Global War on Terrorism Service Medal, Army Service Ribbon, NATO Medal, Sharpshooter Marksmanship Badge w/rifle Bar, Silver German Army Marksmanship Badge, Driver and Mechanic Badge with Driver – Wheeled Vehicle clasp.

However, Arentzen believes the greatest gift the Army has given her is her family. This is another subject that causes her to eyes to light up. She has been married for 27 years to Charles F. Arentzen, who is also a retired Army First Sergeant. She is a proud mom to Mr. Timothy M. Arentzen and Jakob C. Arentzen. Jakob is now a 2nd LT in the Air Force, training as a Pilot. Their family also consists of their dog Maggie.

How did she do it all before the age 52? "The trick is to be thankful for what you have, and pay it forward."

Interviewed by Wil Acosta

St. Thomians say, “thank you” as they gradually reopen for business

While St. Thomas has not yet been entirely brought back to its beauty, the foliage has grown back lush and green; the waters are a piercing blue and the St. Thomians say “Hi...we are open for business”.

Considering the significant challenges of two back-to-back Category 5 hurricanes, locals are now seeing visible signs of recovery. Work crews are on the roads installing new power poles, grocery stores and restaurants are open, children are back in school, debris is almost all cleared up and home repairs are underway. Cruise ships and airlines are bringing in visitors and most beaches are open; vibrant, beautiful and blue.

In a recent media conference Michelle Paige, President of the Florida Caribbean Cruise Association told journalists that despite the intensity of the storms and the harrowing degree of damage, the rapid recovery is largely

due to the resilience and strength of the locals and the widespread support efforts from individuals, organizations, FEMA and other US government entities.

Immediately following the aftermath of the storm The National Guard Bureau deployed over 5,000 Guardsmen with the mission of providing first aid and care in Hurricane Maria relief efforts. In the latter part of 2017 a crew of Guardsmen from the 108th Area Support Medical Company, 213th Regional Support Group and Pennsylvania National Guard were sent to the islands of St. Thomas, St. John and St. Croix to augment the troops deployed in September.

To support the scarce medical resources at the Schneider Regional Medical Center in St. Thomas, a team of volunteer nurses from the New Jersey Health Association (NJHA) member hospitals and health systems were deployed to the island.

