

Summer 2025

Sneaky signs of dementia and Alzheimer's disease — and how to help

Ministrokes: What are they, and what should you do if you have one?

Don't let arthritis keep you on the sidelines

Pharmacy Focus: Are you taking your medication as directed?

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AvMed, one of Florida's largest not-for-profit health plans, provides quality health benefits throughout the state.

Always consult your Primary Care Physician (PCP) regarding medical advice. The health information in this publication is not intended to replace your doctor's directives.

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WHERE CAN I FIND MEDICAL COVERAGE GUIDELINES FOR **AVMED'S MEDICARE ADVANTAGE PLANS?**

Information on the coverage criteria sources that we use in making medical necessity determinations for our Medicare plans, can be found on AvMed's website at: https://www.AvMed.org/media/goeb3u5u/medicalnecessity-coverage-criteria-summary_effectivejanuary-2025.pdf

You can also find the complete list of our Medicare internal coverage guidelines used for medical necessity determinations and our review of new developments in technology through our Medical Technology Assessment Committee (MTAC) on AvMed's website at: http:// www.AvMed.org/about-us/corporate-governance-andresponsibility/medical-technology-coverage-guidelines/

From time to time our medical coverage guidelines may change. You can also find Upcoming Changes to Medical Necessity Coverage Criteria for Medicare Advantage Members on this page.

Currently posted to this area are Upcoming Changes to Medical Coverage Guidelines for the following service types:

- Diagnostics testing and Surgical procedures for certain Inpatient and Outpatient Cardiology Services, effective August 15, 2025.
- Outpatient diagnostics testing for certain High Tech Radiology Services, such as MRIs and CAT scans, effective August 15, 2025.

We are changing the medical coverage guidelines for some of these services due to updated clinical guidance from the organization the clinical guidelines originated from and/or annual review and update. You can find a list of the specific services with medical coverage guideline updates and the changes being made at: http://www.AvMed.org/about-us/corporategovernance-and-responsibility/medical-technologycoverage-guidelines/

Note, for our Medicare Advantage plans, AvMed will no longer be implementing the use of the following criteria sources that were previously set to go into effect on July 1, 2025:

- OncoHealth's criteria for Radiation Oncology Services (using high-energy particles or waves to destroy or damage cancer cells) and Oncology Genetic Testing.
- OncoHealth's criteria for Part B Drugs for Oncology Services.

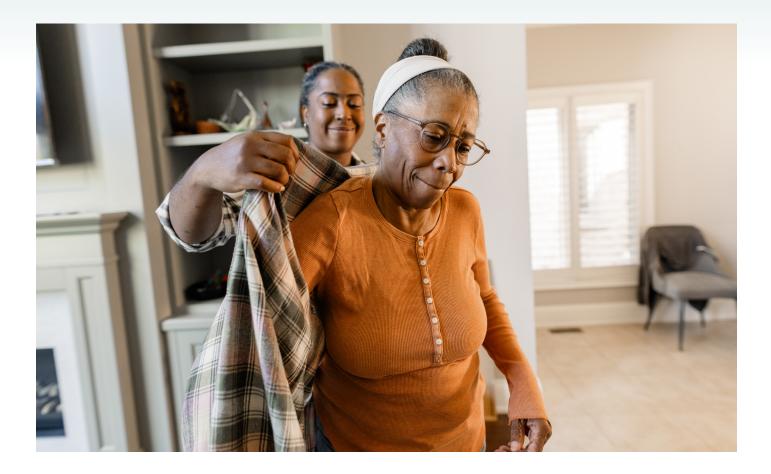
AvMed Medical Medicare Part B Updates Updates to the Medical Medicare Part B Policy effective August, 15, 2025 includes the following medications:

- 1. Qfitlia
- 2. Onapgo
- 3. Encelto
- 4. Ryoncil

The full policy with criteria may be accessed at https://shorturl.at/IYmUq



SNEAKY SIGNS OF DEMENTIA AND ALZHEIMER'S DISEASE — AND HOW TO HELP



Misplacing your reading glasses. Forgetting to pay a bill. Thinking it's Friday when it's only Thursday. When these things happen occasionally, they can be attributed to normal, age-related forgetfulness, according to the National Institute on Aging. But if your older loved one is experiencing more severe problems with memory and thinking skills, it could be a sign of dementia.

Here's what you need to know to identify signs of dementia in an older loved one, and how to support them — and yourself — during the caregiving process.

What are the signs and symptoms of dementia in older adults?

Dementia is a term used to describe a group of neurological disorders, including Alzheimer's disease, which affect the brain. It's marked by problems with thinking, memory, and reasoning.

