Lifestyles for diabetes

KEEP THIS BOOKLET!

A guidebook for Blue Care Network and BCN Advantage℠ HMO and HMO-POS members
Begin your journey to wellness with us

You’ve been identified as a person who has, or might have, diabetes. If you had recent lab tests, those results could have triggered our system to send you information about our Chronic Condition Management program. We hope you’ve already talked with your primary care physician about your medical condition.

This program is for members with diabetes who are 18 years and older. If you feel this program isn’t right for you, or don’t want to participate, please call the Chronic Condition Management number below.

Our Chronic Condition Management program helps you:
• Understand diabetes
• Learn about different medicines you may need
• Take action to live a healthier life

Diabetes is a chronic medical condition, which means it doesn’t go away. Even if you have diabetes, you can still live a healthy, active life. We’re here to help.

We’ll send you a diabetes newsletter a couple times a year. It has information to help you improve your health and live well.

Save this booklet. You can refer to it when you have questions about diabetes. It will help you understand and live with diabetes. We’ve also added a handy tear-off wallet card to keep your health contacts in one place.

Call us at 1-800-392-4247 when you have questions about our Chronic Condition Management program. A nurse is available from 8:30 a.m. to 5 p.m. Monday through Friday, except holidays. TTY users should call 711. Or you can contact one of our nurses online at bcbsm.com/bcnccmreferral.
We’re here when you need us

You aren’t alone on your journey to good health. Your primary care physician and the care professionals you see are on your team. We’re here for you, too. Your plan may cover the exams, tests and durable medical equipment you need to stay healthy. You’ll learn more about durable medical equipment in this booklet. If you’re ever unsure about what your plan covers, just call Customer Service at the number on the back of your Blue Care Network ID card.

This guide contains an action plan to take to your next doctor visit. The action plan will help you stay on track and better manage your diabetes.
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What is diabetes?

Diabetes is a serious, lifelong disease. There is no cure for it. It occurs because of problems with how your body breaks down, uses and transports glucose in the body. Insulin, a hormone made in your pancreas, plays a very important role in this process.

**Insulin helps move sugar in your body**
Glucose is a type of sugar that exists naturally in food. After you eat, insulin acts to open up cells in your body so the glucose can enter and be used as energy. When your body doesn’t make enough insulin or can’t use it the right way, glucose builds up in your blood. The result is high blood sugar, the hallmark of diabetes.

**There are two main forms of diabetes, Type 1 and Type 2:**
- **Type 1 diabetes.** With Type 1 diabetes, your pancreas doesn’t make enough insulin. It may not make any insulin.
  
  Type 1 diabetes can strike at any age, and the exact cause is unknown. Genetics may play a role, so you might be more likely to develop Type 1 diabetes if a parent had it.
  
  - **Type 2 diabetes.** This is the most common form of diabetes. It starts when your body stops reacting to insulin the right way. People who develop Type 2 diabetes are often overweight. However, not everyone who gets diabetes is overweight. Sometimes it happens in people who are thin. This is especially true for older adults. Genetics may play a role as well.

Take an online health assessment to provide a picture of your health and help you understand what steps you can take to improve or maintain it. Visit [bcbsm.com](http://bcbsm.com) and:
- Log in as a member.
- Click on the Health & Wellness tab, which will take you to Blue Cross® Health & Wellness, powered by WebMD®.
- Click on the Healthy Living tab.
- Click Health Assessment.

WebMD Health Services is an independent company supporting Blue Care Network by providing health and wellness services.
Take control of blood sugar
Part of managing diabetes is controlling your blood sugar levels. If you let your blood sugar get too high, it can damage many parts of your body. High blood sugar can harm your heart, kidneys and feet. It also affects your eyes and may cause blindness.

The good news is there’s a lot you can do to stay well. To prevent complications, take steps today and every day to control your blood sugar.

The basics of checking blood sugar

Treatment for diabetes revolves around blood sugar control. The best way to control high blood sugar? Keep close track of it. Here’s how to begin.