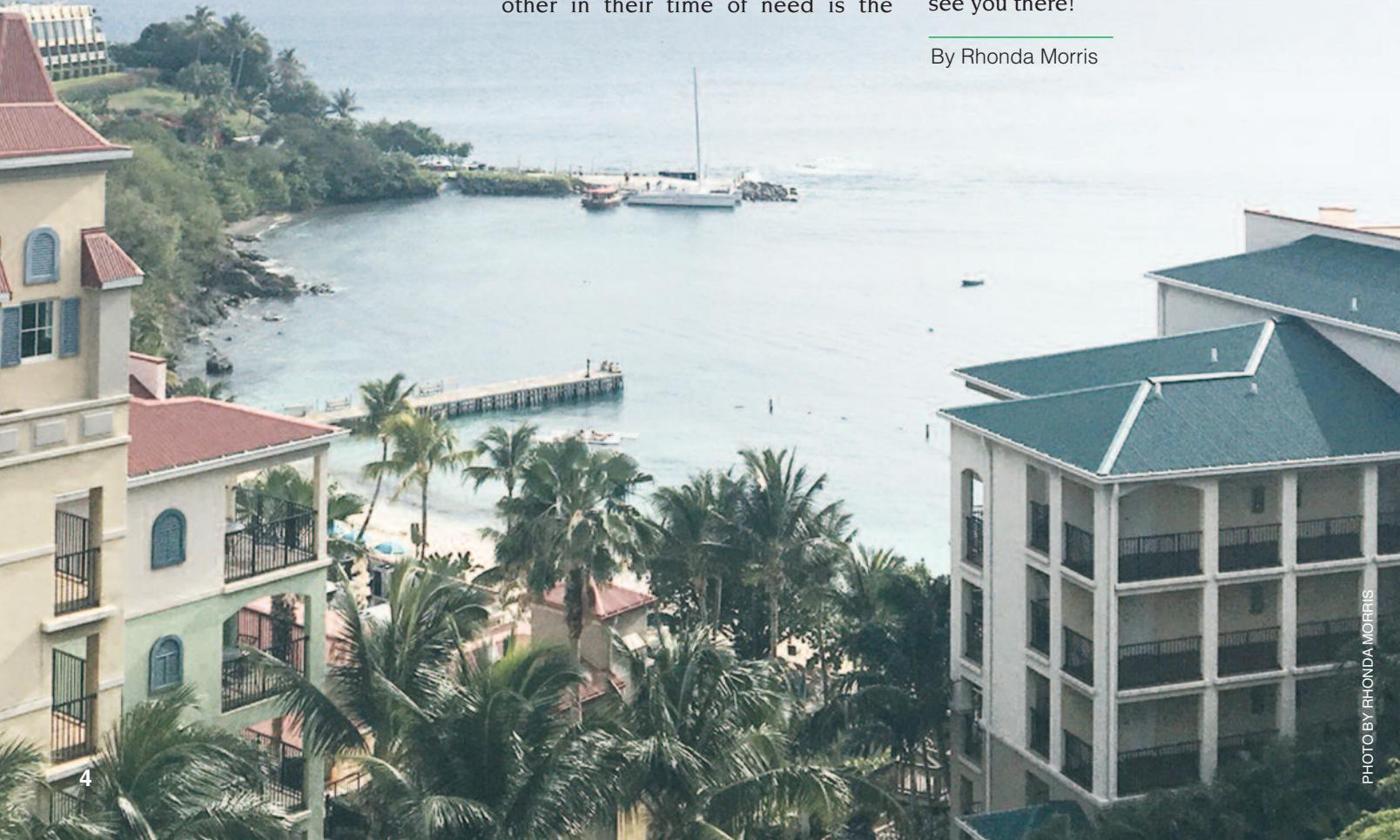
The power of people helping each other in their time of need is the

cornerstone of America.

“So many invisible helping hands” stated Norman a native of St. Thomas. We are ever so grateful for the tremendous help and donations received. “Obviously, we’re certainly not back to pre-hurricane status but we’re welcoming and ready for both land and sea visitors!”

The visual remnants of the storm — broken traffic lights hanging over intersections, damaged structures, detritus of vegetation pushed to the side of roadways, construction workers and power-line crews throughout the country — have no real impact on the visitor experience, but they do serve as a potent reminder of how much the locals have endured. There is no surer way to contribute to the health of an economy than by reinvesting your dollars where they are needed most. Consider visiting the Virgin Islands during this vacation season. I plan on visiting St. Thomas in April, hope to see you there!

By Rhonda Morris





May is Melanoma/Skin Cancer Detection & Prevention Month

Skin cancer is the most common type of cancer in the United States. Ultraviolet (UV) radiation from the sun is the main cause of skin cancer. UV radiation can also come from tanning booths or sunlamps. The most dangerous kind of skin cancer is called melanoma. The good news? Skin cancer can almost always be cured when it's found and treated early. Communities, health professionals, and families can work together to prevent skin cancer or detect it early on.

Take simple steps today to protect your skin:

- Stay out of the sun as much as possible between 10 a.m. and 4 p.m.
- Use sunscreen with SPF 15 or higher. Put on sunscreen every 2 hours and after you swim or sweat.
- Cover up with long sleeves and a hat.
- Check your skin regularly for changes.





Melanoma (Skin Cancer) Quiz:

1) Self-examination is important in the detection of skin cancer.

- True
- False



2) Most moles become skin cancer.

