WellPATH
Your Path to Better Health
Joint Health Management Board

Monthly WellPATH Spotlight

June 2021: Preventive Healthcare

Preventive Care

Is Yours Still on the Back Burner?

We have all experienced forced changes in our usual routines due to the COVID-19 Pandemic. A lot of us put ourselves lower on the priority list as we tackled new obstacles with our jobs, or new mental health struggles, etc. For a lot of us this happened slowly, and gradually, as we got deeper into the pandemic. Next thing you know, it's been 2 years since you have been to your primary care physician!

Under existing federal law, there are numerous annual screenings, immunizations, and counseling services that you can receive for free – so long as the services are delivered by a network provider. That means no deductible, no copay, and no coinsurance. It is time to put preventive care back into the forefront of your mind if you have not already. The fact of the matter is that chronic diseases/illnesses do not wait for a pandemic to end.

Annual Preventive Exams

Annual preventive health screenings should be a routine part of your health care. They help you understand your risks for certain diseases. They also provide an opportunity to consult with your doctor if disease is detected – which offers the best chance for success given your specific medical situation and personal preferences.

Even if you have no symptoms, it is a good idea to consult with your primary care physician and discuss which screenings may be right for you based on your age, risk factors and family history. Many people are at risk for diseases such as heart disease and cancer but never experience any symptoms. Early detection of disease can increase your treatment options and survival rate.

Source: US Preventive Services Task Force (https://www.uspreventiveservicestaskforce.org/uspstf/)

Primary care physician information should be provided to your specialists to ensure your care is being coordinated. You can think of your primary care physician as the central hub to your whole healthcare umbrella. They should be in the know of all things related to your health.

NOTE: You have access to your full Plan Booklet and amendments to the plan at http://www.jhmbhealthconnect.com/your-benefits. This is a great page for you to bookmark on your web browser, so you can access it easily when you need to research your covered benefits. Fresno Unified's health plan follows the recommendations that are provided through the US Preventive Services Task Force (USPSTF).

Annual preventive exams are not the only exams that should be a part of your routine. Your primary care physician could help you determine which other screenings you should have based on your age, gender, and risk category. You should always check the Plan Booklet to ensure coverage of services. There are several areas of preventive care, and each and every one of them are important. So, kick back and grab a healthy snack (baby carrots and hummus, perhaps) and check out the great information below to help get you back into the preventative care groove.

Colorectal Cancer Screening

The USPSTF just recently changed their recommendation for this screening. The previous recommendation stated that men and women between the ages of 50 to 75 should be

Source: US Preventive Services Task Force (https://www.uspreventiveservicestaskforce.org/uspstf/)

screened for colorectal cancer. **The new recommendation is to screen all adults aged 45 to 75 years for colorectal cancer**.

Several recommended screening tests are available. Clinicians and patients may consider a variety of factors in deciding which test may be best for each person. For example, the tests require different frequencies of screening, location of screening (home or office), methods of screening (stool-based or direct visualization), preprocedural bowel preparation, anesthesia or sedation during the test, and follow-up procedures for abnormal findings. Recommended screening strategies include:

- High-sensitivity guaiac fecal occult blood test (HSgFOBT) or fecal immunochemical test (FIT) every year
- Stool DNA-FIT every 1 to 3 years
- Computed tomography colonography every 5 years
- Flexible sigmoidoscopy every 5 years
- Flexible sigmoidoscopy every 10 years + annual FIT
- Colonoscopy screening every 10 years
- Selectively screen adults aged 76 to 85 years for colorectal cancer.

Please visit the Chronic Disease Management Page and scroll down to "Colon Cancer Resources" to learn more about the Love Your Colon campaign.

Breast Cancer Screenings

The USPSTF recommends biennial (every 2 years) screening mammography for women aged 50 to 74 years. The decision to start screening mammography in women prior to age 50 years should be an individual one. Women who place a higher value on the potential benefit than the potential harms may choose to begin biennial screening between the ages of 40 and 49 years.

For women who are at average risk for breast cancer, most of the benefit of mammography results from biennial screening during ages 50 to 74 years. Of all of the age groups, women aged 60 to 69 years are most likely to avoid breast cancer death through mammography screening. While screening mammography in women aged 40 to 49 years may reduce the risk for breast cancer death, the number of deaths averted

Source: US Preventive Services Task Force (https://www.uspreventiveservicestaskforce.org/uspstf/)

is smaller than that in older women and the number of false-positive results and unnecessary biopsies is larger. The balance of benefits and harms is likely to improve as women move from their early to late 40s.

In addition to false-positive results and unnecessary biopsies, all women undergoing regular screening mammography are at risk for the diagnosis and treatment of noninvasive and invasive breast cancer that would otherwise not have become a threat to their health, or even apparent, during their lifetime (known as "overdiagnosis"). Beginning mammography screening at a younger age and screening more frequently may increase the risk for overdiagnosis and subsequent overtreatment.

Women with a parent, sibling, or child with breast cancer are at higher risk for breast cancer and thus may benefit more than average-risk women from beginning screening in their 40s.

Primary Screening for Breast Cancer With Conventional Mammography

Population	Women aged 40 to 49 y	Women aged 50 to 74 y	Women aged ≥75 y
Recommendation	The decision to start screening should be an individual one. Grade: C	Screen every 2 years. Grade: B	No recommendation. Grade: I (insufficient evidence)

Women's Well Visit

The number of deaths from cervical cancer in the United States has decreased substantially since the implementation of widespread cervical cancer screening and has declined from 2.8 to 2.3 deaths per 100,000 women from 2000 to 2015.

The USPSTF recommends screening for cervical cancer every 3 years with cervical cytology alone in women aged 21 to 29 years. For women aged 30 to 65 years, the USPSTF recommends screening every 3 years with cervical cytology alone, every 5 years with high-risk human papillomavirus (hrHPV) testing alone, or every 5 years with hrHPV testing in combination with cytology (cotesting).

Source: US Preventive Services Task Force (https://www.uspreventiveservicestaskforce.org/uspstf/)

Additional Screenings/Services to Consider

There are a number of other screenings that are covered through the District's benefits to consider for regular checks. Each of the below should be evaluated against the plan requirements and physician recommendations. These include but are not limited to:

- Dental Exams/Cleanings
- Visual Acuity/Ocular Health Screenings
- Skin Cancer Screenings

You can also review a list of preventive services for all adults, women, and children at https://www.healthcare.gov/coverage/preventive-care-benefits/

Finally, preventive care does not just include screenings. Preventive care starts with proactively engaging in healthy lifestyle habits, such as clean eating, exercise, mindfulness, education, and participating in your free WellPATH events/services that are included in your benefits. Make sure you are checking JHMBHealthConnect regularly to stay up-to-date on the most current WellPATH offerings!

What If I Don't Have A Primary Care Physician?

With so many changes in the healthcare market these days, it is understandable that one may find difficulty navigating their way through it all. The Joint Health Management Board (JHMB) believes that you shouldn't find it difficult to locate the right healthcare provider for you and your family when you need one.

In partnership with its key vendors, the JHMB has created quick guides to help you locate network providers for your medical, dental, vision, behavioral health, and chiropractic care benefits. When contacting a provider, be sure to have your insurance card available – it contains plan information your provider will most likely need to answer your questions, including group number and network.

Visit http://www.jhmbhealthconnect.com/locating-network-providers for assistance in locating a network provider and schedule your preventive screening today!

Source: US Preventive Services Task Force (https://www.uspreventiveservicestaskforce.org/uspstf/)