Memory loss is perhaps the most well-known symptom of dementia, but it's not the only one. Also, symptoms vary depending on the type of dementia someone has. Dementia symptoms include, but are not limited to:

- Apathy, or not caring about people's feelings
- Balance and mobility issues
- Getting lost in a familiar neighborhood
- Hallucinations, delusions, and paranoia
- Impulsivity

- Memory loss and confusion
- Poor judgment and reasoning skills
- Problems reading and writing
- Repeating questions
- Speech changes
- Taking longer than usual to complete routine tasks
- Trouble understanding or expressing thoughts
- Using unusual words to refer to familiar objects
- Vision changes

How can I help an older loved one who has dementia?

If you notice changes in your loved one's thinking or memory skills, consider having a conversation with them. You can share your concerns and talk to them about visiting a healthcare provider who can diagnose them and help create a care plan.

Research suggests that encouraging health behaviors and employing strategies such as the ones noted here may help slow cognitive decline so a person with dementia can keep their abilities longer.

- Address other health issues that may contribute to their cognitive decline. Dementia typically progresses faster in people who have another health condition, such as diabetes. It's important to make sure your loved one is up to date on visits with their Primary Care Provider.
- Encourage them to limit substance use. Smoking and excessive alcohol consumption have been linked to cognitive decline. If your loved one drinks, help them stick to no more than one (1) drink per day.
- Help them eat a nutritious diet. Aim to fill their plate with plenty of fruits, vegetables, beans, and whole grains. You can help make mealtimes easier by preparing dishes in advance to store in the refrigerator or freezer.
- Encourage them to exercise regularly. Getting regular physical activity has shown to improve cognitive function, even in people who already have memory problems. Consider asking your loved one to join a fitness class with you. Even going on walks and weeding the garden together counts.

- Make sure they get enough sleep. Sleeping for 7-8 hours per night may help prevent cognitive issues from progressing. If your loved one lives alone and tends to stay up late, consider setting a recurring alarm to let them know when it's time to go to bed.
- Keep up with their hearing and vision exams. Untreated hearing and vision loss may contribute to problems with thinking and memory. Make sure your loved one is up to date on these important exams.
- Help them stay social. People who feel connected to other people are less likely to have cognitive issues than those who feel lonely or socially isolated. Your loved one's local library may have resources on local clubs and organizations they can join to meet new people.
- Use memory aids around their home. Placing tools like calendars and labels around your loved one's home can help them to remember.

Caring for someone with dementia can be tough on both you and your loved one. While there is currently no cure, these are just a few ways to ease the symptoms and help your loved one slow the progression of the disease — and help caregivers, like yourself, stay strong for yourself and for them.



MINISTROKES: WHAT ARE THEY, AND WHAT SHOULD YOU DO IF YOU HAVE ONE?



Do you know the difference between a stroke and a ministroke? Both are serious health issues caused by disruptions in blood flow to the brain. The difference lies in the duration of the blood flow disruption. While a stroke involves a prolonged blockage that can cause permanent brain damage leading to lasting disability, a ministroke, aka "transient ischemic attack" (TIA) is temporary and can resolve quickly. With a TIA, normal blood flow usually returns within a few minutes, before any serious damage may be done. But make no mistake: a ministroke is also an emergency.

While there's no way to know at first whether your symptoms are from a TIA or from a major type of stroke, by all measures, you should view a ministroke as a critical warning sign. About 30% of people who have a TIA go on to have a full-blown stroke. And the risk is highest during the 48 hours after a ministroke. But if you act quickly, and then make the necessary long-term changes, you may be able to prevent a major stroke or lower your chances of having one in the future.

What causes brain blockages?

Blocked or narrowed blood vessels are often caused by fatty deposits that build up in blood vessels. Over time, these deposits may break open. This can lead to clots that stop blood flow.

Fatty deposits may be the immediate cause, but the underlying problem is usually chronic disease. Years of high blood pressure, diabetes, and high cholesterol all play a role in plaque formation.

What does a ministroke look like?

When the blood stops flowing to your brain, your brain can miss out on oxygen and nutrients. The effect can be different for everybody. In some cases, the effects are so small that you might ignore them. In fact, about one in four people over age 80 have had one of these silent strokes without even knowing it. Possible signs of a ministroke include:

- Weakness or numbness, especially on one side of the body
- Double vision
- Loss of balance
- Garbled or slurred speech

What should I do if I think I've had a ministroke? Call 911 right away if you have any of the signs noted above. At the hospital, you may get a medication called a "tissue plasminogen activator," or tPA. Often called "clot busters," tPAs can break through the blockage. They need to be taken within four (4) hours of the onset of stroke symptoms.

What should I do during the next few months? After you've recovered from the initial scare, it's time to start planning your future. The first week of recovery is the most critical time. But the risk of a follow-up stroke is still higher for the next three (3) months. Here's what to do during that time.