Meet your meter
You can check your blood sugar levels at home with a device called a glucose meter, or glucometer. There are many different types. Most come with test strips and small needles called lancets. Your plan may cover these items when ordered through one of our approved durable medical equipment suppliers. If you have questions about your coverage, refer to your
Steps for testing blood sugar
To begin, place all the items that you need in front of you. Wash the area you will test, usually your fingertip, with soap and water. Dry the area completely before pricking your skin.

Use a lancet to prick your fingertip. A small drop of blood will appear. Place the drop of blood on a test strip. Some meters are different, so follow the instructions to see if you need to feed the strip into the glucose meter before or after placing the drop of blood. The meter will display a number on its screen. This is your blood sugar level.

Your primary care physician can tell you what your target level should be and how often to check your blood sugar. You’ll probably need to check it at least once a day or more depending on your treatment plan.

Why check your glucose?
Tracking your blood sugar levels is one of the best ways you can take care of yourself. Work with your health care team to be sure you’re testing your blood sugar correctly. Testing will allow you and your team to:

• See if you’re meeting your blood sugar goals
• Determine the best time of day for you to take your medicine
• Figure out how certain foods affect you
• Learn how exercise can help your blood sugar levels
Balancing blood sugar highs and lows

Testing your blood sugar at home lets you know when to take action for glucose levels that are very high or low. Here are the symptoms and the steps to follow when blood sugar is out of balance.

Handle high blood sugar
Being sick, such as with a cold, is one situation that can cause blood sugar to rise. Signs of high blood sugar include:
• Frequent urination
• Excessive thirst
• Fatigue
• Unexplained weight loss

Talk with your primary care physician if your blood sugar levels are often higher than 200 mg/dl. You may need to change your eating habits or switch medicines.

Look out for low blood sugar
Skipping a meal or snack can cause blood sugar to drop. Warning signs of low blood sugar include:
• Feeling nervous
• Shakiness
• Sweatiness
• Fatigue

If you have low blood sugar — below 70 mg/dl — several times a week, tell your primary care physician.

Work with your primary care physician to create a plan to manage your blood sugar.

Ace your HbA1C
Your daily blood sugar test is like a pop quiz. It gives a snapshot of how you’re doing at that point in time. An HbA1C test is like a final exam. It gives a bigger picture by showing how well you managed your blood sugar for the past three months. Be sure to get your HbA1C test at least twice a year.
Design an action plan for diabetes

The form on the next page can help you control your diabetes. Make copies of it, and bring one to your next primary care physician visit. Your primary care physician can give you the test results for that day and help you set realistic short-term goals for the future. These will help you reach the long-term goals below. You’ll find tips throughout this booklet for meeting these goals.

Know your numbers
These numbers check your whole-body health. Here are the ideal ranges:

- A blood sugar level of 80 to 130 before meals and less than 180 after meals. These ranges are narrower if you’re pregnant. Talk to your doctor.
- An HbA1C of less than 7 percent.
- A blood pressure level below 140/90. Lower targets may be appropriate for certain people. Ask your primary care physician what your target blood pressure level should be.
- A body mass index of 18.5 to 24.9.

Adopt a healthy lifestyle
Choose fruits, veggies and whole grains over salty or fatty foods. Limit alcohol to two drinks a day if you’re a man and one drink a day if you’re a woman. Exercise is important, too. Slowly build up to 30 minutes on most days of the week.

If you smoke, it’s time to quit. Smoking is particularly harmful to people with diabetes. To learn more, turn to Page 30.
**My diabetes action plan**

Ask your primary care physician to help you fill out this form at each visit. It will help you manage your diabetes. In addition, talk with your doctor about getting your HbA1C checked and what your results should be.