- True
- False



3) Because you have sunburn, your risk of developing skin cancer has increased.

- True
- False



4) Skin cancer is definitively diagnosed by...

- Visual observation
- X-ray
- Skin biopsy
- All of the above



5) Changes in colored lesions are rarely signs of skin cancer.

- True
- False



6) What are the ABCs of skin cancer?

- Americans Battling Cancer
- Anticipate Beating Cancer
- Always Be Thinking of Cancer
- None of the above





Symptoms & Signs

7) Which state leads the nation in skin cancer cases?

- Maryland
- Maine
- Colorado
- California



8) Skin cancer is the most common cancer in humans.

- True
- False



9) Most cases of skin cancer are cured.

- True
- False



10) Who is most at risk for skin cancer?

- Men
- Women
- Teens
- Babies



11) Which country has the highest rates of skin cancer?

- United States of America
- Switzerland
- Canada
- Australia



12) Tanning booths are the main cause of skin cancer in the United States.

- True
- False





Answers to Melanoma Quiz

on pages 6-7

1) TRUE

Because most melanomas occur on the skin where they can be seen, patients themselves are often the first to detect many melanomas. About 50,000 new cases of melanoma are diagnosed in the United States every year.

Every malignant skin tumor in time becomes visible on the skin's surface, making skin cancer the only type of cancer that is almost always detectable in its early stages.

2) FALSE

The vast majority of moles remain moles and do not turn into anything else.

Almost everyone develops moles, starting in childhood. On the average, people have about 25 moles. Moles may be flat or raised, and they may range in color from tan to light brown to black.

Everybody gets spots on their skin. The older we are, the more spots we have. Some of these are freckles, others are moles, and still others are made up of collections of tissue, such as blood vessels or pigment cells. Most of these spots are benign. That means they are neither cancerous nor on the way to becoming cancerous.

3) TRUE

Individual sunburns do raise your risk of melanoma. However, some daily sun exposure, even without burning, may also substantially raise your risk of skin cancer.

Factors that raise your risk for melanoma include the following:

- Caucasian (white) ancestry
- Fair skin, light hair, and light-colored eyes
- A history of intense, intermittent sun exposure, especially in childhood
- Many (more than 100) moles
- Large, irregular, or "funny looking" moles
- Close blood relatives -- parents, siblings, and children -- with melanoma

Note: The presence of close (first-degree) family with melanoma is a high risk factor, although looking at all of melanoma, only 10% of cases run in families.

4) C. SKIN BIOPSY

Most doctors diagnose melanoma by examining the spot causing concern and doing a biopsy.

A skin biopsy is the removal of a piece of skin for the purpose of further examination in the laboratory using a microscope. Skin biopsies are performed to diagnose a number of conditions.

5) FALSE

Changes in the appearance of skin lesions may indicate a serious problem.

When changes such as pain, swelling, or even bleeding occur, it is an indication that something may be serious. If a spot changes rapidly and then goes back to the way it was within a couple of weeks, or falls off altogether, it is not likely to represent anything serious. If the symptoms or signs continue, a visit to your doctor is in order.

6) NONE OF THE ABOVE

Melanomas most often arise on normal skin, but they may also occasionally occur in conjunction with a benign nevus (beauty mark or birthmark). The identification of potentially malignant pigmented lesions is best remembered by using the first five letters of the alphabet as follows:

- A is for asymmetry
- B is for border irregularity
- C is for color multiplicity
- D is for diameter greater than 1/4 inch
- E is for evolution (change) in the size and/or shape

7) CALIFORNIA

According to the CDC's U.S. statistics as related to melanomas of the skin, skin cancer ranks highest is the follow top 10 states:

1. California
2. Florida
3. New York
4. Texas
5. Pennsylvania
6. Ohio
7. North Carolina
8. New Jersey
9. Michigan
10. Georgia

8) TRUE

Skin cancer is the most common form of all human cancers in the United States, accounting for 75% of all cancer diagnoses. The two most common types -- basal cell carcinoma and squamous cell carcinoma -- are highly curable. Melanoma, the third most common skin cancer, is more dangerous.

