

FAM

A US FAMILY HEALTH PLAN MAGAZINE



Celebrating WOMENS History

CORONAVIRUS

Myths vs Facts

TRICARE Changes





US FAMILY
HEALTH PLAN



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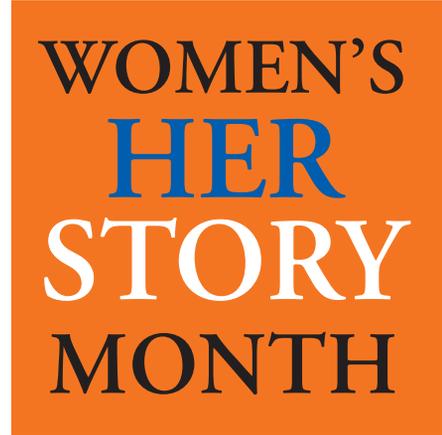
FAM HEALTH



WELL-BEING



COMMUNITY



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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 Chief Medical Officer



Dear Members,

As new coronavirus cases continue to multiply, US Family Health Plan wants to keep you informed about what's happening. While the impact of this disease has been extensive, you should take proactive measures to protect your health. US Family Health Plan encourages you to take the following actions to help respond to this emerging public health threat.

WASH YOUR HANDS

The Centers for Disease Control and Prevention (CDC) recommends washing your hands with soap and water and scrubbing your hands for at least 20 seconds—just long enough to hum the “Happy Birthday” song from beginning to end twice. When you don't have access to soap and water, hand sanitizer that contains at least 60% alcohol is a good choice. Because COVID-19 can spread through direct contact, it's important to avoid touching your mouth, nose, and eyes with unwashed hands. Use caution when you come into contact with objects touched by others. For example, if you're at the gas station, wash your hands after pumping your gas.

PRACTICE OTHER GOOD HYGIENE

The CDC offers basic prevention techniques you can use to protect yourself:

- **Avoid touching your eyes, nose, and mouth with unwashed hands.**
- **Clean and disinfect frequently touched objects and surfaces.**
- **Avoid close contact with those who are sick.**
- **If you're feeling ill, stay away from others. Stay home except to get medical care.**

If you feel sick or need health advice, the nurse advice line is available 24/7. Nurses are able to screen patients for potential or suspected exposure or infection.

US Family Health Plan is committed to keeping you and your family safe, informed and healthy.

We assure you that our commitment to our members, and to the communities we serve, remains strong and focused.

Dr. Maria Basile

WOMEN'S HERSTORY MONTH

Every year March is designated Women's History Month by Presidential proclamation. The month is set aside to honor women's contributions in American history.

Did You Know?

Women's History Month started as Women's History Week

Women's History Month began as a local celebration in Santa Rosa, California. The Education Task Force of the Sonoma County (California) Commission on the Status of Women planned and executed a "Women's History Week" celebration in 1978. The organizers selected the week of March 8 to correspond with International Women's Day. The movement spread across the country as other communities initiated their own Women's History Week celebrations the following year.

In 1980, a consortium of women's groups and historians — led by the National Women's History Project (now the National Women's History Alliance) — successfully lobbied for national recognition. In February 1980, President Jimmy Carter issued the first Presidential Proclamation declaring the Week of March 8th 1980 as National Women's History Week.

“ From the first settlers who came to our shores, to the American Indian families who befriended them, men and women have worked together to build this nation. Too often the women were unsung and sometimes their contributions went unnoticed. But the achievements, leadership, courage, strength and love of the women who built America was as vital as that of the men whose names we know so well.”

-- President Jimmy Carter 1980



ENCOURAGE, INSPIRE, LEAD

Three encouraging quotes from women who lead large health care systems in the US Family Health Plan network.

“ Women are told this all the time, but it’s vital, so I’ll repeat it: Speak up. It took me awhile to find my voice and, early in my career, I didn’t volunteer my thoughts. I wanted to have the perfect thing to say, and if I didn’t think I had it, I didn’t say anything at all. This is still a common issue for many women — more so than for men — and I’d like to encourage them to find their voice. They need to be part of the conversation.”

- **Marna Borgstrom**
CEO of Yale New Haven (Conn.) Health

“ I would encourage women seeking leadership roles to pursue opportunities that align with their personal values and to use that as a basis to project the authenticity essential to being a great leader.”