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### My personal goal

<table>
<thead>
<tr>
<th>My personal goal</th>
<th>My results today</th>
<th>What I can do</th>
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<tbody>
<tr>
<td>Average blood sugar before a meal:</td>
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<td>□ Check my blood sugar every day</td>
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<tr>
<td></td>
<td></td>
<td>□ Follow my meal plan</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ See my doctor twice a year for tests</td>
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<tr>
<td></td>
<td></td>
<td>□ Take my medicine</td>
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<tr>
<td>Average blood sugar two hours after start of meal:</td>
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<td></td>
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<tr>
<td>By month:</td>
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### My results today

<table>
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<tr>
<th>Blood pressure:</th>
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<tr>
<td>By date:</td>
<td>□ Follow my meal plan</td>
</tr>
<tr>
<td></td>
<td>□ Limit salt to less than 1,500 mg a day</td>
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<tr>
<td></td>
<td>□ Take my medicine</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BMI:</th>
<th>□ Choose healthy foods</th>
</tr>
</thead>
<tbody>
<tr>
<td>By date:</td>
<td></td>
</tr>
</tbody>
</table>

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*This diabetes action plan was created for:*

__________________________ on ________________

Name Date
<table>
<thead>
<tr>
<th>My personal goal</th>
<th>My results today</th>
<th>What I can do</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly exercise:</td>
<td></td>
<td>□ Ask my doctor about an exercise plan</td>
</tr>
<tr>
<td>By date:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LDL cholesterol:</td>
<td></td>
<td>□ Eat a heart-healthy diet</td>
</tr>
<tr>
<td>By date:</td>
<td></td>
<td>□ Get a cholesterol test at least once a year</td>
</tr>
<tr>
<td>Tobacco use:</td>
<td></td>
<td>□ Join a tobacco cessation program</td>
</tr>
<tr>
<td>By date:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol use:</td>
<td></td>
<td>□ Limit my alcohol use</td>
</tr>
<tr>
<td>By date:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Blue Care Network is a nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association.*
Add exercise to your day

Exercise can help keep diabetes in check. Aim to get at least 30 minutes of activity on most days of the week. If you’re new to exercise, talk with your primary care physician about how to begin. He or she can help you develop a safe plan. Next, work these ideas into your workout:

• **Break it up.** Taking a 10-minute walk after every meal may be easier to fit in your day than one 30-minute session.

• **Set realistic goals.** Don’t try to do too much too soon. Start slowly to help you stay motivated and safe.

• **Reward yourself.** Give yourself a reason to reach a workout goal. Maybe it’s setting aside time to watch a favorite movie or buying a new shirt. Just remember not to reward exercise with food. That will undo all your efforts.

• **Make it fun.** Go for a bike ride with family, ask a friend to join you on walks or try a class at a local fitness center.

• **Write it down.** Record when you exercise and for how long. Tracking your progress will encourage you to keep going.
Set healthy eating goals

The foods you choose go a long way toward helping you manage your diabetes. Aim to eat a balanced diet every day. These simple tips can help you get started.

**Smart selections**
Following a healthy diet doesn’t mean starving yourself. In fact, skipping meals and snacks is bad for blood sugar. The key to eating well is swapping out unhealthy items for diabetes-friendly ones.

**Here are ideas to get you started:**
- Replace white bread with whole-grain varieties.
- Skip the cookies and chips. Snack on carrot sticks for your crunch fix and satisfy a sweet tooth with fresh berries.
- Phase out fatty meats. Choose lean cuts and fish instead.
- Quench your thirst with water. Add slices of fruit such as lemons or strawberries for flavor.
Create a healthy kitchen
To get unhealthy temptations out of your mind, get them out of your sight. Place sweets and salty snacks on high shelves where you can’t see them. Better yet, don’t buy them at all.

Bring a grocery list to the store to keep your shopping focused on healthy foods.

Place a bowl of fresh fruit, such as oranges and bananas, on your kitchen countertop so it’s easy to reach for a piece when you need a snack. Cut up veggies into single-sized servings that you can grab when you’re on the go.

Put healthy foods at eye level in the fridge to help you remember to eat them.

What about counting carbs?
Carbohydrates are changed to glucose in the body. Counting carbs helps keep your blood sugar levels stable during the day. It also helps in determining what medicines you need and the dosage. Your health care team can help you figure out how many carbs you can eat each day. Counting carbs includes these steps:
• Find the carbohydrate amounts on food labels. This will tell you how many are in a serving.
• Decide how many servings you’ll eat of each food in your meal. For example, you may have a full serving of soup with a half serving of crackers.
• Add up the carbs from each serving of food to get the total amount of carbs in your meal.
Eat well away from home

When you’re not at home, it can be harder to follow a healthy eating plan. Stick to your daily plan as well as you can, and consider the obstacles below. The solutions that follow may help the next time you’re in a similar situation.