The annual rates of all forms of skin cancer are increasing each year, representing a growing public concern. It has also been estimated that nearly half of all Americans who live to age 65 will develop skin cancer at least once.

9) TRUE

Most cases of skin cancer are cured, but the disease is a major health concern because it affects so many people. The incidence of skin cancer is rising, even though most cases could be prevented by limiting the skin's exposure to ultraviolet radiation through the appropriate use of sunscreen, limiting time in the sun, and wearing protective clothing.

10) MEN

Skin cancer is about three times more common in men than in women, and the risk increases with age. Most people diagnosed with skin cancer are between ages 45 and 54, although all forms of the disease are appearing more often in younger people. If you or any close relatives have had skin cancer, you are more likely to get the disease.

Geography and race also factor into your chances of getting skin cancer, with the rate of skin cancer at its highest where fair-skinned Caucasians migrated to an area with higher annual sun exposure than their prior climates.

Dark-skinned people are rarely affected, and then only on light areas of the body such as the soles of the feet or under fingernails or toenails.

Fair-skinned people are most susceptible because they are born with the least amount of protective melanin in their skin. Redheads, blue-eyed blonds, and people with pigment disorders such as albinism are at the greatest risk.

11) AUSTRALIA

Skin cancer tends to strike people of light skin color. An estimated 40% to 50% of fair-skinned people who live to be 65 will develop at least one skin cancer. The incidence of skin cancer is predictably higher in places with intense sunshine, such as Arizona and Hawaii. It is most common in Australia, which was settled largely by fair-skinned people of Irish and English descent.

12) FALSE

Excessive exposure to sunlight is the main cause of skin cancer. Sunlight contains ultraviolet (UV) rays that can alter the genetic material in skin cells, causing mutations. Sunlamps, tanning booths, and X-rays also generate UV rays that can damage skin and cause malignant cell mutations.

MEMBER UPDATES

MEMBER UPDATES

MEMBER UPDATES

What's New...?

Over the next few months we are revamping our enrollment fee payment system. You may receive a call from a representative from US Family Health Plan encouraging you to switch to the allotment method of payment. The allotment program is a safer, more efficient and effective way to ensure enrollment fees are posted accurately and timely. Members enrolled in the allotment program will not receive invoices by mail and will not need to contact us to make a payment by phone. Want to know more about the allotment program? Call us @ (800) 241-4848 option #3

Did you recently move, get a new email address or change your PCP?

Do you have Other Health Insurance? Let us know, so you can update your demographics, avoid being balance

billed and receive reimbursement of co-pays (when applicable).

Your feedback is important to us!

The 2017 CAPHS survey was sent out to members. This survey rates your service with us and lets us know what we do well and what we need to work on. Help us to serve you better...

We are growing!

Barnabas Health and Robert Wood Johnson Health system have joined our provider and hospital network!

Asbury Park - Barnabas Health and Robert Wood Johnson Health System have merged, the two companies create New Jersey's biggest health care system that stretches from Ocean County in the south to Hudson County in the north. The newly formed company, based in West Orange, unites 11

acute-care hospitals, including **Robert Wood Johnson University Hospital** in **New Brunswick**, **Monmouth Medical Center** in Long Branch, and **Community Medical Center** in Toms River, and dozens of other doctor's offices, laboratories, imaging centers, pharmacies, behavioral health centers, fitness centers and specialty clinics.

"We have created the most comprehensive health system in the state, which will enable us to effect the kind of change in the health of our communities that our two separate systems could not do alone," Barry H. Ostrowsky, Barnabas Health's president and chief executive officer, said in a statement.

The new health system will be called RWJ Barnabas Health.