- **Sandra Brooks, MD**
Senior Vice President and CMO of Thomas Jefferson University Hospitals Center City Division in Philadelphia

“ As an individual fortunate enough to be regarded as a healthcare leader, specifically a female leader, the opportunity to mentor other women is an imperative. Nothing is more joyful than to know you have made a difference in someone’s life and positively impacted the future of an aspiring young person. As we celebrate International Women’s Day, let’s remember to reach out to a young woman, offer encouragement, and pay forward the good fortune we have achieved as leaders.”

- **Carla Parker-Hollis**
Chief Operating Officer of Jersey City (N.J.) Medical Center-RWJBarnabas Health

“Some leaders are born women”

- Geraldine Ferraro

Our cover collage represent eight of the many women who have forever changed the landscape of America. Below are the attributes of these women. Test your women's history IQ by matching the story with the photos on the cover.

- 1) She became the first American woman to earn an international pilot's license and went on to stage the first public flight by an African-American woman in the U.S.
 - Rosa Parks
 - Amelia Earhart
 - Mary Seacole
 - Bessie Coleman
- 2) She was an American activist in the civil rights movement best known for her pivotal role in the Montgomery bus boycott. The United States Congress has called her “the first lady of civil rights” and “the mother of the freedom movement”.
 - Shirley Chisolm
 - Bessie Coleman
 - Rosa Parks
 - Sojourner Truth
- 3) She was an American attorney and politician who served in the United States House of Representatives. She was the first female vice presidential candidate representing a major American political party.
 - Elizabeth Warren
 - Geraldine Ferraro
 - Hillary Clinton
 - Sarah Palin
- 4) She was the first woman surgeon in the military to hold the rank of Vice Admiral. Her legacy is as rich as it is deep, going well beyond the military and medicine.
 - Sylvia Trent Adams
 - Jocelyn Elders
 - Antonio Novello
 - Raquel Bono
- 5) She became the first official woman to enlist in the military in 1917.
 - Myrtle Hazard (Coast Guard)
 - Deborah Sampson (Army)
 - Opha May Johnson (Marine)
 - Loretta Walsh (Navy)
- 6) The first Latina woman appointed to the US Supreme Court.
 - Elena Kagan
 - Ruth Bader Ginsberg
 - Sonia Sotomayer
 - Sandra Day O'Connor
- 7) Became the first female four-star general in the United States military.
 - General Janet Wolfenbarger
 - General Mary Anne Miller
 - General Ann Dunwoody
- 8) Was the first African American woman in Congress.
 - Maxine Waters
 - Shirley Chisolm
 - Bessie Coleman
 - Kamala Harris



SPOTLIGHT

SGT. CONSTANCE COTTON

Her Journey To and From Military Life

An amazing woman characterized by her courage, strength and perseverance as she journeyed back and forth from civilian to military life. Sgt. Constance Cotton, USA, (Ret) was born in Philadelphia, Pennsylvania to her loving parents both now 83 years young. She comes from a strong family with close ties. Constance followed her father's footsteps as he honorably served in the Korean War. Constance began her education in Philly and soon after



completing the 6th grade was enrolled at the prestige *Scotland School for Veteran Children* (SSVC). The boarding school was unique and paralleled Cotton's dream as it was designed and accredited to educate and care for the children of Pennsylvania military service veterans. Constance was attracted to the curriculum that boasted a JROTC program of which she was a member, strong academics, a caring home life program and more. Armored with the discipline and knowledge attained at SSVC, Constance Cotton was ready for

adventure and to see the world so she joined the Army Reserve in 1988. Cotton recalls that when she was in boarding school at SSVC the environment was very different then when she returned home to her community. It was a different quality of life, a sort of systematic



depression, "I wanted a better quality of life". Sgt. Cotton spent the next two years traveling from Germany to Italy and in 1990 was called to serve under Desert Shield. By January 1991 she was in the midst of what we know as Desert Storm aka Gulf War aka 1st IRAQ war. Her job was with the Medical Logistics Unit in charge of medical supplies, procurement and quality content. She actually drove the bus that moved supplies from the medical supply warehouse to wherever supplies were needed. Sounds like a very interesting job, and it was... Sgt. Cotton speaks of how proud she was to serve with no regrets. In 1992 Constance returned to civilian life and was faced with

other challenges, the disparity of pay between men and women in the civilian life and just making the adjustment from the military environment. Ms. Cotton reported, “Civilian life was different, I didn’t feel the same”. She worked as a UPS driver which was less fulfilling than the important role she played in the military, providing life- saving equipment and supplies. In addition, she didn’t feel like the care she needed could be obtained in a civilian world that did not understand some of the challenges of being in the military. Sgt. Cotton returned to the military full time in 1994 and remained on active duty for the next 10 years. She medically retired in 2004.