**Problem: Fitting food into your schedule**

**Solution:** Carry snacks, such as cracker packets and a piece of fruit, with you for work, school or whenever you’ll be away from home.

**Problem: Avoiding vending machines**

**Solution:** Bring a meal with you when you’ll be out for the day and plan to eat it at the same time you usually eat. For example, pack a healthy lunch with a sandwich of low-fat turkey on whole-wheat bread, topped with mustard and veggies.

**Problem: Eating healthy at restaurants**

**Solution:** Get dressing on the side and make healthy substitutions, such as vegetables instead of fries. Share big portions with a friend or take half to go.

**Problem: Dining while traveling**

**Solution:** When eating on a flight, order a diabetes-friendly meal in advance. Ask when it will be served so that you can time your medicine. Keep medicine with you, not in checked luggage. If you’re traveling by car, bring food with you in case you can’t find a restaurant at mealtime.
Spot the perfect portion

Paying attention to how much you’re eating can help you lose weight and keep your meals in balance. Use this guide for eating the right portion size.

<table>
<thead>
<tr>
<th>½ cup cereal</th>
<th>a regular light bulb</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 ounces of meat</td>
<td>a deck of cards</td>
</tr>
<tr>
<td>1 medium fruit</td>
<td>a baseball</td>
</tr>
<tr>
<td>2 tablespoons peanut butter</td>
<td>a Ping-Pong ball</td>
</tr>
<tr>
<td>1.5 ounces low-fat cheese</td>
<td>three dice</td>
</tr>
</tbody>
</table>
Know your medicine

For some people with diabetes, the body no longer makes enough insulin on its own or is resistant to what insulin does. That’s why you may need treatment with insulin.

Your insulin options
Your primary care physician can help you decide which form of insulin is best for you and how often you need to take it.

Here are two common delivery methods:
• Insulin injections are shots you give yourself with a syringe. Some people use an insulin pen, which looks like a writing pen but with a needle at the tip.
• An insulin pump is a small machine, about the size of a cellphone, that you wear on a belt or in a pouch. The pump gives you insulin through a little needle that stays in your skin for a few days.
Taking oral medicine
Your doctor may also prescribe oral medicine for your diabetes. Your treatment might start with just one pill, then your doctor will see how well it works. If it doesn’t keep your blood sugar on target, you may need more of the same medicine or a different type of pill.

It’s possible that you’ll need both pills and insulin to control your blood sugar. Every person is different.

Your health care team will tailor your treatment to fit your needs.

Managing your medicines

When you’re trying to keep track of several pills, it’s easy to make a mistake. You might forget a dose or confuse one pill for another. A drug interaction — when two or more medicines react with one another — can also occur.

Here’s how to prevent problems:
• Understand the possible side effects of your medicines. Tell your health care team if you experience any of them.
• Keep a list of everything you take, including vitamins and herbal products. Share the list with your doctor.
• Create a medicine checklist. Mark down each dose as you take it.

Remember – don’t stop or change the way you take the medicines prescribed to you. Talk with your doctor first.
Steer clear of heart and kidney complications

Living well with diabetes is within reach, especially when you have your primary care physician available to help. Your primary care physician can help you prevent serious complications from diabetes. In the following pages, you’ll read more about how diabetes affects your body, and what you and your health care team can do to take control. Let’s begin with two important organs: your heart and kidneys.

**Heart smarts**
People with diabetes are more likely to have high blood pressure, so it’s important to keep an eye on yours.

Maintaining a healthy blood pressure can help prevent diabetes complications, such as heart, eye and kidney problems.
Aim to keep your blood pressure at or below 120/80. Your primary care physician can tell you if you should aim for a different target. If your blood pressure is too high, your primary care physician can help you set goals to lower it, such as reducing how much salt you eat. Have your blood pressure checked at every doctor visit.