<https://www.app.com/story/money/business/consumer/2016/03/31/barnabas-and-robert-wood-johnson-merger-finalized/82465878/>



TRICARE®

Retiring

When you retire from active duty, you and your family have a change in status.

- You and your family members will get new ID cards
- Your options will change after you retire, especially if you move
- You're still eligible for TRICARE and won't lose minimum essential coverage

Before You Retire

Remember to Enroll in a TRICARE program with a future enrollment date. This date should correlate with your retirement date. This ensures there is no break in coverage for you and your eligible family members.

TRICARE UPDATES for RETIREES

After You Retire

Here's a quick look at how TRICARE changes when you retire.

When you retire, the status change will cause you to be dis-enrolled from your Prime Option.

- You can re-enroll in TRICARE Prime/US Family Health Plan if you still reside within our service area.
- You must pay annual enrollment fees
- You can re-enroll online, on the phone or through the mail
- Your enrollment must be completed within 90 days of your retirement date to avoid a break in coverage

Costs

While on active duty, you paid nothing out-of-pocket and your family's costs were minimal. As a retiree, you'll see an increase in costs. Depending on your TRICARE plan, your new costs may include:

- Annual TRICARE Prime enrollment fees
- TRICARE Prime network copayments
- TRICARE Select costs increase by 5%

Catastrophic cap increases from \$1,000 to \$3,000 annually per family.

Family Members Eligible for Medicare

Family members who are eligible for Medicare must have Medicare Part B coverage to stay eligible for TRICARE when you retire.

Don't Lose Your TRICARE Benefits!

Remember to contact us prior to retirement. This is to ensure there is no break in coverage.

Moving after you retire?

If you move after you retire, be sure to update your address in **DEERS**.



***Thank you...
to those who love, those who serve!***

Military Spouse Appreciation Day 2018

National Military Spouse Appreciation Day is celebrated on the Friday before Mother's Day in May. This year it will be observed on **Friday, May 11th, 2018**.

On Military Spouse Appreciation Day we honor the contributions and sacrifices made by military spouses. Their commitment and support helps to keep our country safe. America's military spouses are the backbone of the families who support our troops during mission, deployment, reintegration and reset. Military spouses are silent heroes who are essential to the strength of the nation, and they serve our country just like their loved ones.



Are you a U.S. Military retiree?

US Family Health Plan appreciates the sacrifice of all our retired military service members.

Retiree Appreciation Days (RADs) are designed with you in mind. They're a great source of the latest information for retirees and Family members in your area. RADs vary from installation to installation, but, in general, they provide an opportunity to renew acquaintances, listen to guest speakers, renew ID Cards, get medical checkups, and various other services.

In the US Family Health Plan service area there are a few such events happening this spring:



April 7th, 2018 • 9 am - 2 pm

Horsham 111th Attack Wing

*Wing Horsham Air Guard Station, PA
1051 Fairchild Street, HQ Bld. 203*

April 28th, 2018 • 7 am - 12 pm

Joint Base McGuire-Dix-Lakehurst

2901 Falcon Lane, McGuire Air Force Base, NJ

April 28th, 2018 • 7 am - 11 am

West Point

Eisenhower "Ike" Hall West Point, NY



The New Jersey National Guard State Family Readiness Council

SPOTLIGHT

This US Family Health Plan Spotlight features the New Jersey National Guard State Family Readiness Council (NGSFC). The mission of the council is to assess the needs, recommend and execute solutions for the New Jersey National Guard members and their families on a state level.

The Council has made numerous contributions to many worthy projects and programs that give significant relief to deployed military personnel and their families. This relief is funded through a grant program, which raises funds both privately and publicly.

The NGSFC Chairman of the board is Sergeant Major Len Mayersohn (USA Ret.). US Army. Len enlisted in the army when he finished high school in 1962 and served for three years. In his final year, he served in Korea. Seventeen months after leaving the army, Len got a fulltime job through a friend in South Plainfield, New Jersey at a Nike Hercules Missile site for the National Guard. Len proudly donned the uniform for a total of 41 years of which 33 years were served as a full-time guard employee.