She is now an advocate for veterans, serving as the Commissioner of Camden County Human Relations. Additionally, she is a member of DFW and DAV (Disabled Veterans) and a Community Activist. Ms. Constance volunteers in schools; assists veterans and helps her family. She enjoys family time with her sons, both play basketball and she is there to cheer them on.

As I interviewed her I couldn’t help but ask, “With such a full life, what keeps you going”? Sgt. Cotton simply responded. “God, faith, family”, and her decision to join the seminary. Constance earned a Masters of Religion in 2006 from the Luther Theological Seminary. Sgt. Cotton recalls this personal faith journey as the vehicle that allowed her to heal and begin to talk about the experiences she had in the military and the impact these experiences had on her return to civilian life.

Today, Sgt. Constance Cotton serves as a member of the Woodline Women’s Veteran Group started by Rev. Floyd White III, Pastor of Woodline Avenue Presbyterian Church. They have groups that meet four times per year for seminars with about 30 participants. It was at one of those seminars that she connected with



US Family Health as they sponsored the event. She was so impressed, that she left TRICARE (Humana) and joined US Family Health and reports being very happy with the plan.

Don’t miss out on Sgt. Cotton’s book. Yes, she was able to write a book while going through this journey *On the Battlefield: Overcoming Challenges with the Aftermath of Military Experiences*. Finally, what message is Sgt. Constance C. Cotton trying to convey to the masses? Again, she put it simple, females were on the frontlines and did the same jobs as men so they should not be treated differently, military veterans especially women need to feel free to talk about their trauma and that religious organizations can help veterans by creating veteran ministries in their organizations.

Thank you Sgt. Constance C. Cotton for your service in military and civilian life...We salute you!

By Dr. Natalie Davis Richardson



MEET MICHELE THOMAS

New Jersey Army National Guard Chief Warrant Officer 5 (Retired)

Chief Warrant Officer Thomas proudly served for over 40 years from 1976 until she retired at the end of 2018.

navigated all the challenges of raising a family and serving on active duty for her initial 15 years of service. So what does life look like now, are you bored was my inquiry?

CW5 Thomas is not bored. In fact, she is preparing to take her first cruise to Bermuda as she plans the next phase of her life. In addition, she is taking care of some household chores and gardening as she reaps the fruit of retirement.

We thank her for her service and years of dedication and for helping to break that glass ceiling.

Yes, CW5 Thomas was the first female Chief Warrant Officer 5, NJ Army National Guard, the highest rank to achieve. She was chosen for her abilities to handle the rigorous responsibilities of the role and her dedication to her work. As a warrant officer you are trained as a technical expert, her focus was human resources a major contribution to the service and our country.

During CW5 Thomas' last five years she began attending briefings on benefits and insurance in preparation for retirement. She recalls that there were three plans to choose from and that after her extensive investigation US Family Health Plan was the "best bang for my buck".

Ms. Thomas is certainly a woman of determination and courage. She enjoyed a family life with her husband who she met early in her career while on active duty in Oklahoma, love at first sight, marrying six months later. She has two adult sons, one married and following her footsteps as an International Guard and the other son enjoying his life in the wonderful world of work outside the military. CW5 Thomas



At the CCWO ceremony on March 31, 2018. From left to right: Michele's son Isiah, his wife Deborah, Michelle and her son Joshua.

Finally Chief Warrant Officer 5 – Michele Thomas wants women to stick together and stay in service so they too can get promoted to positions that are not generally for women. She hopes that other women are motivated by her story and have the same level of dedication to serve.

By Dr. Natalie Davis Richardson

Fitness Matters

 By Jason Prosser

FITNESS CORNER



The gym crowds are already starting to slow down. The New Year, New Me hype is over and it's back to business as usual. How about you? Did you start your fitness journey this year only to see it come to a quick end? If so, it's ok. You can smile and not beat yourself up over it. We all find ourselves in situations where fitness makes its way to the bottom of the priority list. Work, kids, school, relationships and a multitude of other things can cause that. So, why should we work hard to keep it on the priority list? Everyone has their own reasons but what helps is knowing YOUR why? Let's see if we can identify why fitness matters in your life so we can add it back to your list.