You also need your cholesterol tested at least once a year. This simple test checks for three types of fat in your blood:
- LDL, or “bad,” cholesterol.
- Triglycerides. This harmful fat should stay below 150 mg/dl.
- HDL, or “good,” cholesterol. Higher is better with HDL. Above 60 mg/dl is the goal.

**Kidney care**

Your kidneys remove waste and extra fluid from your body, helping to keep your blood clean and chemically balanced.

Diabetes can damage the kidneys and eventually lead to kidney failure – a condition that can be fatal.

The good news is that tests can help detect kidney problems early, before they become severe:
- One test checks for a protein in the urine called microalbumin. Its presence is an early sign of kidney disease.
- Another test checks for a waste product in the blood called creatinine. Creatinine builds up in the blood when the kidneys aren’t working properly.

These screenings are an important part of your diabetes care. Ask your doctor if it’s time to check your kidney health.

Turn the page to see how to avoid problems with your feet.
Step up to good foot care

Diabetes can result in nerve damage, and nerve damage can lead to a loss of feeling in the feet. It can also cause sores to develop. Poor blood flow due to diabetes also means these sores may heal slowly. If foot problems aren’t treated right away, they can lead to infection – and even amputation.

Your doctor will check your feet at each visit. You can also prevent problems at home by following these tips:

• **Inspect your feet every day.** Look for sores, cuts and redness.
• **Wash your feet daily in warm water.** Dry them thoroughly afterwards, getting between the toes. If the skin is dry, apply lotion to the tops and bottom of feet only. Don’t put lotion between your toes.
• **After you bathe, trim your nails without cutting them too short.** If you have vision problems, don’t attempt to trim your own nails. Gently rub corns or calluses with a pumice stone. Don’t attempt to cut them with a sharp blade.
• **Check inside your shoes for pebbles or other objects before wearing them.** Never go barefoot.

Caring for cuts and scrapes

Diabetes affects every part of your body, including your skin. If you get a minor cut or scrape, wash it with soap and water. After cleaning, cover it with sterile gauze. If the affected area becomes painful and hot, swollen or red, see your primary care physician right away.
Keep your smile healthy

Diabetes puts you at higher risk for problems with your teeth and gums. High blood sugar allows bacteria to flourish in your body, including in your mouth. These germs can lead to gum disease and cause infections in your gums and in the bone that holds your teeth in place.

Along with keeping your blood sugar levels in check, it’s very important to have your teeth cleaned and your mouth inspected on a regular basis. Schedule a visit with your dentist at least twice a year.

In between visits, keep your teeth and gums healthy at home.

If you need to brush up on the best way to care for your mouth, take a look at these tips:

- **Brush your teeth twice a day.** Use a toothpaste that contains fluoride.
- **Replace your toothbrush every three to four months.** Get a new one sooner if the bristles are frayed.
- **Floss every day.** Flossing removes food particles and plaque that your toothbrush can’t reach.
Protect your eyes

Every year, you need an eye exam to check for problems caused by diabetes. This exam is very important. Talk with your doctor about it. He or she can give you a referral to an eye care specialist.

High blood sugar levels can harm your eyes. Regular checkups help keep eye problems under control.

Common eye diseases
Diabetes increases your risk for diabetic retinopathy, a disease that affects the retina, located at the back of the eye. To see well, you need a healthy retina. This disease often has no symptoms at first. You may learn you have it when you have an eye exam. You also have an extra risk for glaucoma. Like diabetic retinopathy, you may not know you have glaucoma until your sight has been damaged. It starts by limiting your peripheral vision. Without treatment, these eye problems can lead to blindness.

Cataracts
Cataracts are a common problem, but if you have diabetes, they’re even more
likely. A cataract is a clouding of the lens of the eye. Symptoms such as blurry vision and glare from oncoming headlights at night are common. If cataracts are bad enough to affect your sight, they can be treated with surgery. People with diabetes have a higher risk of developing cataracts at a younger age.