In 2004, the state of New Jersey began to mobilize and deploy army and air National Guard members in support of the global war on terrorism.

"A bunch of us that were in various leadership positions were called together for a meeting and collectively we agreed that we would try to make an impact to assist the service members," Len said. "What we did was incorporate ourselves and start to run some programs to generate some money so that we can establish a grant program to help guard members and their families. We've been in business now for almost 14 years."

"The fundraising efforts have been successful" stated Len. The council has awarded grants totaling approximately \$2.4 million since inception. With Len serving as Chair for six years, the rest of the board consists of vice chair Bill



From left to right: Richard Eastman, LTC (USA Ret.), Pamela Mount, Chad Fleming, Jeff Bloom, Len Mayersohn, SGM (USA Ret.), Stephanie Aly, Peter Angerame.

Rochelle, secretary Jane F. Kelly and our very own, Jeff Bloom, who serves as treasurer. Other members include the former mayor of Lawrenceville, NJ, a few retired general officers and a retired lieutenant colonel.

"We have a really good cross section of dedicated volunteers who serve on our board. It's a great mix and we involve ourselves in a multitude of things, which gives us the support needed to raise funds", stated Len. The Readiness Council helps its members and families that have faced multiple issues in conjunction with being mobilized and deployed. Len said they would step in and assist them whenever they could or make referrals to other service agencies.

In terms of eligibility, the council will consider applications that are submitted by individuals within 18 months of their separation from mobilization and deployment. The applications go through a grant committee and if approved, it goes through Jeff for payment action. The New Jersey Army and Air National Guard members are the only group eligible for this program.

"There are issues at home and they need some assistance here and there," Len said. "Employment is an issue when people return home and there-

fore bills pile up more than you can imagine."

Down the road, The NGSFC will look to continue to raise funds to support their programs and disperse them to qualified applicants.

Len said the council recently received notice that a significant number of service members are being mobilized and deployed in the next 18 months.

"Unfortunately the global war on terrorism is not going away, so we'll continue to march," Len said. "I was never mobilized or deployed but I know plenty who have been and understand the financial and social impact it has. We are thinking forward knowing that people will be affected for 18 months or so."

We at USFHP thank the New Jersey National Guard State Readiness Council for its commitment in helping our service members. We also thank Len and the rest of the council for their dedication as they continue to make the council a success. USFHP will be there to meet the needs of the military members by providing the benefits they deserve. To support the foundation, visit their website at <http://nationalguardsfrc.org/>

By Gregory Giaconelli

Protecting Our Children



The sinking feeling is becoming all too familiar: When mass shootings occur in schools, parents have to figure out how to talk to their children about violence. There's no one way to address tragedies with children, and how parents approach it depends both on the child's age and temperament. The American Psychiatric Association and the American Academy of Pediatrics recommend avoiding the topic with children until they reach a certain age – around 8, but again, it depends on the child.

"If it doesn't directly affect your family, kids under 8 do not need to hear about this," says Dr. Deborah Gilboa, a parenting expert. Before this age, children struggle to process it.

But parents should talk to their younger children about mass shootings if they are at risk of hearing it from others, she says.

"First, you have to process your own emotional response. What you do will affect them more than what you say," she says. "Have your first reaction away from your child."

"You have to do it delicately stated Pamela Kwiat, Senior Health Benefit Consultant @ US Family Health Plan. "You don't want your child to be afraid to go to school, stated Pam. "It's a tough topic to discuss with your child. It's every parent's worst fear and the most difficult thing to imagine. I'm still trying to emotionally process my own feelings about the recent school shootings; I grapple with when and how to talk with my 7 year old son Aiden, about these horrific events".

While advice varies by age, Gilboa provides general recommendations for all parents faced with telling their children about the latest mass shooting.