Work can ask a lot of a person. You may have a job where you find yourself



sitting for long periods of time. The job can make you stiff, sore and cause pain in all different areas of the body due to lack of movement. Continual work in this way can cause most of your issues over the long term but a lack of move-

ment mixed with a poor diet can lead to rapid weight gain and poor health over a very short period of time. In the same way, a physically demanding job can also cause pain and stiffness. Our bodies can grow accustom to this lifestyle rather quickly and then it becomes a habit for the body. Soreness, aches and pains start to become normal too. Working out even for 20 minutes a day can prevent the body from going through some of these unnecessary and sometimes painful changes.

Is your relationship the reason you haven't started working out or maybe even the reason you stopped? We can meet someone new and we get comfortable with them and stop working out because we found someone who loves us for who we are and working out is no longer something that matters. Maybe it's not a new relationship, maybe we're with the same person we have loved for a long time now and were just living our best life with them. Wanting to hold on to that special person for as long as possible is probably one of the best reasons to work out and live healthy. Working out doesn't necessarily mean you have to be in a gym sweating it out and lifting weights every day. Maybe try doing a couples workout a few days a week or

just go on walks together somewhere nice that you both can enjoy.

What better excuse for not working out than our children? We want to do our best as a parent to make sure they get a good education, build good habits and teach them to be successful so they too can have kids of their own one day. If you have little ones or even if you have teenagers who are involved in after school activities, making time to work out can be difficult. Home workouts, 30 min lunch routines and quick trips to the gym in the evening are sometimes all you have time for and believe it or not, that may be all you need. Lifting your kids or grandkids high in the air, playing sports with them, going to the park and beach with them is a great reason to keep showing up for those work outs. Both of you win when you can do more than watch them play.

So, if you want less pain at work, a longer and healthier relationship with your significant other or the ability to comfortably play with your children and grandchildren, make sure you focus on your health. Just know, you don't have to train like an athlete to get in shape or even stay in shape. You just need to consistently show up and put in the work to keep your body moving and functioning well without pain. Know your "why" for fitness and you will find it easier to make it a priority.

USFHP NEWS

COMING SOON! REVAMPED MEMBER PORTAL

Interested in getting access to your **HEALTH INFORMATION** without making a **PHONE CALL**?



Visit our website to receive updated information
WWW.USFHP.NET

We are putting the final touches on a **NEW CUSTOMER PORTAL** that gives you **EASY, QUICK ACCESS** to your information by the **CLICK OF A BUTTON**, you can ...

- View or request a change to your (PCP)
- Print or request an ID card
- Find a network healthcare provider
- View your claims and explanation of benefits
- Request an update to your address
- Opt-in to paperless communication



NEWS

The Department of Defense’s (DoD) plan to further restructure military hospitals and clinics, to enhance war readiness will start in our backyard.

Pentagon officials recently released a list of military treatment facilities and clinics that will no longer provide care to military retirees and active-duty families as part of a shift in focus to supporting active-duty readiness. Of the 38 facilities that will no longer see retirees or family members, 24 are slated to shift to active-duty only over the next several years, officials said. Eleven clinics have already started the process of moving to active-duty only, and three are slated to close to all users.

In 2019 Naval Support Activity Lakehurst, New Jersey, Naval Behavioral Health Clinic Lakehurst was one of the eleven clinics that closed their doors to retirees and active duty family; shifting families to civilian care providers or auto assigning them to direct care at JDBMDL. Those families that made

that transition to receive care at Joint Base McGuire last year, will have to brace themselves for yet another change in health care providers in the near future.

Three of the 38 clinics closing to non-active duty patients are in the US Family Health Plan/St. Vincent’s service area.

- Joint Base McGuire-Dix-Lakehurst, New Jersey, outpatient clinic
- Navy Weapons Station Earle, New Jersey, Colts Neck Earle clinic
- Naval Submarine Base New London, Connecticut, Naval Branch Health Clinic Groton

US Family Health Plan is working with the clinics in our area to ensure a smooth transition from direct care to purchased care for affected beneficiaries at the Naval Submarine Base New London, Ct, shared Maria Green Retired US Army, and US Family Health Plan Sr. Health Benefit Consultant. “We are working

with families now to understand their choices and assist the clinic with transitioning the retiree families using the clinic for care”.