- See a neurologist. After your ministroke, your Primary Care Provider (PCP) will likely refer you to a neurologist, who will lead your treatment going forward. Odds are, you'll end up taking a medication to lower your stroke risk, such as anticoagulants to prevent blood clots or statins to manage cholesterol.
- If you smoke, take steps to quit. Cigarettes are linked with a high stroke risk, among many other health risks.
- Eat more plant-based foods. In a large study from the Harvard T.H. Chan School of Public Health, researchers found that those who ate more plantbased foods – like fruits, vegetables, whole grains, and legumes – while limiting sweetened beverages and refined grains, were up to 10% less likely to have a stroke.
- Start exercising regularly. When you make a habit

of exercising, you can improve two stroke risk factors at once: (1) your heart health and (2) your body weight. But be sure to check in with your PCP about your exercise goals. You might need to begin slowly and then work up to harder workouts.

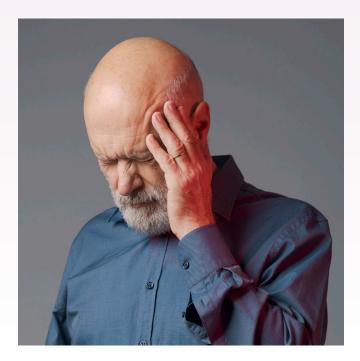
• Teach family and friends what to do if it happens again. If you're at considerable risk for stroke, make sure the people you live with or see often know what to look for. Using the F.A.S.T. warning signs from the American Stroke Association is a good way to identify a stroke. This handy acronym is a checklist that loved ones and others can use to spot stroke signs and know when to call 911.

F: Face. Ask the person to smile. Is one side drooping?

A: Arm. Ask them to hold out their arms. Is one drifting downward?

S: Speech. Ask them to say something. Does it sound strange, or does it not make sense?

T:Time to call 911. If the answer to any of the above questions is yes, you need emergency assistance.



DON'T LET ARTHRITIS KEEP YOU ON THE SIDELINES

Are you dealing with painful, stiff joints? If you're one of the 58.5 million Americans with arthritis, it's time to get up and start moving. You read that right. Because, while adding more movement to your daily routine might sound like a bad idea, it's actually what you should be doing to feel and get better.

Regular exercise can help improve your balance, strengthen your muscles and bones, and boost your energy to keep you moving longer and feeling sharper. When you're living with arthritis, moderateto low-impact exercise can be beneficial. Try to focus on these three areas:

1.Range-of-motion stretches

2.Low-impact cardio

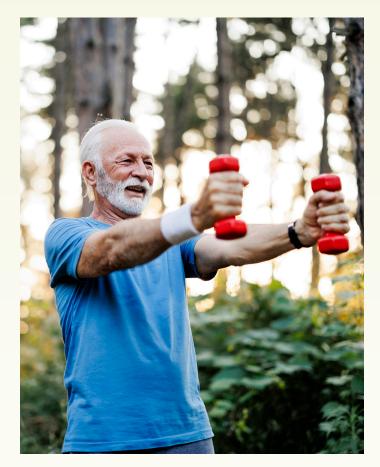
3.Weight-bearing exercises

The best exercises for you will depend on which joints are most affected by your arthritis. Here's what you need to know about each type of exercise, plus some easy-tofollow moves to get you started.

1.Increase your range of motion

Kick off each workout with stretches or range-of-motion exercises to get warmed up. Work with a physical therapist for a specialized program, or get started with these "good-for-you" moves:

- Seated toe-touch. Sit on a yoga mat or another flat, comfortable surface with your legs stretched out in front of you. Keeping your spine straight, lean forward, reaching your hands toward your feet until you feel the stretch. Hold for 10 to 20 seconds at a time.
- Shoulder raise. For this movement you can lie flat on your back, stay seated in a chair, or stand. Roll your shoulders back and down, then slowly lift one arm until your hand is level with your shoulder. Hold for a few seconds, then repeat with the other arm. Work your way up to 10 reps at a time.
- Seated butterfly. Find a comfortable seat with your legs out in front of you and bring the soles



of your feet together to touch. Keeping your spine straight, exhale as you lean forward. You should feel this stretch in your hips and thighs.

• Seated spinal twist. Sitting with your legs extended, cross your left leg over the right and try to put your left foot flat on the floor. Wrap your right arm around your left bent knee and sit up tall, lengthening your spine as you twist. Repeat with the opposite leg.