Preschool-kindergarten: One-sentence story

"You have to figure out before you talk to them what story you want them to tell themselves," she says.

With young children, Gilboa recommends that parents keep their stories simple. These stories should reinforce parents' beliefs. Perhaps, parents want their children to know that a bad man hurt people. Maybe parents want their children to know that someone with a serious illness felt angry and hurt people.

"You are going to give a one-sentence story to anyone under 6," she says.

This might be a chance to change the conversation, too. Try to focus on the positives, such as the heroes of the story.

Elementary School Children: Shield them

Again, parents need to decide on the takeaway message. Children in this age group will ask many more interrogative questions and parents need to decide how much they want to share.

Gilboa stresses that parents should prevent their children from seeing pictures or the news because the images will stick with children longer than words. If children do see pictures, she recommends that parents show their children positive photos to counteract the negative.

"Let's see if we can replace those memories and balance it out by showing the positives and the amazing people who rushed to help," she says.

Tweens: Listen to their feelings

Start the conversation by asking tweens if they heard about the latest shooting.

"If you are going to talk [about] a fraught or laden topic ... you start with a pretest. You are going to ask how they feel about it," Gilboa says.

If they have heard of it, listen to their feelings. If they haven't heard of it, parents have an opportunity to share their beliefs while gaining better insight into their tweens.

"[This becomes] a great conversation of their values and your values that do not focus on the particular gore [but] more on the person you are raising," she says.

Teens: Look for solutions

Again, Gilboa says parents should ask their teens if they have heard of the latest tragedy and allow them to share their feelings.

But teenagers will expect more.

"Teenagers are looking for hypocrisy and solutions and this generation believes in collaboration and social justice. And they are going to ask 'What are you doing,'" she says. "You can answer and then ask 'what are you doing? What would you like to do? What can we do together?"

Teaching teenagers to work toward change will help them be resilient, she says. She stresses that parents still need to listen to their teens' feelings and display empathy.

"I think for anyone action makes us feel effective," Gilboa says. "What we want our kids to do when they see something wrong is to try to fix it."

Meghan Holohan, TODAY Contributor

<https://www.today.com/parents/how-talk-children-about-shootings-age-age-guide-t59626>
Reprint from article posted in TODAY Contributor, February 14, 2018.

FAM CAM... Out and About

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**Children's
Holiday Party
Fort Hamilton,
NY**



**USFHP worked with Soldiers
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family holiday wishes.
(Pictured) The Castillo's with
Elf Audrey Moore, Health
Benefit Associate**



*The lost footage -
Summer 2016 Fort Dix Base Picnic*



Loaded Greek Chickpea Salad Recipe

INGREDIENTS

- 15 oz chickpeas, rinsed and drained
- 1/2 small red onion, sliced thin
- 2 cups cherry tomatoes, halved
- 1/3 cup pitted Kalamata olives
- 2 small English cucumbers, sliced
- 1/3 cup feta cheese, crumbled (I added a chopped jalapeno today for a little kick - totally optional!)

DIRECTIONS

1. Place all chopped salad ingredients nicely into a large bowl.
2. In a small glass bowl, whisk together dressing ingredients.
3. Add dressing to the salad bowl and toss gently to combine.
4. This salad is great for meal prep as it stores perfectly in fridge for up to 3 days.
5. Make sure you only mix it with the dressing right before serving if using for future meals.