“The military health system is in the midst of implementing several significant reforms aimed at building a more integrated and effective system of readiness and health,” said Tom McCaffery, assistant secretary of defense for health affairs. “We reviewed all facilities through the lens of their contributions to military readiness -- that includes MTFs [being] operated to ensure service members are medically ready to train and deploy. It also means MTFs are effectively utilized as platforms that enable our military medical personnel to acquire and maintain the clinical skills and experience that prepares them for deployment in support of combat operations around the world.”

Member Rights and Responsibilities

MEMBER RIGHTS

As a member of US Family Health Plan you have the right to:

- To choose the health care provider that is best suited for you from the Plan's extensive network of highly qualified providers.(www.usfhp.net)
- Emergency health care services when and where you need it
- Review information about the diagnosis, treatment and progress of your condition
- Fully participate in all decisions related to your health care or to be represented by family members, conservators or other duly appointed representatives if you are unable to fully participate in treatment decisions.
- Considerate, respectful care from all members of the health care system without discrimination based on race, ethnicity, national origin, religion, sex, age, mental or physical disability, sexual orientation, genetic information or source of payment.
- Communicate with health care providers in confidence and to have the confidentiality of your health care information protected.
- Review, copy and request amendments to your medical records.
- A fair and efficient process for resolving differences with your health plan, health care providers and the institutions that serve them. (See Complaints and Grievances*)

MEMBER RESPONSIBILITIES

As a member of US Family Health Plan, you have the responsibility to:

- Be involved in health care decisions, which means working with providers in developing and carrying out agreed-upon treatment plans, disclosing relevant information and clearly communicating your wants and needs.
- Be knowledgeable about your coverage and program options, including covered benefits; limitations; exclusions; rules regarding use of network providers; coverage and referral rules; appropriate processes to secure additional information; appeals, claims, complaints, and grievance processes.

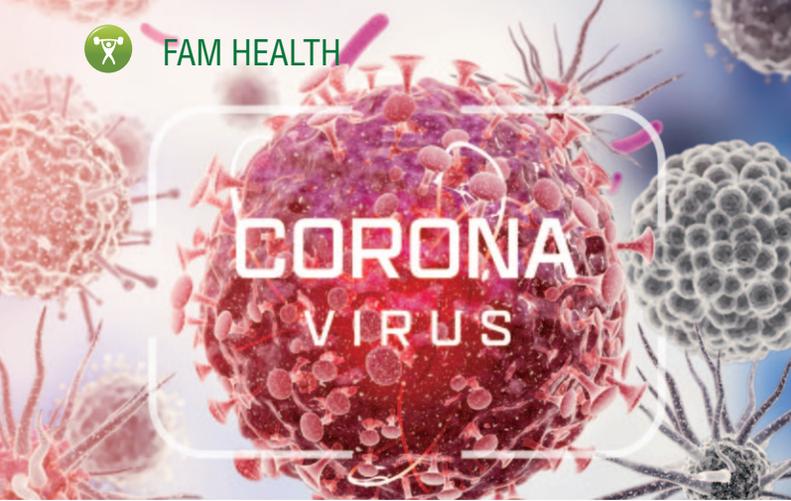
*Complaints and Grievances

USFHP addresses all complaints and grievances in an empathic, efficient, and timely manner. Most verbal complaints are handled by telephone at the time they are voiced, the remainder will be addressed within 10 business days.

Grievances, which are written complaints, are all addressed within 60 days or less. Grievances are generally responded to in writing, using the same method in which they are sent (fax, email, or letter).

- You should file a grievance when:
 - You have a complaint about the quality of care you received
 - A provider or facility behaved inappropriately, or
 - You have any other non-appealable issue.
- The grievance may be against any member of your health care team. This includes your USFHP doctor, your Case Manager, Specialist, or a subcontractor. (Magellan/OrthoNet/DavisVision/HealthPlex)
- Be respectful of other patients and health care workers.
- Make a good-faith effort to meet financial obligations.
- Follow the claims process and to use the disputed claims process when you have a disagreement concerning your claims.
- Report any wrongdoing or fraud to the appropriate resources or legal authorities.





Coronavirus Disease 2019: Myth vs. Fact

As the coronavirus continues to spread across the globe, the news is coming at a fast and furious pace. But don't let the volume send you into a panic about your health and that of your loved ones. Be informed helps to reduce panic. While this strain of the coronavirus is in its infancy stage there are some hard and true facts that should not be muddled by myths and inaccuracies.