**Watch for warning signs**
Talk with your doctor if you have problems with your vision. Possible signs of eye problems caused by diabetes include:
- Pain or pressure in one or both eyes
- Blurry, cloudy or double vision
- Trouble seeing out of the corners of your eyes
- Redness in your eyes that won’t go away
- Straight lines don’t look straight
- Flashing lights or floating spots in your field of vision

**Schedule eye exams**
People with diabetes need a dilated eye exam every year. During this exam, special eyedrops will temporarily enlarge your pupils. This makes it easier to see inside your eyes and find signs of damage.
Be ready with a sick-day plan

No one looks forward to a cold or other routine illness. But when you have diabetes, it can be more than just a bother.

When you’re ill, your body reacts by fighting off the illness. Your body’s efforts can raise your blood glucose and interfere with the effects of insulin. Sometimes, this can cause a problem called ketoacidosis. This is a serious problem and can even be fatal.

Plan ahead
The best time to cope with minor health troubles is when you’re feeling fine. Work with your diabetes care team to develop a sick-day plan. Decide together if any changes in your medicines and dosages are needed, and ask how often to check the following when you’re ill:
• Weight
• Blood glucose level
• Temperature
• Ketones

Your doctor can tell you which readings mean your diabetes is out of control or that you’re at risk for ketoacidosis.

List the phone numbers for your doctor and other members of your diabetes care team.

 Signs of trouble
You don’t have to call each time you have a sniffle or sore throat. Pick up the phone if you have:
• Lost 5 pounds or more
• A temperature of 101 degrees or higher
• Vomiting or diarrhea lasting longer than six hours
• Moderate to large amounts of ketones in your urine
• Blood glucose levels lower than 60 mg/dl or above 240 mg/dl
• Trouble breathing
Protect yourself from flu and pneumonia

The flu is a serious virus – especially when you have diabetes. Diabetes puts you at higher risk for complications related to the flu, including pneumonia.

Flu facts

The flu is highly contagious. This means it’s easy to catch from people who have it.

Symptoms of the flu include:
• Fever
• Chills
• Headache
• Runny or stuffy nose
• Coughing
• Sore throat
• Muscle aches

If you have the flu, drink lots of fluids. Get plenty of rest, too. To help protect yourself from getting sick in the first place, get a flu shot every fall.

Know pneumonia

Pneumonia is an inflammation of the lungs. It can result from the flu or a common cold.

Symptoms of pneumonia include:
• Cough with yellow or green mucus
• Sharp or stabbing chest pain
• Severe chills
• High fever
• Shortness of breath
• Headache

Call your primary care physician right away if you think you have this serious illness. To protect yourself, ask him or her about the pneumonia vaccine.
Support can help you stay tobacco-free

Tobacco users with diabetes have twice the risk for heart disease as non-users, according to the National Institutes of Health. That’s why quitting tobacco is one of the best lifestyle changes a person with diabetes can make. It’s also one of the hardest. If you’re trying to quit, it’s good to know that help is as close as your telephone.

Tobacco Cessation Coaching, powered by WebMD®, is available to all Blue Care Network and BCN AdvantageSM members. It includes five calls from a health coach over a 12-week period. You can schedule your calls when they’re most convenient for you. Once you’ve completed the program, you have unlimited access to call your health coach if you need additional support.

Your health coach will contact you about seven months after the program ends to check on your progress.

If you’re ready to set a quit date within 30 days, enroll in Tobacco Cessation Coaching by calling 1-855-326-5102.
Your emotional health

Everyone goes through periods of feeling down. An occasional bout of sadness is normal.

But depression is more than a bout of sadness. It’s a serious condition that requires treatment. Diabetes puts you at higher risk for depression. And feeling depressed can make it harder to test your blood sugar, follow your diet and take your medicine correctly.

If you experience one or more of these symptoms for more than two weeks, you may have depression:
- Sadness, especially in the morning
- Quick weight gain or loss
- Problems concentrating
- Loss of interest in pleasurable activities
- Feeling guilty or worthless
- Low energy
- Changes in sleep patterns
- Thoughts of suicide or death

If you’re having thoughts of suicide or death, seek help now. Go to the nearest emergency room or call 911.

If you think you’re depressed, talk with your doctor. You can also call the behavioral or mental health number on the back of your Blue Care Network ID card.