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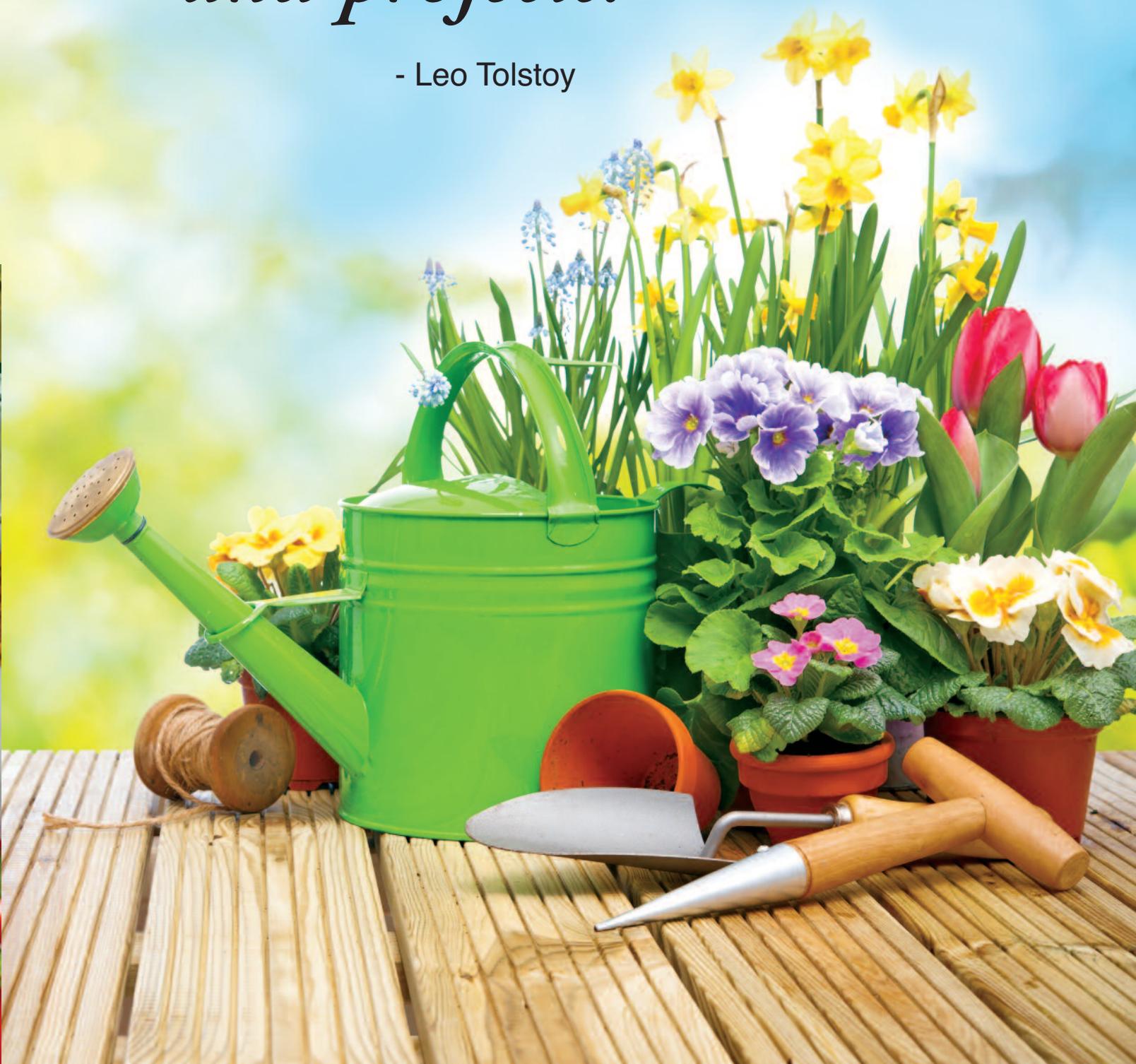


DRESSING INGREDIENTS:

- 2 Tbsps extra virgin olive oil
- 2 Tbsp balsamic vinegar, OR apple cider vinegar for the extra health benefits
- 1 Tbsp raw honey
- 2 small garlic cloves, minced
- 1 tsp dried oregano
- freshly ground sea salt and pepper, to taste

*Spring is the
time of plans
and projects.*

- Leo Tolstoy





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