Myth or Fact?

1. **A vaccine to cure COVID-19 is available.**
Myth or Fact?
2. **You can protect yourself from COVID-19 by swallowing or gargling with bleach, taking acetic acid or steroids, or using essential oils, salt water, ethanol or other substances.**
Myth or Fact?
3. **The new coronavirus was deliberately created or released by people.**
Myth or Fact?
4. **Ordering or buying products shipped from China will make a person sick.**
Myth or Fact?
5. **A face mask will protect you from COVID-19.**
Myth or Fact?

Answers to Coronavirus Quiz

1. **Myth:** There is no vaccine for the new coronavirus right now. Scientists have already begun working on one, but developing a vaccine that is safe and effective in human beings will take many months.
2. **Myth:** None of these recommendations protects you from getting COVID-19, and some of these practices may be dangerous. The best ways to protect yourself from this coronavirus (and other viruses) include:
 - Washing your hands frequently and thoroughly, using soap and hot water.
 - Avoiding close contact with people who are sick, sneezing or coughing.
 - In addition, you can avoid spreading your own germs by coughing into the crook of your elbow and staying home when you are sick.
3. **Myth:** Viruses can change over time. Occasionally, a disease outbreak happens when a virus that is common in an animal such as a pig, bat or bird undergoes changes and passes to humans. This is likely how the new coronavirus came to be..
4. **Myth:** Researchers are studying the new coronavirus to learn more about how it infects people. As of this writing, scientists note that most viruses like this one do not stay alive for very long on surfaces, so it is not likely you would get COVID-19 from a package that was in transit for days or weeks. The illness is most likely transmitted by droplets from an infected person's sneeze or cough, but more information is emerging daily.
5. **Myth:** Certain models of professional, tight-fitting respirators (such as the N95) can protect health care workers as they care for infected patients. For the general public without respiratory illness, wearing lightweight disposable surgical masks is not recommended. Because they don't fit tightly, they may allow tiny infected droplets to get into the nose, mouth or eyes. Also, people with the virus on their hands who touch their face under a mask might become infected. People with a respiratory illness can wear these masks to lessen their chance of infecting others. Bear in mind that stocking up on masks makes fewer available for sick patients and health care workers who need them.

STARTING TO STOP

There has never been a better time to quit tobacco. US Family Health Plan provides services to help you quit once and for all.



Tobacco users who quit greatly reduce their risk for disease and premature death, improve their health and quality of life, and increase their life expectancy. Quitting tobacco results in both immediate and long-term health benefits. While health benefits are greater for tobacco users who stop at earlier ages, cessation is beneficial at all ages. Quitting smoking is the single most important action that smokers can take to protect their own and their families' health. Just two to three weeks after quitting, breathing becomes easier and after a year, the risk for heart disease is lowered by 50 percent. Eliminating second hand smoke from the house also decreases the risk for heart attacks and asthma in non-smokers. For pregnant women, quitting smoking greatly increases the chances that they will give birth to a healthy baby.

US Family Health Plan provides services, drugs and support to help you quit tobacco. You don't need to be diagnosed with a tobacco-related illness to use tobacco cessation benefits.

SERVICE	WHAT IS IT?
COUNSELING	USFHP covers tobacco cessation counseling from a Magellan provider.
TOBACCO CESSATION PRODUCTS	<p>USFHP covers prescriptions and over-the-counter tobacco cessation products @ No cost to you!</p> <ul style="list-style-type: none"> • Requires a prescription from a Magellan provider • Tobacco cessation products can be obtained through Maxor Plus Mail order. <p>USFHP covers the following tobacco cessation products at no cost to you:</p> <ul style="list-style-type: none"> • Varenicline tablets (brand name Chantix) • Bupropion SR tablets (brand name Zyban and generics) • Nicotine nasal spray (brand name Nicotrol NS) • Nicotine inhalation system (brand name Nicotrol) • Nicotine transdermal systems (brand names Nicoderm CQ and Habitrol) • Nicotine gum (brand names Nicorette, Nicorelief and generics) • Nicotine lozenges (brand names Nicorette, Commit and generics) <p>A prescription is required, even for the over the counter (OTC) smoking cessation drugs. Please contact your primary care physician to see if one or more of these drugs is appropriate to assist in your commitment to stop smoking.</p>

Answers to Quiz on page 5.