2.Keep up with cardio

Cardiovascular exercise is essential for maintaining your heart health, reducing inflammation, and staying at a healthy weight. Low-impact options are especially good for those with arthritis, as they reduce stress on your joints while still providing a solid workout. Try these activities to get your heart pumping, without straining your joints:

- Walk it out. Walking is one of the most important building blocks in your fitness routine, according to the Arthritis Foundation. Start with five (5) minutes and work your way up to 30- to 60-minute strolls, three to five times weekly. To make the time fly by, listen to music or an audiobook, or recruit a friend — human or canine.
- Use water for more than drinking. Gentle swimming, water aerobics, or walking through the water at the shallow end of the pool is an amazing way to move without added joint pressure.
- Take a ride to nowhere. Stationary cycling gives you great cardio benefits without the risk of falls or crashes. Make sure you stay hydrated while riding.

3.Embrace weightlifting (carefully)

No need to become a champion bodybuilder — weightbearing exercises can strengthen your muscles to better support arthritic joints and reduce bone loss related to inactivity. Staying within your comfortable range of motion and using free hand weights, get started with the basics:

- Biceps curl
- Chest press
- Triceps extension

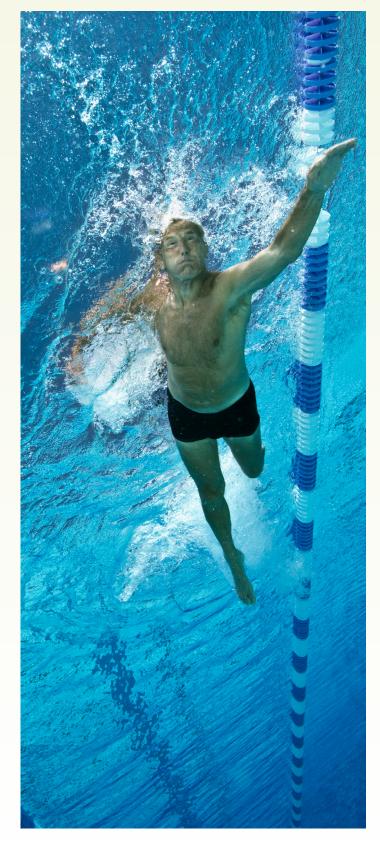
Take breaks when you need to and remember to stay hydrated. And if you've never lifted weights before, consider scheduling a couple of sessions with a personal trainer to learn good form and avoid injury.

How to fit it all in

Here's how you can easily adopt this three-part exercise so it's all gain, and no pain:

- Pick a time of day when you're in less pain.
- Start with a few stretches and mobility exercises.
- Move on to the cardio portion.
- Finish with a few dumbbell repetitions

Once you get in the groove, you may find you're sleeping better, dropping a few pounds, and feeling mentally sharper — all thanks to the power of exercise.



WISE & WELL PHARMACY FOCUS: ARE YOU TAKING YOUR MEDICATION AS DIRECTED?



Taking medications as directed is an important part of your healthcare routine. Of course, staying on top of taking your medications helps to keep symptoms under control and manage chronic conditions. But it also can help to keep your overall health costs at a minimum by avoiding potential health complications of NOT taking your medication.

If you have trouble remembering to take your medication, try these tips:

- Set an alarm as a reminder to take your medication at the right time.
- Take your medication at the same time every day. For example, taking your medication with a meal, when you brush your teeth, or when you go to bed will help you remember to take them.
- Take advantage of your pharmacy's auto-refill program. Many pharmacies offer reminder services via text or phone calls to help you stay on schedule. Signing up for these services is an easy way to remember to take your medication.
- Use a pillbox and keep it where you'll see it every day. Use your over-the-counter (OTC) products allowance through NationsBenefits[®] to order one at no cost. Visit the NationsBenefits[®] member portal at AvMed.NationsBenefits.com to view the OTC catalog and place an order.
- Use a calendar to write down when refills are due, so you won't run out of medication.
- Make less trips to the pharmacy and save money with 90-day refills. You can get a 90-day supply of medication through home delivery or your local in-network pharmacy. Express Scripts[®] mail-order service delivers to your door. To get started, call Express Scripts[®] at 1-877-800-0885 (TTY: 711), 24 hours per day, 7 days per week.

CHEF PATTY'S BLUEBERRIES AND PEACH PARFAITS

Yield: 4 Servings Ingredients:

- 2 large peaches, diced
- 1¹/₂ cups blueberries
- ¹/₃ cup honey or agave
- 2 tablespoons chia seeds
- 2 cups plain Greek yogurt, drained
- 1/2 fresh orange, zested and juiced
- 1 cup granola

Instructions:

In a large bowl, add peaches, blueberries, honey, and chia seeds; toss to combine. In a separate bowl, combine the Greek yogurt, orange zest and 2-3 tablespoons of orange juice. To assemble the parfaits, layer the fruit on the bottom, top with yogurt and finish with granola. Enjoy!





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