Intimacy issues

Diabetes can affect many aspects of daily living, including your intimate relationships. Your concerns may be due to medicines you take or caused by anxiety or depression related to your diabetes. If you have questions about intimacy, talk with your primary care physician about this common issue.
Support
Your rights and responsibilities

As a member in our program, you have rights and responsibilities. A right is what you can expect from us. A responsibility is what we can expect from you.

You have the right to:
- Quit the program at any time by calling Chronic Condition Management.
- Request the name of the program manager so you can get more information, ask questions or ask for a change in the way the program works.
- Talk with your primary care physician or with us about the care you should receive.
- Get information you can understand.
- Get information about our programs and services, staff qualifications and contracts.
- Work with us to help make your health care decisions.
- Use our grievance program to tell us about any problems or complaints you have.
- Be treated with respect.
- Ask us to act as your patient advocate.
- Know that we respect your health care privacy and we follow state and federal privacy rules.

You have the responsibility to:
- Tell us if you don’t want to be in our program.
- Follow your primary care physician’s advice about your care.
- Talk with your primary care physician honestly about your health so you can be cared for in the right way.

We don’t advertise, market or promote specific products or services to members or doctors when discussing your health problems with you or your doctor or in any of our program materials. We have no financial ownership arrangements with other entities engaged in advertising, marketing or providing goods and services.

More on your right to privacy
Privacy is important to us. We want you to know that we follow special rules to be sure your information is kept private. You may call Customer Service to get a copy of the privacy notice or view it at bcbsm.com.
Make your wishes known

An advance directive is a written statement of your wishes for medical care. It explains what treatments you want, or don’t want, when you’re unable to speak for yourself.

The state of Michigan only recognizes an advance directive called a durable power of attorney for health care. To create one, you’ll need to choose a patient advocate. This person carries out your wishes and makes decisions for you when you can’t. It’s important to pick a person you know and trust to be your advocate. If you don’t choose someone, your doctor, a court, a legal guardian or a family member will be your advocate.

A living will is another type of advance directive. It’s not enforceable under Michigan law.

More information and the forms you need to write an advance directive are available by calling Customer Service or going to bcbsm.com.

Every year, ask your primary care physician about these wellness checks. You may need some of them more than once a year.

- Blood pressure
- HbA1C
- Total cholesterol (HDL, LDL, triglycerides)
- Urine microalbumin
- Diabetes eye exam
- Dental exam
- Foot exam
- Flu shot

Check with your primary care physician to see if you need a pneumonia shot.

Get Flu Shot!
Connecting you to care

24-hour Nurse Advice Line
1-855-624-5214

Chronic Condition
Management
1-800-392-4247
TTY users call 711
8:30 a.m. to 5 p.m.
Monday through Friday
bcbsm.com/bcnccmreferral

Case Management
Call 1-800-392-4247
to find out more about
individualized support and
education from a nurse case
manager. TTY users call 711.

Tobacco Cessation Coaching,
powered by WebMD®
1-855-326-5102

Digital Health
AssistantSM Programs
After you complete your
health assessment, you’ll
receive recommendations
for WebMD’s Digital Health
Assistant online coaching
programs, which include:
Conquer Stress, Lose Weight,
Eat Better, Quit Tobacco,
Enjoy Exercise, Feel Happier.

You’ll set small goals that
you commit to for one week.
Choose activities, create plans
and track your progress.

Get started by logging in to
your account at bcbsm.com,
clicking on Health & Wellness,
then clicking the Healthy
Living tab.

The health information presented in this booklet is intended for
information purposes only and is not a substitute for consultation
from a medical professional. This information is not intended to
diagnose or treat a health condition. Always seek advice from
your primary care physician or health care provider.
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BCN Advantage℠ is an HMO-POS and HMO plan with a Medicare contract. Enrollment in BCN Advantage depends on contract renewal.

Chronic Condition Management programs
1-800-392-4247 | TTY users call 711
8:30 a.m. to 5 p.m. Monday through Friday
To reach us online, fill out our nurse callback form at bcbsm.com/bcnccmreferral.

Customer Service
Call the number on the back of your Blue Care Network ID card.

bcbsm.com

Detach this card and complete the contact information. Fold it in half and keep it in your wallet in case of emergency.