1) **Bessie Coleman: Pioneer Aviatrice.** Bessie Coleman was an early American civil aviator. She was the first woman of African-American descent, and also the first of Native-American descent, to hold a pilot license.

2) **Rosa Louise McCauley Parks** was an American activist in the civil rights movement best known for her pivotal role in the Montgomery bus boycott. The United States Congress has called her “the first lady of civil rights” and “the mother of the freedom movement”.



3) **Geraldine Anne “Gerry” Ferraro** (August 26, 1935 – March 26, 2011) was an American attorney and Democratic Party politician who served in the United States House of Representatives. In 1984, she was the first female vice presidential candidate representing a major American political party.

4) **Vice Admiral Raquel Bono** was the first woman surgeon in the military to hold the rank of Vice Admiral. Her legacy is as rich as it is deep, going well beyond the military and medicine.



5) **Loretta Perfectus Walsh** became the first American active-duty Navy woman, the first woman to enlist in the U.S. Navy, and the first woman allowed to serve as a woman in any of the United States Armed forces, as anything other than as a nurse, when she enlisted in the U.S. Naval Reserve on March 17, 1917.

6) **Justice Sonia Sotomayor** is the 1st Latina U.S. Supreme Court Justice.



7) **Ann Dunwoody** became the first female four-star general in the United States Army in 2008.

8) **Shirley Anita St. Hill Chisholm** was the first African American woman in Congress (1968) and the first woman and African American to seek the nomination for President of the United States.



FAM CAM... Out and About

US Family Health Plan sponsors events throughout our service area — See if we captured your SMILE



*Childrens Holiday Party
1st Marine Corp District*



*Winners @ 911 Remembrance
Run @ Earle*



Veterans Day Breakfast @ Mitchel Field



Veterans Day Breakfast @ Mitchel Field



Holiday Party



USFHP sponsored West Point Ten Miler Team



Marketing team enjoying a Holiday Party

SPRING ROLL SALAD

Fresh, Light & Tasty

If you like fresh spring rolls, you'll love this adaptation, which uses the filling as the main meal. It's quick, easy and tasty!

NOTE: Add more or less vegetables as you desire. This recipe adapts easily to your individual taste.

INGREDIENTS

- 2 cups chopped cabbage (I thinly slice the cabbage and then chop into approximately one inch pieces. I also use both green and red cabbage for the color. To make this easier, see if there is some pre-sliced cabbage at your local grocery store's salad bar.)
- ½ orange bell pepper, chopped
- ½ yellow bell pepper, chopped
- ½ red bell pepper, chopped
- ½ English cucumber (or seeded regular cucumber) sliced in half, then chopped
- 1 cup cilantro, chopped
- 1 jalapeno, seeded and chopped
- Handful of pea shoots
- 20 leaves of mint, chopped
- 10 large leaves of basil, chopped
- 1 cup edamame
- Avocado (to garnish)
- Green onions (to garnish)
- Large leaves of Bibb lettuce (chopped if adding to salad, left whole if using to "wrap" the salad)
- 1 pound shrimp, cooked, shelled, deveined and cut (lengthwise) in half
- 8 oz (approximately) thin rice noodles (found in the Asian section of the grocery store)
- salt and pepper to taste

DRESSING:

- 3 tablespoons honey
- 3 tablespoons fish sauce (found in the Asian section of the grocery store)
- 3 tablespoons unseasoned rice vinegar
- 2 tablespoons water
- Juice of two limes squeezed
- 2 garlic cloves, minced (or ¼ tsp garlic powder)
- 2 tablespoons fresh grated ginger (or 1 teaspoon ginger powder)
- ¼ cup diced shallots



INSTRUCTIONS

1. First, soak your rice noodles in a bowl/pot of warm water. Then, make the dressing as it gets better the longer it stands. Combine all ingredients, stir and set aside.
2. When you are finished making your dressing, your noodles are likely done. Rinse them with cold water so that they are no longer hot. Then, season the noodles with salt and black pepper to taste. Cut noodles into smaller pieces. (The easiest way to do this is with kitchen shears — like 10 seconds easy!) Set aside.
3. Chop all your vegetables. When complete, toss with the rice noodles and the dressing. Use the Bibb lettuce as wrappers for the salad (refer to photo), or you can chop and add to the salad. When complete, garnish with green onions, avocado and sliced lime as well as any leftover herbs.

Recipe type: Main dish, Side dish

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*Spring:
A lovely reminder of
how beautiful
change can be*





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